

safekindtogether

Northern Health

Northern Health

Our Vision

A healthier community, making a difference for every person, every day.

Our Values







Our Priorities

- A safe, positive patient experience
- A healthier community
- An innovative and sustainable future
- Enabled staff, empowered teams
- Engaged learners, inspired researchers

Northern Health acknowledges Victoria's Aboriginal communities and their rich culture and pays respect to their Elders, past, present and emerging. We acknowledge Aboriginal people as Australia's first peoples and as the Traditional Owners and custodians of the land (the Wurundjeri people) on which Northern Health's campuses are built.

We recognise and value the ongoing contribution of Aboriginal people and communities to our lives and we embrace the spirit of reconciliation, working towards the equality of outcomes and ensuring an equal voice.

Northern Health celebrates, values, and includes people of all backgrounds, genders, sexualities, cultures, bodies and abilities.





Northern Health acknowledges the traditional owners of this land, the Wurundjeri people of the Kulin Nation. We pay respects to their elders, past, present and emerging.



Message from the Chief Executive

On behalf of the Board, Executive and staff, it is my pleasure to present to you the 2021-22 Northern Health Quality Account.

While the past 12 months have brought many new opportunities for growth and change, Northern Health has also faced another challenging year in health care, as we continue to navigate the COVID-19 pandemic.

Our staff, volunteers and consumers have demonstrated enormous dedication and commitment to the care of our community, each and every day, all the while being guided by our organisational values of 'safe, kind and together.'

Demand for emergency care has remained strong over the past year; with 110,888 presentations at Northern Hospital Epping's Emergency Department, which remains the busiest in the state. The Victorian Virtual Emergency Department (VVED), initially a pilot program at Northern Health during the early days of the pandemic, supported more than 35,000 presentations over the past 12 months. The VVED is now a state-

wide service, providing virtual emergency care to all Victorians.

In the past year, 97,317 patients were admitted to Northern Health, 14,181 elective procedures were conducted and 3,303 babies were born in our care.

On 1 July 2022, as a result of recommendations from the Royal Commission into Victoria's Mental Health System, Northern Health became a designated mental health service, making us the third largest provider of mental health services in Victoria.

On 4 July 2022, we formally welcomed Northern Area Mental Health Services and North West Area Mental Health, as well as the staff of Merv Irving Nursing Home and McLellan House. On 7 November, the Bundoora Aged Persons Mental Health Unit (APMHU) and Assessment and Treatment Services (APATT) also transferred to Northern Health. Around 800 new staff members joined the Northern Health family during this time.

As we look towards 2023, construction of a new 30-bed mental health facility at the Northern Hospital Epping site is due for completion early in the year. This new facility will enable us to meet the growing demands for mental health services in the north. Construction is set to commence for new Community Hospitals at Whittlesea and Craigieburn, and the current State Government has committed up to \$855m to further upgrade facilities at Northern Hospital Epping. All new facilities will require new training positions and consultants.

I would like to express my gratitude and thanks to our incredible team of more than 6,300 staff and 350 dedicated volunteers, who provide dedicated service to Northern Health every day.

On behalf of the Board and Executive, I am pleased to present the 2021-22 Northern Health Quality Account. I look forward to your feedback and insights on how we can further align the quality of our health service to the needs of our community.



Siva SivarajahChief Executive Northern Health



Our Services

Northern Health is the key provider of public health care in Melbourne's northern region, one of the fastest growing communities in Australia. We take care of our community by providing a wide range of health services at Northern Hospital Epping, Broadmeadows Hospital, **Bundoora Centre and Craigieburn Centre.**

We collaborate with our partners to help expand the range of health care services offered to our culturally rich and diverse community, including:

- Emergency and intensive care
- Acute medical, surgical, maternity and paediatric
- Sub-acute, palliative care and aged care
- Specialist clinics and community-based services.

Northern Hospital Epping has the busiest Emergency Department in Victoria, and is located in the rapidly growing northern suburbs. This growth is driving us to think innovatively about the needs of the population and what the health system of the future might need to look like to meet those needs.

Northern Health provides a vibrant, fast-paced workplace of more than 6,300 staff and 350 dedicated volunteers, many of whom live in the vicinity of our campuses.





Our care at a glance

















About this Account

Northern Health's Quality Account is developed to inform patients and community members about how quality and safety is monitored and improved throughout the health service.

In this report, information about our services and the changes we have made to improve care and patient outcomes are highlighted, along with our patient stories and data on important quality and safety indicators.

Feedback on last year's report includes:

- How does the community know the report is available where would I find it?
- Define any words that are medical or clinical it might mean something different to me
- Reduce repetition of information
- Let me know where I can provide feedback.

The report will be available on the Northern Health website, www.nh.org.au.

Northern Health has endeavoured to reduce medical or clinical language, or provided definitions to help explain the words and terms used in this report.

If you would like to receive an electronic version of the report, or provide feedback you can do so by:

Contacting our Patient Experience team on (03) 8405 2457, sending an email to feedback@nh.org.au or visiting www.nh.org.au.

If English is your second language, you can call us via the telephone interpreter service on 131 450. You can speak your language and ask them to call the Patient Experience Office. Language services are free of charge.

Arabic

إذا رغبت بمعرفة المزيد عن التقرير السنوي للنوعية، يرجى الإتصال بخدمة الترجمة الهاتفية TIS على رقم الهاتف 131450. بإمكانك التحدث بلغتك واطلب منهم الأتصال بقسم النوعية على رقم الهاتف 2457 2405 (03). الخدمات اللغوية مجانية.

