

QUALITY ACCOUNT

2018–19





OUR VISION



Excellent Care. Every Person. Every Time.

OUR VALUES



CARING
We care for our
community



PASSIONATE
We are passionate
about doing our best



TRUSTWORTHY
We are open, honest
and respectful



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OUR CARE AT A GLANCE



102,081

Service events provided
by our Specialist Clinics



57,253

People who came to our
Emergency Department
for treatment



51,437

People who were
admitted
to our hospital



15,460

Operations performed



14,875

Ambulance arrivals
handled by our
Emergency Department



1,585

Admissions of children
aged 16 and under to
our Children's Ward



1,544

Babies delivered



4,025

Staff employed



13,711

Individuals treated by
Dental Services



36,923

Number of Dental
Services provided



2,080

Community Allied
Health Services Active
Clients



WELCOME TO THIS YEAR'S BENDIGO HEALTH QUALITY ACCOUNT

THE 2018-19 QUALITY ACCOUNT SHOWCASES SOME OF BENDIGO HEALTH'S PROJECTS AND PROGRAMS WHICH SUPPORT AND IMPROVE THE QUALITY AND SAFETY OF CARE PROVIDED TO OUR COMMUNITY.

Our vision of Excellent Care, Every Person, Every Time is reflected in the care we give, and our commitment to doing better. We trust that this commitment is clear in this year's Quality Account.

In April 2019, the Bendigo Health Board launched a new plan to measure and promote excellence within Bendigo Health, known as the Excellent Care Framework. Six key themes of care – Safe, Personal, Integrated, Right, Improving, Together – emerged from discussions with staff. This became the SPIRIT in which we approach our work.

To celebrate the launch of our Excellent Care Framework, we showcased a display of over 60 posters which highlighted quality improvements and research projects undertaken over the past 12 months. Some of these projects have also been presented at state, national and international conferences.

This showcase also illustrated our staff's enthusiasm to take on and live the Bendigo Health SPIRIT, an approach that we know from your feedback is making your experience of our care a positive one.

The implementation of a sepsis management project, 'Think Sepsis. Act Fast' has had a significant positive impact on our patients diagnosed with this potentially life-threatening infection.

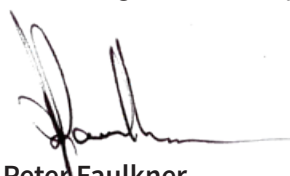
Another highlight of the year was the work done by our Birth Suite, Midwifery and Medical staff in helping to improve birthing outcomes for women in our area. The impact of this project will have long-lasting effects for women's health in the region and is a significant achievement. Details of these improvements and the positive impact they are having are outlined further in this report.

In May, it was a pleasure to have Minister for Disability, Ageing and Carers, Mr Luke Donnellan, officially open the new building that links Bendigo Health's Golden Oaks Nursing Home and Carshalton House. The development includes lifestyle spaces, bedroom upgrades, a kitchen to prepare meals onsite and a café.

The changes will improve the experience of residents at both facilities and are part of a staged re-development of the Golden Oaks precinct.

Perhaps the standout news for the year was the recent announcement of a financial commitment for a new state of the art rehabilitation centre to be built in the old hospital building. This means our outpatient facilities will have modern fit for purpose infrastructure to match our new hospital.

Our improving facilities combined with our staff's commitment to excellence allows us to provide the best care for our communities, because every person deserves to have a great care story.



Peter Faulkner
CEO



ABOUT US

BENDIGO HEALTH CARE GROUP IS REGIONAL VICTORIA'S SECOND LARGEST HOSPITAL WITH 57 000 PEOPLE ATTENDING THE EMERGENCY DEPARTMENT AND 50 000 INPATIENT STAYS OVER THE PAST TWELVE MONTHS.

In addition to operating a large acute hospital we offer subacute services including inpatient and outpatient rehabilitation, a regional mental health service, residential care, specialist clinics, cancer services, hospice and palliative care and dialysis. Community outreach services including hospital in the home, community palliative care, Residential in Reach, allied health, community support services and the Transition Care Program.

The three main campuses of Bendigo Health are based in Bendigo, with many services extending to regional settings including areas such as Mildura, Echuca, Swan Hill, Kyneton and Castlemaine.

Over the past twelve months demand for our service has grown significantly. Never before have our theatre staff performed more operations (15,460) our Emergency Department had more presentations (57,253), our midwives delivered as many babies (1,544) or our Medical Imaging department completed the number of imaging tests (103,379) than they did in 2018-19.

QUALITY ACCOUNT FEEDBACK

The Quality Account is designed to be an informative, readable document for our community members. We aim to include important quality and safety information regarding our services, together with stories that highlight the great work that is undertaken by our staff, volunteers and consumers. Each year we seek feedback on the content and design of the Quality Account. Last year our readers told us that they enjoyed the information and articles and most readers found the document easy and interesting to read with only a few finding it too long. People told us they enjoyed the new format with a greater number of pictures and stories. A suggestion that some further explanation of some of the graphs was made and this year we have tried to improve this. We hope that you enjoy this year's Quality Account.

We are keen to hear feedback about this year's quality account. A short survey can be found at this link:

www.surveymonkey.com/r/M96LDRN

Written feedback can be emailed to:

quality@bendigohealth.org.au

Please note that wherever this report refers to Aboriginal people, this is to be taken to include Torres Strait Islanders and also to mean First Peoples.



PATIENT EXPERIENCE

AT BENDIGO HEALTH, WE STRIVE TO PROVIDE EXCELLENT CARE, FOR EVERY PERSON, EVERY TIME.

As a large regional health service, there are multiple ways we work together to achieve this. One of the most important ways is through providing a positive patient experience for all people who access our services.

Patients have a unique perspective on the day-to-day running of a health service. Our patients come from a wide variety of backgrounds and are often the eyes and ears of our service. We can only understand and learn from these perspectives by giving our patients a voice, a way to feedback, a seat at the table and including them in the planning, delivery and evaluation of our services. Giving our patients a voice is critical to their patient experience.

Due to the importance of patient experience in shaping our current and future health service, we must measure it and learn from it. The state-wide Victorian Healthcare Experience Survey (VHES) is conducted by the Department of Health and Human Services and provides us with helpful feedback regarding patients' experiences during their stay at Bendigo Health. The survey also compares our performance to other hospitals across the state. Each year we set targets for achieving high scores in key areas of the VHES survey. The table below shows that the communication and care strategies we use at Bendigo Health are having a consistent positive impact on how our patients experience our care.

This year, we have also commenced a shortened inpatient survey which aligns with the VHES. This is allowing us to better understand the experience of our patients in different parts of our health service, and therefore have a more focussed and timely view of where we can improve.

Patient Experience	VHES Patient Experience Question	Score March 2019	Target
% of positive patient experience responses	Overall, how would you rate the care you received while in hospital?	95%	95%
	How often did the doctors, nurses and other healthcare professionals caring for you explain things in a way you could understand?	93%	
% of very positive responses to questions on discharge care	Discharge Process Transition Index	75%	75%
	Overall how would you rate the discharge process?	83%	
	Before you left hospital, did the doctors and nurses give you sufficient information about managing your health and care at home?	76%	
Patient's perception of cleanliness	In your opinion, how clean was the hospital room or ward that you were in?	90%	70%
	How clean were the toilets and bathrooms that you used in hospital?	82%	
	Were hand-wash gels available for patients and visitors to use?	95%	

PATIENT EXPERIENCE

INCREASING COLLABORATION BETWEEN PATIENTS, FAMILIES AND CLINICIANS

Patient Communication Boards and Bedside Handover continue to be engagements tools that allow patients to actively participate in their healthcare.

Bedside handover is communication with patients and families that occurs three times a day and involves a review and discussion of planned care including patient goals and any concerns they may have. This occurs at change of nursing shift. At this time the patient communication boards are reviewed and updated. The boards often contain information for family members or questions that the family or patient would like answered. This assists patients to better participate in their care and decision making by allowing questions to be recorded in advance.

The boards also have a section to write patient allergies (food) and important safety issues staff need to be aware of, for example if the patient is at risk of having a fall.

PATIENT EXPERIENCE DATA FROM OUR COMMUNITY PROGRAMS IS VERY POSITIVE WITH 96% OF CONSUMERS STATING THAT THEIR EXPERIENCE WAS GOOD OR VERY GOOD.



PATIENT EXPERIENCE – COMMUNITY PROGRAMS

Patient experience data from our community programs is very positive with 96% of consumers stating that their experience was good or very good. This is a fantastic reflection of the great work that staff in our community sector do in providing excellent care. The survey highlighted some minor areas for improvement regarding keeping patients informed with one area of focus being that only 50% of consumers knew how to make a complaint if they needed to. We also need to do better at informing consumers about costs of treatment. In order to ensure everyone is aware of the complaint processes and treatment costs, we have increased signage in waiting areas and team meetings will be used to remind staff of the need to inform consumers of the process and fees.



Always felt listened to and understood, VHES March 2019

78%



CYNTHIA

Cynthia is an independent 86 year old lady with leukemia and her treatment involves blood transfusions every 3 weeks.

With an initial diagnosis of myelodysplasia, a further bone marrow biopsy confirmed leukemia a week before Cynthia was to leave on a 3 month holiday overseas. She would need transfusions during that time and was determined to continue with her travel arrangements.

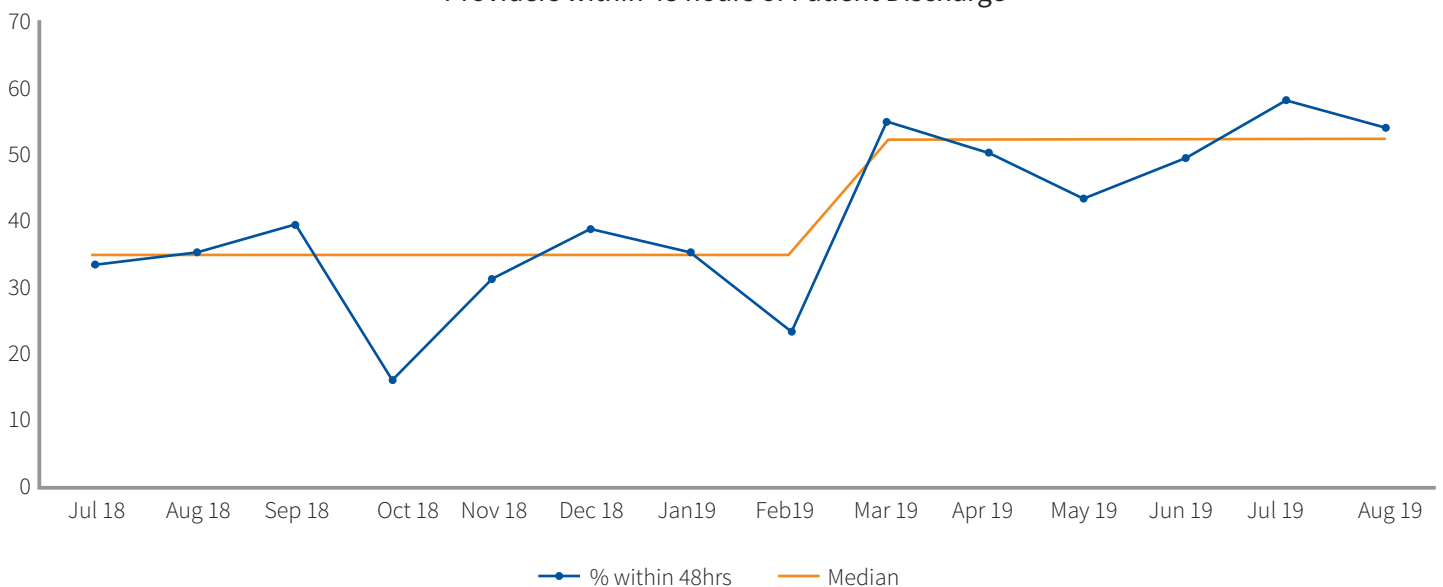
Her preferences and decisions were respected and arrangements made to support Cynthia while she was away. Her travelling companion was also provided with information and resources to assist and support her while they travelled and during periods where she would need to access hospitals overseas for her transfusions.

