

PORTLAND
DISTRICT HEALTH



We Create

We Surpass

We Learn

We Connect

We are
Responsible

2018-19

Quality of Care Report



*Our Vision,
Our Community,
Your Health*

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If you would like more information on any of the contents of the Quality of Care Report, please contact Portland District Health on (03) 5521 0316.



We Value Wisdom

We use knowledge, experience and understanding to make the decisions that matter.



We Value Compassion

We care about people – their safety matters above all else. Every person's need is different and is respected. Our service quality is second to none.



We Value Courage

We are fearless and courageous in making things happen, embracing opportunities and creating solutions.



PORTLAND
DISTRICT HEALTH

Quality, Safety and Risk Management Committee

The Quality, Safety and Risk Management Committee's primary function is to assist the Board of Management to ensure a high standard of health care, drive continuous improvement in service delivery, and to maintain an environment that supports clinical excellence at Portland District Health.

2018 – 2019 Members of the Quality, Safety and Risk Management Committee

Ann Miller - Board Director (chair)

Michael Bailey - Board Director

Andrew Levings - Board Member (until Nov 2018)

Michael Bartos – Board Member (commenced Nov 2018)

Christine Giles – Chief Executive Officer

Karena Prevett – Executive Director of Corporate Services

Ros Alexander – Executive Director of Nursing

Fiona Heenan – Executive Director of Primary & Aged Care Services (until Dec 2018)

Jo Spurge/Carolyn Millard – Acting Director Primary & Aged Care Services (Dec 2019 – April 2019)

Margaret Cadenhead – Executive Director Primary Care (commenced May 2019)

Loren Drought – Director of Quality, Safety & Risk

Kaushik Banerjea – Executive Director of Medical Services

Annette Hinchcliffe - Quality Officer

Adele Curran - Executive Administration (until August 2018)

Kathy Bryant – Executive Administration (commenced August 2018)

Pam Stringer – Community Representative



Distribution

200 copies of the Quality of Care Report are printed and distributed at the Portland District Health Annual General Meeting along with the Annual Report. If you would like a copy of the report please contact the Quality Department on 5522 1125. An electronic copy of the report is available to read or download at Portland District Health's website www.pdh.net.au

WELCOME

At Portland District Health we want your experience in our care to be the highest quality it can be, the Quality of Care Report for 2018 - 2019 is an important way we share our performance and achievements with our community and the people who use our services.

This report is published each year in conjunction with the Portland District Health Annual Report. Whilst the Annual Report focuses on the financial aspects of our organisation, the Quality of Care Report is how we bring you up to date about the accessibility, safety, and quality of our health services. The PDH 2018-19 Quality of Care report is an open and transparent report on our performance in healthcare delivery and our commitment to continual improvement. It is developed in line with Department of Health and Human Services guidelines and minimum reporting requirements.

We thank the numerous contributors to this year's report, with a particular thank you to the consumers who have agreed to tell their stories and share their experiences with the community.

WE ARE COMMITTED TO CARING FOR YOU – OUR COMMUNITY YOUR HEALTH

Portland District Health is a Local Health Service, providing access to service for both the Portland community and the surrounding districts and towns. One of the key challenges we face is making sure we facilitate access to high quality care for our relatively isolated growing rural city in Southwest Victoria.

Portland District Health's (PDH) Quality of Care report showcases the highlights and achievements our staff have made to enhance the healthcare services we provide to our patients and our community. Following the trend from previous years 2018/19 has been a year of significant growth in activity across PDH, with increases in the numbers of patients treated in the majority of our service areas. The numbers are highlighted throughout this report, but in summary, we:

- Admitted 5410 patients to our ward areas a 4% increase on the prior year
- Treated 8747 patients in the Urgent Care (Emergency) Centre a 16% increase on the prior
- Performed 2584 surgical procedures a 6% increase on the prior year
- Performed 20364 Medical Imaging procedures a 4% increase on the prior year
- Welcomed 76 babies.
- Across our Primary and Community Health programs recorded over 27,000 contact hours with clients

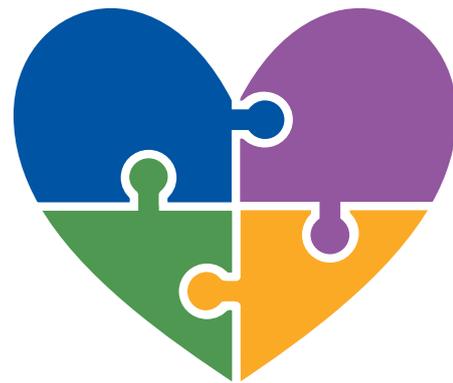
2018/2019 has seen PDH continue to meet set targets and improve access to services for our community, in addition to maintaining our ongoing service profile we started a new Paediatric service with the recruitment of a full time Paediatrician. PDH is committed to improving the health and wellbeing of our community, research tell us that the first 2000 days of life have lasting impacts on an individual's health into the future. In addition to developing a paediatric program PDH has been the successful tenderer to run the Maternal and Child Health service for the Glenelg Shire. PDH is now able to develop a women's and children's health services that will ensure we provide the best start in life for the children in our community.

Over the last 12 months we have been focussing on ensuring a consistent level of service to our community, we provide 24/7 emergency care, both elective and emergency surgery care and a comprehensive range of diagnostic and general medical care. In order to achieve this we employ a dedicated, committed and professional team of over 420 staff, and along with our visiting medical staff we are continually improving access to healthcare for our community.

We need our community to be confident that the services and care they will receive at PDH meets or exceeds their expectations, to assist us provide this reassurance this year the organisation undertook and passed three separate independent Quality and Safety Accreditation reviews. The Hospital was surveyed against the national healthcare standards by the Australian Council on Healthcare Standards, Harbourside Lodge was surveyed by the Commonwealth Aged care Standards Agency and Active Health Portland passed GP practice accreditation. We consistently meet all the healthcare quality targets and the Board of Management Quality and Safety Subcommittee have a robust program of presentations to satisfy their clinical governance mandate.

At PDH we place great importance ensuring we have a patient centred approach to providing health care, we continue to promote our it's OK to ask initiative, we invite consumers, carers and others to ask our staff those difficult questions. This year we have focused this campaign inviting patients to not risk a fall, by promoting it's OK to ask for assistance, this program has seen a marked decrease in the number of falls patients experienced in our wards.

Staff at PDH take vaccination very seriously we don't want to be the cause of a patient getting the flu for example, in 2018/2019 we collaborated with the other healthcare organisations in the Southwest and a record number of 95% of PDH had the flu vaccination. We have a very active vaccination program for our staff to keep both themselves and our patients safe.



PDH is not just about our hospital services, we are also committed to the health of our community members, and continue to work with our partner organisations to reduce the prevalence of chronic disease. SEA (sustainable eating and activity) Change is our preventative health program it is improving the health and wellbeing of our community across all generations. SEACHange is a world leading program, showing a reversing trend in the prevalence of obesity in our school aged children, we encourage everyone in the community to get involved in SEACHange.

We would like to take this opportunity to congratulate the staff and volunteers at Portland District Health for making sure we surpass the expectations of our patients, consumers and community in providing the best services and care possible.

We recommend this Quality of Care report to you and have pleasure in sharing with you the achievements of our team during the 2018/19 year.



VISION, MISSION AND VALUES OF PORTLAND DISTRICT HEALTH

Our Vision:	Our Community, Your Health
We Value Wisdom:	We use knowledge, experience and understanding to make the decisions that matter.
We Value Compassion:	We care about people – their safety matters above all else. Every person's need is different and is respected. Our service quality is second to none.
We Value Courage:	We are fearless and courageous in making things happen, embracing opportunities and creating solutions.

OUR COMMITMENTS

We Surpass:	Your experiences in our care will be safe and the highest quality they can be.
We Connect:	Our collaborations, partnerships and relationships are vital to our success.
We Learn:	Our skilled team are the heart of our organisation; they are dedicated to lifelong learning, allowing us to deliver high quality healthcare.
We Create:	Discovering and developing innovative solutions is our way of delivering the best care we can.
We Are Responsible:	We work hard to meet or exceed expectations and comply with what is required of us.

IN 2018 - 2019 PORTLAND DISTRICT HEALTH

- Treated 8748 emergency presentations in the Urgent Care Centre
- Attended 2584 operations
- Attended 2814 CT examinations
- Delivered 76 babies
- Provided 9930 District Nurse visits
- Provided 2390 Community Palliative Care visits
- Delivered 5996 meals to clients in their homes
- Served 91726 meals to inpatients and Harbourside Lodge residents
- Employed 469 staff

KEYNOTE ACTIVITIES

- Community fund raising activities: Community Market, Annual Golf Day, Hospital Ball
- Higher than state average result in key areas of the Victorian Health Experience Survey (VHES) for both Inpatient and Community Health services
- Higher than benchmark results for Hand Hygiene compliance rates against other similar health services
- Higher than benchmark results for staff influenza vaccination rates
- Continued maturing of the Risk Management processes collaboration with Victorian Managed Insurance Authority (VMIA)
- Development and introduction of Sepsis Pathway to assist with the management of unwell patients who present to the Urgent Care Centre
- Increase in rate of influenza vaccination in pregnant women
- Education to the Portland community on how PDH can facilitate in the Voluntary Assisted Dying process
- PDH is supporting Live4Life Glenelg and Teen Mental Health First Aid with a trained staff member
- Development and introduction of Executive and Board of Management Quality Walkabouts to facilitate patient safety focus areas
- Introduction of Quality Watch posters in staff and consumer areas to report information such as pressure injury rates fall rates and medication error rates
- Review of the Inpatient Handbook
- Purchase of new equipment to allow for quick testing of suspected flu cases
- Production of a Patient Experience Video

