



Western Health

Department of Health

health

Doing it with us not for us:
Strategic direction 2010–13

Department of Health Participation Indicators Report 2014-2015

Western Health (WH) manages three acute public hospitals: [Footscray Hospital](#) at Footscray; [Sunshine Hospital](#) at St Albans; and the [Williamstown Hospital](#). It also operates the [Sunbury Day Hospital](#), and a [Transition Care Program](#) at Hazeldean in Williamstown. A wide range of community based services are also managed by Western Health, along with a large Drug and Alcohol Service.

Services are provided to the western region of Melbourne which has a population of approximately 800,000 people.

Western Health provides a comprehensive, integrated range of services from its various sites; ranging from acute tertiary services in areas of emergency medicine, intensive care, medical and surgical services, through to subacute care and specialist ambulatory clinics. Western Health provides a combination of hospital and community-based services to aged, adult and paediatric patients and newborn babies.

Employing nearly 6500 staff Western Health has a strong philosophy of working with its local community to deliver excellence in patient care.

Our Community:

- has now reached approximately 800,000 (3% higher than previous population projections) within our primary and secondary catchments
- Is among the fastest growth corridors in Australia
- Covers a total catchment area of 1,569 square kilometre
- Has a diverse social economic status. Is one of the most culturally diverse communities in Victoria with 38% speaking a language other than English at home
- Speaks more than 100 different languages/dialects.

Our Values

Compassion - consistently acting with empathy and integrity.

Accountability - taking responsibility for our decisions and actions.

Respect - for the rights, beliefs and choice of every individual

Excellence - inspiring and motivating innovation and achievement.

Safety - prioritising safety as an essential part of everyday practice.

Doing it with us not for us is the Department of Health Policy on consumer, carer and community participation in the health care system. The 2010-2013 strategic direction is centred upon a comprehensive suite of participation indicators and targets for health services.

Below is Western Health’s performance against the Department indicators for 2014-2015

Department of Health Priority Actions

Individual care level

This level is about the consumer and if appropriate their carer(s) being actively involved in their own care and treatment.

DOHH Priority action and Key implementation task	Progress	
<p>Promote the right and responsibilities of patient to the community consumers and carers</p>	<p>At Western Health the patient is the focus of all that we do. Our clinical governance framework articulates how we acknowledge the rights of the patient at point of care and how all areas of the organisations contribute to the patient experience.</p>	
	<p>Patients to receive Best care</p>	<p>It is important to me and my family that I</p> <ol style="list-style-type: none"> 1. Am seen and treated as a person 2. Receive help, treatment and information when I need it in a coordinated way 3. Receive care that makes me feel better 4. I feel safe
	<p>Front line staff to provide best care</p>	<ol style="list-style-type: none"> 1. I Communicate with patients and their families and am sensitive to their needs and preferences 2. I am an active team player and look for ways to do things better

		<p>3. I am competent in what I do and motivated to provide the best care and services possible</p> <p>4. I keep patients from harm</p>
	Managers senior clinicians lead best care	<p>1. I engage with patients and put patients first when making decisions</p> <p>2. I look for ways to support staff to work effectively and as part of a team</p> <p>3. I guide engage and support staff to provide best clinical care</p> <p>4. I promote a cultural of safety</p>
	Executive and Board to govern best care	I oversee the development implementation and ongoing improvement of organisational wide systems supporting best care

Communicate clearly and respectfully with consumers and carers

Communicate	• I will communicate with you by introducing myself by name and role	<p>In 2015 Western Health introduced the My Name is strategy. This strategy involved the roll out of staff name badges to all 6000 staff and volunteers. This strategy is also supplemented by the Language of CARERS project which ensured staff will communicate, agree, respect, explain and seek feedback from patients.</p>
Agree	• I will agree on a care plan with you by involving you in decisions	
Respect	• I will respect your rights as a patient	
Explain	• I will explain what we are doing and answer your questions	
Seek	• I will seek your feedback by asking you what we could do better	

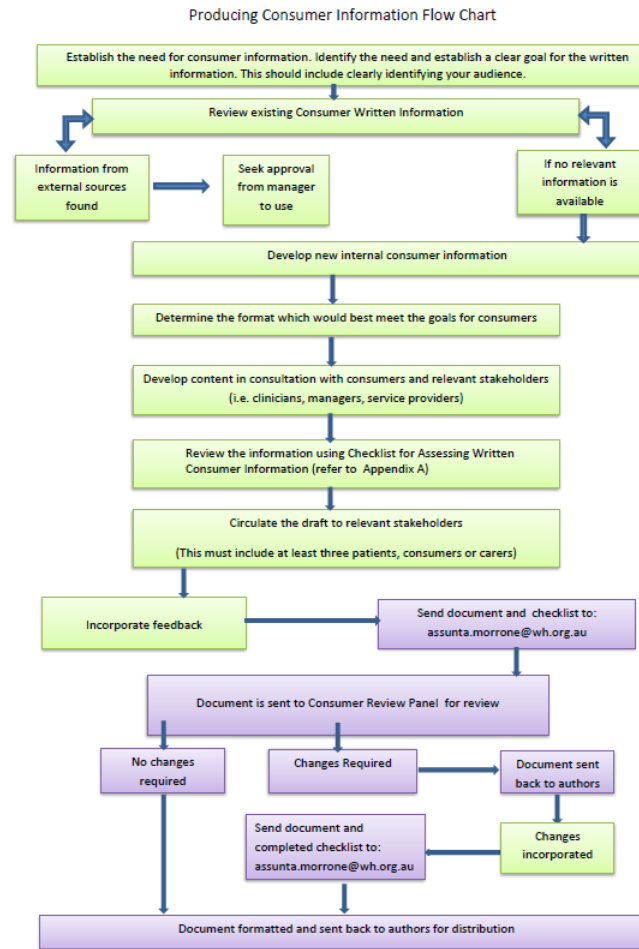
	<p>At Western Health we have made a commitment that all staff will</p> <ol style="list-style-type: none"> 1. Introducing ourselves - Hello my name is..... 2. Telling you what we do 3. Explaining our role 4. Answering your questions 5. Checking in again to make sure everything is okay <p>This is monitored by the Person Centred Care Committee each quarter with data from the Victorian Health Experience Survey (VHES)</p> <div data-bbox="797 523 1597 970"> <table border="1"> <caption>Did staff introduce themselves?</caption> <thead> <tr> <th>Category</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>yes all staff</td> <td>83%</td> </tr> <tr> <td>some staff</td> <td>13%</td> </tr> <tr> <td>very few none</td> <td>4%</td> </tr> <tr> <td>State Average</td> <td>83.50%</td> </tr> </tbody> </table> </div> <p>VHES data Jan to March 2014</p>	Category	Percentage	yes all staff	83%	some staff	13%	very few none	4%	State Average	83.50%
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<p>Provide accessible information to consumers carers and community members about health care and treatment</p>	<p>After participating in a region wide health literacy program Western Health established a Patient Health Information Centre at both Sunshine Hospital and Footscray Hospital. The Patient Health Information Centre is a physical space where patients can access health information both in hard copy and online and gain assistance from volunteers who have been trained to assist patient navigate over 300 websites that have been pre-loaded onto the internet kiosks. 825 people have visited the centres in 2015. 207 were looking for and received information about specific health conditions. The most requested topics are Dementia, Diabetes and mental health.</p>										
<p>Communicate and provide information about</p>	<p>At Western Health we have a suite of resources that staff use to develop and review consumer information about</p>										

treatments and care to consumers and carers that is developed with consumers and were appropriate carers

care and treatment.

