Our Kilmore District Nursing team makes over 5000 visits each year to deliver quality care to people in their own homes.

Wound care is one of the services we home deliver, and 76 year old Tony is one local who recently benefited from our expertise and experience.

Over a year and a half ago Tony was scratched on the leg by a dog. It turned into a persistent wound that just wouldn’t heal, despite antibiotics prescribed by his doctor. On admission to our service earlier this year, the wound was infected, and the surrounding skin was fragile and at risk of becoming an ulcer. Tony’s leg was swollen and discoloured due to varicose veins and poor circulation in his legs.

After a series of tests, the nurses worked with Tony to devise a plan, which was a combination of clinical care, education and actions for Tony to take to contribute to his own recovery. It included daily activities, like walking and standing on tip toes. Tony was encouraged to eat well, to include protein for healing, and to drink plenty of water.

The nurses removed the bad tissue, and used a long term antibacterial dressing on the wound. Our team worked with Tony to assess his circulation and reassure him that compression stockings would not cut off the circulation to his legs but do the important job to remove excess fluid and promote healing.

In mid-June Tony pulled on his first pair of compression stockings. Within three weeks the wound that had been plaguing him for 18 months had halved in size, and there were no longer signs of infection. Full recovery is not far away.

As TKDH District Nurse Veronica explains, “we have the time and the tools to truly investigate what people need and want, to support them to achieve well-being in their own sense”. Tony is rapt to have achieved this result. His only regret is that he didn’t seek our help sooner.

So the message is don’t hesitate to give us a call or speak to your GP about a referral. You can find out more about Veronica on the back page of this edition.
Welcome to the winter edition of The Kilmore & District Hospital (TKDH) newsletter. We’re really pleased with the feedback we’re getting on this quarterly update and conversation with our community.

In this edition we showcase our subacute and community services. You can read about the work of our District Nursing Service, and learn more about Geriatric Evaluation and Management (GEM) and palliative care. There’s also an update on the Australian Council on Healthcare Standards’ external review and accreditation of our quality and safety, which we underwent in June.

Planning is now well underway for the financial year ahead. The good budget news was delivered by the member for Northern Victoria, Jaclyn Symes, who visited in July and met with staff and patients. The announcement of an 8.5% funding boost to $13.88M is great for our community. It means we can sustain current services, develop our theatre, improve access to the medical workforce and enhance services for people living with cancer.

Our focus for the next quarter is to:
• Finalise the 2016-17 Annual Report of Operations and identify priorities for 2017-18
• Increase medical cover for our Maternity Service and Urgent Care Centre
• Develop the range of services we offer to people in our community living with cancer.

I say this every edition but it’s true and worth recognising: none of what we do can happen without the efforts of our entire hospital community – including staff, supporters, donors, volunteers and committee members. Thank you for your ongoing support.

Regards,

Sue

The Tick of Approval

Accreditation is public recognition that a health care organisation meets quality and safety standards. The process is an independent external peer assessment of a level of performance measured against those standards.

In June we participated in the periodic review, which happens every two years. It’s a way of checking that our care remains on course in between the big accreditation inspections.

The review was undertaken by two independent surveyors employed by the Australian Council on Health Care Standards (ACHS). We were pleased that they cited a significant achievement over the last two years in governance, credentialling and consumer participation.

Well done to our staff for achieving this result. It took the work of many people to prepare us for accreditation but the process has given us great feedback and confirmation that we’re on the right track. Our community can be reassured by our team’s ongoing support and commitment to provide high quality and safe care to our patients.

Our next accreditation phase is in 12 months when we will document our ratings against the standards.
End of Life Education

Death and dying can be difficult topics of conversation. But supporting choices and providing well considered care at the end of life is one of the great privileges of nursing.

Our TKDH team has long been providing excellent palliative care for patients in hospital and in their home. To keep us up-to-date three of our registered nurses recently received $1000 scholarships to undertake the Palliative Care Resource Nurse Course.

Over seven days our nurses had access to the latest in clinical practice. They learned about evidence-based pain and symptom relief, and providing emotional support to patients, their families and loved ones. It’s given our professionals the confidence to better support patients and their families.

This year we’ll be working with the community to further develop our palliative care resources, including improvements to the respectful and private space for grieving families. We are also expanding our home care, and will provide 24 hour on call services when necessary.

A GEM of a Partnership

Since 2014 we’ve been collaborating with the Northern Hospital to provide our older local patients with person-centred and goal driven care.

Our Geriatric Evaluation and Management (GEM) program enables people to remain close to home and their families, while getting the targeted care they need.

The subacute program enables us to care for complex conditions associated with ageing including cognitive dysfunction, chronic illness or disability.

We provide specialist support from our dedicated ten-bed ward, where each patient is assessed and can receive treatment from a multidisciplinary team including everything from a dietician to occupational therapist and social worker.

Our in-house gym supports patients to improve their mobility. There’s also a kitchen where patients are tested and can practise their daily living skills.

This partnership has helped many local community members who have been admitted to the Northern to transfer back to their local community for the rehabilitation and recovery stage. It’s also a great program to link people to local community or hospital services they need.
Who are You?

VERONICA PENROSE  
District Nurse

What is your typical day?
It starts around 7am planning client lists, requirements and team rosters. We are usually out on the road from nine till two and can travel up to 130 kilometres. I love being out in the community. I get to see how people are progressing, and what we can do differently or better to help them. Returning to the office involves writing up notes, attending to referrals and restocking supplies. We always debrief about the day's highs and lows, which includes lots of supportive laughter.

Why did you become a nurse?
I guess it is in my DNA. Mum was a nurse and Dad a country doctor. In my late teens I thought I might become a Jillaroo. Now I have the best of both worlds. I'm a nurse and run a small, self-sustaining farm. Initially I wanted to get people better. Now, I nurse because I want to make a difference. People cannot always get better, and so I like to make their life as good as possible in the ways they wish. I have discovered that people often have health and well-being goals that might not be considered mainstream or what we think they need.

What is the best thing about the District Nursing Service?
Everything! I love trying to make a difference in people's lives. District nursing is the perfect platform. I love the innovative, forward thinking and motivated team. Our nurses get excited because a wound has healed or a client has discharged completely well. I love the freedom, complexity and autonomy of the job. I love interacting with other agencies and doctors to achieve good client outcomes. I love working with families. I love encouraging the rest of the team to think outside the square, to push themselves and the boundaries of what is possible.

What are the benefits of TKDH?
There are huge benefits. Our clients see it as the only place to get the care they need. The admission process is uncomplicated and straightforward. We are lucky to have local GPs who take on hospital patients who don't have a local doctor. The hospital is staffed mostly by local people who understand the requirements of our community. For many, it is a relief to come to TKDH because they feel they are around friends. It is a familiar place where people feel at home.

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The-Kilmore-and-District-Hospital f

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