

# Quality of Care Reporting

An annual Quality of Care Report is an important initiative commencing in 2001. The performance of Ballarat Health Services is being measured constantly and it is time to report directly to the Ballarat community on our achievements.

Meeting the needs of our consumers is the primary purpose of the work undertaken by Ballarat Health Services. Part of our strategy to improve the service to you has been the involvement of consumer representatives in planning and evaluation, our customers helping us to improve those things which matter most to them.

The topics covered in this report were raised through discussions with a number of consumer groups as well as a survey conducted in the local newspapers earlier this year.

Quality Matters has been produced in a magazine format to allow us to reach a wide readership at a reasonable production cost.

The Board of Management welcomes your comments to this report.

Mark Schuitz, President

The carers are represented on the front cover of Quality Matters by lim Hynds and Helen Quick and consumer consultants by Burry Laidlaw and Mark Lacey. Intergrated quality care at Ballarat Health Services is delivered at the Queen Elizabeth Centre, Grampians Psychiatric Services and the Base Hospital.

# What's in a name?

Ballarat Health Services (BHS) is a new organisation with a history spanning 145 years! On 1 January 1997, three large health services joined to commence a new enterprise. Ballarat Base Hospital (1856), The Queen Elizabeth Centre (1857) and Grampians Psychiatric Services (Lakeside Hospital 1893), now operate as Ballarat Health Services. Because each organisation was well known, it has not been easy to get used to this change.

LEGEND

(E) Eyres House

Elizabeth Brown Day Centre

Geoffrey Cutter Centre

(H) Central Highlands Linen Service

@ Eureka Village Hostel

Sebastopol Complex
Ethel Lowe Day Centre
Jemes Thomas Court
Jessie Gillett Court

Jack Lonsdale Lodge

QE VIllage
 WB Messer Hostel
 PS Hobson Nursing Home

Midlands Day Centre and Hostel Halley House Hostel To complicate things, there are a number of subsidiary services that belong to the BHS family but have their own names. Safety Link, Linkages, Carer's Choice, Central Highlands Linen Service, and Aged Care Assessment Services (ACAS) are examples of these family members.

Nothing is more annoying than going to the wrong address Reception staff are specifically trained to provide directions, especially over the telephone. Reception staff also have direct computer access to all admission lists, service and staff directories. A 'phone call to 5320 4000 will make sure you have the correct directions.

BALLARAT

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#### Ballarat Base Hospital - 5320 4000 Administration Acute Care 1 Outpatients Psychiatric Services K 塞 · Education Resource Centre 24 hour Emergency Cillies Queen Elizabeth Centre - 5320 3700 ydiard Peter Heinz Centre (Rehabilitation Ward) Gandarra Palliative Care Unit Aged Care Assessment Services Geriatric Psychiatry - Steele Haughton Unit Talbot Place Nursing Home @ 1 Special Care Dementia Unit Bill Crawford Lodge To Attelaide Centre Against Sexual Assault 0 Linkages Carers' Choice Education Catering St Asost (a) Safety Link Pleasant Homes Hostel (B) Eastern View Community Care Centre

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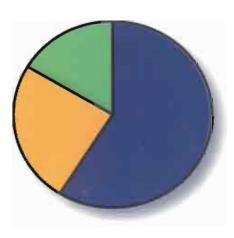
# A major industry

In September 2001, Ballarat Health Services employed 2599 people, a six- percent increase over the previous year. Some 37 percent of the staff work full-time.

The range of professions required by a health service is vast and Ballarat Health Services has to manage complex systems to make sure the right person is in the right place at the right time.

# Nursing staff

Nurses form the largest group, some 700 men and women employed full-time, part-time and on a casual basis. Nurses are classified according to their qualifications.



Classification	Qualification	Number EFT
Division 1 RN	University degree or equivalent	460
Division 2 RN (formerly SEN)	TAFE diploma or equivalent	193
Division 3 RN (Psychiatric)	University degree or equivalent	128
Total		701

All nurses must be registered with the Nurses Registration Board of Victoria. Ballarat Health Services is required to check each nurse's registration status each year to make certain that no unregistered nurse works at any time.

