



Bellarine Community Health Ltd.
"Quality Living for a Valued Community"

Bellarine Community Health Annual Report Victorian Quality Account Report 2016-2017



Welcome



On behalf of the Board and Executive of Bellarine Community Health, we are delighted to present our combined 2016/17 Victorian Quality Account and Annual Report.

This report allows us to inform clients and the community on our achievements for the financial year, and share some insight into the work we do.

Our commitment is to provide the community with safe, high quality services from various locations across the Bellarine.

Our staff and volunteers are passionate about the services they provide and proud of their role in our community.

This report will highlight improvements we have made in the quality and safety of our services and our efforts towards

continuous improvement to help our clients achieve the best possible health outcomes.

This report has been prepared in line with guidelines set out by Safer Care Victoria, which is the peak state authority for leading quality and safety improvements in health care.

We aim to provide you with information to help you understand how our community health services function and demonstrate actions taken to complete reporting outcomes.

The Board of Bellarine Community Health understands the role that Governance plays in the provision of safe, quality health care services.

The establishment of the Board Quality and Safety Committee and the Risk

Management Committee a number of years ago gives the Board oversight of the systems and processes that support the delivery of services.

Bellarine Community Health has models of care that meet the needs of our local community but we must continue to evolve and adapt to respond effectively to the changing health care environment.

The rollout of the National Disability Insurance Scheme (NDIS) changes to Home and Community Care (HACC) services, the establishment of Primary Health Care Networks (PHN) and the introduction of My Aged Care all have implications for the way community health care programs are delivered.

The Board of Bellarine Community Health is committed to seeking ways

to strengthen current services but also find new and innovative approaches to service delivery.

We would like to thank our clients for putting their ongoing trust in our services, and our staff and volunteers for providing a commitment to quality care that is outstanding.

Our thanks also to the broader community for understanding as we go through a period of transition and transformation of your community health care services.

Finally we would like to acknowledge our funders and community partners for your ongoing support of Bellarine Community Health.

Who we are

Bellarine Community Health Ltd is the largest provider of community health services on the Bellarine.

We provide primary health care and support services for all ages from five locations on the Bellarine. Our facilities are located in Drysdale, Ocean Grove, Queenscliff and Portarlington.

Our aim is to deliver quality, affordable health services and promote healthy living to help people stay in their homes longer.

OUR MISSION

Quality Living for a Valued Community

OUR VALUES

Accessible, affordable health care for all



Our People
130 staff
Full Time 19
Part Time 94
Casual 17



Our Allied Health Clients
57%



Our Volunteers
138 Volunteers contributed
17,000 hours of volunteer support



Our Clients
Age 26 + 79%
12-25 years 10%
0-11 years 11%



Our Community Wellness Clients
21%



Centres used by our clients
Drysdale **26%**
headspace - Drysdale **5%**
Ocean Grove **11%**
Portarlington **9%**
Queenscliff **42%**
Other **7%**



Our Dental Clients
3,927 clients treated (adults & children)



Our Community Nursing Clients
22%

2016/17 Board Directors

Ms Hazel Ingram - Chair
Mr Claude Savino - Vice Chair *Retired Nov 16*
Mr Graeme Smith - Treasurer
Mrs Von Philp
Ms Kristina Dimasi
Ms Margaret Belfrage

Mrs Desiree Cohen
Retired Nov 16
Mr Jim Fletcher
Mr Doug Grant
Ms Marion Westrup
Mr Damon Burn

Year in Review

Finance Report



The 2016/17 financial year delivered a number of challenges and rewards.

From the 1st of July 2016, major funding reforms from the Commonwealth and State Governments under the Commonwealth Home Support (CHSP) and Home and Community Care (HACC) programs were introduced and service providers were transitioned fully to using My Aged Care. A working group oversaw the transition including communication and information sessions to help clients understand the changes.

Throughout the first half of the financial year the Department of Health and Human Services led services review of the Bellarine was undertaken. BCH actively participated in the process which included a number of community consultation sessions across the Bellarine.

The Consultant's final report was not released during the reporting period.

Bellarine Community Health also underwent a Department led Forensic Audit following an allegation of internal fraud. Further checks and controls around data systems were put in place including regular internal and external audits. The findings of the Department's Forensic Audit were not made available during the reporting period.

In October 2016 Bellarine Community Health's Allied Health Services and Dental Services were involved in a full accreditation audit under the Quality Improvement Council Standards and the National Safety and Quality Health Service standards. The organisation achieved outstanding results, meeting or exceeding all the expected outcomes across all categories.

An upgrade of facilities at our Portarlington site was completed in early 2017, allowing our Physical Wellness Program to relocate to the centre. A major capital works program also commenced at the Queenscliff Community Health Centre.

This exciting redevelopment will transform the ageing buildings at Point Lonsdale into a modern, flexible health care facility. Stage one of the project, which included the demolition and relocation of the Dental Wing was completed during the reporting period.