LEAVING HOSPITAL

Providing information to General Practitioners (GPs) and other health providers is an important part of ensuring that patients continue to receive the care they require once they have left the health service. Bendigo Health measures the timeliness of the discharge summary documents to make sure they are reaching GPs within 48 hours. Senior doctors receive regular reports that allow them to monitor this.

In March 2019 Bendigo Health started uploading discharge summaries to My Health Record. This has provided a significant improvement in the timely sharing of the discharge summary information with patients and other health providers.

Percentage of Discharge Summaries Completed and Disseminated to Patients and Other Health Providers within 48 hours of Patient Discharge



PATIENT EXPERIENCE

PAEDIATRIC HUB OPENS IN EMERGENCY DEPARTMENT

Each year more than 57 000 people present to our emergency department (ED) and one in five are under 16. Emergency departments can be strange and busy places which may be distressing for children. To improve our service a dedicated Paediatric Hub has been established in our ED that provides a comfortable, quiet setting for children and their family. This child friendly space, which has three beds and a procedure room, is staffed by dedicated paediatric nurses.

One hundred staff from the ED, Intensive Care Unit and Children's Ward received additional training in preparation for the opening of the Paediatric Hub. The training provided specific education on health issues that children commonly present with. This included burns, treating children with cancer, paediatric trauma and paediatric specific procedures.

The hub is an adapted version of the model of that used by the Royal Children's Hospital in Melbourne.



MENTAL HEALTH PATIENT EXPERIENCE.

The inpatient Mental Health teams have developed a ward orientation information flyer for patients. This provides the patients with key information about what they can expect with their care as well as information such as visiting hours, food and drink options and services that will assist in their recovery. This orientation flyer is designed to assist patients who come onto a mental health ward to feel safer and have a better understanding of what to expect.

The Child and Adolescent Mental Health Service (CAMHS) has recently developed a diversity portfolio, which prompted consideration of cultural safety for Aboriginal clients and families accessing the service. Cultural identity and participation is important for Aboriginal children's connection to country and culture, which supports strong mental health and wellbeing. Mental health services can often be difficult places for Aboriginal families to engage with comfortably, given our history of colonisation which has resulted in intergenerational trauma and distrust of mainstream health services. The project was developed in order to support a culturally safe physical environment, as well as enable better incorporation of cultural connection and strengths into therapeutic activities at CAMHS.

NO FILTERS – CONSUMERS IN EDUCATION

Following an education session on consumer engagement, opportunities for consumers to participate in the delivery of clinical education were identified. As a result, a program was developed where consumers, carers and family members could participate and share their care stories with clinical staff at study days. The aim of the program was to ensure staff had the opportunity to hear and consider consumer feelings, worries and concerns and how care and treatment affected them. The program provided an opportunity for authentic conversations with consumers, where staff were able to get a deeper level of insight into the impact of their clinical condition on their overall wellbeing.

A range of tools and resources have been developed to create a clear process for participation in the education sessions and to make sure the space in which consumers were sharing their stories was welcoming, safe and comfortable for all involved.

Should consumers be unable to attend, a process was developed to include a library of audio and video consumer stories for staff to listen to.

Many study days now have an unfiltered consumer story with opportunities for questions, feedback and interaction between the consumer, staff and the educator. The program continues to grow and improve, and feedback has been positive and supportive of the process, with 100% of consumers involved continuing to participate.

ABORIGINAL HEALTH

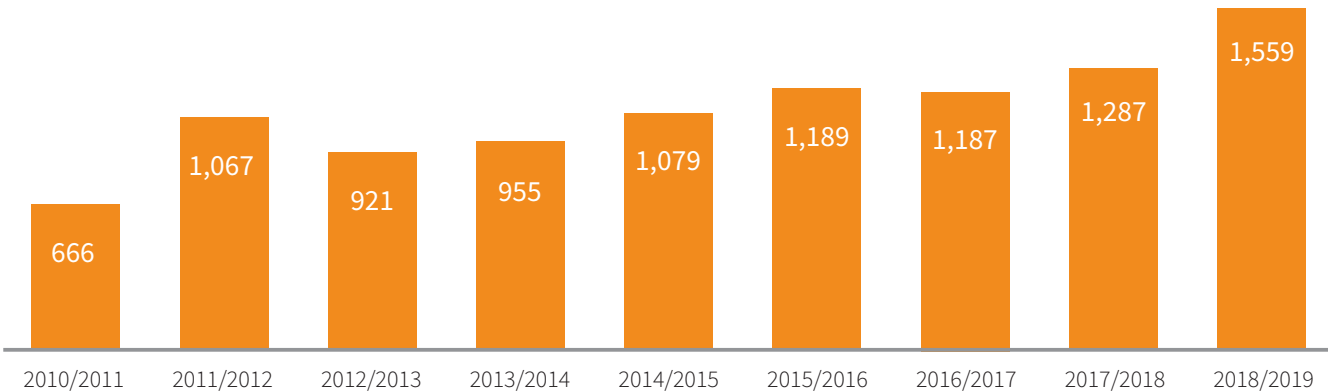
IN DECEMBER 2018 A SECOND ABORIGINAL HOSPITAL LIAISON OFFICER WAS EMPLOYED AT BENDIGO HEALTH.

This has enabled us to better address the needs of the Aboriginal and Torres Strait Islander patients. For the first time in our history we have both male and female officers, to support patients with Men’s, and Women’s Business.

This year two Aboriginal trainees started at Bendigo Health as part of the state government’s Aboriginal Mental Health Traineeship program. The Minister for Mental Health Martin Foley, met with the new staff at the commencement of the program signifying the importance of their roles.

Our services continue to be accessed by more Aboriginal and people each year. In 2018-2019 1559 persons identified as Aboriginal at the Bendigo Hospital. This comprised of 2.99% of admissions to Bendigo Health.

Total number of patients annually identifying as Aboriginal or Torres Strait Islander



ABORIGINAL HEALTH

PARTNERSHIP CELEBRATION

In June 2019 Bendigo Health hosted a celebration acknowledging the partnership between the health service and Dja Dja Wurrung. The afternoon included the story of the scar tree and Aboriginal garden at Bendigo Health, a celebration of the amazing art in the Aboriginal Space and the first lighting of the fire pit in the hospital courtyard for a smoking ceremony.



STATEMENT OF INTENT

A Reconciliation Action Plan working group was established in 2019. This is an important next step in Bendigo Health's journey of Reconciliation. As part of this work the Bendigo Health Board of Management signed the Statement of Intent. This document formalises Bendigo Health's commitment to our Reconciliation Action Plan and our vision of walking alongside Aboriginal people in a respectful partnership.



INTERPRETER USE

OVER 25 PER CENT OF PEOPLE RESIDING IN GREATER BENDIGO HAVE A PARENT WHO WAS BORN IN A COUNTRY OTHER THAN AUSTRALIA.

This has increased by 5 per cent since 2011 and we are continuing to see this trend of people from culturally diverse backgrounds choosing to make Greater Bendigo home.

Here at Bendigo Health we are working hard to make sure our services are welcoming, accessible and appropriate for all members of the community. The use of interpreters continues to increase.

Educating and informing our staff about cultural diversity and unique health issues has been a focus over the past twelve months. Training sessions held include cultural competency, unconscious bias, understanding Islam and the Refugee journey and Karen Culture. Bendigo Health has also strengthened its relationship with Bendigo Community Health Service to ensure we support all members of our community.