Nursing is becoming more and more specialised as particular services become more complex. A growing proportion of our nurses has post-graduate qualifications, especially diplomas or certificates in a particular branch of nursing. Other nurses have obtained or are working towards advanced tertiary qualifications including master's degrees and doctorates. These qualifications represent an additional year or more education and study.



Tara Harris RN Div 1, Clinical Nurse Specialist in the Critical Care Unit has completed a Graduate Certificate In Critical Care Nursing.

Our nursing staff place a great deal of importance on providing the highest quality of nursing care. They are committed to demonstrating their ability to meet or surpass the National Competency Standards promoted by the Australian Nursing Council. Of particular importance in the past year have been training programs to develop clinical skills, such as basic and advanced life support, care of continuous epidural infusions, patient controlled analgaesia, intravenous (IV) cannulation and cytotoxic management to name a few.

#### Medical staff

Like most regional hospitals in Australia, Ballarat Health Services must work hard to recruit a high calibre senior medical staff to fill the 88 positions currently set as the approved medical establishment. Most of the senior medical staff are specialists, either visiting medical officers, who are also private practice surgeons or physicians, or senior medical officers employed by Ballarat Health Services. These specialists are also responsible for the continued training and supervision of the 50 hospital medical officers. Some HMOs are newly graduated medical practitioners, while other are in various stages of specialist training which may take six or more years.

Medical practitioners must be registered to practice in Victoria and they must demonstrate their active participation in continuing education and professional development. Ballarat Health Services has been accredited by a number of medical bodies for the purposes of training new medical practitioners. This is a good yardstick for measuring quality.

#### Allied health staff

A large group of Ballarat Health Services staff are in the broad classification of "allied health", some fourteen professional groups with 122 employees.

Pharmacists, physiotherapists, podiatrists and psychologists must be registered to work in Victoria. Ballarat Health Services requires staff in the other groups to be eligible for membership in their professional associations. Thus, careful checking of each person's qualifications is undertaken before employment, and registration status is verified annually.

Graduate education is actively encouraged for these staff, Ballarat Health Services often contributing more support than may be usual for similar staff working in a metropolitan hospital. Ballarat Health Services has found that this investment pays important dividends, improving our ability to recruit and retain high quality staff who may otherwise be tempted to stay in or move to the city.

# Corporate services staff

While caring for our patients, clients and residents is the reason for the existence of Ballarat Health Services, the care staff cannot function without the corporate services staff. A number of positions in these services require staff with professional qualifications as well as evidence of continuing education and development. Chartered accountants, engineers, computer technologists, chefs, and managers are some of the professionally qualified staff employed by Ballarat Health Services.

A large number of staff work in positions that require trade qualifications, such as plumbers, electricians, carpenters, and gardeners.

Other staff are employed in positions that do not require formal qualifications but training and experience are just as important to make sure we provide the best service possible. Every employee in BHS is an essential "cog-in-the-wheel".

Ballarat Health Services conducts a wide variety of training programs to ensure appropriate staff are competent in first Aid, cardio-pulmonary resuscitation (CPR), fire safety, and manual handling.

Number (EFT)\*

6.26

5.54

13.60

13.53

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5.72 12.18

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7.19

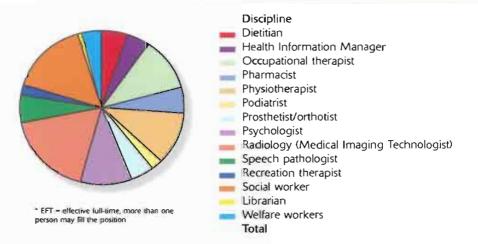
2.61 18.90

1.0

4.76

122.36

6.61



#### Accreditation

Accreditation is a process in which an external agency inspects a service to evaluate its performance against a set of standards. The agency's stamp of approval is recognised as endorsement of the quality of the services being provided.