This includes

- Producing consumer information procedure.
- Checklist for producing consumer information.
- Consumer information Flow chart.
- Patient information Templates



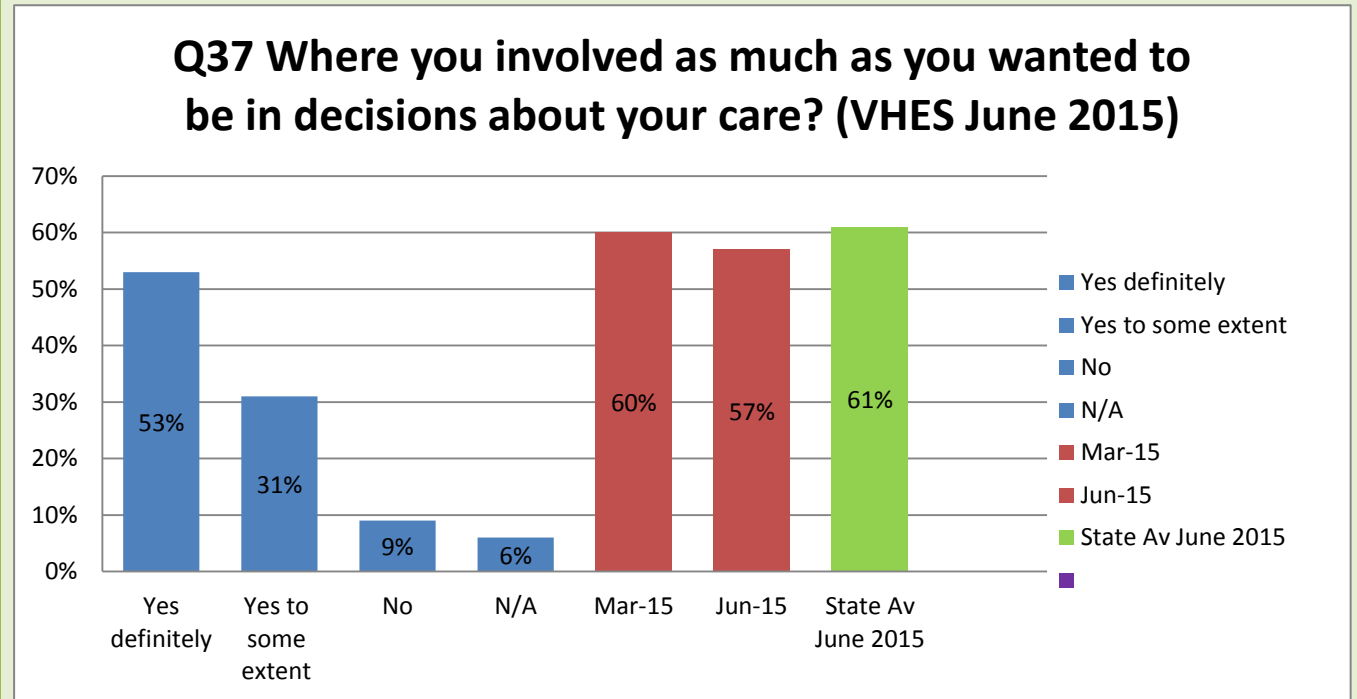
Both the procedure and the flow chart instruct staff to develop information with consumers. Draft information is reviewed by at least three patients or consumers and then sent the Consumer Information Review Group. The Consumer Information Review Group is a group of consumer members who review the information for relevance and readability.

Western Health has also produced standardised templates for consumer information based on consumer feedback. Consumers were asked to rate in order of preference their preferred format for receiving information. The survey results showed that most consumers preferred either and A4 double sided page or and A4 folded booklet not exceeding one page. Consumers told us that they found the traditional 3 fold flyer difficult to follow. As of August 2015 all Western Health consumer information will be produced on either double sided A4 or one page folded A4 booklet format.

Listen and act on decision the consumers and where appropriate their carers make about their care and treatment

At Western Health staff position description articulate the role of front line staff in patient care and decision making.
I Communicate with patients and their families and am sensitive to their needs and preferences
 Assessment and Care planning is based on shared goals for the patient, their family and carers. Data from VHES

in particular Q37 Where you involved in as much as you wanted to be in decisions about your care is monitored by the CDCAC and the Person Centre Care Committee.



To ensure that patients understand their care and treatment, Teach Back principles are used with patients and their families.

Provide and promote the Australian Charter of Healthcare Rights in Victoria

The Australian Charter of Health Care Rights in Victoria is available at all Western Health sites in 15 languages. Our In-house interpreters also distribute copies of the charter to their patients and families. Staff are made aware of the Charter at orientation and at in-services.

Use the Well Written Health Information Guide and

Western Health has a Developing Consumer Information procedure and checklist is based on the Well Written

<p>check list in the development and review of health information</p>	<p>Health Information Guide.</p>
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Program or Department level

This level is about staff working in the wards, programs and departments in hospitals.

DOHH Priority action and Key implementation task	Progress
<p>Involvement of consumer, carers and community members from the planning stage through to evaluation and monitoring</p>	<div data-bbox="808 608 1547 1238" data-label="Diagram"> </div> <div data-bbox="1579 632 2119 783" data-label="Text"> <p>At Western Health our Consumer Participation Policy articulates the involvement of consumer at all levels of the organisation</p> </div>
<p>Create welcoming and accessible services for diverse members of your community</p>	<p>In recognition of our diverse community Western Health embeds cultural responsiveness in all that we do. We have a Cultural Diversity and Community Advisory Committee, an interpreter workforce that include 12 languages, translated information for patients and their families and a Cultural Diversity Unit and Aboriginal Health</p>

	Unit.
<p>Provide training to staff in communication skills and how to involve consumers and carers in decisions making</p>	<p>As part of the Improving the Patient Experience Program Western Health will implement a Language of Carers Program across all sites in 2016. The Language of CARERS program is based on open communication and language to reduce anxiety for our patients and families.</p> <p>The Language of CARERS project includes 7 short in-services on the following topics</p> <ol style="list-style-type: none"> 1. The practice of presence 2. Acknowledging feelings 3. Showing caring non verbally 4. Explaining positive intent 5. The blameless apology 6. The gift of appreciation 7. Say it again with HEART

Promote the importance of consumers and carers providing feedback to improve services

Your Feedback is Important

Western Health

Vaš komentar je važan
 你的意見非常重要
 你的意見非常重要
 Η γνώμη σας είναι σημαντική
 L-opinjoni tieghek hija importanti
 ghalina

Ý kiến của quý vị rất quan trọng
 تعليقاتكم مهمة
 Su opinión es importante
 La Sua opinione e' importante
 Вашето мислење е важно
 Ваш коментар је важан

Complete the Victorian Health Experience Survey

Talk to a staff member or volunteer

Complete a paper feedback form
 or go online
www.wh.org.au

Leave a voice message on 1800 XXXXX

Email us at Feedback@wh.org.au

Ask to speak to the Patient Representative

Compassion | Accountability | Respect | Excellence | Safety

At Western Health we have increased the ways that patients can provide feedback

Our Feedback forms encourage patients to write feed text in their preferred language. Both our in house interpreters and our visitor guides and social support volunteers carry feedback forms that they regularly distribute to patients.

