



MTHCS

Mallee Track Health
and Community Service



MALLEE TRACK HEALTH
AND COMMUNITY SERVICE

REPORT OF OPERATIONS

2019 - 2020

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WELCOME

Mallee Track Health and Community Service (MTHCS) is a multi-purpose service located in the heart of the Mallee in north-west Victoria.

We provide acute medical and urgent care, community and district nursing, residential aged care, early childhood education and care, including childcare and pre school, and a broad range of community and allied health services.

MTHCS services Ouyen, Murrayville, Underbool, Patchewollock, Sea Lake, Manangatang and surrounding districts.

We are proud to employ 220 staff across our catchment and we work closely with our communities to deliver services within our operating budget of \$14 million.

VISION

Leading our communities to excellence in integrated health and community services.

MISSION

To provide people of all ages with access to quality, person-centred care in the Mallee.

PHILOSOPHY

Equitable and timely access to innovative models of care, supported by a local workforce that is engaged with the community.

MANNER OF ESTABLISHMENT AND RESPONSIBLE MINISTER/S

MTHCS is one of seven Multi-Purpose Services established under Part 4A of the Health Services Act (HSA).

MTHCS was established in 1997 following the merger of Ouyen District Hospital with six other local entities.

In 2011 Sea Lake and District Hospital Service merged with MTHCS and joined the MPS model.

The Minister responsible for **MTHCS** is the Minister for Health.

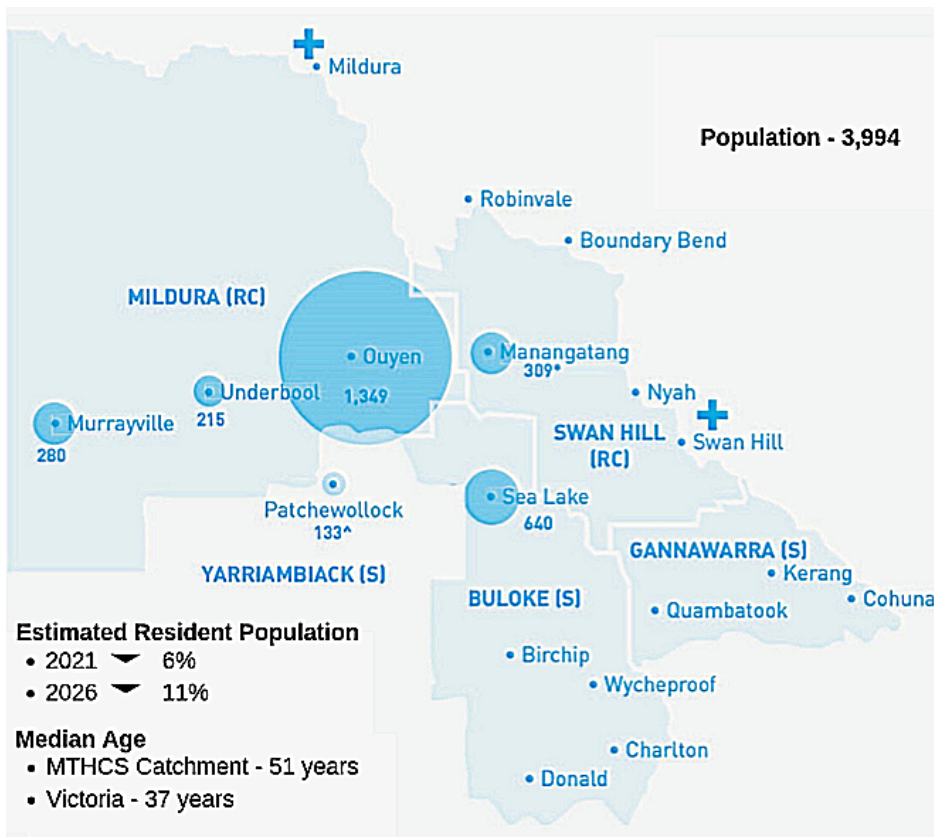
During the reporting period, the responsible Minister was Jenny Mikakos MP, Minister for Health Minister for Ambulance Services.

REPORT OF OPERATIONS

MTHCS reports on its annual performance via this Report of Operations. This report fulfills the statutory reporting requirements to government. In previous years, MTHCS has also produced a Quality Account Report to report on quality, risk management and performance improvement matters. The Quality Account Report was not produced for the 2019-20 reporting period due to the impact of the COVID-19 pandemic.

NATURE AND RANGE OF SERVICES

MTHCS provides services for all age groups, from early childhood education and care through to residential and at-home aged care.



The **MTHCS** catchment area is located in north-west Victoria, and stretches from Ouyen to the South Australian border (including Underbool and Murrayville), south to Patchewollock and south-east to Sea Lake.

Early childhood education and care is also provided in Manangatang; however, general health care is provided in Manangatang by Robinvale District Health Services.

The catchment spans an area of more than 18,000 square kilometres, with a population of approximately 4,000 people.

MTHCS is in the north-west area of the Murray Primary Health Network (PHN) and includes four local government areas (LGAs), as follows:

- Mildura Rural City (including the towns of Ouyen, Walpeup, Underbool and Murrayville).
- Buloke Shire (town of Sea Lake)
- Yarriambiack (town of Patchewollock)
- Swan Hill Rural City (town of Manangatang).

Mildura Base Hospital is the referral hospital for towns in the Mildura Rural City LGA and Swan Hill District Health is the referral hospital for towns in the Buloke Shire LGA.

ATTESTATIONS AND DECLARATIONS

RESPONSIBLE BODIES DECLARATION - SD 5.2.3 - SD 5.2.3


In accordance with the Financial Management Act 1994, I am pleased to present the report of operations for the Mallee Track Health and Community Service for the year ending 30 June 2020.



Mark Wilson
Board Chair
Mallee Track Health and Community Service
Ouyen
15 /10/2020

FINANCIAL MANAGEMENT COMPLIANCE ATTESTATION - SD 5.1.4

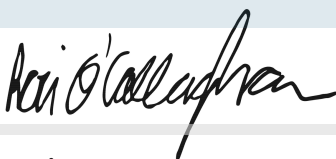
I, Mark Wilson, on behalf of the Responsible Body, certify that the Mallee Track Health and Community Service has no Material Compliance Deficiency with respect to the applicable Standing Directions under the Financial Management Act 1994 and Instructions.



Mark Wilson
Responsible Officer
Mallee Track Health and Community Service
15/10/2020

DATA INTEGRITY DECLARATION

I, Lois O'Callaghan, certify that Mallee Track Health and Community Service has put in place appropriate internal controls and processes to ensure that reported data accurately reflects actual performance. Mallee Track Health and Community Service has critically reviewed these controls and processes during the year.



Lois O'Callaghan
Accountable Officer
Mallee Track Health and Community Service
15/10/2020

CONFLICT OF INTEREST DECLARATION

I, Lois O'Callaghan, certify that Mallee Track Health and Community Service has put in place appropriate internal controls and processes to ensure that it has complied with the requirements of hospital circular 07/2017 Compliance reporting in health portfolio entities (Revised) and has implemented a 'Conflict of Interest' policy consistent with the minimum accountabilities required by the VPSC.

Declaration of private interest forms have been completed by all executive staff within Mallee Track Health and Community Service and members of the board, and all declared conflicts have been addressed and are being managed.

Conflict of interest is a standard agenda item for declaration and documenting at each executive board meeting.



Lois O'Callaghan
Accountable Officer
Mallee Track Health and Community Service
15/10/2020

INTEGRITY, FRAUD AND CORRUPTION DECLARATION

I, Lois O'Callaghan, certify that Mallee Track Health and Community Service has put in place appropriate internal controls and processes to ensure that Integrity, fraud and corruption risks have been reviewed and addressed at Mallee Track Health and Community Service during the year.



Lois O'Callaghan
Accountable Officer
Mallee Track Health and Community Service
15/10/2020

THE YEAR IN REVIEW

A REPORT BY THE CHIEF EXECUTIVE OFFICER AND BOARD CHAIR

Mallee Track Health and Community Service (MTHCS) has many achievements to report back to the community over the last reporting period.

As a health service we are immensely proud of the work of this health service – and the staff and volunteers who continue to connect us together.

It is a pleasure to summarise and present to the community our key achievements and highlights of the last year.

COVID - 19 PANDEMIC RESPONSE

The early part of the 2020 calendar year took us all by surprise with the onset of the COVID-19 pandemic.

The worldwide pandemic hit Australia in February, but was felt with full force in March.

As a result, we needed to redirect our time and energies into a local response which linked with the regional and state wide directives to prepare our system.

Protecting our community and those most vulnerable was our number one priority ahead of all other business. For the first time, we enacted a whole of health service Incident Control Group and engaged our local service partners of Police and Ambulance to assist and support.

A state of emergency was declared by the government with restrictions and innovation becoming the new way of doing business.

The workforce of this health service enacted support for our communities in new ways and kept coming to work to support our health care workforce to do what they needed to do.

The pandemic has created many challenges but has also presented opportunities to adapt the way in which we operate at a local level and as a system.

"Protecting our community and those most vulnerable was our number one priority ahead of all other business."

Some of these challenges have created new paths to achieve improved and embedded outcomes in Telehealth, working from home, reduced travel with meetings, instead, undertaken by online options, improvements to hand hygiene and infection control, extremely low rates of the usual winter flu due to extremely high uptake of the flu vaccine, improved partner relationships with public and private sector, and showing kindness and care to our staff and community.

BUILD OUR FUTURE

Over the reporting period we have begun to better align our core business with our strategic directions which were new to us the previous year.

We have continued to progress our involvement in review of the Multipurpose Service which was commissioned by the Australian Government. The review has not yet been provided to the sector and was delayed due to the Royal Commission into Aged Care.

