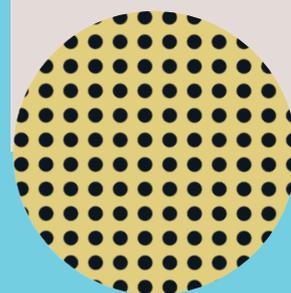


# Quality of Care Report 2020-2021



gateway  
health

People living well

# About this report

The Quality of Care Report 2020-2021 is organised under the five essential elements of Gateway Health's Quality Framework:

**Safe:** Services are safe and minimise the risk of harm to clients, carers, community members and staff.

**Effective:** Skilled staff using best available evidence within an environment of learning and improvement to optimise health and wellbeing for clients, carers, families and communities.

**Equitable:** Delivery of and advocacy for fair, timely access to services according to need and choice.

## **Individual and Community Driven:**

Services guided by the needs and choices of individuals, their carers and family, and the broader community, are provided in a friendly, caring environment.

**Connected:** Services coordinated to provide integrated seamless care for clients and their families.

The report includes stories and examples that demonstrate how these quality and safety objectives are put into practice and how we are working in partnership to respond to the health and wellbeing needs of our community. It also highlights the commitment of our staff in providing great care.



Gateway Health acknowledges the Traditional Owners of this land on which we stand and pay our respect to the Elders, past, present and future, for they hold the memories, the traditions and the culture of all Aboriginal and Torres Strait Islander peoples.



Gateway Health acknowledges and recognises people from different nationalities, cultures and identities. We are committed to providing an inclusive service and work environment where individuals feel safe, accepted, affirmed and celebrated.



# Welcome to Gateway Health's Quality of Care Report 2020-2021

A commitment to achieving Gateway Health's vision of **People living well** means that we work with our staff, healthcare partners, consumer representatives, clients and their carers to ensure our services are efficient, effective and safe.

This commitment underpins Gateway Health's Quality Framework. Adopted in February 2019, the Quality Framework is based on the principles and effective practice of clinical governance and provides a systematic approach to monitoring and improving service quality.

This framework recognises that everyone, from volunteers and frontline practitioners, to managers and members of the Board, is accountable to clients and the community for assuring the delivery of services that are high quality and continuously improving.

Distribution of the annual quality report is a key means of demonstrating this accountability. The report provides feedback to the community about our performance against quality indicators and standards, and highlights achievements and actions that contribute to continuous improvement in the services we provide.

Despite the challenges created for all of us in working diligently to prevent, contain and manage the impact of COVID-19, Gateway Health has achieved much more than we might have expected in these circumstances.

Highlights include:

- introduction of the new Strategic Plan 2020-2023
- planning for construction of a new Drug and Alcohol Residential Rehabilitation facility in Wangaratta
- rapid establishment of the HeadtoHelp service in Wodonga
- opening the headspace satellite service in Wangaratta
- the purchase of land in Wangaratta to enable construction of additional facilities
- holding two Rainbow Balls at the same time, across two states under different restriction levels and in different formats (online and in person)
- maintaining ongoing support and advocacy to families and communities affected by the 2020 bushfires.

These achievements represent the tireless efforts of our hundreds of staff, volunteers, community reference group members and healthcare partners who work with us to plan, deliver and continually improve the services we provide to individuals and communities.

Most importantly, this year I would like to acknowledge the amazing efforts of our staff in adapting our programs and finding new ways of working to maintain services as much as possible.

Over the 2020/21 year our staff:

- connected with clients and their families regularly via phone calls and sent out care packs
- became experts at video conferencing across different platforms
- provided services in new and unusual places, including verandahs, doorways, paddocks and community centres
- became experts in assessing and mitigating risks of infection transmission, masking up and checking in and out.

They did all this while at the same time keeping their own families safe, working from home, and many of them home-schooling children as well.

Thank you to each and every one of you and your families, and to our clients who have adapted along with us to these new ways of working.

Leigh Rhode

Chief Executive Officer



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# About Gateway Health

Gateway Health is a not-for-profit company limited by guarantee, and a registered Community Health Service under the Health Services Act 1998 (Vic). The service as we know it today was formed through the merger in 2014 of Gateway Community Health in Wodonga and Ovens and King Community Health Service in Wangaratta. It is built on the strong history and deep connection to the communities it has served for many years.

Today the organisation employs over 380 staff of diverse ages, experience and backgrounds, providing a range of primary health and social services across the Ovens Murray region in North East Victoria and parts of Southern New South Wales.

Gateway Health recognises that staff and volunteers are the organisation's greatest asset, and are critical in representing and delivering on the organisation's

values and aspirations. This recognition underpins our commitment to creating a workforce that reflects the diversity of the community we serve.

Gateway Health's 380 plus staff are supported by a network of volunteers, as well as consumer partners and students, who actively contribute across all parts of the organisation.

Services are provided across the life span - from before birth, through childhood, adulthood and older age.

Many of these services provide a link between hospital care, aged care and primary healthcare across many other health organisations, to ensure seamless integration of care between healthcare providers.

Services are delivered through a mix of centre-based programs operating from Gateway Health facilities in Wodonga, Wangaratta and Myrtleford, and outreach to rural communities across the region.

Over the last 12 months we have seen greater use of telehealth as a way of providing access to services in the face of COVID-19 restrictions.

Gateway Health collaborates at many levels with other sectors, such as justice, education, housing, agriculture and employment, to support individual client goals and needs, and to strengthen the systems and environments that support the health and wellbeing of the individuals and communities we serve. This is actioned through working in partnership with communities, local government, and a range of public and private agencies and entities.





## People living well

### The Strategic Plan

In 2020 Gateway Health adopted a three-year strategic plan that was developed in close collaboration with the board of management, staff, community members and partners from across the region. It outlines the future that Gateway Health strives for and the areas of development and outcomes that the organisation is focusing on.

The Strategic Plan links to the organisation's 10-year Service Plan 2019-2029, which maps out the changing demographic, social and political landscape in the region, and the priorities for Gateway Health in responding to and meeting the needs of the community.

The strategic plan affirms the organisation's vision, purpose and values, and this year introduced a set of principles that underpin the way we work. These principles are highlighted throughout this report to show how they work together with our values to underpin organisational culture, strategy and the way we deliver our services.

### Our purpose

To provide care and services that connect the community and strengthen individual and population health and wellbeing.

Gateway Health serves all people, and is committed to improving individual and population health outcomes. We will do this by providing health care and support to individuals and communities in times of need, and by actively working with our partners to address the social and environmental determinants of health.

### Our values and principles

Our values reflect the way we interact, connect and work with every client, with partners, with volunteers and with one another.