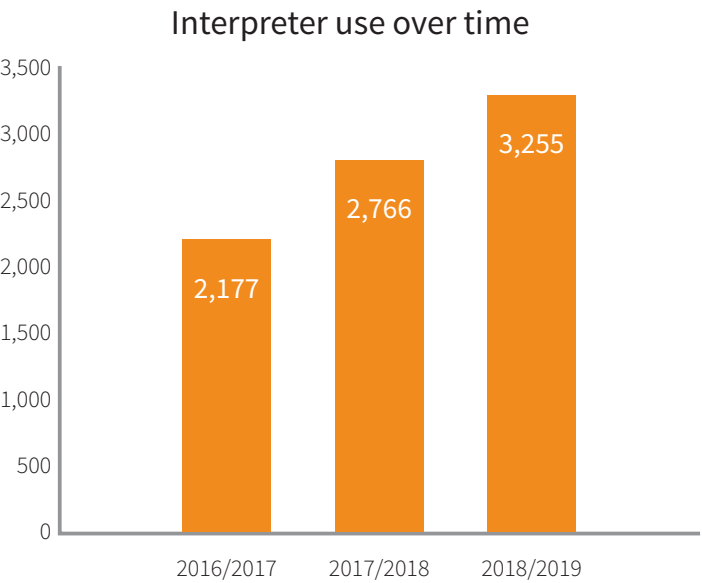
2018-2019 Telephone interpreting

1,395



2018-2019 Face to face

1,860



Languages interpreted

Karen

2,312

Dari

283

Mandarin

159

Auslan

116

Dinka

54

Thai

43

Turkish

42



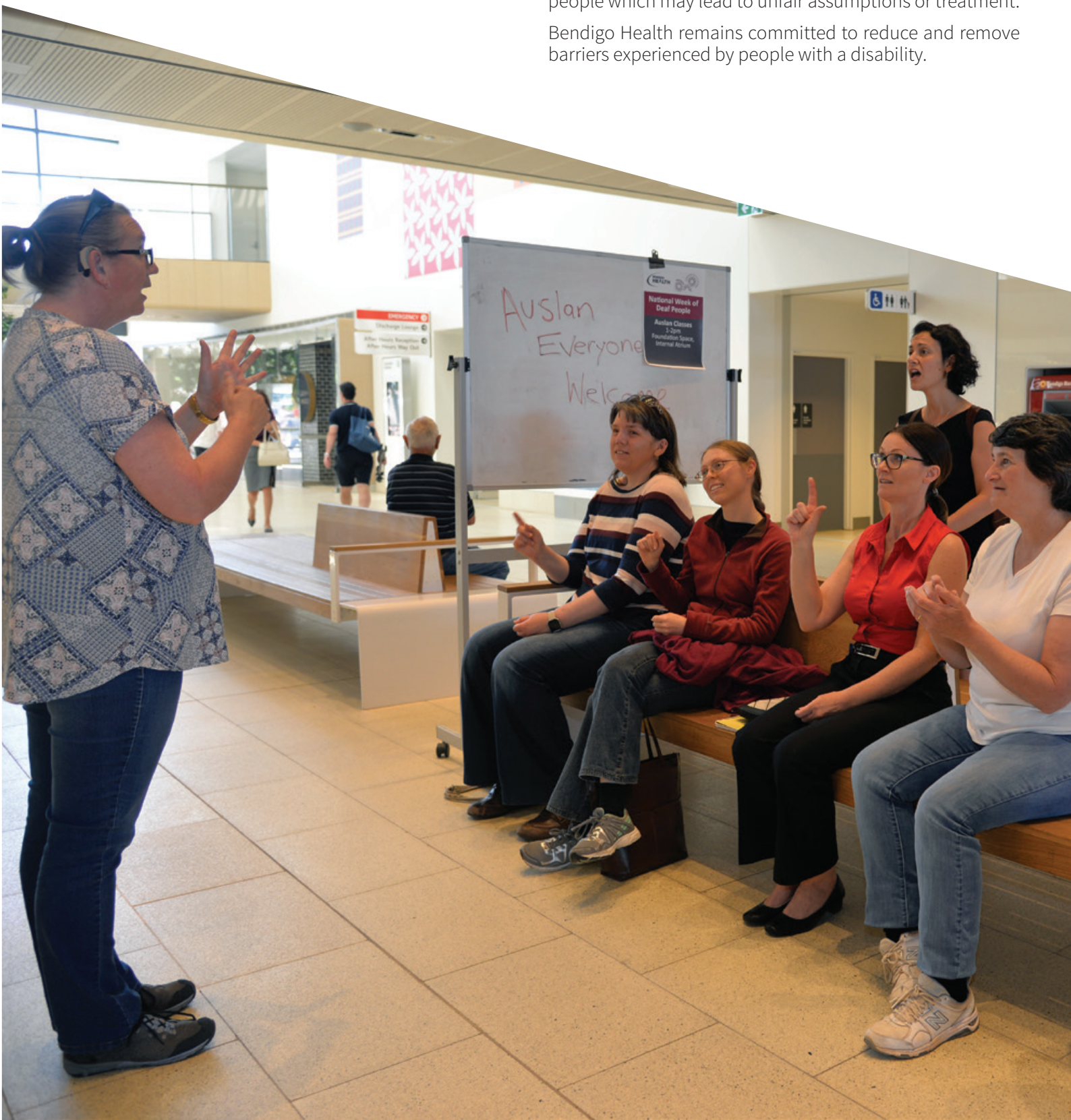
ACCESS AND INCLUSION

IN CONSULTATION WITH CONSUMERS AND CLINICIANS BENDIGO HEALTH HAS REVIEWED AND IMPROVED ITS DISABILITY ACTION PLAN.

The focus of the plan is to promote environments of inclusivity through the usage of appropriate signage, language, social and emotional supports and patient centred care.

Appropriate training is highlighted as an important component of sharing with staff the role they play in creating inclusive environments for all people. The overarching training being provided is Unconscious Bias. Unconscious bias is often defined as prejudice or unsupported judgments in favour of or against one thing, person, or group as compared to another, in a way that is usually considered unfair. Unconscious Bias training teaches staff how to recognise and overcome their own biases. These biases may come in the form of their personal beliefs or judging of people which may lead to unfair assumptions or treatment.

Bendigo Health remains committed to reduce and remove barriers experienced by people with a disability.



COMMUNITY AWARENESS

BENDIGO HEALTH HAS USED THE LARGE ATRIUM IN THE HOSPITAL AS A VENUE FOR INCREASING OUR COMMUNITY'S KNOWLEDGE OF MANY HEALTH CONDITIONS AND ASSOCIATED SYMPTOMS.

This large publically accessible space provides a perfect venue for health information displays and community awareness campaigns. Some of the exhibits that have been held over the past year include:

- Donate Life Week
- Dental Health Week
- Stroke Week
- World Physiotherapy Day
- Mental Health Week
- PJ Paralysis
- Pastoral Care Week
- World Diabetes Day
- Chronic Obstructive Pulmonary Disease Day
- World Aids Day
- April Falls Day
- Advance Care Planning
- Elder Abuse Awareness Day



PROMOTING & SUPPORTING HEALTHY LIFESTYLE CHOICES

A SIGNIFICANT PROPORTION (38%) OF THE BURDEN OF DISEASE IS ASSOCIATED WITH MODIFIABLE LIFESTYLE RISK FACTORS.

The top two risk factors are tobacco use and dietary choices. Bendigo Health has developed health promotion programs to address these risk factors. These programs align with both the Victorian State and local Municipal Health and Wellbeing Plans and include programs such as:

- Genesis Healthy Lifestyle Program for pregnant women
- Healthy 4 U Program in Specialist Outpatients Clinics
- Smoking Support Program for inpatients
- Healthy Choices Policy Guidelines alignment across our retail food outlets (Zouki), vending machines and drinks services.

Health Promotion is integrated into routine hospital care and treatment. Each hospital visit and inpatient admission is seen as an opportunity to undertake and promote health promoting activities alongside standard care. The goal is improving the overall health of our community. Individuals attending hospital are exposed to health promotion information aimed at supporting them to change unhealthy behaviours.

Our programs provide participants with three sessions of telephone coaching, aimed at addressing behaviour change in diet, physical activity or smoking. Participants are encouraged to explore their preferred avenue to behaviour change, and the service promotes linkages to community based health promotion providers to increase service coordination.

WHAT WE'VE LEARNT

- Engaging doctors and clinicians in preventive health increases the number of patients accessing health promotion and behaviour change interventions.
- Telephone coaching can contribute to positive change in physical activity and clinically important health related outcomes, and is effective for the prevention and management of chronic disease.
- Promoting existing community programs decreases health service duplication.

SMOKING SUPPORT

- Despite the challenges, smoking interventions in hospital settings are worthwhile.
- A flexible approach is required to identify and support patients across their journey of care.
- Discharge communication to GPs and referrals to community programs can increase the probability of people quitting.

HEALTHY CHOICES POLICY GUIDELINES

The Health Promotion Team provides on the ground support for Zouki, (our retail catering partners) in their 5 retail food outlets within Bendigo Health, to enable them to move towards achieving Healthy Choices Award Status. In 2019 one of their five outlets achieved this status..

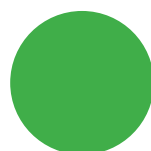
Bendigo Health has also worked with our food service providers to remove drinks with added sugar from the retail outlets, patients meals and vending machines.

A healthy choices staff catering policy has been introduced.

Building relationships with our retail partners is vital and by working together we can create positive improvements for our community through easy access to nourishing food and the creation of environments that support wellbeing.

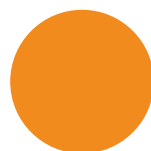
FOOD AND DRINK

Traffic light system to help pick the best choice:



Green – best choice

This category is the best choice, as it is high in nutrients, low in saturated fat, energy, added sugar and salt.



Amber– choose carefully

This category should be selected in moderation, as it can contribute to excess energy intake and contains saturated fat, added sugars, artificial sweeteners and salt.



Red – limit

This category should be limited, as it lacks important nutrients, is very high in energy, saturated fat, added sugar and salt and can add to overweight, obesity and chronic disease.

EXCELLENT CARE FRAMEWORK

IN 2018 THE BENDIGO HEALTH BEGAN WORK TO DEFINE “QUALITY CARE”. THIS WORK WAS UNDERTAKEN IN CONSULTATION WITH OUR CONSUMERS, STAFF, EXECUTIVE AND BOARD MEMBERS. THE RESULT OF THIS WORK WAS THE DEVELOPMENT OF THE BENDIGO HEALTH EXCELLENT CARE FRAMEWORK.

The framework outlines six key elements that are required for Excellent Care to be delivered. These essential elements are:

Safe – we provide a physically and emotionally safe service, free from avoidable harm

Personal – the care and services we provide are focussed on the consumers’ needs and preference

Integrated – we provide a smooth, co-ordinated pathway throughout the journey of care and treatment

Right – we provide the right care in the right way at the right time

Improving – we strive to continually improve our care and services

Together – we provide a positive work environment for all staff and volunteers to feel valued, safe and supported to work together

This is our SPIRIT, that is, how we behave and act at Bendigo Health to ensure “Excellent Care. Every Person. Every time.” is lived in all of our interactions and care moments.

Every person deserves to receive the very best care. We will put the patient at the centre of everything we do. That means listening, learning and partnering: accepting that ‘at standard’ is not enough. Every person deserves to have a great care story.

As part of the framework a Quality Improvement Showcase was held within the Atrium of the hospital. This showcase featured over 60 projects that highlighted the quality improvements and research that had been undertaken at Bendigo Health over the past 12 months. The posters were a great opportunity for staff to share their work with other staff members and the community. A road show of posters was also taken to other sites across Bendigo Health.



FEEDBACK AT BENDIGO HEALTH

BENDIGO HEALTH WELCOMES AND ENCOURAGES FEEDBACK FROM OUR PATIENTS, CONSUMERS AND COMMUNITY MEMBERS.

Feedback provides us with the opportunity to review our processes, systems and care to ensure that we are always working towards our vision of Excellent Care, Every Person, Every Time.

We receive feedback a number of ways, including in person, in writing, via the telephone and through the Bendigo Health Facebook page and website. Like most health services, we have seen an increase in feedback over the last few years as these new and easy ways of feeding back have become the norm. Alongside this, the community has an increasing expectation of high quality care. The addition of a feedback form on our internet page provides community members with a simple and accessible way of contacting us. The form allows people to provide anonymous feedback or to provide their details so we can follow up any concerns.

THANK YOU FOR
THE KINDNESS AND
PATIENCE DURING A
VERY DIFFICULT TIME

YOU HAVE GREAT
STAFF WORKING IN
THIS HOSPITAL

WITHOUT FAIL THE
NURSES, DOCTORS, ALLIED
HEALTH STAFF AND OTHER
PERSONNEL HAVE TREATED
US WITH WONDERFUL CARE
AND REAL KINDNESS

When we receive feedback, we listen to what the person has to say. Feedback can be positive or can tell us where we can improve. When we have complaints, we prefer to involve the complainant in the resolution process. This not only ensures their perspective and opinion are heard and understood, it also provides us with the opportunity to learn and identify opportunities for improvement and change.

Bendigo Health appreciates the opportunity to review and improve our service. Where compliments are provided, we pass this feedback directly to our staff to let them know they are doing a great job.

Where possible, we try to resolve concerns with the care or treating team at the time of care. Resolving concerns early allows for immediate improvements in communication and patient experience. Where this is not possible, concerns can be escalated and a thorough investigation will occur.

