



RAMSAY  
HEALTH CARE

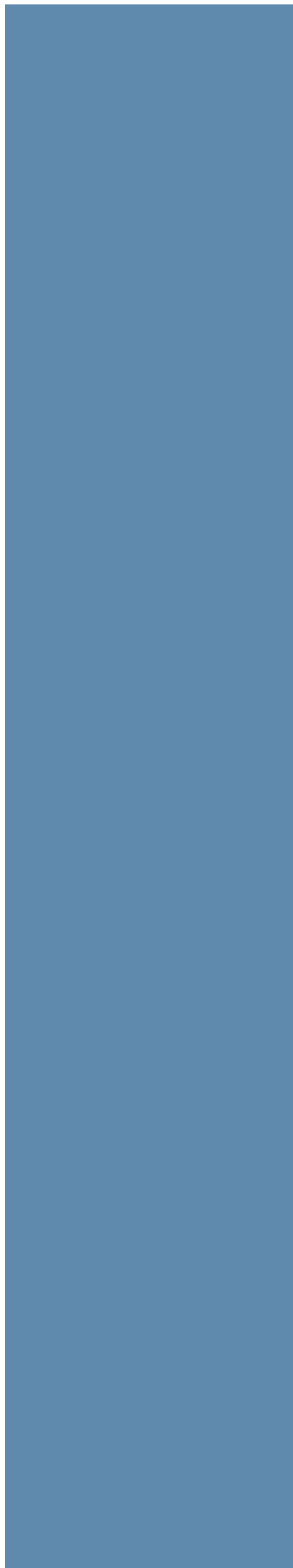
Joondalup  
Health Campus



joondalup health campus  
annual report 2006



RAMSAY  
HEALTH CARE



# Joondalup Health Campus Annual Report 2006

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# About Joondalup Health Campus

## History

The privately operated Joondalup Health Campus (JHC) provides a range of hospital and health services for both public and private patients. It was established in June 1996 when the Western Australian Government appointed Health Care of Australia to operate the existing Wanneroo public hospital and transform it into a modern health campus.

The project involved the construction of a new private hospital, an emergency department, refurbishing and extending the public hospital and providing a host of new services.

## Contractual Obligations

The operator of JHC (now Ramsay Health Care) holds a 20-year contract to provide a range of public services on behalf of the Western Australian Government. The contractual agreement with the WA Department of Health specifies an annual maximum operating budget and required levels of activity for services to public patients.

The agreement sets objective standards for the provision of high quality health care. It requires regular reporting on a wide range of indicators to ensure these standards are being met, and provides for the imposition of significant penalties on the operator if standards are not met.

The contract also allows the operator to provide private health care services from the campus.

## Public or Private – Your Choice

JHC is a 379-bed facility comprising a public and a private hospital, providing high quality health care to the rapidly growing population of Perth's northern suburbs.

Patients can receive their choice of specialist private health care close to home at Joondalup Private Hospital, a major acute care facility. This assures patients the doctor of their choice, accommodation in a single or shared room, no waiting time and 24-hour on-site medical backup. The hospital's proximity to high-level services, such as the adult intensive care unit and the neonatal special care unit, provides additional assurance.

# Chief Executive Officer's Report

Welcome to the eleventh Annual Report  
of the Joondalup Health Campus.

The story of the past year has been one of growth, as evidenced on the following page, along with our continued advocacy for health care services in the northern suburbs. For example:

- The number of patients treated in the Emergency Department increased by 12%, to more than 47,000 attendances
- Admissions rose by 5%
- The number of births increased by 22%.

This rate of growth shows no sign of abating and reinforces the urgent need for redevelopment of the hospital. Substantial progress has been made on the planning side, and negotiations have continued with the State Government, Department of Health and North Metropolitan Area Health Service on

the final form of the redevelopment. Subsequent to the end of the year under review, agreement has in fact been reached. It is worthy of note that the WA Minister for Health announced an additional \$100 million capital commitment to the redevelopment of the campus during the period under review.

The proposed redevelopment now includes:

- A stand-alone private hospital
- A separate private psychiatric facility
- A remodelled Emergency Department, increasing from the current 25 bays to 53 bays
- Construction of 10 new operating theatres
- Construction of a cardiac catheter laboratory

- Increased public bed numbers, from 235 to 495, including a dedicated palliative care unit
- Expanded renal dialysis facilities
- An expanded public psychiatric facility
- Increased intensive care and coronary care facilities
- Education and research facilities.

It is anticipated construction will start in 2007, with completion in 2010.

Other significant achievements over the past year include:

- The integration of JHC into the Ramsay Health Care group
- The complicated task of integrating patient management, financial, HR and IT systems



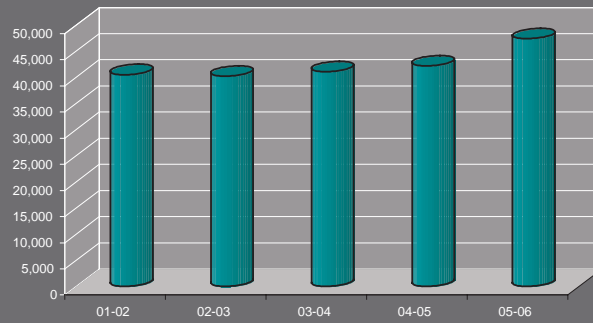
Kempton Cowan  
*Chief Executive Officer*

- Continued improvements in communications with General Practitioners in the northern suburbs
  - Continued cooperation with the Osborne Division of General Practice
  - The implementation of EDIS (Emergency Department Information System) into the JHC Emergency Department
  - The commencement of CAT bus services to the hospital, following representations from the JHC Community Board of Advice
  - Continued cooperation with the local universities, including progressing plans for academic appointments from the University of Western Australia
  - The appointment of two new psychiatrists, Dr Peter Claassen and Dr Peter Melvill-Smith
  - Entering into a partnership with Dr Lyle Palmer's Joondalup Family Health Study
  - Strategic planning in conjunction with the North Metro Area Health Service
  - A successful four-year Australian Council on Healthcare Standards accreditation survey.
- We also held the inaugural Paediatric Ward Fundraising Ball in September 2005. The event was a success and raised more than \$30,000 for the ward. The next ball is due to be held on 5 May 2007 and I encourage support of this worthy cause.

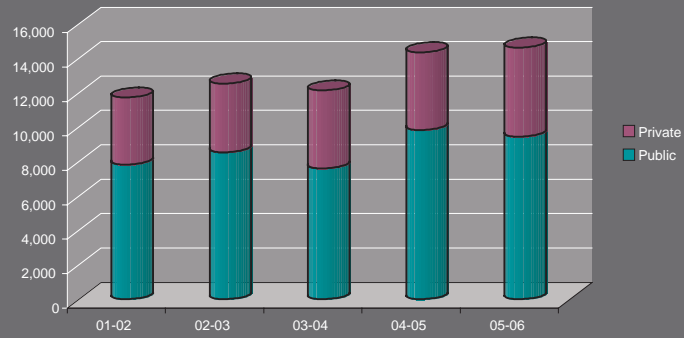
Each year JHC allocates a specific budget for capital works items, equipment and other purchases. For the reporting period 2005/2006 there was a total capital expenditure of \$1.69 million. Key items purchased included six anaesthetic machines and a Dornier Holmium laser system for operating theatres, as well as a range of patient monitoring and clinical assessment equipment for the other clinical areas

Finally, my sincere thanks to the medical staff, the executive and middle management teams and all JHC staff for their continued hard work, support and commitment to this hospital.