- We CARE
- We ACHIEVE
- We LEARN
- We WORK TOGETHER
- We INNOVATE

Our principles shape the way we plan and design our services and business systems.

- We advocate for fair and equitable access to health care and wellbeing services for all.
- We respect the strength of individuals and the community, and their capacity to recover from adversity.
- We recognise the importance of adaptability and responsiveness to enable us to deliver on our commitment to the community.
- We actively listen and work alongside the community and each other to design and deliver better solutions.
- We believe a learning culture is critical to enhancing the wellbeing of staff, clients and the community.
- We contribute to creation of a connected and integrated health and community care system to achieve the best outcomes for our clients and community.

## The communities we serve

While the region's population is mainly concentrated in the regional cities of Albury Wodonga and Wangaratta, many people live in smaller townships in the hills and valleys of the surrounding area.

The communities in North East Victoria and southern NSW are changing. Originally founded on agriculture, manufacturing, and tourism, many parts of the region have been impacted by long standing drought, and more recently flood, bushfire and pandemic. These events have led to many changes in the economic as well as physical environments.

Populations across Local Government Areas in Gateway Health's catchment are predicted to increase by very small numbers in some areas, with Wodonga and Albury projected to grow the most.

### Did you know...

Our catchment area of 53,500km<sup>2</sup> includes eight Local Government Areas and a population of 170,000 people.

We provide services to 6% of the total catchment population – a service penetration of double the state average for community health services.

Population across the region is estimated to grow by 22,000 (13%) by 2031.



# Safe care

Gateway Health seeks to provide services that are safe and minimise the risk of harm to clients, carers, community members and staff.

Principle - We believe a learning culture is critical to enhancing the wellbeing of staff, clients and the community.

One of the most challenging issues throughout 2020 and 2021 was ensuring the safety of clients, staff, and volunteers while continuing to deliver services effectively in the COVID-19 pandemic. This was particularly difficult as we were supporting clients, communities, staff and their families to recover and move forward after the bushfires of January 2020 that impacted large areas of our catchment.

Gateway Health moved quickly to develop a Pandemic Plan and implement our Business Continuity Plans. Under Victorian Public Health Orders, almost half of Gateway Health staff moved to working from home by the end of April 2020.

With flexible and innovative support from the Business Services; Information, Communication and Technology; and People Working Well teams, we were able to ensure that home offices were safe and secure and that wherever possible, services could continue via digital models. This was a different world and unfamiliar work for many of us, especially our clients, but we adapted very quickly.

The suspension of group work and limited contact with clients resulted in significant changes to some programs. Every effort was made to provide face-to-face services for clients who needed it.

As the pandemic continued to unfold, unprecedented health and workforce advice, restrictions, directions and announcements came at short notice from both the Victorian and NSW State Governments and the Commonwealth, impacting the organisation in ways we could not have foreseen.

We maintained our focus on the safety of staff and clients by monitoring, investigating and actioning reported incidents, issues, complaints and suggestions for improvement. We also received many compliments from clients and families.



## Occupational Health and Safety

Gateway Health takes the provision of a safe workplace very seriously. We encourage the reporting of issues and hazards that impact the health and safety of our staff and clients, and we investigate and act upon each report.

Over 2020/21 we saw a downward trend in total incident numbers, with a total of 100 incidents reported compared to 192 in the previous year. These numbers, particularly those relating to occupational violence and aggression, were impacted by having less services in the office due to COVID-19.

Gateway Health has always prioritised staff health and wellbeing. Our focus on this has strengthened as a result of the challenges the ongoing pandemic has presented, such as the risk of staff feeling disconnected from their colleagues, clients and the organisation through long periods of working from home, the stressors of lockdowns, restrictions and border issues, fatigue and anxiety.

Actions were taken to address these issues and risks.

- We developed team wellbeing plans and online “Boost Yourself” lunchtime sessions run by staff for other staff, with themes such as mindfulness, laughter, art/creativity, yoga, stretching at work and many others.
- Regular communication was provided via weekly written updates and the occasional video, to ensure staff were up to date and informed of all pandemic related issues that had the potential to impact the organisation, our clients and service delivery.
- In September 2020, in the middle of the long Victorian state lockdown, Gateway Health delivered 324 Arnolds Wodonga fresh fruit boxes with a card from the Board Chair and CEO to all staff members’ homes. This was quite an exercise in logistics as we learned how spread out our staff are! A number of staff also jumped in cars and delivered to those outside the Arnolds delivery zone, ensuring that everyone got a fresh fruit surprise.

- In December 2020 staff across all program areas came to the ‘party’ with Covid-themed Christmas videos in place of our regular ‘Deck the Halls’ office decorating competition. The prize went to the Rural Health Team with their brilliant music video of “The 12 Days of Covid Christmas”.

Reported issues and incidents of staff stress, frustration and potential impacts on client safety caused by a number of unreliable information and technology systems peaked in July and August 2020. This issue, with a number of other factors, has led to a complete revamp of Gateway Health’s bandwidth, IT system structure and networks, and the purchase of new equipment.

Work that was started in 2019 continued through 2020/21 to ensure that staff stress was reduced and efficiency increased by ensuring reliable access to the information and systems they need, when they need it. The number of these issues reported has since decreased significantly.



The Rural Health Team Dec 2020 - 12 Days of Covid Christmas via Zoom

## Clinical incident reporting and management

Gateway Health monitors, investigates, actions and reports clinical incidents to ensure we maintain high quality services, client safety and identify any areas where we can improve.

We have seen a downward trend in total clinical incident numbers over the past year. In total, there have been 60 clinical incidents over the 12-month period, in comparison with 120 clinical incidents in 2019/20.

The majority of these incidents pre-Covid occurred within Gateway Health buildings and included issues relating to aggressive behaviour and patient/client falls. All of these categories have declined over the

last 12 months, impacted by fewer clients coming on site due to COVID-19 restrictions.

Actions taken to address issues identified through clinical incident reporting included:

- development and commencement of an Incident Review Panel to:
  - review all category 1 and 2 incidents, including those reported under the OH&S banner, and any of a lower category that are escalated due to risk or concern
  - recommend and monitor the appropriate investigation process

- monitor implementation of recommendations and outcomes of improvement actions

- provision of training to staff in working with people who may be highly distressed and/or aggressive, known as de-escalation training.



**70 staff**  
attended  
de-escalation  
training over five  
sessions in  
2020/21

## Meeting quality of care standards

Gateway Health is required to comply with a number of national and state standards which provide a consistent statement about the level of care consumers can expect from health service organisations. External accreditation programs commonly occur in three-year cycles often with mid-cycle review processes, and assess the degree to which the service or program area is meeting minimum or mandatory standards.

