



CEO's Message

The last 12 months have been a busy time for Latrobe Community Health Service (LCHS). We adopted a deliberate and strategic growth policy, which saw us seeking and securing new business.

Notably, we successfully tendered for local area coordination services for the National Disability Insurance Scheme (NDIS) in Victoria's Central Highlands region. The NDIS will be available in the region from January 2017.

We continued to grow the number of Home Care Packages delivered in Gippsland, Hume and Grampians, and secured new packages in Melbourne's eastern metropolitan region. The aged care services landscape is set to change in February 2017, and we want to be well-positioned as a provider of choice.

We also took over the delivery of GP services at La Trobe University's Medical Centre in Bundoora, where we now serve a population of almost 30,000 students, staff and residents. This brings the total of our GP clinics to six. In Gippsland, we opened the doors of our Newmason Medical Centre in Warragul, and completed the redevelopment of our Moe site. We took over the operation of headspace Morwell, a mental health service specifically for young people. We are also set to expand our Churchill site and build a dental prosthetics laboratory after securing funding from the Federal Government.

Even as we expand our service offerings and geographical reach, we know how important it is to continue to provide excellent services to our existing clients and the communities who have grown with us.

More of our achievements, client stories and service updates are outlined here in the 2016 Quality of Care Report. We have distributed this report widely:

- copies are available at every LCHS site and we have also mailed copies to our members and key stakeholders.
- an electronic copy of the report has been uploaded to our website www.lchs.com.au
- a full-page summary of this report has been placed in local newspapers.



To ensure this report continues to be relevant to you, we would appreciate it if you could complete the evaluation survey at the back of this report. Or, you can provide feedback directly to our Quality program on 1800 242 696.

Thank you to all our clients, volunteers and staff who have helped create this report. We look forward to another year of providing quality services to you.

Ben Leigh, Chief Executive Officer



About Us

LCHS is a major provider of health and support services in Gippsland and regional Victoria. We are a not-for-profit organisation and one of the largest incorporated community health services in Victoria.

We provide support to individuals, families and communities and are committed to preventing health problems through information and awareness. We are also committed to providing coordinated services that treat our clients as a whole person, and not as a series of isolated medical problems.

LCHS has a reputation for quality care across a wide range of health services including:

- community-based health promotion programs
- daily living and rehabilitation assistance
- health checks and healthcare plans
- medical care and nursing.

We are particularly committed to helping the people who need us most, especially those with several health problems and high support needs.

Overview of our Services

General Health

- Counselling and psychology services
- Dental
- Doctors
- Podiatry
- Nursing services
- Nutrition and dietetics
- Occupational therapy
- Physiotherapy
- Speech pathology
- Moe After Hours Medical Service (MAHMS)

Gambling, Alcohol and Drug Support Services

Chronic Disease Management

- Diabetes
- Hepatitis C
- Lymphoedema
- Respiratory program
- Wound care

Aged, Disability and Carers

- Aged care
- Carer support
- Continence
- Dementia services
- Disability
- Palliative Care

Community

- Auslan interpreters
- Cook, eat and socialise with the community
- Emergency relief
- Health promotion
- Koorie care
- Migrant and refugee support
- Volunteer program

Children and Families

- Early parenting day stay program
- Family violence counselling service
- Support for children and families

Pictured top right: Volunteer Coordinator Adriana Pezzuto with Buddy Bear participants Charlie and Jennifer. Bottom right: Members of the Gippsland Auslan Interpreting Service committee.







Overview of Report

All health providers in Victoria produce a Quality of Care Report. The report showcases examples of how we listened to our clients and improved our performance. Each story provides insight into one or more of the following areas.

Consumer, Carer and Community Participation - how have we listened to our clients, and worked to incorporate their feedback into our work

Koorie Engagement – what have we done to ensure we are reaching out to the members of our Indigenous community

Quality and Safety - overview of our quality and safety systems and what have we done to:

- prevent and control healthcare associated infections
- ensure medication is stored and administered in a safe way
- prevent falls and harm from falls
- track and minimise unplanned return visits to the dentist

Applied Research Projects – what research we are doing, and how it could help our clients

Diversity – how we are working to include people, regardless of age, race, gender, disability or sexual orientation

Continuity of Care – how we are working across health, from prevention to treatment, through to full recovery

Chronic and Complex Conditions – how we are helping people with multiple longstanding health issues

Health Promotion – how we are educating the community on their health, so that they stay healthy for longer

Left: Our new premises at Newmason in Warragul.

Community Participation

PAG Program

The Planned Activity Group (PAG) offers a stimulating day centre and community based program for the frail, aged and people with a disability so they can meet new friends and reduce the risk of social isolation.

Our clients are actively involved in the selection and planning of program activities:

- There is a strong health and wellbeing focus in our programs ranging from healthy food choices to physical activity themes. During the warmer months the Moe group facilitated a swimming program. Initially there were only a few clients swimming but grew to six clients by the end of the program. The program success means it will be offered again in the summer months across many groups.
- Other healthy activities include outings to national parks, walks, exercise programs in the centre, BBQs and beach strolls.

Our PAG clients are very keen on community outings to attend key events such as:

- local museums
- community celebrations of interest
- melodies to enjoy local artists

- many contemporary cafes
- themed activities embracing the opportunity to get together, have fun and dance to a local entertainer.

