



# Quality of Care Report 07/08

## & 2009 Calendar



[www.gvchs.com.au](http://www.gvchs.com.au)



To work with our community to provide primary health care services that strengthen the ability of individuals and families to make lifestyle choices that will improve health and well being.

399 Wyndham Street, Shepparton 3630 Ph: (03) 5823 3200 Fax: (03) 5823 3299



**On this year's cover are members of our community who featured on last year's cover.** From left to right:

**Judith Mwaliasha, Emmanuel 4 & Lambert 18 mths** - Judith and husband Adam have bought their own home, Vincent from last years photo is now attending school and Lambert is running around with his 5 siblings.

**Raylee Parfett** –refugee counsellor advocate for Foundation House and

Generalist Counsellor for Community Health.

**Rose Moses** – Swahili and Dinka interpreter – see Rose's story inside this report.

**Somaira Ali** – Dari community guide. Somaira is studying to become an accredited interpreter. Somaira tells her story in this report.

**Anne Warren** – Refugee Health Nurse at Community Health

**Cecilia Nakanyi and Joseph 7 1/2 months** – Deo and Cecilia have added to their family of 9 children (includes Deo's 3 brothers) with the arrival of Joseph.



## Clinical & Nursing Services

- Community & Sexual Health Nurse
- General Practitioners
- Health Assessments
- Immunisations
- Practice Nurse
- Visiting Medical Specialists
- Women's Health Service
- Diabetes Education
- Physiotherapy

## Community Health Services

- Alcohol & Drug Counselling
- Alcohol & Drug Supported Accommodation for Women & Children
- Alcohol & Drug Rural Outreach Diversion Program
- Central Intake
- Chronic Conditions Self Management Program
- Accredited Practising Dietitian
- Drink Drive Education & Assessments
- Family Violence Counselling, Advocacy & Support
- Family Violence Outreach
- Financial Counselling
- General Counselling
- Needle Exchange Program
- Parent Education Service
- Quit Education
- Problem Gambling Counselling
- Employment & Learning Coordinator

## Health Promotion & Community Development

- Aboriginal Health Promotion and Chronic Care
- Health Promotion
- Neighbourhood Renewal Program

## Cultural & Linguistically Diverse Services

- Koori Alcohol & Drug Counselling
- Koori Family Violence Counselling
- Refugee Counselling, Advocacy & Support
- Refugee Health Nurse

## Other Specialist Programs/Groups

- Life Skills Program (Building Blocks of Life)
- Community Based Mental Health Program
- Bambino Group (Young Parents Group)
- Cancer Support Group
- Weight No Longer Group



# From the CEO and Chairman of the Board

The Quality of Care Report of Community Health offers an opportunity for us to tell you what we have achieved in the past year, the performances we have delivered and also an opportunity for the community to give us feedback on the report and activities.

Ms Jacque Phillips resigned as Chief Executive Officer of Community Health in June 2008, to take up a position as CEO of Numurkah District Health Service. Jacque had led the Community Health team for 18 months and previous to that she had been on the Board of Management for 11 years, serving 5 years as Chairperson. Jacque has seen the organisation grow substantially during her many years associated with Community Health.

The Leadership and Management group meet weekly to plan and evaluate the various activities of the service, and all staff continue to contribute to ensuring that the programs offered are timely, appropriate and tailored to the needs of our clients and community.

The Board are pleased to announce the appointment of Mr Michael Rogers as the new Chief Executive Officer from July 2008.



## Engaging the Community

Our staff have actively worked with many sections of the communities of the City of Greater Shepparton, the Shires of Moira and Strathbogie.

We have appreciated an opportunity to work with the Rumbalara Aboriginal Co-Operative to promote the health and well being of the indigenous community in a culturally sensitive way.

Our refugee clients continue to be actively engaged by our staff. Last year the Quality of Care Report cover showed a group of refugees and children. This year we have followed that theme and the progress of their journey 12 months later.

## Governance

Board members and the Leadership & Management team undertook Clinical Governance training in March 2008. This workshop was presented by the Victorian Healthcare Association (VHA) and provided participants with an understanding of the roles and responsibilities in leading clinical quality and safety.

The Board also participated in governance education conducted by Victorian Hospital's Industrial Association (VHIA). This training outlined the governance responsibilities of the Board as opposed to operational roles.

The Board face many challenges in the coming year due to legislative changes that will affect all stand-alone Community Health Services.



The Board will become a Company Limited by Guarantee and will be subject to all the duties and obligations set out in Corporation's Act and common law. The Board look forward to this challenging time.

We would appreciate feedback from you about our service and encourage you to contact us by email at [support@gvchs.com.au](mailto:support@gvchs.com.au) or by phone on 5823 3200.

**Jan Ross - Interim Chief Executive Officer & Greg George - Chairman of Board of Management**

# Somaira's Story

## English

My name is Somaira Ali. I am from Afghanistan. I have been in Australia for about two years. We (my family) came to Australia in 2006. We found it really challenging because it was difficult from where we came from and we weren't used to the Australian environment. When we arrived I decided to study at TAFE to improve my English. I have completed Basic Medical Terminology, Certificate II

and III in Written and Spoken English and I am currently involved in Certificate IV in Written and Spoken English.

