



WWHS



WEST WIMMERA HEALTH SERVICE

STRATEGIC PLAN

PERFORMANCE REPORT

2008 - 2009



**WEST WIMMERA HEALTH SERVICE
STRATEGIC PLAN
PERFORMANCE REPORT
2008 -2009**



IN 2006 WEST WIMMERA HEALTH SERVICE INITIATED A STRATEGIC PLAN TO COVER THE 3 YEARS EXTENDING FROM JULY 1 2006 TO JUNE 30 2009.

THIS DOCUMENT REPORTS ON THE ACTIONS THAT HAVE BEEN UNDERTAKEN IN ACCORDANCE WITH THE GOALS SET OUT IN THAT PLAN IN THE PERIOD FROM OCTOBER 1 2008 TO THE CONCLUSION OF THE PLAN ON JUNE 30 2009.

DETAILS OF THE SUCCEEDING WWHS STRATEGIC PLAN FOR THE 3 YEARS FROM JULY 2009 TO JUNE 30 2012 CAN BE FOUND IN THE WWHS PUBLICATION ENTITLED ‘ BETTER POPULATION HEALTH AND WELLBEING’.



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STRATEGY

1.0

**DELIVERING
NEEDS BASED
HEALTH CARE**

1.1**Develop a Needs Assessment and Service Plan for the catchment in the light of changing demographics, funding models and the new facilities.**

-
- The final Community Needs Assessment and Service Profile Report was adopted by the Board of Governance on 15th June 2009.
 - The Report includes 54 recommendations based on extensive research and community consultation.
 - The Final Report from the study has been submitted to the Department of Human Services for endorsement.
 - ▶ **This initiative is complete, subject to final Departmental approval.**

1.2**Consider options to expand medical services.**

A wide range of options was considered and the following initiatives have been implemented:

- A Dental Therapist commenced in the Nhill Dental Clinic in February 2009 for one day per week.
- A second visiting General Practitioner Anaesthetist commenced practice in March 2009.
- The Dialysis service expanded from two to four patient chairs in May 2009.
- Dental clinics in Rainbow and Kaniva are being refurbished.
- An application is being considered for funding from the Rural Medical Infrastructure Fund for a medical clinic in Nhill. The outcome of the application is not yet known.

- More stable on call arrangements have been achieved with doctors at each of the Tristar Clinics.
- A Medical Practitioner commenced providing consultations at Goroke Community Health Centre every Tuesday morning, Thursday afternoon and alternate Saturdays.

In addition –

- The Dental Clinic at Goroke Community Health Centre has been held in abeyance pending determination of the future of the Centre in relation to refurbishment or redevelopment. This has been done in consultation with the Commonwealth Department of Health & Ageing.

► **This strategy has been implemented for the 2006-09 planning period.**

1.3

Respond appropriately to advances in medical technologies.

- The two new Mobile Videoconference Intern Units allow for remote consultations with specialists for clinical outpatient referrals. The full capacity of these Units will be appreciated when Grampians Rural Health Alliance has established formal connections and relationships with tertiary care providers.
- The Clever Health Network managed by GRHA was officially launched by the Federal Minister for Broadband, Communications and the Digital Economy. WWHS was selected to showcase the technology as one of the largest users of Videoconferencing within GRHA.

► **This strategy is ongoing as the Service's needs evolve and technology changes.**

1.4**Review care planning and evaluation processes in aged and acute care.**

- iCARE electronic Care Plans are now being utilised at all aged care sites.
 - Acute care pathway reviews were completed with the introduction of best practice medical and surgical pathways.
 - An iCARE Working Group has been established to enable iCare trainers and users to refine clinical assessments and improve the efficiency of iCare protocols.
 - A Forms Working Group, incorporating Clinical, Quality and Health Information staff, was established to review and revise all clinical assessment and care forms to meet current best practice guidelines.
- ▶ **Implementation of this strategy is complete subject to ongoing continuous improvement initiatives.**
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1.5**Review and compare aged and acute care processes with EQUIP 4 Criteria and identify priorities and processes for change**

- A successful transition was achieved from EQUIP 3 to EQUIP 4 accreditation criteria in November 2008 to give WWHS full accreditation for the next four years.
 - Preparation has commenced for the EQUIP Self-Assessment due for submission in November 2009.
- ▶ **Implementation of this strategy is complete.**
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1.6 Assess the effectiveness of infection control in the new Nhill Hospital building.