In February this year, CEO John Fendyk announced his retirement. An external recruitment company conducted the recruitment process and the appointment of Shane Dawson to the role was announced in May 2017.

Governance and Finance – Keeping staff and clients safe

The Board of Directors has the responsibility to ensure that BCH is continually improving the quality and safety of the services it provides and that the organisation maintains financial viability.

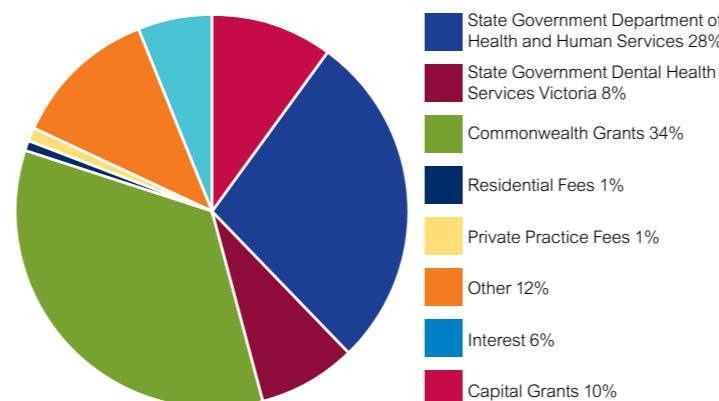
There are two dedicated committees which focus on these areas - the Board Quality and Safety Committee and the Board Finance and Audit Committee. Board directors sit on both these committees.

To monitor the ongoing quality and safety of services there are several operational committees which report directly to the Board Quality and Safety Committee.

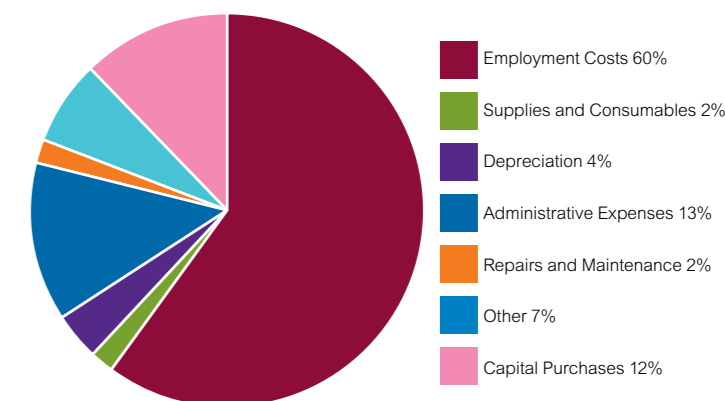
- Operational Quality and Safety Committee
- Occupational Health and Safety Committee
- Risk Management Working Group
- Consumer and Community Advisory Group

These committees focus on service governance and monitor quality and safety, risk management, occupational health and safety and community engagement.

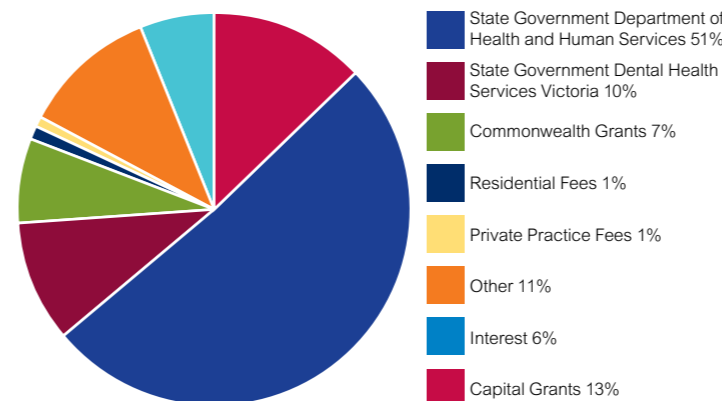
Revenue 2016/2017



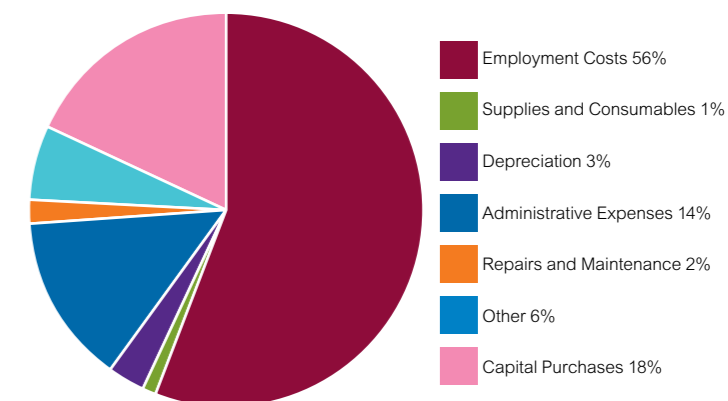
Expenditure 2016/2017



Compared to Revenue 2015/2016



Compared to Expenditure 2015/2016



Listening and engaging with our community



Listening and engaging with our community

Community Engagement

August 2016 saw the launch of BCH's new Community Engagement Strategy and the establishment of a new Consumer and Community Advisory Committee.