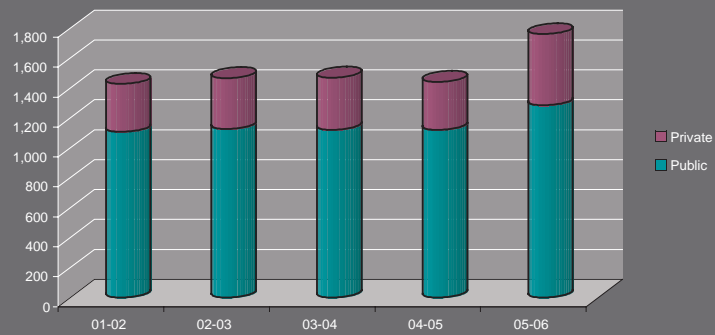
## Emergency Department Presentations



## Procedures

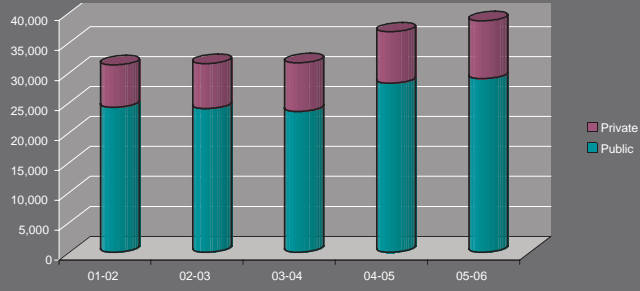


## Obstetric Deliveries

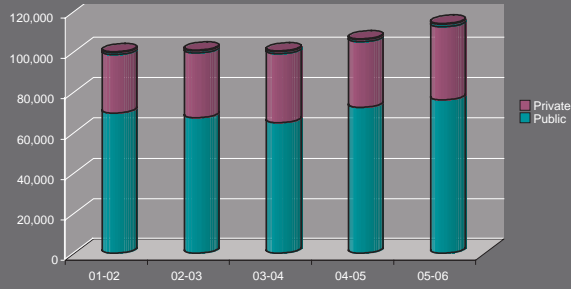




## Hospital Admissions



## Patient Days



# Nursing Services Report

It has been another busy year for JHC nurses and midwives and I thank them for their continued excellence in clinical care and their drive to improve nursing and midwifery practice.

## Education and Research

This year has seen a consolidation of a number of research projects leading to changes in practice. We are pleased that our staff have been able to present their findings in a number of key areas at both national and international forums.



*Rose Chapman (left) receiving her Researcher of the Year Award from Gail Milner*

We were delighted when the JHC nominee for the WA Nurses Board Nursing Excellence Awards won the Nurse Researcher of the Year Award. We congratulate Rose Chapman, who holds a joint appointment with JHC

and Curtin University of Technology. Rose, who began nursing in 1974, currently supervises three Masters students whose projects have made a significant contribution to both patient care and the profession. In her role as Nurse Research Consultant at JHC, she promotes research and evidenced-based practice in nursing.

This year has seen JHC double the intake of new graduate Registered Nurses for a supported 12 month program and plans are also underway for increased specialty second year programs.

For the first time JHC will offer an Enrolled Nursing Graduate Year Program to commence in September 2006. This has been developed in addition to a plan to increase the education packages available for JHC enrolled nurses in line with scope of practice, to ensure they have the opportunity to enhance competence and skill.

Staff in the Paediatric Ward have been busy updating their skills and ran a very successful skills fair this year. This involved staff moving through a

number of work stations that tested their knowledge and competence in a range of nursing care activities, including resuscitation, physical assessment, respiratory care and other paediatric scenarios of illness. They have worked this year on improving asthma education for staff, parents and children.

## Models of Care

A major focus on changing models of care has seen JHC's general and some specialty wards move to a team nursing model. JHC is grateful for the assistance of Professor Mary Chiarella from NSW Health for coming to JHC to share her expertise in scope of practice and leading for change. Professor Chiarella helped to provide the impetus and enthusiasm to embrace alternate ways to delivering care.

## Governance

JHC was again accredited by the Baby Friendly Hospital Initiative as a Baby Friendly Hospital (our second accreditation) which recognises commitment to new mothers. As a Baby Friendly Hospital, the advice



**Liz Prime**  
*Adjunct Associate Professor*  
*Director of Nursing*

and care breastfeeding mothers receive is supported by the implementation of the Ten Steps to Successful Breastfeeding.

During May 2006 JHC underwent a full survey by the Australian Council on Healthcare Standards (ACHS) and was granted the maximum four-year accreditation status. The surveyors reported that the organisation demonstrates a very evident patient focus and commitment to professional development and competence of staff.

### **Clinical Leadership**

Work continues in providing improved patient-centered care.

Midwife Anita Emmanuelson transformed one of JHC's birthing suites, creating a more home-like environment for families who may experience the loss of a child during pregnancy and providing a calm and supportive environment for them in their time of need.

The hospital's Critical Care Staff implemented a patient diary where staff and family and friends of the patient

are encouraged to write to provide an insight into their stay in ICU. This record is designed to fill in the memory gaps that patients often have after a moderate to long term stay in intensive care as well as enhancing their psychological and physiological recovery.

Cardiac Educator Mary Rees implemented weekly information and education sessions covering heart disease and risk factors, dietary guidelines, stress management, medications and exercise guidelines. Patients can be referred to an exercise physiologist for a tailored rehabilitation program.

### **Community Leadership**

Senior staff continue to play a key role in the community and in other health care roles and organisations. Members of the Nursing Executive have contributed to a number of key health reform committees and reviews to ensure a voice for the consumers of health care in the northern suburbs.


Adjunct Research Fellow Shane Combs, Deputy Director of Nursing, joined the

WA Clinical Senate to represent the North Metropolitan Health Region. The Clinical Senate is a well-established organisation that debates current important issues in health and makes recommendations to the State Health Executive Forum and to the Director-General of the Health Department. It has gained respect for the quality of its work and has significant influence on the health reform agenda in Western Australia.

Adjunct Associate Professor Liz Prime has joined the WA Child and Youth Network Advisory Group, one of the clinical networks set up as part of the health reform initiatives. She has also joined Edith Cowan University Nursing and Midwifery Consultative Committee and the Ramsay Health Care Risk Advisory Committee.

Again this year JHC's Emergency Department nurses joined medical colleagues to assist Sports Medicine Australia to provide a medical support centre for the City to Surf Fun Run.

I offer my sincere thanks to all of the team for their continued support.



## Nursing research at JHC

The Nurse Research Consultant (NRC) role was established in 2004 to assist nurse clinicians develop a research and evidence-based practice profile. The appointment is a collaborative venture between JHC and the School of Nursing and Midwifery at Curtin University of Technology. Initially the NRC position was implemented for one day a week in the Emergency Department. As a result of the role's success it has increased to three days a week and been implemented into all clinical areas. Establishment of the role has enabled nurse clinicians to identify areas of research, conduct research projects and utilise the findings of that research to improve patient care.

In 2006 the role was incorporated into Education and Staff Development to form the Education and Research Unit. Currently several research projects are being conducted at JHC including studies investigating factors associated with violence and aggression, the components of a healing environment and the benefits of using patient diaries in the ICU.