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- An *Extensive Achievement* rating for Infection Control was achieved in the 2008 EQuIP accreditation survey.
 - Specific regulatory compliance is being monitored through Cleaning Standards, Hand Hygiene and other DHS standard reporting.
- ▶ **Implementation of this strategy is complete.**
-

1.7 Improve the quality of support services in selected direct care areas.

-
- A new menu was implemented across all sites after a trial period.
 - Reviewing work practices and process audits led to significant cost reductions in Kaniva, Jeparit and Rainbow. The estimated savings achieved from this undertaking equate to more than \$100,000.
- ▶ **Implementation of this strategy is ongoing and will be extended by further benchmarking studies in future years.**
-

1.8 Review and re-engineer WWHS's support for viable service delivery by Cooina.

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- A review of the management processes and programs at Cooina will be undertaken in August 2009 to determine the most appropriate programs to accommodate clients' needs add to their quality of life and to consider further the appropriateness of the existing management structure.

- Funding amounting to \$88,500 was received from the Business Services Assistance Program administered by the Department of Families, Housing, Community Services & Indigenous Services for:
 - refurbishment of Oliver's Café;
 - to set up the Nhill Hospital Kiosk; and
 - to purchase a catering van.
 - A bus was purchased with funding received from DHS.
 - Oliver's Kiosk commenced on 31st March 2009 at the Nhill Hospital.
 - The Disability Service Management Group attended education on the new funding model for Individual Support Packages which will be implemented at the commencement of 2010.
 - ▶ **Implementation of this strategy is ongoing and will be linked to other opportunities in the future.**
-

1.9

Review and implement DHS's Care in Your Community: A Planning Framework for Integrated Ambulatory Health Care policy document and its Rural Procedural Services Planning Framework.

- The Community Needs Analysis and Service Profile Project has addressed Government and DHS policies.
- ▶ **Implementation of this strategy is ongoing and relevant aspects of the Frameworks form part of the WWHs revised Service Profile.**

1.10

Improve meaningful communication and consultation with:
- our community in the planning of our services; and with
- our consumers in the delivery of services to individuals.

- An *Extensive Achievement* rating was achieved for the Community Consultation criteria in the November 2008 ACHS EQuIP Survey.
- The employment of a Marketing and Media Consultant has been successful with many important and strategic press releases being prepared by a skilled media practitioner.
- Community consultations were undertaken at each site as part of the Community Needs Analysis and Service Profile Project. They were well attended and prompted a recommendation that such forums be conducted on a regular basis.
- An acute inpatient satisfaction survey has been re-introduced seeking patient comments on the quality of our service, which is valuable information in the planning and delivery of future services.
- The external acute inpatient satisfaction survey, Victorian Patient Satisfaction Monitor ('VPSM') conducted by Department of Human Services rated WWHS with the highest overall satisfaction level for all Group C hospitals in Victoria for 2007-08. This was measured across a range of criteria including admission, discharge, quality of care, medication management and physical environment, including cleanliness, complaints management and quality of food.

- Articles published in the media continue to increase with 224 articles in various newspapers referring to West Wimmera Health Service in the period from January to September 2009.
- The Annual Report for 2007-08 received a Gold Award in the Australasian Annual Report Award Inc. Awards.
- The Quality of Care Report for 2007-08 received a high commendation at the Victorian Public Healthcare Awards.
- ▶ **Implementation of this strategy is ongoing and will be supported by a new Communication Strategy for 2009-12.**

1.11

Seek and develop opportunities for more and stronger regional alliances.

- Executive management personnel have developed stronger alliances with other regional stakeholders to support brokered services and other direct care and supporting initiatives.
- Opportunities for stronger regional alliances were explored in depth as part of the Community Needs Analysis and Service Profile project. Comprehensive discussions took place with the major stakeholders and specific recommendations have been made with respect to a range of practical initiatives.
- WWHS will participate actively in the development of the Wimmera Sub-Regional Plan being prepared for the Victorian Department of Health.
- ▶ **Implementation of this strategy is ongoing and will be supported by the Department's Wimmera Sub-Regional Plan.**



STRATEGY
2.0

STRENGTHENING
LEADERSHIP
AND MANAGEMENT

2.1**Develop a corporate culture which encourages exceptional professional skills and promotes collaborative working relationships that drive better outcomes for our consumers.**

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- The Service participated in the People Matter Survey 2009 with exceptionally good results for group values relating to responsiveness, human rights and equal employment opportunity.
 - In outcomes relating to consumers, 99% of respondents agreed that 'My workgroup strives to achieve customer satisfaction' and 96% agreed that 'My organisation strives to match services to customer needs'.
 - Staff and patient complaints are reported monthly to the Performance Review Committee by the Complaints Officer.
 - Staff retention rates are reported as part of Monthly Finance reporting highlighting those who commence and leave within a three month period, a suggestion from the November 2008 EQuIP survey.
- ▶ **Implementation of this strategy is ongoing and will be supported by future People Matter surveys.**

2.2

Review existing structures and processes to improve the capacity of the Board to govern the Health Service.