The view of the Australian Government was that any potential changes to the MPS program should consider the findings of the Royal Commission. We continue to await the findings. The consultation process which has occurred to present the initial findings for validation has found the model to be sound – but in need of some changes to assure the viability of MPSs for the future.

We have strengthened our model for the delivery of medical services and now have a range of part-time and locum General Practitioners on regular rotations across our Ouyen and Sea Lake campuses.

We have also welcomed a Nurse Practitioner to join the Primary Care Team while we have spent significant time and resources improving the business model for our medical clinics.

Attracting skilled professional health care workers continues to challenge us. MTHCS has been part of work with the Primary Health Care Network and the Buloke Loddon Gannawarra health services to explore a potential model for Integrated Health Networks.

We have also commenced testing a 'network' partnership with the Royal Flying Doctor Service, Robinvale District Health and Sunraysia Community Health Service.

This primary care partnership is intended to support the development of a shared model of GPs willing to work in the Mallee. We hope this will help to address some of our key challenges.

"We have strengthened our model for the delivery of medical services and now have a range of part-time and locum General Practitioners."

Partnership and funding opportunities through the Primary Health Care Network have presented in the areas of Diabetes and mental health.

This has included expanding the service offering with a Diabetes Nurse Practitioner.

THE YEAR IN REVIEW

STRATEGIC DIRECTION #2

ENGAGE OUR COMMUNITY

The COVID-19 pandemic has placed real barriers between MTHCS and our volunteer workforce.

From early March, volunteers were subject to the same restrictions as the broader community – and to ensure the safety of all, we had to ask our volunteers to stay home under the restrictions as set down by the government.

Our health service has approximately 150 registered volunteers. This meant that our usual volunteer celebration and thankyou event was postponed indefinitely.

We took the opportunity to participate in the ‘Wave for Volunteers’ initiative – and during the course of National Volunteer Week we thanked them this way.

We have focussed our efforts on expanding our communications strategy to strengthen our print media and social media profile. This has allowed us to reach out to a broader cross section of the community.

In late 2019, we launched the Community Dementia Garden at the Ouyen Lake.

This was an initiative of staff member Vanessa Morrish who has a particular passion for enabling a Dementia Friendly Community.

We had approximately 100 people attend the launch of this initiative.

To support the expansion of potential funding opportunities for programs and capital, we have commenced finalising the creation of the MTHCS Foundation.

This Foundation will be a key initiative to capture funding outside our usual government funding channels and we look forward to formally launching this initiative in late 2020.

STRATEGIC DIRECTION #3

PURSUE ORGANISATIONAL EXCELLENCE

We have continued to progress the actions identified from the clinical governance review which was completed in the previous reporting period.

Key achievements have included the identification of organisational values and behaviours (a code of conduct), participation in a DHHS commissioned cultural review of MTHCS, participation in the People Matters Survey, improvements to our complaints management system and expansion of Telehealth options for appropriate service areas.

THE YEAR IN REVIEW

We have, again, maintained a strong quality management system. Accreditation processes were delayed or deferred state-wide and nationwide due to the COVID 19 pandemic and we look forward to these recommencing at the appropriate time.

We have made significant capital investments such as an electronic time and attendance system, significant fleet upgrades and purchase of a whole of health service phone system. These projects were achieved in the reporting period and are detailed in the service plan reporting of this report.

Additionally, a Financial Management Improvement Plan was developed and implemented to assure the financial position of MTHCS for the future.

We have engaged external assistance to focus our organisational thinking on how we align our valued staff to achieve strategy and person-centred care.

This work has had delays due to COVID-19 and we hope to recommence that work in the future reporting period.

We were excited to launch our new brand in August 2019 and are on target now to implement the look of the new brand across our health service.

STRATEGIC DIRECTION #4

DEVELOP OUR WORKFORCE

Our investment in our local trainee workforce continues to pay dividends. The main beneficiaries of this approach have been nursing, allied health and early childhood education and care.

We have trained three new personal care workers, five endorsed enrolled nurses, one Diploma of Early Years Education and Care and other staff supported with higher qualifications include additional Allied Health Assistant unit in Speech Therapy; Masters in Social Work and Bachelor of Early Years Education.

These investments will support service delivery across the whole organisation. Additionally, it will reduce our need for high cost locum and bank workforce in some specific service areas.

We have contracted or shared key positions in the organisation over the reporting period – particularly

accounting, corporate and people and culture.

This has enabled better support for our local workforce and improved system and processes in those functions of our health service.

A key piece of work was undertaken by DHHS in the form of a cultural review. The aim of this review was to capture opportunities for improvement in the culture of the organisation.

As with many large organisations, we are working on implementing improvements to the way we communicate, the frequency of communication together with an ongoing commitment to training of staff and managers.

An action plan for improvement has been identified and will be implemented in the new reporting period – pending the progress of COVID-19.

STRENGTHEN OUR RELATIONSHIPS

The use of My Emergency Dr in the Urgent Care Centres has provided opportunity for staff to expand their skills and capability in Telehealth. We have also participated in the Rural Urgent Care Nursing Capability Development program.

Three staff have been supported to complete their Rural and Isolated Practice Endorsed Registered Nurses (RIPERN) training which will support our capability in the Urgent Care Centres.

We have continued to work with the fourteen other public sector health services in the Loddon Mallee region and are finalising structures which will, in the future, better enable shared services for a whole raft of workforce challenges.

The Mildura Base Hospital will transition back to the public sector in September 2020. We have been part of a regional process to support the transition and hope that their return to the public sector will enable a range of initiatives to support smaller rural health services such as MTHCS.

The use of a communications agency has supported our ability to reach out to more members of the community. We have deliberately planned our communications to the community through planned messaging and methods.

This has had strong benefits and we have had a lot of positive community feedback about our transparent approach.

In closing, we would like to acknowledge the Board of Directors of the health service who give of their time and skills to the oversight of strategy and governance.

Additionally, we thank the communities that we serve - your trust in our ability to continue to meet your healthcare needs is an honour to lead.



LOIS O'CALLAGHAN
CHIEF EXECUTIVE OFFICER



MARK WILSON
BOARD CHAIR

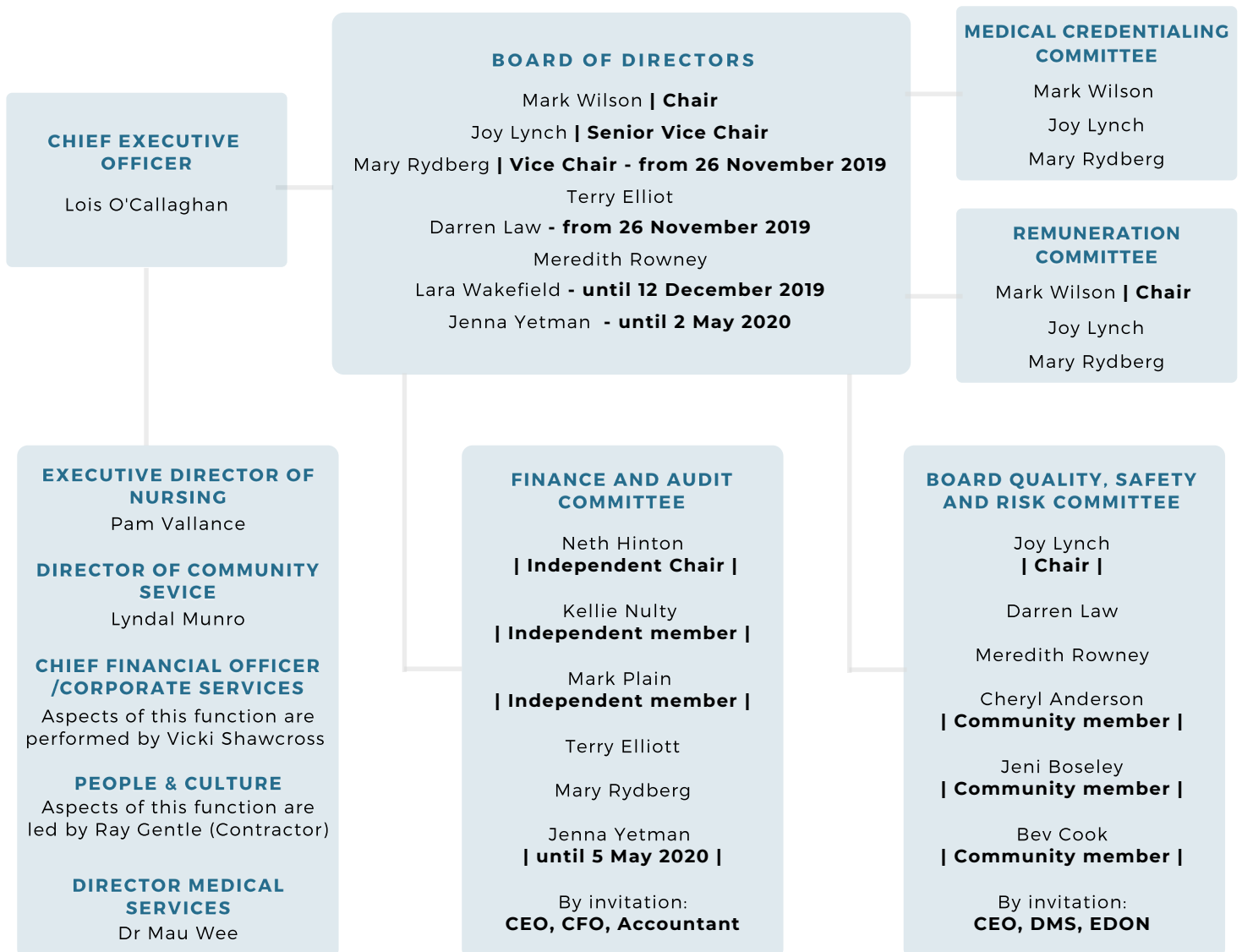
GOVERNANCE

As a Multi-Purpose Service, MTHCS is governed by a Board Of Directors, in line with S. 115E of the Health Services Act. Multi Purpose Services are subject to similar governance and performance policies as public hospitals.