I am a community guide for the Afghan community at Goulburn Ovens Institute of TAFE. I have been currently interpreting at Salvation Army Employment Plus and Hume Employment Service, at Shepparton Art Gallery (Afghan Embroidery

project exhibition) and it's an honour representing Afghan women in Shepparton.

In June 2008 I got my P-plates which followed gaining my L's in December 2006. It was really challenging but I am really enjoying driving.

I am very thankful to the Afghan community for their help and

kindness and the respect they have given me over these two years. I appreciate the warm reception we've received from the people of Shepparton especially Goulburn Ovens Institute of TAFE, Ethnic Council, Cutting Edge, Salvation Army Employment Plus and Community Health in helping us all integrate in Australian way of life.



Somaira Ali

## Dari

اسم من سو میره علی است و من از افغانستان هستم. مدت دو سال میشود که به استرالیا زندگی میکنم. من و فامیلم به سال 2006 به استرالیا آمدیم. این برای ما یک مبارزه بسیار دشوار بود برای اینکه تفاوت بسیار وجود داشت بین جایی که ما از آنجا آمده بودیم و ما به محیط استرالیا عادت نداشتیم.

بعد از آنکه استرالیا آمدیم من تصمیم گرفتم تا برای تقویت زبان انگلیسی شامل تیف کالج شوم. من آموزش اصطلاحات ساده طبی را تمام کرده و سرتیفیکت 2 و 3 را در زبان انگلیسی را گرفتم و حالا مشغول تحصیل در سرتیفیکت 4 خواندن و مکالمه زبان انگلیسی میباشم. من یک راهنمای کمیو نیستی برای جمعیت افغانهایکه در گلبورن اوون انستیتوت درس میخوانند هستم. من در حال حاضر برای سالویشن آرمی امپلایمنت پلس و خدمات هیوم امپلایمنت، در آرت گالری

(نمایشگاه پروژه سوزن دوزی افغانها) تر جمانی میکنم.. این واقعا یک افتخار بود که از زنان افغان نمایندگی کنم

در سال 2006 ایل پیلیت را گرفتم و به و به تعقیب آن در 2008 لاینس پ پلیت دریوری را گرفتم. با آنکه بسیار دریوری مشکل است اما من واقعا از دریوری لذت میبرم

من از کمیو نیستی افغانها بخاطر پشتیبانی، مهربانی شان و احترامی که بمن در طول این دو سال نشان داده اند بسیار ممنونم. من از استقبال گرم مردم شپرتون و خصوصا از انستیتوت تئف اووم گلبورن والی. کمیو نیستی هلت مرکز صحتی گلبورن والی شورای قومی، سالویشن آرمی امپلایمنت پلس و کمیو نیستی هلت گلبورن والی و کتینگ هیچ صمیمانه تشکر میکنم که همه ما را در مرحله آشنایی ما از راه و طریق زندگی در استرالیا کمک کرده اند.

# January



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<b>DID YOU KNOW...</b> <i>Regular physical activity can help prevent heart disease, stroke and high blood pressure.</i>				1 NEW YEAR'S DAY	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26 AUSTRALIA DAY	27	28	29	30	31



# "Nothing is as Real as a Dream"

## – Debbie's Story

After moving to the area as a single mother in 2000 I endured an abusive relationship which brought about depression.

I found that it was easier to sit at home and not socialise than to face my problems until eventually my case worker at Centrelink encouraged me to contact the Volunteer Resource Centre coordinator at Community Health.

I reluctantly began my Community Information Worker course in 2001, reluctantly because I did not want to mix with the world. Within 1 week of the start of training I had met new people and learnt so much more about my community and what it offered.

Once I finished the course I worked as a volunteer in the Community Information and Referral Service at Community Health for 4 years. Three hour shifts over 2 days soon became all day, 5 days a week as I realised how much I loved the chance to help others in the community. During this time I completed my Cert IV in Workplace Training and Assessment and have since used that training to train others.

While working as a volunteer I was given the opportunity to work for 13 weeks as administration assistant to the Volunteer Resource Coordinator. This role gave me even more insight to services and my confidence was beginning to increase. I was then given the opportunity to continue for another 13 weeks to gain work experience on front desk reception. This experience was

daunting to begin with but with the support of the staff at Community Health my knowledge and confidence grew more.

I then worked with the Employment and Learning Coordinator, participating in conducting a neighbourhood survey in the North Shepparton area. This position meant I was cold calling on residents in the area to invite them to take part in the survey, to assist them to complete the survey and then load the information into a database.

Once this survey was completed I was then offered the chance to work as recruiter for Just Romans, a community enterprise supported by Community Health. Once again I was cold calling on residents at their homes.

My role at Just Romans changed to become Training and Mentor Support Worker for the employees of Just Romans and eventually I became Assistant Manager there. My confidence continued to build and I completed my Cert IV in Community Services in 2007.