JHC has also showcased the research outcomes at several International conferences and published several papers in scientific nursing journals.

JHC provides a supportive environment to enable clinicians to achieve academic scholarship and continual growth and learning in the research process.

## Leading 100 Program—WA Emerging Leaders' Program

The Leading 100 program for public health system employees commenced in 2005 and was repeated in 2006. Because of its success it will be presented again in 2007.

The program is about gaining insight into the capabilities of effective leaders. It gives participants an opportunity to reflect on personal leadership style and development needs and enables employees to build an appreciation and understanding of the multitude of roles, services, issues and opportunities in the WA health system.

Dr Simon Wood, Medical Director of ED, and Chris Whellum, Deputy Director of Nursing/Redevelopment, participated in the program. While it is not normally available to private hospital employees, they were able to attend because of JHC's contract to treat public patients.

The leadership model for the Leading 100 program is "The Five Practices of Exemplary Leadership" created by prominent US business authors Jim Kouzes and Barry Posner.

The six-month program included workshops, monthly talks by eminent community, business and health leaders such as Janet Holmes a Court and WA Minister for Health Jim McGinty, the development of self-directed personal learning plans and a group-based leadership development project that involved extra research outside the normal schedule.

The program was personally supported by the Director General for Health, Dr Neale Fong, and provided opportunities for networking and gaining a valuable insight into public health in WA. The participants thank JHC CEO Kempton Cowan for supporting their entry into the program.

## JHC Research Presentations/Publications 2005 - 2006

2005	Conference/ Publication	Presentation/Paper Title	Presenter/Author/s
	Accident and Emergency Nursing	Collaboration in the Emergency Department: An innovative approach.	Chapman, R. & Combs, S.
	Contemporary Nurse	Establishing best practice guidelines for the administration of intra-muscular injections in the adult: a systematic review of the literature.	Wynaden, D., Landsborough, I., Chapman, R., et al.
July	Royal College of Nursing Australia, Adelaide	Changing the habit: the image of nursing handover.	Bushby, A., Burke, V., Chapman, R. & Combs, S.
		Dehydrated children are like wilting flowers: one emergency department's nurse-led initiative.	Browne, R. Parker, C., Combs, S. & Chapman, R.
		Waiting forever? Changing the image of the emergency department.	Combs, S., Langston, C. & Pilcher, C.
October	College of Emergency Nursing Australia (CENA), Sydney Australia	The nursing handover: its need, relevancy and accuracy.	Bushby, A., Burke, V., Chapman, R. & Combs, S.
		Dehydrated children are like wilting flowers.	Browne, R. Parker, C., Combs, S. & Chapman, R.
		The implementation of guidelines for pain management in children in the emergency department.	Porter, G., Chapman, R. & Combs, S.
		Your staff know best.	Combs, S., Chapman, R. & Nicholson, B.
		Don't hang ten: Fast Track.	Combs, S., Langston, C. & Pilcher, C.
November	2nd International Conference for College of Nursing, Perth Australia	Barrier and Gateways to initiating nurse led research in the ED: 12 months on.	Chapman, R. & Combs, S.
		Fast Track to success.	Combs, S., Langston, C. & Pilcher, C.
		Nurse led rehydration of children in the emergency department.	Browne, R. Parker, C., Combs, S. & Chapman, R.
		The nursing handover: innovations in practice.	Bushby, A., Burke, V., Chapman, R. & Combs, S.
		Pain Stop: the management of pain in children in the emergency department.	Porter, G., Chapman, R. & Combs, S.

### papers in press/in review

Admission & discharge process . – High Dependency Audit Outcome	Tulloch, A., How, C., Brent, M., Chapman, R., Burns, B. & Pomery, S.
An epidemic of abuse and violence: Nurses on the Frontline.	Chapman, R. & Styles, I.
Fast Track: One Hospital's Journey.	Combs, S., Chapman, R. & Bushby, A.
Evaluation of Fast Track.	Combs, S., Chapman, R. & Bushby, A.
Development of Guidelines for intershift and interdepartmental handover.	Bushby, A., Chapman, R. & Combs, S.



## Activities and Services

JHC is committed to quality care and provides a comprehensive range of services. These include:

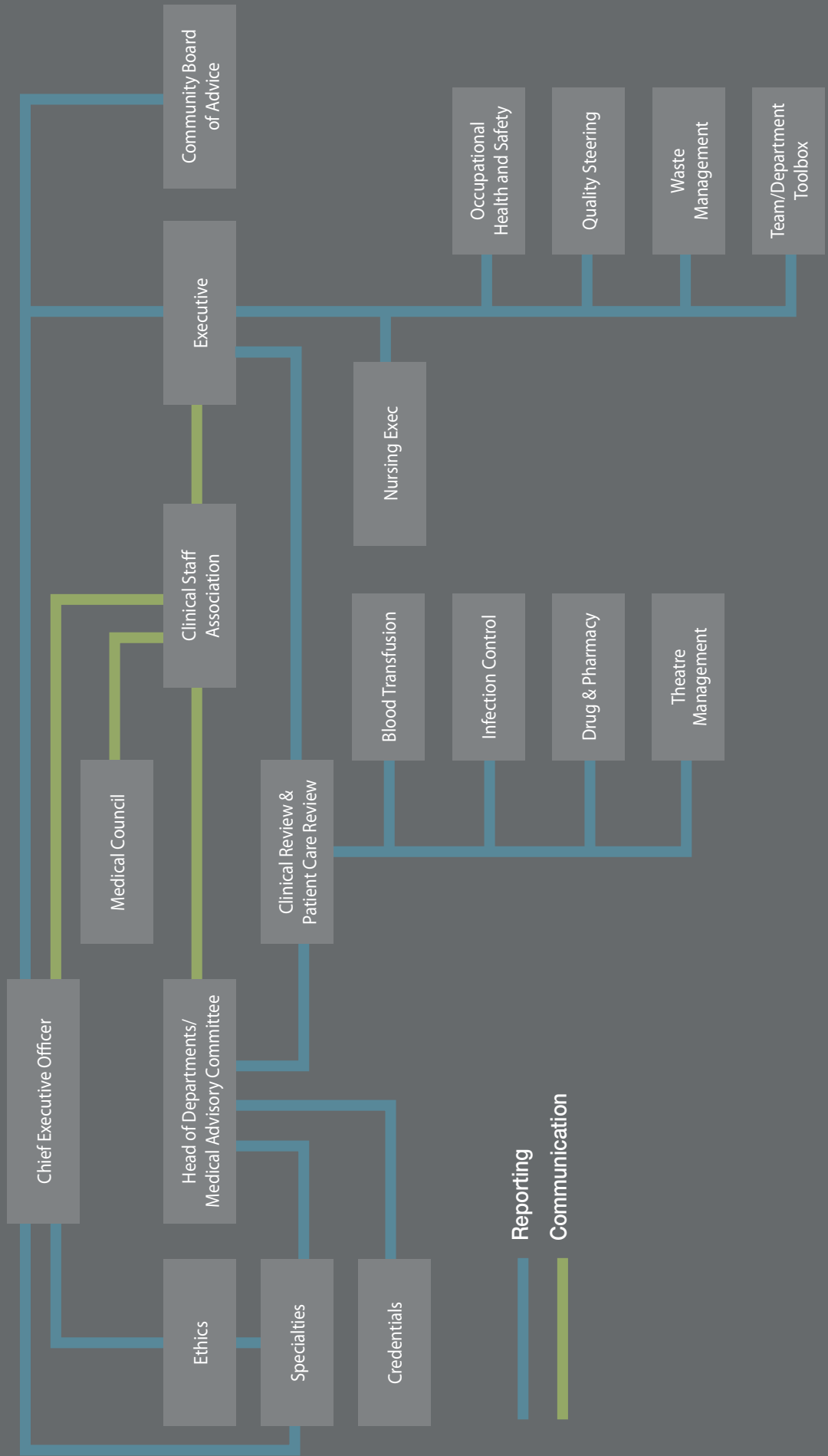
- A 10-bed Intensive Care/Coronary Care Unit
- A comprehensive Emergency Department
- A dedicated Paediatric Ward
- A purpose-built Mental Health Unit, including secure accommodation
- Dedicated Day Surgery and Endoscopy Units
- A purpose built Restorative and Day Therapy Unit
- Day Oncology/Chemotherapy services
- An Operating Suite comprising seven theatres, a dedicated central sterile supply unit and a 12-bay recovery ward
- A Renal Dialysis service
- A Neonatal Intensive Care Level II nursery
- A full range of Allied Health services including:
  - Physiotherapy
  - Occupational Therapy
  - Dietetics
  - Speech Pathology
  - Social Work
- A gymnasium and hydrotherapy pool
- A clinical library
- On-site 24 hour Medical Imaging (Radiology) services
- On-site 24 hour pathology laboratory service
- Nuclear Medicine
- A pharmacy
- Pastoral care

