



## QUALITY OF CARE REPORT 2010 - 2011

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

## Tallangatta Health Service Values, Mission and Principles

### Our Values

- Caring to be sensitive and responsive to each other
- Honesty to be open, trustful and trustworthy
- Integrity to be open, confidential and accountable
- Respect to treat each other with dignity, courtesy and as individuals

### Our Mission

Tallangatta Health Service will be dedicated to developing and providing cost effective, high quality services which are accessible, responsive and accountable to the people of our community and other key stakeholders.

### Our Principles

Tallangatta Health Service is guided in its activities by the following principles:

- The community is consulted to identify effectiveness of service provision and identify changing needs and expectations.
- Best practice is pursued in all areas of health service provisions.
- A culture of professional conduct will be fostered, while striving to enhance the positive image of the Health Service.
- Services provided to the community will be affordable and achieved within the funding guidelines set by Government and the Board Limitation Policies.
- Tallangatta Health Service is a safe and healthy place for all who have contact with the organisation.



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## Introduction

Tallangatta Health Service (THS) is a small rural health service providing a broad range of services to a wide range of people within our community.

The purpose of this report is to inform our local communities and the Department of Health about the services THS provides and quality improvement achievements during the past 12 months. In previous years this report was included within the Tallangatta Health Service Annual Report. It is now being presented as a separate publication.

This report has been developed by a team from THS including clinicians, consumers and community representatives. We hope that the Tallangatta community, our patients, residents, clients, carers, volunteers and staff find the Quality of Care Report for 2010 -2011 interesting and that the information supplied is valuable.

This report demonstrates the achievements and the work that goes on to provide a quality service that is relevant to the needs of the community, ensuring that our efforts pursuing high standards provide the best outcomes for our patients, residents and clients.

This report covers services provided by THS from residential aged care, acute services, community based health promotion to our organisational support services.

## Our Community

THS services the communities and the people of the townships of Bellbridge, Bethanga, Dartmouth, Eskdale, Mitta Mitta and Tallangatta, and all the areas in between which makes up part of the Western Region of the Towong Shire in North East Victoria.



Our population is primarily of English speaking background. According to the 2006 census the percentage of population born overseas was 8.3% of which 5.4% were born in North – West Europe. The percentage of total population that speak a language other than English at home was 1.9%.

THS is one of the larger employers within the local community.

Statistically we have a predominately older population due to farming and rural surrounds.

### Improving Care for Aboriginal and Torres Strait Islanders

This group is represented by very low numbers in our catchment area – 0.8 % (2006 census).

The care provided to these clients uses the same approach as care to all other clients in that it takes their individual needs into consideration and focuses on achieving their individual care goals

### Profile

THS developed in July 1997 when the Tallangatta Hospital and Tallangatta & District Extended Care Centre Inc., merged as one organisation, resulting in the integration of Bolga Court Hostel into the management structure of the existing hospital complex.

THS currently has 66 registered beds

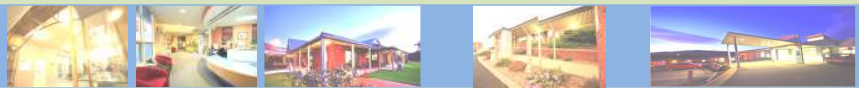
Acute Sub Acute Care -	15 beds
Lakeview Nursing Home – High level care	15 beds
Bolga Court Aged Care hostel – Low level care	36 beds
Total	66 beds

The 15 acute care beds which are state funded are used to provide a variety of services including:

- General/Sub acute care
- Medical care
- Post – surgical care
- Respite care
- Palliative care
- Slow stream rehabilitation services

### Residential Aged Care

Bolga Court Hostel is a fully accredited 36 bed hostel which provides permanent low level residential and respite care. Lakeview Nursing Home is a fully accredited 15 bed facility providing high level residential aged care services.



## Integrated Medical Clinic

THS incorporates the Tallangatta Medical Centre, which provides services to both the community and to patients and residents of the health service.

### Primary and Community Care including Allied Health Services provided at THS includes:

- Diabetes Education
- Dietician
- Mental health and generalist counselling
- Occupational Therapist
- Podiatry
- Physiotherapy
- Social Work
- Women's Health

The health promotion programs focus on the State's priorities in promoting health, wellbeing and physical activities to improve the overall health of the community.