In October 2020 Gateway Health was proud to undertake assessment and accreditation against the National Disability Insurance Scheme (NDIS) Practice Standards. Previously we had been accredited for disability services and programs under the Victorian Human Services Standards and the NSW Disability Services Standards. We received advice in May 2021 from the NDIS Quality

and Safeguards Commission that we had been awarded a three-year certificate of registration.

For our NDIS participants, this provides assurance that services and support will be delivered to a high-quality standard and ensures participants are empowered to

achieve their goals and aspirations. Gateway Health has a culture of compassion, where staff ensure vulnerable people receive quality, safe and enjoyable supports, which was evident in the evidence provided to the accreditors.

### Did you know...

Gateway Health has been assessed against the following standards:

- NDIS Practice Standards
- National Standards for Mental Health Services
- QIC Health and Community Services Standards
- Human Services Standards
- Rainbow Tick Standards
- Royal Australian College of General Practitioners Standards
- Aged Care Quality Standards
- headspace Model Integrity Framework



Client Heather and staff member Courtney undertaking a telehealth consultation 2021

## Safe systems - Spotlight on privacy

Over the past year the Health Information Team (HIT) reviewed the way client information is handled, ensuring that it is conducted in line with legislative requirements and that privacy is maintained and protected at all times. They identified a number of improvements around how client information is collected, used and shared.

### What did we do?

- Consent forms - As a result of COVID-19, the introduction of telehealth and working towards meeting the NDIS Practice Standards, a number of gaps were identified in the existing client consent forms. The Rural Health Team and HIT identified ways that the consent form could be modified and updated. As a part of this process, the HIT identified a number of other client consent forms that were in use across the organisation, and worked with programs to consolidate a number of program specific client consent forms into one standard document, adding an additional section for using telehealth.

- Information sharing – A streamlined process of information requests better reflecting privacy and new legislation around information sharing was developed. This included the new [inforequest@gatewayhealth.org.au](mailto:inforequest@gatewayhealth.org.au) email address, new information sharing and secure messaging procedures, and the introduction of Liquid Files - a two-factor authentication program which ensures health information is shared in the most secure method possible and sent swiftly to recipients.

### Did we make a difference?

Client consent forms are now standardised across the organisation, reducing duplication and confusion. We can process requests in a timelier manner, have streamlined requests for information monitoring, and we now use Liquid Files to safely and securely share information with over 20 authorised recipients.

## Providing services to clients in a safe way

The COVID-19 pandemic brought with it many challenges and changes to the way we work and live, and raised questions such as 'how do we continue to provide services to our clients and keep everyone safe?' - enter telehealth.

Telehealth refers to the use of information and communication technology, such as telephone or video call for delivery of healthcare. Telehealth can help to remove barriers to healthcare access such as distance and time, and can be a cost-effective and convenient alternative to face-to-face services.

### What did we do?

In May 2020 we rolled out healthdirect - the preferred platform of the Victorian Department of Health and Human Services - for conducting telehealth consultations via video link at Gateway Health.



### Did you know...

- Around 11,500 telehealth video and phone calls were made to 2,610 clients unable to receive home visits during COVID-19. This compares to 4,000 the previous year.
- For the 2020/21 period there were 662 telehealth video consultations via healthdirect, accounting for 456 hours of consultation.
- In 2020/21 telehealth appointments made up about 29% of the total bookings for the Wodonga Medical Practice and over 40% of total bookings for Wangaratta Medical Practice. A big increase from the previous year when telehealth appointments made up only 6% of total bookings for Wodonga Medical Practice and 9% for Wangaratta Medical Practice.

Alternative video conferencing platforms, including Zoom, were used for telehealth video consultation and delivery of group services where healthdirect could not be used. We also continued to provide telehealth services via phone.

The telehealth project team created information for clients and staff on how to use telehealth, set-up the virtual waiting rooms and provided training and support for staff. They also created a client experience survey embedded into the healthdirect platform, with an invitation for clients to complete this survey following their telehealth video consultation.

### Did we make a difference?

The majority of respondents agreed that the telehealth consultation was convenient, they felt well-prepared and that they received the same standard of care from video that they would from face-to-face services.

86% of respondents agreed they would be willing to participate in another consultation via video.

Although there has been a decline in the use of healthdirect in recent months with the return to delivery of face-to-face services, telehealth continues to be an important service delivery method for the Covid-normal period and beyond.

Today we have 93 staff registered with healthdirect and 13 virtual waiting rooms, including a staff training environment.

The next 12 months for telehealth will include further improvements to this service for clients and staff such as the set-up of purpose-designed spaces to provide telehealth services across sites in Wangaratta, Wodonga and Myrtleford and investigation of future opportunities for telehealth including remote monitoring.



## Effective services

Skilled staff using best available evidence within an environment of learning and improvement to optimise health and wellbeing for clients, carers, families and communities.

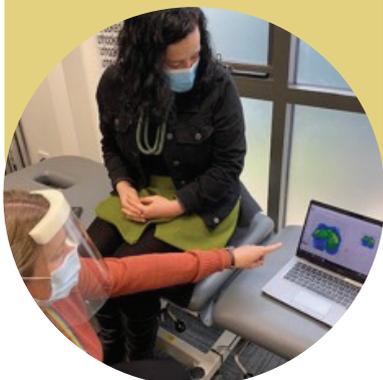
**Principle - We actively listen and work alongside the community and each other to design and deliver better solutions.**

The 2020/21 period presented many challenges for clinical services and clients – a significant one being the quick and necessary move to staff working from home. This meant ensuring that staff were set up properly and educated in how to use tools to undertake effective digital consultation. Also, importantly, making sure that staff working from home managed to stay connected and engaged with the organisation, their colleagues and teams.

Some of the benefits and improvements we witnessed include:

- The set up and dissemination of access to a Virtual Private Network (VPN) to allow access to Gateway Health's networks. If our amazing IT team had not commenced this work in late 2019/20 and created a fit-for-purpose system (not an off the shelf product) our rapid shift to working from home would have been severely limited.
- The introduction of the Zoom platform, another pre-pandemic IT initiative which was in its early stages. Licences were purchased in 2019 as part of early work to shift people to a more virtual world. This had a significant impact on our ability to pivot so quickly to working from home across every part of the organisation.
- All staff are now provided with a laptop and mobile phone rather than a desktop and desk phone. As part of contingency planning for whatever the next disruption might be, all staff now take their equipment home each night, ensuring that business continuity can be maintained if they are prevented from coming in to the office.
- With face-to-face appointments significantly impacted across a number of services, there were some very effective and innovative solutions devised, assisting clients and staff to stay connected and deliver needed services.

