

Significant Issues and Trends

Overview

During 2006-07 the WA Country Health Service released its strategic plan for the period 2007-2010 "Foundations for Country Health Services". This followed extensive consultation involving community focus groups and public forums, and meetings with key stakeholders such as Commonwealth and State government agencies, local government, Divisions of General Practice, medical and other clinical specialists, and non-government organisations.

The development of the strategic plan comes at a time when public health services across Western Australia are being re-equipped to better meet the needs of a changing community, to respond to new resource, capability and capacity issues, and to take timely advantage of new technologies and practices in clinical and patient care, and encompasses the WA Country Health Service's three strategic directions:

Networking Health Services

To effectively connect people and services, whether within regions, between regions, or with metropolitan hospitals, or among the different country service providers, is vital to improving both access to health services and the efficiency and effectiveness of those services. Priority areas for achieving this direction include further advancement of the regional hospital role delineation project, implementing effective service planning and management to deliver coordinated and responsive services, develop greater collaboration between clinical and associated staff across regions, and to ensure effective emergency care across the Area Health Service.

Building Healthier Communities

To increase resource allocation for disease and injury prevention, the earlier intervention and smarter management of chronic disease, to provide more home and community based service delivery especially to maintain the health and independence of

older people, to develop mental health, alcohol and drug abuse response capacity, and to improve Aboriginal health.

Strengthening and modernising the country health system

In the face of the challenges of increasing demand for high quality and accessible services combined with workforce shortages, WACHS will conduct management and system support evaluations across the health service, to highlight areas of duplication, and identify opportunities for new and innovative ways to enhance the efficiency and effectiveness of our operational management and service support systems.

Service Trends

There are a number of significant service and demographic trends that impact upon service delivery in country areas, and provide a challenge to the provision of efficient and effective health care.

Population growth and change

The country population is estimated to grow by 13% between 2001 and 2011. The rural and remote population is also being subjected to a number of change variables. These include the extensive growth in mining areas, the South West and coastal towns, an increase in our ageing population who experience a higher incidence of chronic disease and ill-health, the increasing young Aboriginal population, and the significant and persistent disparity in health status between the Aboriginal and non-Aboriginal populations.

Workforce shortages, the medical workforce specialisation, and medical technology evolution

Workforce shortages exist across most medical disciplines essential for the provision of efficient health care services. These shortages have been exacerbated by national and international competition for skilled health care workers, preferences for metropolitan and coastal locations, and the

Overview (continued)

desire by workers to access shorter hours and less demanding employment environments. The increasing preference for specialisation amongst medical professionals has also affected staff recruitment for country areas where there is a heavy reliance on a multi-skilled generalist medical workforce. In addition, an increasing number of highly specialised technologies are only available in the metropolitan area, due to their high costs and relatively low levels of activity.

The burden of disease in country WA

The health status of the people of Western Australia and the quality and availability of health services is generally high across all areas and is demonstrated by mortality rates and life expectancy. However, the WA country population carries a higher burden of disease and demonstrates a poorer health status than the State average. The poorer health status in country WA is significantly affected by the higher proportion of Aboriginal people who live in rural and remote areas, a population cohort that experiences notably poorer health outcomes compared to other Australians.

Patient safety and service quality

Ensuring patient safety and service quality in a rural and remote setting poses a special challenge to service providers. In particular, issues such as recruitment and retention of skilled staff, providing professional and peer support, distance and access factors, and managing low levels of activity in combination with community expectations for locally accessible specialised healthcare, are service delivery factors that must be considered by country health service providers.

Resourcing

State government finance policy requires WA Health to perform within its budget. This is extremely challenging for the WACHS as it addresses increasing demand for health care services from an ageing and growing population, higher workforce costs resulting from staff shortages and retention and attraction initiatives, and the increased costs

of medical practice and technology, innovation, transport and isolation. An extensive program of health service and infrastructure reform including the introduction of new service innovation is being implemented to ensure the WACHS is able to operate on a sustainable financial basis while delivering an effective and efficient health care service that responds to the needs and priorities of country people either locally, within the region or in Perth.

Activity

Hospital activity profiles across the period 2000-06 support the role delineation initiatives implemented by the WA Country Health Service for country hospitals. Country hospital activity has changed significantly where WACHS' six Regional Resource Centres have experienced an increase of over 25% in the number of acute separations over the period, while Integrated District Health Services show relatively stable activity levels. However, over the same period acute separation activity in the small WACHS hospitals has declined reflecting the activity trend in these sites to delivering more non-acute, residential and primary care services.

Over the past three years, activity trends for emergency presentations and non-admitted occasions of service has grown 5% and 6.8% respectively. In the same period the number of Patient Assisted Transport Scheme (PATS) trips has increased by 6% with expenditure for the scheme increasing by 23.7% reflecting the higher costs of transport to and from most rural and remote locations.

In 2006 the WACHS hospitals delivered 4,894 live born infants, provided 8,976 same day procedures and discharged 106,516 cases for 462,536 occupied beddays. It also provided 90,157 individual consultations from a community mental health service. During 2006-07 there were 346,928 attendances to WACHS emergency departments and WACHS small hospitals provided over 170,000 occupied beddays for residential care clients.



Major Achievements 2006-07 - Healthy workforce

WACHS continues to build a skilled, stable and motivated workforce that meets the needs of the diverse country population. The Area Health Service is committed to providing and promoting a healthy working environment, providing opportunities for professional development, ensuring a high standard of knowledge and skill, and enabling the implementation of workforce planning tools to meet demand and to minimise the affects of workforce shortages and gaps. Initiatives focus on workforce planning, attraction and retention, the development of innovative new workforce models, cultivating partnerships with other employers and providers and striving to be an employer of choice.

Specialist Services

During 2006-07 WACHS continued implementation of the Specialist Services Plan, recruiting salaried medical officers and resident specialists in general medicine, general surgery, obstetrics, paediatrics and psychiatry. New and expanded visiting services have been established through the Medical Specialist Outreach Assistance Program, including a sleep apnoea service in the Great Southern, vascular surgery and expanded ophthalmology services in the Midwest, respiratory services to the Goldfields and palliative care up-skilling for regional health professionals in the Midwest, Wheatbelt and South West.

Nurse practitioners

Seventy-three sites across WACHS have been designated nurse practitioner sites for emergency care. Appointments for nurse practitioners will commence by mid-2007 with up to 25 nurse practitioners appointed by mid 2008. Scholarships are being implemented to increase the number of nurse practitioners available for recruitment. In addition, 14 scholarships have been made available to mental health nurses to complete specific mental health nurse practitioner training.