## Medical and Surgical Specialties

- Anaesthetics
- Cardiology
- Emergency Medicine
- Gastroenterology
- General Medicine
- General Practice
- Geriatrics/Rehabilitation
- Infectious Diseases
- Intensive Care
- Neurology
- Obstetrics
- Oncology
- Paediatric Medicine
- Palliative Care
- Psychiatry
- Renal
- Respiratory
- Rheumatology
- Dental
- Ear, Nose and Throat
- Facio-Maxillary
- General Surgery
- Gynaecology
- Neurosurgery
- Ophthalmology
- Orthopaedics
- Paediatric Surgery
- Plastic and Reconstructive Surgery
- Urology
- Vascular
- IVF

# JHC Committee Structure

as at July 2006



# The Team



## community board of advice

The Community Board of Advice met four times during the year and continues to be valuable in assisting the hospital by providing feedback, advice and support.

Members make a valuable contribution by reviewing service outputs on behalf of the community.

Members of the Community Board of Advice at 30 June 2006:

<b>Mr John Croser</b>	<i>Chairman / Orthopaedic Surgeon</i>
<b>Mr Carl Cartwright</b>	<i>Department of Health Representative</i>
<b>Mr Kempton Cowan</b>	<i>Chief Executive Officer</i>
<b>Ms Alessandra D'Amico</b>	<i>Community Representative</i>
<b>Rev. Gerry Doyle</b>	<i>Pastoral Care, JHC</i>
<b>Mr Tony Geddes</b>	<i>Orthopaedic Surgeon</i>
<b>Mr Garry Hunt</b>	<i>City of Joondalup</i>
<b>Ms Lyn James</b>	<i>Community Representative</i>
<b>Ms Diane Jones</b>	<i>Deputy Chief Executive Officer</i>
<b>Mr Neville Lane</b>	<i>Health Consumers' Council Representative</i>
<b>Ms Nadia Maiolo</b>	<i>Community Youth Representative</i>
<b>Mr Tony O'Gorman MLA</b>	<i>State Government Representative</i>
<b>Ms Liz Prime</b>	<i>Director of Nursing</i>
<b>Cr Tracey Roberts</b>	<i>City of Wanneroo</i>
<b>Mr Gary Stokes</b>	<i>Community Representative</i>

## medical advisory committee

The Heads of Department/ Medical Advisory Committee (HOD/ MAC) is the formal organisational structure through which accredited practitioners formulate and communicate their collective views.

HOD/MAC consists of one representative of each department and met six times during the year. The committee's objectives include:

- Providing a means for practitioners to participate in the policy-making and planning processes of the hospital
- Advising the CEO of appropriate policies for the clinical organisation of the hospital
- Planning and managing a continuing education program for members of the Medical Council
- Participating in the planning, development and implementation of quality programs of the hospital
- Assisting in identifying the health needs of the community and advising the CEO on appropriate services
- Reviewing recommendations for appointment of practitioners
- Consulting with Heads of Departments to ensure satisfactory on-call or availability arrangements.
- Ensuring accredited practitioners comply with JHC bylaws.





### Members of HOD/MAC at 30 June 2006:

Mr Tony Geddes	Chairperson/Orthopaedics
Mr James Aitken	General Surgery
Mr Kempton Cowan	Chief Executive Officer
Dr Kit Frazer	Radiology
Dr George Garas	Gastroenterology
Dr Glenys Ismail	Anaesthetics
Ms Diane Jones	Deputy Chief Executive Officer
Mr Jes Judge	Urology
Dr Margo Norman	Obstetrics and Gynaecology
Dr Mike Oehlers	General Practice
Dr Paul Porter	Paediatrics
Dr Brad Power	Director of Medical Services/ Intensive Care
Ms Liz Prime	Director of Nursing
Dr Stephen Richards	General Medicine
Dr Paul Skerritt	Psychiatry
Dr Farid Taba	GP Liaison Officer
Dr Peter Thompson	Cardiology
Dr Barry Vieira	Rehabilitation & Aged Care
Dr Steve Ward	Diagnostics
Dr Simon Wood	Emergency Medicine

## ethics committee

JHC's Ethics Committee is constituted under the guidelines of the National Health and Medical Research Council. The Committee met six times during the year and considered 16 applications. Two of these applications were withdrawn, three were considered to be quality assurance projects, and eleven were approved as research projects. The Committee was also asked to offer an ethical opinion on a request for reproductive technology. Some studies continue from previous years, with 23 currently running.

### Members of the Ethics Committee at 30 June 2006:

#### External members

Dr Michael Anderson	Chairman
Mr Richard McKenna	Lay member
Ms Leanne Wood	Lay member
Ms Melanie Naylor	Lawyer

#### Internal members

Mr Brendon Burns	Critical Care Nurse Manager
Mr Shane Combs	Deputy Director of Nursing
Rev. Gerry Doyle	Co-ordinator, Pastoral Care
Dr Brad Power	Director of Medical Services / Director, Intensive Care
Dr Paul Bailey	Emergency Care Physician
Ms Ann Hammer	Executive Officer to the committee

#### Administrative

Mrs Brigitte Hay	Minute secretary
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# Service Improvement/Quality Report

JHC is accredited by the Australian Council on Healthcare Standards (ACHS), an independent, not-for-profit organisation dedicated to improving the quality of health care in Australia through continual organisation review of performance, assessment and accreditation. The rigorous accreditation process is a continuous assessment which spans a four-year cycle.

In May 2006 ACHS representatives spent a week at JHC interviewing staff and consumers. During this time the organisation's quality framework was assessed to determine whether JHC as a whole delivered a consumer-centred service focused on the continuum of care.