I am now working as Community Development Worker for Neighbourhood Renewal and encouraging others in the community to take that first baby step towards any training or employment that will increase their opportunities and build their confidence in themselves; with confidence you learn that you can be proud of yourself.

From a shy depressed person I have become an outgoing, educated, and employed person who is self supporting.



*"Nothing is as real as a dream. The world can change around you, but your dream will not. Responsibilities need not erase it. Duties need not obscure it. Because the dream is within you, no one can take it away"*

Tom Clancy.

# February



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>
<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b> VALENTINES DAY
<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>
<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>

## DID YOU KNOW...

**STROKE-** Remember 'FAST' – Facial Weakness, Arm Weakness, Speech Difficulty and Time to act fast and obtain medical assistance.





# Consumer Feedback

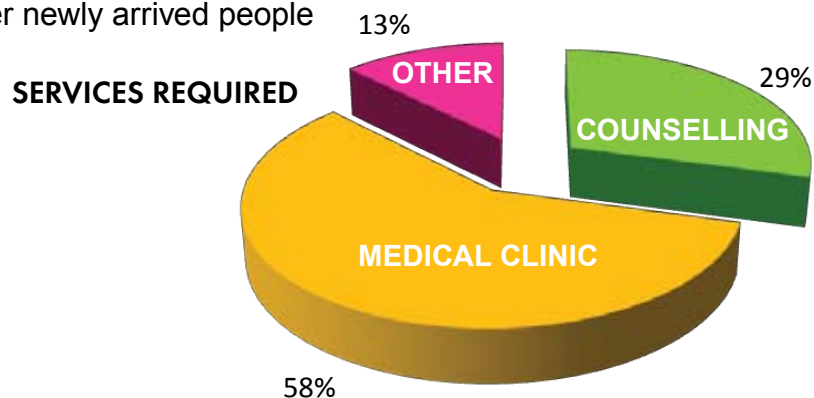
We want to know what you think about Community Health. When we know about what we did well and what we can do better, we can make our service better for you. From the very first time you use a service at Community Health you'll be given a chance to have a say about your experiences. We will give you a copy of the Privacy & Rights brochure. This will tell you about the steps to take if you need to make a complaint. All complaints are fully investigated and reported to the Board of Management. Our Chief Executive Officer will personally write to you about the complaint and how we responded to it.

We work hard to offer you programs to match what you want, so from time to time, we may ask you to fill out one of our consumer surveys.

So what do we do with this information? We use it to make our service better and then we report back to you, through this Quality of Care Report. This year we asked a number of our groups, like the Cancer Support Group and members of our refugee community, as well as many individual clients, about their experience with Community Health.

Here are some of the things you told us during the last year:

- You are impressed by the range of free and low-cost services we offer,
- You especially liked our Medical Clinic
- Other services that you liked a lot were the Alcohol and Other Drug Program and our Refugee Health services
- You want more information about suicide, loss and grief
- You liked the information about support groups, work with refugees and other newly arrived people



**UPON  
ARRIVAL AT  
COMMUNITY  
HEALTH**

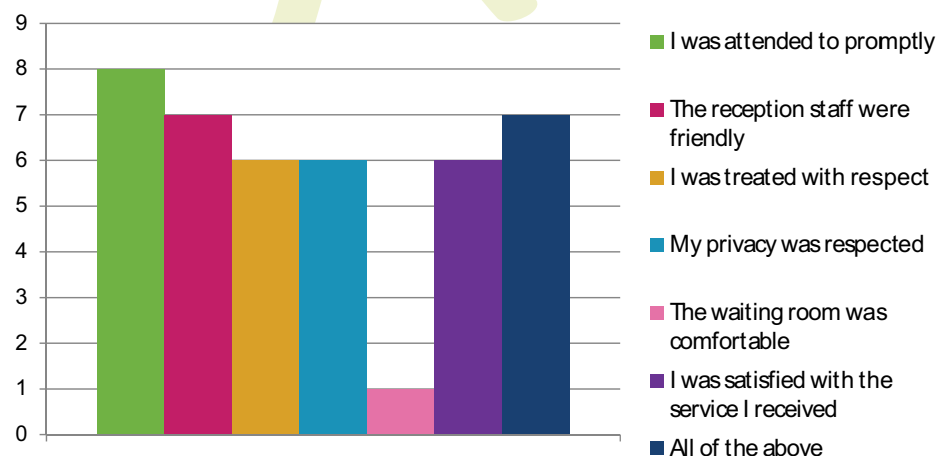
- Finding out about programs at Community Health can sometimes be difficult
- We also heard that you thought we should adopt a personal voice or face to raise the profile of the agency
- You were happy with the way you were greeted on arrival

We also talked to you about our Quality of Care Report which is available to everyone in the community. This is what you told us:

- You liked the way it looked
- It was easy to read and you understood what was in it
- You really enjoyed reading the personal stories
- You would like us to raise our profile by doing things like:
  - Making this report available to people to share with others
  - Putting the report in places like cafés, doctor's waiting rooms, dentists, hairdressers, schools and other agencies

We were very pleased to see that our 2007 report received a score of excellent from you.