Concerns and complaints can be complex and take time to investigate. At Bendigo Health, we aim to have them resolved within 30 days. Over the past year, 69% of complaints have been resolved within this timeframe.

Often the review of patient feedback leads to refinement of our processes to allow for improvements in care outcomes and patient experience. Changes that have occurred following feedback this year include staggered admission times for day surgery. This has meant that patients arriving spend less time in the waiting room. Another improvement this year has been clearer medication information for those patients who take medications that can be toxic (called cytotoxic medications often used in the treatment of cancer). Patients are now more informed and aware about what to expect and any side effects they may experience.

ANNETTE AND LYNTON – A CARER'S STORY

Annette's husband Lynton, suffered a small aortic aneurism and presented to ED. He returned home however a few weeks later he again presented in severe pain and was deteriorating rapidly. An ultrasound was performed and a cardiothoracic surgeon was contacted and a helicopter on standby. The family had not been involved in this decision about transferring him at this stage and felt everything was moving too fast.

Following an opportunity to talk with staff, they expressed Lynton's wish not to be transferred and he was advised that "if he didn't have the surgery, he will die." He accepted that and his decision not to have any interventions was respected.

All treatment ceased and he was moved into a private area with his wife and daughter attending. Knowing the outcome, other family members and friends were able to call in.

Lynton's wish was to go home. Lynton and the family appreciated his frankness but they were already aware that he wanted to be home, if possible when he died. Following clear and open discussion, Lynton was discharged into Annette's care and driven home to the farm. She said "I looked at him as we left the hospital and really didn't know if he would survive the one hour drive but knew it was what he wanted."

After arriving at the farm, Lynton changed into his boots and work clothes and went to feed his chooks. He returned to the house, sat in his favourite chair and died 30 minutes later "in just the way he wanted." Annette said "He was a man of the land, he left on his terms – I was so glad they didn't argue and insist that he stay in the hospital or have the surgery."

Lynton's decision and the discussion with his family prior to his death were made easier for his family and his daughter had been with them both throughout the hospital experience. She had initially found it a difficult concept and couldn't understand however she said "Now I get it. He was given the dignity to die in peace."

"I would also have liked to be able to have had the opportunity to go back and thank the doctor for respecting our combined wishes, providing comfort with a quiet private space, pain relief for Lynton and supporting us to go home".

Lynton's story highlights the importance of having conversations with family and loved ones about end of life care and preferred treatment wishes. It is important that these conversations are documented and shared with health professionals. This plan is called an Advance Care Plan which is a plan that enables a person to state their values and beliefs, and their medical treatment wishes. An Advance Care Plan can also involve an appointment of a Medical Treatment Decision Maker to advocate for the treatment wishes to be respected when a person is no longer able to speak for themselves.



OUR PEOPLE MATTER

THE PEOPLE MATTER SURVEY PROVIDES OUR STAFF WITH THE OPPORTUNITY TO EXPRESS THEIR VIEWS AND GIVES US THEIR FEEDBACK ON A RANGE OF MATTERS RELATED TO THEIR EXPERIENCES IN THE WORKPLACE.

The People Matter Survey is an employee opinion survey.

The 2019 People Matter survey has demonstrated that our staff have maintained the improvements gained in the 2018 survey about patient safety. This is a reflection that the actions we have put in place continue to support a patient safety culture are working. This work is ongoing so as to ensure that a Patient Safety Culture continues to improve over time.



Patient Safety Question	Target	2018/19 % Agreement
Patient Safety Index	80%	71
I am encouraged by my colleagues to report any patient safety concerns I may have.	80%	81
I would recommend a friend or relative to be treated as a patient here.	80%	77
My suggestions about patient safety would be acted upon if I expressed them to my manager.	80%	75
Management is driving us to be a safety-centred organisation.	80%	71
Patient care errors are handled appropriately in my work area.	80%	71
The culture in my work area makes it easy to learn from the errors of others.	80%	69
Trainees in my discipline are adequately supervised.	80%	63
This health service does a good job of training new and existing staff.	80%	63

WORKPLACE CULTURE

BENDIGO HEALTH VALUES ITS STAFF. WE INVEST IN THEIR HEALTH AND WELLBEING AND PROVIDE A VARIETY OF LEARNING OPPORTUNITIES SO ALL STAFF CAN UNDERTAKE THEIR ROLES SUCCESSFULLY.

Research tells us that an engaged staffing group that work in a positive learning culture will lead to better care and improved patient outcomes.

Some of the training that has been delivered this year to specifically support staff includes building resilience, looking after yourself and others post crisis, managing fatigue and sleep and navigating through change. These courses provide our staff with the skills to not only provide

a supportive work environment, but to maintain and increase their wellbeing. Feedback from the training indicates improvement in the ability of our staff to deal with conflict, tips on looking after yourself and how to have the conversation when someone needs help.

Bendigo Health also provides its staff with a range of health and wellbeing opportunities throughout the year. These are aimed at supporting a healthy workplace and lifestyle. Some of these include the fun run, footy day, QUIT events and more recently we surveyed staff on gym membership options.

In recognition of the challenges of being a manager, a two day orientation program for managers was developed. This specific orientation program is designed to contain the key information that managers' require to enable them to safely and confidently undertake their roles and support their teams. Providing managers with the right information early in their management role leads to strong leaders who have a clear understanding of their roles, obligations and accountabilities.



EXTERNAL REVIEWS – OUR ACCREDITATION PROCESSES

HERE AT BENDIGO HEALTH WE HAVE FOUR RESIDENTIAL AGED CARE FACILITIES THAT ARE ACCREDITED BY THE AUSTRALIAN AGED CARE QUALITY AGENCY (AACQA).

In the last year, all four facilities underwent a two day re-accreditation assessment with all facilities meeting the 44 outcomes of the Aged Care Quality Standards. Auditors were particularly complimentary of the high level of nursing care provided to our residents and the welcoming home environment of the facilities. Two facilities also underwent

a one day site assessment which assists AACQA to monitor ongoing compliance with the standards.

The organisational wide accreditation for National Safety and Quality in Healthcare Standards (NSQHS) is scheduled for July 2020. The past year has been used to ensure our processes and systems for patient safety are continually monitored and improved upon. Bendigo Health is working hard to ensure its services meet all of the requirements in the NSQHS and Clinical Care Standards.

Bendigo Health BreastScreen service underwent its BreastScreen accreditation in November 2018. This accreditation was highly successful and the service was recognised as an exemplar service.

Accreditation Framework	Division	Details
National Safety and Quality Health Service Standards (NSQHS)	Organisation Wide	Full accreditation survey due in July 2020. BH working towards the requirements of version 2 of NSQHS.
Aged Care Standards	Integrated Care Services	All four aged care facilities successfully underwent re-accreditation.
Human Services Standards	Integrated Care Services	Successful mid cycle review in May 2019.
BreastScreen	Clinical Operations	Accreditation to BreastScreen Australia standards.
Diagnostic Imaging Accreditation Scheme	Clinical Operations	Medical Imaging submitted documentation for Diagnostic Imaging Accreditation Scheme. Feedback not expected until November 2019.



KEEPING EVERYONE SAFE

AN ADVERSE EVENT IS AN INCIDENT WHICH RESULTED IN HARM TO A PERSON RECEIVING HEALTHCARE.

Bendigo Health works continually to prevent adverse events of any kind. Having strong processes in place for managing incidents means that we learn from them and improve our processes to stop any future harm.

If an adverse event does occur, we offer those effected an apology and we undergo a detailed review that is coordinated by staff trained in incident analysis. This review lets us know what happened, how it happened and what we can do to stop it happening again. We involve our senior clinical staff and our risk team in these reviews and extend the opportunity for those affected to participate and provide their perspective.

Adverse events are rated on a scale of injury severity, with severity ratings of 1 or 2 meaning that a level of harm has occurred to a patient that is higher than “mild”. Sentinel Events are those adverse events rated as a severity 1 and also falls into particular categories that require us to report them to Safer Care Victoria (SCV) and then to undertake an extensive investigation that is reported back to SCV.

ADVERSE EVENT INVESTIGATION PROCESS

Notification - Our staff know that reporting incidents is a very important part of making sure our care is as safe as it can be. The rate of reporting into our electronic incident system has increased by over 13% in the last year and our help desk has been contacted for assistance with submitting reports on over 400 occasions.

Review - When an adverse event is reported, it is reviewed by the quality and risk team and by members of our executive team. This ensures that the appropriate staff members receive a notification about the incident and investigation and improvements are made where needed.

Investigation - There are different types of investigations that can be undertaken for an adverse event. Some of these require a team of nominated staff whereas others are completed by relevant groups of medical staff. The executive team and the risk team work together to decide the most appropriate type of review for each adverse event.

Learnings - Once an investigation has been completed, recommendations are made to prevent this type of incident happening again. Recommendations are reviewed at committees to ensure they have been completed and that they are effective.

Recommendation examples include:

- A review showed that we needed to better prepare our patients for surgery. To achieve this, we have improved how we assess patients prior to surgery, focussing on understanding and managing any risks well in advance of surgery.
- Our Specialist Clinics service has reviewed its process for managing the large number of referrals they receive. The clinic is looking at how to make their process more efficient and effective, which should improve the management of our waiting lists.
- The ability of our services to undertake vascular surgery has been reviewed. A process is now being developed to guide staff on when to use Bendigo Health resources and when to refer to vascular services in metropolitan hospitals.
- We have reviewed our blood clot prevention process for patients to ensure it aligns with the new clinical care standard released by the Australian Commission on Safety and Quality in Health Care.

Staff are informed about the learnings from incident reviews via department/ward meetings, policy changes, and reports to committees, displays of incident information in ward areas, newsletters and involvement in the reviews of incidents. Our community is informed through poster displays and publications.

Adverse Event Rating	Number of Events (2018/2019)	Rate of Incidents
Sentinel Event	2	0.04%
ISR 1 – Incidents where there has been severe permanent harm to a patient or death e.g. suicide in the community	31	0.04%
ISR 2 – Incidents where there has been moderate harm to patient, temporary loss of function e.g. fall with fracture	129	0.77%
ISR 3 – Incidents where there has been mild harm to a patient- e.g. skin tear	2203	62.5%
ISR 4 – Near miss, where harm was nearly caused and /or where clearly identifiable potential for serious harm has been identified. e.g. incorrect medication prescription detected before being given to the patient	1163	33.0%

KEEPING PATIENT INFORMATION SAFE

Bendigo Health recognises its responsibility to ensure patient information is kept private and secure. To improve our cyber security this year we have reviewed and strengthened our systems for protecting patient information including bio-medical devices, software and medical records. Bendigo Health also strengthened its password protection policy. This policy has now been adopted state wide.

A committee of experts meets regularly to make sure our risk management processes for cyber security remain up to date and our patient's information remains secure.



INFECTION CONTROL

EFFECTIVE HAND HYGIENE IS THE SINGLE MOST IMPORTANT STRATEGY IN PREVENTING HEALTHCARE ASSOCIATED INFECTIONS.

Hand hygiene includes applying an alcohol-based hand rub to the surface of hands (including liquids, gels and foams) or washing hands with the use of a water and soap or a soap solution.