PARTNERING WITH CONSUMERS

SERVICES PROVIDED AT PORTLAND DISTRICT HEALTH

- Anaesthesiology
- Asthma Education
- Breast Care
- Cancer Support
- Cardiology
- Chemotherapy
- Community Nursing
- Community Rehabilitation
- Community Transport
- Continence
- Counselling / Psychology
- CSSD – Central Sterilisation
- Dental
- Dermatology
- Diabetes Supply Scheme
- Diabetes Education
- Dialysis
- Dietetics
- Discharge Planning
- District Nursing
- Drug and Alcohol
- Endocrinology
- Emergency Medicine
- Exercise Physiology
- General Medicine
- Geriatric Medicine
- Hand Therapy
- Hospital Admission Risk Program
- Health Promotion
- Hospital In The Home
- Immunisation Service
- Infection Control
- Lymphoedema
- Maternal Child Health
- Maternity Services
- Meals on Wheels
- Needle Exchange Program
- Nephrology
- Obstetrics & Gynaecology
- Occupational Therapy
- Oncology
- Ophthalmology
- Paediatrics
- Palliative Care
- Pathology
- Pharmacy
- Physiotherapy
- Post-Acute Care
- Podiatry
- Diagnostic
 - Echocardiograms
 - Holter Monitoring
 - OPG / Cone Beam CT
- Ultrasound
- CT Scanning
- Dental Procedures
- General X Rays
- Doppler Ultrasound
- Mammograms
- Fluoroscopy
- Bone Density
- Residential Aged Care
- Respiratory
- Respite Care
- Sleep Studies
- Surgical Procedures
 - Ear Nose and Throat
 - Endoscopy
 - General Surgery
 - Gynaecology
 - Obstetrics
 - Oral Surgery
 - Orthopaedic
 - Plastic Surgery
 - Urology
 - Vascular
- Speech Therapy
- Stress Testing
- Telecare
- Transition Care Program
- Volunteer Support Programs

OUR COMMUNITY POPULATION PROFILE

According to the 2016 population data for Portland (source: Census Data 2016):

- 49.1% of the population are males
- 50.9% of the population are females
- 30.3% of the population completed year 12 or equivalent
- 26% of the population are engaged in volunteer activities
- 13% of the population are employed in health care and social assistance
- 7.6% of the population need help in their day-to-day lives due to a disability
- 2.7% of the population are Aboriginal or Torres Strait Islander persons
- 65% of the population are aged 18 to 69
- 11.2% of the population are aged 70 to 84
- 3.4% of the population are aged 85 and over
- 2% of people speak a language other than English at home

INTERPRETER SERVICES

2% of the population of Portland speak a language other than English at home.

Portland District Health (PDH) has an accredited interpreter service to ensure equity of access for consumers from non-English speaking backgrounds. The interpreter service is free and is available to everyone using a service at PDH. We are also able to print information brochures in different languages.

URGENT CARE CENTRE

When you present to the Urgent Care Centre, a nurse will assess your medical condition and assign an “urgency” or “triage” category. The triage categories range from patients who require immediate resuscitation (triage category 1) to patients whose condition can safely wait up to 1 hour for medical assessment and treatment to commence (triage category 5).

If your condition requires more specialist investigation or care than can be provided at PDH, transfer may be required. We remind all members of the community that you are responsible for the cost of ambulance transport.

URGENT CARE CENTRE PRESENTATIONS 2018 - 2019 BY TRIAGE CATEGORY

Category	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Resuscitation	1	2	5	1	2	9	2	2	3	1	0	3
Emergency	53	55	48	79	54	57	74	43	60	73	75	69
Urgent	179	190	173	195	173	217	221	173	207	226	213	208
Semi-Urgent	329	369	318	358	365	445	420	343	353	412	351	451
Non-Urgent	84	92	74	76	89	108	127	76	98	97	87	85

THE NUMBER OF TRANSFERS FROM THE URGENT CARE CENTRE IN 2018 - 2019

Category	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Retrieval	3	3	4	1	0	1	3	1	7	1	0	5
Transfer	61	49	42	53	44	45	52	40	44	71	37	32
TOTAL	64	52	46	54	44	46	55	41	51	72	37	37

Retrieval is when a medical team providing specialist care during the transfer process is involved.

What did you tell us about your experience in the Urgent Care Centre through the VHES Survey?

There were 4 key questions in the Victorian Health Experience Survey (VHES) directly linked to the consumer’s experience in the Urgent Care Centre.

Consumers who answered these questions gave a very positive response.

Question	Average Positive Response
How would you rate the politeness and courtesy of staff in the Urgent Care Centre?	98%
Do you think the amount of time you spent in the Urgent Care Centre was ok?	72%
Overall, how would you rate the care and treatment you received from your doctors in the Urgent Care Centre?	94%
Overall, how would you rate the care and treatment you received from your nurses in the Urgent Care Centre?	98%



Herb Dumesny with his daughters.

PATIENT PRAISE PDH SERVICES

Portland District Health has been like a second home for Herb Dumesny in recent years.

The former builder suffers from asbestosis and has had regular visits to PDH to cope with chest infections and other related conditions.

The most recent stay lasted for three months and the 90-year-old and his family couldn't be happier with the care he received.

Mr Dumesny and his daughters Jan Campbell and Sally Stephenson say that PDH provided high quality services and the type of friendly, personal care that typifies a country hospital.

"They're always very good to me," he said.

This is echoed by his daughters who feel confident when their father is in hospital.

"Dad loved his time there," Mrs Campbell said. "All the nurses know and him and it's like a second home for him."

"We're always happy to know he's being well cared for and the staff are always very nice," Mrs Stephenson added.

Asbestosis has taken its toll on Mr Dumesny in recent years.

"I was in the building trade, firstly as a builder and then as a building inspector. We'd work with asbestos all the time; we didn't know any better back in those days," he said.

"I've been in hospital quite a lot with chest infections which cut my voice off."

Mr Dumesny now receives oxygen around the clock but his condition has improved enough to return to his home of 20 years in Portland. He moved to the city to retire after living most of his life in Horsham and then Geelong.

He also undertook a 10-week Transition Care Program at PDH while battling his latest chest infection. The Transition Care Program helps patients regain their independence and confidence as they recover from an acute illnesses.

NEW MUM SOPHIE NELSON

Sophie Nelson has experienced giving birth in Queensland and Portland and is happy to report her local service is hard to beat.

Sophie and her husband Liam recently gave birth to their third child, Georgie Kate, a younger sister for Ella, 4, and Porsha, 2.

Both Porsha and Georgie were born at Portland District Health and Sophie is thoroughly impressed by all aspects of the service.

"They're fantastic," she said. "I can't speak highly enough about how we've all been treated. All the midwives and the obstetrician have been very professional.

"We've been so lucky; we've had a fantastic experience with both of our births at PDH," Sophie said.

Georgie was born on August 29 at 8.10pm and Sophie and Georgie spent a few nights in PDH.

"I was cared for above and beyond," she said. "The staff were fantastic; they looked after our family

exceptionally well and always made us feel like we were a priority, no matter how busy they were.

"All the services and facilities were fantastic and the food was great."

Sophie had particular praise for obstetrician Dr Yasser Diab. "We were very impressed with how professional and how much care he took with myself and Georgie," she said.

Sophie wanted to have her baby close to home and was pleased the family made the choice to support their local health service.

"The staff and facilities are fantastic compared to Queensland," she said. "We're fortunate to have such good facilities and professional obstetrician and midwifery staff in a small country town."

The follow-up care has been just as impressive.

"Everything is going well," Sophie said. "The follow-up has been exceptional with regular phone-calls and home visits."



Sophie & Liam Nelson with daughters Georgie Kate, Ella and Porsha.

PDH CHEMO SERVICE DOES MORE TO HELP LOCAL COMMUNITY



Chemo patient Max Anson with staff.

Portland District Health's chemotherapy service has far exceeded expectations in its first five years, providing more than 1400 treatments to local people.

A function was held in June to commemorate the day oncology unit's success, with past and present patients who have used the service attending.

The original plan for the unit aimed to provide chemotherapy for 27 patients a year, a total of 135 over five years.

Visiting oncologist Associate Professor Ian Collins said this was based on the number of patients from the region who were having treatment in Warrnambool or Geelong but the reality far exceeded expectations.

"We're somewhere between eight and 10 times that," he said. "We're now treating about 27 patients a month, rather than a year."

Associate Professor Collins said this was partly because cancer treatments are better, allowing more services to be offered locally, but the service has also captured people who previously wouldn't travel for chemotherapy.

"There were a lot of patients from Portland who weren't getting any treatment because they had to travel, which shows how fantastic this service is for local people," he said.

Associate Professor Collins paid tribute to Portland District Health and staff for making it work.

"There are challenges that come up continually when coming with such an expansion of patient numbers but they've done a great job in managing that and putting efficiencies into place."

Patients are using the service from Portland, Heywood, Coleraine and Casterton and occasionally the Mount Gambier region.

"It is a reasonably big catchment area which has an ageing population, which is a risk factor for cancer, and there are higher smoking rates and lower socio-economic status, which means we're going to see more cancer cases," Associate Professor Collins said.

"Cancer outcomes for people in regional Victoria are worse than in the city and there is more work to do to address those disparities."

Associate Professor Collins visits PDH one day a week and although there is no capacity to add extra days, he said all local people needing the service were being accommodated.

PDH Nurse Unit Manager for the chemotherapy service, Natalie Herbertson, said local people appreciated the service.

"Depending on treatment, some people are here all day and if they had to travel an extra hour or hour and a half each way it's a big and tiring day when they are already unwell."

"It has made a significant difference to people. We've had people come in for their treatment then go to work or collect their children from school."

Ms Herbertson said there had been many excellent outcomes for local people who have beaten their cancer.

The first dose of systemic therapy was delivered at PDH on June 26, 2014.

The service was opened as a partnership between Portland District Health, South West Healthcare, Barwon Health Cancer Services, South West Oncology and Barwon South Western Regional Integrated Cancer Services.

BLOOMING ON ALL FRONTS

Lloyd has a new lease of life after taking on the job as chief gardener at Harbourside Lodge, after funding was received to upgrade the area including purchase of raised garden beds and gardening tools.

When Lloyd lived on the land he was not a keen gardener, but he has taken a keen interest in the garden and outdoor area of Harbourside Lodge.