## Home and Community Care

The Home and Community Care (HACC) Services are delivered directly from THS. Initiatives such as home, personal, respite care, property maintenance, District Nursing, and Meals on Wheels are some of the examples of services provided to HACC eligible clients.

During 2010 – 2011 HACC services funded programs which included;

<b>PROGRAM</b>	<b>VISITS</b>
Home Care	2 423
Personal Care	983
Respite care	69
Assessment	228
District Nursing	2 052
Planned Activity Groups	1 191
Property Maintenance	258
Total Visits	7204
Did you know our Meals on Wheels Service delivered 3832 meals?	

## Continuity of Care - Home and Community Care

Mrs E had a fall at home and fractured her hip requiring hospitalisation and surgery at a regional centre. Following recovery and rehabilitation she was discharged home where unfortunately she began to lose her confidence and become house bound with her husband taking over more roles including shopping for food and other house hold items. Mr & Mrs E had been receiving Meals on Wheels and domestic services through the Home and Community Care Program.

Prior to the fall Mrs E had been attending the Exercise & Strength training group at Tallangatta Health Service (THS), but had stopped going after having the fall. She began to lose confidence and did not walk as long or as frequently prior to the accident. She stopped going out and into her back yard, which she used to enjoy.

On arriving home after being out her husband would often find his wife upset and anxious. Through the Home and Community Care Program Mr & Mrs E were receiving Meals on Wheels daily and domestic services weekly.

Following a visit from the home and community assessment officer it was identified that one of Mrs E's Active Service Model (ASM) goals was to have the confidence and increase in strength to be able to walk down the street and look at shops.

A plan was developed to meet Mrs E goals which included:

- A weekly visit by staff who would drive Mrs E down the street and they would walk to the supermarket and other specialist shops of interest on the day
- On completion of the supervised walk they would then visit the bakery for a coffee where Mrs E would often engage staff or other customers in conversation and meet friends.
- With each outing staff assessed her safety and ability to walk certain distance and often would park the car a further distance to enable her to increase her level of activity.

Outcome: - after 4 months Mrs E

- Mrs E has now ceased Meals on wheels
- Has rejoined the Exercise and Strength Training group on her own instigation
- Has regained more confidence both socially and with her mobility
- Has even discussed going on a holiday

### Staff comments:

Staff members have seen a huge improvement in both the physical and psychological condition of their client. Mrs E's mobility has improved, she is happier and more confident; and suggesting ideas of what she would like to do; such as visiting areas outside of Tallangatta. Mrs E does not often use her wheelie walker, preferring to use a walking stick.

This outcome is evidence of the importance of the role of Home and Community Care in providing a change in client outcomes, it allows clients to gain confidence in their own abilities, to participate in activities of daily living, social interaction and improve wellbeing.

## Quality & Safety – Safer Systems

### Falls Minimisation

Definition: *The World Health Organisation defines a fall as "an event which results in a person coming to rest inadvertently on the ground or floor or a lower level"*

Falls and their outcomes on residents remain a concern in health care settings. Each resident at Tallangatta Health Service (THS) is assessed for their fall risks on a regular basis; the rating for each resident demonstrates the amount of supervision and/or assistance they may require with transfers and mobility. A multidisciplinary team will be involved in the assessment process which also includes the implementation and management of interventions to support the residents.

Other interventions that have been used by THS to reduce falls and the impact of falls include; but are not limited to;

- Use of equipment and motion aids such as chair and bed sensors
- Residents referral and participation in strength and exercise classes
- Medical assessment including regular medication management
- Reporting of falls through the electronic reporting tool Victorian Health Information Management Systems (VHIMS) with the review of data at internal committees and externally to the Department of Health.

Table: Department of Health Aged Care Clinical Indicators 2010 – 2011

Statewide Falls Rates (per 1000 occupied bed days)				
	Q1	Q2	Q3	Q4
Bolga Court Hostel	8.04	6.65	5.31	0.00
Statewide Low Care Rates	5.06	4.60	4.96	5.10
Lakeview Nursing Home	20.62	21.91	14.23	7.43
Statewide High Care Rates	6.74	6.72	7.05	6.51

Whilst the reported levels at THS have been higher, it is reassuring to observe that with the implementation of further preventative measures the rates have been reducing.