The Australian Council on Healthcare Standards is the principal agency for the accreditation of Australian health services. Ballarat Health Services was awarded three-year accreditation in 2000, following a five-day inspection. In May 2001, ACHS surveyors undertook a Periodic Survey to check on our ongoing quality improvement. We were pleased to pass this test with only one recommendation for particular attention.

In 2000, Grampians Psychiatric Services was also accredited under the National Mental Health Standards for three years. All BHS nursing homes and hostels are now accredited under the Commonwealth's Residential Aged Care Standards. This accreditation was awarded after very detailed inspections. Although the accreditation is for three years, ongoing reviews make sure the standards are being continually improved. The staff, residents, families and volunteers are very proud of their achievements, and deserve congratulations.

A number of other services have been accredited specifically under standards applying to that service. This recognition is essential for BHS to participate in a range of training and education programs for medical, nursing and allied health professionals.

In 2001, Ballarat Health Services was recognised as a "Baby Friendly Hospital" by the Australian College of Midwives through an international accreditation program supported by the World Health Organisation and UNICEF.



#### A quieter night

Cordless telephones are now used by nurses on evening and night shifts. These 'phones have significantly improved service quality. Patients are not disturbed by ringing telephones. Nurses don't have to leave patients to answer the 'phone, and there have been fewer complaints that calls have been neglected

#### Safe water for Dialysis

Patients attending Dialysis rely on a very high quality water supply. BH5 now has an arrangement with the Central Highlands Water Authority for notification when chlorine is being added to the water. Until the amount of chlorine returns to acceptable levels, afternative water supplies are used in the dialysis machines.

# Bugs in the system

Bacteria are lascinating micro-organisms, too small to see but present in their zillions in our bodies and the environment in which we live and breathe. There are good bacteria without which we cannot live healthy lives but there are also bad bacteria that cause infections and illnesses.

Healthy people usually have the ability to fight off any invasion of bad bacteria, their immune system helping them to recover full health quickly after a bout of illness. Illness, injury or surgery, however, may lower the ability of the immune system to do its work effectively.

Antibiotics have been developed as front-line fighters in the war against bad bacteria. Over time, though, some of these bacteria have become resistant to the available antibiotics. Enterococci are bacteria normally found in the bowel and female genito-urinary tract but they may cause infections in some people. These enterococci have become resistant to antibiotics and are now a big problem for everyone involved with a hospital.

Over many years, hospital staff and scientists have continually improved the infection control standards that guide work practices, aiming at eliminating or minimising problems. Regular assessments are conducted to make sure everyone obeys all the rules set out in these standards.

Many bacteria, especially enterococci, are spread by hand or through the common use of equipment. Good hygiene is essential, beginning with careful handwashing. Staff are required to wear gloves, gowns and plastic aprons when undertaking many patient care procedures, discarding them before going on to another patient. Equipment must be cleaned thoroughly before being used by another patient. When the demand for beds is heavy, some new patients may have to wait to be admitted to their bed until the cleaning has been completed. While this may be annoying, we can't take short cuts without putting that new patient at risk.

The standards applying to the Operating Theatres and the Central Sterilizing and Supply Department (CSSD) are very high. Ballarat Health Services has up-to-date facilities and the staff work consistently to maintain the very highest standards of cleanliness. A very detailed testing system, based on the Australian standards, is used regularly to measure the levels of cleanliness or sterility.

# An excellent report card!

Ballarat Health Services easily passed its first, formal cleaning inspection. We were one of 56 Victorian public hospitals inspected by the Department of Human Services in 2001. In July 2000, the Government brought in new legislation, Cleaning Standards for Victorian Public Hospitals, because there had been complaints about the quality of cleanliness in some Victorian hospitals.

The Environmental Services staff reviewed their work schedules and processes to make sure they were doing everything the new standards required. One afternoon, the manager received word that the inspectors would be arriving next morning at 6.00am to begin their inspection, commencing with the Operating Theatres.

An unannounced sample of hospital rooms was inspected, with a large number of items in each room being examined and scored. Scores were then tallied in a rather complicated mathematical system to develop room scores and overall hospital scores.