The surveyors reported that "the Quality and Improving Performance program at JHC is well structured and broad-ranging. The structure and support provided by the quality team has assisted in the maturing of the program to include a number of well-researched studies. The quality program encourages improvements in clinical, support and administrative areas."

## Continuum of Care

The surveyors reported that the organisation demonstrates a very evident patient focus and commitment to the professional development and competence of staff.

- Clinical services are evaluated, prioritised on clinical needs, and improvements are made by a range of initiatives such as:
  - expanding the hours of the after hours GP clinic
  - expanding the hours of the Mental Health Liaison role in the Emergency Department and the Nurse Specials Unit, and the flexible use of the Paediatric ward.
- In the areas of aged care and rehabilitation, paediatrics and mental health, the consumer/carer involvement in assessment and planning for discharge is particularly well done.
- Policy and procedure development is well done, with a systematic approach to reviewing, updating and disseminating.
- Nurse care pathways are widely and effectively used.
- The role of discharge coordinators has clearly made a positive impact, and the current work with the Division of General Practice confirms a partnership approach to discharge planning.
- The patient diary trial in the Critical Care Unit has been commended.

## Leadership and Management

The surveyors reported that JHC's focus on quality is impressive, and the extent and breadth of activities are a credit to the leadership and staff.

- The executive is a strong and united team and has in place a management structure that supports good governance.
- JHC developed a strategic plan in 2004 which included the expansion of the campus facilities. There has been extensive community consultation in completing this plan.
- Corporate and clinical risk management systems are in place, well supported and effective.
- JHC has a very good formal linkage with the community through the Community Board of Advice. Information on service quality is provided, including complaints and aggregated data.
- The Ethics Committee is well structured, with good systems in place to monitor ongoing compliance of approved research.
- Systems for managing complaint investigation and response, and providing patients with information about rights and responsibilities, have improved.
- Surgical consent audits show full compliance with policy requirement.

## Human Resource Management

The surveyors reported that the HR function is strongly supported by JHC and is extremely effective. The surveyors commended the commitment to staff and their ability to work together as teams in a challenging environment.

- The organisation is strongly focused on retention and recruitment of staff.
- The databases to ensure staff continue to be registered or licensed are impressive.
- There is a rigorous process for the credentialing of medical offers via the Heads of Departments / Medical Advisory Committee.

## Information Management

The surveyors reported that the Information Management function is reviewed and widely used and that there is an embedded culture of no blame. The use of data to improve and measure services and outcomes is impressive.

- Much attention is paid to data accuracy and integrity and how data is presented.
- Clinical audits confirm that the medical records are satisfactory.
- An excellent initiative has been the work with the division of GPs to develop a system to provide what they need within 48 hours of patient discharge from hospital.
- The on-site library provides excellent support, including to 41 other Ramsay hospitals across Australia.
- Information technology is very important and well used.

## Safe Practice and Environment

The surveyors reported that the provision of a safe work place and clinical care environment is a strong priority for JHC.

- Data trends indicate a good reporting culture and a reduction in severity of incidents with injury.
- Building, plant and equipment are well maintained, with a well-documented preventative maintenance program in place.
- The infection control program is underpinned by good policies, and the infection control team and a network of infection control representatives provide effective staff training.
- Across the broader hotel services departments there is good evidence of systematic evaluation of service quality, policy compliance and documentation.
- A number of initiatives to improve waste management have been implemented through the waste management committee, including correct waste streaming and waste reduction, recycling and water-saving measures.
- The manual handling training program has been improved with a focus on patient handling and object handling.
- Security trends are evaluated, with evident improvements around the campus.
- Good procedures are in place for the safe handling of chemicals and hazardous substances, including the provision of personal protective equipment.
- Radiation safety is well monitored, with evidence of improvement.

## Patient Satisfaction

JHC encourages consumer feedback through internal and external mechanisms such as patient feedback cards, surveys developed in-house and surveys conducted via the Department of Health and through a national patient satisfaction contract service (Press Ganey & Associates) to benchmark with other health care facilities.

Patient feedback cards are provided to all patients at the bedside and reviewed daily. Data is collated monthly and used to trend opportunity for improvements and complimentary feedback.

## Health Department Survey

As reported last year JHC undertakes regular formal patient satisfaction evaluations, both internally driven and by independent external bodies.

Each year the Health Department randomly surveys patients from JHC. During February to June 2006, 454 patients participated in the survey (a 95% response).

Overall JHC performed very well. Key areas of high performance were meeting personal as well as clinical need, and the time and attention paid to patient care.

Among the paediatric patients JHC rated significantly higher than its peers in the areas of information and communication, the food and residential aspect and the overall satisfaction indicator. Maternity patients gave high ratings to both overall performance and continuity of care.

Identified opportunities for improvement included information provided to maternity patients, and wait times before being taken or sent to hospital room (20% of respondents did not have to wait, 11% waited less than 30 minutes, 6.5% waited between 30 and 60 minutes and 11% waited between one and two hours, with 45% waiting less than two hours).

# Rewards for JHC in Bizlink job scheme



*Chris Carter of Bizlink (left) with JHC's Breffni Doyle and the partnership plaque.*

JHC is a partner with Bizlink (a local Disability Employment Network provider) in employing local people with disabilities. In October JHC was nominated as one of six contenders for Bizlink's Employer of the Year award, and also became the first employer to be presented with a special partnership plaque in recognition of its commitment to equal opportunity employment.

Bizlink first approached JHC in January to discuss forming a partnership aimed at employing local people with disabilities. According to Bizlink's Chairman Chris Carter, the response was outstanding, particularly from JHC's Hotel Services Manager Breffni Doyle.

"Bizlink presented to Mr Doyle and his senior management team on the benefits of employing people with a disability and the advantages of using a local Disability Employment Network provider to meet their recruitment needs," Mr Carter said. "At the end of the presentation Mr Doyle said that he wanted to give people with a disability open employment opportunities. He has taken this initiative further and encouraged managers and team leaders of other departments to embrace the partnership and provide opportunities to place people with a disability within the hospital."