Greek

Αν επιθυμείτε να μάθετε περισσότερα σχετικά με την Ετήσια Έκθεση Για Την Ποιότητα της

Περίθαλψης (Annual Quality Account), παρακαλούμε επικοινωνήστε μαζί μας μέσω της τηλεφωνικής υπηρεσίας διερμηνείας ΤΙS στο 131 450. Μπορείτε να μιλήσετε στη

γλώσσα σας, και να τους ζητήσετε να καλέσουν το Τμήμα Ποιότητας στο (03) 8405 2457. Η υπηρεσία διερμηνείας διατίθεται δωρεάν.

Italian

Per saperne di più sul Rapporto annuale sulla qualità (Annual Quality Account), siete pregati di chiamarci al 131 450 usando il servizio di interpretariato telefonico. Potrete parlare la vostra lingua e chiedere che chiamino il Dipartimento per la Qualità al **(03) 8405 2457**. I servizi linguistici sono gratuiti.

Macedonian

Ако сакате да знаете повеќе за Годишниот Извештај за Квалитет (Annual Quality Account), ве Молиме повикајте не преку ТИС (TIS), на телефон 131 450. Можете да се јавите зборувајќи Македонски. Замолете ги да Ве поврзат со Одделението за Квалитет (QUALITY DEPARTMENT) на (03) 8405 2457. Услгите за јазикот се бесплатни.

Turkish

Eğer Yıllık Kalite sanız TIS aracılığı ile bizi 131 450 no'lu telefondan arayınız. Kendi dilinizde konuşarak Kalite Departmanı ile (03) 8405 2457 no'lu telefondan irtibata geçmelerini isteyiniz. Dil hizmetleri ücretsizdir.

Vietnamese

Nếu muốn biết thêm chi tiết về Bản Báo Cáo Chất Lượng (Annual Quality Account), xin gọi c ho chúng tôi qua trung gian của TIS theo số 131 450. Quý vị có thể nói chuyện bằng ngôn ngữ của mình và nhờ họ gọi cho Quality Department (Ban Chất Lượng) theo số (03) 8405 2457. Quý vị không phải trả chi phí dịch vụ ngôn ngữ.

Chinese

如果您想了解更多年度质量报告(Annual Quality Account)的相关内容,请拨打电话传译(TIS)电话 131 450和我们联系。您可以说自己的语言,请其转接 (03) 8405 2457。语言服务是免费的。

Consumer, Carer and **Community Participation**

PATIENT EXPERIENCE

Northern Health encourages patients, families, carers, and our community to be involved in making decisions about their care and our services. We gain feedback to help identify gaps in the quality of our service. In this way, we can respond to what matters to you.

The Northern Health Patient Experience Survey

Our Northern Health Patient Experience Survey is an electronic survey that asks patients or visitors three questions about their recent hospital experience. There is the opportunity to provide comments, too. Northern Health encourages people to speak to staff or their manager as soon as they have an issue. This means issues can be resolved while you are still in our care.

In the past year, 6,876 surveys were completed

- 190 (2.6%) of surveys completed with the help of an interpreter
- 371 (5%) of surveys completed by visitors
- 770 comments about care submitted

Overall, how would you rate the care provided by Northern Health? 97% patients rated care as "good" or "very good" How often did health professionals explain things in a way that you could understand? 96% answered "all the time" or "most of the time" 96% In your opinion, how clean was the area of the Q3 hospital you were in? 79% answered "very clean" or "clean" Overall, did you feel you were treated with dignity and respect? 95% answered "Yes, always"

> Do you feel that your care at Northern Health has been affected by the COVID-19 pandemic?

91% said the impact was positive or no change,

The main reason for a negative feedback was the

9% answered "Yes, in a negative way"

impact of not being able to have visitors.

Feedback received by Northern Health from July 2021 to June 2022



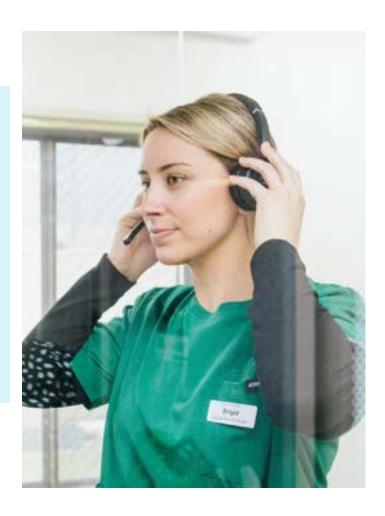
Compliments received through Patient Experience Office and Northern Health Patient Experience Survey



Complaints received through Patient 1,734 Experience Office and Northern Health Patie Northern Health Patient Experience Survey



91% Complaints resolved within 30 days within 30 days



LISTENING TO OUR COMMUNITY

Gaining your feedback

We accept feedback in the following ways:



In person Talk to the staff caring for you



Call our Patient Experience Office on (03) 8405 2457



Email feedback@nh.org.au



Talk to us feedback forms - available in 10 different languages. Please ask a staff member.



Website www.nh.org.au/patients-and-visitors/patient-information/your-feedback/



Post to our Patient Experience Office, 185 Cooper Street, Epping 3076

PARTNERING WITH CONSUMERS

Sarah Charles, Quality and Medication Safety Lead Pharmacist, and Maxine Vu, Consumer, are working together on the important topic of medication safety.