## Skin Integrity – Pressure Wound Monitoring and Prevention

Definition: *A pressure ulcer is defined as a lesion caused by unrelieved pressure resulting in damage of underlying tissue. Pressure ulcers are an internationally recognised patient safety problem and are largely preventable. <http://www.health.vic.gov.au/pressureulcers>*

A pressure ulcer is caused by unrelieved pressure resulting in damage to the skin plus or minus the underlying tissue; they can also be known as a bed sore or pressure sore. There are four stages to pressure ulcers. Pressure ulcers may develop due to sitting or lying in the one position for long periods. They are a common complication in health care settings, are often difficult to treat and are recognised as one of most common causes of harm to patients. Residents at greatest risk of developing pressure ulcers are those who are immobile for long periods of time, the elderly, smokers and those with a poor nutritional intake. They are commonly found over bony areas such as toes, heels and buttocks. THS recognises that prevention and management of pressure ulcers is an important patient and resident safety issue and a priority for staff.

Strategies that have been used by THS to prevent and manage pressure ulcers include but; are not limited to;

- Use of pressure-reducing support surfaces and equipment to reduce the likelihood of pressure areas developing
- Presentation of data on pressure ulcers internally at Quality Committee and Board of Management meetings, and externally to the Department of Health
- A multidisciplinary team approach including when identified utilisation of Wound Consultants.

THS reports quarterly to the Department of Health on a variety of health related issues one of these being the prevalence of pressure ulcers.

Table: Department of Health Aged Care Clinical Indicators 2010 – 2011

Statewide Pressure Ulcer Rates Stage 1 (per 1000 occupied bed days)				
	Q1	Q2	Q3	Q4
Bolga Court Hostel	0.32	0.00	0.00	0.50
Statewide Low Care Rates	0.31	0.44	0.30	0.34
Lakeview Nursing Home	2.95	2.19	0.00	0.74
Statewide High Care Rates	0.76	0.53	0.64	0.56

During 2010 - 2011 there were no residents admitted or who acquired a stage 2, 3 or 4 pressure ulcer at THS.

## Medication Management

The safe and appropriate use of medications to minimise errors is important for the safety of our residents and patients.

Medication errors are reported through the electronic reporting tool Victorian Health Information Management Systems (VHIMS). A total of 61 medication-related incidents were reported in the health service for 2010 - 2011 these incidents can be classified into more than one category. Each incident is reviewed at the time to see if improvements can be made to prevent the incident from recurring. Incidents are now reviewed by the Quality and Clinical Review Committees which track trends and system failures. The number of reported incidents is less than last year (77 incidents).

The number of residents prescribed nine or more medications are reported to the Department of Health through the Aged Care Clinical Indicators, which are benchmarked against other organisations.

Statewide Rates of Residents prescribed nine or More Medicines (per 1000 occupied bed days)				
	Q1	Q2	Q3	Q4
Bolga Court Hostel	3.54	2.22	2.04	2.00
Statewide Low Care Rates	3.95	3.87	3.78	3.76
Lakeview Nursing Home	4.95	6.57	2.25	6.69
Statewide High Care Rates	3.66	4.04	4.18	4.10

## Infection Prevention and Control

Tallangatta Health Service employs an Infection Control Coordinator who undertakes staff training, auditing and reporting in relation to infection control across the organisation. Practices are continually monitored and improved to ensure a safe environment for patients, residents, clients their families, visitors and staff.

Results of audits are distributed to staff through various means including meetings, memos and newsletters and the actions taken to improve our outcomes.

THS conducts regular audits which includes a clinical audit covering areas such as waste management, drug storage, environmental cleaning, blood and body spills, food services, hand hygiene, linen sharps management, personal protective equipment and occupational exposures from the Hume Region Infection Control Resource and Consulting Service. The clinical audit compliance score for 2010 was 97.9% which was above the 2008 score of 90% (no audit data for 2009) and above the regional aggregate mean compliance of 97.29%.

The organisational audit for the same time period was 92.3% compliance which was consistent with the 2008 score of 92.7% (no audit data submitted in 2009), and slightly lower than that the Regional aggregate mean compliance of 95.26%.

THS participates in the Hume Region Infection Control Group Point Prevalence Infection Survey of our Residential Aged Care Facility Lakeview Nursing Home. This annual audit is aimed to identify and measure the infection rates of our residents over a 24 hour period.