The Multi-Purpose Service model nationwide was established in March 1991. The model is based on the principle that communities are able to pool funds from previously separate Commonwealth and State aged care and health programs to provide a flexible, coordinated and cost-effective framework for service provision, which aims to meet the aged care and health needs of local communities.

The provision of services is executed through a tripartite agreement between the Commonwealth, State and community which the MPS is present within.

ORGANISATIONAL STRUCTURE



BOARD OF DIRECTORS

The Board is appointed by the Governor-in-Council upon the recommendation of the Minister for Health.

Meetings are held a minimum of nine times during the financial year.

THE BOARD HAS A RESPONSIBILITY TO ENSURE THAT MTHCS PERFORMS ITS FUNCTIONS AS SET OUT IN SECTION 115E OF THE HEALTH SERVICES ACT, INCLUDING:

- To oversee and manage the service; and
- To ensure that the services provided by the service comply with the requirements of the Act, the objects of the service, its bylaws and any agreement entered into by the service.

The Board is regularly required to review its own performance as the basis for its own development and quality assurance.

BOARD MEMBERS 2019 - 20

Mark Wilson
| Chair |

Joy Lynch
| Senior Vice Chair |

Mary Rydberg
| Vice Chair |
- from 26 November 2019

Terry Elliot
| Board member |

Darren Law
| Board member |
- from 26 November 2019

Meredith Rowney
| Board member |

Lara Wakefield
| Board member |
- until 12 December 2019

Jenna Yetman
| Board member |
- until 5 May 2020

MANAGEMENT TEAM 2019 - 20

Lois O'Callaghan
| Chief Executive Officer |

Pam Vallance
**| Executive Director of
Nursing |**

Lyndal Munro
**| Director of Community Services
|**

**| Chief Financial Officer /
Corporate Services |**
Aspects of this function
performed by

Vicki Shawcross
(Robinvale District Health Service)

| People and Culture |
Aspects of this function
led by

Ray Gentle

Dr Mau Wee
| Director Medical Services |

CHIEF EXECUTIVE OFFICER:
LOIS O'CALLAGHAN

The Chief Executive Officer is responsible to the Board of Management for the efficient and effective management of the Mallee Track Health and Community Service.

Major responsibilities include:

- The development and implementation of operational and strategic planning.
- Maximising service efficiency and quality improvement.
- Minimising risk.

CHIEF FINANCE OFFICER /
CORPORATE SERVICES:
Aspects of this function performed by Vicki Shawcross (Robinvale District Health Services)

MTHCS contracts the services of Vicki Shawcross to enable the Chief Finance Officer role at Mallee Track.

This role is responsible for:

- Advising the CEO in directing, overseeing and evaluating all aspects of the functions related to Corporate services and finance.

The role guides:

- Staffing procedures.
- Setting objective and long-term goals for the corporate and finance function in the organisation.

EXECUTIVE DIRECTOR OF NURSING:
PAM VALLANCE

The Executive Director of Nursing is part of the MTHCS leadership team **and is responsible for:**

- Directing, overseeing and evaluating all nursing personnel;
- Guiding staffing procedures;
- Setting objectives and long-term goals for the nursing department.

PEOPLE AND CULTURE:
Aspects of this function are led by Ray Gentle (Contractor)

MTHCS has a contractor who provides advice and support to our on-the-ground People and Culture team.

This role leads and advises on culture practices, and provides expertise and support in the areas of:

- Performance Management,
- Employee relations,
- Employee Engagement,
- Diversity and Inclusion,
- Policy and Procedure development
- HR compliance.

DIRECTOR OF COMMUNITY SERVICES:
LYNDAL MUNRO

The Director of Community Services is part of the MTHCS leadership team **and is responsible for:**

- Directing, overseeing and evaluating all community services personnel;
- Guiding staffing procedures;
- Setting objective and long-term goals for the community services portfolio.

DIRECTOR MEDICAL SERVICES:
DR MAU WEE

The Director of Medical Services is a part of the MTHCS leadership team **and has a key role in:**

- Leading medical leadership;
- As appropriate, board reporting on medical and clinical matters;
- Have input into education and training for medical practitioners;
- Undertake clinical reviews and medico-legal advice and support.

CORPORATE SERVICES

MTHCS works proactively to manage the challenges presented by workforce shortages in the health sector.

To ensure our communities have access to the services they require, MTHCS provides a range of services through visiting health professionals, who generally travel to our Ouyen and/or Sea Lake campuses from either Mildura or Swan Hill.

Recruiting suitable health professionals to rural and remote areas is a challenge Australia-wide. Research indicates that health professionals who grew up in regional and rural areas are most likely to practice regionally / rurally once qualified.

This highlights the importance of enabling people in rural and remote areas to participate in health education and learning opportunities. MTHCS embraces this opportunity and provides scholarships and traineeships.

WORKFORCE DATA

HOSPITALS LABOUR CATEGORY	JUNE CURRENT MONTH FTE		AVERAGE MONTHLY FTE	
	2019	2020	2019	2020
NURSING	36.82	37.13	37.6	38.95
ADMINISTRATION & CLERICAL	10.79	9.53	9.35	9.18
MEDICAL SUPPORT	2.71	4.92	3.6	4.35
HOTEL & ALLIED SERVICES	30.80	34.08	31.9	34.02
MEDICAL OFFICERS	0	0	0	
HOSPITAL MEDICAL OFFICERS	0	0	0	
SESSIONAL CLINICIANS	0	0	0	
ANCILLARY STAFF (ALLIED HEALTH)	43.04	39.47	40.64	42.59

The FTE figures required in the table are those excluding overtime. These do not include contracted staff (e.g. Agency nurses, Fee-for Service Visiting Medical Officers) who are not regarded as employees for this purpose.



OUR VALUES & BEHAVIOURS



Value

ACCOUNTABILITY

We define our expectations and are accountable for our actions

BEHAVIOURS

- We keep our word and do what we say
- We own our actions and behaviours
- We look for solutions, not someone to blame
- We hold others to account for poor behaviour and attitudes

Value

EXCELLENCE

We set high standards and continually strive to improve them

BEHAVIOURS

- We continuously strive to improve by acting on feedback and being open to new ways of doing things
- We take initiative and have the courage to question what we do
- We are professional in every way, always

Value

COMPASSION

We treat everyone with care, respect and dignity

BEHAVIOURS

- We are person-centred and deliver a positive experience every time
- We demonstrate care, kindness and empathy
- We are flexible, compassionate and offer to help

Value

TEAMWORK

We work collaboratively and in the spirit of partnership

BEHAVIOURS

- We are responsive to each other's needs
- We seek opportunities to break down silos
- We respect others' values and opinions
- We treat others as we would like to be treated

Value

INTEGRITY

We endeavour to do the right thing in all circumstances, even if no-one is watching

BEHAVIOURS

- We are honest and reliable
- We protect and care for our reputation and build community trust
- We value diversity and are not judgmental
- We respect privacy and confidentiality

Value

TRANSPARENCY

We are open and honest and embrace positive change

BEHAVIOURS

- We base decisions on facts not rumours
- We share our knowledge and learning
- We embrace change and have a "can do" attitude
- We do not hide or ignore issues, but tackle them directly

These values and behaviours were developed by employees from across MTHCS in 2019 over a series of workshops and interviews.

COMMUNICATING WITH OUR WORKFORCE

MONTHLY INTERNAL STAFF NEWSLETTER

Staff provide information on programs and services for the monthly newsletter including a regular staff profile. The newsletter is a vehicle for sharing achievements and information and improving communication across the health service.

A survey of staff undertaken in June 2020 found more than 78% of respondents read the staff newsletter every month, and 95% of respondents preferred receiving the newsletter via email.

Most reported enjoying photos and stories about staff members - 47% of respondents ranked this as their top priority. 33% said they would like the staff newsletter to include more content on wellbeing.

78%

**OF RESPONDENTS
READ THE STAFF NEWSLETTER
EVERY MONTH**

95%

**OF RESPONDENTS
PREFERRED RECEIVING THE
NEWSLETTER VIA EMAIL**

THROUGHOUT THE COVID-19 RESPONSE

Strong internal communication was a critical component of the MTHCS COVID-19 response, which commenced in March 2020 and continued into the 2020-21 reporting period. Rapidly changing restrictions had wide-ranging impacts on our staff members, the organisation and our communities.

Keeping our staff members accurately informed was treated as a top priority. Email updates were sent to all staff following each meeting of the MTHCS Incident Control Group, and more regularly if required.

In addition to this, MTHCS also utilised social media channels and print media to reinforce the information given to staff (where appropriate) and keep local community members informed.

The Victorian Department of Health and Human Services website was always treated as the single point of truth throughout the COVID-19 response.

STRATEGIC PLAN

2018 - 2023



ENGAGE OUR COMMUNITY

- 1 Build community engagement through strong community and volunteer networks
- 2 Prepare and implement a health literacy strategy for community members

BUILD OUR FUTURE

- 1 Develop and grow a diverse service delivery portfolio that provides 'cradle to grave' services
- 2 Identify priority service gaps through a needs assessment and develop a service plan to address gaps
- 3 Develop models of care to enhance support for the mental health needs of the community

PURSUE ORGANISATIONAL EXCELLENCE

- 1 Strengthen governance and financial arrangements of the organisation
- 2 Develop and articulate Clinical Governance models that ensure accountability
- 3 Upskill management and board members through professional development activities

DEVELOP OUR WORKFORCE

- 1 Maintain and enhance a 'grow your own' approach to workforce recruitment and retention
- 2 Engage staff in professional development to enhance confidence and capability of the existing workforce

STRENGTHEN OUR RELATIONSHIPS

- 1 Initiate and expand innovative models of care to deliver quality services
- 2 Develop and maintain a communications strategy to engage with staff, critical friends, funders and community regarding MTHCS services and programs.