Mental health

Access to acute mental health services in WACHS has been enhanced with the

appointment of additional allied health, nursing, medical, and psychiatric staff across the Area Health Service. Specifically, the Mental Health Strategy prioritised emergency service liaison nurse positions in WACHS - South West and psychiatrist positions in the WACHS - Goldfields and WACHS - Midwest.

Medical officers

Medical cover across the Area Health Service has been improved with additional medical officers in Broome, a Medical Director, a general surgeon and a obstetrician / gynaecologist in the Great Southern, a salaried medical service in Merredin and two district medical officers in the Pilbara. These appointments have made significant advancements in the management of community and hospital based medical issues, and enhanced the development of liaison networks with general and Visiting Medical Practitioners.

Aged care services

The review of the Aged Care Assessment Team (ACAT) Towards Best Practice Manual, has been completed and a framework to address training to meet these best practice and quality measures, ACAT guidelines, and the Australian Council on Healthcare Standards Evaluation and Quality Improvement Program implemented. The ACAT training framework is based on developing unit competency targets that identify competency gaps and needs.

Seven Regional National Action Plan Coordinators have been employed in major regional hospitals to work in cooperation with emergency service, allied health and other staff to improve outcomes for older patients. Aged Care Units have been established in all seven regions, consolidating all WACHS aged care programs and staff in one division streamlining service delivery and providing increased staff support. This will provide a more coordinated approach to managing rural aged care and will enhance and streamline



Major Achievements 2006-07 - Healthy workforce (continued)

service delivery while providing improved support for aged care staff

Cultural Respect

The WA Country Health Service received presentations outlining the purpose of the Cultural Respect Implementation Framework and the role of area health services in delivering these objectives. WACHS has ensured Cultural Respect training is part of all staff orientation and promote training with external agencies such as Divisions of General Practice.

Videoconferencing

WACHS has invested in additional videoconference equipment establishing a robust telehealth network for the organisation. This will provide staff with improved access to meetings and training opportunities as well as enhancing the provision of clinical services by giving patients in remote locations more opportunities to access specialists' services and clinical consultations.

Training Partnerships

During 2006-07 WACHS continued the development of partnerships with Colleges of TAFE to implement specific health industry traineeships in areas such as sterilizing services, personal care assistants, and aged care and community support workers.

Staff attraction and retention

WACHS is actively contributing to the development of community, regional, state and national initiatives for a sustainable rural health workforce. The development and delivery of new models of health care to address the expected workforce gaps and skills shortages is a priority for the Area Health Service, as is developing key organizational competencies to match workforce skills and experience with the needs of the health service and the patient.

Initiatives to attract and retain nursing staff have continued during 2006-07 with the implementation of programs such as the "Kimberley Rotation", where ten registered nurses have been employed on 12 month contracts, spending four months at three Kimberley sites, and the continuation of the "Ocean to Outback" program which supports staff through a range of nursing experiences, in both acuity and location. Further placements will occur in 2007-08.

WACHS is implementing additional initiatives to support access to further education and training for staff, particularly in small sites where low staff numbers mean staff are often unable to leave the clinical setting to attend training. During 2006-07 employees of the health service participated in the WA Health employee survey and WACHS is working to address issues raised in the survey responses.

Aboriginal health services

The 'Foundations for Country Health Services' prioritises Aboriginal health as a fundamental outcome for health care strategies and includes two significant Aboriginal workforce actions that articulate the aim of developing a WACHS Aboriginal workforce strategy and improve access to primary care, child and community health and Aboriginal health services through greater use of allied health assistants. In 2006-07 the WACHS began preliminary work on the Aboriginal workforce strategy by initiating the development of a WACHS Aboriginal Employees Network that will underpin the workforce strategy development process and by liaising with the workforce directorate of the Department of Health during its completion of the DOH Aboriginal workforce strategy.




Major Achievements 2006-07 - Healthy workforce (continued)

WACHS has identified that there is an urgent need to train Aboriginal Therapy Assistants. In partnership with the Office of Aboriginal Health the Area Health Service initiated a conference of key stakeholders including the Disability Services Commission, National Disability Services WA, and the Office of Aboriginal and Torres Strait Islander Health to develop a proposal to create a pool of funding to facilitate the review of the existing Aboriginal Therapy Assistants program and training modules, and to support regional pilot projects focused on widening the scope of this mainstream program to Aboriginal people.

It is a priority across WACHS to employ additional staff for numerous aboriginal health initiatives especially for remote locations in the Kimberley and Pilbara where additional nurses, local administration and other health support workers have been employed. These workforce initiatives have been accompanied by improvements to clinic and health facilities, and staff housing and accommodation to enhance health services and staff attraction and retention. Capital projects to further support aboriginal health initiatives will continue in 2007-08.

Other workforce achievements during 2006-07 included a position established in Great Southern to provide specific Aboriginal population sexual health and blood borne virus programs, and the Wheatbelt expansion of the Wheatbelt Aboriginal Health Service recruiting Aboriginal health professionals for Northam, Quairading and Moora. These Aboriginal health workers are co-located with general practitioners wherever possible, and negotiations with many general practitioners within the Wheatbelt continuing.



Major Achievements 2006-07 - Healthy hospitals, health services, and infrastructure

The WA Country Health Service provides a range of health care services via its regional network model of service delivery. It is committed to ensuring that services are accessible, innovative and responsive to community needs, and are efficient and of the highest quality.

Safety and quality - Falls Prevention

Falls prevention is an integral part of the Department of Health's safety and quality evidence-based care program that aims to prevent falls and injuries from falls while in hospital or attending health care facilities. The Australian Council of Safety and Quality in Healthcare 'Best Practice and Guidelines Resource Kit' developed for Australian hospitals and residential care facilities for the prevention of falls and harm in older people, has been used by the WA Falls Network to advance this objective.

The Network is actively promoting its distribution and adoption in WA health care facilities and the WACHS has introduced the resource through its Falls Prevention Clinical Practice Improvement Program (CPI). WACHS is represented on the State Falls Action Committee with input to the Falls Model of Care which will be delivered across the three phases of ageing.