The staff were very proud when the results were announced. Ballarat Health Services had achieved 92.3%. The pass mark was set at 80% and the average score for the 17 regional hospitals ranged from 90.4% to 97.9%.

Problem areas that led to our failing to reach 100% related to excess oil on some door hinges and the inadequate space behind the taps on some handbasins. A new tool is now being used to get into this narrow space. Door hinges are now given particular attention, especially after any maintenance.

The Department of Human Services plans to conduct these unannounced inspections from time to time but the staff are confident that they will meet the challenge with even better results next time.

#### Crisis support

The Centre Against Sexual Assault (CASA) has expanded its 24-hour crisis service, allowing more women and children to get advice and care when they need it. Positive reports have been received from the clients, as well as local police, general medical practitioners, the hospital Emergency Department and other service providers.

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#### Prevention

Newmond infections to a with role for all areas of filalling Health Services. Each department has a staff member, socially a mass appointed to the infection Central Newmon. This riture is extrated by for ensuring policies are followed to examine the department. Staff etheralics is examined to everyone known the latest information, as were as the appropriate procedures.

During the last accreditation survey, the surveyors bound that Ballarat Health Services had not name recount work to make sure the same potices and procedures were being postuled in all department. Before anothermation the Same Hospital the Queen Elizabeth Centre, and Grompton, Psychiatric Services had different approaches to Midellier coatrol. While these mint me standards to Midellier coatrol. While these mint me standards to the part of the move around the organisation to see the hospital or the listest potential contents. For men, move that the part of the listest potential contents of the listest potential contents. The next introduction survey will only coose attention to our active energy.

# Health of patients

Constant standalism in execute in reduce the chances of infection occurring. Bahana Health Services plinticipates in a standard internal incommunity program in which all resorted interiors are thoroughly assessed by pathologists and specialists information obtained in these examinations is then used to intentily problems and correct them.

infection Control hurses smitall pallows 30 days after they have undergone particular surgical procedures. Their post operative experience provides valuable information which is carefully reviewed by a team of expent for opportunities to improve.

From July 2000 to May 2001, excluding January, there were 6752 patients discharged after a hospital stay of 48 hours or more. During that time nine patients were found to have infections or bacteraema. These results were reported to the authorities and compared with all other hospitals in Australia. The average acceptable rate, called the Bacteraemia Index, is 0.85%. The Bacteraemia Index for Ballarat Health Services during this period was 0.13%, well within the acceptable rate.

# Legionella

On 1 March 2001, the new Health (Legionella) Regulations took effect. These regulations introduced a number of changes to the way Ballarat Health Services operated and maintained its cooling towers. Testing for bugs in the system has been revised, with standard tests now being required every month. If a problem is found, standard disinfecting and cleaning procedures are implemented immediately, with further testing to determine that the problem has been corrected.

Since the new system has been in place, there has been one adverse legionella count at the Base Hospital. Corrective actions were implemented immediately and no adverse counts have been found since then. The heterotrophic colony count, the other important monthly test for water in the cooling towers, also had one adverse result at the Queen Elizabeth Centre and five at the Base Hospital. Again, corrective action was undertaken immediately and further testing has been satisfactory.

# Effective discharge planning

Most people think that returning home is the best part of any hospital stay. Being prepared for convalescence and continuing recovery is as important as being given care while in hospital. Being prepared may involve learning how to continue treatments and to manage medications correctly. Some people may need assistance from community services such as community nurses, home carers, and delivered meals. Special equipment may be required. Organising everything comes under the task of discharge planning.

Effective discharge planning must commence as early as possible, before admission if the hospital stay is planned. There must be evidence that there has been early consultation with the patient and carers, as well as any community service providers that may be needed. On or before admission, nursing staff will collect a range of information that will help predict what the patient may need for a safe and effective discharge home. Our experience with similar patients allows us to predict with some confidence how long most patients will stay in

hospital. In recent times, the average length of stay has been about three days, about the same as for other regional hospitals. So there isn't a great deal of time available to develop a plan and put it in place.