We welcome this information and are using it to increase our profile in the community. You'll see and hear more about our programs in the press and on radio as a direct result of your feedback. We will also be increasing the number of Quality of Care Reports we print for 2009, to make sure that more of our community has access to it.





# March

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
1	2	3	4	5	6	7
8	9 LABOUR DAY	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	<b>DID YOU KNOW...</b> <i>That depression and fatigue can often be cured by drinking a glass or two of water?</i>			





**Members of our Cancer Support Group** Anita Norman, Ethel Paynter and Marita Scott

# Consumer Participation

To make sure your voice keeps being heard at Community Health we are a member of the Consumer Participation in Community Health Network. Our Consumer Liaison Officer is working on reviewing how consumers, carers and the community - that is you - are able to become more involved in the decision making processes that influence the direction and development of our service.

You can also become a Member of Community Health by completing the membership application form in our

brochure or on our website. Becoming a member means that:

- You will be kept informed of developments in Community Health
- You may be asked to participate in focus groups on matters affecting Community Health
- You will be eligible to vote at Annual General Meetings

We welcome your comments and feedback. Please ask for the Consumer Liaison Officer if you'd like more information.

## Partnerships

Community Health Service (Community Health) delivers a variety of programs from it's premises at 399 Wyndham Street Shepparton and is pleased to work closely with a number of other agencies who provide valuable services to our community .

Co-located within Community Health are:

- Hume Region Early Psychosis
- Victims Assistance Program
- Australian Centre for Grief & Bereavement
- GVGP After Hours Medical Clinic


- Primary Care Partnership
- Consumer Affairs Victoria
- Work Solutions

Each of these services are run independently from Community Health, however, we believe they enhance our agency by providing a one-stop shop for many of our clients.

We also work in partnership with other local agencies to make sure that when you visit Community Health, if we are unable to assist you, we will refer you to someone who can.



# April



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<b>DID YOU KNOW...</b> <i>That tobacco smoking is the leading cause of preventable death in Victoria.</i>			1	2	3	4
5	6	7	8	9	10 <small>GOOD FRIDAY</small>	11
12 <small>EASTER SUNDAY</small>	13 <small>EASTER MONDAY</small>	14	15	16	17	18
19	20	21	22	23	24	25 <small>ANZAC DAY</small>
26	27	28	29	30	<b>DID YOU KNOW...</b> <i>Laughter is the best alternative medicine available for depression... and it's free!</i>	





# Keeping you safe *Infection control*



Over the past year we have been working to make sure Community Health responded to infection control.

What we mean by 'infection control' is making sure that you, our consumers, and our staff are safe from either getting or giving an infection through the way we do our work.

A great example of this is our Needle and Syringe (NSP) Program. People who use injecting drugs are able to access clean, safe injecting equipment through the NS Program. Using sterile injecting equipment means that the risk of passing on infections carried in blood is lower. The NS Program operates on a harm minimisation principle; keep the harm that can be done to a minimum.

Another example of dealing with Infection Control at Community Health is our Medical Clinic. The Clinic has to meet national standards in Infection Control. In September 2006 our Clinic achieved accreditation from Australian General Practice Accreditation Limited (AGPAL). This means that when you come to see the Doctor or the Nurse

you can be confident that all the equipment and practices used meet the national standards for infection control.

Community Health has also worked hard in 2008 to review its staff Infection Control Procedures. Procedures are documents that set the standards for staff. All staff must follow them and they are there to make sure that you get the right service, in the right time, in the right place. Our new Infection Control Procedure works silently in the background of Community Health, managing the exposure, handling and/or disposal of substances which carry a risk of infection.

## Medical Clinic

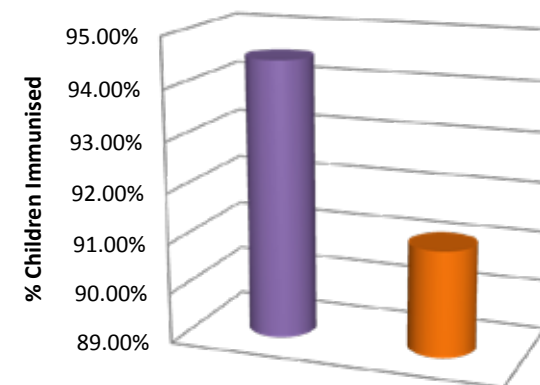
Community Health Clinic offers immunisations for children under the age of eight. Our nurse has been trained to give immunisations and she follows the Australian National Immunisation program. The percentage of our Clinic's children who are fully immunised (94.5%) is higher than that of most other GP Clinics in the Greater Shepparton area (91.1%).

Our Clinic also offers a number of services to refugee families. All refugee family members are able to get a 'catch-up' vaccination program, to make sure they meet the National Immunisation standards.

Refugee patients at Community

Health Clinic also receive a full medical examination. They can get help to make appointments for blood tests and x-rays by our Refugee Health Nurse. This extra support helps make sure our refugee consumers are able to make their way through their new surroundings.