We have robust, goal directed care plans which encourage clients to set and work towards achievable community involvement. Plans are reviewed yearly with each person.

Health Champions

The Health Champions Latrobe initiative recognises community members who help others to move more, eat well and connect with others in the places where we live, work and play. They have established an Action Group to create community led action on healthy eating, physical activity, community connectedness, advocacy and capacity building. A number of Champions have been trained in a program called Food Cents which has been delivered in schools.

We are working on a community engagement strategy to further promote the Health Champion concept using a mascot and social media activities.

We provide advice, support and events to inspire and help 246 recognised Health Champions collaborate with like-minded people.





Top: Health Champions networking meeting. Bottom: Moe Planned Activity Group participants Jean and Fave.

January 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
New Years Day	New Years Day holiday					
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
			_	Australia Day		
29	30	31				

Healthy Tip – Stay safe in the sun

Protect your skin with sunscreen, hats, sunglasses and protective clothing.



Community Participation

Volunteer Week Celebrations

The number of LCHS volunteers has grown in the past year to over 85 extraordinary people who donate their time and talents to support LCHS services. They now support programs across all directorates and LCHS sites.

During the Volunteer Week Celebrations in May 2016, Karen Spark was named 2016 LCHS Volunteer of the Year. Karen has been volunteering at LCHS since 2014 and her roles include, Tuckerbox, centre volunteer for our Planned Activity Group and Creative Club as well as being a Community Visitor.

Karen shows great kindness and strength to volunteers, staff and clients and received eight nominations.

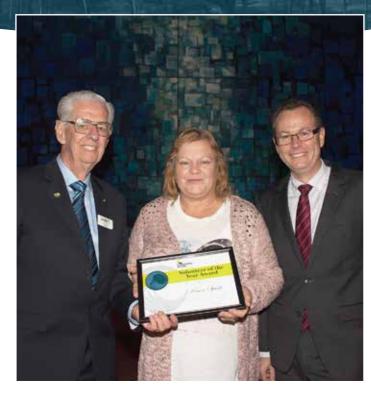
"Karen has gained the trust and respect of all our clients. She tirelessly ensures that all the clients are well fed on a Monday with meals both nutritiously wholesome and very tasty. She relates well to the clients, treating them with dignity and respect at all times."

"Karen is a crucial part of our team and helps LCHS to be a successful environment and a healthy place to work and be. The work she completes in our team is only a small part of her work and wider contribution to LCHS, our clients and the community."

During the celebrations, milestone awards were presented to the following volunteers, recognising their exceptional years of service:

- 10 years Verna Mackenzie
- 5 years Leslie Watson
- 5 years Rosalie Hamilton

- 10 years Judy Bone
- 5 years Dianne Watson



Latrobe Community Health Service Chairperson John Guy, Volunteer of the Year Karen Spark and Executive Director Corporate Rick Davies.

February 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
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5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28			o – Keep activ	



Community Participation

Connected Communities Carers Group

The Connected Communities Carers Group has been operating for two and a half years. We have over 30 carers who develop their own program of activities and regularly attend our monthly gatherings. The themes are social, recreational and emotional. This group offers carers an opportunity to get together, socialise and develop friendships with others in similar situations.

Over the past 12 months our Carers have:

- had a number of information sessions such as Caring for the Carer, Dementia Awareness information sessions and Palliative Care
- visited the Rhododendron gardens, Timeless Memories museum in Sale, Rosedale, the Dandenong's, Walhalla, Port Albert for fish and chips, Frankston to see the sandcastles and Turra Bulga for a BBQ and bush walk.

Our Carers group continues to offer more interesting activities to meet the varied needs of carers.

Treasured friendships have been developed through involvement within our group and a few Carers have ventured away on small holidays together with their loved ones.

Palliative Care -Remembrance Day

The LCHS Palliative Care service hosted the 6th annual commemorative afternoon tea for over 50 family members, staff and volunteers to recognise how they have touched lives.

The service has flourished under the keen guidance of Pastoral Care Nurse Michelle Davy. She has introduced opportunities for carers and families to contribute memories by adding a 'Patch' to the 'Palliative Care Quilt' which has been under construction for a year. Michelle has also commenced a Palliative Care carers workshop where



The Remembrance Week quilt produced by family members honouring loved ones.

carers entering our service can meet our staff and obtain advice on:

- what support we can offer
- some insights into what they may face when caring for a loved one at end of life.

The workshop runs three times per year or according to demand and includes four short face to face afternoon sessions.

This year we are planning on implementing a Remembrance Christmas tree where family members can write the name and a message to a loved one on a paper decoration, hang it on the tree then the decorations will be planted in a garden dedicated to Palliative Care.

March 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Healthy Tip — Eat breakfast! Breakfast gives you the energy you need for your day and improves your concentration.			1	2	3	4
5	6	7	8	9	10	11
12	13 Labour Day	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	



Koorie Engagement

Koolin Balit Oral Health Promotion Project

LCHS participates in the 'Koolin Balit Oral Health Promotion Project' in collaboration with Ramahyuck (RDAC) and Gippsland & East Gippsland Aboriginal Co-op (GEGAC). All organisations are committed to promoting oral health and hygiene within the aboriginal community, focused mainly on the 0-6 age group.