CLINICAL SERVICES

MTHCS provides acute, urgent and palliative care, residential and in-home aged care to the people of the Mallee Track communities in both Ouyen and Sea Lake.

CLINICAL SERVICES

Access to GPs and mental health services are a priority for community members (based on the Strategic Plan community survey.) Lack of access to dental and oral health services ranked in the top five responses for four of the seven communities in the catchment.

Best practice clinical care is provided to acute and urgent care patients by appropriately skilled and qualified staff.

Patients requiring complex care are referred to a higher-level service (ie. Mildura Base Hospital, Swan Hill District Health or Bendigo Health).

URGENT CARE

MTHCS has 24-hour Urgent Care Centres at Sea Lake and Ouyen. Registered nurses are available at all times, as well as triage from the on-call GP.

A Telehealth model to support our Urgent Care Centre has also been introduced - My Emergency Doctor.

MEDICAL CLINICS

Our medical services model operates with local part-time GPs, visiting locum GPs and a Nurse Practitioner to provide continual coverage for the region.

The health service provides management of both Ouyen and Sea Lake clinics as part of planning to ensure the stability of local medical clinics.

NURSE PRACTITIONER (NP) – UNDERBOOL AND MURRAYVILLE

MTHCS provides a host environment for NP Di Thornton, from mobile health service Mallee Border Health. The District Nursing program also supports these communities.

Mallee Border Health also coordinates regular visits by GPs and other allied health professionals.

RURAL WOMEN'S WELLBEING CLINIC

MTHCS has partnered with the Royal Flying Doctor Service to operate the Rural Women's GP Program in Ouyen.

Dr Jane Russell is an accredited shared care doctor with the Royal Women's Hospital and has worked with the RFDS for the past 17 years.

TELEHEALTH

Locum doctors and Telehealth will become the new normal as the nationwide shortage of rural doctors and nurses shows no sign of easing.

DENTAL SERVICES

A public dental service provided by Tankard Dental is available* from the MTHCS campus in Ouyen, while other communities are provided with a mobile dental service by the Royal Flying Doctor Service.

INDIVIDUALS TREATED	2018 / 2019	2019 / 2020
CHILD	166	141
ADULT	660	596
TOTAL	826	737
PRIORITY ACCESS CLIENTS	20%	21.3%
ABORIGINAL AND TORRES STRAIT ISLANDER	29	19
MENTAL HEALTH CLIENT	1	2
CHILD OR YOUNG PERSON IN RESIDENTIAL CARE	2	2
INTELLECTUAL DISABILITY CLIENT	3	12
YOUTH JUSTICE IN CUSTODIAL CARE	0	1

The total DWAU achieved during 19/20 was 1410. This is slightly lower than the full year target of 1530 due to the impact of COVID-19 restrictions. Prior to the impact of the pandemic, MTHCS was on track to reach the funded total.

PRIMARY CARE

MTHCS delivers a large portfolio of allied health and community services from district nursing and allied health to management of early childhood education and care and Neighbourhood Houses.

Some services are on a fee-for-service basis and others are partially subsidised.

PRIMARY HEALTH SERVICES INCLUDE:

- Occupational Therapy
- Diabetes management and education
- Physiotherapy
- Hydrotherapy
- Falls prevention program
- Well Women's Clinic
- District nursing
- Social Support individualised programs
- Meet and Eat social groups
- Planned Activity Groups (PAG)
- Exercise programs (tai chi)
- Inpatient respite care
- Carer support groups
- Dementia-friendly community awareness and education
- Speech therapy (partnership with RDHS and RFDS)
- Community transport
- Podiatry

NEIGHBOURHOOD HOUSES

- Ouyen
- Sea Lake
- Murrayville

AUXILIARIES

- Ouyen Farmers' Festival
- MTHCS Ladies' Auxiliary
- Sea Lake Ladies' Auxiliary

STRENGTHENING HOSPITAL RESPONSES TO FAMILY VIOLENCE (SHRFV)

The SHRFV program is being rolled out in North West Victoria. MTHCS has developed a position statement and staff have undertaken training on how to respond to family violence incidents.

Education and awareness for staff themselves is also a key component.

LOCAL DRUG ACTION TEAM (LDAT)

The Australian Government and Alcohol and Drug Foundation has announced a Local Drug Action Team for the southern Mallee region to help prevent alcohol and other drug harms at a grass-roots level.

MTHCS is the lead organisation for Ouyen and Murrayville. Sea Lake (LDAT) is in partnership with Wycheproof Neighbourhood House.

COMMUNITY SERVICES

MTHCS Community services are available to all members of the community.

SOME ARE ON A FEE-FOR-SERVICE BASIS AND OTHERS ARE PARTIALLY SUBSIDISED. FUNDING FOR COMMUNITY SERVICES INCLUDES:

- MPS funding
- Commonwealth Home Support Program
- Home and Community Care Program for Young People (HACCPYP)
- Primary Health Care Network (PHN)
- Commonwealth Medicare Benefits Scheme
- Department of Health & Human Services
- Department of Veterans Affairs
- Department of Education and Training
- Child Care Subsidy
- State and Commonwealth Department of Education and Training

EARLY YEARS MANAGEMENT

MTHCS receives funding from the Department of Education and Training for early childhood education and care programs for five kindergarten services.

The Victorian Early Years Learning and Development Framework (VEYLDF) provides an evidence-based framework for professionals working with children from birth to eight years to advance children's learning and development.



QUALITY AND RISK MANAGEMENT

Ongoing improvements in safety and quality in patient care is a key priority across the organisation.

QUALITY

The MTHCS Quality Management System (QMS) fosters a culture of continuous quality improvement that is embedded in everyday practice and supports the meaningful participation of people in giving feedback about the services they require, and the quality of services they receive.

MTHCS is committed to maintaining our QMS which is based on ISO 9001:2015. We adhere to the National Safety and Quality Health Service Standards (NSQHSS) and are currently certified in all ten NSQHSS and the six NSQHSS for Dental Services. The QMS functions to ensure all MTHCS's management system processes are continually reviewed and monitored to identify opportunities for continuous quality improvement.

Every year, the health service has an onsite visit by qualified assessors for assessment against ISO 9001 and NSQHSS.

MTHCS was assessed against the NSQHS in March 2020. Due to COVID-19, finalising the process has been delayed. Interim accreditation has been provided until July 2021.

CONSUMER FEEDBACK

MTHCS seeks consumer feedback through surveys (internal and external), direct contact and our complaints and feedback process which was reviewed and strengthened in the reporting period. A website and social media pages are maintained and local media is utilised on a regular basis to publish Community Updates that contain information on initiatives, general health issues and GP schedules for each month.

During the reporting period, MTHCS reviewed and updated its Consumer Participation Framework.

The CEO presented this framework at the Safer Care Victoria Conference in November 2019 as a model of innovative engagement.

CONSUMER ADVOCATE

Following the retirement of Consumer Advocate Grant Doxey during the reporting period, MTHCS Community and Social Support Manager Nadiene Lynch took on the role of Complaints Manager.

Improvements to MTHCS made as a result of complaints during 19/20 included:

- Expanding the range of meals provided by Meals on Wheels
- Commencing a review of the meals offered at MTHCS by a dietician from Robinvale District Health Services (ongoing)
- Providing documentation training for nursing staff by the Director of Medical Services
- Liaising with Mildura Base Hospital regarding the improvement of discharge processes
- Introducing the aged care music channel Silver Memories in the Dementia Care Wing in Ouyen
- Improving the readability and accessibility of the MTHCS website for consumers/service users
- Improving safety in Early Years outdoor spaces, which has been reflected through procedures
- Reviewing the Instrument of Delegation to reflect current practice
- Improving staff health and wellbeing by putting outside seating in place

BOARD QUALITY, SAFETY AND RISK COMMITTEE

This committee provides an ongoing forum for review, governance and recommendation.

BREAST-FEEDING-FRIENDLY WORKPLACE ACCREDITATION

MTHCS has again obtained accreditation as a Breast-Feeding-Friendly workplace and has continued to invest in the workforce with a focus on training and development in all state and national Quality Standards.