Justine Nicholls – Occupational Therapist and Brydie Donnelly – Clinical Lead Podiatrist and ARC coordinator testing the Boditrak Pro



## Reducing the risk of a pressure injury

The aim of pressure care intervention is to reduce the risk of clients developing a pressure injury, or to assist in healing a current injury, which ultimately prevents hospital admissions and prevents clients being required to spend significant amounts of time in bed to heal pressure injuries.

The Rural Health Team identified the need to purchase a new updated pressure map as the current model, which was more than 10 years old, was no longer working as required.

### What did we do?

The Occupational Therapy team researched and selected a new type of pressure map to trial with clinicians and clients. The Gateway Health Board approved a capital investment of \$22,000 and the Boditrak Pro was purchased.

The new pressure map provides 'live' pressure mapping to enable

clients and clinicians instant feedback on pressure distribution when in a sitting position and also when lying on a bed. This is used for wheelchair, commode and bed and mattress assessments to ensure the most suitable equipment is prescribed for each client.

The Boditrak Pro is also used for client education about their individual risks and the need to move and change position to adequately relieve pressure.

### Did we make a difference?

Using information from the Boditrak Pro, clients are able to successfully complete a pressure relieving lift or change position enough to relieve pressure as they can see great visual feedback from the computer screen.

The quality of the information we receive from the Boditrak Pro is fantastic. It enables us to write better reports to the NDIS for funding, and provide better education to clients, improving their health outcomes.

## Improving workspaces and environments

During 2020/21 we continued our Facilities Master Planning process to guide investment in the facilities and infrastructure that will support our staff to do their best.

Gateway Health was successful in obtaining a Rural Health Infrastructure Fund grant in February 2021 to further expand capacity, improve therapeutic spaces, and accommodate impacts of changing work and service delivery environments in our Wodonga office. This includes

changes to accommodate ongoing social distancing and virtual service delivery requirements.

Architect drawings have been endorsed and the tender process commenced to appoint a builder. The project is due for completion February 2022.

As a further part of this process we acknowledged our limited capacity for expansion in Wangaratta. In May 2021 Gateway Health purchased a block of land at 40 Mackay Street and we are planning for future development to improve amenities for clients and staff.

Did you know...  
As a result of COVID-19 restrictions, the participation in activity groups dropped from 700 people in 2019/20 to just over 100 people in 2020/21.

## Enabling self-care for podiatry clients

In line with Covid-safe processes, in 2020 we had to cancel podiatry appointments for over 1,200 people. Only high-risk clients were seen in person for podiatry care for a significant period of time. This resulted in several complaints about delayed care.

### What did we do?

We put together “Foot Care” packs to send out to podiatry clients on our wait lists.

This intervention intended to help people to manage their own foot health in the absence of available podiatry appointments, or at least enable some level of self-care whilst appointments were delayed.

### Did we make a difference?

By assisting people to self-manage we reduced the need for low-risk clients requiring podiatric intervention, allowing the limited available appointments to be reserved for medium and high-risk clients.

The intervention also provided planned contact with clients, reducing the volume of phone calls querying appointment and wait times. People who were able to participate in self-management support reported enhanced wellness and independence in their foot care.

## Virtual group programs - Tai Chi for Health

With the pandemic impacting group activities in many different ways we wanted to keep participants in our popular Tai Chi group socially connected, and prevent deterioration in physical conditioning.

### What did we do?

When physically meeting was no longer possible, instead of cancelling the Tai Chi group we reviewed it and offered to deliver it via Zoom.

This was an effective way to keep our participants, staff, and community as safe as possible while still connected and participating.

To enable participation we also needed to enhance people’s ability and confidence to use Zoom. The Be Connected program, which aims to build digital literacy skills, provided some of the resources to enable this upskilling to occur.

### Did we make a difference?

The group was able to continue successfully, though not without its challenges.

All participants had a safe space, and were supervised throughout the session, albeit virtually.

Participants reported they enjoyed the sessions and appreciated being able to continue to participate and connect with each other whenever possible during long lockdowns and restricted periods.

## Continuing access to clinical supervision

Clinical supervision ensures that staff have access to a supervisor to debrief, discuss clinical decisions through reviewing case studies, and look at client outcomes to see where any improvements in providing care could be made.

There was a need to maintain high levels of this type of supervision during the pandemic.

We also identified the need to address themes of staff missing the collegial team environment and manage support of clients impacted by services and care delays resulting from restrictions.

Although regular virtual meetings and discussions occurred during periods of lockdown, the gap in practice impacted staffs’ feeling of connectiveness and belonging.

### What did we do?

We continued to strive for 100% of eligible staff to be accessing appropriate and timely clinical supervision, tailored to their individual role needs and via video, phone or face-to-face when possible.

We engaged more counsellors within our Employee Assistance Program to bolster access for some staff cohorts, focusing on speciality areas and providing appropriate supervision expertise to these cohorts.

### Did we make a difference?

We achieved an average of around 80% per quarter, so there is still some room to improve.

The Clinical Supervision program has had an increase in staff allocation and an ongoing focus will be on recruiting, training and developing internal supervisors.

# Equitable and accessible services

Delivery of and advocacy for fair, timely access to services according to need and choice.

Principle - We advocate for fair and equitable access to health care and wellbeing services for all.

## Sexual and reproductive health

Clinic 35 at Gateway Health offers clients a confidential and safe setting in which to discuss sexual health concerns and receive specialist sexual and reproductive healthcare and education. The clinic operates at our Wodonga and Wangaratta sites and focuses on the more vulnerable and under-screened groups in the community.

### What did we do?

In 2020/21 Gateway Health's Clinic 35 provided testing, treatment and prevention services to 996 clients. This compares to 2019/20 when 1,106 clients received a Clinic 35 service.

This reduction is predominately due to the impact of COVID-19, reduced

face-to-face service delivery and the associated border closure.

However, compared to the 2019/20 financial year, and despite the impact of the pandemic and border closures and slightly lower client numbers, in 2020/21 testing services and treatment numbers increased significantly, and prevention services increased by 173%.

Just over half of the clients were aged between 19 and 30 (57%) and just under a third of clients were aged between 31 and 50 (28%).

The majority of Clinic 35 clients lived within the Albury Wodonga area (78%) and received their medical treatment from a nurse (68%).