Read on to find out what helps them work well together, how they make a difference and what feels rewarding.

How have the two of you collaborated together?

Sarah: Maxine commenced as a consumer representative on the Medication Safety Committee just before the COVID-19 pandemic started. We have been touching base regularly via phone and email. Maxine has been a great help for anything Medication Safety related, and her input as a consumer really helps us.

Maxine: Sarah was assigned as my buddy from Northern Health's Medication Safety Committee to walk me through the meetings and focus areas requiring consumer input.

Describe some of the projects you worked on.

Sarah: Maxine has been reviewing a lot of our patient information related to particular medications or medical conditions. We recently did a large project to add a 'reason for use' section to the medications list. She was a great help reviewing the options to ensure what we chose was most relevant and made sense from a consumer point of view.

Maxine: As a consumer of Northern Health from a culturally diverse background and being employed locally in disability services, I was able to bring a different perspective on the use of medications in the community. It is important for people to understand the reason they have been prescribed medications. I was mindful of simple language that was able to be easily understood by people of different backgrounds and different literacy levels.

Maxine, could you please give us a bit of a background of your involvement as a consumer at Northern Health?

Maxine: I initially decided to join the committee as I wanted a way to personally contribute to my local community outside of professional employment and be able to influence positive outcomes.

Sarah, how has consumer participation helped your work?

Sarah: Maxine is such a great help, she always provides really great feedback from a different perspective and is really responsive and willing to help. We recently had a conversation around how she has found being a consumer representative at Northern Health, including both what she has liked and what we can do to help in future with the role.





Featured image: Sarah Charles (left) and Maxine Vu (right)

Consumer participation – how to get involved with your health care

We value every voice. Our Consumer Network is made up of people like you - patients, carers and community members who are interested in the quality of health care and shaping the services Northern Health provides.

Northern Health is always looking to work with new members of the community and ensure we understand what is important to our patients and families when receiving health care and designing health care facilities. Your voice and your stories make a difference to the safety and quality of services that we deliver and ultimately, the experience of our patients and their families. If you are interested in further information, please contact consumerparticipation@nh.org.au or call (03) 9495 3313.

Volunteers staying connected

Our amazing volunteers play an important role at Northern Health.

Our volunteer program during the pandemic had to evolve from face-to-face volunteer service, to providing support and engagement remotely. As well as the health service supporting the volunteers, the volunteers found different ways to support the community.

The How-R-U telephone social support program offers participants weekly social support via a telephone call provided by a Northern Health volunteer.

This program continues to be offered by the Volunteer Services Team, and is been a wonderful initiative for both our volunteers and patients.

To assist in the health service's COVID-19 response, the Volunteers Services Team also facilitated the preparation of specimen collection bags for our COVID-19 testing clinics, with more than 67,300 bags collected to date.

So, while we have missed the Volunteers smiling faces, they have continued to support Northern Health and the community behind the scenes.



DIVERSITY AND INCLUSION



Tya Fry: Indigenous Allied Health Professional of the Year

Tya Fry, Northern Health Occupational Therapist, was announced as the Indigenous Allied Health Professional of the Year at the annual National Indigenous Allied Health Awards held in December 2021.

The event was hosted by Indigenous Allied Health Australia (IAHA) where members came together online to celebrate the work of the Aboriginal and Torres Strait Islander Allied Health workforce.

"I was truly honoured to be a recipient of this award. I have been a member of IAHA for a few years now, watching and learning from all those involved," said Tya.

"There are some truly amazing people in Allied Health, completing fantastic work, and I am so grateful to now

stand beside so many of them. I hope this encourages many young Aboriginal people to consider careers in Allied Health."

The Awards recognise current and future leaders who have had significant impact on the health and wellbeing of Aboriginal and Torres Strait Islander peoples, families, and communities.

Karen Bryant, Senior Aboriginal Liaison Officer, congratulated Tya on her win.

"Tya strives to influence change and improve culturally responsive action in service delivery for Aboriginal and Torres Strait Islander peoples," said Karen.

Aboriginal health service at Northern Health

From 1 July 2021 - 30 June 2022

Number of Aboriginal and Torres Strait Islander people accessing Northern Health services.







Supporting people to receive health information in their language

Our patients are born in over 170 countries and speak over 120 languages.

Transcultural and Language Services and the Aboriginal Support Unit trained 331 staff face to face.

In the last financial year, TALS translated 57 documents or 349,693 words in the top ten languages.

1 in 4 patients at Northern Health require an Interpreter

Interpreting

74,123 interpreting requests received in 121 languages (87.7 % met).

Translation

57 documents were translated in 10 languages; a total of **349,693** words.

Education

Total Sessions: **31**Total Attendees: **331**

MOST COMMON LANGUAGES

LANGUAGE	COUNT
ARABIC	21,365
TURKISH	8,039
ITALIAN	6,087
MACEDONIAN	5,899
ASSYRIAN	5,776
GREEK	5,569
VIETNAMESE	2,963
PUNJABI	1,960
CHALDEAN	1,850
MANDARIN	1,782
PERSIAN	1,698
URDU	1,001
HINDI	824



Bicultural workers in the Community Monitoring Program

Over the course of the pandemic, Melbourne's north experienced high rates of COVID-19 amongst firstgeneration migrants. Over 10 per cent of the 15,000 COVID-19 positive people registered in Northern Health's support programs identified as speaking Arabic, Assyrian or Chaldean as their primary language.