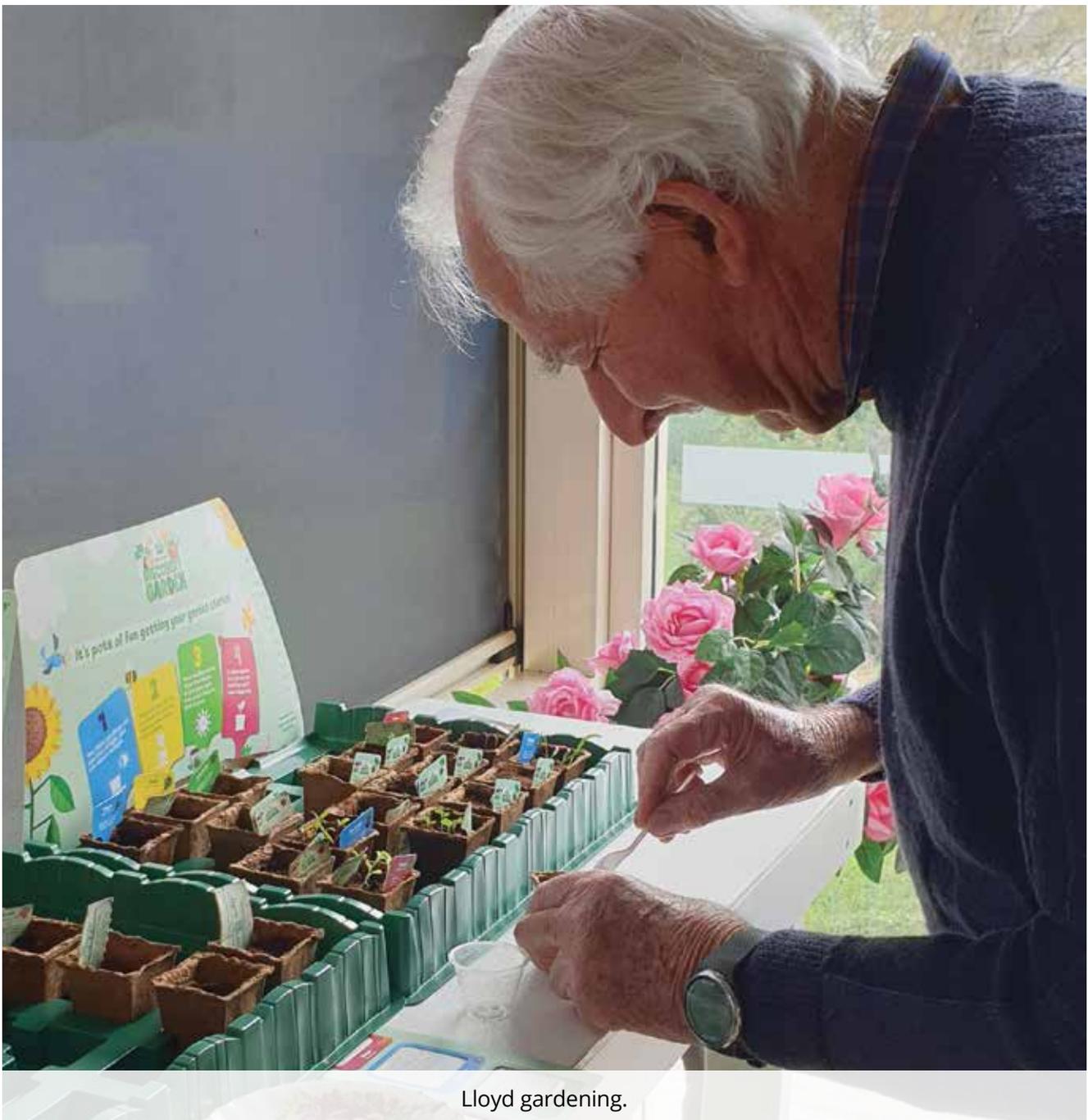
Harbourside Lodge has an undercover working area where Lloyd is currently planting and growing seedlings, and encourages his fellow residents to join in.

When asked what made him take up gardening, Lloyd said he wanted something to do and make himself useful.

"If I can be of assistance, I always like to help."

When Lloyd retired he spent much of his time travelling Australia and around the world. His favourite place was Hawaii, where he said, "People are always on holiday there."

Lloyd is very happy living in Harbourside Lodge and says, "Here I am, here I am staying."



Lloyd gardening.

CONSUMER PARTICIPATION

To Portland District Health, participation occurs when consumers, carers and community members are meaningfully involved in decision making about health policy and planning, care and treatment, and the wellbeing of themselves and the community.

It is about having your say, and listening to the views and ideas of others. In working together, decisions may include a range of perspectives.

CONSUMER ADVISORY COMMITTEE

The Portland District Health (PDH) Consumer Advisory Committee met five times during 2018 - 2019.

The Consumer Advisory Committee is an advisory committee to the Board of Management and provides a central focus for activities relating to consumer involvement across PDH.

The responsibilities of the committee are to:

- Promote the value of consumers, carers and community participation in the delivery of services at PDH
- Identify and advise the Board of Management on priority areas and issues requiring consumer participation
- Participate in relevant organisational opportunities
- Promote communication between PDH, consumers, carers and the community

The Consumer Advisory Committee were involved in a number of activities during the year, including:

- Review of consumer information
- PDH community market
- Promotion of ambulance membership for members of the community
- Inpatient handbook review and development of the Primary Care handbook
- Organisational wide accreditation process across the whole of PDH and Harbourside Lodge
- Compliments and complaints – changes in policy and procedure
- Advise on publications provided to the community
- Development of the Consumer Participation Plan
- Feedback on changes to the Day Procedure Unit
- Development of the Visitor Code of Conduct

In 2018 - 2019, the following people have been involved in the Consumer Advisory Committee:

Anita Rank – Board of Management representative, Portland District Health

Ann Miller – Board of Management representative, Portland District Health (until December 2018)

Michael Bartos – Board of Management representative, Portland District Health (commenced February 2019)

Catherine Walder – Glenelg Shire Council Youth Officer

Ellie Lane – Volunteer representative

Julie Rogers – General patient representative

Janice Lovett – Aboriginal community representative

Tahlia Warren Brand – Aboriginal community representative (commenced May 2019)

Judy Compt – Seniors and Veteran representative

Ken Osborne – RSL and Veteran community representative

Sue Miller – People with a disability representative

Carolyn Malseed – Community Engagement Officer, Portland District Health

Annette Hinchcliffe – Quality Officer, Portland District Health

Claire Holt – Health Information Manager, Portland District Health



Portland District Health's "It's OK to Ask" campaign is constantly refreshed to encourage consumers to be active participants in their care. Some of the focuses for the 2018-2019 year include:

- It's OK to Ask logo graphic
- It's OK to Ask to escalate care
- It's OK to Ask to have your surgery performed at PDH
- It's OK to Ask if your Health care clinician has had their flu injection
- It's OK to Ask to give feedback about your experience

VICTORIAN HEALTHCARE EXPERIENCE SURVEY

PDH RATES HIGHLY IN SURVEY

If you have been admitted to Portland District Health (PDH) during 2018 - 2019 you may have been asked to complete the Victorian Healthcare Experience Survey. The survey seeks to discover the experience of people over the age of 16 who have been discharged from our health service during this time. Of the people who were sent the survey, an average 29% completed and returned the survey.

In 2018 - 2019, PDH was above the state average in most categories.

Overall care received good or very good ratings from 97% of patients who completed the survey.

The results of the VHES are looked at carefully each quarter as they provide a good indication of how our patients experience our services at PDH.

The feedback is used to improve care and services.

PDH continues to improve working with consumers on making arrangements for services on discharge, seeking permission if students accompany a health professional and explaining the purpose of treatments before they were administered.

ADULT INPATIENT

Patients were very satisfied with most aspects of their stay at PDH, in particular:

- Politeness and courtesy of Urgent Care Centre and admission staff
- Care and treatment received by nurses
- Doctors, nurses and other healthcare professionals explained things in a way that could be understood
- Reasons for the delay in being discharged from hospital were explained to the patient
- Hand-wash gels were available for patients and visitors to use
- Friends and family were made to feel welcome to visit patients

Areas identified for improvement included:

- The involvement of family in your care and the opportunity to talk to staff
- The opportunity to talk to a doctor
- Communication with your GP about tests and treatment while you were in hospital
- Communication about the presence of students who accompany health professionals involved in your care

COMMUNITY HEALTH

In October to December 2018, Portland District Health participated in the Community Health Victorian Healthcare Experience Survey. This is the third year the community Health survey has been undertaken across the state of Victoria.

This survey is designed to gain feedback on a client's overall experience with a community health service rather than a specific program. The focus of the survey is adult clients (16 years and older) who receive community and primary health services either on-site through the Consulting Suite or through outreach programs within the last 6 months.