- A review of the Board of Governance Committee structure was undertaken in February 2009 and resulted in a revised structure reducing the number of sub committees from nine to three.
 - Membership, Objectives and Terms of Reference for Board Committees, and Operational sub-committees where appropriate, were reviewed and revised in February 2009.
 - Membership of Board committees was reviewed and expanded with a view to improving and broadening communication opportunities.
 - The President and Vice President of the Board of Governance will undertake the Australian Institute of Company Directors' Board Directors Course in August 2009.
 - The two new Board Members will attend Board of Governance training in September 2009.
- ▶ **Implementation of this strategy is complete.**

2.3**Develop a co-ordinated strategy to present evidence of compliance with all regulatory and other requirements to the Board of Governance, accreditation surveyors, auditors and other eligible users.**

-
- Monthly reports to the Board of Governance continue to provide compliance performance information.
 - Both the EQuIP accreditation survey and Aged Care accreditation surveys found regulatory compliance within the organisation to be at a satisfactory level.
 - An annual report on compliance with the Department of Treasury and Finance Financial Management Compliance Framework will be submitted to the Minister for Finance for the 2008-09 financial year.
 - The Service's internal auditor conducts compliance audits in accordance with the internal audit plan approved by the Board of Governance Audit Committee annually.
- ▶ **Implementation of this strategy is complete. It is now a standing agenda item at the Board of Governance and meetings of Board Committees.**

2.4

Continue to improve WWHS's Risk Management Strategy to ensure the development of a risk-aware culture, identification and management of clinical and corporate risks and the identification and elimination of workplace hazards.

- The internal audit program for 2008-09 was based on WWHS's risk register and risk treatment strategies.
 - Clinical Risk Management has been audited in 2009.
 - The Risk Management Framework was reviewed by the Audit Committee in April 2009.
 - RISKMAN Incident Reporting System education was provided to executive and senior management personnel.
- ▶ **Implementation of this strategy is ongoing and subject to continuing risk assessment and treatment.**

2.5

Create a succession plan for key management positions and roles.

- The succession plan has been updated to reflect the new Clinical Services Division positions.
- ▶ **Implementation of this strategy is complete.**

2.6**Develop and implement a communication strategy for interfaces with Board members, staff and other stakeholders.**

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- DLA Phillips Fox has provided protocols to govern communication between a Board member and staff which were adopted at the May 2009 Board Meeting and the WWHS's Rules of Procedure have been amended accordingly.
 - ▶ **This strategy has been implemented but further work will be done in the context of the next Strategic Plan.**
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2.7**Review and evaluate the performance of the Board of Governance.**

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- A process is underway to consult with the Australian Institute of Company Directors to develop a comprehensive procedure to evaluate the performance of the Board of Governance.
 - ▶ **This is a work in progress and will carry over to the Strategic Plan 2009-2012.**
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2.8 Provide strategic leadership training for members of the Board of Governance.

- Board members attended Board member education auspiced by DHS.
- See also 2.2.