Feedback forms are available in all public areas at all Western Health sites.

Establish links with community organisations to provide emotional support and ongoing information to consumers and carers.

At Western Health we have strong relationships with a number of community organisations who provide information sessions and information to staff so they can inform their patients. These include. CARERS Victoria who provide information and training to our Volunteers in the Patient Health Information Centre. Brimbank Community Legal Services who provide education and training to our Women’s and Children’s Division on Family Violence prevention. Alzheimer’s Victoria who in 2014-2015 provided public information sessions for patients and

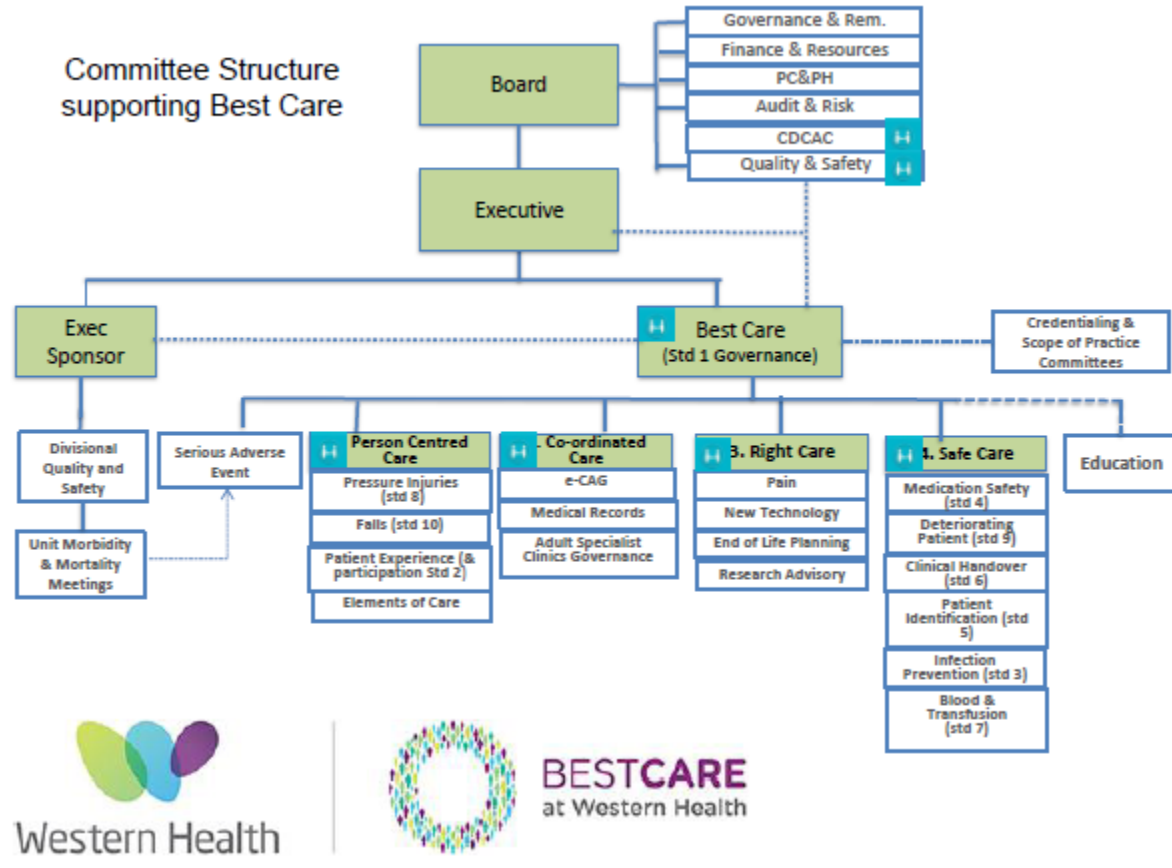
	families.
Involve consumers and carers in the development of critical guidelines and research	At Western Health all policies and procedure that relate to consumer engagement are approved by the Community Advisory Committee.
Use consumer experience and satisfaction to improve services delivery and make welcoming accessible services for all members of our diverse community	<p>The Person Centred Care Committee at Western Health is a high level committee and is part of our Best Care Clinical Governance Quality and Safety Framework. The role of this committee is to summarise patient satisfaction data at an organisation level and recommend strategies to improve the patient experience. The Person Centred Care Committee has been charged with the following project based on patient experience.</p> <ul style="list-style-type: none"> • First Impression – Creating a great first impression every time by introducing ourselves • Language of CARERS- using language to reduce anxiety • Improving feedback responses- introducing varies ways to provide feedback

Health Service Organisational Level

This level targets the organisational decision makers in health services. It focuses on how participation can be increased at the organisational level.

DOJJ Priority action and Key implementation task	Progress
Intergrade participation of consumers into quality and safety program	<p>The Western Health Clinical Governance Framework supporting Best Care has consumer representation the following committees</p> <p>Best Care, CDCAC, Quality and Safety, Person Centred Care, Coordinated Care, Right Care, Safe Care</p>

Committee Structure supporting Best Care



Logo indicate which committee has consumer representation

<p>Community representatives or nominees to be involved in the review of systems level issues regarding consumer and carer feedback and complaints</p>	<p>At Western Health all committees that review feedback have consumer representation. Feedback data is also reported to the Cultural Diversity and Community Advisory Committte who use this information to inform the community participation plan, cultural diversity plan and disability action plan</p>																												
<p>Include the involvement of consumers in all aspects of the organisations planning and development</p>	<p>Western Health service planning unit has a consumer participation framework embedded in all projects and tenders. As well as this all quality improvement and redesign programs require consumer involvement. This is reinforced by a section in the A3 Quality Improvement template which instructs staff to detail how consumer have been involved in the improvement activity.</p>																												
<p>Provide staff training and education on how to use the different types of participation</p>	<p>Western Health staff have received training in the following areas related to participation and person centred care</p> <div data-bbox="784 805 1736 1268" data-label="Figure"> <p>Training sessins delivered</p> <table border="1"> <thead> <tr> <th>Area</th> <th>JMO</th> <th>Management</th> <th>Maternity</th> <th>New nursing grads</th> <th>Nursing</th> <th>Physcology</th> </tr> </thead> <tbody> <tr> <td>cultural diversity</td> <td>0</td> <td>5</td> <td>50</td> <td>2</td> <td>0</td> <td>1</td> </tr> <tr> <td>Disability</td> <td>30</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>language of caring</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>30</td> <td>0</td> </tr> </tbody> </table> </div>	Area	JMO	Management	Maternity	New nursing grads	Nursing	Physcology	cultural diversity	0	5	50	2	0	1	Disability	30	0	0	0	0	0	language of caring	0	0	0	0	30	0
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<p>Ensure position description include participation components</p>	<p>Western Health position descriptions are frame within our Best Care Strategy</p>	
	<p>Front line staff to provide best care</p>	<ul style="list-style-type: none"> • I Communicate with patients and their families and am sensitive to their needs and preferences • I am an active team player an look for ways to do things better • I am competent in what I do and motivated to provide the best care and services possible • I keep patients from harm
	<p>Managers senior clinicians lead best care</p>	<ul style="list-style-type: none"> • I engage with patients and put patients fist when making decisions • I look for ways to support staff to work effectively and as part of a team • I guide engage and support staff to provide best clinical care • I promote a cultural of safety
	<p>Executive and Board to govern best care</p>	<ul style="list-style-type: none"> • I oversee the development implementation and ongoing improvement of organisational wide systems supporting best care
<p>Evaluate monitor and report on participation to the community and the Department of Health</p>	<p>Western Health uses the following mechanisms to report to the Department</p> <ul style="list-style-type: none"> • Annual Quality of Care report • Annual progress report on Community Participation Indicators and Cultural Responsiveness Standards <p>Western Health uses the following mechanisms to report to the community</p> <ul style="list-style-type: none"> • Annual Quality of Care report • Western Health Community Pulse • Western Health website • Public notice boards around the organisations • Community Advisory Committee • Open Access Board Meeting 	