The Department of Human Services published standards for discharge planning in 1999. Ballarat Health Services has reviewed its practices and procedures to make sure we meet these standards. The recently released results of the Victorian Patient Satisfaction Survey conducted by the Department of Human Services showed that our patients rated discharge planning at 71 compared with an average of 68 for similar hospitals. This was a pleasing result. On the other hand, an audit of our medical records by the DHS produced a most disappointing result. Even if we were doing everything we should, we were not recording it correctly so there was inadequate evidence available to prove that we were doing it. There is a basic rule in health care evaluation: "if it isn't written down, it wasn't done"

A great deal of work is being done to improve our discharge planning. Follow-up surveys are essential to measure the effectiveness and efficiency of the plans. The experiences of our patients, and their carers, provide important information from which we can learn. We hope the next audit will demonstrate that we are doing a good job in discharge planning.

#### Patients, families and death

Different areas of Ballarat Health Services have different experiences with the care of people who are dying, with death and with the care and support of grieving families.

Gandarra is a Palliative Care Unit which embraces the physical, emotional, social and spiritual needs of each patient and family. Staff and volunteers are all specially trained and will listen, help and offer support. A host of letters of appreciation indicates that they are usually very successful.

The majority of the residents in our nursing homes end their lives in the presence of their families and the care of our staff. Because the average length of stay for nursing home residents is several months, the staff develop strong relationships with the residents and their families. Thus, they have a good idea of what is needed to provide the best care for each person, clinically, psychologically and spiritually.

Death in hospital is not common. Experienced senior staff have important leadership roles at these times, making sure everything possible is done to help the patient to a 'good death' while supporting the family and friends, as well as other staff. Staff who work in the Emergency Department, Intensive Care and Oncology probably have more experience with death than other hospital staff but every death is a significant emotional experience for everyone involved.

The death of a baby or young child is particularly difficult. Maternity Services staff place a great deal of emphasis on preparing a "Memory Package" for the grieving parents. A lock of hair, hand and foot prints, a memory quilt and, if requested, photographs are gathered to ensure the parents have treasured keepsakes

Unexpected deaths must be reported to the Victorian Coroner. Sometimes autopsies must be arranged. Increasingly, organ donations need to be considered and organised. Decisions about discontinuing life-support systems may need to be made. All of these events require careful handling by sensitive staff. Ongoing training and support is always under evaluation so we can provide the best care when it is needed.

The hospital chaplains, various psychologists and social workers are always available to assist families and staff at these times. Ballarat Health Services has also found that allowing staff to attend funerals helps them manage their grief.

#### Abuse of elderly people

Protocols to help staff take appropriate action in situations of suspected abuse of elderly people living in the community are being developed and will be released shortly. Unfortunately, this abuse is not uncommon, it may be physical, psychological or financial. The protocol guides staff in taking an appropriate, confidential and legally correct response to any report.

# Waiting lists

The demand for health services is continually growing. The population serviced by Ballarat Health Services increases every year. Older people form the largest group of patients and their numbers are increasing. Ballarat also has a large population of young people because of its schools and universities. High levels of unemployment and a large population of disadvantaged people results in fewer people with private health insurance.

Each year, Ballarat Health Services receives funding to provide a range of services, in the last year, we treated almost 25,000 inpatients and provided over 200,000 care attendances to outpatients and people in the community.

Unfortunately, demand for our services often outstrips our capacity to provide them. In these situations, priorities need to be established to ensure that the breadth of our services is maximised. This may lead to the creation of waiting lists. While all possible efforts are made to increase our capacity, some patients will have to wait for a place.

#### Elective care

Waiting lists for elective or planned care are categorised into three levels. Maximum time limits have been set by the Department of Human Services for each category and we must report the state of our waiting list every month.

Our medical staff, in particular, place a great deal of importance on the effective and efficient management of waiting lists, especially for elective surgery. Meetings are held every week to review the patients on the list, priorities changing if the medical practitioners consider needs to have become more urgent.

The waiting list statistics for September 2001, compared with September 2000, show that Ballarat Health Services has improved its throughputs

substantially. There were 1,505 people on the hospital waiting list in September 2001, compared with 1,737 in September 2000, a 13 percent decrease. Average waiting times reduced, and there was a 20 percent decrease in the number of times operations were postponed for reasons beyond control at the time.