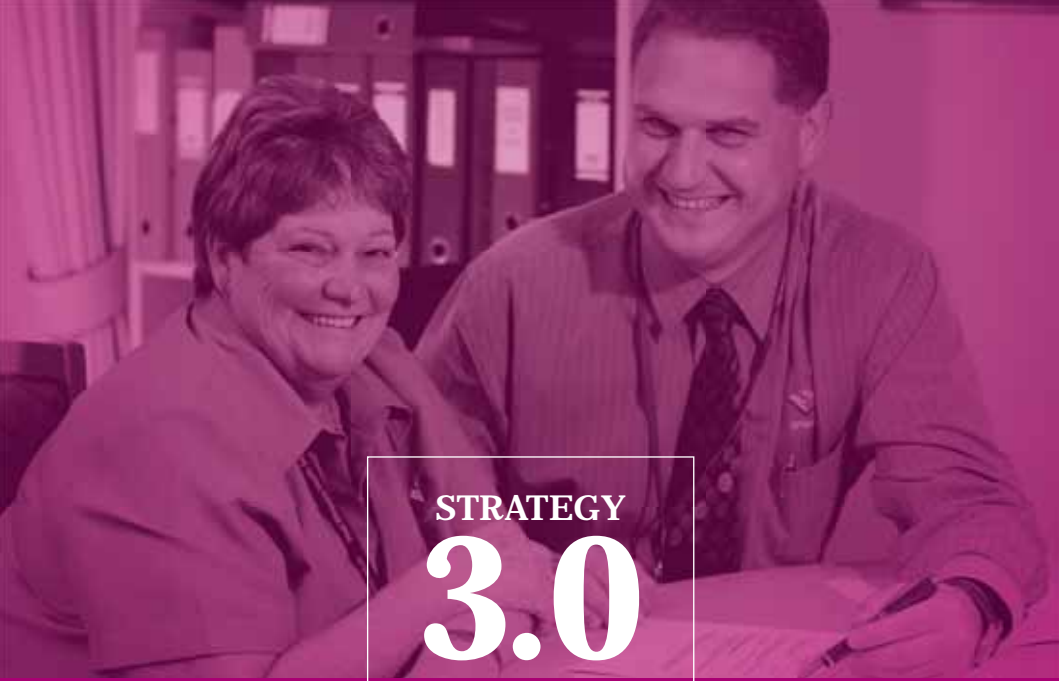
▶ **Implementation of this strategy is ongoing and subject to continuing education and performance appraisal.**

2.9 Review project management and evaluation processes to improve program delivery, effectiveness and timeliness.

▶ **This strategy will be implemented as a precursor to Stages 3 and 4 of the Nhill Hospital redevelopment and other capital projects.**

Expand and intensify benchmarking studies to generate performance improvement opportunities .

- Victorian Nosocomial Infection Surveillance System ('VICNISS') Hospital Acquired Infection Surveillance System provides benchmarks to assess infection control performance at WWHS.
 - Aged Care Quality Association reports based on WWHS's data and data from other providers.
 - DHS aged care business performance data and benchmarks.
 - External benchmarking for key occupational health and safety measures is in place.
 - ACHS Grampians Regional Benchmarking data for Small Rural Health Services is provided by DHS summarising EQuIP 4 accreditation achievements for comparison.
 - DHS provided Benchmarking of Mandatory Education components for the Grampians Region which highlighted the high attendance rate achieved by WWHS staff.
- **Implementation of this strategy is ongoing and is being embedded progressively in WWHS's systems**



STRATEGY

3.0

OPTIMUM HUMAN
RESOURCES
MANAGEMENT

3.1

Undertake initiatives to develop a more responsive and committed organisation, utilising the support of La Trobe University. The initiatives will include a heightened focus on human resources management.

- Human resource management has been strengthened with the appointment of the Executive Director of Industrial Relations and Human Resource Management, including responsibility for human resource education.
 - A new 'user-friendly' performance appraisal form has been introduced which has proved to be effective with an increase in performance appraisals undertaken.
 - The position of Human Resource Manager has been advertised and, when filled, the incumbent will also support Rural Northwest Health in Warracknabeal.
- ▶ **Implementation of this strategy will be completed when a part-time Human Resources Manager is appointed in collaboration with Rural Northwest Health.**

3.2 Formalise and enhance strategies for attraction, support and retention of visiting medical practitioners.

- A second visiting General Practitioner Anaesthetist has been appointed.
- See 1.2 with respect to medical services for Goroke.
- Visiting specialist surgeons and anaesthetists are available for regular consultations and procedural sessions.
- Efforts are still being exerted to have the General Practitioner Surgeon and General Practitioner Obstetrician assessed to enable their credentials to be advanced to Level Two and thus utilise their skills.
- A Geriatrician has been credentialed and will begin visiting the Service from October 2009 to provide specialised aged care services.
- An Orthopaedic Surgeon has been credentialed to replace the current specialist from December 2009

▶ **Implementation of this strategy is complete.**

3.3 Develop a workforce strategy and plan for the planning period, supported by staff recruitment and retention strategies.

- The Service has developed a detailed staffing profile for budgeting purposes. This profile will require broadening to take into account future competency requirements in the light of the new Service Profile.
- In the year to 30 June 2009, no staff members left the Service within three months of commencement.

▶ **Implementation of this strategy will be completed as part of the documents supporting the Strategic Plan for 2009-12.**

3.4

Establish a more meaningful annual staff performance appraisal process including self-appraisal, goal-setting, KPIs and further education objectives.

-
- A new tool has been developed and implemented for annual staff appraisals.
 - Performance appraisals are now used to identify staff education needs.
 - The Executive Director of Industrial Relations and Human Resource Management has provided education to senior managers on performance management and conducting performance appraisals.