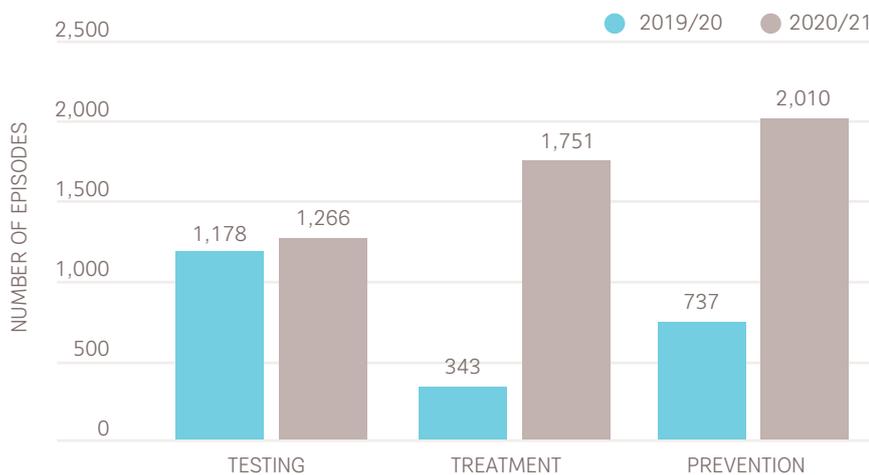
### Did we make a difference?

During the 2020/21 financial year the majority of services were in education and prevention, accounting for half of the total contacts (50%), more than half of the clients (65%) and reportable service hours (63%).

This is great news as it shows people are accessing the service in a proactive way.

2020/2021 prevention services increased by **173%**

Figure 1. Number of episodes by service type



## HeadtoHelp – Tackling the impact of COVID-19

The COVID-19 pandemic has had a significant impact on the mental health of individuals and communities. The Commonwealth-funded HeadtoHelp program was designed in response to this increasing need for support.

The aim is to provide a first point of contact for clients who don't know where to go or what they need – helping them navigate the system and get the support that they need in a timely manner.

### What did we do?

In September 2020, Gateway Health set up and began operating the Wodonga HeadtoHelp hub.

The program works in close partnership with Albury Wodonga Health's Mental Health Service and aims to help people impacted by the pandemic, connecting them to multidisciplinary teams of mental health workers, social workers, and alcohol and drug workers.

Often the assistance people feel they need can be provided through Gateway Health programs, so "warm" referrals are able to be made.

Clients are also referred on to services offered by other organisations, depending on their individual needs.

### Did we make a difference?

By the end of June 2021, the Gateway Health HeadtoHelp hub had supported over 500 people through phone, telehealth and face-to-face services.

Feedback from clients showed appreciation that they were able to be contacted or often seen within a day, that Covid-safe face-to-face services were available when needed, and that being able to access support, a listening ear and develop a plan to move forward when feeling overwhelmed was incredibly valuable.

## Working with cross-border multicultural communities

Multicultural community members, Gateway Health clients, staff and partner agencies identified that the differing information about COVID-19 on both sides of the border, as well as the confusion and complexity of border closures, was having a significant impact on communities.

Not only was there a lack of up-to-date information reflecting pandemic border issues in the languages needed, but the presence of military and armed police on checkpoints caused real fear and trauma in community members with a history of fleeing war and violence.

### What did we do?

In August 2020, community members, Gateway Health, Albury Wodonga Health, the Albury Wodonga Ethnic Community Council (AWECC) and the Strategic Engagement Coordinator – Ovens Murray Region came together and pooled funds. This enabled the

recruitment of two Multicultural COVID-19 project officers for six months, to work within the Gateway Health Refugee Health Clinic through the Wodonga Medical Practice and also on site at Albury Wodonga Health.

Through the wonderful work of Gateway Health's Karin Stahl, regular Zoom meetings were held over many months with members of multicultural communities where questions and issues could be raised, and translated information was shared on the Gateway Health Multicultural Club Facebook page.

AWECC used their funding to create local videos in Swahili, Kinyarwanda and Nepali for local communities. These were shared with Gateway Health and regularly promoted internally to our programs, as well as through our website and social media platforms.

Gateway Health's Medical Practice and programs proactively provided letters for clients to ensure they

could easily cross the border in both directions to receive the healthcare they needed, particularly COVID-19 testing and information.

### Did we make a difference?

The two project officers were able to actively share and take up-to-date information to the community members through local networks, and be present at Gateway Health and Albury Wodonga Health to answer questions and provide testing and safety information to community members, assist with obtaining border permits and making appointments.

Information was translated quickly through AWECC, provided in audio format and shared widely through partner agencies across many platforms.

Clients reported that all these points of assistance were helpful in understanding how to navigate COVID-19 and border issues.

## Residential rehabilitation coming to Wangaratta

Gateway Health and Odyssey House Victoria are working in partnership to establish a 30 bed adult residential drug and alcohol rehabilitation service.

The facility is currently under construction in Greta Road Wangaratta, due for completion in late 2021.

When completed the facility will have residential modules linked via decking to the main building, which contains therapeutic spaces, a kitchen area and offices. The outdoor space includes sheds for people to build and create in, veggie

gardens, an outdoor activities area and exercise equipment.

Under a therapeutic community model, residents will learn about themselves, gain self-esteem, develop self-respect, learn about others, and foster a sense of community and respect for others.

“To see this facility come together is a dream come true for those of us who have been working on it and the stakeholders who have advocated for it,” said Maryanne Donnellan - Program Manager, Alcohol and Other Drugs.



Landscaping work and project team onsite at Greta Road



## Allied Health Assistants – Supporting our community

Allied Health Assistants (AHAs) or Therapy Assistants are valued members of the Rural Allied Health Team (inclusive of dietitians, occupational therapists, physiotherapists, podiatrists and speech therapists). They are trained to deliver specific allied health therapy and related supports under the guidance of an Allied Health professional.

AHAs provide therapy to maintain and improve clients' level of function, and support people to live independently. Most often, AHAs assist clients who need regular support in speech pathology and physiotherapy programs, people who need help managing activities of daily living such as meal preparation and cooking, or with monitoring of health status i.e. weight control. AHAs also often work with podiatrists in Community Health settings.

### Supporting people in their homes

This service commenced over two years ago and now provides regular multidisciplinary services to one quarter of the Rural Health Team's NDIS participants.

#### What did we do?

In 2020-2021, the Rural Health Team's Allied Health Assistants provided nearly 600 occasions of service to people in our community on Home Care Packages or as participants in the NDIS.

#### Did we make a difference?

This service option and the positive relationships built are highly valued by the clients and consumers of this service.

### Foot Care Clinics

The high waiting list for podiatry services, stemming from the large number of cancellations made in 2020, stimulated action in an area that we had already been looking in to.

#### What did we do?

In 2020/21 we implemented the Allied Health Assistant Foot Care Clinic, a new model and service to increase our capacity to see podiatry clients.

The Rural Health Team received a grant to support the role implementation, and brought together appropriate procedures, resources and support from the podiatry team to enable the clinic to run alongside the podiatry clinic one day a week.

#### Did we make a difference?

The service has been very well received by clients and staff, and significantly contributes to enabling more people to access appropriate foot care services to enhance their independence.