Our infection rate for Lakeview Nursing Home for 2010 was 13.3% (Hume region aggregate = 3.61%) which related to two residents being identified as having an infection. These residents were being managed and treated as appropriate for the infections identified. The rate was slightly higher than for the previous two reporting periods when it was 6.67%.

### Influenza Vaccination Program

Tallangatta Health Service participates in the Victorian Hospital Acquired Infection Surveillance System Coordinating Centre which compiles data on many aspects including staff immunisation.

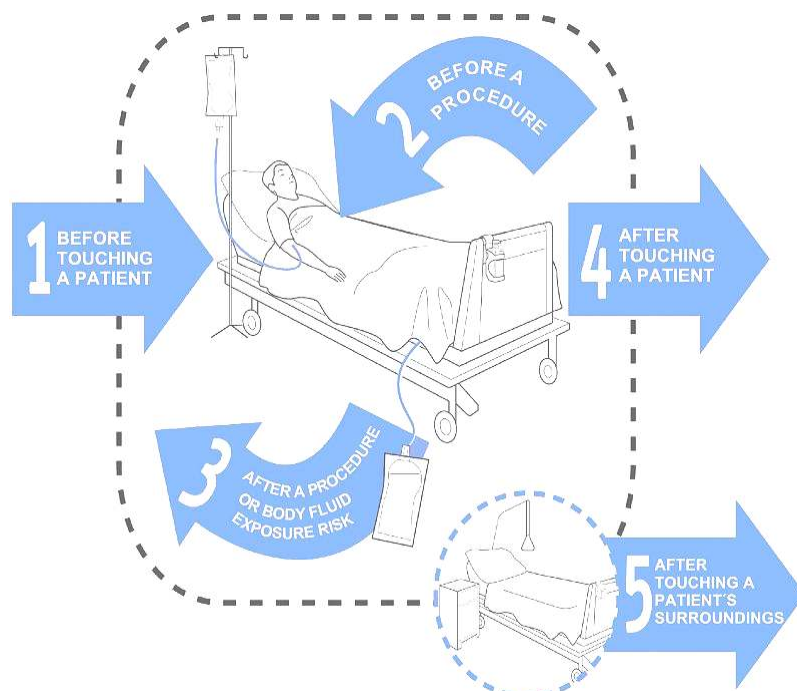
The staff immunisation figures for THS have been relatively stable; whilst below the state aggregate, we have identified approaches that may improve our compliance in the future such as:

- Mobile immunisation service to increase staff access
- Improved documentation
- Staff immunisation record to be completed on employment application.

### Hand Hygiene

Hand hygiene is a simple, low-cost strategy that plays a major role in keeping our patients and residents safe by preventing the spread of most organisms that cause healthcare associated infections. Our focus on improving hand hygiene has continued during 2010 - 2011 with staff education and regular assessment of our performance through external audits.

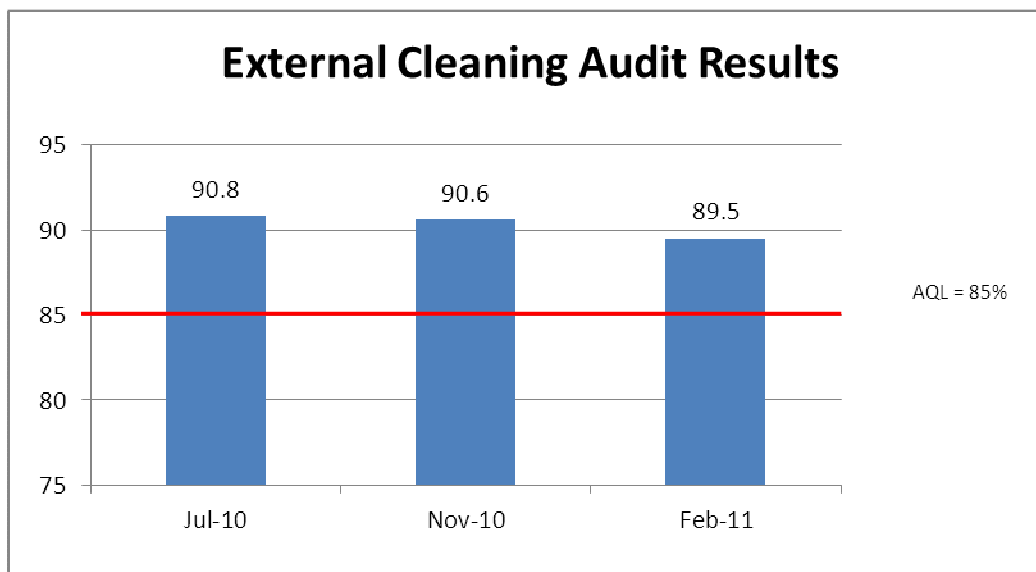
Integration of the World Health Organisation's "5 Moments of Hand Hygiene" into our hand hygiene program allows us to compare our performance with other Victorian and Australian agencies.