▶ **Implementation of this strategy is complete.**

3.5

Review and evaluate WWHS's human resources management policies to optimise their contribution to the Service's role as a 'family-friendly' employer.

-
- ▶ **This strategy will be implemented when a part-time Human Resource Manager is appointed in collaboration with Rural Northwest Health. Policy reviews occur on the date set when the policy is approved by the Board and at each review thereafter**

3.6

Provide skills maintenance and development for clinical and other staff to ensure that all services identified in the new Service Plan can be provided and so that a high standard and patient, resident, client and staff safety is assured.

- The Grampians Loddon-Mallee e-learning portal has now been introduced with access to additional modules available.
- Training costs for 2008-09 were 89% of the Training budget.
- 156 external education courses were attended by 309 staff members.
- A high percentage of staff met the mandatory education requirements.

▶ **This strategy is being implemented on an ongoing basis.**

3.7

Introduce a structured management education program for senior and middle managers based on recommendations from past review reports.

- All managers have undertaken or are participating in management education programs

▶ **This strategy will be further addressed as part of the implementation of the new Service Profile**

3.8

Create a succession plan for key middle management and operational positions and roles.

- Succession plans embracing all levels of management as adopted by the Board of Governance are now in place and observed for replacement relief of staff within senior and middle management levels.

► **Implementation of this strategy is complete.**

3.9

Implement the 'Employee Self-Service' features of the PAYGLOBAL payroll and HRM system.

- PAYGLOBAL's Human Resource Self Service ('HRSS') system was purchased and installed in March 2009.
- Staff training was provided throughout April and May 2009 on how to use this system.
- HRSS provides employees with the opportunity to access their own pay and personal details online in a secure manner.
- HRSS also enables staff to be better informed about their compliance with mandatory education requirements.
- At 30 June 2009, 16% of staff had elected to receive their pay slips electronically from HRSS.

► **Implementation of this strategy is complete subject to major refinements with respect to staff who work non-standard hours.**

3.10 Apply specialised industrial relations expertise to support WWHS's compliance with Awards and industrial agreements and to provide expert mediation, advocacy and representation services.

- No industrial disputes have occurred since Moving Ahead – the last progress report against the Strategic Plan.
- The Executive Director, Industrial Relations and Human Resource Management reviewed the Service's employment contracts and also produced customised templates to address the requirements of particular divisional classifications.

▶ **Implementation of this strategy is complete.**

3.11**At the end of the planning period, review and evaluate the efficiency and effectiveness of the existing organisation structure.**

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- The interim organisation structure was replaced in March 2009 when the following appointments were made:
 - Executive Director of Clinical Services – responsible for acute and aged care and allied and community health.
 - Clinical Operations Manager – this position reports to the Executive Director of Clinical Services. The position is responsible for day-to-day clinical activities across the Service and all Directors of Nursing and Unit Managers report to this position.
 - A Unit Manager has been appointed who is responsible for the ward and Operating Suite services of the Nhill Hospital. This position reports to the Clinical Operations Manager.
 - Disability and Dental Services are the responsibility of the Chief Executive Officer.
- **Implementation of this strategy is complete.**



STRATEGY
4.0

SAFE PRACTICES
AND ENVIRONMENT

4.1

Comply with the Occupational Health and Safety legislation.

- Compliance with the Occupational Health and Safety legislation is monitored by the Occupational Health and Safety Committee based on OH&S audits.
 - Internal audit reviews and regular reports from the Board's compliance assessment system also support this process.
- ▶ **This strategy has been implemented and is ongoing as part of the Service's compliance processes.**

4.2

Conduct annual fire protection and work safety practices audits and universal staff training.

- Fire preparedness audits have now been introduced and are being actively pursued before the 2009-10 summer.
 - Fire safety training is mandatory for all staff within two months of commencement and annually thereafter.
 - Fire evacuation exercises are conducted at all sites at least annually.
- ▶ **This strategy has been implemented.**

4.3

Arrange optimal waste disposal and recycling.