The Community Engagement Strategy guides Stage 2 of our program - embedding and extending opportunities for consumer and community engagement and continuing to foster community engagement principles into our workplace culture and practices.

The previous engagement plan, developed in late 2014, sought to establish systems, policies and processes for community engagement. This included building community engagement skills and understanding of our employees and developing a new consumer representative program in our quality and safety governance.

The Community Engagement Strategy is supported by a detailed Implementation Plan to operationalise improvements to engagement. Progress against the Implementation Plan is overseen by the

Consumer and Community Advisory Committee. The Department of Health and Human Services has also been provided with a monthly report on Implementation Plan progress.

Over the 2016/17 financial year, a number of consultation and engagement activities have been achieved including;

- Appointment of a new consumer representative to the Board Quality and Safety Committee
- Appointment of a new Consumer and Community Advisory Committee

Health and Wellbeing Fund 2016-2017

The Health and Wellbeing Fund was established to support community focused not-for-profit organisations to make positive improvements to the health and wellbeing of communities on the Bellarine Peninsula.

Applications were invited for projects developed and led by local people and organisations that support healthy,

active, well informed and connected communities.

In August 2016, approximately \$140k in funding was announced to 19 projects as part of the first round of the Health and Wellbeing Fund. Improvements to the Swan Bay to Curlewis section of the rail trail, equipment for a gymnasium at Portarlington, expansions to a community garden, support groups for mental health, a school breakfast program and mobile meals for the disadvantaged on the

Northern Bellarine are just some of the community projects allocated funding. Small grant projects within this round were due to be completed in August 2017.

The second round of funding was called for in April 2017. 40 applications were received and assessed by the Health and Wellbeing Fund Community Advisory Committee. Successful projects from this round are due for announcement in August 2017.

Consumer and Community Advisory Committee (CCAG)

Bellarine Community Health established a Consumer and Community Advisory Committee (CCAG) in August 2016. The CCAG provides consumer, carer or community ideas to support better planning and delivery of our community health services.

Progressively over 2016/17, six talented and committed community members with broad experience across a range of health sectors including disability services, service for young people, palliative care, dental services and health promotion were recruited to the CCAG.

The CCAG met seven times during 2016/17 and undertook a number of key activities which included:

- Adoption of a terms of reference
- Completion of induction and orientation to BCH
- Establishment of a priority project schedule for the CCAG
- Review of the BCH vision and values
- Input into BCH Active Service Model plan
- Scoping of a community roundtable model
- Development of a dental service feedback survey

- Background reading into a Health Literacy Action Plan for the Bellarine
- Attending the Consumer Representative's forum hosted by Hesse Rural Health
- Established engagement process for strategic planning community consultation

Going forward the CCAG have identified a number of priorities to continue to improve how the community can understand and access BCH's services, as well as extending the practice and value of community engagement by the organisation.



Communicating with our diverse community



Building capacity to participate in healthcare

MAKE A MOVE CASE STUDY “SHIRLEY”

“I can feel the difference in myself – I don’t worry about doing things now”, says 81 year old Shirley after just six months into the Make A Move (home based falls prevention) Program.

Shirley started the program aiming to improve her balance and confidence. On initial assessment clients are asked to rate their confidence performing certain activities without falling. These are then reassessed at six months. Shirley’s

confidence scores were mostly improved, in particular reaching into a cupboard, crossing the road and performing light housekeeping duties. Shirley says “I feel confident. I can feel the difference in myself. It makes me operate at a better level”.

The program involves monthly visits and phone calls by an exercise instructor to monitor the client’s exercises and correct or progress them as necessary. Shirley

commented that “the way in which the program is run gives us an incentive to keep doing the exercises and we see the benefit”.

Clients are also assessed using standard balance tests when they first start the program, and again midway through the program. Shirley’s leg strength had improved significantly, making it easier for her to get out of a chair. A timed walking test also showed improvement.

TEST	ASSESSMENT	RESULTS - Initial	6 month follow up
Sit to stand	No. of repetitions completed in 30 seconds	11 reps	14 reps
Timed Up and Go Test	How long it takes client to stand, walk to 3 m marker, turn around, walk back to chair and sit down	9.28 seconds	7.84 seconds

With results like these Shirley is keen to continue the next six months of the program. She really is “making a move”!

Interpreter Services

Our commitment to good communication includes providing our non English speaking clients with access to accredited interpreter services.

Bellarine Community Health staff understand the importance of explaining to clients what their service or treatment will involve and they make those clients who need assistance aware of how to access interpreter services.