Improved hand hygiene practices are associated with a decrease in healthcare associated infection. Hand hygiene practices together with a comprehensive Infection Prevention Control program are used to minimise the risk of any person contracting an infection while in our care.

This year at Bendigo Health we have trained infection control liaison staff who have assisted to monitor hand hygiene across many services. This year we have increased our monitoring of hand hygiene compliance four fold. Bendigo Health participates in the National Hand Hygiene strategy and submits quarterly data to Hand Hygiene Australia. Bendigo Health consistently meets and exceeds the benchmark of 80%.

To assist us in maintaining this rate we ask everyone working in and accessing the services of Bendigo Health to use the alcohol based hand rubs which are placed across all facilities.

Month	Audit Period	Hand Hygiene Audits	Compliance Achieved	Number of Observations
2019				
June	2	80%	82.1%	2,492
March	1	80%	81.6%	1,410
2018				
October	3	80%	81.6%	1,755
June	2	80%	80.8%	1,759



INFECTION CONTROL

STAPHYLOCOCCUS AUREUS BACTERAEMIA (SAB)

SAB is when a Staphylococcus aureus infection has gotten into the blood stream. This can occur from a device put into the skin. SAB infection rates are used as an indicator of Infection Prevention Control practice in health care facilities. SAB rates are monitored on an ongoing basis and reported internally to key committees and externally to the Victorian Health Care Associated Infection Surveillance Unit

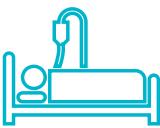
(VICNISS). SAB rates at Bendigo Health continue to remain within the state aggregate.

This is a key indicator of effective infection control. Bendigo Health is continually reviewing and improving policies and practices to ensure best and safe practice with the aim of zero SAB.

2018/2019	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Number of <i>Staphylococcus aureus</i> Bacteraemia infections	1	1	1	1	0	1	1	1	0	0	3	0

INTENSIVE CARE UNIT INFECTION SURVEILLANCE

Our most high risk patients are cared for in our Intensive Care Unit (ICU). Patients in ICU often have the most complex procedures and can be at a greater risk of infection. ICU patients often require central venous catheters/lines (CVCs) which are inserted into larger veins within the chest and abdomen and generally remain in place for long periods of time. These types of devices can put patients at risk of developing a local infection which could enter the bloodstream. Our staff work to best practice guidelines to ensure when inserting these lines. Infection prevention techniques are used which reduce the risk of line related blood infections.



2,913
Number of days that the ICU
has had ZERO line infections

INFLUENZA VACCINATION PROGRAM

Bendigo Health promotes a vigorous Autumn-Winter Influenza vaccination program which ensures as many clinical and services staff are vaccinated. Those offered the vaccine include staff, volunteers, contractors, students on placement and immediate family members of our staff. The vaccine is made available through clinics across all Bendigo Health sites. Education to all staff regarding the importance of the vaccination assists to ensure strong uptake. This year the policy was reviewed and strengthened which assisted to support the program. With 91% of staff vaccinated Bendigo Health's vaccination rates were the second highest in the state for a health service.



91%
of staff were vaccinated for
Influenza in 2019



3,518
Total staff vaccinated

255
Students on placement

123
Volunteers

259
Contractors

326
Spotless staff

1,050
Immediate family
members

INFECTION CONTROL

INFECTIOUS DISEASES

The Infectious Diseases physician is responsible for overseeing the Antimicrobial Stewardship (AMS) program across Bendigo Health. Antimicrobial Stewardship is a group of strategies which aim to promote the best use of antimicrobials (Antibiotics, Antivirals & Antifungal agents). AMS is designed to maximise the benefit of the medication, whilst causing the least harm. Successful AMS programs are associated with reducing antibiotic resistance and improving health outcomes. Bendigo Health has a well-established AMS program in place which ensures the correct antibiotics are being prescribed and high level antimicrobials are not wasted. Ongoing education to staff is provided as well as the use of an electronic prescribing system that monitors antimicrobial use.

INFECTIOUS DISEASE CLINIC

The Infectious Disease Service has seen over 1200 patients this year.

A range of services are provided including viral hepatitis clinics; nurse led clinics and general infectious diseases clinics. In collaboration with Bendigo Community Health services the Infectious Disease Clinic has provided health assessments for local clients undergoing migrant health checks. This is a growing aspect of the service which assists local migrants to be followed up in their community rather than in metropolitan services.

Education provision to health care workers across the Loddon Mallee region by the Infectious Disease staff is assisting to build local knowledge and expertise. This has led to more timely referrals and patients receiving treatment earlier. Outreach services are provided to Swan Hill and Echuca Health services. Liaison also occurs with other services such as Bendigo District Aboriginal Co-operative, Njernda Aboriginal Service and Bendigo Community Health Service.



THINK SEPSIS, ACT FAST

Sepsis is a potentially life threatening condition that can have a vague range of symptoms, especially in the early course of the illness. It is therefore very important that a clear and rapid clinical pathway for diagnosis and treatment is followed in order to save lives, improve patient outcomes and reduce the sepsis related health care costs (Thursky et al., 2018).

In early 2018, Royal Melbourne Hospital (RMH) was granted project funding by Better Care Victoria to implement the Adult Sepsis Pathway across 11 health services, including Bendigo Health. The Sepsis Collaboration Project, also known as “Think Sepsis. Act Fast” was commenced in April 2018 and completed in March 2019.

The sepsis pathway form was adapted with local antibiotic protocols and trialled in a department. At the same time, sepsis education was delivered to medical and nursing staff. Following the initial trial the pathway was modified with minor adaptations and its use expanded to all adult inpatient wards.

Since the introduction of the pathway, a 2% decrease in the rate of sepsis related deaths and a 26% decrease in ICU admissions has occurred. There was also a significant reduction in the length of time a person diagnosed with sepsis was required to stay in hospital.

Implementation of the Adult Sepsis Pathway at Bendigo Health has achieved improved outcomes for patients with sepsis and shows a reduction in the costs of diagnosis and treatment. It is planned that the use of the Sepsis pathway will continue and expand its use into areas such as maternity and paediatrics, maintaining focus on fast identification and appropriate treatment of sepsis.



OUR MOTHERS AND BABIES

THE CONDITION OF BABIES AT BIRTH IS AN IMPORTANT INDICATOR OF THE QUALITY OF CARE THAT WOMEN RECEIVE BEFORE, DURING AND AFTER BIRTH.

Babies are checked at one minute and five minutes of age using a validated tool called an “Apgar score”. This tool assesses the baby’s wellbeing by scoring them on their appearance, pulse rate, grimace, activity and respiration. Each element is scored 0-2 with two being the best score. Most babies score more than seven at five minutes of age and a baby who scores less than seven may require intervention - usually with support to start breathing on their own.

It is important to remember that a high or low score doesn’t always indicate a problem or that a baby is definitely healthy – staff at Bendigo Health are highly skilled in recognising and responding to the care needs of newborns.

Bendigo Health reports a low rate of term babies being born in poor condition and our performance in the 2017-18 report was improved from previous years.

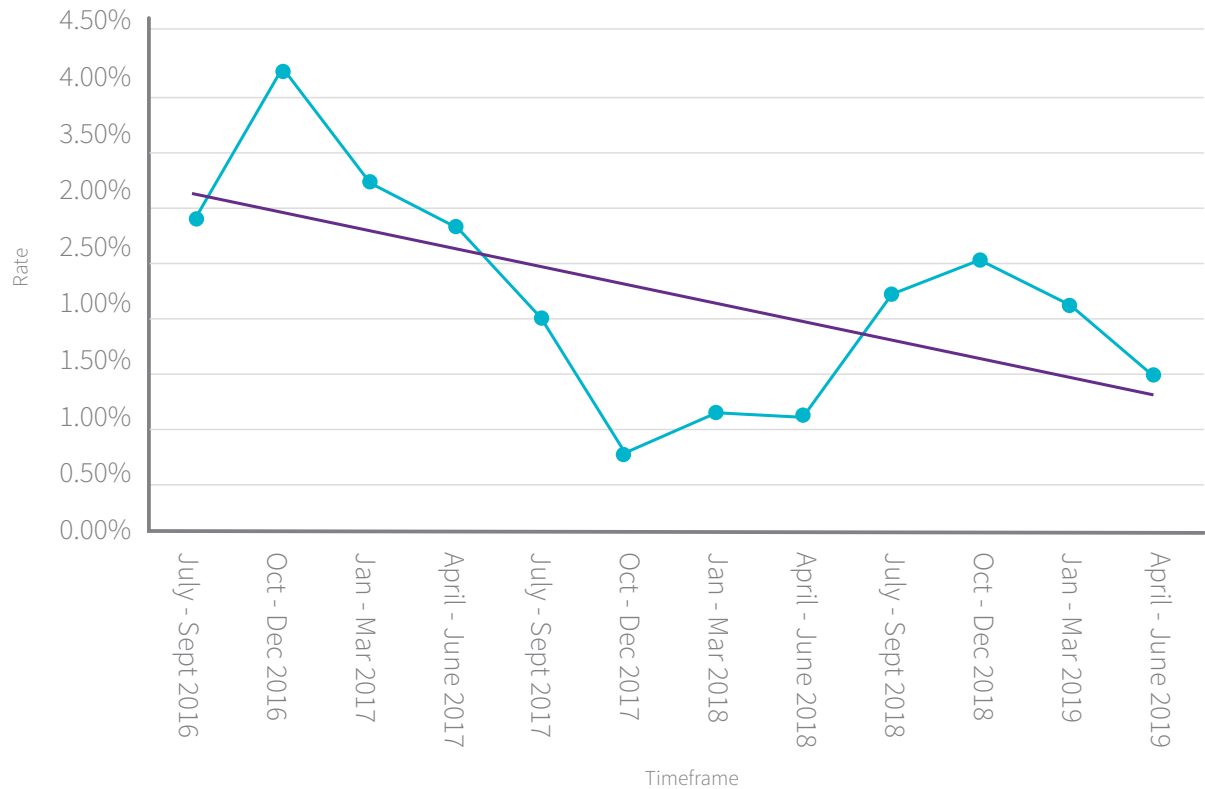
The graph demonstrates the improvement in the Apgar score at 5 minutes of age from mid 2016 until mid-2019. The team have demonstrated steady and sustained improvement and we now compare favourably with our peer hospitals.

TEAM APPROACH TO BETTER CARE

The combined midwifery, obstetric and paediatric workforce have also introduced mandatory training for neonatal resuscitation. This means that we have a workforce that is able to respond to a baby in poor condition immediately and initiate resuscitative measures. The midwifery, obstetric and paediatric teams also meet regularly to discuss cases of babies born in poor condition at birth and to review how to improve our care for mothers and babies throughout pregnancy, child birth and immediately after delivery. Education can then be targeted so we can do our best to ensure all babies receive optimal care.