# Individual and community driven services

Services guided by the needs and choices of individuals, their carers and family, and the broader community, are provided in a friendly, caring environment.

## Principles –

We respect the strength of individuals and the community, and their capacity to recover from adversity.

We recognise the importance of adaptability and responsiveness to enable us to deliver on our commitment to the community.



Steph Grant speaking at the opening of headspace Wangaratta - March 2021

## Consultation and inclusion inform headspace design

The official opening of headspace Wangaratta was held on 29 March 2021. The satellite site is funded through Murray PHN who recognise the collaborative approach required for community-based centres.

### What did we do?

In 2020 the Youth Council in Wangaratta teamed up with headspace to form a Youth Reference Group for the design of the Wangaratta headspace satellite site, in line with the group's passion for mental health.

This group ensured that young people's voices were at the front and centre. Following an initial survey of 1,000 young people, the

group provided very valuable input, voice and power in this process. They were consulted along every step of the way and had the chance to meet with the building architect and interior designers.

### Did we make a difference?

In her opening speech Steph Grant, a member of the Wangaratta Youth Council, said "One thing that stuck out strongly to me was the incredibly inclusive and thoughtful approach that came with each idea. All ideas were picked apart and considered in detail to ensure that they gave young people at the centre flexibility, comfort, support and a feeling of welcomeness."

**"As someone who has experienced mental illness, having such care, value and inclusion placed into this design process has been incredible."**

## Improving the consumer experience

There has been a significant drop in complaints received for the 2020/2021 financial year compared to 2019/2020 (see figure 2). This could be an indication of the continual improvement to Gateway Health processes in response to issues previously raised and addressed by clients and families, and also reflects the impact of COVID-19.

### Delay in access

40% of complaints in 2020/2021 related to delayed access. Staff continued to innovate during the pandemic, however consumers were experiencing the impact lockdowns and restrictions placed on the delivery of some of Gateway Health programs.

### What did we do?

Further analysis identified clients were unable to access an immediate appointment or program. These complaints triggered review of two programs' referral processes and exploration of program funding for group activities that are not currently offered in the Wodonga area.

Regular client welfare checks were conducted across programs where clients had appointments

delayed or service models altered due to the pandemic. Programs continually reviewed clients on waitlists to assess their need and priority.

### Telephone outages

In the January to March 2021 period, 66.67% of consumer complaints related to equipment. This was a result of telephone outages experienced in March 2021 affecting Wodonga, Wangaratta and Myrtleford sites.

### What did we do?

Gateway Health telephony services were upgraded in June and July 2021 which fixed long-standing issues with services to the Wangaratta and Wodonga Offices. Myrtleford was upgraded to the new telephony hardware as well.

### Signage issues

In January 2020 a community member attended Gateway Health and noticed the signage on the family/parent room displayed a binary and traditional image of a family. The community member provided feedback expressing that it was inconsistent compared to images celebrating diverse families in other areas of the building.

### What did we do?

To improve the inclusiveness of our facilities, in 2021 the parent/family room signs were replaced with all gender parent room signage in all Gateway Health buildings.

This improvement also contributed to Gateway Health's work towards the Rainbow Tick accreditation.

A Way-Finding project was also commenced (delayed somewhat by COVID-19) and is contributing to new signage to make parts of the organisation easier to find.

### Website content

A consumer expressed concern with the way some COVID-19 information was displayed on Gateway Health's website.

### What did we do?

The Communications Manager reviewed and rectified the issue as soon as possible adding a COVID-19 wrap up section for COVID-19 information and news posts.

### Safe delivery of a program

Concern was expressed around the safe delivery of a program.

### What did we do?

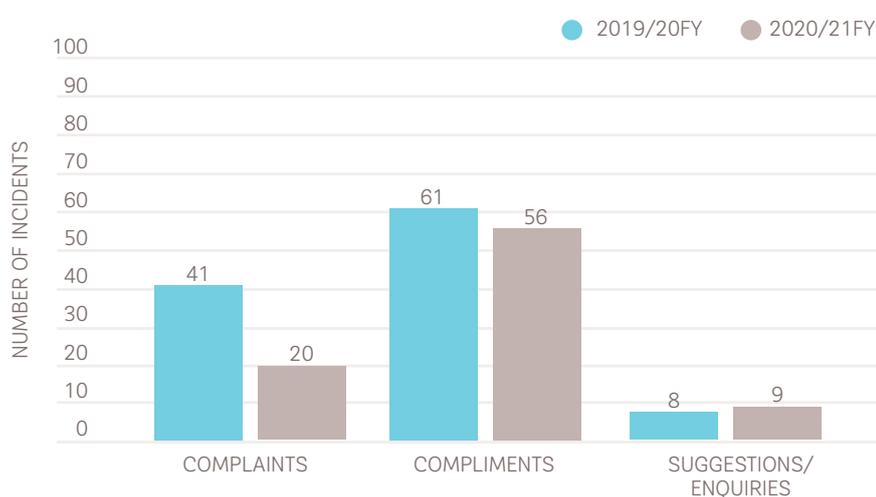
The complaint was escalated to our Incident Review Panel and in June 2021 an in-depth review into the issues raised was commenced. Recommendations will be assessed and actioned by the panel when the review is completed.

### Did we make a difference?

In the 2020/21 financial year, 40% of compliments related to staff responsiveness and 30% related to management of care and helpfulness.

Consumer satisfaction was also expressed with staff making people and carers aware of how to access mental health and other services and programs, coordination of care and services and continuation of services during the pandemic.

Figure 2. VHIMS Feedback Comparison 19/20 – 20/21



## Providing bushfire recovery support in the time of COVID-19

Gateway Health provides the Bushfire Case Support Program to the Local Government Areas of Towong, Alpine, Wangaratta and Mansfield, picking up some clients in Indigo and Wodonga and also some from across the NSW border in the Upper Murray.

Thanks to the pandemic, the entire team and its work has been (and still is) an exercise in doing things in new and flexible, instantly responsive, and consistently changing ways.

### What did we do?

Using a trauma-informed approach, the program has worked with, walked alongside and helped over 380 clients. The team worked with community groups and recovery committees and formed strong

partnerships with agencies in the health, business and agricultural sectors. The Bushfire Recovery team, with their philosophy of “don’t say no, say we’ll find a way”, developed ways to transport feed for stock, water for human and cattle consumption, and other vital resources into bushfire impacted areas when no one else could do so safely.

In addition, program staff helped to facilitate the delivery of short-term modular homes to families who had lost everything. This was a massive collaborative undertaking with local trades, Melbourne construction companies, and the State Government of Victoria – during a pandemic and through multiple lengthy lockdowns.