We attend local:

- child care/kindergarten centres for 'Dental Screening Days'
- play/parenting groups for 'Oral Health & Hygiene Presentations' and give out show bags to help encourage good oral health habits.

We work with our local agencies to promote our dental screenings and oral health presentations. The service is free for Aboriginal & Torres Straight Islander patients with a current Health Care Card or Pension Concession Card. We can also offer referrals when necessary for further dental related care; for example, Royal Dental Hospital Melbourne.

We have our dental triage service to ensure our clients are given the required care.

The Koolin Balit Project also delivered the 'Bigger Better Smiles' workshop in October 2015. This was an initiative for local health workers who are frequently in contact with our local aboriginal community 'target' age group. The training was intended to assist in providing sound dental care advice and referring their clients to their local community dental services as needed. The participants were also trained in the 'Lift the Lip' workshop, where a simple lift of the lip was enough to detect any obvious dental problems, and if a referral to dental services was required. Overall, the workshop was a great success, with positive feedback from all attendees.



Koorie Liaison Worker Providing Support to Carers

Carer Programs recently recruited Glenys Watts, a new program Koorie Liaison Worker to our Bairnsdale office. Glenys, pictured above, is a Gunaikurnai Woman with a strong background in working with Indigenous communities in community development. She has a sound understanding of issues affecting Koorie communities. She is also focused on working with carers of people who may have a mental illness. Glenys is developing relationships with Koorie community members, Koorie specific agencies and local mental health services to inform them about her role and supports available through LCHS. She aims to:

- identify barriers to accessing community support and respite services
- facilitate improved access to these through knowledge sharing and relationship building.

April 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday		
30		Healthy Tip — Don't over indulge! Easter eggs are a delicious treat but enjoy in moderation.						
2	3	4	5	6	7	8		
9	10	11	12	13	14 Good Friday	15 Easter Saturday		
16 Easter Sunday	17 Easter Monday	18	19	20	21	22		
23	24	25 Anzac Day	26	27	28	29		



Koorie Engagement

Reconciliation Art Competition

In February 2016 the Reconciliation Action Plan (RAP) Working Group held a very successful art competition to announce our renewed RAP and invite Aboriginal and Torres Strait Islander people in Gippsland to visit LCHS.

Art competition entries with the theme 'Reconciliation, tolerance and respect through togetherness' were invited from across the region.

We received six entries from incredibly talented artists and they were displayed for one week in our Morwell office foyer so that people could vote for their favourite piece. About 50 community members attended our community open day to enjoy activities, share lunch and hear the announcement of the 'people's choice' competition winners.

Helen Treadgold's work won first prize, with her description -

"Togetherness... Is families and people helping each other to be strong and holding them up so they can stay together, no matter what colour the hands are helping. It is enduring life and happiness together."

Gloria Whalan won second prize with -

"Man should care not only for his brother, but for the native animals that live in the surrounding country. The life of all creatures is important to our land."

The RAP Working Group comprises the Aboriginal and Torres Strait Islander staff at LCHS. The group is holding an annual themed Art Competition and Community Day so we can report our RAP progress to the community and celebrate Aboriginal and Torres Strait Islander culture.

Koorie Specific ACAS Brochure

In 2015, with input from the National Aborigines and Islanders Day Observance Committee (NAIDOC), the Gippsland Aged Care Assessment Services team (ACAS) developed and released a Koorie specific ACAS brochure. This brochure has been distributed to all Aboriginal and Torres Strait Islander health services across Gippsland.

Pictured right: Some of the artwork on display at our Morwell site during the Koorie art show.







May 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	3 1	vaccinat	Tip — Have yo tions? LCHS provid te the Winter months	



Quality and Safety

Dental Clinical Indicators

We have met all Quality of Care indicators set by Dental Health Service Victoria that are measured against State averages over the last year. These include:

- Restorative retreatment within 6 months for adults
- Restorative retreatment within 6 months for children
- Unplanned return within 7 days following routine extraction of tooth
- Unplanned return within 7 days following surgical extraction of tooth
- Extraction of teeth within 12 months of endodontic treatment
- Denture remakes within 12 months
- Fissure seal retreatment within 2 years for children.

We also exceeded all the targets set for Triage Compliance. These include:

- Category 1 emergency appointments within 24 hours (target 85%, achieved 91.8%)
- Category 2 emergency appointments within 7 days (target 80%, achieved 88.45%)
- Category 3 emergency appointments within 14 days (target 75%, achieved 94.5%)

In 2015/16, our Dental program:

- treated 12,527 patients across our Clinics at Churchill, Moe, Morwell and Warragul. This included 6.957 adults and 5.570 children. We provided care to 417 Aboriginal and Torres Strait Islanders, 19 refugees, 4 asylum seekers and 3 homeless (or at risk of homelessness) patients.
- provided a total of 27,450 courses of care. This included 16,916 appointments for adults and 10,534 appointments for children.
- removed 2,524 patients from the general waitlist, however added 2,962.



A dental assistant unloads dental instruments that have been sterilised.

- removed 414 patients from the denture waitlist, however added 756.
- exceeded targets in the provision of emergency care appointments (a total of 48% of all our appointments were for emergency care, above the target of 40%).

These figures indicate that the number of new patients being added to our waiting lists continue to rise at a greater rate than we are able to remove from the list, demonstrating the continued and growing demand for public dental services in our area.