Patients on waiting lists for some surgical procedures, such as joint replacements, may be invited to join a "Get Fit for Surgery" program. These have been developed by physiotherapists, dietitians and recreation therapists in consultation with the surgeons, to assist patients improve their health, especially mobility and muscle strength, so they are better prepared for their surgery. Assessments have shown very positive results

Category	September 2001			September 2000		
	No. on list	% Over time	Average time	No. on list	% Over time	Average
Category 1 Less than 30 days	3	0		2	0	-
Category 2 Less than 90 days	293	35	103 days	371	40	115
Category 3 No time specified	1209	0	400 days	1403	0	421

#### An Asthma Plan

Nursing staff from 4 North have worked extensively with the senior medical registrar to develop an improved approach to helping patients with asthma. An Asthma Education Package has been prepared to provide patients and their families with information and advice to improve their ability to manage this difficult condition.

#### Falls prevention

With special funding from the Department of Human Services, Ballarat Health Services has undertaken extensive research to develop a Falls Prevention Program. Staff now have risk assessment procedures which are implemented at the time of admission to the hospital or residential care. We have also developed a range of activities that can be used with patients to minimise the chance of falling, thus ensuring a safer hospital stay.

#### Residential Services

It is difficult to predict exactly how many residential care places are required in a community because needs seem to change all the time. The current Commonwealth funding systems require all approved beds to be occupied, so it is not possible to have spare beds available if the demand suddenly increases.

Ballarat Health Services works closely with the other residential care service providers so potential residents and their families have as much information as possible, especially about available beds, when the time comes for them to make decisions.

Despite everyone's best efforts, it is often not possible to provide a place of choice immediately it is required. Unfortunately, waiting lists are usual, more so for hostel places than for nursing homes. The chart shows the number of people on the BHS waiting list each month for 2001. The person and family are provided with as much support and alternative care as possible while they wait, whether or not that is in the community, hospital or another nursing home.



#### Leading research

Our clinical nurse consultants in continence nursing have received several grants to undertake research into improved management practices for bowel care. This area of nursing care is of critical importance for many people and we are very proud of the contributions our nurses are making to the development of best practice nursing knowledge.

#### Departure delays reduced

Some children being discharged from hospital had their departure delayed because the medication prescriptions being sent to the Pharmacy did not always include their weight. A special sticker has been organised to be placed on the discharge summary form to remind the doctor to provide this essential information. This simple reminder has saved a great deal of time, assisting the parents and the children get on their way more efficiently.

#### Senior medical staff for public patients

Generally, public patients in a public hospital are not able to choose the physician or surgeon who will be responsible for their care. Ballarat Health Services is fortunate in having a full complement of qualified and very experienced senior medical staff with representatives of a wide range of specialties on duty or on call at all times. Each of these senior medical staff, also known as visiting medical officers if they are also in private practice, work with a number of hospital medical officers. These may be registrars or specialist in training, or first and second year interns. The specialist is responsible for the care of the patient as well as for the training and supervision of the hospital medical officers.

The Ballarat Health Services' Statement of Rights and Responsibilities contains provisions that are important in relation to medical care.

#### Rights

To be accepted and treated as an individual at all times

To be treated with dignity and respect, including the right to have religious, cultural, sexual and emotional needs and preferences accepted

To receive quality care in an environment that is safe and comfortable for you, your relatives and friends

To expect that your privacy and confidentiality will be respected

To expect that any concerns or complaints will be dealt with promptly and without prejudice

To be provided with adequate information to enable you to participate in or be consulted about decisions related to your care.

Ta seek a second opinion or to refuse recommended tests and procedures after being informed of the consequences

To be able to access your Medical Record under the provisions of the Freedom of Information Act

# Satisfaction report

The best way for a health service to find out if it is meeting the needs and expectations of its customers is to ask them. Ballarat Health Services participates in the Victorian Patient Satisfaction Monitor which surveys randomly selected patients discharged from the hospital in the previous six months.