PERFORMANCE

FINANCIAL SUMMARY

FINANCIAL INFORMATION

	2020 \$000	2019 \$000	2018 \$000	2017 \$000	2016 \$000
OPERATING RESULT	348	(788)	240	646	208
TOTAL REVENUE	17,445	16,184	15,927	17,224	15,359
TOTAL EXPENSES	19,412	18,441	17,660	16,232	16,999
NET RESULT FROM TRANSACTIONS	(1,967)	(2,257)	(1,733)	991	(1,640)
TOTAL OTHER ECONOMIC FLOWS	(15)	(3)	99	(56)	0
NET RESULTS	(1,982)	(2,260)	(1,634)	936	(1,640)
TOTAL ASSETS	44,455	46,339	39,933	38,990	37,004
TOTAL LIABILITIES	9,923	9,824	9,024	8,662	7,612
NET ASSETS / TOTAL EQUITY	34,532	36,514	30,909	30,328	29,932

RECONCILIATION OF NET RESULT FROM TRANSACTIONS AND OPERATING RESULT

	2019-20 \$000
NET OPERATING RESULT	348
CAPITAL PURPOSE INCOME	410
COVID 19 STATE SUPPLY ARRANGEMENTS	8
ASSETS PROVIDED FREE OF CHARGE	NA
ASSETS RECEIVED FREE OF CHARGE	NA
EXPENDITURE FOR CAPITAL PURPOSE	(164)
DEPRECIATION AND AMORTISATION	(2,569)
IMPAIRMENT OF NON FINANCIAL ASSETS	NA
FINANCE COSTS (OTHER)	NA
NET RESULT FROM TRANSACTIONS	(1,967)

FINANCIAL SUSTAINABILITY KEY PERFORMANCE INDICATORS

	TARGET	2019-20 RESULT
OPERATING RESULT (\$M)	(\$0.33)	\$0.35
TRADE CREDITORS	60 DAYS	31 DAYS
PATIENT FEE DEBTORS	60 DAYS	10 DAYS
ADJUSTED CURRENT ASSET RATIO	0.7	ACHIEVED
NUMBER OF DAYS CASH AVAILABLE	14 DAYS	54 DAYS

SERVICE PLAN

KEY ACHIEVEMENTS

STRATEGIC DIRECTION	ACTION	DELIVERABLE	OUTCOME
<p>Pandemic Response - management and implementation</p>	<p>Oversight the management of the COVID-19 pandemic plan response for MTHCS</p>	<p>COVID-19 pandemic response is in line with DHHS requirements and our own health service needs</p>	<p>Ongoing - Systems, policies, procedures and approaches in responding to the COVID-19 pandemic have been developed and implemented.</p> <p>Maintenance of effort since March 2019 will be ongoing for the duration of the pandemic. There will be ongoing adjustment of service plan and usual 'business' to balance pandemic response and achieving the strategic plan.</p> <p>If appropriate, sole focus of the organisation will be on pandemic response to ensure community and health service safety.</p>
<p>Strategic Direction 1: Build Our Future</p> <p>1. Develop and grow a diverse service delivery portfolio that provides cradle to grave services.</p> <p>2. Identify priority service gaps through a needs assessment and develop a service plan to address gaps.</p> <p>3. Develop models of care to enhance support for the mental health needs of the community.</p>	<p>1. Needs analysis to identify service gaps and priorities (growth areas) based on statistical data, community perspectives and service environment.</p> <p>2. Service planning will enable growth of existing services and development of new service lines, e.g. increase medical services, increased aged care services, new disability services and home care services - depending on need identified.</p> <p>3. New PHN commissioning models will enable an integrated approach to a stepped model of care for mental health that will provide opportunities to partner with mental health service providers to ensure a coordinated and supported approach that includes local touch points, improve uptake of services and greater awareness of service availability.</p>	<p>Engage external assistance to undertake further work on the needs analysis - according to statistical data, community perspectives and service environment.</p> <p>Develop new service lines which meet service gaps and are a good fit for business.</p>	<p>Complete: Undertake and implement review of District Nursing role at Underbool and Murrayville. Outreach worker role developed and commenced.</p> <p>Complete: Explore business opportunities with the embedding of the NDIS.</p> <p>Ongoing: Explore and expand business opportunities in relation to CMBS billing for medical clinics and allied health.</p>

KEY ACHIEVEMENTS CONTINUED

STRATEGIC DIRECTION	ACTION	DELIVERABLE	OUTCOME
<p>Strategic Direction 1: Build Our Future</p>		<p>Engage with the PHN and other appropriate service partners to identify stepped model of care appropriate to the catchment:</p> <ul style="list-style-type: none"> • Chronic disease <ul style="list-style-type: none"> - diabetes • Mental Health • Primary Health Care • Early Years OT <p>Identify models of care in primary health care that are suitable for the Mallee Track catchment.</p> <p>Define scope of practice for the organisation and staff within the models of care.</p> <p>Engage in partnering arrangements which enable uptake of services for the local community - place based models of care.</p> <p>Potential partners include:</p> <ul style="list-style-type: none"> • Robinvale District Health Services • Sunraysia Community Health Service • Northern District Community Health • Mildura Base Hospital • Swan Hill District Health • Royal Flying Doctor Service 	<p>Complete: Application for funding to the PHN to support expansion of mental health service model of care - awaiting outcome</p> <p>Complete: Funding secured to continue Chronic Disease management in Diabetes Develop integrated models of care.</p> <p>Ongoing: Review of model of care for Medical Services.</p> <p>Ongoing: Continued work to define scope of practice for the organisation through the engagement of an organisational psychologist. Scope of services documents developed.</p> <p>Ongoing: Continue to progress network model with RFDS, SCHS and RDHS.</p> <p>Ongoing: Commenced Regional Partnership discussions in line with DHHS required framework with Mildura Base Hospital and Robinvale District Health Services.</p> <p>Ongoing: Support for continence clinics ongoing through SCHS. Changed focus in 2020 due to low uptake of clinics.</p> <p>Ongoing: Involvement in the Loddon Mallee Health Network - collaboration of all public sector health services in the Loddon Mallee region.</p> <p>Ongoing: Partnership RFDS & RDHS speech therapy project. Delegated scope of practice & Telehealth model of care.</p>

KEY ACHIEVEMENTS CONTINUED

STRATEGIC DIRECTION	ACTION	DELIVERABLE	OUTCOME
<p>Strategic Direction 1: Build Our Future</p>		<p>Strengthen the delivery of medical services through recruitment and retention of an appropriate workforce in medical and primary health care.</p> <p>Continue to develop appropriate business model in preparation for full scheme NDIS in the Mallee region.</p> <p>Develop implementation plan for Montessori in Aged Care across bed based and community services.</p> <p>Implement school readiness funding to improve outcomes in Early Childhood Education and Care.</p> <p>Commence funded 3 year old kinder in Sea Lake.</p>	<p>Complete: A regular bank of part time and locum GPs identified and secured to support delivery of medical services across the catchment.</p> <p>Commenced transition to regular part-time GP workforce arrangements to respond to market conditions.</p> <p>Reviewed the current available GP workforce to plan for sector preferences and restructuring available locum GP workforce.</p> <p>Commenced the delivery of a Nurse Practitioner model to support medical services delivery.</p> <p>Complete: Business plan to identify appropriate business model for participation in the NDIS. Business model indicates the best fit for the organisation is to remain as a fee for service provider for the time being.</p> <p>Developed Service information for NDIS participants and service agreement. Providing services to NDIS participants. Continue to be an unregistered provider.</p> <p>Deferred due to COVID-19</p> <p>Complete: School readiness funding received. DET approved planning processes undertaken. Key services engaged in the initial stages include allied health and workforce training and development</p> <p>10 Hours of funded 3 year old kinder offered to Sea Lake families in 2020.</p>

KEY ACHIEVEMENTS CONTINUED

STRATEGIC DIRECTION	ACTION	DELIVERABLE	OUTCOME
<p>Strategic Direction 2: Engage Our Community</p> <p>1. Build community engagement through strong community and volunteer networks.</p> <p>2. Prepare and implement a health literacy strategy for community members.</p>	<p>1. Volunteer networks strengthened through engagement of micro-volunteering.</p> <p>2. New community members engaged in local activities that improve wellbeing and access to other MTHCS services.</p> <p>3. Increased health literacy in the community.</p>	<p>Celebrate the work of volunteers at an annual thankyou event.</p> <p>Maintain current volunteer workforce within the catchment.</p> <p>Design flexible micro-volunteering roles in the organisation that add value to the business and improve satisfaction levels of volunteers.</p> <p>Define scope of practice for volunteers within the organisation.</p> <p>Undertake at least 1 community event with a focus on improving health literacy on topics relevance to the catchment.</p> <p>Host training and information sessions (own and with other service partners of interest) for staff and community which will improve the health literacy of our population.</p> <p>Maintain and professionalise social media profile as a platform to engage and inform the community on topics of health literacy and early childhood development.</p> <p>Undertake at least 1 community education session on Aged Care – costs and preparation for entry to residential aged care.</p> <p>Support the work of the respective auxiliaries and volunteer groups of MTHCS who fundraise to support program areas</p> <ul style="list-style-type: none"> • Mallee Track Ladies Auxiliary • Ouyen Farmers Festival • Sea Lake Ladies Auxiliary • Respective Kindergarten Parent Advisory Groups <p>Establish Friends of Mallee Track (foundation) to harness community goodwill and funding on projects of a priority and shared interest.</p>	<p>Complete: Virtual annual volunteer celebration held due to COVID-19.</p> <p>Complete: Over the course of 19/20 reporting period we held a number of volunteer education sessions and feedback meetings to develop service improvements, such as transporting people safely, regular volunteer newsletters and volunteer vests / uniforms introduced.</p> <p>Complete: Women's health night September 2019.</p> <p>Diabetes week event with 52 people attending. Cardiac Health education at Speed field days.</p> <p>Complete: Engaged communications assistance to actively plan and implement health literacy messaging through the MTHCS facebook page and other communication mediums.</p> <p>Complete: Community Education Session held in conjunction with opening of the Dementia Garden at Ouyen Lake.</p> <p>Ongoing: Drafting of deeds associated with the entity currently under instruction. Plan for milestones to establish entity in place.</p>