Quality and Safety

Providing High Quality and Safe Services

LCHS is committed to providing high quality services, in a safe environment for everyone. We have an organisational Quality Framework to:

- monitor safety and quality
- enhance clinical care.

We constantly strive to improve the delivery of our services by:

- responding to community feedback
- applying and measuring improvement initiatives
- performing internal audits of program areas.

We follow a structured governance reporting process and meet all external accreditation requirements:

- LCHS has a current three year organisational accreditation against the following standards:
 - Quality Improvement Council
 - Human Services
 - National Safety and Quality Health Service.

This helps us to confirm we are providing quality services to you and meeting, or exceeding, all legislative requirements.

Infection Control

This year we have concentrated on hand hygiene which according to evidence, is the main cause of cross infection especially in health services. All existing and new staff undertake online hand hygiene training and testing. In addition, two Ambulatory Care staff have undertaken further advanced training so they can undertake audits and spot checks. In June they visited sites and did spot audits on how well staff are washing their hands. The fluorescent wash and ultraviolet light showed staff where they missed washing hands thoroughly.

This same strategy will be used to check highly used clinical areas to determine how well the surfaces are being cleaned in order to reduce the risk of cross contamination.

Staff Survey

Latrobe Community Health Service undertakes an annual staff survey to gauge the level of satisfaction and to seek opportunities for improvement from our staff. The survey is held over four weeks to provide the staff with the opportunity to respond. The staff are secure in the knowledge that their comments and responses are anonymous.

The 2015 survey was responded to by 73% of staff, which was 1% higher than the previous year. The organisation is categorised at the high end of a 'Culture of Consolidation'. The range of engagement within programs is between a high rating of 71% and a low rating of 28%; this is

typical in a culture of consolidation. The survey showed that 70% of staff believe that LCHS is a truly great place to work. This is a 9% increase over the last 2 years.

From the responses received an organisational action plan was developed to assist in addressing the concerns or identified issues of the staff. Actions were categorised into six areas with responses to address the identified issues:

- 1. **Keep staff engaged** We will ensure that all staff – especially long-term staff – remain motivated, informed and engaged as LCHS grows and changes
- 2. Create a safe environment we value staff. This will be reflected in high understanding and use of our OH&S incident reporting
- 3. Ensure quality record keeping More regular review of records and a minimum quality benchmark will drive improvements to client record keeping
- 4. Foster Community Engagement If we want to be front of mind in the community, then we must do more to be in the community
- 5. Provide excellent customer service Our frontline staff must be equipped with the right knowledge to ensure they are our front of house experts
- 6. **Improve how we communicate** The executive team will continue to create opportunities to celebrate successes and share future plans

Quality and Safety

Preventing Falls and Harm from Falls

A fall includes any slips, trips, falling into other people, loss of balance or legs giving way.

There are many personal factors that can result in falls including cognition, decline in eyesight, nutrition and a fear of falling. Environmental factors include clothing choices, rugs, clutter and uneven footpaths. One third of people over 60 have at least one fall per year, with the figures increasing to 50% for people over 80. However the majority of falls are preventable and are not simply a normal part of aging.

Our Occupational Therapy team helps to reduce the risk of falls in the home by:

- providing education on strategies to reduce falls; for example, removing mats and clutter from walkways
- providing equipment that can make tasks easier and safer to perform; for example, a shower stool
- recommending modifications around an individual's home; for example, rails to increase safety when managing steps or ramps.

Implementing these strategies with individuals enables them to live safely and independently in their homes.

Applied Research Projects

The LCHS Research Council guides, monitors and supports internal research and advises on external requests for research collaborations. The Executive supports and encourages internal research and the CEO Research Scholarship is available for LCHS staff who are interested in conducting a project. Academics from the Monash University Department of Rural Health support the research process by assisting staff to develop their research question, submit Ethics applications and conduct a literature review.

- 1. The Guided Care Project an approach to partnering with the client who presents with a chronic and complex disease and developing a collaborative management plan guided by patient directed functional goals. The research project will evaluate the approach for improving quality and access to services for the LCHS patient.
- 2. Evaluation of the podiatry led high risk foot clinic which was established late last year at LCHS in conjunction with an advanced practice role in podiatry, a project funded by DHHS. This research will evaluate clinical indicators and the experience of staff and patients to enable further development of the model and better health outcomes for patients with high risk foot conditions.

Both these initiatives demonstrate LCHS's commitment to improving service delivery for a quality client experience.

Diversity

Dementia Access & Support Program

The Dementia Access & Support program assists carers and people who have memory loss to access mainstream support services in their community. The program works very closely with family members and supports all aspects of their changing lives until a sustainable solution is reached.

We facilitate two Carers Group – Bairnsdale and Sale. These groups are a necessary support mechanism for attendees. At these monthly meetings relationships are developed, carers share their stories and gain support from others who are in similar caring roles and quest speakers talk about topics of interest and relevance.

Understanding Scarves and Understanding Journeys

The Settlement Services program undertook many innovative community celebrations over the past 12 months, with two of the most successful highlights being:

• 'Understanding Scarves' is a community celebration specifically for women showcasing the Muslim faith. These events have been hosted in partnership with Latrobe City,

United Muslim Sisters Latrobe Valley, Centre for Multicultural Youth and Gippsland Ethnic Communities Council.