In response, Northern Health's COVID Positive Pathway program recruited a specialised team of bicultural workers to help us better engage with Arabic, Assyrian and Chaldean speakers isolating at home.

The bicultural workers wanted to ensure all communities were provided with equal healthcare opportunities, and helped to find a sense of belonging within Northern Health.

The community has voiced its appreciation for the support, informative information and generous aid that has been provided by the team.





International Day of People with Disability

The International Day of People with Disability (IDPWD), is observed annually on 3 December.

The observance of the day aims to promote an understanding of disability issues and mobilise support for the dignity, rights and well being of persons with disabilities. It also seeks to increase awareness of gains to be derived from the integration of persons with disabilities in every aspect of political, social, economic and cultural life.

The theme for 2021 was, 'Leadership and participation of persons with disabilities toward an inclusive, accessible and sustainable post-COVID-19 world.

Northern Health has a dedicated Disability Liaison Officer (DLO), who provides support to people with disability, their families and carer to access our hospital services and to ensure their hospital stay or outpatient clinic appointment is safe, accessible and inclusive.

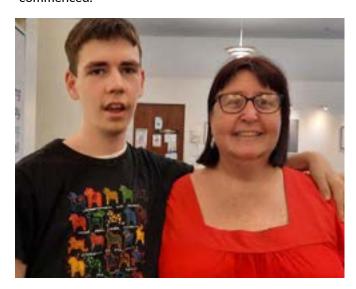
This includes equitable access for those with disability from LGBTIQA+, Aboriginal and Torres Strait Islanders and those from a culturally diverse background. The service also has a focus on assisting those with a disability to access COVID-19 testing and treatment.

Brodie and his mum Melissa have lived in Epping for 18 years.

At the age of four and a half years old, Brodie was officially diagnosed with Autism and an Intellectual disability.

Brodie and his mum both know Northern Health well, as Brodie has had regular trips to the hospital. Brodie was supported through the Disability Liaison program to receive his COVID-19 vaccinations.

The Disability Liaison program has received close to 800 referrals to assist people with disabilities since the role commenced.



IDAHOBIT DAY: WEAR A RAINBOW

IDAHOBIT stands for International Day Against Homophobia, Biphobia, Interphobia and Transphobia.

The day is celebrated across Australia, to take a stand against discrimination and support lesbian, gay, bisexual, transgender, intersex, queer and asexual (LGBTIQA+) people.

IDAHOBIT Day acknowledges 17 May 1990, when the World Health Organization (WHO) removed homosexuality as a mental disorder in the International Classification of Disease (ICD).

Northern Health has a dedicated Rainbow Working Group Committee.

"Although we have come a long way since then, people who form part of the LGBTIQA+ community still experience discrimination," said Christine Nicolaidis, Chair of the Rainbow Working Group Committee.

"Research indicates 75 per cent of LGBTQIA+ youth have experienced some form of discrimination, and 77 per cent of trans and gender diverse people report being discriminated against in the past 12 months."

"This discrimination leads to poorer health outcomes, including mental health, with 39 per cent of LGBTQIA+ people experiencing depression in the past 12 months, compared to 6.2 per cent of the general population."

"Sexuality and gender identity aren't always visible, so creating a culture where everyone feels safe is important. We want to create a space where staff, consumers and families at Northern Health are respected and celebrated for who they are."

Featured image shows Northern Health staff marching at the Pride March in 2021.



Featured image shows Northern Health staff marching at the Pride March in 2021.

Quality and safety

NATIONAL STANDARDS OF CARE IN OUR HOSPITALS

All health services in Australia are required to follow Standards of Care for safety and quality. There are eight Standards set by The Australian Commission on Safety and Quality in Health Care (the Commission) that outline the minimum requirements to protect the public from harm, and to improve the quality of health care.

At Northern Health, we have a committee for each of the National Standards who oversee the work.



Clinical Governance Standard



Partnering with Consumers Standard



Comprehensive Care Standard



Communicating for Safety Standard



Preventing and Controlling Healthcare-Associated Infection Standard



Medication Safety Standard



Blood Management Standard



Recognising and Responding to Acute Deterioration Standard

Accreditation success

Every three years, health services across the country are required to complete an accreditation survey. Our National Standards Accreditation survey commenced in mid-May 2021 and was paused due to a COVID-19 lockdown, affecting interstate surveyors. The survey resumed in August 2021.

Northern Health met all the requirements of the National Standards. Surveyors were impressed with the knowledge of our clinical and non-clinical staff in keeping patients safe, as well as systems for staff safety.

Northern Health was acknowledged for its "best it can be care," with safety and personalised care for all patients, no matter their background, or how ill or well they were, at the front and centre of our minds.

Northern Health was also applauded for its management during COVID-19 outbreaks and keeping staff, patients and the community safe.

Incidents and adverse events

An adverse event is 'an incident in which unintended harm resulted to a person receiving health care'.

We require our staff to report adverse events as these tell us where to focus our efforts for improvment. We report on a wide range of events. Some examples include patient falls whilst in hospital, pressure injuries, hospital infections and difficulties coordinating care for our patients.

The Victorian Hospitals Incident Management System is the electronic incident reporting system for adverse events. The information gathered helps us to identify opportunities for quality improvement. The Department of Health receive these reports every three months.



How do adverse events affect our consumers?

Adverse events are measured by a standardised method called the Incident Severity Rating (ISR). The rating is determined by the level of harm and/or the care needed due to an incident.