KEY ACHIEVEMENTS CONTINUED

STRATEGIC DIRECTION	ACTION	DELIVERABLE	OUTCOME
<p>Strategic Direction 3: Pursue Organizational Excellence</p> <p>1. Strengthen governance and financial arrangements of the organisation.</p> <p>2. Develop and articulate Clinical Governance models that ensure accountability.</p> <p>3. Upskill management and board members through professional development activities.</p>	<p>1. Review and streamline organisational policies and procedures.</p> <p>2. Prepare a capital master plan for: a) refurbishment of existing assets, b) new build requirements and feasibility</p> <p>3. Meet and exceed clinical accreditation standards.</p> <p>4. Undertake and implement a clinical Governance Review.</p> <p>5. Undertake and implement Board evaluation and professional development.</p>	<p>Engage external assistance (Rosie McMahon, Organisational Psychologist) to identify organisational plan to deliver outcomes against the strategic directions.</p> <p>Ensure sound financial management of the health service.</p> <p>Undertake a fabric survey of all capital assets (including residential accommodation) of the health service.</p> <p>Identify 10 year plan for maintenance of current capital.</p> <p>Commence and document a 15 year capital masterplan for bed based and community services. Plan to consider residential accommodation to support workforce requirements.</p> <p>Engage with Murrayville and Patchewollock communities to confirm ongoing ownership arrangements of capital assets where Mallee Track operates services but these assets are still owned by a separate governing entity.</p> <p>Work with LMRHA to finalise Unified Communications project. Identify business continuity issues with telephony system and confirm requirements of the organisation to minimise business continuity risks (short, medium and long term).</p>	<p>Ongoing: External assistance engaged. Process of organisational plan to deliver outcomes against strategic directions identified. Have delivered 7 of the 10 steps required. Further 3 steps still to be undertaken.</p> <p>Complete: Implemented a financial management improvement plan to anticipate any financial shortfalls in the short and long term.</p> <p>Fabric Survey confirmed for 20/21 reporting period.</p> <p>Complete: Fleet replacement program underway. Computer replacement program underway. Capital budget developed and implemented for 20/21 reporting period.</p> <p>Deferred due to COVID-19</p> <p>Complete: Patchewollock community have decided to retain the former bush nursing centre asset and to take active management. Currently liaising with Murrayville community about the former bush nursing hospital building.</p> <p>Complete: New phone system installed at Ouyen and other sites where upgrade needed.</p>

KEY ACHIEVEMENTS CONTINUED

STRATEGIC DIRECTION	ACTION	DELIVERABLE	OUTCOME
<p>Strategic Direction 3: Pursue Organizational Excellence</p>		<p>Prepare for implementation of Aged Care Standards across bed based and community services which will come into effect July 2019.</p> <p>Achieve tri-ennial accreditation for ISO and NSQHS.</p> <p>Maintain effort with National Quality Standards for all Early Childhood Education and Care services.</p> <p>Prepare and commence implementation of action plan for clinical governance review.</p> <p>Undertake board evaluation. Commence implementation of recommendations from board evaluation.</p> <p>Support board members to attend training and development relevant to their role and the business of the health service.</p> <p>Commission independent reviews of programs or service areas of the health service as needed.</p>	<p>Complete: Self - Assessment against the standards completed. Action plan in place Diversity framework developed.</p> <p>Complete: All Early childhood services governed by the National Quality Standards have maintained their certification.</p> <p>Complete: Action plan in response to clinical governance review in place and under implementation.</p> <p>Deferred due to COVID-19 (planned for October 2020)</p> <p>Complete:</p> <p>Meals review currently being undertaken with support from RDHS dietician.</p> <p>Review of administration function in childcare complete.</p> <p>Review of maintenance function complete.</p> <p>Telehealth system strengthened throughout services.</p> <p>Review of records system and action plan in place.</p>

KEY ACHIEVEMENTS CONTINUED

STRATEGIC DIRECTION	ACTION	DELIVERABLE	OUTCOME
<p>Strategic Direction 4:</p> <p>Develop Our Workforce</p> <p>1. Maintain and enhance a 'grow your own' approach to workforce recruitment and retention.</p> <p>2. Engage staff in professional development to enhance confidence and capability of the existing workforce.</p>	<p>1. Develop and implement a workforce plan to:</p> <p>a) Increase clinical capability of staff (upskilling).</p> <p>b) Increase number of local staff / services provided.</p> <p>2. Greater transparency of career pathways and education/training opportunities.</p> <p>3. Increased number of traineeships available.</p> <p>4. Increased sustainability of the local workforce.</p> <p>5. Annual participation in the Victorian Public Sector Commission 'People Matter Survey' to inform MTHCS of staff engagement and job satisfaction.</p>	<p>Maintain contractor to assist with development of People and Culture team.</p> <p>Identify, and where appropriate implement, expanded shared services arrangements with RDHS and other neighbouring or regional health services.</p> <p>Maintain shared service of CFO role with RDHS.</p> <p>Implement KRONOS – time and attendance system across whole of organisation – multiple sites.</p> <p>As part of clinical governance review, identify training and development plan for medical and nursing to increase clinical confidence and competence.</p> <p>Commence involvement in Rural Urgent Care Nursing Capability Development Program.</p> <p>Ensure every staff member has an annual review which details their individual training plan.</p> <p>Offer traineeships and education upskilling in programs and service areas of the organisation where there are significant workforce pressures.</p> <p>Promote the uptake of the People Matters Survey for 2019.</p> <p>Consider, and if appropriate, implement a further cultural review of the organisation with a focus on staff satisfaction and identifying of organisational values, conduct and behaviour.</p>	<p>Complete: Contracting arrangement in place.</p> <p>Complete: Contracted Director of Corporate Services role with RDHS in place. Shared service with provision of GP to the aged care facility at Manangatang.</p> <p>Complete: Contracting arrangements in place with RDHS and AASB Accounting.</p> <p>Complete: Implemented November 2019.</p> <p>Implemented use of My Emergency Doctor at Urgent Care Centres in Ouyen and Sea Lake.</p> <p>Ongoing: Involvement commenced – on hold due to COVID-19.</p> <p>Complete: Annual appraisals for all staff under completion – delayed due to COVID-19. Completed education session on how to conduct appraisals with Managers.</p> <p>Complete: 3 trainees personal Care Workers completed training. 5 trainees in Nursing completed training. Trainee positions continue to be offered in program areas where there are known workforce pressures.</p> <p>Complete: Participated in People Matters Survey 2019.</p> <p>DHHS undertook cultural review of MTHCS. Key themes and responses to the recommended actions reported and actioned. Actions identified to implement improvements but delayed due to COVID-19.</p> <p>Ongoing engagement of EAP provider, Converge International.</p>

KEY ACHIEVEMENTS CONTINUED

STRATEGIC DIRECTION	ACTION	DELIVERABLE	OUTCOME
<p>Strategic Direction 5:</p> <p>Strengthen Our Relationships</p> <p>1. Initiate and expand innovative models of care to deliver quality services.</p> <p>2. Develop and maintain a communications strategy to engage with staff, critical friends, funders and community regarding MTHCS services and programs.</p>	<p>1. Enhancement or expansion of:</p> <p>a) Nurse led models of care</p> <p>b) Nurse practitioners</p> <p>c) Nurse-supported telehealth with specialists</p> <p>d) Allied health assistants for acute, community and aged care.</p> <p>2. Formal partnerships with critical friends and a common goal/agenda set.</p> <p>3. Communication strategy to maintain and strengthen partnerships.</p> <p>4. Communication strategy for staff to create a unified team across all MTHCS sites.</p> <p>5. Communication Strategy for community members to allow easier navigation of MTHCS services and broader health services in the region</p>	<p>Participate and contribute to 'radial model' which is under development with SCHS, RDHS, MBH and RFDS.</p> <p>Participate and contribute to the Mallee Health Partnership with RDHS and MBH.</p> <p>Identify opportunities to expand services which can be delivered by Telehealth opportunities.</p> <p>Identify opportunities where the workforce can be harnessed and trained under delegated or advanced scope of practice roles.</p> <p>Explore the application of My Emergency Doctor to support after hours and on call arrangements for urgent care centre.</p> <p>Work with NewsAlert PR to develop and implement a communications plan for 2020:</p> <ul style="list-style-type: none"> • Regular press releases on items of interest • Regular GP calendar • Regular advertorial /space in the local paper "what's on" • Staff newsletter • Community newsletter • Change management and implementation of delivery against the strategic plan • Specific engagement of Sea Lake staff and community to continue to reassure their place in the broader entity <p>Review and update the MTHCS website.</p> <p>Rebrand MTHCS.</p>	<p>Complete: Commenced discussions with RFDS on potential GPs to practice in medical clinics at Mallee Track.</p> <p>Complete: Attended all CEO partnership meetings and relevant sub working groups to implement agreed strategies.</p> <p>Complete: Telehealth policy and programs embedded during the course of COVID-19</p> <p>Complete: Two staff have been given scholarships through the PHN to undertake RIPERN nursing training</p> <p>Complete: My Emergency Doctor implemented at Urgent Care Centre in Ouyen and Sea Lake.</p> <p>Complete: Communication plan for 2020 in place to capture key messages and methods for communicating.</p> <p>Dedicated communications work undertaken to support the COVID-19 response.</p> <p>Deferred : due to COVID-19</p> <p>Deferred : due to COVID-19</p>

COMMUNITY SERVICES

SERVICE	ACTUAL ACTIVITY 2018 - 2019	ACTUAL ACTIVITY 2019 - 2020
DISTRICT NURSING*	3218.43 HOURS	2142 HOURS
PODIATRY*	939.5 HOURS	910.5 HOURS
OCCUPATIONAL THERAPY*	937 HOURS	759 HOURS
EXERCISE GROUPS*	1494 HOURS	812.5 HOURS
PHYSIOTHERAPY (INCL. HYDROTHERAPY)*	387 HOURS	398.5 HOURS
SOCIAL SUPPORT*	16172.5 HOURS	12834.5 HOURS
TRANSPORT*	2475 TRIPS	3031 TRIPS
DELIVERED MEALS*	4654 MEALS	5748 MEALS
CARER SUPPORT GROUP*	52 HOURS	10 HOURS
COMMUNITY NURSING	67.75 HOURS INCL. DIABETES & WELL WOMAN'S	58 HOURS