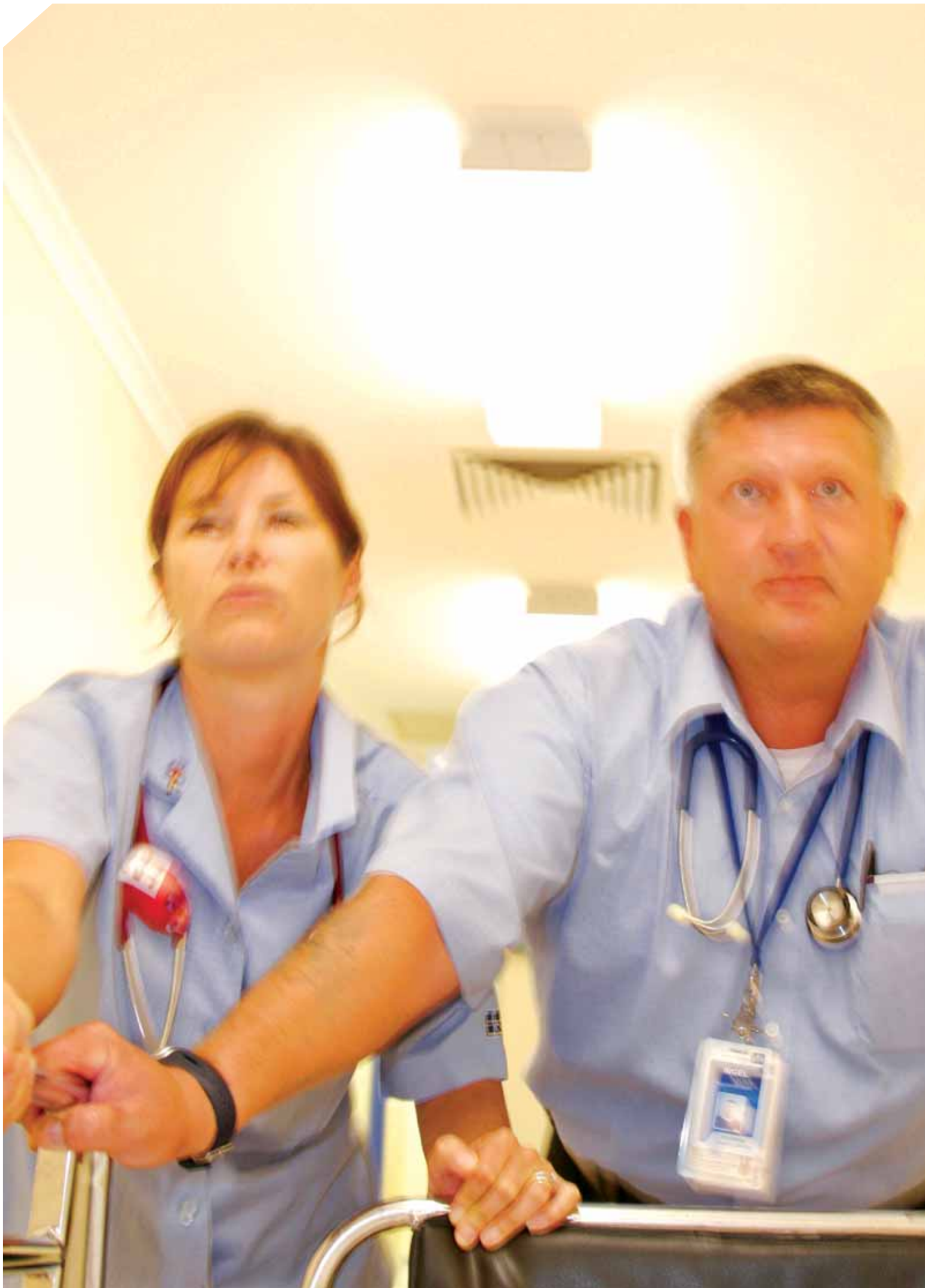
To date Hotel Services has employed six jobseekers (ten percent of its total of 60 workers), all on full award wages.

"We started with two people in catering," Mr Doyle said. "They learnt the requirements quickly and settled in as part of the team."

"We rolled it out from there with two more employed in catering, one in hotel services and another in carpark security and the hygiene run. All six are performing really well. I'm very happy with it and hope we can continue."

JHC has been nominated by Bizlink for the Prime Minister's Employer of the Year Award, which recognises excellence in the employment of people with disabilities, for the second year in succession.







# Emergency Department (ED)

2005/2006 saw an unprecedented increase in ED activity. Over the winter months attendances increased by 25% over the corresponding period the previous year. Overall ED attendances increased by 12% from 42,355 in 2004/5 to 47,591, with ED-generated admissions increased by about the same amount. Casemix (as measured by proportions of ATS categories and admission rates) remained largely unchanged, indicating that the increased activity was across the board rather than an increase in low-acuity presentations.

Despite the significant rise in activity, rates of patients not waiting to be seen (Did-Not-Waits) continued to fall and performance in terms of waiting time benchmarks improved slightly overall. Factors that contributed to continually improving performance in the face of escalating demand included:

- Extension of the Fast-Track Stream process
- The addition of four more ED Observation Ward beds in late 2005, bringing the total Observation Ward capacity to eight and the total ED cubicle capacity to 25
- The establishment of ED Nursing Discharge Coordination roles in August 2005
- Improvements in ED medical staff.

New appointments included Michael Bowran as Nurse Manager in December 2005 and Angela Bushby as a Clinical Nurse Consultant.

JHC was fortunate to have two of its staff, Bronwyn Nicholson and Paula Davis, successfully complete postgraduate qualifications as Nurse Practitioners. They are the first such clinical specialists to be employed in an ED in Perth.

Clinical teaching continued with sixth-year medical students supported by Dr Paul Bailey, who was also appointed as a senior lecturer in Emergency Medicine at UWA.



## Allied Health

### • Occupational Therapy

In the past year a great number of updates and additions have been completed to JHC's hand therapy protocols. This is an ongoing process that involved evidence-based practice and benchmarking with peers from other hospitals (ie SCGH, RPH, Fremantle Hospital).

The department has also continued to research and develop protocols and work practices in other specialty areas to guide practice.

A newly developed part-time home visiting position has enhanced the efficiency of OT's service. Home assessments can now be completed in a timely manner to facilitate safe discharges and transition from hospital to home. This has also taken the pressure off busy ward therapists who previously undertook their own home visits.

The Occupational Therapy program at Edith Cowan University's Joondalup campus commenced in February 2006. Eighteen new students attended one-day clinical workshops at JHC, an invaluable experience for both students and staff. The department is proud to be increasing its support for and relationships with the new OT course while continuing to offer practical placements to Curtin University students.

### • Physiotherapy

It was a challenging year of recruitment for the Physiotherapy Department with a nationwide shortage of qualified physiotherapists. An energetic team of 14 qualified physiotherapists had a very busy year providing physiotherapy services to both public and private patients of the hospital, in addition to supervising and supporting undergraduate students from Curtin and Notre Dame universities.

Services included inpatient, outpatient, Day Therapy, antenatal, postnatal and hydrotherapy services. During the year a total of 22,431 occasions of services were provided for public patients and 14,176 for private patients.

The department continues its strong focus on education and training for new graduate recruits with the introduction of a new graduate orientation and education program.

Two senior staff completed the West Australian Leadership and Development Program, and one staff member obtained a Master's degree in Population Health from the University of Western Australia.

Quality activities were implemented in response to customer and staff feedback, with a complete review of all patient





handouts to ensure contemporary evidence-based information.

The department maintains accreditation status with the Australian Physiotherapy Council.

As a community service the hydrotherapy pool has been made available for groups from the Disability Services Commission and the Joondalup Child Development Centre.

### • Speech Pathology

The four JHC Speech Pathologists provide services to all private and public inpatients and to day therapy outpatients, and continue to develop private outpatient services for adults and children.

There were 3,869 occasions of service during the year.

Specialty services offered include videofluoroscopy assessments of swallow function in conjunction with the Radiology Department, and services to patients after ENT surgery. The department also provides services to Glengarry Hospital and a consultancy service to Mount Hospital.

The department provides input to the Catering Departments at JHC, Glengarry Hospital and Mount Hospital to ensure appropriate menu options for patients with modified diet and fluid requirements.

### • Dietetics

The Dietetics Department's six staff provide a service to all private and public inpatients, and public outpatient services to antenatal, bariatric surgery and aged care patients. The department has also expanded services to increase the number of private outpatients by improved liaison with specialists and GPs in the community, providing both adult and paediatric care.