The Understanding Scarves events were held in the Latrobe Valley, Warragul, Sale, Wonthaggi and Bairnsdale with the aim of:

- raising awareness of the Muslim faith
- talking about common myths
- for Muslim women to share their experiences of their faith and their culture.

Women were taught how to tie a scarf before enjoying a traditional lunch. Each event was well attended and all who participated enjoyed the experience of sisterhood and the subtle learnings.

• 'Understanding Journeys' involved two Living Library events to celebrate the diverse cultural backgrounds of women living in Gippsland and to acknowledge their journeys and contributions to modern-day Australia.

This event has paved the way for greater cultural understanding, respect and acceptance of migrant women from all backgrounds.

Over 100 women attended the events and all were absorbed by the stories shared by 'personalised books'. Readers were moved by the different cultural experiences and challenges depicted within some of the 'books'.



Anne Roberts (left) and Debra Carnduff (centre) from the Settlement Program team with Margaret & her children. participants of the "Understanding Journeys" event held during Morwell Refugee Week.

Many new friendships were formed between women from a wide range of backgrounds, supporting each other to build a better community in which we all live.

More events will be delivered with key partners and has the potential to build community harmony and enhance tolerance between community members.

Refugee Health

Refugee Week 2016

Refugee week, held from 19 - 25 June 2016, is an annual week-long event to:

- celebration of the positive contributions of refugees to Australian society
- raise awareness about the issues affecting refugees

The theme for Refugee Week was 'With courage let us all combine'. Taken from the second verse of the national anthem, the theme celebrates the courage of refugees and of people who speak out against persecution and injustice. It is an opportunity to encourage Australians to make our refugees welcome and to acknowledge the skills and energy refugees bring to their new home.

It takes courage to be a refugee: As people who have faced persecution because of who they are (their race, nationality or membership of a persecuted group) or what they believe (their religion or political opinion), refugees need courage.

The Primary Health Network funded LCHS to deliver six events during refugee week across the Gippsland region:

Archies Creek Pub – this family friendly evening offered a delicious curry meal and showcased local songwriter – singer – Phil Beggs. All proceeds went to support the South Gippsland Rural Australians for refugees. (30 – 40 attended)

Bairnsdale – Multicultural Fair in partnership with Gippsland East Local Learning Alliance (GELLA) and Federation Training, featuring refugee stories local traditional cuisine. (200 – 250 attended)

Morwell – Refugee Week morning tea in partnership with Federation Training and featuring henna tattooing and local service providers. (80 attended) That evening, Traralgon - 'Freedom Stories' film screening at Lavalla School – a story about refugee and asylum seekers journeys and was supported by Latrobe Valley Asylum seekers. (60 attended)



Executive Director Community Support & Connection Alison Skeldon (far left) and the Settlement Program team with attendees at the Morwell Refugee Week celebrations

Wonthaggi – Service Providers and Bass Coast Shire Council morning tea with refugee background student. (50 attended)

Wonthaggi – Refugee Week cultural afternoon at Wonthaggi Neighbourhood Centre, Mitchell House. At this gathering the local refugee community cooked traditional meals for the broader community to show their appreciation for their ongoing support. (90 attended)

All events were a great success, well attended and there was greater community awareness of the refugee and asylum seeker journey as a result of running these events.

June 2017

Sunda	y Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Heal	thy Tip – Make Si so you can function b	ure you get en	1	2	3	
4	5	6	7	8	9	10
11	12 Queens Birthday	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	



Refugee Health

Refugee Health Program

The LCHS Refugee Health program has continued to support clients from a Refugee background in the Latrobe Valley throughout 2015 - 2016. It has developed and promoted community connections with agencies to deliver individual support, referrals and group sessions. Key partnerships are essential in building positive community relationships for successful settlement. Some examples within the community include:

- Mums 'n' Bubs program 4 week program in partnership with Latrobe City and Latrobe Regional Hospital to support mums and bubs to adapt to the challenges and changes of early parenthood.
- 'Welcome to Latrobe City' 6 week health education and community information sessions in partnership with the Settlement Grants team for the newly arrived Karen community.
- **Federation University** Information sessions to undergraduate nursing and medical staff to enhance cultural literacy.
- **Department of Education and Training** capacity building amongst school nurses to improve cultural literacy in supporting clients from a Refugee / Humanitarian background.
- Partnership with Primary Health Network in developing clinical pathway for Refugee health within the Latrobe Valley.
- Support for Harmony Day and Refugee Week activities within the community via posters and newsletter articles.
- Individual client appointments and health and community referrals.



Latrobe Community Health Service staff discussed healthy eating and food labelling with members of the Karen (Burmese) community.

July 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
30	31		Tip – Get you ion loss is preventable			1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29



Chronic Complex Condition

Transition to the Commonwealth Home Support Program and My Aged Care

The following have recently been implemented by government:

- Home and Community Care (HACC) changing to Commonwealth Home Support Program (CHSP)
- My Aged Care as the referral portal for services for those aged over 65 years of age.

The LCHS Gateway team, comprising the Aged Care Assessment Service (ACAS) and Service Access teams, have developed processes to manage the change and continue providing a high level of service to our clients.

On 1 July 2016 all previous Home and Community Care funding for over 65s, will change to Commonwealth Home Support Program requiring all clients to be registered on My Aged Care and most referrals to be sent via the My Aged Care call centre.