Many of the Clinic's patients also have a Care Plan. Care Plans help people, especially people with a chronic condition, to monitor their symptoms and benefit from seeing other allied services as well as their GP. For example, our GPs can use Care Planning to refer to our physiotherapist or dietitian. Staff of



**2008 CHILD IMMUNISATION FIGURES**

■ Community Health Clinic Immunisations  
■ Other Clinics in area

the Clinic have also made other quality improvements during the past 12 months including:

- Tracking of patient histories to ensure transfers are received
- A contaminated waste audit that lead to correct procedures
- An audit of linen costs which led to a more cost effective linen supply

Community Health Clinic also works closely with the staff of the other programs provided by Community Health Service. For example the Clinic is now using the new Central Intake system to refer patients.

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<b>31</b>	<b>DID YOU KNOW...</b> <i>Eating breakfast can help you lose weight as it helps control sugar cravings later in the day</i>				<b>1</b>	<b>2</b>
<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>10</b> <small>MOTHERS DAY</small>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>
<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>
<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>



# Client Record Audit

The Quality Improvement Council of Australia (QICSA) oversees a system of helping community health services to achieve agreed standards. They do this through an accreditation process. Community Health received QICSA accreditation in 2003 and then again in 2006. We will be reviewed again in 2009. You can see our QICSA Certificate is displayed in the foyer of Community Health.

As part of our accreditation process we audit our client records. The audit helps us to work out if we meet QICSA Standards. Meeting the Standards means that Community Health is meeting the

legal requirements to keep client records.

The most recent Client Record Audit was run by the Working Group on December 10th, 2007. Fifty-five (55) records were randomly audited. We used the Quality Improvement Council Client Record Audit Tool. The following four Standards were reported against (without file content or personal information being sighted):

- Legal Requirements
- Registration Details
- Assessment & Care
- Care Planning

Each client record has to be rated as Satisfactory, Not Satisfactory or Not Applicable. This tells us how well the record meets the Standards.

We use the results of the audit to help us identify what we are doing well and what we can do better. From there we can plan to improve our client record systems and care co-ordination.

For example, we used the information from the 2007 audit to make the following recommendations:

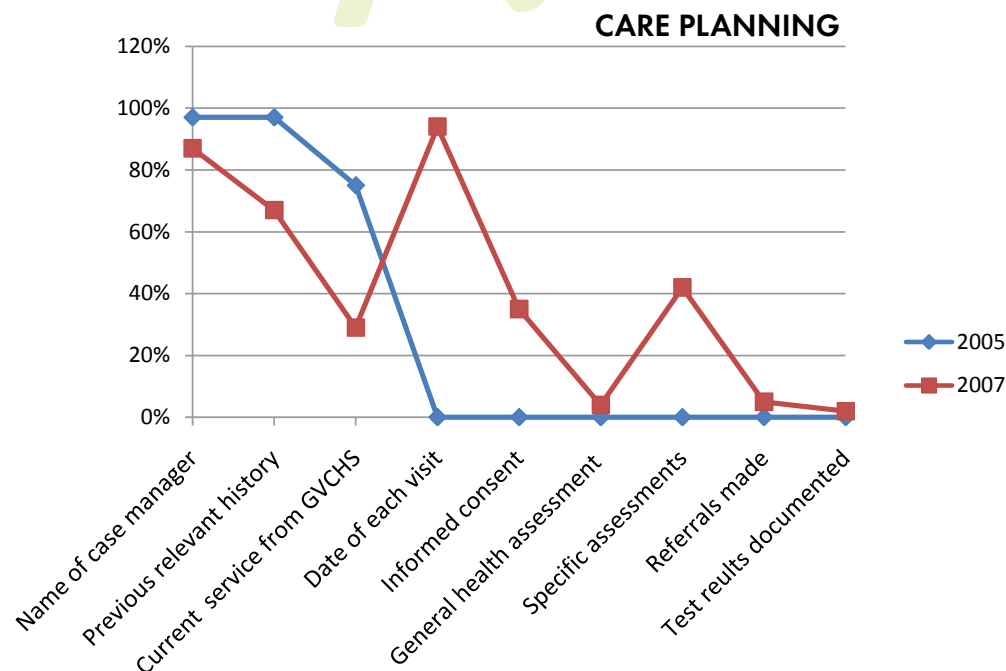
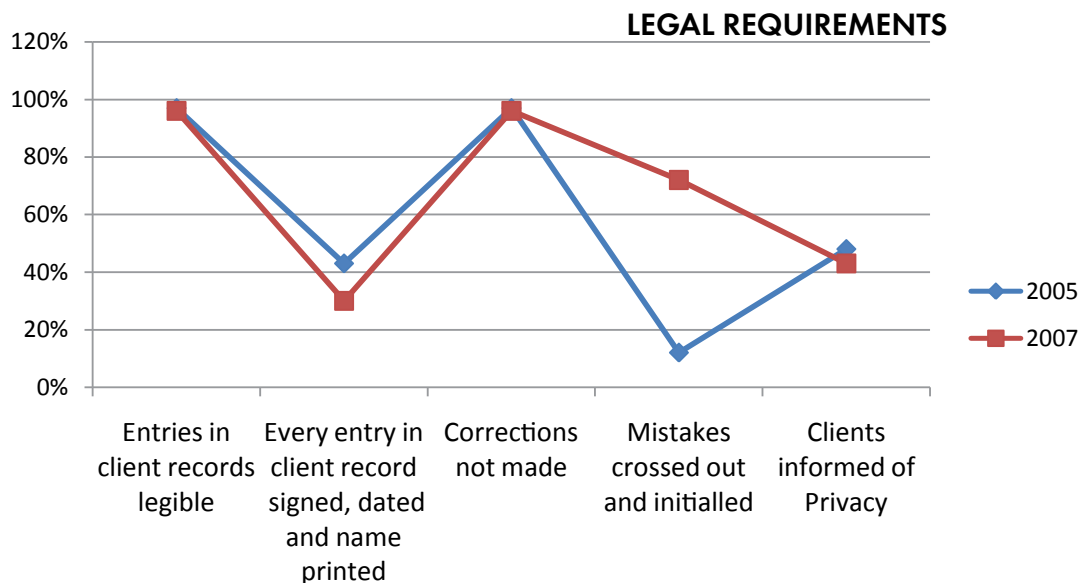
- Staff training
- Improvements to Community Health systems in relation to