All the dietitians are accredited practising dietitians registered with the Dietitians Association of Australia, which guarantees an exceptional level of knowledge and training and adherence to evidence-based practice. The dietitians are all involved with various clinical interest groups, Health Department committees, benchmarking forums and several other initiatives such as the Baby Friendly Hospital accreditation.

There were 3,132 occasions of service in the year under review.

The department has a strong focus on staff education including regular workshops for graduate and current nurses in enteral feeding, diabetes and other surgical or medical areas. The dietitians provide all catering staff with special diet training and also ensure that the hospital food service continues to meet the requirements of all patients, including those with special

dietary needs. The department fostered links with Curtin University, supervising dietetic student clinical and food service placements and providing guest lectures on various clinical areas.

### • Social Work

The Social Work Department provides a service to all public and private inpatients and to JHC's ED, as well as to Glengarry Hospital and Attadale Hospital.

The Social Work team consists of twelve staff, of whom nine are based at JHC. Services delivered to JHC patients were maintained at a high level despite the 15,729 occasions of service this year, an increase of 4,786 occasions from the previous year. The department experienced an increase in referrals from the Paediatric and Special Care Nursery, coinciding with the launch of the reciprocal policy and procedure for child protection between the Department of Community Development and JHC.

In assisting the universities with training and education of undergraduate Social Work students, the department signed a student agreement with Edith Cowan University that saw students from ECU and Curtin University on placement this year.





# Risk Management, Occupational Safety and Health

Staff incidents remained constant in the 2006 period compared with 2005, supporting a robust reporting culture. Lost Time Injuries (LTIs) from these accidents/incidents increased as expected due to the significant increase in activity in all areas of the hospital.

Extra OSH resources were implemented in May 2006 to assist the Occupational Safety and Health Program in response to, and in anticipation of, further increases in hospital activity.

Key focus areas continue to be patient handling, violence and aggression prevention, risk assessments and emergency and security procedures.

## Mental Health Unit

A raft of improvements throughout the unit took place during the year.

Under JHC's Continuum of Care, an Admissions/Discharge nurse position was created to ensure continuity of care for patients. This has resulted in a greatly improved relationship with stakeholders such as community clinics and GPs. A trial of a new multidisciplinary care plan is currently being introduced along with a team care approach. The unit is working in cooperation with CoPMI (Children of Parents with a Mental Illness) to ensure family-friendly mental health inpatient services.

As a leadership and management initiative, regular meetings have been developed between medical staff and unit management, and between unit staff and outside stakeholders, to increase cooperation, communication and understanding of the differing roles and needs of different services. Policies and protocols are constantly under review to ensure best practice, and are all in line with Ramsay standards. A new control and restraint course has been developed after research into international best practice and Office of the Chief Psychiatrist recommendations. This incorporates a module on verbal de-escalation and breakaway techniques which is being offered hospital-wide. Human Resource Management has been lively, with many vacant posts filled and a reliable casual pool being built. A new part-time position of Area Manager has been created to assist with rostering, leave and other tasks.

Performance and skill levels have been improved by increased staff education at a unit level with the appointment of a unit-based staff development nurse. A variety of short in-service courses are available each week and outside presenters welcomed.

The multidisciplinary ward rounds continue and have proved a very useful tool in improving patient care. Active management of patients' length of stay has been prioritised and this is now part of the brief for the MDT meetings.

The Council of Official Visitors continues to play an important and welcome role in patient advocacy on the unit.



## After Hours GP Service

The After Hours GP Clinic operates between 7pm and 11pm on weekdays, between 3pm and 11pm on Saturdays and between 11am and 11pm on Sundays and public holidays.

The purpose of the clinic is to reduce after-hours pressure on the Emergency Department and local GPs. Located on site at JHC, the clinic has access to a range of hospital services such as pathology and radiology which are not readily available to GP patients after hours.

Established GPs from Perth's northern suburbs staff the clinic and in June 2006 Practice Nurses were introduced on the weekend shifts to assist the GPs and help improve patient flow through the clinic.

The demand for the After Hours GP Clinic has continued to increase with the number of attendances growing by 15% to 11,524 in 2005/06.

The Health Department of WA-funded bulk billing initiative instigated in September 2004 continued its success during the year. Patients eligible for bulk billing under the initiative are children under 16 and pension and concession cardholders. The proportion of patients who attended the clinic and were eligible for bulkbilling increased from 68% in 2004/05 to 71% in 2005/06.

## Education and Staff Development

Education and development of JHC staff is an integral part of the continuum of care and an essential component of service improvement. The Education and Research Unit is made up of a team of senior nurses with qualifications in differing nursing specialty backgrounds and education.

In brief:

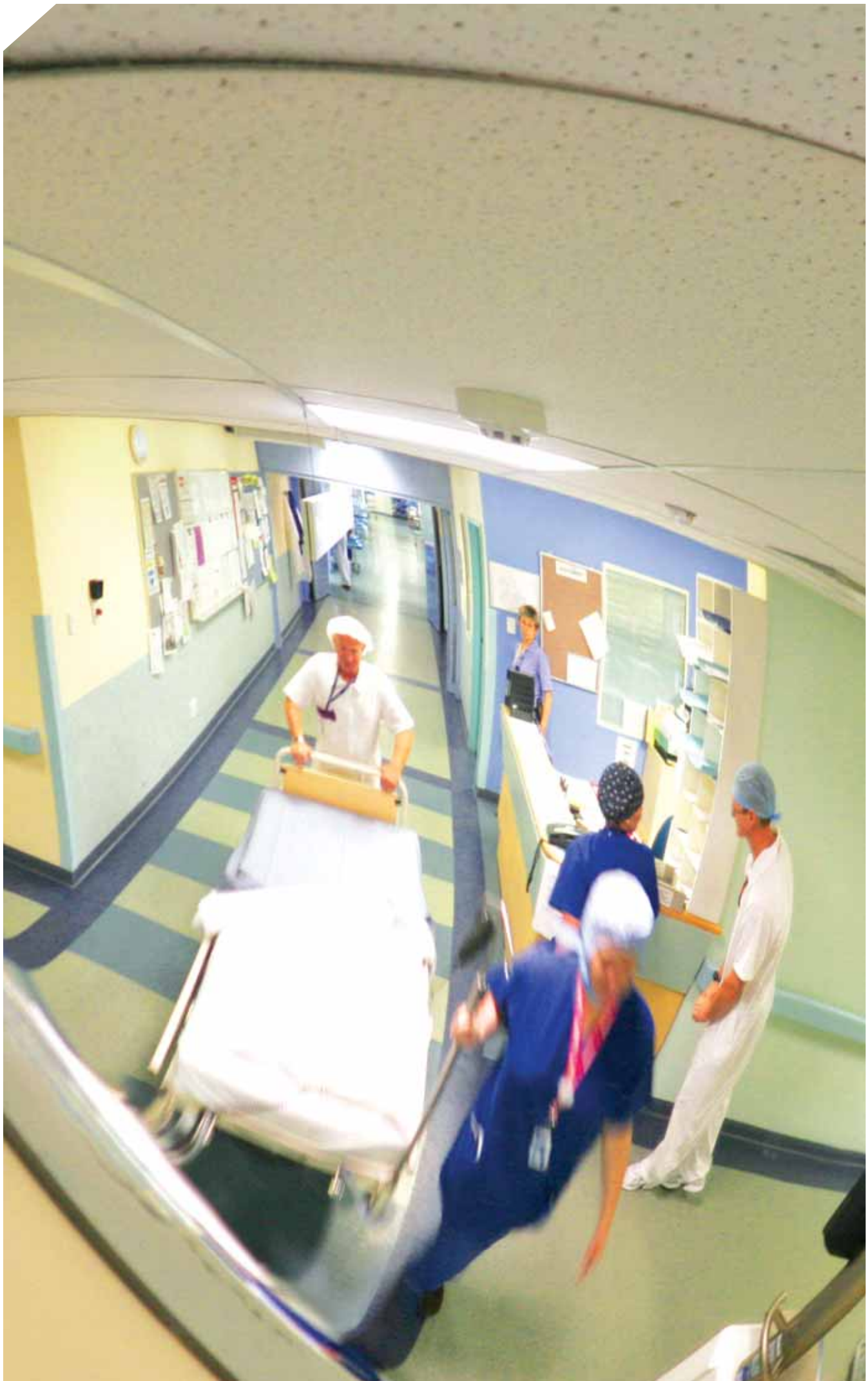
- 357 new staff attended the hospital-wide orientation program.
- Staff completed annual core competencies such as infection control, customer service, quality, manual handling, fire and emergency procedures. Clinical staff complete additional competencies in medication calculations, medication administration, basic and intermediate life support and documentation. Specialty staff complete competencies such as advanced life support, paediatric life support and airway ventilation.
- 223 requests were received and 216 granted for study leave to attend courses and conferences. JHC spent \$62,917 on registration fees and 2457 hours of paid study time was used.
- In February 2006 ten registered nurses completed the JHC first-year graduate program, and all continued to work at JHC after completion. Another five new registered nurse graduates completed their program in August 2006. In February 2006 19 registered nurse graduates commenced with another ten starting the first-year graduate program in August.