- **ISR 1** Severe harm or death of the patient. This rating includes permanent loss of function needing advanced treatment and/or a higher level of specialised care for example, surgery or admission to the intensive care unit.
- **ISR 2** Moderate harm to the patient. This involves a temporary loss of function needing advanced treatment and/or a higher level of specialised care.
- **ISR 3** Mild harm to the patient. This also includes inconvenience to our patients, such as excessive waiting for care.
- **ISR 4** No harm to the patients. A "near miss" has the potential for harm.

The vast majority of reported incidents are ISR 3 and 4 with mild or no harm to patients. Each incident is a learning opportunity.

In the 2021-22 year, Northern Health had 16 ISR 1 events and 152 ISR 2 events.

Three of these serious events met Safer Care Victoria's criteria for mandatory reporting under strict statewide criteria. These criteria expanded for all Victorian Health services from July 2019. These adverse events are 'sentinel' events. They are specific types of serious incidents that are preventable and lead to serious harm or death of a patient. There are 11 categories in Victoria. All health services are required to report sentinel events to Safer Care Victoria and detailed investigations are undertaken.

At Northern Health, we are committed to using the learnings from our adverse events to reduce harm and improve the quality of care that we deliver to our patients.

IN 2021-22, WE HAVE IMPLEMENTED THE FOLLOWING IMPROVEMENTS AS A DIRECT RESULT OF ADVERSE EVENT ANALYSIS.

Reviewing a cluster of falls within the Emergency Department

It was identified that, during the period of January to June 2022, there were 25 falls within the Emergency Department. Most were classified as ISR 3 or 4 events, with either mild or no harm to the patient. In response to this, an aggregate review was completed. This type of analysis looks at the factors that may have caused the fall to see if there were common themes. Themes identified included:

- The majority of patients were over the age of 80
- · Most falls were not witnessed by staff

 More than half of the patients were identified as having a higher chance of falling before the fall.

With this data, the team has undertaken the following work:

- Team (buddy) nursing. This is a nursing model of care that enables junior nurses to be buddied with a senior nurse and plan care delivery for each patient allocated in their area, six patients to two nurses. This improves communication amongst the nursing team, assists with identifying high risk falls patients and ensuring adequate supervision for these patients.
- Allocation of meal breaks for nursing staff which ensures that nursing staff are able to visualise patients identified as high falls risk
- Patients who are identified as having a higher chance of falling are placed in the same area which is more easily visible by staff

Responding to the COVID-19 pandemic

Management of patients within the healthcare system was constantly changing during this period as the COVID-19 pandemic unfolded. Multiple reviews were conducted from incidents associated with COVID-19. These included patients who were not tested for COVID-19 appropriately, and potential delays in access to treatment. These incidents led to clearer procedures in COVID-19 patient management being developed. These changes to procedures included clearer responsibilities for healthcare staff on COVID-19 swabbing during presentation and admission, clearly documented guidelines on which patients require COVID-19 swabs and allocated responsibility for following up these results.

Anticoagulation medication

Anticoagulants are medicines that help prevent blood clots. They are given to patients who are at a high risk of getting blood clots, which can contribute to a patient's chances of developing serious conditions such as strokes and heart attacks.

Northern Health identified a trend associated with anticoagulation use and administration, with reviews identifying that there was a knowledge gap for our junior doctors regarding the medication.

One of our safety mechanisms is a review by our pharmacists. However, staff shortages can lead to discrepancies in medication plans and reviews.

Northern Health has developed a tailored education package for junior doctors on prescribing these medications and the associated risks, delivered via a podcast. It has also been mandated that this type of medication needs to be prescribed before 4 pm in order for more senior medical staff to support the junior doctors in writing up their medications.

INFECTION PREVENTION DATA FOR THE PERIOD 1 JULY 2021 – 30 JUNE 2022

Infection Prevention

Hand Hygiene

1 JULY 2021 - 30 JUNE 2022

12.805

moments of hand hygiene collected by auditors

89.7 per cent
were performed correctly exceeding
National target of 85 per cent

Staff influenza vaccination

IN 2022 NORTHERN HEALTH ACHIEVED

93.3 per cent

of health care workers immunised against the flu, exceeding required target of 92 per cent.

Blood Stream Infections - Staphylococcus aureus bacteraemia (SAB)

Blood stream infections have a serious effect on a patient's health and can even result in death. Northern Health's infection prevention team undertake regular surveillance and reporting for the statewide program Victorian Healthcare Associated Infection surveillance Coordinating centre (VICNISS).

Northern Health has consistently remained below the annual target of one per 10,000 occupied bed days (OBDs) since 2015.

Result against the target

SAB rate 2021-22 per 10,000 bed days

SAB rate
QUARTER 1
1 July to
30 September
0.2 met target

of <1

SAB rate
QUARTER 2
1 October to
31 December
0.8 met target
of <1

SAB rate
QUARTER 3
1 January to
31 March
0.4 met target
of <1

QUARTER 4
1 April to
30 June
0.8 met target
of <1

SAB rate

Central line infections (CLABSI)

Central lines are an intravenous device used for administering certain medications and large volumes of intravenous fluids. The position of the end of the central line in the body (close to the heart) leaves the patient vulnerable for blood stream infections. These factors make it particularly important to monitor for these infections and report our results to Victorian Healthcare Associated Infection surveillance Coordinating centre (VICNISS).