Patients participating in the survey rate their satisfaction on 27 questions and statisticians calculate care indexes from the responses. These calculations are quite complicated but the results can be considered a reliable reflection of satisfaction.

Information about BHS gathered in this survey can be compared with other similar health services. These comparisons highlight areas of satisfactory performance as well as areas that need attention.

For the first six months of 2001, Ballarat Health Services received an average score card for most areas. There were, however, some notable exceptions

BHS is rated very highly for its discharge and followup processes, scoring 71 compared with an average of 68 for its peer hospitals. The report commented: "achieving such positive results in what is often one of the worst performing areas of the care process is a pleasing result." BHS also performs very well in two other areas: staff response to patients needs and the quality of the food, especially its temperature.

This information, especially reports of poor performance, is being used by staff and managers to review work practices for ways to improve.

% rating excellent, very good or good	Overall index	Convenience of time	Information	Post-discharge service arrangements
Ballarat Health Services	71	94	86	93
Similar services average	68	89	84	81

Pattert Salistaction Monitor Department of Furthern Services August 2001

#### Communication

A major review of materials used to provide information to consumers has recently been undertaken. While there were many examples of excellent productions, it was clear that many needed revision and reproduction. Guidelines have been produced based on research published by Monash University last year and other evidence available in the literature. One of the most important steps in the revised production process is consultation with the target consumers. This will ensure the information meets their needs and that it is written in language that they can understand.

This report is an example of such consultation. The draft report was reviewed by a number of people who represent potential readers. Considerable editing has been undertaken because of their comments and suggestions. We think it is more reader- friendly and we hope you will agree

# Queues in Outpatients

The way Ballarat Health Services conducted its outpatient clinics has long been a source of complaint from patients. Inadequate facilities limited opportunities to make substantial changes. The problems, however, were carefully considered when it came to planning the new West Wing for Ambulatory Care Services opened in October 2001. The new building adjoins the Bolte Wing for Inpatient Care Services.

The co-location of medical staff will reduce the delays which occurred for outpatients when medical staff had to attend to urgent care in the wards.

Improved facilities, especially more clinic rooms, will ensure a smoother flow of patients. Because of the significant increase in space, more clinics will be possible.

Systems to monitor and evaluate the efficiency and effectiveness of the services in the new building have been set up. The staff look forward to seeing reports from happier customers in the future.

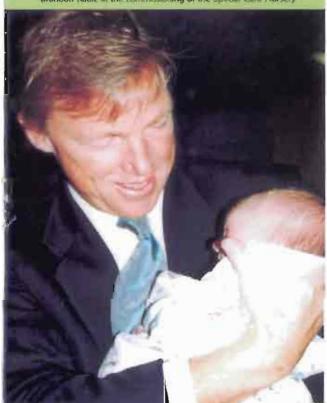
# Maternity Services

Ballarat Health Services has been received international recognition as a "Batty Friendly" hospital. Extensive service development has been undertaken in recent years under special grants from the Department of Human Services. The nursing and medical staff have paid considerable attention to obtaining advice from new parents and grandparents through a number of public forums.

In October, 2001, the Minister for Health opened extensions to the Special Care Nursery which provide the highest quality services for newborns, reducing the number of babies who need to be transferred to specialist care in Melbourne.

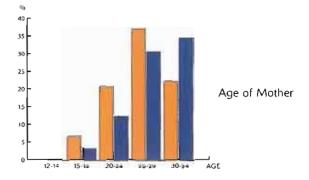
The Consultative Council on Obstetrics and Paediatric Mortality and Morbidity closely monitor all Victorian public maternity services, producing an annual report in which Ballarat Health Services performance is compared with that of other hospitals. The following information for 2000 highlights some of our results compared with the Victorian average statistics.