During 2006-07, four WACHS regional networks (Midwest, Pilbara, Wheatbelt and Great Southern) established multidisciplinary Clinical Practice Improvement (CPI) teams to plan and implement clinical care process improvements to reduce the risk of falls and harm from falls for inpatients and permanent care residents, specifically falls risk assessments and evidence based prevention interventions. The remaining three regions plan to commence implementation during 2007-2008. CPI teams are collaborating with Aged Care and National Action Plan

Coordinators to align falls CPI strategies with the Council of Australian Governments (COAG) National Action Plan/Long Stay Older Patient Initiative.

Some specific area health initiatives and measures to support the falls prevention program goals include gap analysis and benchmarking in the WACHS-Wheatbelt, adult assessments and interventions by occupational therapists and physiotherapists in WACHS-Great Southern and numerous site specific programs at Regional Resource Centres and other service units.

Hospital in the Home


During 2006-07 the Hospital in the Home program has been introduced at a number of sites in WACHS including Albany, Bunbury and Geraldton. This program is to be expanded across the Area Health Service during 2007-08 and will establish consistent reporting mechanisms for home-based care services.

Mental health

Expansion of the Acute Psychiatric Unit in Bunbury (South West) from 15 beds to 33 beds progressed during 2006-07. Capital works are scheduled for completion in late 2007.

Residential care

The Albany Residential Care Line pilot service is currently being evaluated prior to implementation across the Wheatbelt and the South West. This will provide residential aged care services with telephone advice and support that will assist them to better manage sick elderly patients and decrease unnecessary presentations to hospitals and emergency services.



Major Achievements 2006-07 - Healthy hospitals, health services, and infrastructure (continued)

Outpatient data collection

A number of WACHS sites are participating in a new process for collecting information about outpatient services provided from WA public hospitals. The collection will draw on information from metropolitan and country hospitals and will enable data for 23 different clinical services to be collected in a nationally consistent way. This will inform service planning and enable comparisons with services provided in other sites and States.

Patient First

The 'Patient First' initiative aims to empower patients to become active participants in their health care, increasing the patient's understanding of their condition and help them to make informed decisions about their care. Consumer resources have been developed on such topics as informed consent, patient's rights, managing medications, and preventing falls.

'Patient First' is being implemented across all WACHS sites and the District Health Advisory Councils (DHACs) are a key platform underpinning the Area Health Service's strategies for the successful implementation of Patient First. Area management teams are working with their respective DHACs to develop appropriate information and communication plans to inform the community and engage and gain the support of health care professionals. Community communication strategies have included information packages to accompany inpatient correspondence, PO Box distributions and posters in health facilities. Local audits have been conducted to monitor the implementation of the Patient First program.

Accreditation

The Australian Council on Healthcare Standards (ACHS) is an independent authority on the measurement and implementation of quality improvement systems for Australian health care facilities. The ACHS provides a quality improvement framework, namely, the


Evaluation and Quality Improvement Program (EQulP), to assist health care organisations continuously measure their performance and strive for excellence. Over a four year cycle the organisations alternate, annually, between self-assessments and external audits. At all phases of the cycle, the ACHS program provides health services with recommendations for improvement.

During 2006-07, the ACHS conducted a number of on-site audits in some of the regions and reviewed self-assessments submitted by others. The Great Southern, the Southern Goldfields, the Eastern Wheatbelt and the Geraldton Health Service all achieved full accreditation status during their on-site audits in 2006-07. All other regions successfully submitted self-assessments for audit. The Kimberley, the Pilbara and parts of the Mid-West are all due for full organisation wide audits in late 2007, and the South West in 2008.

Capital and infrastructure projects

Numerous capital projects were active during 2006-07 including

- the official opening of Karlarra House, a 56 bed high and low care residential facility saw the completion of Stage 1 of the Hedland Health Campus Redevelopment Project and Stage 2 planning and design process commenced;
- construction of new acute wards was completed at Derby Hospital, with staff and patients transitioning to the new facilities in March 2007;
- construction of the new Kununurra dental clinic was completed in May 2007;
- construction has commenced on the new Denmark health facility scheduled for completion by June 2008;
- the redevelopment of Morawa Health Centre has commenced;
- the refurbishment and upgrade of the Mt Magnet Nursing Post commenced;



Major Achievements 2006-07 - Healthy hospitals, health services, and infrastructure (continued)

- the consultation and planning phases for Stages 1 and 2 of the Carnarvon hospital redevelopment commenced;
- business cases for the redevelopment of the Albany Regional Resource Centre and the Busselton Hospital commenced in 2006-07 with construction scheduled to commence in June 2009 for Albany and September 2008 for Busselton;
- project planning for a new Community Mental Health Clinic and a new 10-chair dental health clinic at the Bunbury Regional Resource Centre was finished in 2006-07 and construction is scheduled for completion in September 2007; and
- expansion of the Bunbury Regional Resource Centre In-patient Psychiatric Unit providing a full spectrum of locally based in-patient mental health services.

In addition to capital projects for health care facilities, WACHS has also progressed a number of projects to improve or increase staff accommodation including

- the purchase and upgrading of a housing complex in Meekatharra;
- the acquisition of new properties in the Pilbara by either purchase or lease; and
- the purchase of five additional one bedroom units and four houses in Esperance and pursuing lease arrangement for two units in Ravensthorpe.

The official opening of the \$1.95 million Computed Tomography (CT) Scanner at Broome Regional Resource Centre was held in August 2006. Clinical linkages have been established with Fremantle Hospital to provide a CT advisory service to the radiographers at Broome. The deployment to country areas of enhanced information technology based clinical systems also commenced in 2006-07 including computed

radiography at the Geraldton Regional Resource Centre and pathology systems at Northam Hospital.


The 2006-07 clinical equipment program delivered enhanced medical and surgical capacity to country areas with bariatric beds and trolleys for overweight patients at a number of WACHS hospitals, new anaesthetic gas monitoring machines in theatres at a number of sites, and the replacement and upgrading of foetal monitors.

Inpatient rehabilitation - Geraldton

With the completion of the new Geraldton Regional Resource Centre in 2006, a dedicated inpatient rehabilitation unit was established. This unit will create a functional area that better meets the need of patients returning from Perth or needing further rehabilitation as an inpatient, but not requiring the acute level of care provided on the general ward. A day hospital facility, catering for a maximum of 12 clients has also been established, providing a coordinated rehabilitation service for eligible community clients to maintain and improve their functioning.

Aged care

WACHS commenced the establishment of Aged Care Coordination Units in each of its regions in 2006-07. The primary role of these units is to build an effective aged care network to better coordinate the planning and delivery of aged care services. The units will also provide support to service delivery staff to enable the delivery of "best practice" care for the aged in their homes and in the community setting including minimising unnecessary hospitalisations.