Examples of community based and primary health services that are the focus for the survey include:

- Allied health and diabetes education
- Alcohol and drug rehabilitation services
- Community health program
- Community health nurses
- Complex care and chronic disease care
- Counselling
- District nursing

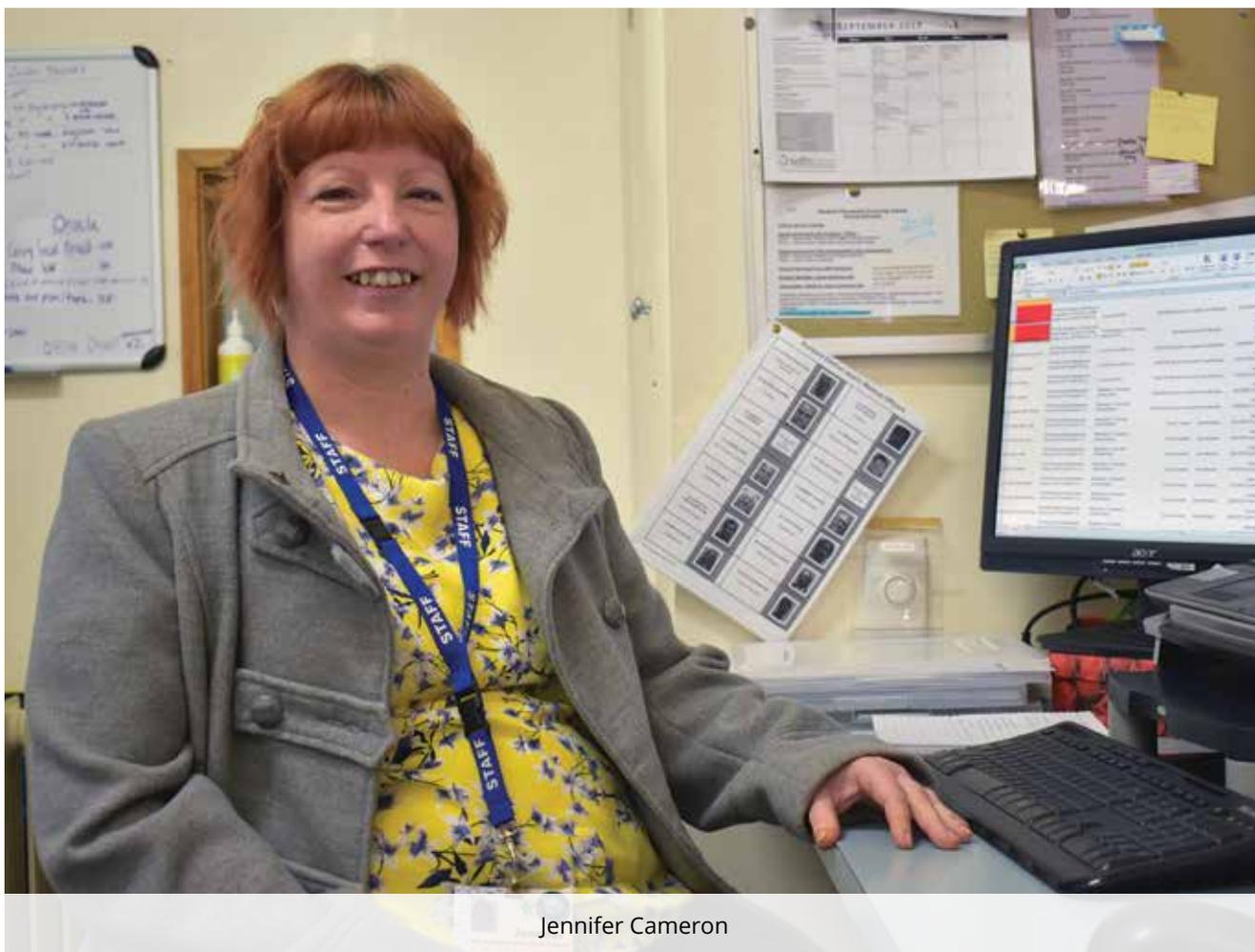
Portland District Health had a 13% response rate (317 questionnaires were sent out and 42 people responded) with an overall positive experience rating of 98%.

People receiving Community Health Services were very happy about the following aspects of their care:

- the politeness and helpfulness of the reception staff
- it was easy to make an appointment
- consumers felt comfortable raising issues and asking questions that were important to them
- the facilities were clean
- they felt physically safe
- a referral to other services to help your health and wellbeing was made if required
- information about your issue or care given to you was adequate

Areas identified for improvement included:

- the number of times when consumers had to repeat information that should be in their medical record
- transportation facilities to get to the health service
- the inclusion of all of the relevant people involved in their care (family)
- the amount of time spent in the waiting area before your appointment
- privacy of consumers at reception



Jennifer Cameron

LIFE CHANGING EMPLOYMENT OPPORTUNITY FOR JENNIFER

Securing a 12-month disability traineeship as an administration clerk at Portland District Health has been life changing for Jennifer Cameron.

"The whole experience has been amazing," Jennifer said. "The best thing has been my confidence. I feel I can do it; I can do a normal job and achieve anything I put my mind to. Doing this has made me realise I'm not as disadvantaged as I thought I was."

Jennifer has a chronic neck injury which has been severely debilitating over the past seven years.

"I had a sore neck one day that got worse and worse," she said. "It was eventually diagnosed as being caused by bulging discs and it has continued to cause me quite a bit of grief. It has been painful but I do my best to keep it under control and I know what to do to prevent it from getting worse."

Jennifer admits the injury was getting her down and her confidence was shot.

"At times it was debilitating and I wasn't sure I was going to work again," she said.

"It gets you down; I reached the stage where I felt quite low but I decided I really wanted to find some sort of work."

Jennifer's WDEA Works Disability Support Officer identified the potential opportunity at PDH.

"She let me know about this position and I was in the right mental state and had just started doing some short courses to help my work opportunities," Jen said.

"Everything lined up. I must have had a good interview and I managed to get the traineeship and it has really changed the course of my life for the better."

While completing the traineeship, Jennifer is studying a Certificate III in Health Administration with Medical Administration Training.

She previously worked in hospitality but that was no longer suitable because of her neck injury.

Jennifer said the PDH workplace exceeded her expectations. "The people I work with are amazing and very supportive. It's all been positive and empowering and now I see choices for my future."

KA-REE-TA NGOOT-YOONG WAT-NAN-DA – GROW HEALTHY TOGETHER

Aboriginal and Torres Strait Islander (ATSI) health services and traditional owner's groups have engaged with mainstream health services to gain a deeper understanding of mainstream health services and the benefits of working together.

Over the last five years in the Southwest of Victoria health care providers and traditional owners have joined forces to develop the Ka-ree-ta Ngoot-yoong Wat-nan-da strategy.

Simple Initiatives to support the strategy include:

- Monthly yarning sessions – rotating organisational host
- Traditional owners group naming our initiatives and programs in local language
- Key events celebrated including Naidoc week calendar of events with local dance group performance, smoking ceremonies, flag raising and annual Mission walk
- Friendly and welcoming organisations
 - Australian, Aboriginal and Torres Strait Islander flags flying at the entrance
 - Signage to acknowledge the Gunditjmara elders
 - Local made gift bags for Aboriginal patients
- Art competition – artwork symbolising the Ka-ree-ta Ngoot-yoong Wat-nan-da strategy, used on name badges.
- Orientation Program with opportunities to go on country with traditional owners.
- All babies born on Gunditjmara country receive a locally designed cot card and bib – design is called seeds by local Gunditjmara woman.

In establishing this simple respectful framework, the groundwork of understanding has been firmly embedded.

At PDH, the Ka-ree-ta Ngoot-yoong Wat-nan-da strategy, with the guidance of our traditional owners, has improved the care for ATSI members of the community.

Initiatives that have been implemented include:

- Gunditjmara elder appointed to the Board of Management at PDH.
- PDH developed an Aboriginal and Torres Strait Islander (ATSI) employment plan increased the % of ATSI employees from 0 to 2.5% of the total workforce.
- Established career pathway entry level positions for nursing and allied health careers and supporting these employees along the journey.
- Contract with local Aboriginal Health Services to provide 24/7 support to ATSI patients in hospital.
- Aboriginal Health Workers are an important part of the care team at Portland District Health.
- Jointly appointed General Practitioner between local ACCHO and Portland District Health.
- NAIDOC ceremony with a smoking ceremony, the flag raising ceremony, performance from the Kondoon Yarkeen Karweeyn Dance Group, guest speakers and morning tea.
- Staff participated in a tour with Tyson Lovett-Murray to Budj Bim, Lake Condah and The Condah Mission, organised by our Aboriginal Trainee to provide cultural knowledge of our Gunditjmara Traditional Owners.
- Aboriginal workforce traineeships in Human Resources and Quality departments completing a Certificate III in Health Administration and Allied Health Assistant (Physiotherapy & Exercise Physiologist) completing a Certificate IV in Allied Health Assistance.

Since 2012 Portland District Health has seen the numbers of Aboriginal and Torres Strait Islander patients seeking services increase by over 200% the organisation is no longer bypassed but is valued as a health care provider in the local community.



CELEBRATING OUR VOLUNTEERS

Portland District Health has 113 active volunteers who have contributed an average of 910 hours per month during the past financial year. This is an increase from the previous year of over 100 hours per month by 9 fewer volunteers.

Activities by volunteers included patient and organisation support, delivering meals on wheels, client transport, Portland Therapy dog visits, activity support in aged care, Telecare and involvement on committees and with events.

Volunteers have undergone training including hand massage, communication with older people, working with those who are hearing impaired, being around conflict and administering first aid.

To officially thank and show our appreciation there were two well attended functions held for our volunteers.

To celebrate National Volunteer Week a morning tea was held and in line with International Day of the Volunteer an end of year presentation evening took place where the Executive Team and PDH Board members cooked and served the 2 course BBQ dinner to demonstrate their ongoing appreciation for the great work of our volunteers.

PORTLAND DISTRICT HEALTH TOTAL VOLUNTEER HOURS FOR 2018- 2019

Service	Totals Volunteer Hours
Community Transport	1792
Consumer Advisory Committee	190
Committee meetings (other)	80
Driving for specialists	330
Events	968
Harbourside Lodge	1931
Hospital and organisation support	1785
Meals on Wheels	3176
Palliative Care	83
Portland Therapy Dog visiting	148
Telecare	440
Total hours for the financial year	10923
Average volunteer hours per month over 12 months = 910	

YEARS OF SERVICE - VOLUNTEERS 2018-2019

35 years

Heather Burton – Life Governor

20 years

Rotary Club of Portland Bay

10 years

Kris Ellis, Jennifer Hutchins, Rudolf Legray

5 years

Natalie Brindle, Susan Burton, Heather Fitzgerald, Brian Linekar

Portland District Health extends sincere thanks to all their volunteers. Patients, clients and staff all appreciate the time and effort they contribute.



Volunteers Rose, Ida and Jeanette with Volunteer Coordinator Jess Mayne.