BCH uses the Victorian Interpreting & Translation (VITA) service when required, and the national interpreter symbol appears on our publications.

Around 1% of our clients from non English speaking backgrounds required an interpreter.

Disability Action Plan

Bellarine Community Health is open to supporting a range of people with disabilities from physical to emotional, mental or social.

Our Child Health and Development Team sees children under the age of 12 who have mild to moderate development delays, inclusive of intellectual disabilities.

Our team works with parents to identify their concerns, develop a plan, look at options for services as well as supporting them to access other services in the community.

This could mean;

- Developing a care plan that sets child/ family raised goals
- Provide specialised speech pathology, occupational therapy, dietetics, physiotherapy and organise specialised equipment where a child needs the equipment

- Referring the family/child to other services that are specific to their particular area of development delay/ disability
- Building resilience and capacity of the family so that they feel part of the community
- Ensuring that the child with a disability is integrated into the community
- Working with the child’s mainstream/ community connections so that they are educated to be able to manage the child with a disability
- Visiting the child in a myriad of environments, so the child’s needs may be addressed in a range of circumstances
- Support the growth and development of the family by finding suitable resources for the family, child, siblings of the child with a disability.

Priority access for at risk population groups

Bellarine Community Health gives priority access for certain population groups including Aboriginal and Torres Strait Islander people, people experiencing homelessness or at risk of homelessness, children in out-of-home care and people with a serious mental illness.

Our services for these priority groups are free of charge with priority based on needs. All referrals are also assessed on a needs basis.

Clients are given an assessment based on the HEADSS framework. This is a screening assessment based on questions around Home,



Education/Employment, Activities, Drugs and alcohol, Sexuality, Suicide risk/depression (HEADSS).

A client presenting with mental health issues will be assessed around their initial symptoms, predisposing factors such as their medical history, the immediate issues that are causing the person to experience the symptoms, what’s causing those symptoms to continue or get worse and what factors are in their life to support them like family and other relationships.

Our clients are assessed for their ability and willingness to participate in counselling before being referred to ensure better engagement and outcomes.

We see clients in the home, at school, in a public place, or other convenient locations for the client.

We offer counselling to students of the Ocean Grove – Bellarine Secondary College within their school grounds to create greater opportunities for students to seek help.

We assess clients to see if they are a mature minor and able to make health decisions without parents or guardians.

A variety of therapy frameworks are used depending on age, intellectual ability, cultural safety and presenting issues. We also have a volunteer that offers literacy tutoring for clients engaged in our service.

Feedback is so important



Bellarine Community Health is wholly committed to improving our services through your experiences. We have built a responsive feedback system to manage your feedback fairly, promptly, confidentially and without retribution. We also have consumers involved in evaluating consumer feedback and discussing options for implementing quality improvements.

How to provide feedback

Clients, their families and carers are invited to provide feedback – positive or negative.

If you feel comfortable, you can discuss your concerns directly with the staff member involved or request to speak to a more senior person. Feedback can also be provided over the telephone to any of our locations. If your feedback can be resolved immediately, it will be done so, otherwise it is directed to our Quality and Compliance area for resolution.

All verbal feedback, positive or negative is recorded.

Written feedback can be provided on our “Have Your Say” Form available at reception or downloaded from our website. Have Your Say Forms can be lodged at the reception of any of our health centres, via email or post.

Privacy

Your feedback is confidential and will have no impact on any future care or treatment that you may require.

What happens next?

Bellarine Community Health will review the feedback and conduct any necessary investigation and improvements. You will be notified of any outcomes.

What if Bellarine Community Health cannot resolve your feedback?

If you remain dissatisfied with our response, you may contact the Health Complaints Commissioner (HCC). The HCC responds to complaints about health services and the handling of health information in Victoria. Their service is free, confidential and impartial. To lodge a complaint with the HCC: Fill out a complaint form online at www.hcc.vic.gov.au or Phone 1300 582 113 between 9am - 5pm, Monday to Friday to discuss your complaint.

Some compliments received:

“Triple by pass and didn't want to go to cardiac rehabilitation with older people and that I felt all I needed was rest and I would be ok. How wrong was I ... cardiac rehab.”