Result against the target

There were four CLABSIs identified in the 2021-22 reporting period.

CLABSI rate 2021-22 per 1000 devices

CLASBSI rate QUARTER 1

1 July to 30 September 0 target met Target is 0

CLASBSI rate
QUARTER 3

1 January to 31 March 0 target met Target is 0 CLASBSI rate QUARTER 2

1 October to 31 December 2.3 target not met Target is 0

CLASBSI rate
QUARTER 4

1 April to 30 June 3.6 target not met Target is 0

Northern Health takes any central line infection very seriously. All four cases were jointly reviewed by our Infectious Diseases Doctors and the Intensive Care Doctors to identify any preventable factors that may have contributed to the infections.

The following actions have been put in place to reduce the risk of further infections:

- Early replacement of a device if it is inserted in a place other than in the Intensive Care Unit
- Review of the existing procedures for central line insertion to ensure consistency and safety across all shifts at Northern Health.
- Improve documentation of the insertion and maintenance of all central lines. Use of an observer to document the insertion procedure.

MATERNITY

Maternity and paediatric services

Our maternity service aims, in partnership with women and families, to deliver outstanding health care to women and newborn babies. Our service continues to provide high quality birthing services to our growing community, with 3303 births in 2021-22 (3291 in 2020-21). Northern Health measures the safety and quality of its maternity services by submitting data to Safer Care Victoria each year, for comparison against other maternity services in Victoria. This benchmarking report, known as the Victorian Perinatal Services Performance Indicators (VPSPI), highlights opportunities for improvement activities throughout the Maternity sector, and for individual health services. Northern Health is required to report our performance against two indicators from the VPSPI 2020 -2021 report..

Low AGPAR score

The APGAR score is a score out of 10 used to measure how well the baby is soon after birth; we expect that babies born after 37 weeks gestation will be born in a healthy state and not require significant resuscitation. The score, measured at one and five minutes of life, demonstrates how well the newborn has transitioned after birth, based on colour, breathing, heart rate, muscle tone and reflexes. A "low" APGAR score is one that is less than seven at five minutes of age

.Result

Of all term (greater than 37 week's gestation) babies born at Northern Health in 2021-22, 1.3 per cent were born with an APGAR score less than 7 at five minutes of age (0.9% 2019-20).

Target

The 2020-21 VPSPI reported the "most favourable" quartile at 0.8 per cent and the "least favourable" quartile at 1.6 per cent. Northern Health is performing within the expected range and better than most other similar maternity services (Level 4 & 5 capability).

Actions and outcomes

- Regular monitoring of our performance by our divisional leaders at quality and risk meetings
- All babies who are born with APGAR's that are less than seven at five minutes are reviewed by the multidisciplinary team (team of different specialists) to identify areas for clinical and system improvement
- Neonatal resuscitation and fetal surveillance education is compulsory for all clinicians working in birthing suite

- Practical Obstetric Multi-Professional Training (PROMPT) is compulsory for all clinicians who work in birthing suite to prepare for effective management of obstetric emergencies
- Systems to identify high risk pregnancies in the antenatal period so that women receive appropriate care and planning for birth
- Shared decision making around the timing of birth in partnership with women and families when risk is identified

Severe Fetal Growth Restriction (FGR)

This indicator identifies the number of babies that were born severely growth restricted; that is, with a birthweight much less than the average baby, who is born at or after 40 weeks gestation. Very small babies are at higher risk for stillbirth and other poor outcomes. Recognising these babies is not always easy but we want to identify as many of these babies before their due date as possible so that we can reduce these risks.

Result

On reviewing Northern Health's performance in 2021-22, 17 per cent of all babies born who had a birthweight less than the third centile, were born after 40 weeks gestation. That means that we identified approximately four out of five babies who were very small and timed their birth accordingly.

Target

The state-wide average for both public and private hospitals in Victoria in 2020-21 was 20.8 per cent, with the "least favourable" quartile at 25 per cent and the "most favourable" quartile at 15 per cent. Northern Health is performing better than the expected range in 2020-21 and better than most other level five maternity services.

Actions and outcomes

Northern Health joined Safer Care Victoria's, "Safer baby collaborative and are implemented initiatives to improve fetal growth restriction identification and management. These include:

- Risk screening at every appointment of a woman's pregnancy care
- Consistency in measuring fetal growth and tracking growth from 24 weeks
- Education and training on fetal growth restriction and guidelines for staff

- Regular monitoring of our performance
- All babies who are born with a birthweight less than the third centile reviewed by our team to identify areas for improvement
- Shared decision making with women about timing of delivery when severe fetal growth restriction is detected

Maternity Services Highlight

Northern Health is now providing care to pregnant women at home through the Medical Obstetrics at Home (MOaH) program. This program helps women diagnosed with Hypertensive Disorders in Pregnancy and Hyperemesis Gravidarum stay well at home. MOaH has achieved a 50% reduction in admission and readmission rates for affected women by bridging the gap between hospital and home care.

Earlier this year, the EVE app turned one!

Eve was designed to enhance the pregnancy and parenting experience for mothers in the northern community by providing access to evidence-based information relating to pregnancy, birthing and early parenting.

When women book in to have their baby at Northern Health, they receive an SMS inviting them to download the app which is linked to their medical record.

Women receive weekly updates about how their body and baby is growing and articles are added that are relevant to their stage of pregnancy/parenting. They can also search for specific articles or topics they are interested in.