The Gateway team have employed a project officer to ensure the changes create minimal disruption to clients and allows LCHS to continue services to clients during this change period. The project worker is working with all departments to ensure that all of the services at LCHS are ready for the change and to ensure all referrals for clients continue to be received and processed in a timely manner.

High Risk Foot Clinic

In the Latrobe Valley, 5378 people are registered as living with Diabetes; 25% of people with diabetes will experience foot ulcers and 85% of amputations are caused by a foot ulcer. This puts extreme pressure on the health system, clients and their families. Before July 2015, clients with chronic foot ulcers had to travel to Monash Health Dandenong to receive best practice care. Many could not afford this financially, mentally or physically.

In July 2015, the LCHS High Risk Foot Clinic began. The team consists of podiatrists, a diabetes educator, a dietitian and an allied health assistant. LCHS GPs assist when needed and there is a support team at Monash Health. This means clients can come in for one appointment and receive all the services they need locally.



Podiatrist Stacey Beacham (right) with client Edwin.

Clients have reported improved wellbeing, less travel, fewer appointments, less financial stress, better diabetes control, foot ulcers are healing quicker, better relationships with staff and they feel more in control of their care.

Approved research is now being conducted to evaluate how effective the clinic is in improving patient outcomes, wellbeing and job satisfaction of staff.

August 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	Frequent hand w ways to avoid g	ip — Scrub up! ashing is one of the best getting sick as it avoids ading germs.



Chronic Complex Condition

Jane's story

Jane* presented to the High Risk Foot Clinic (HRFC) with an infected ulcer on her big toe the size of a 20c coin. Jane has a complex medical history including long standing unstable type 2 diabetes, previous lap band surgery, plus loss of feeling and deformity in the feet.

Jane was already seeing a dietician, diabetes educator, GP, and specialist as a part of a research project in Melbourne. She followed the dietary advice, took her prescribed medications, and reduced the amount of time on her feet, while keeping the ulcer dressings clean and dry as advised by the podiatrist. However, over the next 18months the ulcer continued to deteriorate, and then showed signs of improvement, only to deteriorate again.

Jane began attending the LCHS HRFC every 1-2 weeks where the podiatrist would cut away unhealthy tissue, clean and dress the ulcer with sterile dressings and provide padding to reduce pressure on the ulcer, allowing it to heal. A series of X-rays, temperatures and clinical observations were taken, trialling different dressings, and several different antibiotics. At the HRFC Jane was able to see a dietitian and diabetes educator all at the same place, at the same time. Jane and the team all worked together in attempt to heal the ulcer.

After 18 months at LCHS, countless letters and phone calls between clinics, the ulcer has recently closed over 100%. Jane will now be discharged from the High Risk Foot Clinic and into the Foot Protection Program, where the

podiatrist will work with the local orthotists to provide Jane with custommade innersoles that will reduce the risk of an ulcer occurring again. Ongoing management from the diabetes educator, dietician and exercise physiologist is in place to ensure Jane has all the tools in place to better manage her health.

This case highlights the need for a team approach to healing a foot wound and the importance of keeping the lines of communication open between professions to ensure that the patient receives the best care. While Jane was doing all of the right things and following the advice of the experts, this foot ulcer was stubborn and took a long period of time to heal. This could be attributed to a number of things. There are a lot of stressors associated with managing a chronic ulcer, patients are at risk of isolation and depression, and these kinds of social stresses can negatively impact a patient's health. It is important to manage these social and mental health factors while also managing the patient's blood sugar levels, nutrition and of course treating the ulcer.

Jane reported the support and care provided by the High Risk Foot Clinic team at LCHS was an enjoyable experience. She would rate her health as 90-100/100 every time she was asked, and attributed this to the support from the team at LCHS.

*Jane is not the client's real name.

September 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Che	Heal eck out local sports and a	1	2			
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29 Friday before AFL Grand Final	30



Continuity of Care

Pathways to Good Health

This is a health program funded by Department of Health and Human Services to formulate a comprehensive health plan for children and young people in Out of Home Care. Pathways commenced clinics at LCHS in August 2015 and has seen 43 clients between the ages of 9 weeks and 16 years. The Pathways staff include paediatricians from Latrobe Regional Hospital, a psychologist from Gippsland Mental Health and an experienced LCHS paediatric speech pathologist. The program is coordinated by an experienced nurse who also provides an outreach service to the residential care homes in Latrobe Valley.

Children in Out of Home Care have significantly more health and other difficulties and are less likely to have had access to the necessary services. The success of this program has been significantly improved immunisation rates and access to dental services. The high quality and timely health plans have resulted from all practitioners working together in appointments and compiling joint recommendations. These plans are forwarded to the referring GP and Child Protection allowing the plan to go with the child/young person as they move around. A number of significant health problems have been diagnosed and referrals made into acute facilities and other appropriate services.

The work in the residential care homes is focused on providing health education to both the staff as well as the young people. The work is demanding and mostly opportunistic. All the young people have had significant exposure to trauma and other complexities; establishing a relationship and working toward improved health literacy is a slow process.