Apgar <7 @ 5 minutes



WELLBEING OF BABIES AT BIRTH

HEALTHY BABIES, GROWING WELL

Growth restriction is defined as a fetus that has failed to reach their growth potential. The potential growth is often difficult to ascertain, as it's not always known what this potential would be. Health services define growth restriction as babies who are in the bottom 10% of weight for their gestation at birth. However, this data collection method will include some babies who are actually just meant to be small (usually based on their genetics) as well as missing babies who may be bigger than this but not as big as they were meant to be based on their growth potential.

The rate of severe fetal growth restriction at Bendigo Health in the 2017-18 Perinatal Services Performance Indicator report was 25%. This rate is better than all of the tertiary maternity units in Melbourne. This indicates we are recognising the majority of babies who weigh less than the 10th percentile at birth and demonstrates we are providing a high quality antenatal care.

Bendigo Health has embarked on a quality improvement project to standardise the way in which we assess babies' growth in utero. Antenatal visits provide an opportunity to assess fetal growth. We are striving to be consistent about how we measure fetal growth, plot the findings on a growth chart and refer for an ultrasound scan if there is clinical suspicion of poor growth. The goal of this quality improvement work is to pick up more babies that are growth restricted to enable timely intervention and planning for birth.

Recognising small unborn babies is not always easy but is important as we continue to work to improve the outcomes for all babies born at Bendigo Health.

IMPROVING CARE FOR BIRTHING WOMEN

Bendigo Health Women's team have worked hard to reduce the rate of 3rd and 4th degree tears within our birthing women. A 3rd or 4th degree tear refers to a severe perineal tear that occurs during a vaginal birth. The outcome from these tears can be significant and can cause lifelong complications both physically, emotionally and psychologically. In 2017 Bendigo Health had a higher rate of 3rd and 4th degree tears compared to our peer hospitals in the state and we sought to address this. In conjunction with Women's Health Australasia we worked on a collaborative project to implement evidence based changes to improve outcomes for our birthing women.

The changes that were made included the introduction of best clinical care practices as well as the introduction of a perineal protection form that ensures all risk factors for a woman were documented and appropriate birthing care interventions were offered. Specialist education was provided to medical and midwifery staff as well as some changes in products used to support birthing. Educational materials were also developed for birthing women.

An ongoing process of testing and feedback from women and staff has assisted in ensuring that the improvements we have made are sustainable for all women birthing at Bendigo Health in the future.

The Bendigo Health team are very proud of their results - since the implementation of the project we have seen the rates of 3rd and 4th degree tears halve. The team believe they can continue to reduce this rate even further and look forward to reducing the harm from severe perineal tears. The project team are now looking at publishing their work and are offering their leadership and expertise to other Victorian health services to support their improvements in this area.



RESIDENTIAL AGED CARE

BENDIGO HEALTH PROVIDES HIGH QUALITY AGED CARE SERVICES TO 265 OLDER PEOPLE ACROSS FOUR RESIDENTIAL CARE FACILITIES LOCATED IN BENDIGO.

Supporting the wellbeing, quality of life and safety of these residents is our highest priority. We routinely monitor and review our care to ensure that it is respectful and safe, and meets the needs of all of our residents.

One way to measure the quality of the care we are providing is for our services to participate in the Department of Health and Human Services (DHHS) Public Sector Residential Aged Care Services (PSRACS) Quality Indicator program. Four times a year, we report to DHHS across five high risk areas of care that are important to residents' health and wellbeing. This regular monitoring allows Bendigo Health to understand and track trends in important areas of resident care and safety. The information that is collected through this program is also compared with other residential services in Victoria.

MEASURING THE QUALITY OF AGED CARE RESIDENTIAL SERVICES

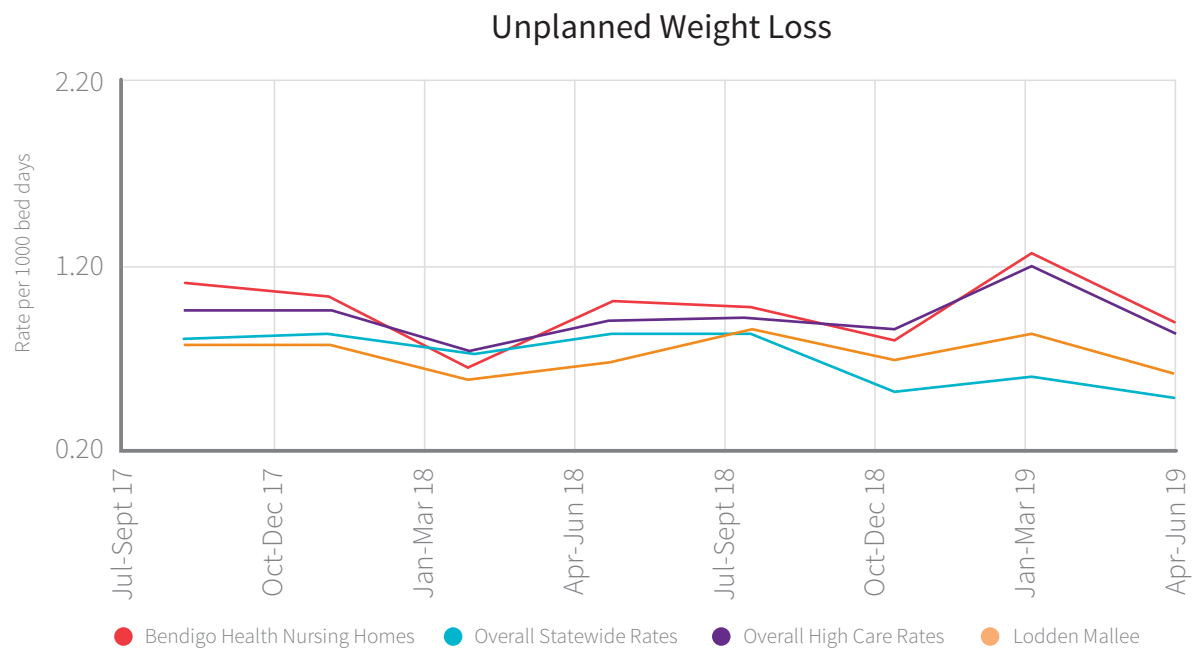
The five high risk areas of care that are routinely monitored and reported to DHHS Victoria are unplanned weight loss; falls; medications; use of restraint and pressure injuries. In the graphs below, we provide a summary of the indicator and a graph that shows how Bendigo Health is performing against the indicator and compared with rates across the Loddon Mallee and state-wide rates. The information is displayed below as the percentage of incidents per 1000 bed days.



RESIDENTIAL AGED CARE

UNPLANNED WEIGHT LOSS

Unplanned weight loss is required to be measured in all public aged care residential facilities. As the graph below shows, over the last two years, unplanned weight loss at Bendigo Health facilities has been similar to overall high-care rates.



RESIDENTIAL AGED CARE

NUTRITIOUS AND APPEALING FOOD

This year, our Golden Oaks Complex underwent a redevelopment that included the fitout of a new kitchen, enabling us to move from a “chill cook” food preparation system to a “fresh cook” system. This exciting development has enabled all food to be prepared and cooked onsite allowing the residents to enjoy home-style cooked meals. The redevelopment also included a communal café. The café provides a friendly space for residents to spend time with their family and friends.

Residents and families were involved in the planning of the new kitchen, menu and decorating the new café. We regularly seek feedback from residents regarding meal experiences. Overall, residents surveyed agreed there is a variety of choices at meal times, their meals are the appropriate size and well are presented. Resident feedback included; “food has improved 100%”, “food is lovely now, much better than before” and “the meals are beautiful.”



RESIDENTIAL AGED CARE

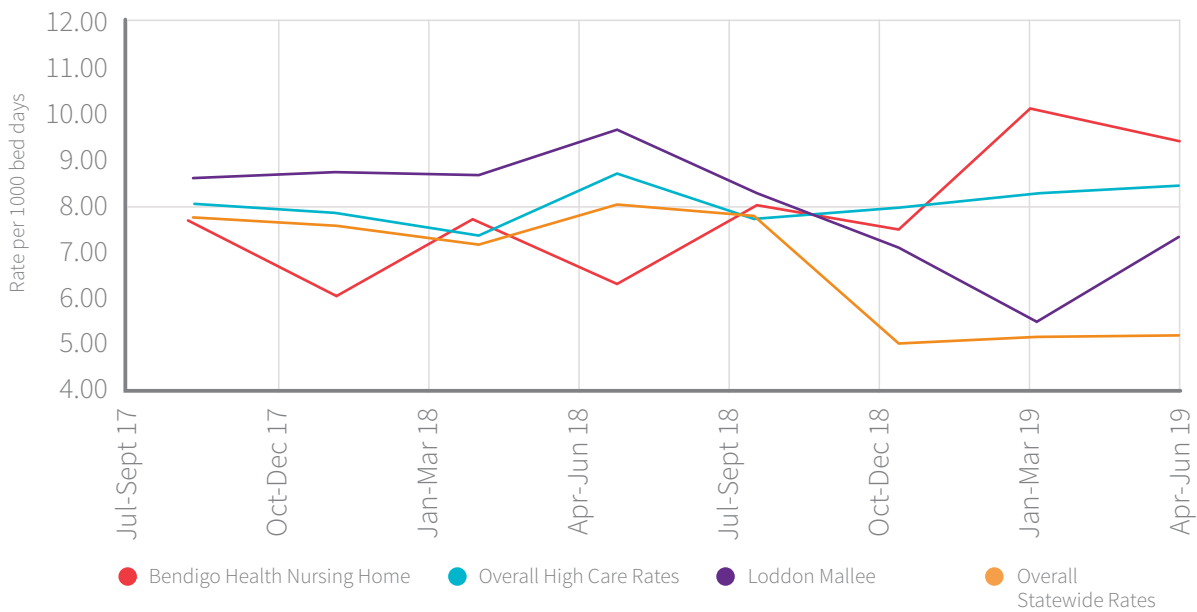
PREVENTING FALLS IS A TEAM EFFORT

The risk of falling increases with age and declining health and mobility. A fall can have severe long term impacts upon aged care residents. We continually work hard to provide a safe and supportive environment and use individualised care plans to reduce the risk of falls. Our Falls Prevention Coordinator provides regular falls education to staff as well as working closely with residents and their family

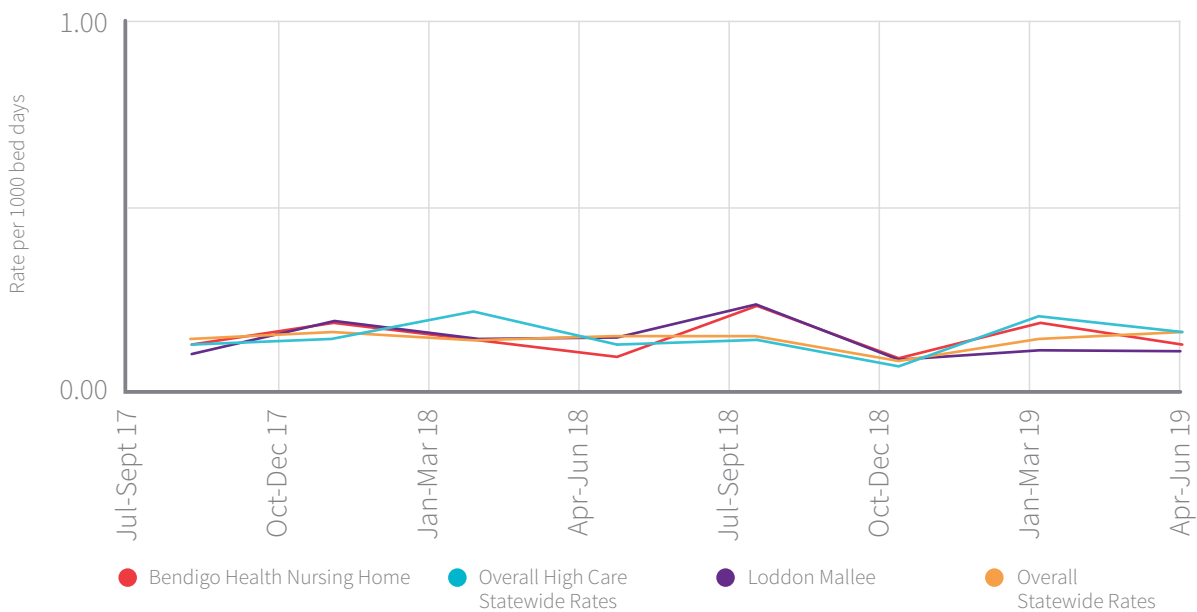
on practical ways to reduce the chance of falling. This includes providing information about the safest types of shoes to wear, the safe setup of residents’ rooms and communal areas that allow residents to move safely and independently as possible.