<p>Resource consumer members to participate on your quality ethics and governance committees</p>	<p>Western Health’s Consumer Participation Policy states that consumers will not be financially disadvantaged for their participation. Consumers are offered, taxi vouchers, travel reimbursement, a sitting fee, professional development opportunities. Any reasonable out of pocket expenses are considered on an individual basis.</p>
<p>Consult with consumers carers and your community in developing and renewing your strategic plan, designs and community participation plan</p>	<p>Western Health undertook a highly consultative process in the development of the organisational wide strategic plan.</p> <p>An extensive stakeholder engagement was undertaken, using a variety of mediums, including:</p> <ul style="list-style-type: none"> • A short film detailing the strategic planning process • Intranet and internet webpages • Online survey for consumers and community providers • Face to face interviews • Focus groups • Staff forums <p>Overall Western Health engaged with over 1,000 people in the development of the strategic plan. Throughout the four stage process, input from well over 700 staff and volunteers was gathered, through a combination of focus groups and one-on-one interviews, at Footscray Hospital, Sunshine Hospital, Williamstown Hospital, Hazeldean Transition Care Unit and Sunbury Day Hospital. Staff were provided the opportunity to comment on the strategic focus areas as well as identify potential opportunities for Western Health to pursue.</p> <p>During stage 2 Western Health commenced its engagement with consumer partners with more than 80 providers engaged through one-on-one interviews or focus groups, including neighbouring health services, private health providers, primary and community care providers (including GPs, aged care facilities and large primary care providers), local government and universities. The engagement process enabled community providers to identify what was important to each partner and potential opportunities for the future, influencing the development of objectives and initiatives for the strategic plan.</p> <p>During stage 3, around 180 consumers were consulted, mostly on a one-on-one and groups basis. The consultations included both direct patients (attending either ED, outpatient clinics or as an inpatient on a ward) and previous consumers (engaged primarily via focus groups). Further, consumers had the opportunity to provide feedback through an online survey that was available via the strategic planning website. Outcomes were captured via the online survey, which enabled analysis of key demographic and thematic information. Those consulted were from all over the Western Health catchment, including suburbs like Altona, Bacchus Marsh, St Albans, Sunshine, Tarneit and Footscray. Many of those engaged were between 25-54 years old and 40% of those interviewed identified as speaking a language other than English at home.</p>

<p>Produce with your community your annual Quality of Care Report</p>	<p>Quality of Care Report 2014-2015 completed</p>
<p>Ensure you work with your diverse community to build your cultural responsiveness and disability action plans</p>	<p>Consultation undertaken in 2014 to develop current Cultural Diversity Plan, Community Participation Plan and Disability Action Plan</p>

In addition to the key priority areas health service organisations must also meet the following five standards

Standard 1

The organisation demonstrates a commitment to consumer carer and community participation appropriate to its diverse communities

Performance measure: Numerator: The number of specific strategies implemented or in use

Denominator: The eight specified strategies required

DOHH Standard	Progress
<p>1.1 The organisation has a consumer care and community participation policy or adopts <i>Doing it with us not for us</i></p>	<p>Western Health has a Consumer Care and Community Participation Policy that aligns with ACHS accreditation standard 2.</p>
<p>1.2.1</p>	<p>Completed See attachments</p>

<p>The organisation has developed and is implementing a community participation plan strategies or equivalent that address the five key areas of the Departments How to Develop a community participation plan guideline</p>	
<p>1.2.2 The organisation contributes to development implementation and monitoring of the Primary Care Partnership Strategic Plan so that) the work of the partnerships reflects the community needs and) consumers experience a better humans services system</p>	<p>Western Health’s Better Health Plan for the West is a collective partnership strategy between health, human services and government in the West. The strategy is resourced by a part time executive officer and reports up to an external reference group and a Western Health Executive Director.</p> <p>http://inside.wh.org.au/News-and-Events/Media%20Releases/Better%20Health%20Plan%20for%20the%20West.pdf</p>
<p>1.3 The organisation uses a variety of approaches to record and report on consumer care and community participation to the wider community including an annual Quality of Care Report.</p>	<p>Western Health uses the following mechanisms to report to the community</p> <ul style="list-style-type: none"> • Annual Quality of Care report • Western Health Community Pulse • Western Health website • Public notice boards around the organisations • Community Advisory Committee • Open Access Board Meeting
<p>1.4 The organisation has a Cultural Responsiveness Plan that meets the six reporting requirements or its equivalent</p>	<p>See attachment</p>
<p>1.5 The organisation has an Improving Care for Aboriginal and Torres Strait Islander patient program or its equivalent and meets the four key results area</p>	<p>Completed reported to the Department via the Western Health Aboriginal Health Unit and in the 2014-2015 Quality of Care Report</p>