Gamblers Help – Financial Counselling – trends across Gippsland Region

The Gamblers Help Financial Counselling program assists people and their family members with gambling related financial issues. We received an increase in funding from Victorian Responsible Gambling Foundation – (VRGF) to have two full time Financial Counsellors across the Gippsland Region. We have also been successful in securing another 12 months funding from the Commonwealth Government for Financial Counselling for people across the region affected by problem gambling.



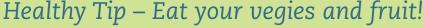
Former AFL player David Schwarz (far left) and former NRL player Joe Williams (far right) with the Gambler's Help team at a talk about inspiring local Aboriginal vouth.

Over the past twelve months we have supported clients from all backgrounds, all demographics and areas across Gippsland. We have observed the following:

- Some clients seeking support from our program were employed and receiving higher salaries. These clients often had higher amounts of debt and were at risk of losing their family home.
- A large proportion of our clients are at risk of homelessness due to their gambling.
- There has been a steady increase in on-line gambling with younger males; however, Pokies continue to be the most used form of gambling in the region, followed by horse and greyhound racing.

October 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	Heal	thy Tip – Eat	your vegies d	ınd fruit!



Adults need to eat at least 5 serves of vegetables and 2 serves of fruit each day.



Continuity of Care

Russell's Story

Do you take your mobility for granted? Going down the street to do the groceries or get around town may be something some of us take for granted but not Russell.

Russell's mobility has been severely affected by a degenerative spinal condition making getting around town and shopping for his two teenagers extremely difficult. The pain and exhaustion impacted on Russell's mental health, but didn't stop him and Russell could be seen walking into town and back to do the shopping and run errands. This effort took him up to two days to recover.

Russell's daughters are very helpful with his support both in and out of the home but aren't yet old enough to drive and assist with transport, making Russell's situation quite difficult. Russell's daughters are involved with the Carer Connexions program at LCHS and are linked in to activities for Young Carers to ensure they are supported.

Their worker Vanessa was concerned with the impact Russell's mobility was having on the family and his resulting exhaustion and pain. After discussion with Russell, Vanessa made a referral to Disability Services to look at his current supports and determine if more assistance could be provided to the family.

Russell's newly allocated planner Greg, discussed with Russell the possibility of making a referral to an Occupational Therapist to assess Russell's mobility. Once the Occupational Therapist's assessment was completed a recommendation for a mobility scooter was made to assist Russell in accessing the supermarket and community. Greg then made a request to Disability Services for a flexible support package to purchase the scooter.



Russell, a client of our Disability Services program.

Russell describes 'freedom' as the most significant change the mobility scooter has made to his family, as he now has the ability to connect with the community, maintain his independence and most of all, enjoy being a Dad. Russell is now looking forward to joining a local men's group to connect with other adults.

November 2017

Sunda	ay Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Healthy Tip – Drink lots of water Especially coming in to the warmer months, try to drink at least 8 glasses of water a day.			1	2	3	4
5	6	7 Melbourne Cup	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		



Mary's Story

Mary* didn't always have low vision. Over the years, a combination of illness and old age took a toll on her eyesight, and now Mary can only see shadows.

"Mary depended on her husband for a lot of things, like getting dressed for the day, or taking the right medication," says Sandra, Aged Care Services Care Manager at Latrobe Community Health Service.

"But everything changed for her recently – through her Home Care Package, in conjunction with Vision Australia, Mary was able to purchase a barcode reader.

"This device reads barcodes and 'speaks' what each item is. When Mary goes to the shops and picks up a can of baked beans, the scanner tells her what it is and how much it costs."

Using the barcode reader, Mary can also customise barcodes and tag personal items like clothing. She can now identify currency and even access instructions, ingredients and warnings for various items.

"I've never seen Mary this happy before," says Sandra. "She's been scanning everything. So many aspects of her life have been improved.

"If it wasn't for her Home Care Package, she wouldn't have been able to afford the barcode reader."

A Home Care Package is a bundle of services and funds from the government which will allow you to get services to help you stay at home for longer. These services may include help with keeping your home clean, garden maintenance, hearing and vision services and care coordination.

Home Care Packages are available to eligible people across Gippsland. Latrobe Community Health Service delivers these packages across the region.

For more information about Home Care Packages, phone My Aged Care on 1800 200 422 or visit www.myagedcare.gov.au

* Mary is not the client's real name.

December 2017

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
31		lthy Tip — Enjo you a very Merry Chri	1	2		
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25 Christmas Day	26 Boxing Day	27	28	29	30



Health Promotion

University Orientation Days

Successful Orientation days were held at William Angliss Institute (WAI), La Trobe University Medical Centre (LUMC) and CQ University in Melbourne. The events included use of the 'Blender Bike' at LUMC encouraging exercise and healthy eating. At WAI and CQ University we provided mini health checks and health information on accessing GP services in Australia for the international students.

CQ University tragically lost an international student in 2014 after being admitted to Emergency and then ICU. The student was afraid to go to see a GP due to cost and thought they would be turned away because they did not have a Medicare card. They were not aware their Overseas Health Insurance would cover this. We now work closely with the Health Insurance providers to jointly provide information sessions to new International students. We inform them they can access health services provided by us at La Trobe University and WAI at no cost if they have overseas health insurance. We never want to hear of other students being too afraid to access health care in Australia.

New La Trobe University students giving the Blender Bike a spin during Orientation Week.