* Services that are not funded, or only part funded, through the MPS Tripartite Agreement

MPS FUNDED FLEXIBLE AGED CARE PLACES

CAMPUS	NUMBER
FLEXIBLE HIGH CARE	50
FLEXIBLE LOW CARE	35
FLEXIBLE HOME CARE	5

MPS UTILISATION OF FLEXIBLE AGED CARE PLACES

CAMPUS - OUYEN	NUMBER	OCCUPANCY LEVEL %
FLEXIBLE HIGH CARE	29	81.5%
FLEXIBLE LOW CARE	27	55.75%
RESPITE	2	185.7%
FLEXIBLE HOME CARE	0	0
OTHER COMMUNITY SERVICES	0	0
TOTAL	58	

CAMPUS - SEA LAKE	NUMBER	OCCUPANCY LEVEL %
FLEXIBLE HIGH CARE	19	37.7%
FLEXIBLE LOW CARE	6	62.5%
RESPIRE	2	32.8%
FLEXIBLE HOME CARE	5	35%
OTHER COMMUNITY SERVICES	0	0
TOTAL	32	

MPS ACUTE CARE ACTIVITY

SERVICE - OUYEN	TYPE OF ACTIVITY	ANNUAL ACTIVITY 2019-20
MEDICAL INPATIENTS	BED DAYS	9
URGENT CARE	PRESENTATIONS	754
NON-ADMITTED PATIENTS	OCCASIONS OF SERVICE	18

SERVICE - SEA LAKE		ANNUAL ACTIVITY 2019-20
MEDICAL INPATIENTS	BED DAYS	4
URGENT CARE	PRESENTATIONS	169

OCCUPATIONAL VIOLENCE

OCCUPATIONAL VIOLENCE STATISTICS	2019 - 20
WORKCOVER ACCEPTED CLAIMS WITH AN OCCUPATIONAL VIOLENCE CAUSE PER 100 FTE	0
NUMBER OF ACCEPTED WORKCOVER CLAIMS WITH LOST TIME INJURY WITH AN OCCUPATIONAL VIOLENCE CAUSE PER 1,000,000 HOURS WORKED	0
NUMBER OF OCCUPATIONAL VIOLENCE INCIDENTS REPORTED	29
NUMBER OF OCCUPATIONAL VIOLENCE INCIDENTS REPORTED PER 100 FTE	
PERCENTAGE OF OCCUPATIONAL VIOLENCE INCIDENTS RESULTING IN A STAFF INJURY, ILLNESS OR CONDITION	80%

OCCUPATIONAL HEALTH AND SAFETY

In this reporting period, there have been three Occupational Health and Safety Committee meetings with an average of eight members present at each meeting. Sea Lake OH&S Representatives attend via video link from Sea Lake.

THE OH&S COMMITTEE HAS AN AGREED SET OF PERFORMANCE INDICATORS. INDICATORS 1 TO 6 ARE REPORTED AT EACH MEETING. INDICATORS 7 TO 9 ARE REPORTED ANNUALLY.

1. % of planned workplace OH&S inspections completed.
2. Number of injured workers who are supported to RTW.
3. % of attendance at OH&S committee meetings.
4. % of planned OH&S system audits undertaken.
5. % of reported incidents investigated.
6. Number of major purchases made with OHS risk assessment.
7. % of OHS Committee trained - 89%.
8. % of HSR positions filled - 67%.
9. % Management trained in RTW - 30%.

ACHIEVEMENTS OF THE COMMITTEE HAVE BEEN:

- A Security Risk Assessment with an Action Plan;
- Food Safety audits have been attended across MTHCS;
- Summer Preparedness has been carried out across MTHCS;
- Emergency drills have been conducted across MTHCS;
- Building works completed at Childcare - Bollards; Garden edging; path and shade sails;
- Staff across the entire MTHCS were provided with Fluvax vaccines;
- All Fire Extinguishers have been checked;
- Bariatric equipment has been purchased for Sea Lake Flexibed;
- All buses in the fleet have been audited;
- All Patient Handling Devices have had their yearly checks;
- Security screen has been installed in the Dental clinic;
- Air conditioner has been installed in the Sea Lake medication room;
- Car park at Barratt and Smith has been upgraded;
- Re-useable water bottles have been purchased for use across MTHCS;
- A crash tested wheelchair has been purchased and training organised for staff;
- Waste management continues with cardboard and plastic being segregated from other waste for recycling. Aluminium cans and polystyrene are also being segregated.
- Monitoring of MTHCS's water consumption continues

OCCUPATIONAL HEALTH AND SAFETY

OCCUPATIONAL HEALTH & SAFETY STATISTICS	2019 - 20	2018 - 19	2017 - 18
THE NUMBER OF REPORTED HAZARDS/INCIDENTS FOR THE YEAR PER 100 FTE	624 TOTAL INCIDENTS	712 TOTAL INCIDENTS	770 TOTAL INCIDENTS
THE NUMBER OF 'LOST TIME' STANDARD WORKCOVER CLAIMS FOR THE YEAR PER 100 FTE	0	0	0
THE AVERAGE COST PER WORKCOVER CLAIM FOR THE YEAR ('000)	\$XX	\$XX	\$XX

There were no fatalities to disclose for the 2019-20 period

PATIENT EXPERIENCE REPORTING

KEY PERFORMANCE INDICATOR - PATIENT EXPERIENCE	TARGET	RESULT
VICTORIAN HEALTH EXPERIENCE SURVEY - DATA SUBMISSION	FULL COMPLIANCE	FULL COMPLIANCE
VICTORIAN HEALTH EXPERIENCE SURVEY - % OF POSITIVE PATIENT EXPERIENCE - QUARTER 1	95%	FULL COMPLIANCE*
VICTORIAN HEALTH EXPERIENCE SURVEY - % OF POSITIVE PATIENT EXPERIENCE RESPONSES - QUARTER 2	95%	FULL COMPLIANCE*
VICTORIAN HEALTH EXPERIENCE SURVEY - % OF POSITIVE PATIENT EXPERIENCE RESPONSES - QUARTER 3	95%	FULL COMPLIANCE*
VICTORIAN HEALTH EXPERIENCE SURVEY - % OF VERY POSITIVE RESPONSES TO QUESTIONS ON DISCHARGE CARE - QUARTER 1	75%	FULL COMPLIANCE*
VICTORIAN HEALTH EXPERIENCE SURVEY - % OF VERY POSITIVE RESPONSES TO QUESTIONS ON DISCHARGE CARE - QUARTER 2	75%	FULL COMPLIANCE*
VICTORIAN HEALTH EXPERIENCE SURVEY - % OF VERY POSITIVE RESPONSES TO QUESTIONS ON DISCHARGE CARE - QUARTER 3	75%	FULL COMPLIANCE*
VICTORIAN HEALTH EXPERIENCE SURVEY - PATIENTS PERCEPTION OF CLEANLINESS - QUARTER 1	70%	FULL COMPLIANCE*
VICTORIAN HEALTH EXPERIENCE SURVEY - PATIENTS PERCEPTION OF CLEANLINESS - QUARTER 2	70%	FULL COMPLIANCE*
VICTORIAN HEALTH EXPERIENCE SURVEY - PATIENTS PERCEPTION OF CLEANLINESS - QUARTER 3	70%	FULL COMPLIANCE*
HAND HYGIENE - QUARTER 4		98%

PEOPLE MATTERS SURVEY REPORTING

KEY PERFORMANCE INDICATOR - ORGANISATIONAL CULTURE	TARGET	RESULT
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH AN OVERALL POSITIVE RESPONSE TO SAFETY AND CULTURE QUESTIONS	80%	90%
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH A POSITIVE RESPONSE TO THE QUESTION, "I AM ENCOURAGED BY MY COLLEAGUES TO REPORT ANY PATIENT SAFETY CONCERNS I MAY HAVE"	80%	94%
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH A POSITIVE RESPONSE TO THE QUESTION, "PATIENT CARE ERRORS ARE HANDLED APPROPRIATELY IN MY WORK AREA"	80%	91%
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH A POSITIVE RESPONSE TO THE QUESTION, "MY SUGGESTIONS ABOUT PATIENT SAFETY WOULD BE ACTED UPON IF I EXPRESSED THEM TO MY MANAGER"	80%	93%
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH A POSITIVE RESPONSE TO THE QUESTION, "THE CULTURE IN MY WORK AREA MAKES IT EASY TO LEARN FROM THE ERRORS OF OTHERS"	80%	89%
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH A POSITIVE RESPONSE TO THE QUESTION, "MANAGEMENT IS DRIVING US TO BE A SAFETY-CENTRED ORGANISATION"	80%	91%
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH A POSITIVE RESPONSE TO THE QUESTION, "THE HEALTH SERVICE DOES A GOOD JOB OF TRAINING NEW AND EXISTING STAFF"	80%	90%
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH A POSITIVE RESPONSE TO THE QUESTION, "TRAINEES IN MY DISCIPLINE ARE ADEQUATELY SUPERVISED"	80%	81%
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH A POSITIVE RESPONSE TO THE QUESTION, "I WOULD RECOMMEND A FRIEND OR RELATIVE TO BE TREATED AS A PATIENT HERE"	80%	87%