client record keeping and client care

- Changes to our Client Privacy and Rights brochure including translation of the brochures into other languages
- Implementation of a new procedure for Complaints Management and feedback

Some of these changes have already been put in place. Others are still being developed and will happen in 2008. Another audit has been scheduled for early 2009.

These are the results of our 2007 Audit:





# June

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>
<b>7</b>	<b>8</b> QUEENS BIRTHDAY	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>
<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>
<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>
<b>28</b>	<b>29</b>	<b>30</b>	<b>DID YOU KNOW...</b> Optimistic men are more than 50% less likely to develop heart disease.			



# Quality & Safety

## Employee Assistance Program and Clinical Supervision

The provision of an Employee Assistance Program and Clinical Supervision Program play an integral part in meeting Community Health Services objectives of providing staff with a satisfying, safe and healthy working environment and also to provide a proactive and evidence based approach to service delivery, whilst striving for excellence through continuous improvement and innovation.

The purpose of the Employee Assistance Program (EAP) is to provide employees with confidential access to professional counselling that assists them to resolve any personal or work-related concerns that may impact upon their work. This is offered to staff at no cost and they are seen by a qualified psychologist in a strictly confidential environment.

## Keeping Our Staff Up to Date

Staff at Community Health regularly take part in training workshops and attend courses to increase their knowledge and actively promote improvement in the services we deliver. During the past year staff have attended many individual professional development days and the following courses have been undertaken by the majority of staff:

- CPR Training
- Preventing Bullying and Harassment
- Cross Cultural Training
- Fire & Emergency Training

Participation in these courses ensures that staff are prepared in an emergency and are able to provide services in a way that is respectful and culturally appropriate.

The purpose of Clinical Supervision is to provide a working alliance between practitioners and supervisors in which they aim to enhance clinical practice, meet ethical, professional and best practice standards, while providing personal support and encouragement in relation to professional practice.

Both the Employee Assistance Program and Clinical Supervision Program aim to ensure that Community Health Service are delivering services to the Community that are at best practice standards levels, by qualified, supported and satisfied staff, striving for excellence.



*Left to Right are Shanel Richardson, Ebony Atkinson, Melanie Sacco, Ian Woolstencroft and Meredith Plunkett*



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<b>DID YOU KNOW...</b> <i>That we should be eating 2 serves of fruit and 5 serves of vegetables per day?</i>			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	





# Central Intake

Central Intake is a new way of working with our consumers. We really want to make sure that you get the right service, at the right time and in the right place. We also know that when someone comes to us they usually have more than one issue they need a

hand with. We want to make sure that when you use our service you get to see everyone that can help, without having to tell your story fifty times.

Now when you come to Community Health you'll usually see the Central Intake Worker. That's when you get to tell us about where you live, your date of birth – all the nuts and bolts sort of questions we have to ask. Then the Central Intake Worker will talk to you about what services you need and which of them is most important to you. You will be referred to a worker who will organise an appointment for you. Along the way you'll have opportunities to see other staff to talk about other issues you might be having, without having to go