Top: Moe school children transformed fresh fruit into healthy smoothie snacks on the Blender Bike at the reopening of our Moe site in February. Bottom: A box of fresh vegetables and fruit was up for grabs as a prize at the reopening of our Moe site in February. Staff member Stephanie Cohen looks on.

Health Promotion

Our Health Promotion team continues to work with the community of Latrobe City, promoting the importance of good health and well-being. Current initiatives include:

- Schools: Health Promotion staff work with the Achievement Program in primary and secondary schools, focusing on creating healthy environments. Schools need to show how they support students, staff and families through their policies, by creating a safe and healthy physical and social environment, and by developing community links and partnerships in each of the benchmarks.
 - Currently we have four primary schools that have achieved their benchmarks in either Healthy Eating and Oral Health, Physical Activity, Sun Protection or Tobacco Control. We are now focusing on benchmarks for Alcohol and Other Drugs, Sexual Health and Relationships, Mental Health and Wellbeing, and Safe Environments. There are now 76% of local primary schools and 36% of secondary schools working towards achieving these benchmarks.
- Workplaces: Workplaces across Latrobe are realising the importance of providing a healthy workplace environment for their staff and are participating in the Achievement Program. There are 31 workplaces participating in the initiative; five have gained commitment from Management and started the cycle, and three have gained recognition for a range of health priority areas.
 - LCHS Health Promotion Officers supported workplaces in their quest to become health promoting settings by organising activities such as the Latrobe Workplace Health and Wellbeing Expo, business breakfast events on mental health and sedentary behaviour, as well as participation in the newly established Workplace Health and Wellbeing Network. Currently 71 teams from 17 workplaces across Latrobe are participating in the inaugural Latrobe Workplace Walking challenge, with 671 participants registered in total.
- Catering menus: The LCHS Health Promotion Officer assessed seven catering menus for LCHS preferred caterers. Completing the assessment involved working with the retailers to assist them to meet the Department of Health's Healthy Choices Guidelines whereby menus contain at least 50% green items and less than 20% red items. The retailers have made some of the recommended changes in their catering menus.
- Leisure sites: Over the last year four Latrobe Leisure sites have implemented the Healthy Choices at Latrobe Leisure initiative and have increased the proportion of 'green' classified items available by an average of 20% and reduced the number of 'red' classified items by 15%.

Medication Safety

In 2014 adverse events reported through Victorian Health Incident Management System (VHIMS) triggered the need for a research project into the current medication management issues across Gippsland community nursing services. It was quickly identified that there are no quidelines available for the community sector which encompasses Palliative Care and Cancer Medication Management.

This led to a successful grant awarded by the Gippsland Regional Integrated Cancer Service to fund the development of a draft medication management guideline that will support quality care for Palliative Care and District nurses working in the community.

LCHS has appointed a Registered Nurse Project Officer to coordinate the project and develop guidelines in collaboration with the Regional Pharmacy Liaison Officer.

Extensive work has been undertaken to develop the guidelines, including:

- holding an Inter-professional Collaboration Forum (IPCF) at Latrobe Community Health Service (LCHS)
- a literature review
- an online questionnaire targeting the following stakeholders exploring the current medication management issues facing nurses:
 - Community District Nursing and Palliative Care services across Gippsland
 - four General Practitioners
 - four community pharmacists
 - four consumer representatives.



Medication safety has been a priority for our Ambulatory Care team.

The guidelines are currently being rolled out to the District Nursing and Palliative Care Community Nurses at LCHS via education sessions with the hope of further funding being sought to fund the roll out to further community nursing services across Victoria.



Have Your Say!

Quality of Care Report Evaluation Survey

We want to ensure that our Quality of Care Report remains relevant to you. We would appreciate if you could fill out this evaluation survey. You can find details on how to return this form on the back of this page.

Please	tick	the	appr	opriate	boxes
			-		

1. What best describes you?				
Client with LCHS	Relative/Carer of a LCHS Client			
Health Professional	Student			
☐ Volunteer with LCHS	Other			
2. Do you like the calendar format?				
Yes	□ No			
3. Did you find the report informative?				
Yes	□ No			

4. Was the report easy to understand?					
☐ Very easy	☐ Easy				
Difficult	☐ Very difficult				
5. What improvements would you suggest we make for this report?					
6. Any other comments?					

Quality of Care Report Evaluation Survey

There are multiple ways for you to return your complete survey:

Hand deliver to any LCHS site

Post to
Po Box 960
Morwell 3840

Email to feedback@lchs.com.au

Fax to 03 5136 5451

Please attention all surveys to 'Quality Program'

Thank you for your time.







Building Projects

Warragul and Moe

In late July 2015, we commenced business in our new Warragul premises which are in the Newmason development. Our existing Warragul programs including dental, aged and disability services and others moved to this location. We can now offer GP and private dental services, allied health and an expanded counselling service. Warragul clients now have a facility where a range of their health needs can be met in a modern and easily accessible location.

After several years we also completed the re-development of our Moe facility. This project included a complete refurbishment of the old building bringing the facilities for practitioners and employees up to modern standards. The building is adaptable for future expansion in our clinical services and includes:

- an enhanced student simulated clinic environment
- training rooms for use by the community for local events.

Pictured left is the completed redevelopment of our Moe facility. Below shows the new Warragul location.



Visit us at www.lchs.com.au
Free call 1800 242 696

Latrobe Community Health Service Ltd ABN: 74 136 502 022

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