### Did we make a difference?

Through consistently approaching every issue with a collaborative and problem-solving focus, multiple creative solutions have been found for many of the issues facing the residents of fire impacted communities. The residents themselves played a key role in designing the solutions that would work for them.

Across the last year the team has learned that sometimes what appears to be a massive obstacle can become an opportunity to think differently and find new and exciting ways to work and succeed. Many formal and informal compliments relating to the effectiveness of the team and this program have been received from clients, their families and from partner agencies.



Top: Bushfire Recovery Team, 2020

Above: Bushfire Recovery Team building garden beds, 2020

Right: Fencing in the Upper Murray, 2020

## Collaboration with the Australian Ballet

Many participants in our Active Rural Communities (ARC) program, had their access to social support events limited through the pandemic. Thinking outside the box, an opportunity was identified to provide a new and interesting session for participants.

### What did we do?

ARC worked with the Australian Ballet Training and Education team to deliver a ballet class for participants of our ARC program. The facilitators took the participants through a number of seated and standing warm ups, and then dance routines from a play.

### Did we make a difference?

The participants and ARC staff thoroughly enjoyed the session and are hoping they will return next year to do another one. Fifteen enthusiastic participants came on the day to see what it was all about, many of whom had no dance experience, but all enjoyed watching and participating in the dancing and exercise.

The ARC staff found that a lot of the exercises and warm ups were similar to what we do in our programs, however it was more elegant and dramatic as the exercises were modified based on ballet. In future the ARC staff may bring some of these new moves into the groups.

## Supporting healthy eating

In the midst of changing restrictions, remote learning and social distancing requirements, many schools and community groups in the Rural City of Wangaratta continued to work in partnership with Gateway Health and Northeast Health Wangaratta Health Promotion staff to support healthy eating initiatives.

### What did we do?

The Health Promotion team were able to recognise this commitment by providing small grants to several schools and community groups to continue existing work or establish new initiatives to support healthy eating. Partnerships with our community are the backbone for supporting community health and wellbeing!

### Did we make a difference?

A small amount of money can go a long way and the following outcomes were achieved:

- Springhurst Primary School reestablished their water efficient wicking bed food garden and are growing fresh produce that is shared with the local community.
- A community member from Moyhu worked with King Valley Learning Exchange to establish 'Moyhu Food Share' - a monthly community gathering to share local produce. A community Facebook page has been set up, signs are ready and the launch planned for September 2021.
- Galen Catholic College worked with the Healthy Choices guidelines for schools and purchased a display fridge for the school canteen to promote and display some of the great healthy options available on the updated canteen menu.
- Wangaratta High School built two new wicking garden beds to use as a learning tool for growing food with Year 9 students as well as introducing more fresh and healthy snacks and lunches into the Year 9 Community Leadership Challenge program.
- Cathedral College purchased netting to protect their fruit trees from fruit fly enabling more fresh produce to use in food technology classes.
- Borinya Community College purchased a juicer and dehydrator to juice excess produce and preserve fruit and vegetables to take on outdoor education camps.

## Celebrating pride and resilience at the Rainbow Balls

The North East Pride Collective (NEPC), auspiced and supported by Gateway Health, is a bunch of creative, resourceful, and innovative change-makers with their hearts set on creating positive opportunities for their LGBTIQ+ peers. Their primary goal is to create environments for our youth to thrive and feel safe, welcomed and connected.

### What did we do?

We threw a huge celebration of LGBTIQ+ young people in the middle of a pandemic! It took two years of planning, four dates set, over 30 meetings with up to ten stakeholders, and over 60 meetings with young members of the North East Pride Collective.

Sadly the 2020 Rainbow Ball, originally planned for 8 February, was postponed to mid-April due to bushfires. Almost all the work for the ball had been completed, the culmination of over 20 planning meetings and over 300 young people from Shepparton to Corowa to Tallangatta were registered to attend.



headspace staff at the Rainbow Ball, Albury 2021

Then COVID-19 hit and the Ball was rescheduled again to October 2020, but as the pandemic progressed it was eventually cancelled.

In April 2021 the Rainbow Ball finally went ahead as two separate balls (fondly called B1 and B2), in spite of different cross border restrictions and a snap Victorian lockdown three days prior.

B1 Albury became an event hosted by AlburyCity Retro Youth Programs.

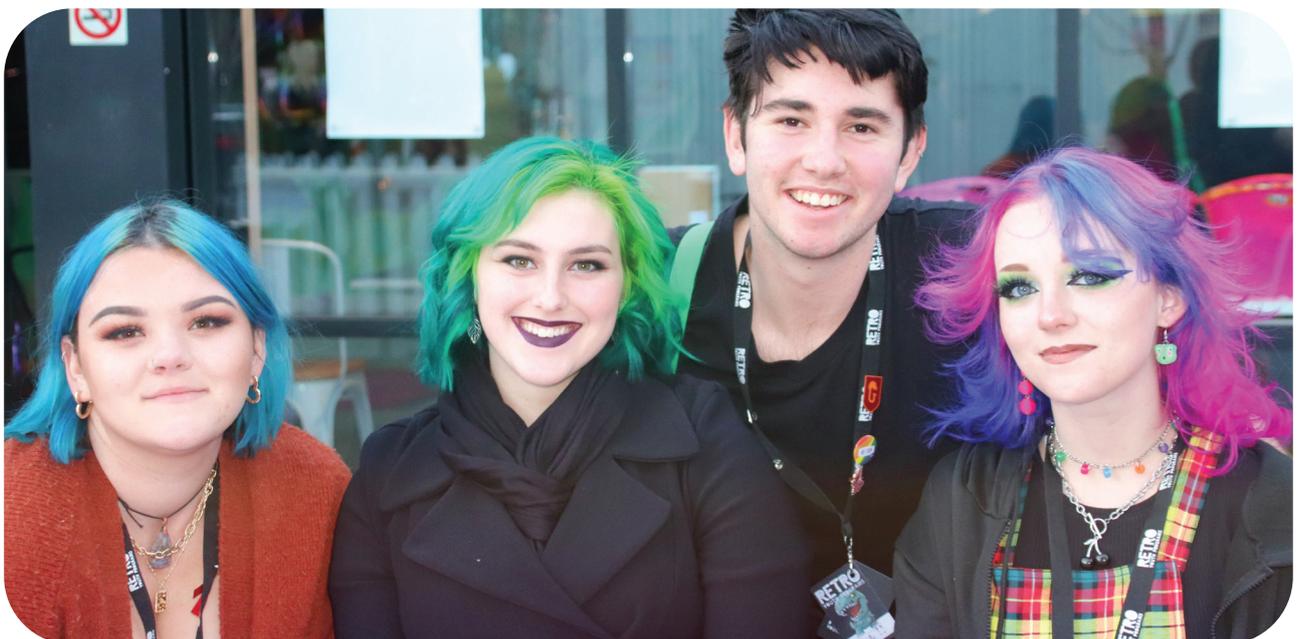
And the snap Victorian lockdown served only to inspire the troops. They met on a Saturday morning and finalised a plan to quickly move B2 Benalla to an online format - a ball for all Victorian young people and those in NSW who couldn't

attend in person at Albury due to COVID-19 NSW and border restrictions.