NEW EQUIPMENT PURCHASED WITH THANKS TO THE SUPPORT OF THE PORTLAND COMMUNITY

- Baby Bilirubin meter
- Singing Strong Project for Harbourside Lodge residents
- Cot for babies in the Urgent Care Centre
- Portable Oxygen Concentrator
- Solar Panel project
- Reverse Osmosis system
- Three first line defibrillator
- Cardiac Output monitor for Theatre
- Two Niki injection syringe pump machines for Palliative Care patients
- Palliative care bed
- VeinViewer Flex (vein finder) for chemotherapy treatment

COMMUNITY TRANSPORT

Portland District Health has approximately 15 volunteer drivers to take local people to a variety of medical appointments, including cancer treatment in Melbourne.

The service, in a hospital-provided car, is hugely beneficial to local people who may not otherwise have a way to get to appointments and it is also enjoyable for volunteers.

Ellie Lane has been involved with community transport for about 30 years, mostly taking people to Melbourne and Geelong. "I like the driving and I enjoy people," she said.

"They've usually got a story to tell."

Jeanette Beaglehole, another community volunteer who joined more recently, drives people mainly to Warrnambool and from their homes to PDH or other medical appointments.

"I've had some great conversations," she said. "It's really amazing to hear the experiences of those people and you develop a nice connection with them."

"There are lots of reasons why people can't go to appointments on their own so it's great that there's a service to help them," Mrs Beaglehole said.

PDH Community Transport Coordinator Ceri Oxford said more drivers were needed to ensure the workload could be spread.

"We don't want to tire drivers by getting them to do too many trips and we need cover when people are on holidays or unavailable for any reason," Ms Oxford said.

"There's a great demand for this service; every morning I have messages for people seeking assistance," she added.

The PDH community transport service is available for people as a back-up to the Red Cross transport service.

If you would like to become involved in this service, you can contact Carolyn Millard at PDH on 5521 0333 and ask about the community transport program. You do need to be licensed and have a good driving record, undergo a police check and be able to communicate with consumers.



Ellie Lane, Jeanette Beaglehole and Ceri Oxford.

TWO VOLUNTEERS MADE PDH LIFE GOVERNORS

Two long-standing volunteers have been made life governors of Portland District Health.

Kevin Phillips and Noelene Flower received their life governor badges at the 2018 Annual General Meeting.

Mr Phillips has been a Meals on Wheels volunteer for 21 years and remains a strong advocate of the program and PDH.

PDH CEO Chris Giles said Mr Phillips has always been willing to suggest and improve new processes for the program, undertaking trials and providing feedback to ensure volunteers and clients receive a quality service.

“Mr Phillips is known to be a true gentleman with a wonderful sense of humour,” she said. “He has always been willing to be called at short notice to fill in, especially on weekends when it is often difficult to find willing volunteers.



Mr Kevin Phillips



Mrs Noelene Flowers

Mrs Flower has delivered Meals on Wheels for the past 17 years and was a hospital volunteer for 10 years.

Ms Giles said Mrs Flower provided care to patients and took on anything extra that she could. “She would spend extra time at PDH to make volunteer aprons, do repairs for Harbourside Lodge resident clothing and other sewing needs,” she added.

“Noelene has always been an extremely reliable volunteer who will do any extra volunteer shifts at very short notice,” Ms Giles said. “Described as a kind, lovely, respectful lady, Noelene is a calming happy person to have as part of our volunteer team.”

PDH values the significant contribution that many individuals make to the overall wellbeing of the organisation.

A life governor badge is the most prestigious award available to a person providing outstanding and continued long services to PDH. Since 1961, PDH has appointed 198 life governors.

PUMPS TO EASE PAIN FOR PALLIATIVE CARE PATIENTS

Two Niki injection pumps donated to Portland District Health will ease the pain for palliative care patients.

Qube Ports donated \$3500 and the Anti-Cancer Council – Portland Unit donated \$2162 for PDH to purchase the two new Niki syringe pump machines.

PDH Nursing Unit Manager for the Sub Acute Ward, Natalie Herbertson, said the pumps were predominantly used in palliative care. They deliver pain relief, anti-nausea and anti-anxiety medication in a steady infusion over a 24-hour period.

“It is very beneficial as it gives an ongoing dose over 24 hours, which makes life more comfortable for patients, particularly those in palliative care,” Ms Herbertson said.

The medication is delivered under the skin, rather than into a vein.

Ms Herbertson said the new pumps were top of the range and featured fully programmable flow

rates and infusion times. They are lightweight and portable, making it easy to provide infusion therapy when it is needed.

Qube Ports Safety Committee and staff nominate the local organisation they want to support each year.

“We aim to support local organisations that are related to our industry and local hospitals provide a service that we or anybody in our community could need at any time,” Ms Freyer said.

Anti-Cancer Council – Portland Unit president Jennifer Craig said the unit was pleased to direct some of its fundraising back into the local community

“We nominated the money raised through our spring shopping spree last year to go to In-patient Palliative Care at Portland District Health,” Ms Craig said. “The new pumps will be an excellent addition for palliative care patients to help with their pain relief.”



Qube Ports and Anti-Cancer Council Portland Unit.

CELEBRATING OUR VOLUNTEERS (Continued)

PORTLAND RESIDENT CELEBRATES 90 YEARS AND 15 CHILDREN WITH DONATION

Portland's Joy Davis is celebrating her 90th birthday and with her 15 children they donated \$7300 to Portland District Health's midwifery service.



Joy Davis

All 15 children were born at PDH, along with 41 of her 59 grandchildren. She also has 18 great grandchildren, including several born at PDH.

"My first child was born in the old bluestone hospital, the third was born in the laundry when they were building the new hospital," she said.

But one thing that never changed was the care Mrs Davis received at PDH. "I'm just so grateful to for the good attention and care that they gave me," she said. "It's just a thank you and a birthday present going back the other way,"

From the donation, \$4700 will be used for new phototherapy lights and \$2600 for two recliners, one for each birth room.

Clinical Midwife Consultant Wendy Buckland said the donation was greatly appreciated and would be very beneficial for mothers.

Phototherapy lights are used to treat babies when they get jaundice. The new light will reduce the need to send babies out of town for care.

Ms Buckland said the new recliners would allow mothers to be clinically assessed and monitored more comfortably.

CWA DONATION TO ADD SOME FUN FOR CHILDREN

Visiting hospital isn't much fun for children but a Country Women's Association (CWA) donation to Portland District Health (PDH) will make it easier.

Children visiting PDH for medical care or with their families can now enjoy a new range of activities thanks to the Portland Burswood CWA branch.

The Burswood CWA ladies have gifted 30 activity bags that will be given to children in the Urgent Care Centre, Day Procedure area and Maternity Ward.

CWA Burswood branch member and one of the craft convenors, Marg Sparrow, was inspired to start the project after reading about a similar program at Allansford in the monthly CWA magazine.

"They give them to children who are going in for treatment or have to wait to see doctors," she said.

"We've had donations of items and the members got together to make up the bags out of nice material. It's not a one-off thing; when these are used up we will make up some more."

PDH Director of Nursing Ros Alexander thanked the CWA for the contribution and said the bags would be greatly appreciated by children.

"Attending hospital can be either boring or stressful for children, whether they are waiting

for a procedure, recovering from a procedure or accompanying a parent," Ms Alexander said.

"These activity bags will help them to pass the time in an enjoyable and constructive way."

Children can use the bags while in hospital, either as a patient or with their families. They can take the bags home.

The bags include a book, paper, colouring pencils, rubber, sharpener and a toy. The cloth bags have been made by CWA members can also be recycled and reused at home.

Initially 30 activity bags have been provided but more could be created, depending on demand.



Country Women's Association

QUALITY AND SAFETY

FEEDBACK

Portland District Health (PDH) values consumer participation and encourages both positive and negative feedback. Your feedback is welcome and will be responded to fairly and in a timely manner. Consumer feedback is seen as an essential part of understanding your experience and provides information to PDH to support improvement in the delivery of services to our community.

Feedback may be received in a number of ways, including:

- Direct to PDH verbally or in written format via
 - comment forms
 - satisfaction surveys
 - service evaluation
 - Consumer Advisory Committee
 - e-mail
 - PDH website
 - meeting with a staff member
- Via the Health Complaints Commissioner
- Via the Aged Care Quality and Safety Commission

Compliments and complaints recorded in 2018 - 2019

- 189 compliments
- 114 complaints

Category	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Compliments	27	11	12	15	41	12	7	18	8	8	20	10
Complaints	21	6	3	8	6	8	16	12	3	10	9	12
Acknowledged within 5 Days	17	5	2	5	6	4	10	8	2	6	7	7
Open > 30 days	11	4	1	2	3	2	4	8	2	2	3	2

Action taken as a result of consumer feedback includes:

- Review of the patient handbook – to include all services and a parking map
- Ongoing education for staff
- Review of policies and procedures
- Review of Escalation of Care Poster



PEOPLE MATTER SURVEY

Portland District Health staff participates annually in the Victorian Public Sector Commission, People Matter Survey.

The People Matter Survey captures employee perceptions of their workplaces in the Victorian public sector. It is an important way of measuring organisational culture and features of the work environment.