Best dental experience ever!! I can't believe it and I still have a tooth. It's a miracle!-Dental program

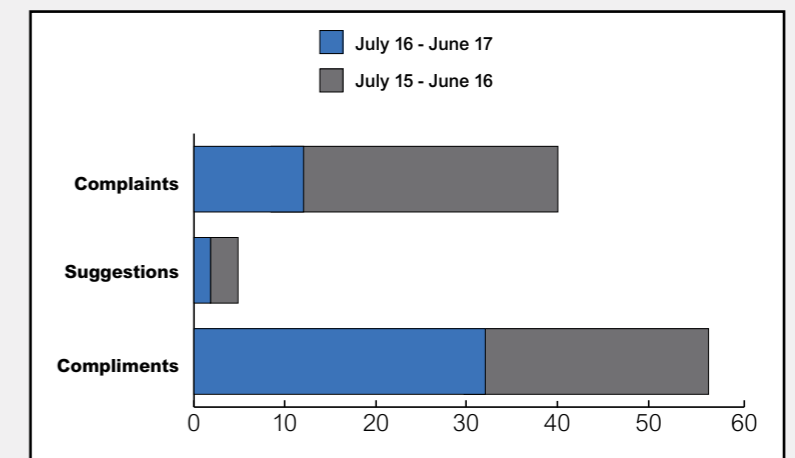
Improvements following a suggestion or complaint:

Complaint	Improvement
Lack of car parking at Point Lonsdale site	Clients' only signage placed on some of the fence line in Nelson Road. Staff were made aware of 'staff only' car parking via a map of adjacent area and where staff can park.
Difficulty finding the official contact address	Changes made to the website noting official address in a prominent place.

Feedback on 2016/17 Victorian Quality Account:

There was no written feedback received on last year's Victorian Quality Account. We are looking at alternative ways to seek feedback in future.

Feedback received 2014/15 & 2015/16:



In 2016-17 Bellarine Community Health received:

56 Formal Compliments
&
14 Formal Complaints

Feedback is so important

Victorian Healthcare Experience Survey

During the reporting period, Bellarine Community Health participated in its first Victorian Healthcare Experience Survey (VHES).
The survey was conducted in late 2016 and we had a 25% response rate from our clients compared to the state average of just over 15%. In every survey response our clients rated BCH equal to or above the state average.

Overall experience:

- 100% positive - Overall how do you rate the care you received at this health service?
- 83% positive - Was it easy to make an appointment?
- 80% positive - Were there times that you had to repeat information that should be in your record at this health service?

- 93% positive - Were the health workers compassionate?
- 83% positive - Did health workers consider all your needs (such as health, culture, living and family situation and age)?

The survey will be conducted in all community health services again in late 2017. Survey forms will be distributed

at our community health centre sites or through outreach workers during their home visits. The survey will focus on adult clients of primary and community health services.



Meeting the Needs of our Consumers - Continuity of Care

Continuity of care for our consumers and transition between our services

A four year old child was referred from the local preschool to Bellarine Community Health for speech pathology to support the child's language delays.

The speech pathologist spent some time assessing the child and made a recommendation to the parent that the child would also benefit from seeing an occupational therapist in the Child Health and Development team.

Our Speech Pathologist continued to provide specific language development programs for the parents to implement at home and also saw the child at the community health setting during the child's pre-school year.

Our therapist also recommended that the child be referred to a paediatrician for other health related concerns. This referral was made to an external professional.

The referral for the Occupational Therapist (OT) requested support for ideas around feeding and eating and to assist the child to feel more comfortable with different tastes, smells, textures and being able to feel relaxed in different learning/community environments.

The OT continued to support the child and the parents in the home, community and in the school environment.

A plan with goals to assist the child to eat, try different foods and be comfortable in learning environments was implemented.

Following a number of sessions with the OT, it was identified that further speciality skills of a dietician were required to support the child in ensuring a plan to have a balanced diet was implemented.

The child and family received support from a BCH paediatric trained Dietician.

Once the child attended school the parent identified that the child had presented with some continence concerns and hence a referral has also been made to the BCH continence nurse who is now assisting the child with equipment and ideas for the parent to address their current night - bed wetting concerns.



Working with a community health priority population

The Healthy Communities Team works in primary prevention at a population level – that is, focusing on activities that prevent health problems in whole populations and communities before they occur.

To do this, the Healthy Communities Team works to a four-year Integrated Health Promotion Plan that aims to improve elements within the community that are having a negative impact on health.

During the reporting period the Healthy Communities team worked with the community to improve physical activity as one key health priority area.

A suite of programs were undertaken to increase the number of people walking, bike riding and using public transport.

For example the team worked with volunteers and the community to deliver a program which provided recycled bikes to people who could not afford to purchase bikes and bicycle maintenance workshops to ensure people could keep cycling.

The 'On Your Bike' program was developed as a way of addressing financial barriers that people from a low socio economic background may face when engaging in bike riding.

It increased people's access to bike riding by providing free second hand

bikes to residents in the 3223 postcode area of St Leonards, Portarlington and Indented Head.

A total of 30 people from the area used the program with almost three quarters of those people identifying as from a low socio economic background.

To compliment the 'On Your Bike' program, bicycle maintenance workshops were established to increase bike riding the 3223 communities.

32 participants took part in three bike maintenance workshops. Following consultation with participants, the workshops expanded from demonstrations to also include hands on components which allowed participants to practice their new skills.

The workshops were well received and met the expectations of the participants. Confidence in bike riding and basic bike maintenance increased amongst community members through program participation.