- Rubbish skips are used at each of Nhill and Kaniva Hospitals, with results showing greater efficiency and cost savings.
 - Reporting of key waste management performance indicators has commenced.
- ▶ **Implementation of this strategy is complete.**

Minimise the use of energy and water resources in the operation of WWHS's facilities and the provision of services

- A Macerator was installed in Iona Digby Harris Home. Savings achieved – 85% in electricity used; 75% reduction in cold water used; 100% reduction in hot water used. Consumables are constructed from recycled newspapers.
 - A grant was sought from DHS in February 2009 to replace pan flushers at Jeparit and Kaniva Hospital and Nursing Home with macerators.
 - Vehicle replacement now takes into account air pollution and greenhouse rating criteria.
 - Four new 5,000 litre rain water tanks were installed at Jeparit to collect rain water. The water is used for combi ovens and boiling water units.
 - Funding for:
 - Replacement of evaporative coolers at Natimuk
 - Replacement of hot water units at Kaniva Hospital
 - Replacement of air conditioning at Iona Digby Harris Home
- ▶ **Implementation of this strategy is complete.**

Note 10: Analysis of Expenses by Source (based on the consolidated view)

	Admitted Patients	Out-patients	Ambulatory	RAC incl. Mental Health	Acute Care	Primary Health	Other	Total
	2008 \$'000	2008 \$'000	2008 \$'000	2008 \$'000	2008 \$'000	2008 \$'000	2008 \$'000	2008 \$'000
Services Supported by Health Services Agreement	6,722	82	1,254	7,841	544	1,828	659	17,750
Employee Benefits	816	19	59	132	-	90	-	948
Non Salary Labour Costs	977	10	59	438	18	518	56	1,869
Supplies & Consumables	1,496	6	72	1,565	143	102	251	3,201
Other Expenses from Contracting Operations	453	-	-	458	32	-	39	1,172
Depreciation & Amortisation (refer note 6)	-	-	-	-	-	-	-	-
Finance Costs (refer note 5)	-	-	-	-	-	-	-	-
Sub-Total Expenses from Services Supported by Health Services Agreement	9,394	137	1,837	10,434	737	2,330	1,061	25,790
Services Supported by Hospital and Community Initiatives	-	-	-	-	-	-	-	-
Contracting Initiatives	-	-	-	-	-	-	-	-
Employee Benefits	-	-	-	-	-	-	-	-
Non Salary Labour Costs	-	-	-	-	-	-	-	-
Supplies & Consumables	-	-	-	-	-	-	-	-
Other Expenses from Contracting Operations	-	-	-	-	-	-	-	-
Sub-Total Expenses from Services Supported by Hospital and Community Initiatives	-	-	-	-	-	-	-	-
Total Expenses	-	-	-	1,837	10,434	737	2,330	2,018

STRATEGY
5.0
 SOUND FINANCIAL
 MANAGEMENT

5.1**Develop and implement a financial management strategy with a supporting activity-based model and an asset management, maintenance and replacement plan (see also Section 7).**

-
- The Service has achieved financial surpluses in each of the last three financial years. In 2008-09, the Service earned an operating surplus of \$599,000 (before capital purpose income and depreciation) and an entity surplus of \$425,000. Capital and reserves (net assets) totalled \$51.5 million at the end of the financial year.
 - The 2008-09 annual budget was set with staffing costs based on forecast staff profiles. The process to calculate budgeted employment costs was significantly refined to allow more accurate allocation of costs.
- ▶ **A three-year financial management plan based on the new Service Profile is being prepared to support the new Strategic Plan for 2009-12.**
-

5.2**Conduct a successful fundraising program to raise \$2 million to fund WWHS's future development and equipment needs.**

-
- Various fundraising initiatives continue.
 - Donations and bequests (including philanthropic donations) for 2008-09 totalled \$384,105.
- ▶ **Implementation of this strategy is complete.**
-

5.3 Improve WWHS's financial position to ensure continuing viability.

- The Current Ratio at 30 June 2009 was 1.46 compared to a budget of 1.18 and a previous year outcome of less than 1.
- WWHS has been removed from the Department of Health's 'Close Watch' Program.

Implementation of this strategy is complete.

5.4 Deliver ongoing POWER BUDGET training to senior and middle management groups to empower them to manage devolved budgets.

- Training has been provided and will continue for newly appointed managers. Numbers of staff using POWER BUDGET are growing.

▶ **Implementation of this strategy is complete.**

5.5 Improve budget monitoring, variance analysis and organisational processes for financial accountability and active financial management.

- Content of the monthly Finance Report to Chief Executive Officer and Finance Committee has been improved.
- Detailed ongoing support is provided by finance personnel to service line managers to support budget variance reporting and direct access to POWER BUDGET.

▶ **Implementation of this strategy is complete.**

5.6

Maximise Aged Care services revenue by optimising bed occupancy, resident mix and RCS Classifications.

- A smooth transition occurred to the Commonwealth's new Aged Care Funding Instrument ('ACFI').
- An internal review was conducted which gave rise to increases in ACFI funding.
- Regular financial reports support ongoing monitoring of aged care funding.