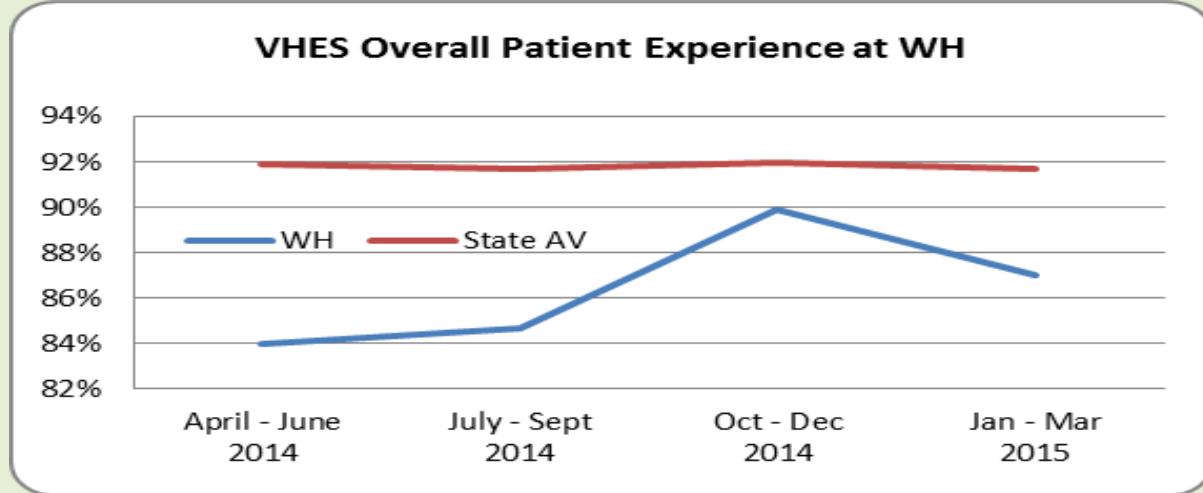
<p>1.6 The organisation has a Disability Action Plan as specified under the Disability Act 20069</p>	<p>See attached</p>																													
<p>1.7 The organisation has system, processes and structures in place to consult and involve consumers carers and community members</p>	<p>Western Health consults with consumers in the following ways</p> <ul style="list-style-type: none"> • Patient stories • Community Advisory Committee • Open Access Board meeting • Victorian Health Experience Survey • Feedback boxes • Ward feedback • Community consultations 																													
<p>1.8 The organisation build the capacity of staff to support consumer care and community participation</p>	<div style="text-align: center;"> <h3>Training sessins delivered</h3> <table border="1"> <caption>Training Sessions Delivered Data</caption> <thead> <tr> <th>Category</th> <th>JMO</th> <th>Management</th> <th>Maternity</th> <th>New nursing grads</th> <th>Nursing</th> <th>Phycology</th> </tr> </thead> <tbody> <tr> <td>cultural diversity</td> <td>0</td> <td>5</td> <td>50</td> <td>5</td> <td>0</td> <td>8</td> </tr> <tr> <td>Disability</td> <td>30</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>language of caring</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>30</td> <td>0</td> </tr> </tbody> </table> </div>		Category	JMO	Management	Maternity	New nursing grads	Nursing	Phycology	cultural diversity	0	5	50	5	0	8	Disability	30	0	0	0	0	0	language of caring	0	0	0	0	30	0
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Standard 2

Consumers and where appropriate carers are involved in informed decision making about their treatment care and wellbeing at all stages and with appropriate support

<p>DOHH Standard</p>	<p>Progress</p>
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2.1 A consumer participation indicator score on the VPSM of at least 75%



- 86 % of patients who received services from Western Health between January and March 2015 rated their care as “very good” or “good”

Standard 3

Consumers and where appropriate carers are provided with evidence based accessible information to support key decision making along the continuum of care

Performance Measure: Numerator: The number of new information resources produced revised or adopted over the last year which met at least 30 of the 40 items of the Checklist for assessing written consumer health information (Currie et ell 2000) including at least five for section D when using this section.

Denominator: the total number of new consumer information resources produced revised or adopted in the last year. Target 85%

DOHH Standard	Progress
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<p>3.2 The rate of respondents to consumer care and surveys who rate the information as being good to excellent. Q20 B on VPSM/total respondents on Q20 B on VPSM –target 75%</p>	<p>VHES Q 39 How much information about your condition or treatment was given to your family, carer or someone close to you? Data from Jan- March 2015 85% of patients recorded a positive response to this question. This was an improvement of the same time last year which was 83% and in line with the state average of 85%</p>
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Standard 4

Consumes carers and community members are active participants in the planning, improvement and evaluation of serves and programs on an ongoing basis

Performance Measure:

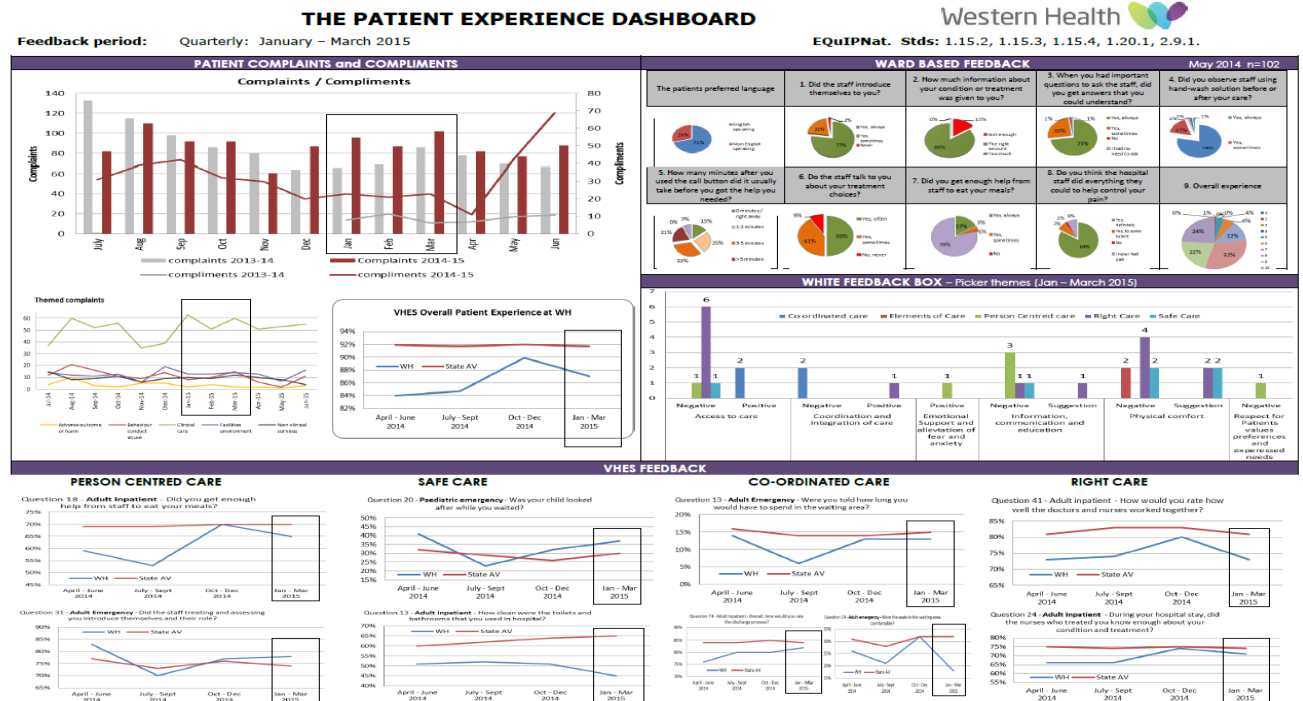
Numerator: The number of dimensions or specified activities where consumers are active participants

Denominator: the six dimensions or specified activities listed below

DOHH Standard	Progress
<p>4.1 Strategic planning</p>	<p>Western Health engaged with over 1,000 people in the development of the strategic plan. This included staff, volunteer and consumers</p>
<p>4.2 Service program and community development</p>	<p>Some of the community development activities that Western Health undertook in 2014 included</p> <ul style="list-style-type: none"> • Multicultural craft market • Partnership with Copperfield Secondary College –VCAL program • Patient Education – Dementia workshops • Inspirational Forum • Allied Health and Community Services Programs
<p>4.3 Quality Improvement activates</p>	<p>It is a policy requirement that all quality improvement activates at Western Health have consumer input. Some of the activities in 2014- 2015 have included.</p> <ul style="list-style-type: none"> • improving discharge project • Improving patient information • Improving food services delivery • Reducing pressure injuries • Reducing falls

4.4 Developing and monitoring feedback complaints and appeals systems in review of complaints

Western Health has a patient feedback working group which reviews VHES data, feedback forms, ward feedback surveys, and patient complaints. This data is captured on an A3 dashboard and reported to our Best Care Committee. Improvement strategies are led by the Best Care Committees based on the feedback and monitored each quarter.