The Healthy Communities would like to acknowledge the support from the St Leonards Men's Shed, St Leonards Progress Association, Corio-Norlane Lions Club, Bellarine Belles riding group, Hendry Cycles, Greg Kelly and the BCH maintenance team for helping make these programs possible.

Dental Achievements



Bellarine Community Health provides safe and high quality dental services to both children and adults.

Clinical indicators are used to measure the quality of dental care provided to our clients with results benchmarked with other clinics in Victoria.

The dental outreach program has extended our reach to one of our priority target groups; children. BCH attended 9 primary schools and 4 preschools, screening in excess of 1000 children.

Dental disease accounts for 63,000

hospital admissions in children every year, the third highest for preventable hospital admissions behind kidney infection and gastroenteritis.

(SOURCE: <https://www.dhsv.org.au/news/in-the-media/2017/tooth-decay-epidemic>).

Extending our reach to the community setting increases children's awareness of their own oral health, identifies early dental decay and establishes a pathway for service delivery, provides age appropriate information for children on oral hygiene practices and promotes our service.

0.3% State average 1.4%
% of adult patients who had a tooth removed and had to come back within 7 days because of a problem.

8.4% State average 10.7%
% of adult patients who returned for treatment within 6 months, following initial restoration.

6.7% State average 7.4%
% of adult patients who found a problem with their treated tooth and within 6 months, had to return for more treatment.

3.6% State average 2.8%
% of child patients who had a fissure seal treatment, but within 2 years, needed further treatment.

4.9% State average 2.7%
% of child patients who returned for treatment within 6 months, following initial restoration.

33% State average 22.5%
% of eligible population of adults and children treated.

End of Life Care

The Victorian Government has developed a framework for providing quality end of life and palliative care to ensure the community is provided with safe and effective care, at the right time that responds to the needs of people and their families.

Five priority areas have been identified to address improvements including quality end of life and palliative care is everyone's responsibility.

Knowledge is increased across the healthcare sector to provide safe, quality care.

BCH recognises that education pathways are vital to support improvements in the practice and delivery of care. Staff members attend regular internal and external training and education programs and a Nurse educator from Barwon Health works with staff on a fortnightly basis.

End of Life Care is consistent across the healthcare system.

Our end of life care model is based on best practice guidelines and the palliative care framework under which Bellarine Community Health is currently funded.

Clients at end of life stage are visited daily and the management of pain and symptoms is reviewed by the palliative care nurse in consultation with the client's doctors, specialists and carers.

Healthcare staff are equipped to communicate and deliver the benefits of palliative care.

Staff stay in regular mobile phone contact with clients and carers. During the reporting period, staff began training on mobile tablet devices with a view to using tablets for daily rounds to ensure better efficiency in reporting practices. Staff are also fully supported with comprehensive office and administration support, and comprehensive medical support through the Barwon Health sub regional palliative care registrar.

Organisations actively support their staff in the delivery of quality end of life care.

Staff hold regular meetings with the sub regional palliative care registrar and are led by a specialist palliative care nurse. Support and training opportunities are regularly available to staff.

During the reporting period Bellarine Community Health underwent a self assessment program against the National Palliative Care Standards.

BCH passed the program with the assessor noting, 'that a lot of work had gone into the process and that there was significant evidence to support the expected outcomes'.

We now move into the next phase of the National Standards Assessment Program which is the Continuous Quality Improvement phase where further work on key improvement areas will be undertaken to develop a Quality Improvement Action Plan.

"Thank you very much for your card and sentiments on the passing of our Mum."
Community Nursing & Support Program.

Caring for our diverse community



Ensuring Every Child is Safe

The Victorian Government has introduced Child Safe Standards to improve the way organisations that provide children’s services prevent and respond to child abuse and neglect.

Bellarine Community Health established a Child Safe Standards Project Group to analyse any gaps in the organisation’s policies and procedures and then oversee the implementation of the standards.

Action taken included;

- A Child Safe Standards Code of Conduct was developed and embedded into the organisation Code of Conduct
- A commitment statement to Child Safety was developed and displayed at all buildings and embedded in employee contracts
- Two Child Safety officers were appointed
- All staff/board members are required to have a current Working With Children’s Check
- A mandatory Child Safe Standards online module was developed for staff and board members
- The Child Safe Policy and Procedure will be regularly reviewed to ensure compliance

A&TSI Communities

Bellarine Community Health strives to respond to the diverse needs of our community including ensuring we are responsive to the needs of Aboriginal and Torres Strait Islander peoples.

The organisational Diversity Plan identified a need for greater analysis of our client data base to identify services being used by A&TSI clients and also for additional training of Intake officers in our Community Nursing and Youth teams to assist with identifying A&TSI clients at the initial screening stage.