Major Achievements 2006-07 - Healthy hospitals, health services, and infrastructure (continued)

Nursing workload

Over the past two years WACHS has further developed the 'Nursing Hours per Patient Day' initiative to assess nursing workload for various in-patient areas in rural locations. All in-patient and emergency service activity is captured electronically and compared to nursing staffing levels for designated operational periods. This data is then mapped against nursing activity categories providing nursing hours and FTE for each occupancy at ward level or operational unit. This project will provide the Area Health Service with valuable information on the nursing hours per patient day in each nursing category that will be used to inform health service management in workforce and service delivery planning.

Major Achievements 2006-07 - Healthy communities

Initiatives to improve the health of people living in rural communities focus on activities that influence the health of individuals as well as the whole population. Goals include improving lifestyles, the prevention of ill health, and the implementation of long-term, integrated health promotion programs. Initiatives implemented by WACHS follow extensive collaboration with government and non-government agencies, general practitioners and community groups.

Chronic disease

Four year funding of \$5.5M to address chronic disease has been allocated to Halls Creek, Norseman and the Western Desert communities (Jigalong, Punmu, Parnngurr and Kunawarritji). Health programs to support program outcomes are being finalised and service delivery will commence in 2007.

Obesity prevention

Obesity prevention has been identified as a key strategic direction in the *Western Australian Health Promotion Strategic Framework 2007-2011*. A range of health promotion programs and campaigns, with the capacity to impact on childhood obesity, have been delivered specifically to remote Aboriginal communities in 2006-07. These include the 'Growing Healthy Children' project (promoting healthy breakfasts in remote and Aboriginal communities) and the 'Kimberley Active' Indigenous whole-of-community physical activity program.

Australian Better Health Initiative

Under the Australian Better Health Initiative a number of projects have commenced across WACHS. Funding has been provided to support the implementation of healthier school canteens, to establish dedicated school health promotion coordinators and implement a four-year project for health self-management delivering self-management and improved lifestyle activities in targeted remote communities.

WoundsWest

During 2006-07 WACHS health care services have been active in the WoundsWest project, a three-year initiative established to provide coordinated prevention and management of wounds in the community and acute sector, with specific focus on improving access to expertise in wound care. This project includes the use of surveillance, digital imaging, education and interventions to ensure wound care in WA achieves best practice. The first year, 2006-07, focused on infrastructure development, testing, refinement and wound monitoring.

Smoke Free WA

WACHS is working to be Smoke Free by January 1, 2008. A number of sites have adopted non-smoking policies for their facilities where employees, visitors, volunteers and contractors are not able to smoke in any health service buildings, grounds and other facilities (including cars), nor within designated patient smoking areas or while representing WACHS in any official capacity. Implementation has included a staged approach over a period of time. Planning processes have ensured that the policy implementation supports staff with smoking cessation strategies while at work.

Kimberley word tool

The 'Kimberley Word Tool' has been developed and implemented to assist health professionals communicate with indigenous clients where English is a second language. The tool provides both visual and language prompts for 37 common health messages.

Canning Stock Route Challenge

The Canning Stock Route Challenge is a school based physical activity and nutrition challenge developed by the Pilbara Population Health Unit in 1996. It has since been implemented across WACHS and in 2006-07 was successful in receiving three-year Healthway funding of \$200,000 to revise and update the program.

Major Achievements 2006-07 - Healthy communities (continued)

Mental Health

Under the Mental Health Strategy 2004-2007 expanded community supported accommodation services for people with severe mental illness living in Western Australia is a priority initiative. In WACHS the development of Community Supported Residential Units (CRSU) has continued. These units will provide daily rehabilitation and clinical support to residents and help minimise the risk of hospitalisation for people with severe and persistent mental illness. Fifteen CRSUs in Bunbury are scheduled for completion by mid 2008, 10 units in Busselton by December 2007 and eight in Albany. Management of these units will be placed with local non-government organisations under a tender and contracting process.

The WA Country Health Service has been active in implementing the "Mentally Healthy Western Australia" health promotion program across WACHS sites. The program conducted numerous community briefings, workshops and community events branded with the ABC Mentally Healthy logo (Act, Belong, Commit). WACHS pilot sites were Esperance, Geraldton Albany, Northam/York, Karratha and Kalgoorlie.

WACHS - Midwest mental health staff coordinate training for the "Gatekeeper Program" for community groups providing participants with a range of skills and knowledge that improves their ability and levels of confidence to work with suicidal people.

During 2006-07 the WACHS - Midwest has also continued to provide the internationally accredited "Mental Health First Aid" program to raise community mental health and wellness awareness and skills across communities. The program targets local partnerships and collaborations where potential trainers from local community members, sporting groups, work groups or any other group expressing interest with the training. Support is provided by the

Central West Mental Health Service. This program received a "Healthy Communities Award" at the November 2006 "Delivering a Healthy Community" conference in Perth.

WACHS - South West has continued its "Understanding and Building Resilience in the South West" project in 2006-07 in collaboration with the Injury Control Council WA and South West non government agencies. This project aims to increase resilience in South West communities to reduce rates of suicide and depression.

During 2006-07 the number of mental health patients transferred to Perth from the South West has decreased significantly. This was due to a range of strategies that has increased service access including additional psychiatrists and other trained staff, the introduction of case management processes, implementation of psycho-social risk screening at all hospitals, and the introduction of emergency department mental health liaison nurses at the Bunbury Regional Resource Centre. A new community mental health clinic is being built on the South West Health Campus. During 2006-07, significant progress has been made on the capital works for the new clinic which is scheduled for completion in late 2007.

WACHS - Great Southern has developed a pilot Mental Health Service Directory for the Upper Great Southern with contact details of service providers with a brief summary of the services available, including Police, general practice counsellors and mental health services for consumers. The Directory is available on the WACHS internet site.

The Dementia Action Group in Albany has developed a 'Clinical Pathway for improving the care of people with dementia within the acute care setting'. The tool is being piloted in the Albany Regional Resource Centre, and will be considered for implementation across the Area Health Service.

Major Achievements 2006-07 - Healthy communities (continued)

All Rural Community Support Service (RCSS) clinicians completed the Mental Health first aid training, with representatives from local non-government providers, to build the awareness and mental illness management capacity in rural communities. The trainers are required to provide a minimum of three workshops in the region to complete their training. These trainers are then eligible to complete the Youth Mental Health First Aid training.