- Scholarships were provided for four undergraduate nurses to complete their registered nurse training during 2006, with three due to commence their graduate program with JHC in February and the other completing an undergraduate degree in July 2007. Four previous scholarship participants commenced their graduate program with JHC during 2006.

Clinical Programs offered this year included diabetes study days, cardiac courses, senior nurse development days, wound management workshops and clinical skill updates. Study days have been offered on effective dementia care within the acute care setting in conjunction with the Alzheimer's Association. Computer courses have also been offered for clinical and non-clinical staff.

Partnerships with TAFE Colleges and Curtin, Edith Cowan and Notre Dame Universities and the University of Western Australia have seen JHC continue to support undergraduate students of nursing, allied health and medicine. Postgraduate students have also been supported in many areas such as midwifery, critical care and emergency.

JHC also continues to support the local community with work experience programs for local high school and structured workplace learning students.



# Volunteers

The Companions of Joondalup Health Campus provide assistance in most areas of the campus through the Volunteer Program. Currently there are 65 members - 54 attend weekly, eight are on extended leave, three attend on an as-needed basis and 14 of the regulars attend twice weekly. The volunteers provide 70 shifts a week.

Services provided include daily visits to all wards with a trolley carrying sweets and emergency toiletries, some magazines and the daily newspaper. There is also a book trolley service to all patients, and suitable reading material is refreshed in the ED from this trolley.

Most of the wards have regular volunteers helping with simple non-medical tasks as a companion for the patients.

Throughout the year fundraising events were held to help provide equipment for the hospital. This year a large jarrah bench seat was donated for the ground floor foyer of the specialist centre, and bedlinen was provided for the unit established in the Maternity Ward to accommodate the parents of stillborn babes.

The program is approved and registered as a non-profit organisation by the Department of Fair Trading, and all volunteers are required to have a police clearance and sign a declaration of confidentiality and conflict of interest document. They must attend an orientation workshop and refresh this information annually. All members are issued with ID cards and a distinguishing apron to be worn during rostered service.

# Pastoral Care

Under the stewardship of Rev. Gerry Doyle the Pastoral Care team made more than 8,500 visits this year, bringing support and comfort to patients and their families.

The team is a multi-faith group, committed to helping patients discover personal, psychological and spiritual resources to cope with illness, trauma and the inevitable challenges of the life cycle. They liaise closely with Islamic, Jewish, Hindu, Buddhist and many other clergy to ensure that JHC can meet the spiritual needs of today's multi-faith society.

Pastoral Care staff and volunteers are dedicated to their task, offering 24-hour coverage every day of the year to those in need.

The team actively assists JHC staff experiencing personal difficulties, illness and loss. They also work with the employee assistance program that provides free, confidential, offsite counselling for those experiencing difficulties that impact on their work.

# Key Personnel

## Executive Members

Anderson, Karina	Administration Manager
Combs, Shane	Deputy Director of Nursing
Cowan, Kempton	Chief Executive Officer
Candy, Wendy	Deputy Director of Nursing
Jones, Diane	Deputy Chief Executive Officer
Harris, Sally	Contract Manager
Lynton, Jim	Project Manager - Redevelopment
Morrison, Robert	Director of Finance
Power, Brad	Director Medical Services
Prime, Liz	Director of Nursing
Whellum, Chris	Deputy Director of Nursing/Redevelopment
Wood, Simon	Medical Director Emergency Department

## Team Leaders

Ashman, Martin	Engineering
Boggs, Samantha	Manager Dietetic Services
Bowran, Michael	Clinical Nurse Manager - Emergency
Brent, Marjorie	Clinical Nurse Manager - Cassia/1West/2West
Burns, Brendon	Clinical Nurse Manager - Critical Care
Coxon, Sue	Clinical Nurse Manager - Rehabilitation & Aged Care
Curtis, Anne	Clinical Nurse Manager 1 East Medical
Dickens, Judy	Private Reception/Medical Suites
Doyle, Breffni	Hotel Services Manager
Gatzonis, Lisa	Clinical Nurse Manager - Education
Glenn, Karen	Clinical Nurse Manager - Maternal & Neonatal Services
Goodrum, Belinda	Clinical Nurse Manager - 2 East Surgical & 1 East Orthopaedics
Grasby, Lesley	Clinical Nurse Manager - Operating Theatres
Greeve, Kim	Medical Administration
Harnett, Eryl	Clinical Nurse Manager - Day Surgery
Luong, Samantha	Manager Social Work Services
McGivern, Kate	Clinical Nurse Manager - Mental Health Services
Mews, Karen	Manager Speech Pathology Services
Moseley, Rona	Acting Clinical Nurse Manager - Paediatrics
Nation, Steve	Risk Manager
Nelson, Lindy	Library
Parham, Glenn	Health Information Manager
Pilcher, Carol	Bed Manager
Polden, Narelle	Admissions
Ryan, Micheal	Purchasing Manager
Sylva, Bev	WA Payroll Manager
Thorne, Bev	Public Reception/Ward Clerk Relief
Ward, Lynley	Manager Physiotherapy Services
Ward, Susan	Service Improvement/Communications Manager
Wigham, Angela	Manager Occupational Therapy Services
Young, Colette	Co-ordinator Employee Relations
Young, Michelle	Clinical Nurse Manager - Private Rehabilitation & Aged Care

## After Hours Managers

Barnes, Sylvana	Gail Coote
Eileen Briggs	Angie Monk
Jocelyn Brouwers	Julie-Anne Oates
Cann, Heather	Gail Rasmussen
Coleman, Brenda	



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