MPS PERFORMANCE PRIORITY REPORTING

KEY PERFORMANCE INDICATOR - QUALITY AND SAFETY	TARGET	RESULT
HEALTH SERVICE ACCREDITATION	FULL COMPLIANCE	FULL COMPLIANCE
COMPLIANCE WITH CLEANING STANDARDS	FULL COMPLIANCE	FULL COMPLIANCE
COMPLIANCE WITH THE HAND HYGIENE AUSTRALIA PROGRAM	80%	98%
PERCENTAGE OF HEALTHCARE WORKERS IMMUNISED FOR INFLUENZA	75%	84%
VICTORIAN HEALTH EXPERIENCE SURVEY - PATIENT EXPERIENCE	95% POSITIVE EXPERIENCE	FULL COMPLIANCE*
VICTORIAN HEALTH EXPERIENCE SURVEY - DISCHARGE CARE	75% VERY POSITIVE RESPONSE	FULL COMPLIANCE*
KEY PERFORMANCE INDICATOR - GOVERNANCE AND LEADERSHIP	TARGET	RESULT
PEOPLE MATTER SURVEY - PERCENTAGE OF STAFF WITH A POSITIVE RESPONSE TO THE SAFETY CULTURE QUESTIONS	80%	90%

* Less than 42 responses were received for this period due to the relative size of the health service

DISCLOSURES REQUIRED UNDER LEGISLATION

CONSULTANCIES INFORMATION FRD 11(E)

In 2019-20 there were five consultancies where the total fees payable to the consultants were less than \$10,000. **The total expenditure incurred during 2019-20 in relation to these consultancies is \$17,164.20 (excl GST).**

In 2019-20 there were four consultancies where the total fees payable to the consultants were \$10,000 or greater. **The total expenditure incurred during 2019-20 in relation to these consultancies is \$95,004.02 (excl GST).**

CONSULTANT	PURPOSE OF CONSULTANCY	START DATE	END DATE	TOTAL APPROVED PROJECT FEE (EXCLUDING GST)	EXPENDITURE 2019-20 (EXCLUDING GST)	FUTURE EXPENDITURE (EXCLUDING GST)
AUDIT & RISK SOLUTIONS	4 Internal Audits completed for 2019/2020	1 July 2019	30 June 2020	\$20,000	\$21,088.19	\$0
PINNACLE GROUP	Organisational Design and Change Management Project	Sept. 2019	Dec. 2019	\$47,520	\$47,520	\$0
PETER WALLIS	Foundation establishment, Sea Lake meetings	July 2019	June 2020	\$11,100.09	\$11,100.09	\$0
	CEO full year review (includes travel)	Aug. 2019	Nov. 2019	\$4,450	\$4,409	\$0
	CEO mid-year review	Apr 2019	May 2020	\$600	\$600	\$0
PORTER NOVELLI	Communications	Aug. 2019	June 2020	\$10,286.74	\$10,286.74	\$0

INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) EXPENDITURE FRD 22H 5.17

The total ICT expenditure incurred during 2019-20 is \$946,104.50 (excluding GST) with the details shown below:

BUSINESS AS USUAL (BAU) ICT EXPENDITURE	NON-BUSINESS AS USUAL (NON-BAU) ICT EXPENDITURE		
TOTAL (EXCLUDING GST)	TOTAL = OPERATING EXPENDITURE AND CAPITAL EXPENDITURE (EXCLUDING GST) (A) +(B)	OPERATIONAL EXPENDITURE (EXCLUDING GST) (A)	CAPITAL EXPENDITURE (EXCLUDING GST) (B)
\$865,844	\$80,260	\$1,750	\$78,510

FREEDOM OF INFORMATION ACT 1982

People may obtain access to information not normally available to them, in accordance with the terms of the Freedom of Information Act 1982.

The Principal Officer under the Act is the Chief Executive Officer; the authorised Freedom of Information Manager is the Executive Director of Nursing. The public may seek access to any documents and records held by **MTHCS** by making a written request to the Freedom of Information Manager.

Freedom of Information Requests can be made by contacting the **MTHCS** Freedom of Information Officer either via a letter stating what documents you are seeking access to or via email. An application fee of \$29.60 needs to be paid before the request is processed.

FREEDOM OF INFORMATION OFFICER: PAM VALLANCE

Mallee Track Health and Community Service
PO Box 130
Ouyen Vic 3490
pvallance@mthcs.vic.gov.au

Payment of Application Fee can be made by Direct Deposit or Cheque to:
Mallee Track Health and Community Service
BSB: 013756
Account No: 290605963

More information on how to lodge an FOI application and charges that may apply is available at <https://www.oaic.gov.au/freedom-of-information/>

BUILDING ACT 1993

MTHCS complies with the provisions of the Building Act 1993 in accordance with the Department of Health and Human Services Capital Development Guidelines (Minister for Finance Guideline Building Act 1993/ Standards for Publicly Owned Buildings 1994/ Building Regulations 2005 and Building Code of Australia 2004).

PUBLIC INTEREST DISCLOSURE ACT 2012

The Public Interest Disclosure Act 2012 intent is to encourage and facilitate the making of disclosure of improper conduct by public officers and public bodies, and establish a system for investigation of matters.

The Act provides protection from detrimental action to any person affected by a protected disclosure whether it is a person who makes a disclosure, a witness, or a person who is the subject of an investigation.

PROTECTED DISCLOSURES ARE TO BE REPORTED DIRECTLY TO: INDEPENDENT BROAD-BASED ANTI-CORRUPTION COMMISSION (IBAC)

Phone **1300 735 135**
Fax **03 8635 6444**
Street address Level 1, North Tower, 459 Collins Street, Melbourne VIC 3000
Postal address GPO Box 24234, Melbourne VIC 3001

www.ibac.vic.gov.au/contact-us

STATEMENT ON NATIONAL COMPETITION POLICY

MTHCS complied with all the government policies regarding competitive neutrality.

Under the Act, State government departments, council and organisations funded by government to provide programs and services to people in care relationships, need to take all practicable measures to:

- Ensure staff have available and understand the principles in the Act.
- Ensure staff promote the principles to people in care relationships, so that people in care relationships are aware of and understand the principles of the Act.
- Reflect the care relationship principles in developing, providing or evaluating support and assistance for those in care relationships.
- Staff have access to copies of the principles of the Act and copies of the charter.

CARERS RECOGNITION ACT 2012

Mallee Track Health and Community Service has taken all practical measures to comply with its obligations under the Act.

ENVIRONMENTAL PERFORMANCE

ELECTRICITY USAGE		
OUYEN CAMPUS	215582 KWH (PEAK)	166490 KWH (OFF-PEAK)
HOSTEL	67006 KWH (PEAK)	88205 KWH (OFF-PEAK)
SEA LAKE CAMPUS	123283 KWH (PEAK)	112877 KWH (OFF-PEAK)
WATER CONSUMPTION		
OUYEN	10667 KL	
HOSTEL	2185 KL	
SEA LAKE	4356 KL	
CARINYA	1622 KL	
GAS CONSUMPTION		
OUYEN	53.36 KL	
SEA LAKE	19.54 KL	

RECYCLING (OUYEN SERVICE CENTRE ONLY)

CARDBOARD/PAPER 72 M3

GENERAL RUBBISH LANDFILL 190 M3

POLYSTYRENE 3 M3

PLASTIC/METAL/GLASS 36 M3

PRINTER CARTRIDGES 37 KG

INFECTIOUS WASTE

INFECTIOUS WASTE 383 KG

ADDITIONAL INFORMATION AVAILABLE ON REQUEST

Details in respect of the items listed below have been retained by the health service and are available to the relevant Ministers,

Members of Parliament and the public on request (subject to the freedom of information requirements, if applicable):

- Declarations of pecuniary interests have been duly completed by all relevant officers;
- Details of shares held by senior officers as nominee or held beneficially;
- Details of publications produced by the entity about itself, and how these can be obtained;
- Details of changes in prices, fees, charges, rates and levies charged by the Health Service;
- Details of any major external reviews carried out on the Health Service;
- Details of major research and development activities undertaken by the Health Service that are not otherwise covered either in the report of operations or in a document that contains the financial statements and report of operations;
- Details of overseas visits undertaken including a summary of the objectives and outcomes of each visit;
- Details of major promotional, public relations and marketing activities undertaken by the Health Service to develop community awareness of the Health Service and its services;
- Details of assessments and measures undertaken to improve the occupational health and safety of employees;
- A general statement on industrial relations within the Health Service and details of time lost through industrial accidents and disputes, which is not otherwise detailed in the report of operations;
- A list of major committees sponsored by the Health Service, the purposes of each committee and the extent to which those purposes have been achieved;
- Details of all consultancies and contractors including consultants / contractors engaged, services provided, and expenditure committed for each engagement.

LOCAL JOBS ACT 2003

MTHCS adheres to the principles of the Local Jobs Act 2003.

During the reporting period, there were no contracts requiring disclosure under the Act.

SAFE PATIENT CARE ACT 2015

MTHCS has no matters to report in relation to its obligations under section 40 of the Safe Patient Care Act 2015.

CAR PARKING

MTHCS provides free public car parking.

DISCLOSURE INDEX

The annual report of the Mallee Track Health and Community Service is prepared in accordance with all relevant Victorian legislation.

This index has been prepared to facilitate identification of the Department's compliance with statutory disclosure requirements.

LEGISLATION	REQUIREMENT	PAGE REFERENCE
MINISTERIAL DIRECTIONS - REPORT OF OPERATIONS		
CHARTER AND PURPOSE		
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FRD 22H	Purpose, functions, powers and duties	14
FRD 22H	Nature and range of services provided	05
FRD 22H	Activities, programs and achievements for the reporting period	08
FRD 22H	Significant changes in key initiatives and expectations for the future	08
MANAGEMENT AND STRUCTURE		
FRD 22H	Organisational structure	13
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FINANCIAL INFORMATION		
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FRD 22H	Operational and budgetary objectives and performance against objectives	56
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FRD 22H	Details of consultancies over \$10,000	40
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LEGISLATION		
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Mallee Track Health
and Community Service