Gascoyne Primary Health

During the year Gascoyne Primary Health won a national award under the Australian Crime and Violence Prevention Award program for their School Holiday (Children and Youth festival) program. This program is a partnership of health, Police, shire, local aboriginal community, Departments of Sport and Recreation, Corrective Services and Community Development and provides a range of safe fun activities for children during the holiday period that are safe and fun. The program has had an impact in reducing levels of antisocial behaviour and juvenile crime.

'Stay on your Feet'

The WA Country Health Service maintained a high prominence in 2006-07 activities for the "Stay On Your Feet" (SOYF) Week program across all regions. Activities and promotions included large newspaper features in local papers such as the Albany Extra, local radio interviews and community based promotions. WACHS health promotion and community health staff also participated in organising special events such as the Albany Anzac Walks led by Digger Cleak from the Returned Service League and the heritage walk led by historian and librarian Malcolm Trail.

Patient Assisted Travel Scheme

The Patient Assisted Travel Scheme (PATS) operated by WACHS is a vital program to ensure country patients have access to appropriate medical and health care services. The Area Health Service is currently reviewing the coordination and administration of the scheme to streamline and simplify the

application process. Flexible reimbursement options have been introduced including the commencement of payment processing at the time of travel approval rather than at travel completion, and the implementation of a fuel card scheme.

Pit Stop: Mens Health Program

WACHS, WA Clinical Networks have worked in partnership with Men's Advisory Committee to update the successful Pit Stop Men's Health Package widely used across WACHS. The package relates body functions to mechanics, likening parts of the body to an engine. The updated package has been widely distributed across the Area Health Service and attracts wide interest from local government and interstate health services.

Cancer Care

WACHS has appointed a Rural Cancer Nurse Coordinator to each of the regions. These roles have completed a process of mapping regional cancer services aiming to improve care coordination and linkage for cancer patients between the metropolitan health services and WACHS. The role will also include strategic activities aimed at improving local cancer care delivery and support.

Aboriginal health

WACHS has focused on supporting the evaluation of the WACHS regional area community consultation mechanism (District Health Advisory Council [DHAC]) for their ability to involve Aboriginal people in planning and decision-making resulting in some WACHS areas identifying opportunities for improved Aboriginal consumer participation.

A specific example is WACHS - Great Southern which has facilitated a comprehensive Aboriginal health community advisory body where two Aboriginal members from each regional town form the Great Southern Aboriginal Health Council. This Council meets quarterly providing direct input into WACHS - Great Southern and the Great Southern



Major Achievements 2006-07 - Healthy communities (continued)

Aboriginal Health Service (GSAHS). The Council is supported by the manager of the GSAHS and provides advice to the Regional Director and the Aboriginal Health Service. Matters of strategy, planning and service delivery are routinely discussed and addressed. The Council has recently agreed to become an agency for service assessment and evaluation utilising the mechanism embedded into the DOH 'Cultural Respect Implementation Framework'.

Major Achievements 2006-07 - Healthy partnerships

The WA Country Health Service continues to create stronger links and partnerships with other government agencies, non-government organisations, consumers, community groups, private providers, health professionals, the Commonwealth Government, and those with an interest in the well being of our health system. The role and function of District Health Advisory Councils has been strengthened to maximise local participation and decision-making.

Audiology services

During 2006-07 Australian Hearing provided otoscopy, tympanometry and audiometry testing and diagnosis through a screening program in Aboriginal communities in the Wheatbelt, Midwest, Great Southern and Goldfields. The target group includes three to five year olds in addition to school-aged children. A dedicated and fully equipped audiology room has also been established in the Warburton clinic to enable testing to be provided in this area.

Regional Colleges of TAFE

The close partnership between WACHS - South West and the South West Regional College of TAFE has seen the development of traineeships for sterilising services and health support workers (Personal Care Assistants), further consideration for Indigenous traineeships and 'Frontline Management' training and other allied health areas.

WACHS – Wheatbelt and CY O'Connor College of TAFE established a Memorandum of Understanding for the provision of Commonwealth funded Existing Worker Traineeships for aged care workers in the Wheatbelt. Also in a collaborative effort with the Community Services Industry Training Advisory Body (ITAB), the New Apprenticeships Centre (NAC), and the Apprenticeship and Traineeship Support Network (ATSN), C.Y. O'Connor College of TAFE and WACHS – Wheatbelt, 130 traineeships were provided in Certificate III in Community Services (Aged Care Work) for existing workers and Certificate IV in

Community Services (Aged Care Work) for 25 aged care workers. This collaborative effort has achieved two National and one State training awards.

Satellite Dialysis Unit Busselton

Negotiations were successfully conducted between WACHS - South West and St John of God Hospital Bunbury to establish a dialysis unit in Busselton. The unit is scheduled to be operational by the end of 2007.

Rural Clinical School

Bunbury became a Rural Clinical School site with 10 students choosing Bunbury for their clinical placement. This is an ongoing collaboration between the University of WA, The University of Notre Dame and WACHS - South West to ensure that the students can experience rural medicine to complete their studies.

Regional Homelessness Strategy

WACHS - South West and agencies such as the Department of Housing and Works, South West Community Drug Service Team and local non government agencies have successfully applied for National Homelessness Strategy funding, to pilot a model to assist individuals with multiple and complex needs to access accommodation. An amount of \$161,500 over 2 years from the Commonwealth Government has been secured.

Outpatient and allied health services

A partnership arrangement between WACHS - Pilbara, BHP Billiton, the Royal Flying Doctor Service and the Commonwealth Government was established in 2006-07. This partnership will enhance access to outpatient and allied health services across the Pilbara and improve outreach services in Newman, Onslow, Tom Price and Paraburdoo.

Major Achievements 2006-07 - Healthy partnerships (continued)

Exmouth MPS

During 2006-07 the Exmouth community in conjunction with WACHS - Midwest is progressing the process to implement a Multi Purpose Service (MPS) model. This model promotes a collaborative approach to health funding, and service planning and delivery between the Commonwealth and State Governments and the community. It enables more flexibility in determining the mix of health services to be provided to the community at the local health service level.

Regional Aboriginal Medical Services

Effective partnerships have been established with Regional Aboriginal Medical Services for the provision of a range of services to the indigenous population of WACHS. This has seen improvements in services such as renal dialysis in the Kimberley, allied health, and comprehensive midwifery, antenatal, after-birth and postnatal programs in the Midwest.