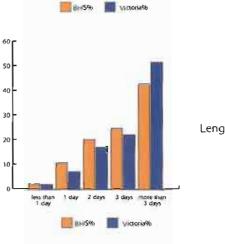
The Hon John Dissuites MLA Minister for Health, with beby Brandon Radic at the commissioning of the Special Care Nursery



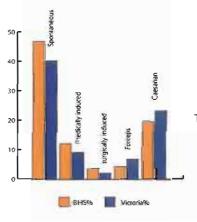


Number of Births





Length of Stay



Type of Delivery

#### CAT Teams

An important function of Grampians Psychiatric Services is the provision of help when it is needed. The Crisis Assessment Treatment Team provides a 24-hour service, two staff employed specifically on the morning shift, three in the afternoon, and one overnight. These staff are responsible for responding to calls for assistance in the community or the Emergency Department.

The CAT Team provides a triage service, screening all new referrals and determining their priority for attention by GPS or another agency.

Medical staff are always available; medical officerson-call overnight with their consultant psychiatrists also available to provide clinical and legal advice.

Resources are often under stress to meet many competing demands. The services are under constant review, managers and staff working to find ways to increase efficiency and effectiveness.

#### Reducing duplication

The multidisciplinary team working in Rehabilitation have developed a new assessment process which has significantly improved the care of patients. In Rehabilitation, patients work with a large number of different staff, medical practitioners, nurses and therapists. Previously, each one undertook an assessment and then shared the results. Now, each staff member contributes to the one assessment, thus streamlining the process and reducing the number of times patients are asked the same question.

# Complaints Ballarat Health Services has an open approach to the

management of complaints, encouraging consumers to

Monitor indicated that we were not as effective as we could

reason to make a complaint but only 4 percent did so, It is,

however, pleasing to note that all those who did make a

report problems to the staff concerned or to the BHS Complaints Officer. The recent Victorian Patient Satisfaction

be in making consumers aware of the Complaints

surveyed reported that they knew how to make a complaint. Some 9 percent of the patients felt they had a

complaint were satisfied with the outcome.

Management Process. Only 51 percent of the patients

# Guidelines for making a complaint

Ballarat Health Services, like any other business, wants to provide you with the best possible service so that you, and your family, will be satisfied.

If you, or your family, have any concerns or complaints about the care you receive it is important that you share the problem with the people who may be able to do something to correct it. All our staff, especially the managers and supervisors, have been trained to understand the complaints process, and you may expect a professional approach will be taken.

The staff member in charge of the program or service is usually the best person to begin with. In most instances, this manager will be able to deal with the problem directly. If not, the manager should direct you to the right person.

If you do not get the help you wished from this manager, you may refer the problem to the executive director responsible for the service.

Alternatively, a formal complaint should be made to:
BHS Complaints Officer
Ballarat Health Services
Drummond Street
Ballarat 3350
Tel: 03 5320 4000 Fax: 03 5320 4828
email: executive.admin@bhs.grampianshealth.org.au

The BHS Complaints Officer is required to investigate the matter fully, and ensure corrective action is taken, if needed. The Complaints Officer is also required to ensure you receive a full report and to inform the Department of Human Services that a complaint has been made and how it is resolved.

All formal complaints are handled in the strictest confidence.

If these approaches fail to satisfy you, you may make a formal complaint to the

Victorian Health Services Commissioner 10/55 Swanston Street Melbourne 3000 Tel: 1800 136 660 or 03 9655 5200 If you would like more information on any of the reports in this first issue of Quality Matters, or you would like information on Ballarat Health Services in general, then please return this form to the Chief Executive, Ballarat Health Services, PO Box 577, Ballarat 3353

Name	
Address ——————————————————————	
Telephone	
Please send me more information on:	10/
Topic in report:	<i>W</i>
BHS in general	
Volunteers	11
Fundraising	Ballarat <b>Health</b> Services

Base Hospital

Drummond Street North, Ballarat Victoria 3350 Telephone 03 5320 4000 Facsimile 03 5320 4828 Queen Elizabeth Centre 102 Ascot Street South, Ballarat Victoria 3350 Telephone 03 5320 3700 Facsimile 03 5320 3868 Grampians Psychiatric Services Sturt Street, Ballarat Victoria 3350 Telephone 03 5320 4000 Facsimile 03 5320 4028

www.bhs.grampianshealth.org.au