<p>4.5 Ethics, quality and clinical and corporate governance committees</p>	<p>All Western Health clinical governance committees have consumer representation</p>
<p>4.6 consumer care and community members are involved in the development of consumer information</p>	<p>Western Health has a procedure and process for involving consumers in the development and review of consumer information. This occurs through our procedures and templates as well as through our Consumer Information Review Group. The Consumer Information Review Group is a group of consumer and staff who have had education and training in health literacy and who review information for readability and relevance.</p>

Standard 5

The organisation actively contributes to build the capacity of consumer’s carers and community members to participate fully and effectively

DOHH Standard	Progress
<p>Descriptive reporting</p>	<p>Consumers at Western Health are supported by the Manager for Consumer Partnerships and by the chairs of the relevant committees.</p> <p>Consumers have access to</p> <ul style="list-style-type: none"> • Buddy system • Orientation • Consumer resource pack • Professional development • Out of pocket reimbursement • Yearly evaluation <p><i>Hi Assunta,</i></p> <p><i>Just a brief email to say ‘Thank you’ for your time. To be honest with you, having my health event about 3 years ago and subsequent committee/governance group membership has changed my life. Working with Western health Staff is a highlight in my life. I have learned to ‘love’ the hospital so much, that I wish I could do more.... I recently commenced as a Social Support Volunteer and have been visiting the Oncology, Palliative Care and GEM Wards. I have used my Palliative care knowledge and experience as well as my Social Work skills to support carers and patients, and it is very rewarding. Thank you for introducing me to Consumer participation. I wouldn’t have it any other way 😊😊😊</i></p>

Kind regards, Consumer Member

DOHH Cultural Responsiveness Framework/ Indicators

The Victorian Department of Health requires all health services to report annually against its standards for cultural responsiveness, as articulated in its Cultural Responsiveness Framework. The framework is based on four key domains of quality and safety:

- Organisational effectiveness
- Risk management
- Consumer participation and
- Effective workforce.

These four domains are addressed through six standards:

- A whole-of-organisation approach to cultural responsiveness
- Leadership for cultural responsiveness is demonstrated by the health services
- Accredited interpreters are provided to patients who require one
- Inclusive practice in care planning is demonstrated including but not limited to dietary, spiritual, family attitudinal and other cultural practices
- Culturally and linguistically diverse consumers are involved in the planning , review and improvement of services
- Staff are provided with professional development opportunities to enhance their cultural responsiveness.

Mandatory reporting requirements

Domain 1: Organisational effectiveness

Standard 1: A whole of organisation approach to cultural responsiveness is demonstrated

Standard 2: Leadership for cultural responsive is demonstrated by the health service

MEASURE	
1.1 The health service has developed and implemented a Cultural Responsiveness	Completed

<p>Plan (CRP) that addresses the six minimum standards</p>																														
<p>1.2 Reporting on the Cultural Responsiveness Framework six minimum standards in the Quality of Care report</p>	<p>2014-2015 Quality of Care report completed</p>																													
<p>1.3 A functioning CAC / CDC demonstrating CALD participation and input</p>	<p>Western Health has a Cultural Diversity and Community Advisory Committee that meets six times a year and reports to the Board.</p>																													
<p>1.4 Implementation of the Department's language services policy</p>	<p>Western Health has a Language Services Policy that is congruent with the Department's language services policy.</p>																													
<p>2.1 The number of senior managers who have undertaken leadership training for cultural responsiveness</p> <p>The total number of senior managers</p>	<div style="text-align: center;"> <h3>Training sessins delivered</h3> <table border="1"> <caption>Training Sessions Delivered Data</caption> <thead> <tr> <th>Category</th> <th>JMO</th> <th>Management</th> <th>Maternity</th> <th>New nursing grads</th> <th>Nursing</th> <th>Phycology</th> </tr> </thead> <tbody> <tr> <td>cultural diversity</td> <td>0</td> <td>5</td> <td>50</td> <td>5</td> <td>0</td> <td>8</td> </tr> <tr> <td>Disability</td> <td>30</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>language of caring</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>30</td> <td>0</td> </tr> </tbody> </table> </div>		Category	JMO	Management	Maternity	New nursing grads	Nursing	Phycology	cultural diversity	0	5	50	5	0	8	Disability	30	0	0	0	0	0	language of caring	0	0	0	0	30	0
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<p>SUB MEASURE</p>																														
<p>1.1.1 Organisational guidelines and protocols that guide staff in working with CALD communities, consumers and carers</p>	<p>Western Health has a Cultural Responsiveness Policy that is congruent with the Department of Health's Cultural Responsiveness Framework</p>																													
<p>1.1.2 Allocation and specification of financial resources for cultural responsiveness</p>	<p>Western Health has a dedicated Manager for Cultural Diversity</p> <p>Budgeted events</p> <ul style="list-style-type: none"> • Cultural diversity week • CDCAC meeting and events • Disability week events 																													
<p>1.1.3</p>	<p>Data available annually</p>																													

<p>Development of appropriate information technologies and strategies for data collection reporting and information</p>	<p>Presentations by</p> <ul style="list-style-type: none"> • Religion • Language • Country of Birth • Language spoken <p>For Inpatients and Emergency presentations</p> <p>Data available for</p> <ul style="list-style-type: none"> • Number of interpreter requests • Interpreter requests actioned • Distribution of request <p>Data presented to CDCAC</p>
<p>1.1.4 Monitoring of community profiles and changing demographics supported by employment of relevant in-house interpreters, appropriate translations and signage</p>	<p>Data available via</p> <ul style="list-style-type: none"> • ABS • Medicare local needs analysis <p>And incorporated into service planning</p>
<p>1.1.5 Partnerships with multicultural and ethno specific organisations in the area/region developed and maintained</p>	<p>Relationships established with</p> <ul style="list-style-type: none"> • Australian Multicultural Community Services • Vietnamese business association • Copperfield Secondary College • Brimbank Community Legal Service • Holy Eucharist Primary School
<p>2.1.1 Executive staff member has portfolio responsibility for cultural responsiveness and KPIs against CRP</p>	<p>Manager Community Partnerships and Diversity and Manager Language Services report to Executive Director Community Integration, Allied Health and Service Planning.</p>
<p>2.1.2 Employment of a cultural diversity staff member where 20% of health services patients are of CALD background</p>	<p>This data is not available</p>
<p>2.1.3 Research opportunities are identified and undertaken to develop new and improved initiatives and resources for cultural responsiveness</p>	<p>In 2014 Western Health was given funding by CSIRO to develop and test an iPad app for allied health professionals to conduct assessments when an interpreter was not available. The CALD Assist app is being trailed on Western Health wards and will soon be available for purchase from iTunes.</p>

<p>2.1.4 Training opportunities for senior managers on</p> <ul style="list-style-type: none"> • cultural responsive services delivery strategies • organisational cultural assessments / audit 	<p>The WH Centre for Education delivers a leadership pathways program. Units in the program include</p> <ul style="list-style-type: none"> • Diversity and Leaderships • Partnering with Consumers
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Domain 2: Risk management