As shown in the bottom graph, fracture rates following falls are similar to those at other aged care facilities.

Falls Incidents



Falls with Fracture



RESIDENTIAL AGED CARE

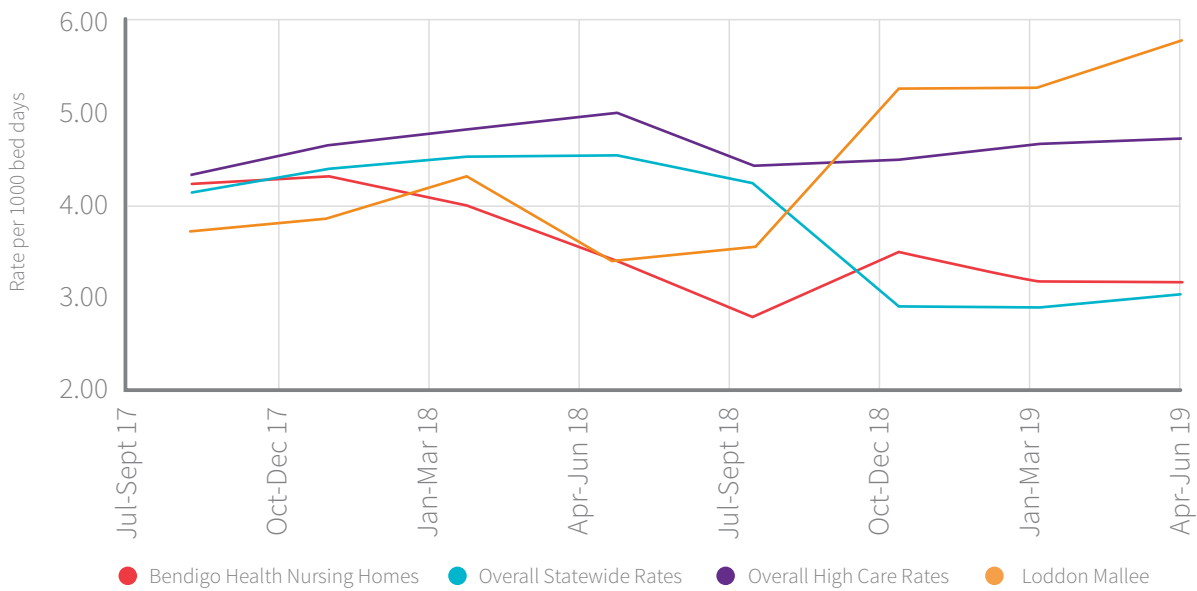
MEDICATIONS

As people get older, health needs can become more complex, requiring good management. One way to manage different health issues in older age is through medications, with older people often taking many different types. Evidence shows that taking more than nine medications can increase a person’s risk of an unexpected or dangerous reaction to a drug/s, increase falls and weight loss.

All residents of Bendigo Health aged care facilities have a regular medication review by their GP and pharmacist.

Our Geri-Connect Program has continued to grow over the past twelve months. This program enables our residents to have a medical review with a Geriatrician (a doctor with specialist training in caring for the health of older people) in the comfort of their home (Bendigo Health facility). The Geriatrician reviews the resident’s medical care and medications and consults with the resident’s general practitioner to ensure they are on the most appropriate medication regime. The Geri-Connect service and pharmacist’s review is supporting the overall reduction in the number of our residents taking nine or more medications.

Nine or more Medications

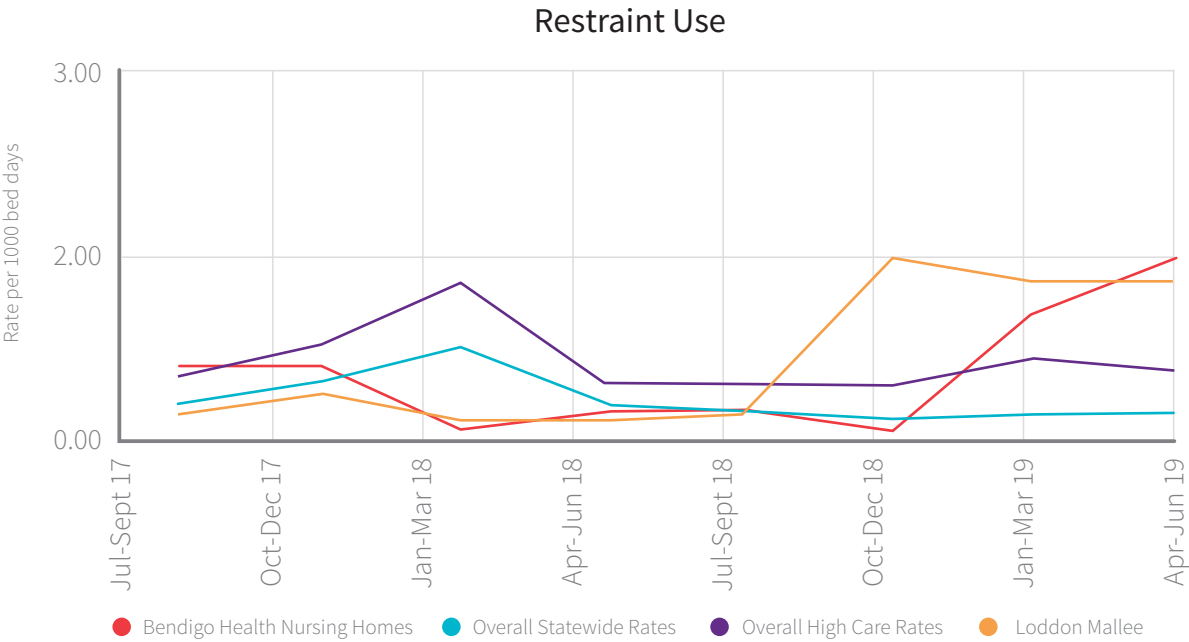


RESIDENTIAL AGED CARE

KEEPING PEOPLE SAFE

At times, with permission from GPs and often at the request of residents’ or their families, we use items such as, seat belts, bed rails or safe and secure bed rolls to keep residents safe, prevent falls and support their independence. When a resident has one of these restraints in place they are closely

monitored by nursing staff. Residents who have ongoing use of restraints are regularly reviewed by allied health assistants with the aim to minimise their use. On average, Bendigo Health is under the state-wide rates for use of restraint.



RESIDENTIAL AGED CARE

IMPROVING PRESSURE CARE

Pressure injuries are often referred to as pressure sores or bed sores. They can occur when there is constant pressure or friction against the skin and most commonly occur when a person has reduced mobility. Pressure injuries are often preventable and are categorised by the level of injury to the skin that has occurred.

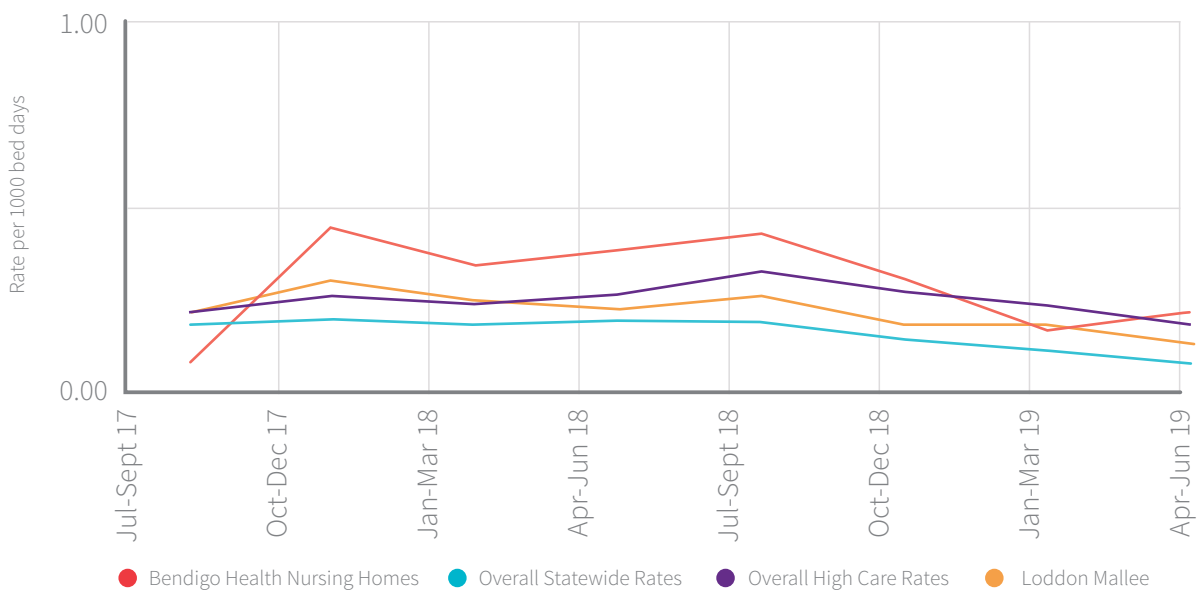
We have a comprehensive monitoring system in place to review residents who are at risk of developing pressure injuries. In the past twelve months, we have reviewed our pressure injury process using the Institute for Healthcare

Improvement Science in Action Framework. This included six nursing staff undertaking enhanced education; trialling different pressure relieving devices and skin care products; and using improved documentation processes. These improvements have combined to enhance individualised care planning for residents at risk and with injuries and reduced the rates of pressure injuries across our aged care residential services.

Over the past twelve months there has been a reduction in pressure injuries in our aged care facilities.