## Environmental Services - Cleaning Audits

Cleaning audits are conducted on a regular basis in accordance with the specifications of the department who also state the acceptable quality level (AQL) for each of the functional areas involved. Internal and external cleaning audit scores should be equal to, or higher than the specified ADL for each functional area risk category.

External cleaning audit results 2010 – 2011.



## Food Service Audits -

An external food audit was attended in June 2010 where a very high standard of food safety compliance was achieved.

There were some minor recommendations suggested on the day which were rectified at the time ( for example improved signage, labelling of products) whilst for other suggested recommendation actions plans have been developed which include but are not limited to:

- Review operational documents related to food services
- Review & further develop the cleaning & equipment audit schedules
- Review the location and storage of some equipment

## Feedback Management - Compliments and Complaints

Tallangatta Health Service endeavours to improve the services that it provides to patients, residents, clients, relatives and staff. We do this by carefully listening to feedback that is provided to us. We have a complaints and feedback management policy which details the processes in managing feedback.

We receive feedback in many ways and encourage this interaction. All consumers have access to feedback forms placed throughout the organisation and written information is also provided to patients and residents on admission. There is also an invitation to provide feedback electronically on our website.

Resident Satisfaction Survey Results July 2010		
	Excellent	Good
Residents opportunities to provide feedback to THS	44.4%	55.6%
Residents awareness of the procedure to provide feedback	44.4%	22.2%
Residents comfort in relation to making a complaint	44.4%	33.3%
Staff & management attitude when making a complaint	44.4%	33.3%

Verbatim comments from residents include:

- "I haven't yet had to make a complaint but if I need to I will"
- "Kept up to date and they ring re any problems"
- "One complaint was fixed, so much better now."

The Quality Committee examines the feedback reports, how they are processed and provide guidance for improvement actions. After a complaint has been investigated, any systems that need corrective actions are targeted for change in an endeavour to improve outcomes.

Tallangatta Health Service (THS) participates in the Victorian Patient Satisfaction Monitor (VPSM). The VPSM survey is forwarded to patients discharged from the acute ward identified by the Department of Health. Due to the low numbers of discharges at THS there were no results to report for wave 19 (July – December 2010) and wave 20 (January – June 2011) to provide adequate comparable statistical data.

We have received some verbatim comments to the below survey questions which have included;

### What were the best things about your stay in hospital?

- The kindness and care given during my stay. All staff excellent
- The tranquillity & serenity of the hospital surroundings
- I had the rest to recover

**What were the worst things about your stay in hospital?**

- Did not have any

**What could the hospital do to improve the care and services it provides to better meet the needs of the patients?**

- To the best of my knowledge absolutely nothing. Don't touch, if it's not broken don't fix it
- Can't think of anything, don't know it was good. They need more staff (more for the care of the staff than the patients).

These comments have been forwarded to the relevant departments and actions instigated where applicable.

**Bolga Court Hostel Residents and Friends Committee**

The resident's family and friends of Bolga Court meet regularly and are involved in many of the decisions for the facility. The monthly meeting provides a forum for residents, their family and friends to raise issues to be resolved and to be provided with information regarding Bolga Court.

The committee has also agreed that information from the meetings is also provided to relatives and friends via a written summary of the Friday Facts (resident's newsletter) on a quarterly basis.

This forum also provides an opportunity to plan activities and outings and to provide feedback on events attended.

**Lakeview Nursing Home Residents, Family & Friends Meeting**

The residents, family and friends of Lakeview hold quarterly meetings providing a forum for open discussion about service provision, change of policy and any other related issues in Lakeview between the resident's family friends and health care staff.