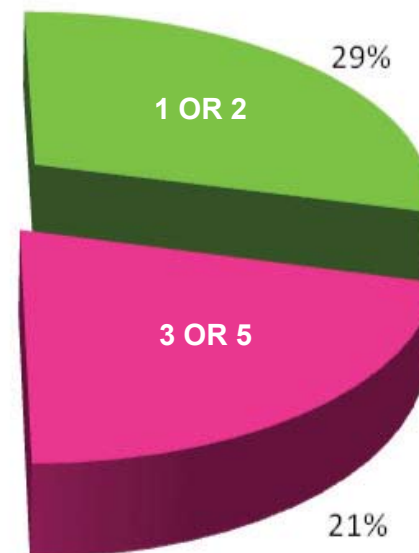
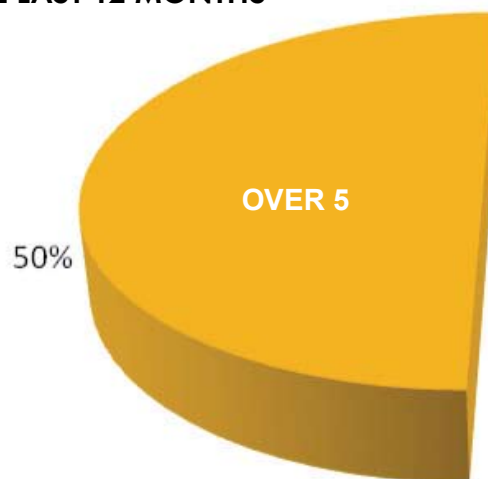
back to the nuts and bolts stuff at all. And if you come to the Central Intake Worker only to discover that we don't have the service you're after, that worker will make sure you get a referral to the right service.

In 2008-09 we are going to build on this work by using a Care Co-ordination system. What will this mean to you? Well you shouldn't really see any changes at all. But in the background one of our staff will be responsible for making sure you get to see all the relevant services you identified with the Central Intake Worker. We are making these changes to make sure you get the best possible care we can offer. We look forward to telling you more about this in our 2009 Report.



Sophie Douglas - Central Intake Worker

VISITS TO THE CENTRE WITHIN  
THE LAST 12 MONTHS



# August



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<b>30</b>	<b>31</b>	<b>DID YOU KNOW...</b> <i>Laughter reduces the negative stress hormones such as cortisol and epinephrine, helping you to feel more relaxed</i>				<b>1</b>
<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>
<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>
<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>
<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>



# Health Promotion

Health promotion programs have been a feature of Community Health for many years. This year we have moved towards making it a part of everything we do. Checking that every activity promotes health sounds simple but we've worked on making sure it actually happens.

For a start, Community Health now has a Health Promotion Policy. This policy will help us to improve and support the health and well being of clients, staff, the community and even the environment.

The Health Promotion policy is also working in the background to help us to go green! We're putting eco-friendly practices in place – like recycling used printing paper. We're working towards making energy saving practices part of our everyday life at Community Health.

Community Health is also using Health Promotion in our planning process. When staff are planning the programs you want they use the Planning and Evaluation Wizard (PEW). This is part of what we do to make sure our programs have quality standards built into them from the very start.

The Health Promotion Policy also supports the work we do with other

health professionals. This year we organised the Healthy Schools, Healthy Future Conference. The Conference was for teachers, health professionals and parents from across the Hume region. People came together to share and talk about issues like body image and promoting healthy eating. The Conference also ties in with work we've been doing with local school canteen managers, through the School Canteen Network. Members of the Network meet every couple of months to support each other's efforts to supply school kids with healthy food choices.

In 2008 we also adopted a Healthy Catering Policy, making sure we actually practice the message about healthy food choices. From now on, whenever you come to an event at Community Health you're sure to have a healthy food choice.

2008 also saw us continuing to work on tobacco control. Community Health has a long history of supporting people

who want to stop smoking. We have now gone smoke-free. Community Health staff and consumers cannot smoke in any of our buildings or cars.

Staff from different Community Health programs also trained to become Quit

Educators. If you need help to stop smoking, or you want to help someone else stop smoking, then we have a staff member ready to talk to you about it.

**"GREEN TEAM"**



**Left to Right are** Amy Schultz, Chris Klitzing, Shanel Richardson, Paul Sefton, Danae Oberin



# September



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<b>DID YOU KNOW...</b> <i>Children need two to three serves of dairy foods everyday.</i>		1	2	3	4	5
6 FATHERS DAY	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	<b>DID YOU KNOW...</b> <i>Children need to have five serves of vegetables every day.</i>		



# Working with our Community



There is growing alarm about the impact chronic diseases have on people and their families. We already know that chronic diseases are common, that many people are at risk of developing chronic diseases and some people are affected much more than others.

Two programs at Community Health are now dedicated to working with people who have chronic conditions. They are the Chronic Conditions Self Management (CCSM) and Aboriginal Health Promotion & Chronic Care Partnership (AHPACC) Programs.

## **Chronic Conditions Self Management**

Generally speaking a chronic condition is one that is not likely to just go away. For example we can get a cold but it doesn't last forever, not like arthritis or diabetes. Good self-management can make living with a chronic condition more bearable. The CCSM team will work with consumers who have a chronic condition to help build their self-management skills.

Successful self-managers are people who actively take on activities that promote health. They understand and know about their medication. They manage their symptoms and they watch over their emotions and relationships with other people. They look after themselves to make the most of life.