Pressure Injuries



RESIDENTIAL AGED CARE

GOLDEN OAKS NURSING HOME REDEVELOPMENT

On Thursday 30th May the 'link' building between Golden Oaks and Carshalton House was opened by the Minister for Disability, Ageing and Carers, Mr Luke Donnellan.

The upgrade marks the end of stage one of a \$5.8 million upgrade to Bendigo Health's Golden Square aged-care precinct which includes Golden Oaks and Carshalton House.

The new development has created a multipurpose lifestyle area linking Golden Oaks and Carshalton House. The new facilities provide a cinema room and lifestyle room where group activities are held. There is also a café for consumers and families to enjoy once operational.

For aged-care facility residents like Joyce Olsen, the upgrade of Golden Oak's aged-care precinct is an upgrade to her home. Ms Olsen, who turned 95 this year, has been a resident at Carshalton House for 10 years.

"There is a lot of difference (from 10 years ago) but it is still our home; you walk in the door and it feels like home," she said.

"This (addition) is beautiful, we have been here for concerts which were good. It's nice but we will have to get used to it, but as long as our home is here, we'll be alright"

The new space is used daily by both Carshalton House and Golden Oaks and can accommodate large joint activities such as concerts, line dancing and social gatherings. The space is furnished with furniture that was chosen through consumer consultation and focus group discussions with residents and families of both facilities.

A reception, centralised office space and staff room were also included in the upgrade.

"This very much improves the quality of offering from this facility for the elderly residents," Mr Donnellan said. "It's about giving them dignity, quality of care and great social opportunities."



ESCALATING CARE

Bendigo Health supports effective and timely communication, patient review and team work. This includes empowering our patients to let us know if they are feeling worse and may require additional care.

Escalation of care systems enables prompt review and assessment of patients by expert clinical staff.

Escalation of care can be instigated by clinical staff or by patients and carers. Patients and carers are encouraged to let their nurse know when they are feeling worse or if they are concerned that something is not right.

When patients are concerned and feel they need immediate help they can call a PACT (Patient Activated Care Team). This means a Medical Emergency team consisting of a senior Intensive Care Unit (ICU) doctor, a senior ICU nurse and a medical registrar will attend and review the patient. This team makes an independent assessment of the care being provided. Feedback is given to the treating team and if required the patient treatment plan is altered.

This year to ensure all of our patients are aware of the PACT process, additional information has been included on the Patient Communication Boards in each room. Previously the boards encouraged patients to “If you feel worse, call a nurse”. The boards now include information stating that “If you have concerns after speaking with your treating nurse or doctor you can call a PACT”. Additional information about PACT continues to be included in the patient safety videos and via brochures on the ward.

“I ALWAYS THOUGHT
HEART ATTACKS
ONLY HAPPENED TO
PEOPLE OVER 70!”

GRAEME'S STORY



GRAEME

Graeme is a 40 year old ex-truck driver who suffered a massive heart attack and presented to the ED thinking he had back pain. He was subsequently transferred to Western Health for surgery.

The overall outcome for Graeme has been positive with a healthier and improved lifestyle, however he said patients and their families need to be kept informed and be involved when discussing what's happening. He said “There's more than one person to worry about, something like this affects family too.”

He found Cardiac Rehab to be excellent in helping both his wife and himself and said, “It was really good and I learnt a lot about diet and routines for exercising.” His wife was able to attend and that eased her worry and helped her provide support more confidently at home.

MENTAL HEALTH SERVICES

REDUCING RESTRICTIVE INTERVENTIONS

Bendigo Health Mental Health Services is committed to the safety of patients who access our mental health services. One way to achieve this is to, wherever possible, use more therapeutic ways to support a patient experiencing mental illness without the need to restrict or seclude them. We continue to utilise resources, such as employing a Reducing Restrictive Interventions Coordinator, to safeguard the rights, dignity and safety of our patients with a mental illness.

Another way has been through using the Safewards program in our inpatient and residential mental health services. The Safewards model originated in the United Kingdom, and following a successful trial, was rolled out to all mental health services in Victoria. Staff and patients reported increased engagement, safety and confidence in preventing conflict, or reducing its impact.

The need to improve the care and support of people with a mental illness accessing emergency departments was highlighted in the trial.

Bendigo Health Emergency Department (ED) is one of two pilot sites to explore adapting the success of Safewards

in mental health inpatient units across to emergency departments. The pilot is for two years from June 2018-June 2020. The Safewards pilot in ED focuses on all staff working in emergency and all patients presenting to emergency. In the ED, patients are often acutely unwell on arrival, length of stay is short, turnover is rapid, and time to build rapport with a patient is limited. The ED Safewards interventions have been adapted to reflect this unique environment. Using an exploratory approach (an approach in which there is no fixed idea on how the interventions can apply) staff and patients in the ED have been challenged to look for ways of improving patient interactions and enhancing their environment.

Safewards has been highly effective in reducing conflict; increasing a sense of safety and mutual support for staff and patients; and improving staff ability to recognise and respond to behaviours of concern before they escalate.

As the information here shows, seclusion rates per 1,000 bed days for Bendigo Health acute, older persons and extended care units are below the state average.

SECLUSION PER 1,000 BED DAYS – 2018/19

Unit	Bendigo Health	Statewide
Acute adult unit (18–64 years)	8.9	9.2
Older persons unit (65+)	0.0	1.0
Extended care unit (18–64 years)	1.3	1.7

Statewide Target 15.0

RESTRAINT EVENTS PER 1,000 BED DAYS – 2018/19

Unit	Bendigo Health	Statewide
Older persons unit (65+)	3.8	5.8

AGED MENTAL HEALTH RESTRAINT EVENTS PER 1,000 BED DAYS – 2018/19

Unit	Bendigo Health
Older persons unit (65+)	3.8

No Statewide Target at this time

MENTAL HEALTH SERVICES

ADULT MENTAL HEALTH RESTRAINT EVENTS PER 1,000 BED DAYS – 2018/19

Unit	Bendigo Health
Acute adult unit (18–64 years)	15.2

No Statewide Target at this time

EXTENDED CARE MENTAL HEALTH RESTRAINT EVENTS PER 1,000 BED DAYS – 2018/19

Unit	Bendigo Health
Extended care unit (18–64 years)	1.2

No Statewide Target at this time



COMMUNITY SERVICES AND AMBULATORY CARE

Access to health services and the ability to find clear information is important for all community members. Bendigo Health has recently updated and revised our internet site to improve the clarity of information available about its services. This information is supported by regular media releases including via social media about different health services that are available. Access changes and car parking information is also regularly made publically available to assist with community awareness.

To improve experience, efficiency and communication in community programs, a Regional Community Information Technology Platform is being developed. This software platform will support the transfer of client information (with consent and privacy restrictions) and allow for improved communication between treating teams. This will greatly reduce the need for consumers to repeat key information to each clinician.

The quality of consumer care plans for our Home Care Packages clients and other key documents is continuously being reviewed to ensure they remain client centred with clear attainable goals as stated by the client. The quality of care plans is reviewed through auditing processes and at management feedback sessions. Education regarding care plans is regularly scheduled at team meetings. Earlier in 2019 the Home Care Team surveyed all of their clients to ensure that they were able to read and understand their documentation including their Home Care Package Statement.



**Positive Patient Experience
Community Programs**

96%



CHRONIC HEART FAILURE DIARY

To support patients with self-management of their chronic heart failure, the Bendigo Health HARP (Hospital At Risk Program) developed a diary to help patients monitor their chronic heart failure symptoms at home. This diary contains simple action guidelines for patients to follow when symptoms develop. The diary uses a colour coded zoned (traffic light) monitoring system that guides patients to what they should do if their symptoms fall in those ranges.

This diary has been shown to reduce the risk of being admitted to hospital as patients are more informed and know to seek help via their GP earlier. The diary was trialled by patients and their feedback was essential in ensuring the diary was user friendly. The diary is now being used by many patients with chronic heart failure to self-manage their symptoms and take more control of their health.

The diary provides a clear and reliable resource for chronic heart failure patients, carers and health professionals to easily and effectively monitor their weight, symptoms and fluid balance on a daily basis.

Write the date here- →

	MON	TUE	WED

My weight range

Symptoms	☑	Monday	Tuesday	Wednesday
Short of breath				
Swollen feet, ankles or legs				
Abdominal swelling or nausea				
Night cough				
Palpitations				
Fatigue and lethargy				
Extra pillows or sleeping in chair				

“I HAVE CONTROL BACK OF MY HEALTH”

“ I WOULDN’T HAVE GONE TO THE DOCTOR UNTIL I WAS REALLY UNWELL WITHOUT THE DIARY”



VASCULAR SURGERY IMPROVING HEALTH OUTCOMES

BENDIGO HEALTH'S NEW VASCULAR SURGERY SERVICE HAS IMPROVED LOCAL ACCESS TO HIGH-QUALITY HEALTHCARE FOR PATIENTS WITH CIRCULATION PROBLEMS, DIABETIC COMPLICATIONS AND KIDNEY FAILURE.


Two vascular surgeons have been operating at the hospital since August 2018, performing a range of procedures including renal access surgery and vascular interventions.

Patients like Raylene Arthur previously travelled to Melbourne for this service.

Ms Arthur was diagnosed with goodpasture syndrome, A rare auto immune disorder 34 years ago.

"It's easier to do it (surgery) in your environment, rather than somewhere you're not used to. Your family can come, it's just a really good thing for Bendigo Health," she said. Demand for the service is increasing and has been warmly received.

Kidney disease and diabetes are growing problems in Australia and the complications of diabetes and kidney disease often results in vascular problems, which are the main focus of the service.



"OUR BIGGEST FOCUS HAS BEEN DIABETES AND THE IMPLICATIONS OF THAT. WHETHER ITS CIRCULATION PROBLEMS OR KIDNEYS FAILING FOR PEOPLE WHO REQUIRE DIALYSIS."

Vascular surgeon
Iman Bayat

THE LODDON MALLEE HOSPITAL CEO PARTNERSHIP


REGIONAL PLANNING PROJECT

The Loddon Mallee Hospital Chief Executive Officer Partnership (CEOP) is a group of CEO's from the 18 public health services. The CEOP work together under the guidance of a Memorandum of Understanding, which has been agreed to by each health service's Board of Management.

Improving the efficiency, quality and safety of health care for all members of the Loddon Mallee community is the major aim of the CEOP. This regional partnership group reports to the Department of Health and Human Services about what is being achieved.

The CEOP are working towards developing a clear vision for the partnership. Shared priorities and goals will be agreed upon following consultation with key groups including consumers. Once this is established, a framework will guide the work of the group. The process will strengthen the DHHS Rural and Regional Health Partnerships which aim to support a more regional approach to service planning, delivery and coordination of health care. Focus will also be on improving accessibility of rural health care and to support the workforce.

The CEOP Regional Plan is expected to launch and commence in July 2020.



IMPROVING THE
EFFICIENCY, QUALITY
AND SAFETY OF HEALTH
CARE FOR ALL MEMBERS
OF THE LODDON MALLEE
COMMUNITY IS THE
MAJOR AIM OF THE CEOP

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