THS is currently undertaking an internal Residential Satisfaction Survey which may assist in identifying area for improvements from a resident's perspective. The evaluations and outcomes are to be reported in next year's report.

## Health Promotion

THS is committed to working with the community and other key stakeholders to develop and implement strategies aimed at preventing illness and promoting health and wellbeing. THS is committed to using a coordinated approach with health promotion programs and initiatives. All health promotion activities are planned and delivered on an evidenced based approach; based on the following guiding principles for integrated health promotion:

- To address the broader determinants of health
- Base activities on the best available data and evidence
- Act to reduce social inequalities and injustice
- Emphasise active consumer and community participation
- Empower individuals and communities
- To consider the differences in gender and culture
- Work in collaboration & develop partnerships with other organisations.

An example of one of the Health Promotion activities developed by the team of THS was to engage older persons in the "Pole Walking Program – Well Being Holiday". Two staff members, who completed facilitator training in the "My Health My Life" program, were responsible for arranging the well Being Holiday program.

The target group was identified as those already involved in pole walking in the communities of Bethanga, Bellbridge, and Talgarno with the aim to improve overall health and wellbeing by promoting physical activity and socialisation with others.

Initially there were fifteen clients who registered an interest in the trip with the final number boarding the bus, being thirteen, the average age was 67 years and of mixed genders. 70% of participants completed an evaluation form with all rating the trip as excellent.

Comments documented on the evaluations of what was enjoyed most about the trip included;

- "the social interaction"
- "interacting with other members"
- "I feel physically and mentally stronger"
- "just the company"

Since the bus trip participants have continued to meet and socialise weekly through the Pole Walking Group resulting in improved physical and mental health wellbeing.

The Berringa Peninsula Walking Group which consists of participants from the Bellbridge, Bethanga and Talgarno area's was nominated for an "Active all Ages" COTA (Council of the Aging) award. Nominations for the award are received from a range of Victorian groups who are involved in providing activities for older participants. This group were nominated in the Club or Group category and were judged as one of the four finalists from a field of around twelve groups. The award ceremony was held in Parliament House, Melbourne on the 23<sup>rd</sup> of February 2011. Whilst unsuccessful in winning the main award, the group is to be congratulated on being short listed from a large field of nominations and receiving a certificate.



THS representatives, Lesley Henderson, Karin McRae, Dianne Schmidt and Angela Stephenson with Department of Health Representative.



## Credentialing, Scope of Practice and Certification of Staff

Thorough processes are undertaken to ensure that all staff members including clinicians are certified, credentialed, and working within their scope of practice. These measures include:

- Compliance with mandatory reporting requirements to authorities (e.g. Department of Health)
- Support from an external Director of Medical Service who oversees our medical staff member's credentialing and scope of practice
- Initial and annual checks of registrations and qualifications for our nurses and allied health professionals
- Police checks for all staff members and volunteers
- Working with children checks for staff members, where appropriate
- Documentation of sighted original qualification certificate upon employment of all personal care attendants working in the community
- Regular training updates and study days allocated to staff members to update and maintain skills

## Transitional Care Program

The Transitional Care Program (TCP) commenced at Tallangatta Health Service (THS) in March 2011 in partnership with Albury Wodonga Health (AWH) – Wodonga Hospital.

The main aim is to assist older people in their recovery after a hospital admission through offering a combination of therapies, for example physiotherapy and occupational therapy, service support and coordinated care. It also provides an opportunity for clients and their carers to consider long term care arrangements which may include living independently at home or looking at permanent care options.

The expansion of the TCP to THS means people have the option to continue their recovery close to family and home which is important to regional communities.

Most of the allied health input is provided by AWH - Wodonga Hospital with allied health assistant support and nursing care provided by THS.

Transitional Care Program assists clients and their families to make appropriate decisions about long term care plans and prevent premature admission to permanent care (approximately 80% of our clients return to the community after TCP)

The average length of stay on the program is 7-8 weeks and since the partnership between the health services began there has been ten clients on TCP at THS.

## Distribution, Evaluation and Feedback

The THS Quality of Care Report is made available to all residents, patients, families, carers and visitors to our facility from the front reception, executive offices, waiting areas and main entrances to the Bolga Court Hostel, Lakeview Nursing Home and our Acute Ward.