Bellarine Community Health is also a participant in the Wathaurong Closing the Gap Action Alliance. The group was established to improve the health and wellbeing of Aboriginal and Torres Strait Islander people in the Greater Geelong and Colac region.

Actions taken to improve our cultural awareness included;

- The leadership team attended the Wathaurong Aboriginal Cooperative to build understanding of the services and programs available in the region
- Protocols were established to acknowledge the traditional land owners at the start of events and recognition is now given on email signature blocks
- Several senior staff members attended a forum on inclusive practices for clients identifying as A&TSI

LGBTI Communities

Action taken to improve our understanding and engagement with the LGBTI community included;

- A training session was presented to the BCH leadership team, with resources and information supplied to team leaders for further delivery to other BCH staff

- Specific staff training to recognise the needs of older LGBTI people in the community
- Further training held with other local stakeholders around awareness of the senior LGBTI community in the Bellarine
- Rainbow flags and stickers placed on our buildings to indicate to our clients that our staff have had training and can support their needs

The LGBTI Aged Care training conducted by La Trobe University assisted BCH staff to be aware of the sensitivities and needs of older members of the community who may not openly identify as LGBTI.

A representative of La Trobe University also gave their presentation on older LGBTI community members to more than 60 staff at a Staff Forum.

As an organisation we are continuing to strive to be inclusive of all, and achieve the Rainbow Tick Standards.

Volunteers Making a Difference

Volunteers are a vital force within Bellarine Community Health. With nearly 140 volunteers active across the Bellarine, we are proud to say our volunteers make a huge difference to the lives of our clients and our community.

Volunteers generously give their time, knowledge and helping hands to assist others, and our programs simply couldn’t run without them.

Our volunteers work in partnership with staff to deliver the best possible outcomes for our clients and our community. Their care and dedication allows us to provide fantastic person centred care to all clients, in every facet of our organisation.

We have volunteers who work with clients directly in programs such as Planned Activity Group (PAG) and Portarlington Food Relief (PFAP) but also we have volunteers who work behind the scenes assisting staff with administration to create outstanding outcomes for our clients.

We would like to thank all of our current volunteers, and welcome many new faces to our volunteer family. Congratulations everyone on another wonderful year, your dedication and commitment makes a huge difference in the lives of everyone it touches.



Quality and Safety Matters

Community health services must describe how staff survey results are being used to improve the safety and quality of their programs and services.

To ensure our clients have a positive experience of our services it is really important to make sure our staff are also happy in the workplace.

In the 2015/16 reporting period, an external staff survey called Moving on Audits was conducted to find out what our staff thought about working at Bellarine Community Health.

That same survey was held again in the 2016/17 reporting period with the results compared and also benchmarked against other health and community services.

More than 75% of staff agreed that the management of the organisation is committed to implementing continuous improvement in the way care and services are delivered.

Over 75% of staff surveyed noted that the organisation's policies and procedures to ensure safety and quality are clear, easy to follow and enabled them to do their job effectively.

The organisation is committed to continually improving its systems and the survey Auditors noted that Bellarine Community Health has a robust improvement system.

More than 85% of staff agreed that BCH is committed to ensure a safe and healthy environment for staff and visitors. Almost 100% of staff agreed that consumers are treated with dignity and respect.

66% of staff surveyed agreed or strongly agreed they received adequate education and training to perform their job.

In a bid to further improve the quality and safety of all programs and services, several staff training sessions were held around mental health to assist staff to better understand how mental health issues may present in staff and clients.

Staff also participated in online training to understand changes to child safety legislation and raise awareness of child safety and the reporting requirements.

Staff were asked the question did they have the opportunity to contribute to the improvements of the service and 82% agreed or strongly agreed that they did.

The staff survey results help BCH identify areas for improvement and help us build a strong culture of quality and safety.

Quality and Safety Matters



Bellarine Community Health undertakes accreditation to assure the community that we meet health and safety guidelines and continuous quality improvement.

In October 2016 Bellarine Community Health's Allied Health Services and Dental Services were involved in a full accreditation audit under the Quality Improvement Council Standards and the National Safety and Quality Health Service standards.

The recommended findings show the organisation achieved outstanding results, meeting or exceeding all the expected outcomes across all categories.

Highlights were excellence in Governance, Quality and Safety, Partnering with Consumers and Community and Professional Engagement.

The report attributed BCH's success to the systematic approach and commitment by the Board, CEO and direct reports to embed continual improvements. It found the organisation is responsive, flexible and active in engagement and meeting community needs.

In June 2017, we successfully completed our self assessment in Palliative Care and received the following feedback from the National Standard Assessment Program Assessor -

"It was evident that a lot of work had gone into the self assessment process and there was a lot of evidence to support each expected outcome."