Mental Health

In 2006-07 Geraldton was selected by the National Institute of Clinical Studies (NICS) for a collaborative project on the Mental Health Emergency Care interface. This project was an investigation into the practices and needs of both consumers and staff, aiming to ensure that best possible services are provided to people presenting to the Geraldton emergency department. The project entails a review of staff knowledge and skills training and includes 'simulated' patient roles. Systems and processes of referral and access for consumers have been addressed to improve the service.

The South West Mental Health Service, Greater Bunbury Division of General Practice, GP Down South Division of General Practice, St John of God Community Drug Service Team, South West Aboriginal Medical Service, Bunbury and Warren Blackwood Education Districts, Jobs South West, Bunbury Pathways Inc, Agencies for South West Accommodation Inc, Mission Australia, Edith Cowan University, Youth Focus Inc, and Investing in Our Youth

Inc formed a consortium and obtained seed funds to formulate a model and submission for funding under the 'Headspace' program to provide an accessible, effective and sustainable service for youth with mental health/drug and alcohol issues in the region.

Funding was received for a 'Home Assist Project' from the Commonwealth Government for a pilot project to assist people (specifically young men with mental health and drug/alcohol issues) to obtain and maintain tenancies. This project is a partnership with the Department for Housing and Works, Agencies for South West Accommodation, St John of God Community Drug Service Team, Bunbury Accommodation Service, South West Mental Health Service and Bunbury Pathways Inc.

The Great Southern Mental Health Service, Albany Worklink, GSGP Network, and Kipling Cutler and Associates were recipients of Headspace program funding of \$1.5m to work as a consortium to provide an accessible, effective and sustainable service for youth with mental illness and drug and alcohol related issues in the Great Southern. The focus will be on promotion, prevention and early intervention, with treatment being provided by the "Better Outcomes for Mental Health" program.

Great Southern General Practice Network

The WACHS - Great Southern has partnered the Great Southern General Practice (GS GP) Network to develop the shared care network to facilitate the effective electronic sharing of patient information in a timely manner. This, in turn, improves both the level of patient care as well as improving patient outcomes.

Major Achievements 2006-07 - Healthy partnerships (continued)

District Health Advisory Councils

The WA Country Health Service has a strong commitment to consultation with the community and there are 24 District Health Advisory Councils (DHACs) in operation across WACHS. DHACs are an important part of the organisation's community and consumer consultation strategy providing two-way communication and advocacy between the Area Health Service and community members, consumers and stakeholders. These communications contribute to safety, access, and quality improvements, community input into service planning, and support the "healthy community" approach to health service development. Seven DHACs were established in the South West in 2006-07.

In some areas Local Health Advisory Groups have been established to provide a robust link between individual communities, their local health facilities and the District Health Advisory Council. Eight Local Health Advisory Groups (LHAG) were established in the Eastern area of the Wheatbelt, strengthening community and consumer links.

Training and support is provided by the Health Consumers Council of WA and seven DHAC's accessed advocacy training in 2007. The Council will continue to provide training opportunities as required. A DHAC Member Resource Kit providing support materials and audit tools, has been provided to all DHAC members. DHAC Chairpersons meet at least annually and last met November 2006 with the Minister for Health and the WACHS Chief Executive Officer attending. The DHAC Chairpersons' forums provide feedback and recommendations about health issues and service priorities.

During 2006-07 three DHAC members were supported to attend the 'Communities In Control National Conference' in Melbourne. Attendance by these members at the conference aimed to build capacity and connections and strengthen community and

consumer input into country health service improvement.

Aboriginal Health

Significant progress has been made in elevating Aboriginal health as a policy and service delivery priority in 2006-07 through formalising a partnership with the Office of Aboriginal Health (OAH). WACHS invited OAH to be the lead author of the Aboriginal health component of the current WACHS strategic plan: the "Foundations for Country Health Services". The OAH facilitated Aboriginal community and stakeholder consultations, and WACHS management meetings aimed at enhancing WACHS' responsibilities for the health of Aboriginal people.

The "Foundations" strategy prioritises Aboriginal health and details actions to be undertaken across the Area health Service over the next three years. The strategic plan was matched by an implementation plan approved by the Country Health Management Team in December 2006 that articulates five priority action areas:

- partnerships;
- remote service sustainability strategies;
- implementation of the cultural respect framework;
- Aboriginal participation in planning and decision making; and
- clinical or organisational service developments.

A total of thirty-two projects are to be undertaken over the life of the "Foundations" plan and the implementation of the initiatives is embedded in the 2007-08 WACHS Operational plan. The Operational Plan requires all WACHS regional areas to identify, consult and initiate four to five projects each by the end of the financial year. (each project is to be a significant service or system development project undertaken over a two to four year timeframe).



Major Achievements 2006-07 - Healthy partnerships (continued)

Some "Foundations" Aboriginal health projects were identified in 2006-07 such as a General Practitioner / Aboriginal Health Service Integration Project in the Great Southern, development of aged care Aboriginal reference groups throughout the Kimberley, and planning for a Western Desert/Newman Service Integration project in the Pilbara.

WACHS has participated in regular partnership meetings with the Aboriginal Health Council of WA, the Australian Government's Office of Aboriginal and Torres Strait Islander Health and the Office of Aboriginal Health to ensure coordinated state-wide funding and service delivery provider activity.

Similarly, WACHS is a member of the WA Aboriginal Alcohol and Drug Partnership together with the Drug and Alcohol Office, the WA Network of Alcohol and other Drug Agencies, the Australian Government's Office of Aboriginal and Torres Strait Islander Health and the Office of Aboriginal Health.

Regional areas across WACHS are core members of one of the five State-wide Regional Aboriginal Health Planning Forums. The forums have met throughout 2006-07 to prioritise and coordinate delivery of health services to Aboriginal people.

At the local level, effective partnerships have been established with Aboriginal Medical Services for the provision of a range of services to the indigenous population of WACHS. This has seen improvements in services such as renal dialysis in the Kimberley, allied health, and comprehensive midwifery, antenatal, after-birth and postnatal programs in the Midwest.

The partnership established between the Nindilingarri Cultural Health Service (NCHS) and WACHS - Kimberley has been fundamental to the commencement of construction of the new health facility at Fitzroy Crossing that includes new co-located facilities for the NCHS.



Major Achievements 2006-07 - Healthy resources

A key priority for the WA Country Health Service is a sustainable, equitable and accountable health care service to deliver the best health benefit in a safe and quality assured environment. To achieve this outcome as well as routine administration and management practices, WACHS has undertaken some specific actions to ensure resources available to the Area Health Service support the best health outcome for country people.