Copies are distributed to the members of our Board of Management, Auxiliary and key personnel within the organisation.

Further copies are available to the public by phoning 02) 6071 5200.

This Report is lodged with the Victorian Department of Health and also published on our website at: [www.tallangattahealthservice.com.au](http://www.tallangattahealthservice.com.au)

An invitation for readers to provide feedback on last year's report was supplied with both hard and electronic copies. However whilst no formal responses were received, verbal responses indicated that the report had improved the knowledge of the reader regarding the health service.

If you have any ideas, comments or suggestions for the format of next year's Quality of Care report, please contact or write to us. The Quality of Care feedback survey form is available within this report, we would like to hear from you, we value our readers opinions.

Written feedback about this report may be returned to us via mail to:

Tallangatta Health Service

PO Box 77

Tallangatta, 3700

Or you may drop the form at the front reception:

Or you may email your feedback to us at: [THS@ths.vic.gov.au](mailto:THS@ths.vic.gov.au)

Your feedback is valuable to us so whichever way you choose please accept our thanks.

## Glossary

**Accreditation:** A process of regular independent assessment that identifies whether an organisation is meeting the required performance standards and striving for continuous improvement.

**Audit:** An examination of an activity or of documentation to check whether things are being done as expected.

**Clinical governance:** The system through which organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.

**Complaint:** An expression of concern or dissatisfaction by (or on behalf of) a health care consumer or group of consumers about any service offered. Complaints can be formal (written) or informal (verbal).

**Compliance:** The level achieved by an organisation against accepted standards.

**Credentialing:** The formal process used to verify the qualifications, experience, professional standing and other relevant professional attributes of health professionals for the purpose of forming a view about their competence, performance and professional suitability to provide safe, high quality health care services within specific organisational environments.

**Evaluation:** The collection and examination of information to identify the outcome of an activity, intervention or service.

**Health promotion:** The process of enabling people to increase control over the determinants of health and thereby improve their health. To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and realise aspirations, to satisfy needs and to change or cope with the environment.

**Incident:** An event or circumstance in the provision of care that is not the result of a person's medical condition, in which harm, loss or damage resulted (i.e. adverse event) or could have resulted (i.e. near miss).

**Standard:** A statement about the level which organisations and their staff within a particular industry are expected to achieve.



## Tallangatta Community Services

Health Service

### Would any of these services help you and your family?

- 
- ◆ Acute Hospital Ward
  - ◆ Bolga Court Hostel
  - ◆ Consumer Feedback Officer
  - ◆ Community Health:
    - ◆ Exercise & Strength Training
    - ◆ Occupational Therapist
    - ◆ Podiatry
    - ◆ Physiotherapy
    - ◆ Social Worker
  - ◆ Home and Community Care
    - ◆ District Nursing
    - ◆ Meals on Wheels
    - ◆ Planned Activity Group
  - ◆ Lakeview Nursing Home
  - ◆ Tallangatta Medical Centre: 02) 6071 5270
    - ◆ Diabetes Education
    - ◆ Dietician
    - ◆ Border Pathology  
(8.30am to 10.30am—Mon to Fri)
    - ◆ Women's Health

If you have any further questions, or would like to know more about how these services may help you, contact

Tallangatta Health Service

25 Barree Street

PO Box 77

Tallangatta VIC 3700

Phone: (02) 6071 5200

Email: [THS@ths.vic.gov.au](mailto:THS@ths.vic.gov.au)

Web: [www.tallangattahealthservice.com.au](http://www.tallangattahealthservice.com.au)



## Evaluation

We would like to know if you found the Quality of Care Report interesting and informative, and if you would like to see any changes or other information to be added to future reports.

We value your opinion and encourage you to complete this evaluation form and return it to us via mail to:

Tallangatta Health Service  
PO Box 77  
Tallangatta 3700

Or alternatively

Deliver this form to our front reception next time you are in.

1. Did you find the 2010-2011 Quality of Care report interesting and informative?

YES  NO

2. Did you find the report easy to read?

YES  NO

3. Did you like the presentation of this year's report?

YES  NO

4. Did you think the length of the report was adequate?

YES  NO

Please add any comments below or suggestions for further reports.

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