



Welcome to Rural Northwest Health

Management System Overview for Our Customers (Patients, Residents, Clients)

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HEALTH SERVICE OVERVIEW

Rural Northwest Health (RNH) is a public health service funded by the State and Commonwealth Governments with campuses at Warracknabeal, Hopetoun and Beulah.

RNH is situated 60km north of Horsham. The health service provides accommodation, meals, health and personal care services for 30 residents at Hopetoun Campus. There are also another 30 residents at 'Landt Hostel' in Warracknabeal and 32 beds in 'Landt Nursing Home, Warracknabeal. In addition, acute care is provided via 4 beds at the Hopetoun campus and in the 17 bed 'Intermediate Ward' at the Warracknabeal Campus. 24 hour emergency care is provided in each acute department, with medical coverage provided by visiting medicals officers.

RNH provides other services and this includes:

- Adult Planned Activity Groups in Beulah and Warracknabeal.
- Podiatry, Speech Pathology, Physiotherapy, Occupational Therapy and Welfare support for residents and community members.
- Visiting Dental, Massage, Optometry, Hospice Care, Radiology and Aged Care Assessment services.
- Diabetes and Asthma Educators
- Extensive District Nursing services at each campus
- Community Health nurses offering health promotion to community members of all ages.

OUR VISION

Moving together through change to provide innovative rural health care.

OUR MISSION

Rural Northwest Health will provide accessible, efficient and excellent care to our community within the Wimmera Mallee Region.

The service objectives are:

- Provision of appropriate services
- Maintenance of financial viability while adapting to the changing health care economic environment
- Improvement in communication and marketing to the local community and other stakeholders

- Recruitment and retention of a multi-skilled rural workforce
- Ensuring appropriate facilities and equipment to provide the standard of care required
- Expansion and improvement in the capability and use of Information Technology Systems
- Continuous improvement and clinical governance culture embedded in all aspects of service provision

CUSTOMER SERVICE

The focus of our service is our patients, residents and clients. Staff at RNH have a central role to play in promoting quality care and services to our patients, residents and clients. Good customer service starts with our ability to effectively communicate with our patients, residents and clients, their representatives and visitors to our facilities. In relation to Residential Aged Care services this is achieved in the following way.

RESIDENT / RELATIVE FOCUS

Policy Statement:

RNH is committed to providing Residential Aged Care services and seeks to meet residents / relatives specified needs and expectations, provide a program of health and well being that is supported by “Ageing in Place” to ensure an optimal quality of life.

In this context “Ageing in Place” relates to the provision of both high and low care within the same home wherever possible and not having to move between RNH and other Residential Care Services. In the new Hopetoun Campus residents are now able to Age in Place without the concern of moving to other buildings.

At Warracknabeal Campus however residents may still be required to move from the Landt Hostel to the Landt Nursing Home building if the care needs cannot be adequately managed by the staff at the hostel. Generally however residents are supported in the Landt Hostel for as long as possible. Once the capital redevelopment is complete possibly late 2007 Ageing in Place arrangements will occur as is now occurring at the Hopetoun Campus.

All resident care is managed by a Registered Nurse Division 1 regardless of the home you are placed in.

With a change from low to high care classification of residents based on care needs there may be some change to the fee arrangement in accordance with the commonwealth fee guidelines.

RNH follows documented processes that comply to the requirements of the Aged Care Standards and Accreditation Agency against the 4 Standards and the 44 Expected Outcomes.

The management and staff are committed to realizing the principles outlined in the Commonwealth's Charter of Resident Rights and responsibilities.

RNH Management believes that success is achieved by meeting the following objectives:

- Providing quality care to residents, being flexible and responding to our residents changing needs
- Training and motivating staff
- Adherence to documented processes
- Investigation of systems and recording any deficiencies
- Implementation of effective corrective action
- A process of continuous improvement.

RNH has also instituted Occupational Health and Safety measures in accordance with the State Regulation requirements.

Senior Management is fully committed to the successful implementation and maintenance of the Management System and it is the responsibility of all staff to actively participate in all related activities.

RNH shall provide all resources necessary to achieve the above objectives through the following processes:

Pre-admission:

- Your choice of facility
- Comprehensive facility information
- Resident handbook detailing answers to most questions asked
- Interviews with management and staff
- Tour of the facility
- Our staff will assess all in-coming residents to ensure our capacity to provide the agreed standard of service.

On Entry:

- Our agreement with you is discussed and signed (***Residency Agreement***)
- Your rights and responsibilities are explained
- Our staff document all of your preferences, likes and dislikes and history relating to all aspects of you and your life
- Choice of doctor.

Induction:

- A comprehensive plan of care and service is individually developed in consultation with each resident/relative
- A program of activities is developed to reflect cultural, spiritual, social and lifestyle requirements
- Food service and direct care staff discuss and record each resident's dietary likes and dislikes
- Resident survey.

On-going collaboration:

- As the resident's likes and dislikes and physical condition improve or change the ***Care Plan*** is updated according to alternatives discussed with each resident
- As the facility improves its services and environment the residents' opinions and feedback is sought through meetings, newsletters and indirect conversation
- As lifestyle preferences change each resident's activities are altered accordingly
- Our systems for identifying and responding to changing needs and wants include:
 - The Opportunity for Improvement Feedback
 - Suggestions box
 - Incident Reports
 - Committee/Meeting Structure
 - Care Plan reviews
 - Notice boards
 - Strategic planning
 - Menu consultation
 - Education sessions.