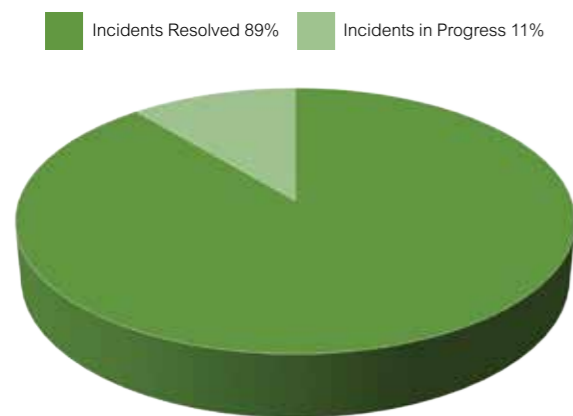
The Palliative Care program was deemed compliant with all 13 standards. The next phase will see BCH implement the Continuous Quality Improvement (CQI) action plan over an 18 month period.

There were a number of recommendations for areas of improvement which Bellarine Community Health has been working to implement.

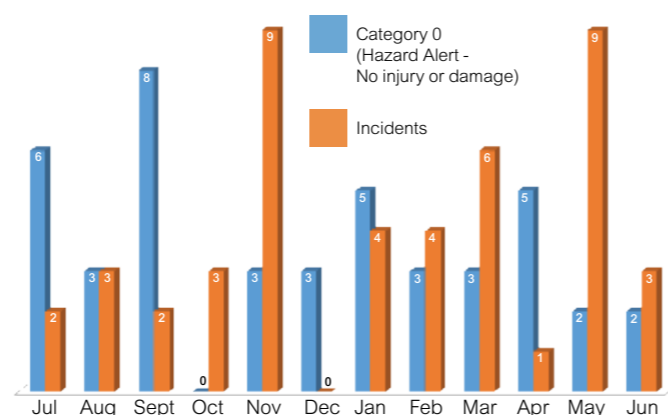
One improvement area identified was around policy and procedure for the BCH website and Social Media Page. The Communications policy has since been revised and updated to reflect the inclusion of the website and Facebook page.

Another area for improvement related to communication to staff around feedback and complaints. A quality and safety newsletter has since been developed to keep staff updated with client feedback.

2016-2017 Health and Safety Incidents



2016-2017 Health and Safety Incidents Comparison of hazard reports to other incidents



The culture of health and safety reporting has continued to improve at Bellarine Community Health over the past year, with reports of "hazards" making up approximately 50% of all incident reports. This has allowed us to review our practices and procedures in response to a hazard report, and to make changes to ensure the risk of harm occurring is reduced or where possible, eliminated.

The Bellarine Community Health Incident management system has been refined, ensuring that incidents are resolved and improvements put into place in a more timely manner. Coordinators are held accountable for making improvements with the outcomes reported throughout the organisation.

Improvements are varied and may include changes to equipment, policies, clinical practices and the way in which programs are delivered.

Standards	Status	Standards	Status
National Safety & Quality Health Services standards	Fully accredited	Home Care Common standards	Compliant
Quality Improvement Council standards	Fully accredited	National Standards Assessment Program Palliative Care Audit	Compliant

Bellarine Community Health Ltd

All correspondence to: PO Box 26, Point Lonsdale Vic 3225

Our Services

Primary Health Services

- Cardiac Rehabilitation
- Community Health Nursing
- Community Nursing & Palliative Care
- Continence Clinic
- Counselling
- Dietetics
- Dental
- Diabetes Education
- Home Care Packages
- Footcare Nursing
- Health Change
- Meals on Wheels
- Occupational Therapy
- Physiotherapy
- Physical Wellness Program
- Planned Activity Groups
- Podiatry
- Volunteers
- Women's Health Clinic

Child, Health & Development

- Dental
- Dietetics/Nutrition
- NDIS Coordination
- Occupational Therapy
- Physiotherapy
- Podiatry
- Speech Pathology

Services for Young People

- Counselling
- Dental
- Dietetics/Nutrition
- Health Nurse
- Occupational Therapy
- Physiotherapy
- Podiatry
- headspace - Drysdale
- Drug & Alcohol
- Mental Health

Site Locations

DRYSDALE

21-23 Palmerston Street
Drysdale 3222
Ph: 5251 4640
Fax: 5253 1134

headspace Barwon Bellarine

Peninsula Drive
Drysdale 3222
Ph: 5253 0400
Fax: 5251 5099

OCEAN GROVE

Cnr Presidents Avenue
& The Avenue
Ocean Grove 3226
Ph: 5255 0440
Fax: 5256 3948

QUEENSCLIFF

Cnr Nelson & Grimes Road
Point Lonsdale 3225
Ph: 5258 0888
Fax: 5258 0811

PORTARLINGTON

39 Fenwick Street
Portarlington 3223
Ph: 5258 6140
Fax: 5259 3269

To enquire about any of these services
contact the Information & Access Officer
on 5258 0812 Email: intake@bch.org.au