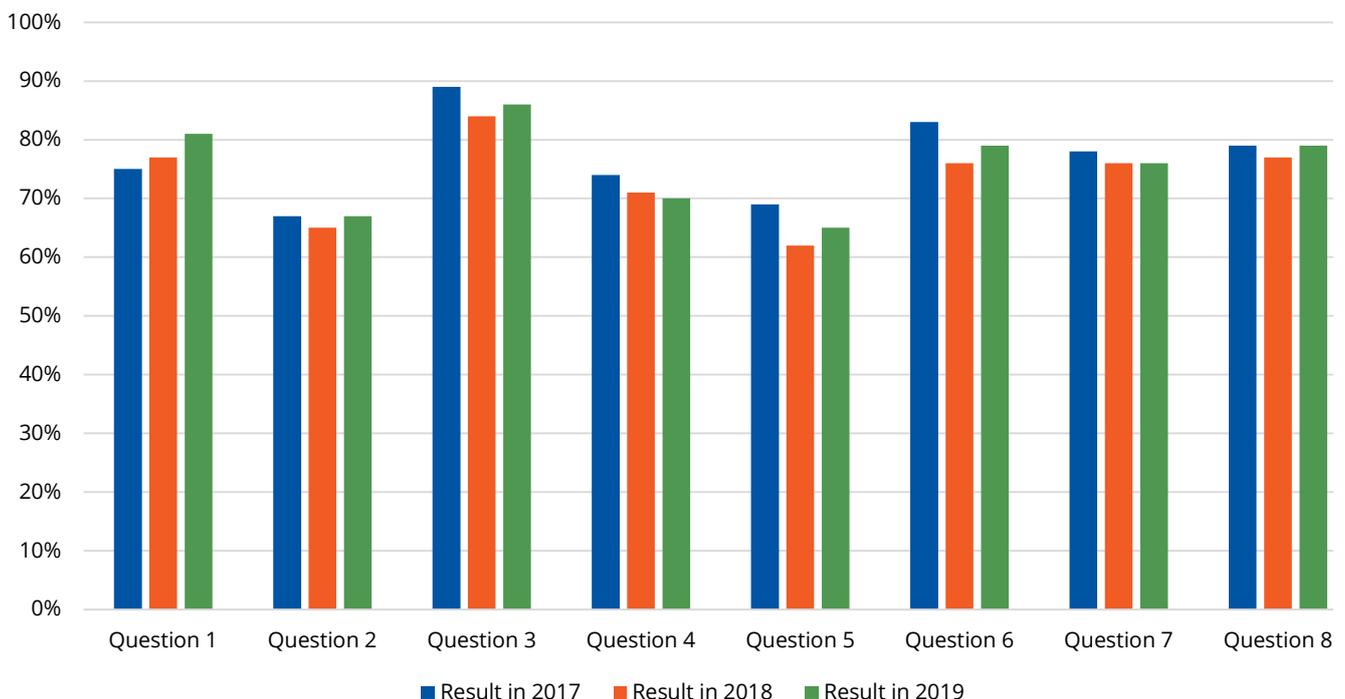
The survey asks employees about how well Portland District Health:

- Upholds the public sector values: integrity, impartially, accountability, leadership, respect, responsiveness and human rights.
- Upholds public sector employment principles: merit, fair and reasonable treatment, equal employment opportunity, avenues of redress, and career public service.
- Engages with their employees
- Addresses discrimination and bullying

The key questions in the survey for staff to answer include:

1. Patient care errors are handled appropriately in my work area
2. This health service does a good job in training new and existing staff
3. I am encouraged by my colleagues to report any patient safety concerns I may have
4. The culture in my work area makes it easy to learn from the errors of others
5. Trainees in my discipline are adequately supervised
6. My suggestions on patient safety would be acted upon if I expressed them to my manager
7. Management is driving us to be a safety-centred organisation
8. I would recommend a friend or relative to be treated as a patient here

RESULTS FROM PDH PEOPLE MATTER SURVEY ON PATIENT SAFETY CULTURE 2018 - 2019



Actions taken as a result of the Peoples Matters Survey

- Development of PDH Staff Wellbeing Plan
- Implemented program of internal culture reviews with a commitment to undertake two Unit reviews annually
- Commenced development of Portland District Health Staff Code of Conduct

ACCREDITATION STATUS

Portland District Health participates in a number of accreditation programs that supports the delivery of safe, high quality health care to established standards for their patients/clients/residents. It is a continuous improvement process by which the achievement of standards must

be demonstrated by means of an independent external peer assessment.

Accreditation is a mandatory process for all Victorian public acute health services and all providers of residential aged care services.

Accreditation Authorities	Status
Australian Council on Healthcare Standards (ACHS)	An Organisational Wide Survey was undertaken in August 2018 with full accreditation achieved until November 2021
Commonwealth Home Support Program	Full accreditation achieved in June 2017
Aged Care Standards Accreditation Agency (ACAA)	Full accreditation was achieved in October 2018
National Association of Testing Authorities (NATA)	May 2016, four year accreditation in the Medical Imaging Department
Post graduate Medical Council of Victoria (PMCV) Accreditation	Achieved accreditation June 2016

ADVERSE EVENTS

Portland District Health (PDH) utilises the Victorian Hospitals Incident Management System (VHIMS) – a central, online register used to report incidents, consumer feedback and quality improvement activities.

All incidents with an Incident Severity Rating of 1 and 2 are managed in accordance with the Department of Health and Human Services Open Disclosure Guidelines. Open Disclosure ensures there is open communication with patients and

their families. The Incident Severity Rating is determined by the level of impact / harm caused.

An external independent representative is included in the significant incident review process to provide valuable objective insight.

High frequency events are reported to appropriate committees for review and evaluation. This ensures a comprehensive response is undertaken to reduce the incidence of these events

PREVENTING AND CONTROLLING HEALTHCARE ASSOCIATED INFECTIONS

Healthcare acquired infections are infections which patients contract whilst in a healthcare facility. Each year millions of people worldwide are affected by healthcare acquired infections, and at the least half of these are thought to be preventable. Risk reduction is a high priority at Portland District Health. Infection control promotes best practice via regular staff education updates, policies, quality improvement activities, auditing and surveillance.

Through monitoring and surveillance, we can identify any problems, review and improve our infection prevention and control strategies. The data from infection rate indicators are mandatorily reported externally each month to VICNISS (Healthcare Associated Infection Surveillance). This

plays an important role in assisting PDH to improve infection control practices. The Infection Control Department works with all areas of PDH to provide information and implement changes that enhance patient outcomes by preventing the acquisition and spread of healthcare acquired infections.

The Infection Control Department continues to partner with consumers such as disability support services, schools, medical clinics and community support groups in providing education, resources and support to various community groups within the region. This partnership ensures the continual sharing of knowledge on current infection control practices with the aim of keeping our community a safe place in which to live.

HAND HYGIENE

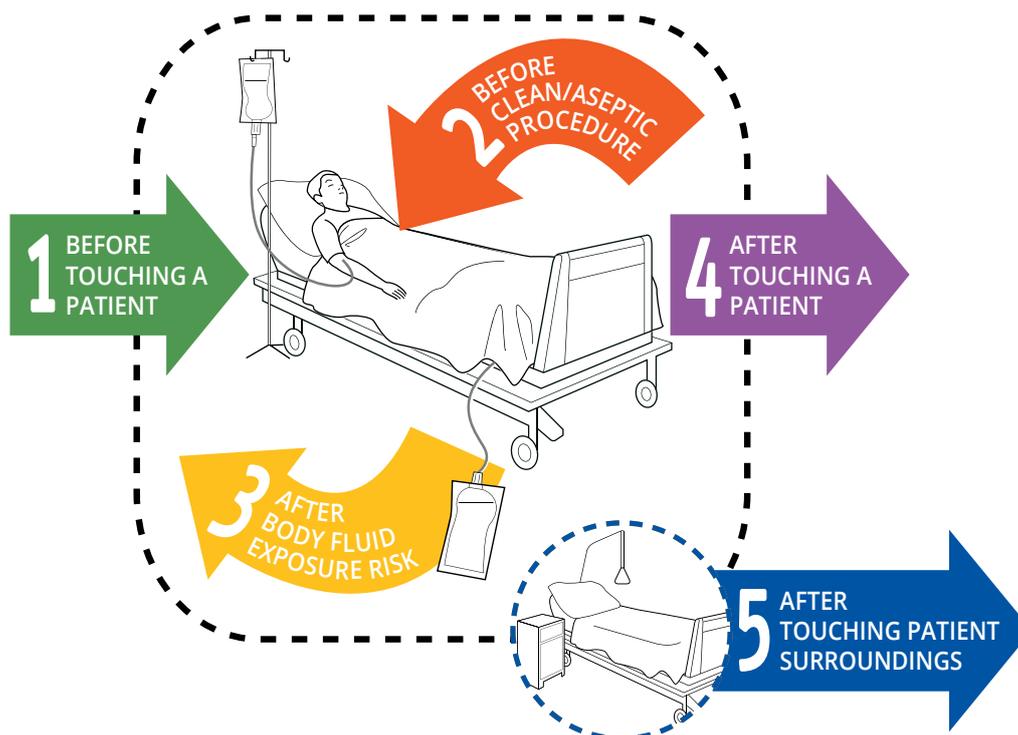
Hand hygiene is the single most effective method of intervention for preventing healthcare associated infections and reducing the spread of infections. Portland District Health is actively involved in the global hand hygiene initiative called the Five Moments of Hand Hygiene, which was launched by the World Health Organisation in 2005.

PDH consistently achieves results above the National average benchmark of 80% which all health services are expected to achieve. Hand hygiene

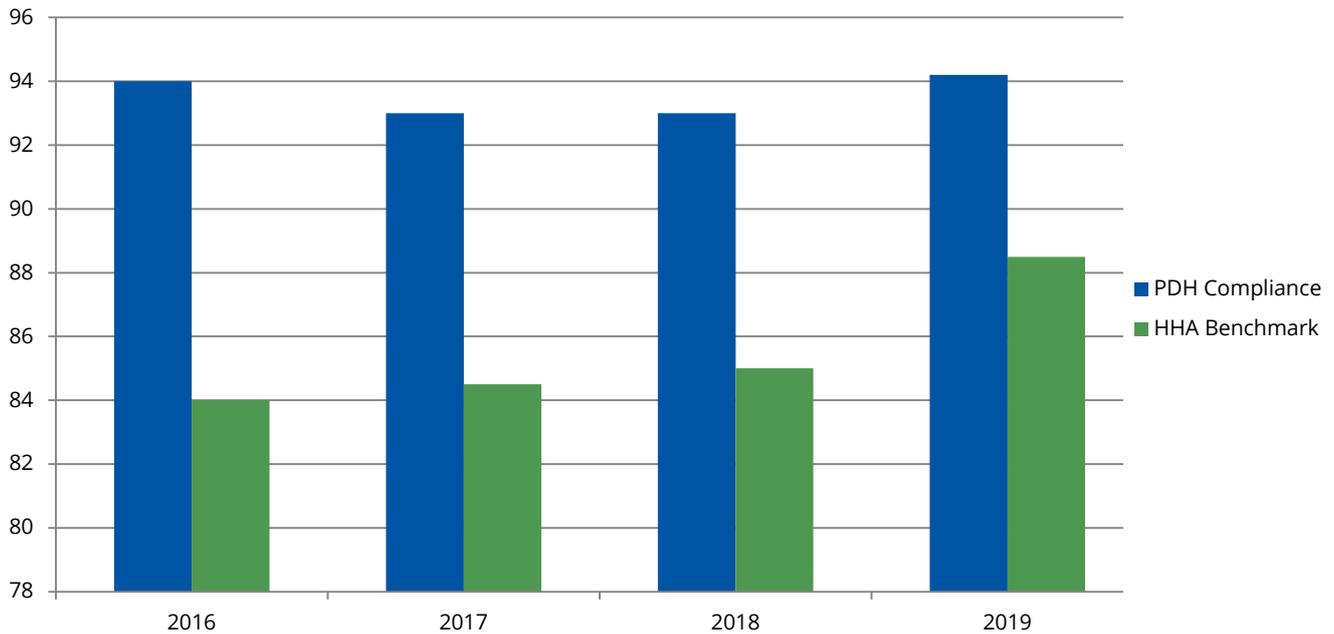
product usage continues to increase each year. Use of alcohol based hand rub products at all points of entry throughout Portland District Health, at the end of patient beds and in key positions throughout PDH has made this possible.