► **Implementation of this strategy is complete.**

5.7

Maximise the opportunities for flexibility provided by the Small Rural Health Services Funding Model and pursue revenue maximisation strategies.

- Recommendations from the Community Needs Analysis and Service Profile Project Report are designed to maximise these opportunities.
- Awaiting the findings of the Victorian Department of Health review of the Small Rural Health Service funding model.

► **Implementation of this strategy is complete for the 2006-09 planning period.**

A person is shown from the chest up, holding a tablet computer with both hands. They are pointing at the screen with their right index finger. The background is a laboratory or office setting with various equipment and people, all rendered in a blue monochrome color scheme. The overall image has a professional and technological feel.

STRATEGY
6.0

**EFFECTIVE
INFORMATION
MANAGEMENT**

6.1**Develop and implement an Information and Communications Technology ('ICT') Strategy to keep abreast of technological system advances.**

-
- An Information Technology Strategic Plan was prepared and approved for the period ending on 31 December 2009.
 - ▶ **A new Information and Communications Technology Plan will be prepared to support the Strategic Plan 2009-12.**

6.2**Develop information technology links to improve access, efficiency and effectiveness of preparation, storage and retrieval of patients', residents' and clients' records.**

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- New main file servers are now installed and working.
 - iSOFT patient management system went 'live' on 3 August 2009.
 - The iSOFT system will enhance care delivery through better bed management and fewer input errors.
 - ▶ **This strategy has been implemented for the purposes of the Strategic Plan for 2006-09 but is ongoing as the Service's needs evolve and technology changes.**

6.3

Examine ways to achieve data integration based on users' needs so as to reduce duplicated data and effort in recording, retrieval and report preparation.

- A new website has been launched which presents a more professional, accessible and informative communication tool for WWHS.
 - The new iCare software has enabled integration of all Aged care resident records.
- ▶ **Implementation of this strategy is complete for the 2006-09 planning period.**

6.4

Improve the efficiency and effectiveness of statistical data collection and validation.

- The new iSOFT patient management system was implemented in 2009 to replace the previous IBA system.
- This strategy is an important element of the Knowledge Management Plan which is being prepared at present.
- ▶ **This strategy has been implemented for the purposes of the Strategic Plan for 2006-09 but is ongoing as needs evolve and technology changes.**

6.5

Consider feasible options to apply leading technologies to underpin WWHS's knowledge management systems.

- A Knowledge Management Plan is being developed to support the Strategic Plan 2009-2012.



STRATEGY

7.0

ASSET
MANAGEMENT

7.1

Develop an asset management policy, strategy and plan to guide WWHS's capital expenditure priorities and budgeting for all buildings, plant and clinical and administrative equipment.

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- Asset acquisitions, disposals and replacements are subject to specific delegations of authority from the Board of Governance.
 - WWHS is revising its Procurement and Inventory Management Policy, including its requirements for capital purchases.
- ▶ **An Asset Management Plan is being developed to support the Strategic Plan 2009-2012.**

7.2

Conduct a biennial condition assessment and gap analysis across all infrastructure asset categories according to need to support the asset management plan with respect to both asset replacement and maintenance needs.

-
- WWHS's Asset register is updated progressively to reflect the current status of asset holdings and their values.
 - The Service's land and buildings were revalued at 30 June 2009 based on values provided by the Valuer-General.
- ▶ **This strategy will not be implemented in the short term as most of the Service's built infrastructure is less than five years old. A condition assessment of the Service's buildings has been re-scheduled for the first half of 2011.**

7.3 Complete Stages 3 and 4 of the new Nhill Hospital facilities.

- Successful application for \$130,000 from a philanthropic foundation to refurbish the MIRA Community Health and Medical Centre.
- Brown Falconer, Architects has been engaged to provide architectural plans for completing Stages 3 and 4 of the Nhill Hospital Redevelopment.

▶ **This strategy will continue under the Strategic Plan 2009-12.**

7.4 Review and reassess future needs for investment in low level aged care facilities and services in Kaniva.

- Brown Falconer, Architects are preparing plans for the Kaniva Hostel to form part of the Kaniva Hospital, as recommended in the Community Needs Analysis and Service Profile.

▶ **This strategy will continue under the Strategic Plan 2009-12.**

7.5 Review and reassess the need for four low care beds at Iona Digby Harris Home – Phase 1.

- Four additional low [aged] care beds have been commissioned.

▶ **Implementation of this strategy is complete.**

7.6

Negotiate funding with Dental Health Services Victoria and complete the redevelopment of the Nhill Hospital's Dental Clinic.