Complaints and comments:

- Opportunity for Improvement feedback
- Direct
- Through phone, fax, e-mail

- Dispute resolution processes by initially meeting with department / unit managers
- All residents will be provided information to refer to:
 - Aged Care Complaints Investigation Scheme
 - Office of the Aged Care CommissionerAdditionally, should they also seek an advocacy service, this will be supported.

REGULATORY COMPLIANCE

Standards, Laws, Acts, Codes of Conduct and Practice are identified by Management and integrated into the documented management system. These Management policies guide all of RNH practices.

All work practices, which affect the quality of care and service provided to the residents, are identified, then documented as procedures, work instructions and forms. These documents, which form the Management System, are controlled and ensure practices are regularly assessed, reviewed and feedback provided to staff and sub-contractors. Staff are expected to be familiar with the regulations that pertain to their position.

The review system ensures comparison is undertaken between actual practice and the required standard and expectations of residents and regulatory bodies. This is reviewed and evaluated over an ongoing period.

The following is a small list of some of the regulations and standards applicable to the delivery of our services:

- Aged Care Act, 1997 (Aged Care Amendment Act 2000)
- Equal Opportunity Act, 1995
- Human Rights and Equal Opportunity Commission Act, 1986
- Workplace Relations Act, 2006
- Privacy Act 1988; and Privacy Amendment (Private Sector) Act, 2000
- Australian / New Zealand Standard AS/NZS 4360 (Risk Management)
- Australian / New Zealand Standard AS/NZS 4187 (Cleaning, disinfecting and sterilizing...)

PERFORMANCE INDICATORS

RNH has developed a range of indicators to assist in measuring performance, its structure and processes, including:

- Achievement of planning objectives and budgets
- Clinical specific indicators
- OH&S specific indicators
- Regular personnel reviews
- Incident reports and summaries
- External and internal audits, assessments and evaluation of outcomes
- Accreditation status

QUALITY OBJECTIVES

The Board of Management will build a culture of Continuous Quality Improvement by advocating a system that improves the effectiveness, efficiency and quality of health services provided.

This will be achieved through the following quality strategy:

- RNH complies with the standards as outlined by The Aged Standards Agency, The Australian Council on Healthcare Standards, The Home and Community Care National Standards Instrument and Guidelines along with other accreditation programs deemed as applicable.
- RNH engages with The Aged Care Standards Agency, The Australian Council on Healthcare Standards, and The Home and Community Care National Standards Instrument and Guidelines program of evaluation.
- RNH meets other relevant standards, statutory requirements and professional codes of practice.
- Continuous Quality Improvement incorporates Clinical Risk Management and Occupational Health and Safety.
- All aspects of RNH service provision have appropriate indicators of performance.
- RNH adopts the principle that the clients (patients and residents) are the central focus of all services provided.
- RNH has raised the profile of Continuous Quality Improvement.

The above objectives will be met by the following actions:

- The development and maintenance of a health service wide Continuous Quality Improvement Program.
- A demonstrated commitment to improving outcomes by identifying and initiating quality activities.
- Those quality activities undertaken will clearly demonstrate that effective work practices are maintained and increased.
- The development and maintenance of systems to establish a culture of safety.
- Encouraging and promoting innovation and creativity within all areas of the health service.
- Attain applicable accreditation status.

OUR MANAGEMENT SYSTEM

Our management system incorporates a system that has an:

- Accurate description of current practice
- Is user-friendly and is an aid to staff in the performance of their duties
- Assists in continuously improving our performance

PRIMARY SOURCE OF STAFF INFORMATION

The intranet is the primary source of information for all staff and the intranet site includes:

- Vision and Mission Statement
- Organisational Structure
- Committee Structure
- Short Term Key Focus Plan
- Management Reports
- Staff Orientation Booklet
- Policies and Procedures
- Work Instructions
- Calendar of Events including the Education Schedule
- Clinical Care Manuals such as Joanna Briggs Best Practice Evidence Based Practice Manuals

- Riskman our Incident Reporting Program and this includes a training component
- Legislation key sites and links
- Media Releases
- Noticeboard

ORGANISATION COMMITTEE STRUCTURE

GOVERNANCE	OPERATIONAL
<ul style="list-style-type: none">• Board of Management• Finance, Audit and Compliance• Continuous Quality Improvement• Planning	<ul style="list-style-type: none">• Leadership and Management• Clinical Risk Management• Occupational Health & Safety• Working Groups as determined• Resident / Relative Meetings• Department Meetings

Reporting Relationships:

- The Clinical Risk Management, Occupational Health & Safety Committees report to the Governance Continuous Quality Improvement Committee.
- The Leadership and Management Committee reports directly to the Board of Management via the Chief Executive Officer
- Each department manager reports either directly or indirectly to the CEO

ORGANISATIONAL CHART

Responsibilities and authorities of staff and how they affect the operation of the Management System are clearly described in RNH policies, the instrument of delegation and position descriptions.

The organisational structure is as follows:

