

Riverland General Hospital and Country Health South Australia Local Health Network, South Australia

Overview of the organisation

Riverland General Hospital is a 38-bed public hospital in the regional town of Berri, South Australia. It provides a range of medical and surgical services to patients from the Riverland Mallee Coorong region and from across rural South Australia. The hospital works with Royal Adelaide Hospital (the closest large metropolitan hospital) and other regional and primary health services across rural South Australia, to care for patients and deliver telehealth services.

Riverland General Hospital is part of the Country Health South Australia Local Health Network ('Country Health SA'), which is the only non-metropolitan health network in South Australia. This health service covers a population of over 470,000 people across a geographic region of close to one million square kilometres.

Figure 1: About Riverland General Hospital



Small public hospital with private patients and 38 beds



Regional hospital in rural South Australia



6,397 admissions in 2013–14



192 workforce members and 70 volunteers



Most patients from regional and rural areas; large number of Aboriginal and older patients



Range of medical and surgical services, incl. emergency, domiciliary, obstetrics, rehabilitation and mental health

Person-centred care at Riverland General Hospital

Riverland General Hospital has a strong commitment to embedding person-centred care across the organisation. Key planning documents for the hospital and Riverland Mallee Coorong Region, Country Health SA outline a number of strategies to improve person-centred care, including involving consumers in decision-making, improving customer service, and supporting multidisciplinary, multi-location teams to deliver tailored services for patients. In 2013, Riverland General Hospital underwent a major upgrade, which included a new mental health unit, rehabilitation unit, chemotherapy facilities and an onsite pharmacy. This was accompanied by an enhanced focus on person-centred care.

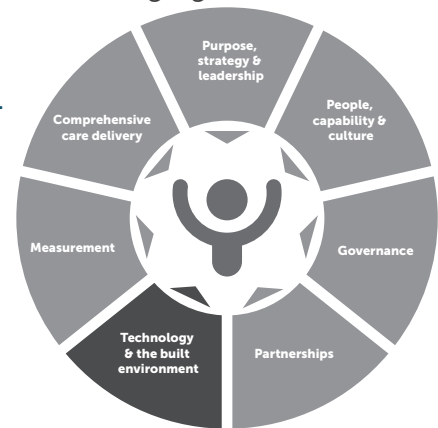
The workforce at Riverland General Hospital say they are only part-way through the ‘person-centred care journey’ and have a long way to go. Key challenges include: ensuring people in rural areas can access quality, safe, person-centred care; delivering integrated services across a large geographic area, with specialists often based in capital cities that visit periodically; engaging with Aboriginal patients, who have higher rates of self-discharge and often indicate a lower level of trust in local health services; and funding mechanisms that incentivise activities rather than health outcomes. Despite these challenges, the efforts of Riverland General Hospital and the Riverland Mallee Coorong Region, Country Health SA have led to substantial improvements and innovations in person-centred care, with examples of excellence in rural health service delivery.

Key features of person-centred care

Riverland General Hospital, Riverland Mallee Coorong and Country Health SA have many attributes that support the delivery of high-quality, person-centred care. This case study is not intended to be comprehensive account of all these attributes. Rather, it seeks to highlight some key examples that other health services can learn from.

Telehealth supports multidisciplinary teams and person-centred service delivery in rural areas

Riverland General Hospital and Country Health SA offer a range of telehealth and telemonitoring services. Within the hospital, videoconferencing rooms and mobile videoconferencing units allow specialists in other locations to treat patients at the hospital, with the support of onsite clinicians. Home-monitoring equipment allows patients and GPs to share patient data with clinicians or elsewhere.



Telehealth plays a particularly important role in supporting multidisciplinary teams to collaborate across locations – often with the specialist in Adelaide, physicians, nurses and allied health workers based at hospital and GPs in local towns.

Riverland General Hospital has identified a number of lessons learned on telehealth:

- Patients need to be front and centre of the service design and delivery
- Telehealth requires culture change for clinicians, who must understand the benefits
- Teamwork and connections with community health services are critical for success
- The technology needs to be relatively simple – even people who have never used a computer or mobile phone will be willing to learn if the technology is simple
- Internet connectivity is a key challenge – SIM cards are more reliable than wifi.

Two key telehealth programs are outlined in **Box 1**. The hospital also provides telehealth services in the Mental Health Unit and has initiatives to improve access to telehealth for Aboriginal and culturally and linguistically diverse communities. These services enable tailored service delivery for people in rural areas, at the preferred location of the patient rather than the clinician.

“It empowers the patient to be in charge of their disease”
VCC manager

Box 1: Selected telehealth programs

Chronic disease

Virtual Clinical Care (VCC): Home monitoring service for chronic diseases

Overview: VCC is a short term (usually 6–12 week) program for patients with chronic diseases who are struggling with self-management of their condition. Through an individualised case management approach, patients are provided with equipment to monitor their symptoms at home. This information is monitored by a chronic care nurse and can be sent to the patient’s specialist or local GP. The patient receives training so they can better understand and self-manage their condition, with guidance from their chronic care nurse. VCC is in its first phase, with plans to scale up and work more closely with GPs in Phase two.

Results: The VCC has received very positive feedback from clinicians and at least 85% of patients reported they were ‘very satisfied’ with the program – including patients who took longer to learn how to use the equipment. There has been a slight reduction in re-admissions and the length of admissions.

Cardiology

iCCnet: Telehealth program for high-risk cardiology patients

Overview: iCCnet supports specialists, GPs and nurses to manage acute patients in their local area. The program aims to improve local management of cardiology conditions and reduce the need for patient transfers to Adelaide. Under the service, local GPs and nurses manage patients, conduct exercise stress tests and add patient data to a centralised database. Patients have appointments with a specialist (usually based in Adelaide) via videoconference, with a local GP or nurse present. The next phase of iCCnet will include secondary prevention and tele-cardiac rehab services.

Results: An evaluation of the ICC-net program found mortality for Acute Myocardial Infarction decreased by around 25%. There has been very positive feedback from GPs and patients – who strongly prefer to be treated in their local area than travel to Adelaide – and strong uptake from Aboriginal patients.

The hospital engages closely with and is highly accountable to the local community

As with many regional hospitals, Riverland General Hospital is a central part of the community and a major contributor to the local economy. Most of the hospital's workforce live locally and engage regularly with patients and their families in their daily lives. The community provides significant support to the hospital through fundraising, volunteering and other activities.

With this comes a stronger accountability to community, which is particularly felt by the hospital's workforce. Local community members expect the hospital to consult them, respond to their feedback and deliver a high standard of customer service. News of mistakes or poor service spread quickly and community members are often quick to issue a complaint or lobby for change.



The Country Health SA Riverland Mallee Coorong 'Consumer and Community Engagement Action Plan 2016-2018' outlines a clear strategy for increasing community engagement. In line with this plan, the Riverland General Hospital has utilised its close relationship with the local community to improve person-centred care in a number of ways.

"Relationships (with the community) are absolutely critical"

Executive staff

Box 2: Riverlands General Hospital's engagement with the local community



Community consultation and advisory committees to inform continual improvement

The hospital consults the local community on major changes to the health service, as well as on an ongoing basis through the Community Network, Health Advisory Council and other consumer advisory committees (these committees are discussed further in the section below). For example, it conducted an extensive consultation process on the hospital upgrade – including road shows, open days, stalls in shopping malls, local advertisements – which led to a number of changes.



Community fundraising to enhance hospital facilities and services

The Health Advisory Council and other community organisations have raised significant sums of money for the hospital, with \$1.2 million raised in 2015–16 alone. This has helped fund palliative care relatives lounge, chemotherapy chairs and equipment, grounds landscaping, maternity patient's family lounge, art and a community wall project is currently in progress.



Volunteers to support patients, families and the workforce

Over the past four years, the hospital has sought to significantly expand its volunteer program – affectionately called the 'Meri Bunch'. Since 2012 when there were 10 volunteers, it has recruited 78 volunteers across the hospital, with more than 1,700 volunteers across Country Health SA. These volunteers play a particularly important role in rural and remote settings and assist with transport services, meal drop-offs, medical records, patient surveys, wayfinding and tea rounds.



Communications and accountability mechanisms to support transparency and continual improvement

The hospital promotes a culture of accountability (but not blame) and encourages transparency around mistakes and areas for improvement. It has an open disclosure policy and encourages feedback and reporting of complaints from patients and community members. It provides regular updates to the community on its performance. For example, every month the hospital provides safety incidence data to the Health Advisory Council and it has a 'Communications Board' on public display with information on hospital activities, performance and consumer feedback. The hospital also publishes newsletters for consumers.



Aboriginal youth engagement to improve health outcomes and reduce self-discharge

Under the Country Health SA Consumer and Community Engagement Action Plan, Riverland General Hospital is working with young Aboriginal people to develop an Aboriginal Youth Engagement Strategy. This has involved extensive consultation with Aboriginal young people to build relationships and develop the strategy. The strategy aims to involve Aboriginal young people to improve health services and reduce self-discharge for Aboriginal people.

The hospital is increasing the breadth and capabilities of its consumer advisory bodies to provide a 'voice' to consumers and inform service improvements

Consumer advisory committees play a number of important roles at Riverland General Hospital, including (but not limited to):

- Providing advice to the hospital on service design and delivery
- Providing advice to patients, families and communities on hospital services
- Collecting and monitoring consumer feedback through formal mechanisms (such as patient surveys) and informal mechanisms (such as verbal feedback)
- Representing patients, families and local communities on hospital governance bodies
- Fundraising for the hospital.



Riverland General Hospital has undertaken a number of initiatives to both increase the size and number of its consumer advisory committees, and to provide training and mentoring to committee members in their functions. Both recruitment and training have been critical to ensure these bodies are effective. This is part of the hospital's work to implement the Partnering with Consumers Standard.

Table 1 lists Riverland General Hospital's consumer advisory bodies and networks and their role in improving person-centred care.

Table 1: Riverlands General Hospital’s consumer advisory bodies and initiatives

Name	Description	No. consumers	Year established
Health Advisory Council	Main consumer and community advisory body, established under the <i>Health Care Act 2008</i> . Provides advice on local health service needs and priorities. Members include consumers, families and the general public	11	2009
Consumer Advisor and Consumer Safety and Quality Advisor	These consumer advisor positions sit on various governance committees of Riverland General Hospital and Country Health SA and receive specific training based on their role	9	2014
Friends of Mental Health Group	Provides input and advice on mental health services to the hospital as well as patients, their families and the public. Members include consumers, families and a select number of mental health workers, including an Aboriginal Cultural and Mental Health Worker	12	2016
Riverland Mallee Coorong Community Network	A register and network that allows community members to provide their viewpoints on local health services and provides them with updates on Riverland General Hospital and other hospitals in the area. Members can choose different levels of engagement, from receiving information only through to sitting on various local health service governance committees	22	2016