Standard 3: Accredited interpreters are provided to patients who require one

<p>MEASURE</p>	
<p>3.1 Number of CALD consumers / patients identified as requiring an interpreter and who received accredited interpreter services</p> <hr/> <p>Number of CALD consumers/patients presenting at the health services identified as requiring interpreter services</p>	<p>The percentage of met requests for 2014-2015 was 93%.</p>
<p>3.2 Number of community languages used in translated materials and resources</p> <hr/> <p>Total number of community language groups accessing the service</p>	<p>Specific Western Health information is translated according to our top 10 presentations by language.</p> <p>These include Arabic, Burmese, Croatian, Vietnamese, Dinka, Greek, Italian, Macedonian, Serbian, Chinese, Spanish,</p>
<p>SUB MEASURE</p>	
<p>3.1.1 Implementation of the Department's language service policy</p>	<p>Completed</p>
<p>3.1.2 Documentation of lack of provision of</p>	<p>Recent quality improvement process undertaken by language services showed the majority of requests for interpreters originated from outpatients clinics. A strategy has been implemented to increase the use of interpreters</p>

interpreters and reasons why	in inpatient areas.
3.1.3 Audit of documentation of provision / use of interpreters in medical files	Data not available
3.1.4 Policies on consent include directions about the role of interpreters and family	Completed- all patients who have low English proficiency are consented with an interpreter. Consent audit completed annually.
3.1.5 Feedback from patients on the use of interpreters in decisions about treatment and care planning	Completed – anecdotal evidence collected from patients by interpreters
3.2.1 Evidence of appropriate translations, signage, commonly used consumer / patient forms, education and audio visual material in languages other than English for predominant language groups utilising the service	Feedback forms translated Patient Charter available in requested languages
3.2.2 Quality / risk management committees develop initiatives to track miscommunication errors for CALD consumer patients	Feedback data monitored through clinical governance structure
3.2.3 Number of cases reported through adverse event report related to communication issues for CALD consumer / patients	No data available
3.2.4 Strategies in place to communicate with CALD consumers / patients even when the CALD demographics are low	Agency interpreters are used for rare and emerging languages. When an on-site interpreter is not available the telephone interpreter service is used as this service can reach interpreters outside Victoria if necessary.
3.2.5 Research is conducted into outcomes of CALD patient care needs (eg comparative studies between ES and NESB patients regarding length of stay, emergency presentations, diagnostic tests, failure to attend appointments, evaluation of post consultation outcomes etc	No progress

Domain 3: Consumer participation

Standard 4: Inclusive practice in care planning is demonstrated including but not limited to dietary: spiritual; family; attitudinal and other cultural practices

Standard 5: CALD consumers, carer and community members are involved in the planning, improvement and review of programs and services on an ongoing basis

MEASURE	
<p>4.1 Number of CALD consumers / patients who indicate that their cultural or religious needs were respected by the health service</p> <hr/> <p>Total number of CALD consumers / patients surveyed on the VPSM or other patient satisfaction survey</p>	<p>This question is not asked in the current VHES survey</p> <p>This data is not yet available from VHES</p>
<p>4.2 Policies and procedures for the provision of appropriate meals are implemented and reviewed on an ongoing basis</p>	<p>VHES 17. Was the hospital food suitable for your dietary needs (for example medical, cultural, or religious needs or personal preference)?</p>

	<p style="text-align: center;">Yes always/yes sometimes</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th></th> <th>Mar-14</th> <th>Jan-14</th> <th>Sep-14</th> <th>Dec-14</th> <th>Mar-15</th> <th>State</th> </tr> </thead> <tbody> <tr> <td>Yes always/yes sometimes</td> <td>66%</td> <td>72%</td> <td>71%</td> <td>67%</td> <td>70%</td> <td>72.60%</td> </tr> </tbody> </table>		Mar-14	Jan-14	Sep-14	Dec-14	Mar-15	State	Yes always/yes sometimes	66%	72%	71%	67%	70%	72.60%
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<p>5.1 CALD consumer membership and participation is demonstrated in CAC/CDC other specified structures</p>	<p>CDCAC membership reflects diversity in terms of ethnicity and disability. CDCAC reflects responsiveness to CALD, ATSI disability and GLBTI</p>														
<p>SUB MEASURE</p>															
<p>4.1.1 Feedback from patients on the provision of information about their care and treatment is used to inform planning, development and review of services and support</p>	<p>Feedback data collect monthly and reported to CDCAC, and Western Health Clinical Governance Committees.</p>														
<p>4.1.2 CALD patient satisfaction data collected and analysed (VPSM and others)</p>	<p>Completed Data reviewed by Patient Experience Working group and reported to Best Care</p>														

<p>4.1.3 Consumer evaluation of cultural appropriateness of particular programs or services</p>	<p>Survey forms for ward areas have been translated into 10 languages. Wards are required to survey 10 patients per month with a minimum of three patients from CALD backgrounds. Volunteers have been trained to administer surveys with CALD patients.</p>
<p>4.1.4 Development or use of suitable instruments for assessment incorporating cultural considerations used by medical, clinical and allied health staff</p>	<p>CALD Assist ipad app developed and current being tested on Western Health wards</p>
<p>5.1.1 Minutes of meetings show that the CAC/CDC or other specified structure has provided advice on planning and evaluation to the Board or executive of the health service</p>	<p>Completed – CDCAC members attend open access board meetings</p>
<p>5.1.2 CALD consumer or stakeholder involvement in performance review and quality improvement processes</p>	<p>12/82 Consumers on Consumer Register self-identified as being from a CALD background</p>
<p>5.1.3 Policies in place for facilitation of different degrees of participation from CALD consumers</p>	<p>Ethno specific community consultations undertaken yearly using outreach model</p>

Domain 4: Effective workforce

Standard 6: Staff at all levels are provided with professional development opportunities to enhance their cultural responsiveness

<p>MEASURE</p>	
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<p>6.1 Number of staff who participate in cultural awareness professional development</p> <hr/> <p>Total number of staff employed within a current two year period</p>	<p style="text-align: center;">Training sessins delivered</p> <table border="1"> <caption>Training Sessions Delivered Data</caption> <thead> <tr> <th>Topic</th> <th>JMO</th> <th>Management</th> <th>Maternity</th> <th>New nursing grads</th> <th>Nursing</th> <th>Phycology</th> </tr> </thead> <tbody> <tr> <td>cultural diversity</td> <td>5</td> <td>5</td> <td>50</td> <td>8</td> <td>0</td> <td>0</td> </tr> <tr> <td>Disability</td> <td>30</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>language of caring</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>30</td> <td>0</td> </tr> </tbody> </table>	Topic	JMO	Management	Maternity	New nursing grads	Nursing	Phycology	cultural diversity	5	5	50	8	0	0	Disability	30	0	0	0	0	0	language of caring	0	0	0	0	30	0	
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<p>SUB MEASURE</p>																														
<p>6.1.1 Budget allocation for culturally responsive workforce development</p>	<ul style="list-style-type: none"> • Cultural diversity week events delivered each year • Consumers reimbursed for out of pocket expenses • CDCAC members paid sitting fee 																													
<p>6.1.2 Training opportunities for staff (all levels)</p> <ol style="list-style-type: none"> 1. Provision of language services and use of interpreters at orientation 2. Culturally responsive service delivery strategies 3. Conducting cultural assessments to understand consumer/patients explanatory model for illness 	<ul style="list-style-type: none"> • Provision of language service and use of interpreters delivered at orientation • Services accessed for cultural appropriateness at development stage using ABS Data and patient feedback data • Cultural assessment part of organisations assessment tool <p>Kleinman’s explanatory model forms part of all cultural diversity training to staff.</p>																													
<p>6.1.3 Demonstrated post training staff evaluation on effectiveness and application of professional development</p>	<p>Completed</p>																													
<p>6.1.4 HR policies and practices include cultural responsiveness references in PD, PR and promotion</p>	<p>Best Care Framework embedded in position descriptions</p>																													
<p>6.1.5 Internal communication system for sharing</p>	<p>Cultural diversity Intranet page developed and update regularly</p>																													

cultural diversity information data are developed maintained and periodically reviewed