*Community Kitchen Participants*

## **Aboriginal Health Promotion and Chronic Care partnership**

Our AHPACC Nurse works with people from the local Aboriginal and Torres Strait Islander Community to increase their access to health promotion programs that are culturally sensitive and to improve self-management skills. AHPACC works to reduce risk of community members developing diabetes and heart disease.

A good example of the work this program does is the Community Kitchen program. In July 2008, in partnership with Rumbalara Aboriginal Health Service and Burri Family Services, a Community Kitchen program started. The Community Kitchen helps people build skills in healthy cooking as well as building a safe learning environment for Community Health staff to work with local community members.

# October



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<b>DID YOU KNOW...</b> <i>Research shows people who eat whole grain foods have a lower risk of developing coronary heart disease and diabetes.</i>				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31



# Rose's Story

## Swahili

Habari zenu, jina langu naitwa Rose na nimekuwa hapa Australia kwa miaka mine. Mimi na familia yangu tumeishi Melbourne kwa miaka miwili na Shepparton miwili pia. Nimekuja Australia pamoja na mme na watoto wawili. Kwa miaka mine nimekuwa nikifanya kazi kama mtafsiri na mkalimani katika lugha mbili. Lugha hizo ni Kiswahili na Dinka.

Ni mabadiliko makubwa kimaisha lakini imebidi tujitume ili kuweza kuzoea mazingira mapya. Kitu kikubwa kinachonifurahisha hapa Shepparton ni mchanganyiko wa tamaduni mbalimbali tofauti. Hujisikii kukumbuka nyumbani kwenu kwa asili kwa kuwa Shepparton imeundwa na watu kutoka mataifa tofauti duniani. Huwezi kuacha kutabasamu kwa kuwa wanajumuia wengine hawaachi kutabasamu kipindi unapokutana nao njiani.

Bado nafanya kazi kama mtafsiri na mkalimani ambayo naipenda sana. Jaribu kufikiri jinsi gani unafaidika kipindi unapomsaidia mtu kuelewa utamaduni wa Kiaustralia, namna wanavyoishi, na mambo mengine muhimu ya maisha. Kitendo cha kuwasaidia maisha yao yawe rahisi kwenye makazi mapya ni kitu cha kujivunia.

Kwa ujumla napenda kumshukuru sana Raylee, mtu ambaye nafanya naye kazi mara nyingi kwenye Kituo cha Afya ambaye aligundua uwezo nilionao na kuniamini kwa kunitambulisha kwa watoa huduma wengine waliopo hapa. Hiyo imeniwezesha kufahamu na kufanya kazi kwa kushirikiana na watoa huduma wengi katika kusaidia jamii yetu.



Rose Moses

## English

Hi, my name is Rose and I have been in Australia for four years. My family and I have spent two years in Melbourne and two years in Shepparton. I came to Australia with my husband and two kids. For four years I have been working as an interpreter and translator in two languages. These are Swahili and Dinka.

It has been a huge change of lifestyle but we have had to cope with many changes. What interests me most here in Shepparton is the multicultural atmosphere. You never feel homesick as Shepparton is a collection of nations from across the world. You never stop smiling as the people in the community never stop smiling when you meet them along your way.

I still work as an interpreter and translator which I enjoy very much. Just imagine helping someone to understand the Australian culture, lifestyle, and all the other necessities of life. Being able to help them to make their life easier in their second home and be part of this is very rewarding.

All in all I appreciate Raylee whom I work with the most often at Community Health who discover me and introduced me to other agencies. I now work with many of them to help my community.



# November



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
1	2	3 MELBOURNE CUP	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	<b>DID YOU KNOW...</b> <i>We provide services in Greater Shepparton, Moira and Strathbogie Shires</i>				



# Fred's Story



Genera Wyley - Counsellor

My name is "Fred", I am 46 years old. In 2006 I confessed to taking monies from my employer. Through this happening my marriage, my job of 28 years, friends and respect of people in our local community were lost. All this took place from having a gambling problem and losing myself on poker machines.

In March 2006 I started seeing a Gamblers Help counsellor, and continued to do so on a weekly basis, up until I went to court in October 2007 and was sentenced to 10 months in prison. I was to spend 9 months of the sentence at HM Prison Dhurringile.

In my time there I saw a Community Health counsellor on a weekly basis, which for me was a tremendous help to have that one on one contact to discuss where my life is and where my future is heading. In the time involved with Community Health at the prison I

attended an 8 week program being "Building Blocks of Life", which I found to be very knowledgeable and rewarding. From this program I grew in self confidence and gained information into financial management (re budgeting), dietary class (eating the right foods etc), to setting goals. One goal I set was to lose weight and get fit. I lost 20kg and am running 5 km a day; a great achievement for me, and I feel great.

With the staff and different presenters, the program was run very well by Community Health. I have now not gambled for 842 days and am very proud of that and I am looking forward to my new life which begins in August 2008 when I am released.



# December



SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
<b>DID YOU KNOW...</b> <i>Most services at Community Health are free.</i>		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>
<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b> CHRISTMAS DAY	<b>26</b> BOXING DAY
<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>	<b>31</b>		







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