Resourcing

Following the release in January 2007 of the WACHS "Foundations" strategic plan, the Area Health Service has implemented initiatives to address the recommendations detailed in the plan and improve the information available for health service planning and administration. These include:

- implementing the aboriginal workforce strategy;
- pursuing partnerships with the private and non-government sectors especially with rural general practitioners;
- strengthening financial planning and management systems;
- streamlining and consolidating service delivery;
- developing comprehensive employment remuneration, attraction and retention options; improving systems to recover costs from alternative sources such as DVA, worker's compensation and private health funds; and
- improving WACHS information and communication systems especially telehealth, digital imaging and e-health technologies.

Information technology and equipment

The deployment of enhanced information technology based clinical systems to country regions continued in 2006-07, including implementation of computed radiography at Geraldton Regional Resource Centre and pathology systems at Northam Regional Hospital.

Medical imaging capacity in the WACHS has also been enhanced with the installation of computerised tomography scanners at Port Hedland, Northam and Albany, the replacement of general X-ray machines at Carnarvon, Northam, Esperance, Merredin, Narrogin, Geraldton, Collie and Bridgetown, ultrasound equipment at Albany and Port Hedland, and the installation of new digital screening combined X-ray at Kalgoorlie.

A clinical equipment program has enhanced medical and surgical capacity in country services, including the installation of bariatric beds and trolleys, 12 new anaesthetic gas monitoring machines in theatres at a number of sites, and the replacement and upgrading of foetal monitors.

Telehealth

In country areas there are currently 155 videoconference sites available to health users. Pathways Home funding is enabling the expansion of the number of videoconference units across the rural and metropolitan sectors for mental health services. Funding is being sought through 'Clever Networks' for further infrastructure and broadband access in line with the DOH objective to reduce communications expenditure.

During 2006-07 WACHS telehealth services for the provision of speciality care to rural and remote communities across the State have been enhanced in the areas of psychiatry, neurology, development paediatrics, and geriatric medicine. Pain management, paediatric burns, gastroenterology and hepatology clinics for Regional Western Australia via telehealth video-conferencing have been successfully established and expanded. A trial of the telehealth wound management program was undertaken by WACHS - Midwest in conjunction with Royal Perth Hospital to assist with the discharge of country patients requiring wound management procedures.



Major Achievements 2006-07 - Healthy resources (continued)

Elective surgery waitlist strategy

During 2006-07 WACHS has addressed its elective surgery waiting lists and has made significant improvements in median waiting times and over-boundary cases for the elective surgery categories.

Improvements have been predominantly achieved by refining the administration process, but in order to ensure sustainable gains in waitlist and broader elective surgery reform, a review and improvement of clinical processes is planned as part of the WACHS' "Foundations" strategic plan in conjunction with the State-wide elective surgery reform program. This will be driven through initiatives such as the Ambulatory Surgery Initiative, a review of theatre management, and increasing day of surgery admissions in WACHS Regional Resource Centres. A particular initiative to increase elective surgery activity in country areas was the development of a theatre and recovery nursing program in the South West which has enhanced theatre nurse skills and enabled more complex cases to be undertaken.

Major Achievements 2006-07 - Healthy leadership

Creating an environment that identifies, nurtures and promotes strong leadership at all levels within rural health care services and in the rural community, is vital to the effectiveness of the health system now and in the future. WACHS focuses on recognising, developing and supporting its leaders to create a superior health care service and ensure that all strategic directions are progressed.

Disaster preparedness

WACHS continued its participation in disaster preparedness planning and during the year the Country Health Disaster Management Plan underwent a capability audit and the Area Health Service provided specific disaster management courses and training to disaster management coordinators.

Other activities included:

- contributing to the Hospital Surge Capacity Plan;
- providing volunteers for the Disaster Medical Assistance Team database;
- stockpiling medical equipment and supplies;
- participating in the development of the Disaster Command and Control structure including the processes for activating a health response to an emergency situation through a central point of contact,
- providing case presentations regarding 'Mental Health Involvement' in disaster responses;
- participating in policy development for the Disaster Medical Assistance Team; and
- participating in the pilot Emergency Management course in July 2006 which has subsequently been incorporated in the 2007 training calendar, and in a National Counter Terrorism Exercise.

Leadership programs

WACHS encourages all staff to demonstrate leadership and facilitates leadership development for senior staff and managers. The Area Health Service also encourages mentoring programs for less experienced staff

so they can build their skills and capabilities for higher level supervisory and managerial roles.

During 2006-07 a number of WACHS based staff again participated in the Department of Health's leadership development programs. "Leading 100" and "Building Leadership Development Program" had 23 and 26 employees enrolled respectively.

Specific leadership initiatives in 2006-07 include:

- WACHS - South West and South West College of TAFE developing a Frontline Management training program for all managers and supervisors;
- WACHS - Midwest developing a pilot skills development, supervision and mentoring program for middle / senior managers the Midwest Management Enhancement (MME) Program and facilitating internal learning opportunities, and supporting and encouraging staff to access graduate and post-graduate scholarships;
- WACHS - Wheatbelt Population Health Leadership Development Program assisting a number of population health professionals to gain insight into the qualities and capabilities of effective leaders and develop programs to assist them provide effective leadership.

Clinical governance

The appointment of WACHS Head Office Executive Directors for Medical and Nursing Services and regional Medical Directors and clinical governance teams has provided opportunities to develop strong leadership to improve clinical governance across the Area Health Service. These appointments facilitate enhanced focus on clinical governance issues and initiatives such as staff participation in formal clinical review processes for sentinel events, and the development of policies and practices for clinical incidents review and complaint assessment.



Major Achievements 2006-07 - Healthy leadership (continued)

Aboriginal health leadership

In 2006-07 WACHS employed an Acting Area Director Aboriginal Health as a joint appointment with the Office of Aboriginal Health. The co-funded role seeks to embed Aboriginal health policy and improved service delivery at senior management level within WACHS. Recruitment of a permanent WACHS Area Director Aboriginal Health has begun to consolidate Aboriginal health leadership within WACHS' management structure.

WACHS established an Aboriginal Health Reference Group consisting of a member of each regional executive and leadership within the Office of Aboriginal Health. The reference group assists the WACHS Executive to plan, develop and evaluate effective models of Aboriginal health service delivery across the Area Health Service, and facilitate, coordinate and support Aboriginal health projects emanating from "Foundations for Country Health" strategy.