Since the launch of the app, Eve has had around 4,500

Local mum, Hope Lewis, is one of many women in our community who have benefited from using Eve during their pregnancy.

"I think Eve is the best thing ever invented as I didn't experience it with my other three children. It's great to be able to share experiences with other mums and answer questions through the forum. It creates an ongoing support with other mums in the community," she said.

PAEDIATRIC SERVICES

Northern Health has partnered with The Victorian Specialist Immunisation Services to provide a Paediatric Specialist Immunisation Service. It specialises in supporting paediatric patients with severe needle phobias and/or significant disabilities, with these children able to receive their COVID-19 vaccination under sedation. This service has also helped children catch up on childhood immunisations that they had not received previously, due to their phobias.

Below is some feedback from a mother who took her son along to the service:

"I just wanted to let you know that Henry attended the sedation clinic on Tuesday to have his vaccinations. It was such a positive experience for him and I'd like to thank you for assisting us to access the service."

"I'd also like to pass on my appreciation to Dr Shane and Nurse Olivia who went above and beyond to make sure Henry was comfortable and relaxed. Henry is still practicing his magic tricks and telling everyone about the doctor who taught him how to do them!"

Kids in the Community. Northern Health provided children aged 5-11 with vaccinations at the Plenty Ranges Arts and Convention Centre (PRACC) over the 21-22 summer period in preparation for returning to school.





IMPROVEMENT PROJECTS

Victorian Virtual Emergency Department

Northern Health's Virtual Emergency Department has expanded to become the Victorian Virtual Emergency Department (VVED).

Initially a pilot project born during the early days of the pandemic, the service has now expanded to service a wider region.

The team closely collaborates with Ambulance Victoria to ensure more ambulances are back on the road, whilst relieving pressure on Emergency Department (ED) staff. The results are extremely encouraging, with 87 per cent of people referred to the virtual service avoiding a trip in an ambulance to the hospital ED.

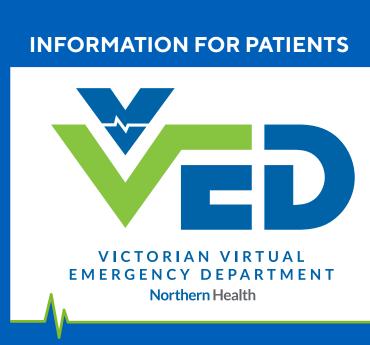
Dr Loren Sher, Director, Victorian Virtual Emergency Department, says this is an important landmark for the team. "We are so excited and looking forward to seeing many more patients. The current figures give us a sense of how far we've come. We've started as a small project, seeing around 15-25 patients a day, and the current numbers are phenomenal," she said.

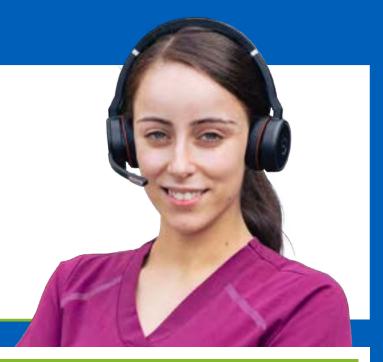
In 2021-22, approximately 60 per cent of patients using VVED were self-presenting patients, and about 40 per cent of patients were referred from Ambulance Victoria or other health services. More than half of the patients treated virtually had COVID-19.

"We enjoy helping patients receive emergency care from home. The feedback we get is generally amazing. Patients love the service and tell us they feel reassured by it. It saves them time in many instances. Patients are grateful for the service, as most of the time we can manage them at home, and provide advice and referrals. Most patients find it amazing that they don't have to get in the car and come here, especially at night or with children," Loren explains.



Ambulance Victoria's Amanda Thornton and Dr Loren Sher, Director, VVED.





The Victorian Virtual Emergency Department allows you to access care for non-life-threatening emergencies, 24 hours a day, 7 days a week. You will be connected to our doctors and nurses via a video call, and receive medical advice from the comfort of your home.



How do I register?

- You will need a phone, tablet or computer with a camera to use this service.
- To register, please use your phone camera and scan the QR code. You can also visit **vved.org.au**





What happens after I register?

- You will be linked directly to the Virtual Emergency Department waiting room and placed in the virtual triage queue.
- You will receive a text/email with the next steps.
- When it's your turn, the nurse will consult with you and advise the best course of action.



What kind of medical help can I get?

- In many cases, we will be able to help you virtually, and organise tests and prescriptions close to your home.
- We can provide self-care advice and a GP follow up.
- We may ask you to come into the Emergency Department.



Are interpreting services available to me?

- Interpreters are available, and you can request one during the registration process.
- · You can also complete the registration form in your preferred language.

For more information, please visit **vved.org.au**

Please use this service for non-life-threatening emergency conditions only. Some examples of life-threatening symptoms include: shortness of breath, severe chest pain, or weakness down one side of the body. If you think you may have a life-threatening condition, please contact **Triple Zero (000) urgently**.

Northern Health













QUOTES FOR VIRTUAL ED

Just wanted to say how wonderful and easy the Virtual ED program is, staff who assisted were fantastic and reassuring, thank you for the service, nice not to leave the house and to know we were in safe virtual hands. Thank you.

I want to commend two staff members I spoke to through Virtual Triage today, was even more surprised on arrival to see the two same staff members. Christie and the doctor, were both fantastic and had so much patience with my son. I commend you.