Visitors to PDH also assist in reducing the spread of bugs within our facility by using the alcohol based hand rub. We thank everyone for assisting us to keep you and the staff at PDH safe.

FIVE MOMENTS OF HAND HYGIENE



HAND HYGIENE COMPLIANCE RATES FOR 2016 - 2019



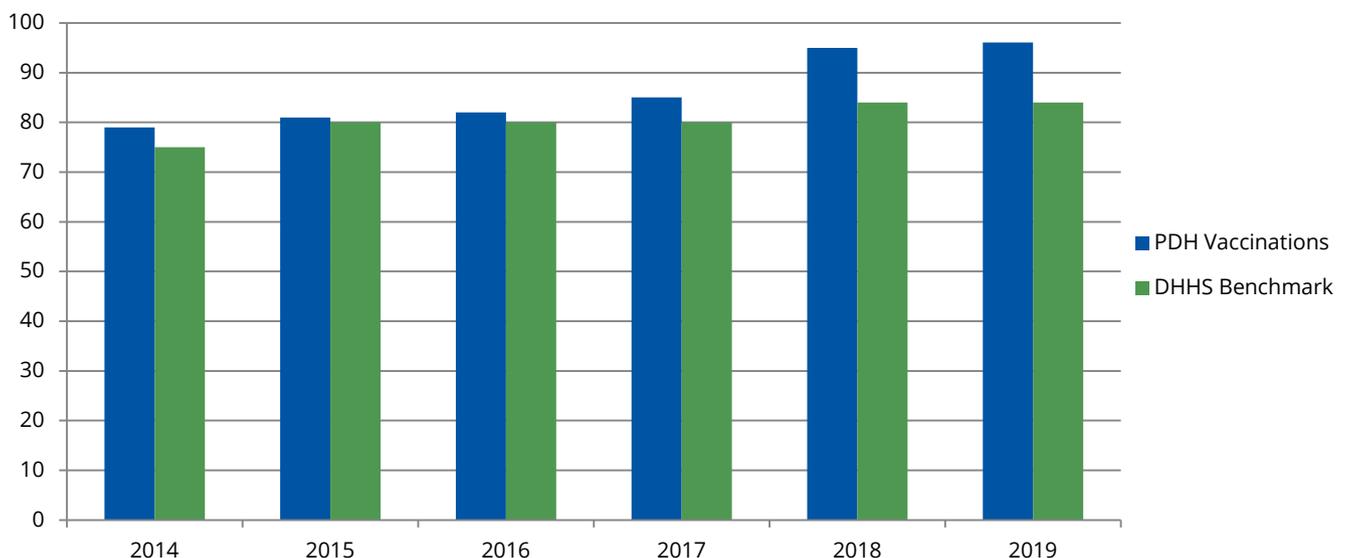
STAFF HEALTH

Staff health and wellbeing is highly valued at Portland District Health. A high immunisation rate among healthcare workers is extremely important in risk reduction within the healthcare setting. Immunisation is a safe, simple and effective way to provide protection for health care workers against serious diseases.

The influenza (flu) virus is a highly contagious virus which spreads easily from person to person causing respiratory tract infection and occasionally pneumonia. In 2019, 96.1% of Portland District Health

staff received the influenza vaccination; exceeding the Department of Health and Human Services state wide target for the health service staff vaccination rate of 84%. To show our continued commitment to the Portland Community and Consumers, all PDH non-influenza vaccinated healthcare workers are required to wear surgical masks, when working within 1 metre of consumers. Influenza information and product stands at all entrances continues to be well supported by consumers and staff of Portland District Health.

STAFF INFLUENZA VACCINATIONS 2014 - 2019

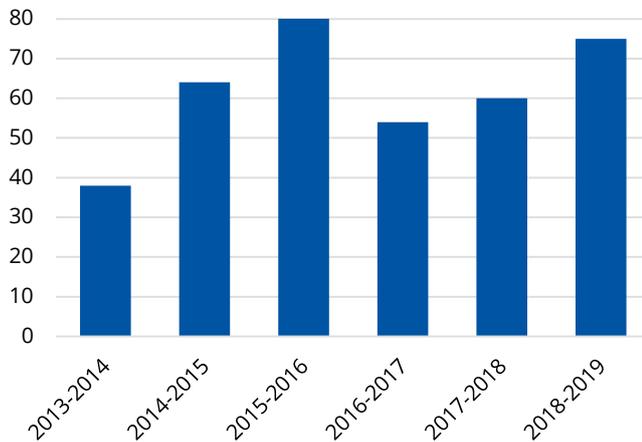


CONTINUITY OF CARE

BIRTHING SERVICES AT PDH

In the last financial year 76 babies were born at Portland District Health.

PDH TOTAL BIRTHS - FINANCIAL YEAR



Maternal and Child Health Nurse
Tahnee Robinson

MATERNAL AND CHILD HEALTH CARE EXPANDS ACROSS GLENELG SHIRE

Since the 1st of April, Portland District Health (PDH) commenced providing Maternal and Child Health services across the Glenelg Shire.

The provision of this service is a perfect fit for PDH and ensures mothers and babies have access to all the services they need and there is continuity of care for mothers and babies.

PDH provides:

- ante-natal services
- labour and birth services
- post-natal care in the hospital and in the home

The Maternal and Child Health service:

- looks after babies from birth through to age five and
- covers the key stages of early childhood development
- early years immunisations
- health checks for mum and baby
- a first-time parent's group

Maternal and Child Health nurses employed by PDH will work alongside midwives and nursing staff and will be given opportunity for further education.

Maternal and Child Health Nurse Tahnee Robinson will facilitate the First Time Parent Group which provides parents the opportunity to meet other new parents, discuss and share the challenging and rewarding role of parenthood and child rearing, and hear about a range of topics specialising in the care of infants and family wellbeing.

The telephone number for all Maternal and Child Health services is 5521 0504 or e-mail mch.pdh@swarh.vic.gov.au.

MATERNAL AND CHILD HEALTH SERVICES ARE AVAILABLE FROM THE FOLLOWING LOCATIONS:

Location	Date	Time
Portland Child and Family Complex Julia Street, Portland	Monday / Every second Wednesday & Thursday	9am - 4.30pm
Active Health Portland Percy Street, Portland	Wednesday	4pm - 7pm
Dhauwurd Wurrung Elderly & Community Health Service (DWECH) 18 Wellington Road, Portland	Friday	8:30am - 5pm
Glenelg Shire Council Heywood Customer Service Centre Edgar Street, Heywood	Tuesday	8:30am - 4pm
Kathleen Millikan Centre 1 - 7 Jackson Street, Casterton	Wednesday / Thursday	9am - 4:30pm by appointment
Dartmoor and District Bush Nursing Centre 28 Ascot Street, Dartmoor	Thursday	by appointment

MATERNITY SERVICES QUALITY INFORMATION

Clinical Indicator:

Percentage of singleton full-term babies (without congenital anomalies) who are considered in poor condition shortly after birth.

Why do we monitor this?

Following birth, some babies will develop problems that require more than normal care. This may require admission to a special care nursery or neonatal intensive care unit.

This indicator focuses on the quality of care during labour, birth and immediately following birth for babies born at greater than 37 weeks without congenital anomalies.

Of the 76 babies born at Portland District Health between July 2018 and June 2019 two were born in poor condition following birth and required ongoing care. (2.63%)

In 2013, 8.4% of infants born in public hospitals at more than 37 weeks and without congenital anomalies required additional care. This was a slight increase from 8.0 % in 2012.

At PDH we review our performance to determine whether there may be avoidable reasons for the higher care needs of babies and regularly provide additional training for staff to manage these babies.

Clinical Indicator:

Percentage of singleton babies with severe foetal growth restriction (FGR) delivered at 40 or more weeks gestation.

Why do we monitor this?

FGR refers to poor growth of a baby during pregnancy. Severe FGR is associated with increased risk of death and long-term health consequences for babies; therefore, it is recommended that

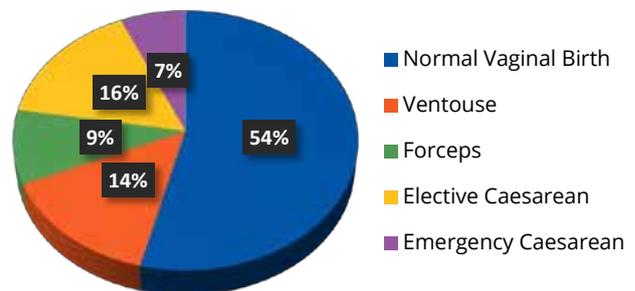
severely growth restricted babies are identified and born before 40 weeks gestation. This indicator is concerned with babies with severe FGR who were not born before 40 weeks gestation, reflecting poor identification and/or management.