Western Health Community Participation Plan/Cultural Responsiveness Plan

PROJECT	ACTION	PROGRESS
<p>1. Acknowledge all cultural and Religious events</p>	<p>Develop a Western Health 2015 Calendar profiling our diverse staff and patients with religious and cultural events displayed</p>	<p>Completed</p>
<p>2. Implement cultural responsiveness intervention in three areas at Western Health</p> <ul style="list-style-type: none"> • ED - 2014 • Radiology - 2015 • DPU - 2016 	<p>Cultural education and training. Implement cultural responsiveness intervention and evaluate impact on patient care</p>	<p>Completed</p>
<p>3. Implement a quality improvement Language services project in outpatient department at Footscray</p>	<p>Collect data on number of patients who had booked an interpreter but did not get access to an interpreter and reasons why.</p> <p>Test the following hypothesis. Anecdotal evidence suggested that because some clinics run late interpreters are unable to wait. This causes a situation where the</p> <ul style="list-style-type: none"> • Patient is seen without an interpreter- Patient is rescheduled • Phone interpreters is then used 	<p>Completed Decrease in CALD patients not been seen or rescheduled</p> <p>Stage 2- Continue to monitor</p> <p>Stage 3- Improve uptake of interpreters in inpatient areas</p>

<p>4. Improve referrals to external ethno specific services for patients leaving hospital</p>	<p>Use the data base on the Patient Information Site to Identify organisations that work with CALD clients so that staff can refer appropriately</p>	<p>Completed Data base update continuously http://www.westernhealth.org.au/prc/Pages/Health-and-diversity.aspx</p>
<p>5. Increase opportunities for CALD communities to consult with Western Health</p>	<p>Consult with one CALD group per year</p>	<p>Croatian community Consultation completed in 2014 2015- CALD groups consulted as part of strategic planning process</p>
<p>6. Develop and deliver new module in partnership with Legal Services</p> <ul style="list-style-type: none"> • Culture, Health and the Law 	<p>Develop workshop</p>	<p>Revised action Partnership project in progress with Brimbank Legal Service to provide family violence legal advice service at Western Health. Two workshops delivered by Brimbank Legal Services to Maternity staff at Sunshine Hospital</p>

1. A strong foundation for life

Outcome: An improved response to lifelong health needs

Strategies:

- Improve the coordination of health services
- Improve the accessibility of health service provision
- Improve understanding of the health need of people with a disability

OUTCOME	ACTION	Progress
<p>1. Improve the coordination of health services</p>	<p>1.1 .investigate a model to improve the admission and discharge of patient's with a disability</p> <p>This includes</p> <ul style="list-style-type: none"> • Clinical care • Youth friendly environment • Family friendly environment 	<p>After consideration it was decided that creating another policy or procedure would not in fact create change.</p> <p>Disability Health intranet page has been developed with a number of resources staff can use.</p> <p>This is shown at all training sessions http://inside.wh.org.au/departmentsandservices/Disability_Health/Pages/default.aspx</p> <p>The Alert has been discouraged as there is no action in place to follow this alert</p> <p>Module in development with Yooralla, DHSS and CCDH for nursing.</p>

	1.1.2 Investigate a transition strategy to facilitate the admission of patients with a disability from children's to adult services	
1.2 Improve delivery of health service provision for people with a disability	Investigate an appropriate model to provide effective advocacy for people with a disability	Model not feasible as it would require funding
1.3 Improve understanding of the health need of people with a disability	1.3.1 Work in partnership with the Centre for Development Disability Health Victoria to deliver education sessions to Allied Health, Nursing, Medical and non clinical staff	Workshop delivered for Medical staff in 2015. Extremely positive feedback received.

2. Upholding right and promoting participation

Outcome: Better protection of human rights and great participation in decision making, policy and service planning

Strategies

- Better enable people with a disability, families and carers to exercise their rights
- Increase the voice and representation of people with a disability
- Increase the inclusion of people with a disability from culturally and linguistically diverse backgrounds

OUTCOME	ACTION	Progress
2.1 Better enable people with a disability, families and carers to exercise their rights	2.1.1 Promote the participation of families, carers, support workers and patients in decisions about their care and treatment	Action: engage CDD to deliver Module 4- Work with us: working with families and carers- Completed
2.2 Increase the voice and representation of people with a disability including young people with a disability and CALD	2.2.1 Recruit people with a disability to the Western Health Consumer Register	Ongoing

3. Accessing information, transport, building and places

Outcome: Improved access to building and spaces

Strategies

- Increase the application of accessible design standards in the built environment

Outcome: More accessible health information and services

Strategies

- Provide accessible information about our services

OUTCOME	ACTION	Progress
3.1 Increase the application of accessible design standards in the built environment	3.1.1 Consult with Disability user groups and Disability Advisory Group in Capital Development Projects and Service Planning	Service planning framework developed to ensure all user groups are consulted.
3.2 Provide accessible information about our	3.2.1 Provide information about our services that	Patient Charter available in braille

services	meets the needs of people with disabilities in varies formats. <ul style="list-style-type: none">Investigate audio and braille formats	Publication and resources available from Vision Australian upon request
3.3 Ensure staff have access to the right equipment to care for patients with a disability	3.3.1 Conduct equipment audit to ensure we have the correct equipment when caring for patients with a disability	Equipment purchased

4. A contemporary approach through system reform

Outcome: Better targeted and integrated services

Strategies:

- Continue to develop the capacity of the workforce
- Continue to make our services more responsive

OUTCOME	ACTION	PROGRESS
4.1 Continue to develop the capacity of the workforce	4.1.1 Develop a Disability knowledge base within the organisation by identifying disability champions within Western Health	Workshops delivered
4.2 Continue to make our service more responsive	4.2.1 Improve the way staff communicate with people with a disability by delivering education sessions <ul style="list-style-type: none"> Communication Patient Centred Care 4.2.2 Promote all forms of communication aids including the use of Auslan interpreters, Easy English guides	Cultural key phrases tool adaptability to people with disabilities and nursing (CALD Assist) Aulsan interpreters available upon request Australian Charter of Health Care Rights in Victoria available in Braille
4.3 Ensure that Western Health is an employer of choice for people with disabilities	4.3.1 Ensure appropriate support for staff with a disability working at Western Health	As required