We used the Virtual ED triage. Thank you so much for providing this service, it is absolutely the best. Thank you, Dr. May Chang and Nurse Ellen, it saved heaps of time and we can stay home instead of going to the crowded ED waiting room.

Safe pregnancy journey for refugee women



One of the ways we help refugees is through a Group Pregnancy Care (GPC) program, known as the Happy Mothers Group. This group help Assyrian Chaldean pregnant refugee women and their families have a safe pregnancy, birth and parenting experience.

This model of care was introduced at Northern Health in 2017 in response to global research that identified refugee families as being vulnerable in terms of mother and child health outcomes.

The program provides advice on pregnancy,

- Helping women and families make decisions for their pregnancy care
- Practical preparation for labour and birth,
- Understanding how the hospital can help during pregnancy, labour and with a newborn baby.

Women receive advice on breastfeeding, postnatal care and recovery, early childhood behaviour, health, growth and development.

Group session are run at the same time as women attend their scheduled antenatal clinic appointment privately with a midwife and interpreter. Women can then return to the group. Pregnant women with toddlers can bring their children to the group to enjoy safe play space.

Northern Health midwives, Childbirth and Parent Educators, and Assyrian Chaldean interpreters, work with a Maternal and Child Health Nurse, and Parent Support Officer from Hume City Council, to provide the program.

Marie Treloar, Northern Health Childbirth and Parenting Educator Coordinator, said the program was extremely helpful for refugee women who may not speak English as their first language, and are not used to the Australian healthcare system.

"These women are used to completely different healthcare in their countries. They may have had previous babies in those systems so for them to navigate their way through our system is quite difficult," she said. "We have had close to 300 women come through the program. Women join us really early in their first trimester and stay with us for the whole nine months. They are welcome to come back with their babies and children up to four years of age."

"We ask the women, why do you keep coming back? One of them said the information provided was really helpful and the privacy and comfort they have in the group is great. The women don't feel awkward – the group is open for any questions and they feel safe."



End of Life Care

PALLIATIVE CARE: IT'S YOUR RIGHT

Timely access to palliative care has a number of benefits for people with a life-limiting illness, and supports them to continue doing the things that are most important to them, alongside their friends and family.

"Palliative care is available to people with a serious and life-limiting illness and their families, to assist in managing their symptoms, improve their quality of life and help them to live as well as possible, for as long as possible," said Dr Alison Giles, Medical Director of Palliative Care.

Alison says that palliative care clinicians and services have a deep understanding of the difficult situations people near the end of their life or with a life-limiting illness often face.

The Northern Palliative Care Unit (PCU) aims to support our patients and their families in a variety of ways.

Stuart is one patient who has needed several palliative care admissions in recent months, and it has been hard for him to be away from his home, With the support of Stuart's sister, Karen, the team was able to arrange for Penny to spend time with Stuart in PCU, where she won over the staff while she kept a close watch over her best friend.

Prior to being discharged, Stuart told the PCU team, "the treatment I've received here has been excellent. The staff are so compassionate, I've really enjoyed being able to have a laugh with them."

Karen agreed, stating, "you don't just treat the patient here, you're helping the entire family."





Residential aged care services

Ian Brand Residential Care is a 30 bed Aged Care facility that is staffed by both Registered and Enrolled Nurses. Residents can enjoy a warm and caring environment where they are treated with dignity and respect at all times. The home provides nursing care for a wide range of care needs depending on the resident's requirements.

Following accreditation via an unannounced visit by the Aged Care Quality and Safety commission in August 2022, Ian Brand Residential Care has been deemed accredited until 21 September 2025.

Happy Birthday Ian Brand Residential Care

On 24 November 2021, Ian Brand Residential Care (IBRC), located at our Bundoora Centre, marked 30 years of service.

"To be entrusted with the care of a family's loved one is a very special and rewarding part of being an aged care nurse," said Donna James, former Nurse Unit Manager for IBRC.

"When a resident is admitted into our care here at Ian Brand Residential Care, we become part of their journey. We not only provide the care and support to our residents, but we also provide the support to families who may be struggling with having their loved ones in care."

The residents at IBRC are joining in the celebrations. Here's what one family had to say:

"Mum has been a resident at IBRC for three years now and we, her family, couldn't be happier with the decision to move mum to Ian Brand.

The love, kindness, compassion and understanding shown to mum by all staff at IBRC has been amazing.

Mum is very happy residing at Ian Brand, and that has confirmed to us, we made the right decision.

COVID has been a very trying time for everyone and IBRC is to be commended for the way you have managed the situation from day one, always putting the safety and wellbeing of the residents first.

Thank you to all the staff for all that you do day in and day out, for not only our mum but all who reside at Ian Brand Residential Care.

Adding to the chorus of well-wishers was Dr Ian Brand himself.

"I was surprised to learn that 30 years have passed since we opened, but I am happy to say I have only heard good things about the care and attention all our residents receive," said Dr Brand.

"On the occasions I visited, I was impressed with the manners of the staff, and while I hope I never have to be a patient, I am certain I would be wonderfully looked after, as are all our residents."

Northern Health

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185 Cooper Street Epping Vic 3076 T. (03) 8405 8000

Broadmeadows Hospital

35 Johnstone Street Broadmeadows Vic 3047 T. (03) 8345 5000

Bundoora Centre

1231 Plenty Road Bundoora Vic 3083 T. (03) 9495 3100

Craigieburn Centre

274-304 Craigieburn Road Craigieburn Vic 3064 T. (03) 8338 3000

www.nh.org.au