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- This redevelopment has been completed successfully.
 - ▶ **Implementation of this strategy is complete.**

7.7

Assess the need for bed-based services in Goroke and subsequently seek funding if justified by the assessment.

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- Considered as part of the Community Needs Analysis Service Profile Project conducted in 2008-09.
 - \$300,000 was received from the Bouchier family to improve or expand the health services provided in Goroke.
 - The needs of the Goroke Community have been considered by the Goroke Community Health Centre Advisory Committee in light of the stipulations of the donation. The appointed Project Control Group has identified two alternatives for consideration:
 1. Construction of three to four independent living units.
 2. Redevelopment or refurbishment of the existing Centre.
 - ▶ **This strategy has been implemented for the purposes of the Strategic Plan for 2006-09.**



STRATEGY
8.0

**RELATIONSHIPS
WITH THE COMMUNITY
AND OTHER
STAKEHOLDERS**

8.1**Maintain constructive relationships with our community and other stakeholders.**

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- The 2008 ACHS EQuIP Accreditation survey resulted in relationships and communication with other stakeholders receiving an ***Extensive Achievement*** rating, recognising the Service's significant efforts and positive outcomes from implementing this strategy.
 - Community consultation forums were conducted in each West Wimmera Health Service community as a part of the Community Needs Analysis process which proved to be highly successful. The continuation of these stakeholders' forums on a regular basis has been recommended.
- ▶ **This strategy has been implemented for the purposes of the Strategic Plan for 2006-09.**
- ▶ **A Communication Strategy is being developed to support the Strategic Plan 2009-12.**

SERVICES & SERVICE LOCATIONS

AGED CARE

Residential Hostels
and Nursing Homes
Home-Based Care

ACUTE CARE

General and Specialist
Medical Care
General and Specialist
Surgery
Ambulatory or Non-Admitted
Patient Care (Outpatient,
Emergency and Primary
Care)
Discharge Planning
Ear, Nose and Throat (ENT)
Surgery
Geriatrics
Obstetrics
and Gynaecology
Ophthalmic Surgery
Oral Surgery
Orthopaedic Surgery
Palliative Care
Hospital in the Home
Hospital to the Home
Medical Imaging (Radiology
and Ultrasound)
Post-acute Care
Psychiatric Services

ALLIED HEALTH SERVICES

Asthma Education
Cardiac Rehabilitation
Diabetes Education
Dietetics
Exercise Physiology
Dental Services
Massage Therapy
Maternal & Child Health
Myotherapy
Occupational Therapy
Optometry
Pharmacy
Physiotherapy
Podiatry
Social Work
Speech Pathology
Welfare & Counselling

COMMUNITY CARE

Aged Care Assessments
Community Health Nursing
Community Aged
Care Packages
District Nursing
Health Promotion
and Education
National Respite for Carers

DISABILITY SERVICES

Duck Breeding Shed
Oliver's Cafe
Oliver's Kiosk
Snappy Seconds
Collectables
Supported Employment

SERVICE SUPPORT

Engineering and Maintenance
Executive Services
and Fundraising
Finance and Administration
General and Hotel Services
Health Information
Management
Resource Centre
Volunteers

West Wimmera Health Service operates across a wide catchment area in rural north western Victoria

NHILL

Acute, specialist medical and surgical services aged, community and mental health, primary care, welfare and disability services.

KANIVA

Acute, aged, community health, primary care and welfare services.

JEPARIT

Acute, aged, community health, primary care and welfare services.

RAINBOW

Acute, aged, community health, primary care and welfare services.

NATIMUK

Aged, community health, primary care and welfare services.

GOROKE

Community health and welfare services.

NHILL

43-51 Nelson Street
Nhill Victoria 3418
T (03) 5391 4222
F (03) 5391 4228

KANIVA

7 Farmers Street
Kaniva Victoria 3419
T (03) 5392 7000
F (03) 5392 2203

JEPARIT

2 Charles Street
Jeparit Victoria 3423
T (03) 5396 5500
F (03) 5397 2392

RAINBOW

2 Swinbourne Avenue
Rainbow Victoria 3424
T (03) 5396 3300
F (03) 5395 1411

NATIMUK

6 Schurmann Street
Natimuk Victoria 3409
T (03) 5363 4400
F (03) 5387 1303

GOROKE

Natimuk Road
Goroke Victoria 3412
T (03) 5363 2200
F (03) 5386 1268

COOINDA

Queen Street
Nhill Victoria 3418
T (03) 5391 1095
F (03) 5391 1229

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