Mental health

The establishment of the position of Area Director, Mental Health in 2005-06 has allowed the development, planning and implementation of mental health policy, 'best practice' mental health models/services, and quality management and governance across the Area Health Service.

A number of community mental health non-government organisations operating across WACHS participated in training workshops to assist them to implement the DOH's new 'Service Standards for Non-Government Providers of Community Mental Health Services'. These standards cover the service contracting areas such as rights and responsibilities, safety, privacy and confidentiality, consumer and carer

participation, organisational governance and management, accessible inclusive service provision and the delivery of services. In addition, a mentoring system was established to assist these organisations to comply with the new standards and identify areas for improvement.

Environmental performance

All WACHS hospitals have conducted at least one energy audit during the year detailing recommendations for energy saving measures that have been implemented in numerous sites. Energy management is also now a defined part of Area Health Service performance agreements and service unit managers are trained in energy conservation. There are further opportunities for WACHS to implement energy saving strategies in the design and construction of new and upgraded health facilities under the WACHS capital program. In addition to energy audits, metropolitan hospitals are currently conducting audits of water usage to identify deficiencies in water management practices and it is proposed to extend this audit to WACHS hospitals.

Priorities for 2007-08

Healthy Workforce

The WACHS will continue to develop and deliver models of health care services that address the expected workforce gaps and skills shortages. The Area Health Service will provide capacity for further education, training and leadership skilling for country staff, develop innovation in workforce planning, work redesign and service delivery, and provide flexible working arrangements and a family friendly work environment. A particular priority will be the continued development of the nurse practitioner role in rural and remote locations.

While WACHS will continue to rely on recruiting overseas trained medical officers the Area Health Service will continue to ensure that adequate orientation to the operational and diverse cultural characteristics of health service delivery in country Western Australia is provided to overseas recruited staff.

Strategies will be implemented to address priority workforce satisfaction issues including work-life balance, improved leadership and management and developing a safer work environment, and develop key organisational competencies to match workforce skills and experience with the needs of the health service and the patient. Developing and improving staff attraction and retention options will remain a workforce priority.

It will not be enough to rely on traditional supply and demand approaches to resolving country workforce issues into the future. We also need to consider closely areas such as education, training and leadership, workforce planning, new and innovative service delivery models and work redesign, flexible working arrangements and staff support if we are to ensure the provision of quality, safe and sustainable services.

Healthy Hospitals, Health Services and Infrastructure

New infrastructure designed to provide a physical environment that supports the

delivery of high quality, safe and contemporary health services is necessary for WACHS to meet its role delineation plans and strategic reforms. The Area Health Service will also continue to improve infrastructure maintenance ensuring health facilities meet strategic health care objectives, comply with statutory obligations, achieve efficient cost structure and meet duty of care requirements. WACHS' \$627M capital investment program which commenced in 2004, aims to replace outdated and inappropriate infrastructure where necessary under a rigorous planning approach to capital decisions.

Immediate priorities include the development of WACHS Regional Resource Centres, the upgrade or replacement of facilities that have outlived their usefulness and addressing the needs of staff accommodation.

WACHS has implemented operational strategies to achieve the recommended timeframes for elective surgery especially the revised Category 3 admission target of 180 days including flexible theatre allocations, the expansion of day hospital services and trials of more flexible theatre arrangements for general practitioners. The Area Health Service will also introduce initiatives to increase activity in ambulatory surgery, transitional care and 'Hospital in the Home' to meet operational targets and further enhance capacity at Regional Resource Centres to cater for overweight patients, replace transport ventilators, upgrade sterilising equipment and progress a bed replacement program.

The WA Country Health Service will continue the enhancement of telehealth as a technological resource available for clinical care with expanded burns management services in partnership with Princess Margaret Hospital and Royal Perth Hospital as well as a trial for delivering oncology education and clinical services to regional hospitals.



Priorities for 2007-08 (continued)

Investment in country medical imaging will continue with computed radiography and the Picture Archiving and Communication System to be installed in all regional resource centres, the Radiological Information System to be implemented across the Area Health Service and the upgrading of ultrasound equipment at the regional resources centres.

A rural home link 1800 telephone number will be established to enable better coordinated discharge planning for country patients who are leaving metropolitan hospitals.

WACHS in partnership with the Royal Flying Doctor Service (RFDS), will develop a 5 year plan for inter-hospital transport services to provide an effective and an efficient aero-medical service to meet the demand for inter-hospital transport, and address operational costs.

Healthy Partnerships

Two particular priorities for WACHS for developing healthy partnerships are to strengthen its relationships with rural doctors (including general practitioners, salaried medical officers and visiting and resident specialists), involving them in hospital and health service planning and decision making, and to work with workforce partner agencies to develop attraction, retention and recruitment strategies for the rural medical workforce, ensuring they are prepared for rural and remote practice.

Healthy Communities

In January 2007 WACHS received an allocation of 60 transition care (residential care) packages from the Commonwealth Government. Twenty packages will be established in Geraldton, Bunbury and Albany.

The transition care program is a jointly funded initiative of the Commonwealth and State Governments that provides time-limited, goal-oriented therapeutic care in a non-hospital environment for frail older people at the conclusion of their hospital stay. The aim of transition care is to improve or maintain the older person's level of

independence whilst assisting the person and their family arrange longer term care.

Coordination and effectiveness of aged care services in country areas will be improved through the employment of aged care coordinators in each region, enhancement of discharge planning and better support for patients in the community. This will be supported by establishing access to the Residential Care Line in the Wheatbelt and the South West. This project has been piloted in Albany and has proven successful in providing residential aged care services with telephone advice and support that assists them to better manage elderly patients and decrease unnecessary presentations to hospitals and emergency departments.

The chronic disease pilot programs for heart disease and diabetes self-management in the South West will be evaluated in 2007-08. These programs aim to enable people with these chronic diseases to live independently and self manage their illness at home, and reduce the need for in-patient admissions.

Healthy Leadership

During 2007-08 WACHS will continue to progress its leadership programs and initiatives especially supporting employees in the "Leading 100" and "Vital Leadership" programs offered across WA Health where over 70 country staff have participated in leadership development. Mentoring programs for less experienced staff are also provided so they can build their skills and capabilities for senior supervisory and management roles.

WACHS will progress corporate and clinical governance programs with improvements to its corporate and financial systems, work with the HCN, streamlining and integrating information systems, enhancing WACHS' occupational safety and health capacity, and the ongoing development and coordination of health and medical disciplines via the Area - wide leadership and professional support structure established within the organisation.