The Portland District Health Maternity service closely monitors foetal growth during pregnancy and if ever detected refers these women to the most appropriate level of service. In the reporting period PDH had no babies born who were growth restricted which confirms the competency and confidence of clinicians in assessing foetal wellbeing during pregnancy.

BIRTH STATS 2018 - 2019

Normal Vaginal Birth	41
Ventouse	11
Forceps	7
Elective Caesarean	12
Emergency Caesarean	5
Total Births	76

TYPE OF BIRTH 2018 - 2019



TRAINING AND EDUCATION PROVIDED TO MAINTAIN A SAFE SERVICE

PROMPT (Practical Obstetric Multi Professional Training)

PROMPT is an evidence-based, multi professional obstetric training package that trains all those who care for mothers and their babies together in the effective management of obstetric emergencies.

The program aims to reduce preventable harm for mothers and their babies. We have 4 PROMPT training sessions per year.

Foetal Surveillance Education Program

Every year our Obstetrician and all of our midwives complete a face to face foetal surveillance program to ensure we are up to date in monitoring the wellbeing of unborn babies during pregnancy and

labour. The program is supported by RANZCOG and incorporates the current RANZCOG Intrapartum Foetal Surveillance Clinical Guideline.

Maternity and Newborn Emergencies Program

This was held in Portland in August 2018 and facilitated by educators from The Royal Womens hospital and Paediatric Infant Perinatal Emergency Retrieval (PIPER) Service, The Royal Children's Hospital.

The program delivers specialised and tailored education to maternity and newborn care clinicians in Level 2-4 Maternity Services throughout Victoria. Using simulated emergencies it teaches teamwork and focuses on our local resources targeting ways to continually improve our service.

PALLIATIVE CARE SERVICES AT PDH

Palliative care is an approach that improves the quality of life of patients [adults and children] and their families who are facing problems associated with life-threatening illness. It prevents and relieves suffering through early identification, correct assessment and treatment of pain and other problems - whether physical, psychosocial or spiritual.

Portland District Health staff are dedicated to ensuring optimal end of life care. This specialist dedicated team support people with a life-threatening illness through:

- direct care for people requiring specialist palliative care interventions
- referrals to specialist palliative care nurse for inpatients
- shared care arrangements with other healthcare providers.

PDH works closely with larger healthcare services across South West Victoria and also assists with consultation and advice to other services and healthcare teams providing end-of-life care.

The Palliative Care team play an active role in providing the community with important end of life and palliative care information.

An Annual remembrance service is provided for the families of past palliative care patients which is always well received

ADVANCE CARE PLANNING

Advance Care Planning is something that everyone should consider; not just the elderly or sick.

Portland District Health assists people and families with advance care planning and is encouraging all local residents to have their medical wishes recorded.

Advance Care Planning documents how people want to manage their health care if they lose their decision-making capacity. Everyone should consider appointing a medical treatment decision maker and develop a values and/or instructional directive for future treatments.

Advance Care Planning includes consideration of who you would want to make decisions for you regarding your health and personal care if you were not able to make it yourself and documentation of guidelines around what treatment you may or may not want in the future.

PDH's Community Palliative Care staff and the Hospital Admission Risk Program (HARP) team can help people to set their advance care plans, but GPs, practice nurses, allied health professionals and district nurses can also provide support.

A recent audit by the HARP Team, which includes clients with chronic disease, indicated 100% of clients had completed and Advance Care Plan. 100% of consumers receiving palliative care are provided with the opportunity to complete an advance care plan.

Advance Care Planning presentations have been provided to service clubs along with media releases and local radio programs.

AGED CARE QUALITY INDICATORS

Harbourside Lodge aged care facility participates in a state-wide program that allows for benchmark monitoring and reporting of 5 quality care indicators.

Pressure injuries reduction

PDH met target in 5 out of the 6 indicators in this area.

- PDH Action - All resident's mattresses are assessed by trained staff to ensure they maintain pressure relieving quality.

Use of physical restraint

PDH met all targets in this area.

- PDH Action - Portland District Health policy states that physical restraint will not be used.

Use of nine or more medications

PDH met 1 out of the 4 targets in this area.

- PDH Action - PDH pharmacist performs scheduled medication reviews with recommendations made to assist in ensuring resident prescriptions are appropriate. PDH continues to work closely with Portland GPs to make improvements in this area.

Falls and fractures

PDH met all targets in this area.

- PDH Action - Introduction of Delirium guidelines to assist with the early recognition and management of a resident who may be experiencing a delirium episode.

Unplanned weight loss

PDH met all targets in this area.

- PDH Action - PDH continue to utilise dietetic services to advise on optimal dietary requirements for residents.

These indicators are reported at the Quality, Safety and Risk Management Committee on a quarterly basis. Results are also displayed in public areas in Harbourside Lodge.

OUR NEXT GENERATION OF HEALTH WORKERS

Portland District Health plays an important role in developing our next generation of health workers and is committed to supporting lifelong learning and on-the-job training opportunities. It is important to have and maintain a highly skilled workforce with a flexible education and training framework around mandatory and specific discipline scope of practice requirements for different disciplines in a healthcare organisation. PDH sees education and training of staff and students as essential to grow, support and provide a person centred care approach and to grow its workforce to support the community.

In 2018-19 PDH has been host to approximately 133 undergraduate students on work placements from the following education providers: Deakin University, University of South Australia, THINK Education, South West Institute of TAFE, and LaTrobe University.

This years confirmed placements consist of students from the following disciplines: Medicine, Midwifery, Nursing – Registered and Enrolled, Radiography/Medical Imaging, Exercise

Physiology, Occupational Therapy, Paramedicine, Physiotherapy, Pharmacy and Speech Pathology.

Hosting students exposes them to all that PDH and the community offer. The placement provides a pathway and inspires and opens a way for students to return to work at PDH once they have graduated.

Some feedback from students on placement:

"The best part of this placement was getting to experience the roles of other health professionals and how everybody in the workplace works as a team. Also, learning new concepts gave me a sense of satisfaction." (Pharmacy placement)

"The exposure to very unwell patients, having calm and knowledgeable preceptors willing to share their knowledge with me." (RN placement)

"The opportunities I received to increase my confidence and independence as a student nurse. Every shift I was encouraged and supported and I got to experience a variety of patients to care for." (RN placement)

PDH RECRUITS NEW PORTLAND-BASED PAEDIATRICIAN

Portland District Health has appointed an on-site paediatrician, the first to be based here for many years. Dr Britta Baade relocated from Traralgon to take up the position.

In recent years PDH has been using the services of visiting paediatricians from Warrnambool.

"Dr Baade is a terrific addition to the services we offer for babies and young children in Portland," Ms Giles said.

"We are always looking to provide the best specialised services to our community and having a locally-based paediatrician will add to that."

Dr Baade is based full-time at PDH and is enjoying her new role and home town.

"I like regional work and I love living near the water; I think this is a very beautiful region," she said.

Originally from Germany, Dr Baade moved to Australia 15 years ago. She completed her paediatric training mainly at the Royal Children's Hospital and Monash Children's Hospital in Melbourne and also worked in emergency medicine for a year and spent a year working in north Queensland.

She was attracted to Australia by its positive medical reputation.

"After medical school I wanted to concentrate on paediatrics and I was told there were better working conditions and training opportunities in Australia, which proved to be true," she said.

Dr Baade said working in paediatrics was always her top choice. "It's nice to work with children; they're so honest and direct," she said.

"Their pathology is often very different to adults and you can really make a long-term difference when working with children."

Dr Baade said she is impressed with PDH's staff and facilities.

"Everyone is very motivated and have a good understanding of the paediatric area."



Dr Britta Baade

NEW DIRECTOR OF PRIMARY CARE

Margaret Cadenhead moved from one side of Australia to the other with a passion for primary health care and community health.

Portland District Health's new Director of Primary Care has worked across many health disciplines in Victoria, Queensland and Western Australia.

After starting her career as a registered nurse, Ms Cadenhead has moved into management positions in primary health care, community health, Indigenous health and aged care.

Most recently she has been coordinating a remote indigenous health program helping to facilitate services for aged and younger people with disabilities.

Based in Broome, she worked across remote communities to train local people to become community care workers and carers. "It was a community-development model where we worked with people in the communities to develop the services," she said.

The shift to Portland was a big change – particularly the cooler temperatures, but Ms Cadenhead is no

stranger to the region having previously worked in Horsham, Camperdown and Warrnambool.

"I've always liked this area," she said. "I like being on the coast and it's nice to be somewhere a bit cooler."

Ms Cadenhead is impressed with PDH. "I really like the vision, mission and strategic direction of PDH and what the health service is achieving," she said.

"I'm particularly impressed how PDH is developing pathways into services and with the health and sustainability programs, such as the SEACHange strategy to address obesity concerns and the drinking water quality programs.

Ms Cadenhead said her role provided a link between PDH and the community. "Primary care is the first link between the hospital and community for all non-admitted services," she said.

"PDH has excellent primary care services with GPs and various rehabilitation programs and we will continue to build on the good foundations already in place to make sure we provide a good stepping stone to services for the community and help people on their health journey."



Nicole Angelino, United Way & Margaret Cadenhead, Good Samaritan Fund.



STAFF LENGTH OF SERVICE AWARDS

35 Years

Carolyn Berry
Robyn Flower
Elaine Greig
Margaret Stephenson

30 Years

Winifred (Una) Cancian
Kerryn Cottier
Vivienne Easson
Jenny Matthews

20 Years

Helen Carey
Jennifer Roberts

15 Years

Lisa Barby
Tanya Berry
Danelle Crimmins
Tanya Daniel
Melinda Fyfe
Helen Hegarty
Emily Hinch
Annette Hinchcliffe
Nikolas Kedzia
Donna Kilgour
Rebecca Mullen

10 Years

Zoe Bannam
Adele Curran
Chloe Deans
Amanda Lishman
Meagan Nelson
Chloe Nunn
Helen Roberts
Susan Schmetzer
Sonia Shelton





*Our Community,
Your Health*



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