### Did we make a difference?

Over 75 NSW residents attended a fun-filled and long-awaited night of celebration in Albury, whilst their counterparts in Benalla dressed up, danced, partied and sang online.

Despite all the setbacks and challenges, the 2021 B1 and B2 Rainbow Ball was a big success. This was thanks to the huge effort, flexibility and adaptability of the North East Pride Collective and Gateway Health's WayOut Wodonga Project Worker Olivia Noto, with fantastic support from headspace Albury Wodonga, local councils and many staff at Gateway Health.



Rainbow Ball attendees, Albury 2021

## Reflect Reconciliation Action Plan

Gateway Health acknowledges the Traditional Owners of this land on which we stand and pay our respect to the Elders, past, present and future, for they hold the memories, the traditions and the culture of all Aboriginal and Torres Strait Islander peoples.

It is also acknowledged that Aboriginal people are a diverse group and are comprised of many different clans with their own unique languages and customs.

Gateway Health supports the belief that reconciliation must live in the hearts and minds of all Australians. There is a need to work together to close the life expectancy gap through improving

the cultural, spiritual and emotional wellbeing of Aboriginal and Torres Strait Islander peoples. Gateway Health has begun to take steps on this journey, and will continue endeavours and commitment to reconciliation.

### What did we do?

During 2020/21 Gateway Health worked to complete the actions in our first Reflect Reconciliation Action Plan and commenced development of our Innovate Reconciliation Action Plan.

### Did we make a difference?

Our Reflect Plan involved us looking at our protocols and guidelines across the entire organisation

to ensure that Aboriginal and Torres Strait Islander cultures are acknowledged and welcomed. Our very own Internal Aboriginal Network (IAN) provides advice on a number of issues, leadership in recognising days of significance as well as a Community of Practice for staff.

We also recognise the importance of developing partnerships with Aboriginal and Torres Strait Islander peoples and organisations throughout the Ovens Murray region, to support advocacy and the provision of culturally safe and welcoming programs that work with communities to improve health and wellbeing.

## Team building through cultural learning

### What did we do?

In April 2021, the Families, Communities and Culture team went to Mt Pilot for team building and a cultural excursion with Burrinja Cultural Services.

Topics explored during the walks were local vegetation and its traditional uses, the landscape today compared to in traditional times, water and food sources.

The team even got a dreamtime story - the Rainbow Serpent - which was just magical and definitely explained the interesting flow of our landscape and hills!

### Did we make a difference?

According to feedback from members of the team it was a great success:

“Richard and Brendon were great. I learned a lot about local culture, I had a great time and I believe that there should be more of it, maybe we should encourage all the different teams at Gateway Health to be involved, being outdoors is good stress relief.”



Brendon Kennedy from the Burrinja Program at Mt. Pilot. April 2021

“I learned about some of the history of this area, but the biggest message I got from this excursion was just how important it is to be open to learning and keep learning because we will never fully know or understand another person or cultural group’s view on the world or their experiences, but we can definitely acknowledge and respect this. Part of it is about being open and knowing who we are as people.”

# Connected and coordinated care

Services are coordinated to provide connected, seamless care for clients and their families.

Principle – We contribute to creation of a connected and integrated health and community care system to achieve the best outcomes for our clients and community.

## Building digital literacy to keep people connected

Be Connected is a program designed to build digital literacy skills aimed at getting older Australians online to help them stay connected.

So many different services are now accessible online. Particularly since the COVID-19 pandemic, it has become more important than ever for older Australians to be able to access the online world.

### What did we do?

From January to 30 June 2021 Gateway Health's Active Rural Community (ARC) team delivered the Be Connected Program to 11 participants to enhance their abilities and confidence in using technology.

The program covered 14 broad topic areas including:

- How to use digital devices
- How to use the internet
- How to stay safe online
- How to find trusted information online
- How to stay in contact with family and friends through various applications
- How to use Apps for shopping, banking etc.
- How to pursue hobbies and interests online

ARC ran the sessions in six week blocks for beginners and for those who already knew a bit, but wanted to know more. This allowed participants to work alongside others with similar experience and knowledge levels, and benefit from peer support.

### Did we make a difference?

This program has enabled existing ARC and Rural Health Team participants and clients to easily access programs that moved to virtual delivery, such as Zoom Tai Chi and Men's Cooking – keeping them connected and reducing isolation.

## Did you know...

The number of home visits to clients dropped in 2020/21 to 1,065 from 5,000 the previous year.



Be Connected participant, 2021

## Supporting young parents in different ways

Over the last 12 months, but particularly during lockdowns, we have tried to maintain relationships and connections in a different way to our usual social gatherings to support young parents.

### What did we do?

Working with the young parents, we offered wellbeing checks via social media, Zoom and doorstep/verandah chats (at a safe distance).

We also offered activities that could be completed at home, such as cooking, science experiments, nature play ideas, crafting and more, and we provided everything that the group members needed for these activities.

### Did we make a difference?

We encouraged group members to post the results of their activities to keep members interacting and connected.

This was a really popular activity with our families and a positive change in the way we deliver our programs.

The feedback from one of our young participants was “Heck yeah, science!”



Some of our young participants and home cooking and activity packs, 2020



## Reaching people on social media

In 2020/21 the Gateway Health Facebook page reach increased by 243.3% compared to 2019/20

The Gateway Health Instagram account started in May 2021 and gained 100 followers in the first six months, reaching 31 people in the first month

Visitors to the Gateway Health LinkedIn account increased by an average of 100 each month in 2020/21

## Connecting men through a new social group

As exercise groups were able to recommence we noticed that not all the people who were participating before COVID-19 struck were able to restart the exercises for a number of reasons. It became obvious that there was a need for non-exercise based social group options.

### What did we do?

We introduced two new social groups to our timetable, which both quickly filled to capacity, one of which was a men's social group.

This is a group of eight men who all have varying degrees of mobility and cognition. The group supported each other through conversation, games, and outside activities in the garden (weather permitting). The men have also been working with the ARC group facilitators to tidy up the garden at the Yarrunga site.

### Did we make a difference?

Benefits of social groups include reconnecting people to new and old acquaintances, getting out of the house to talk to different people and reducing the isolation that has occurred due to lockdowns and restrictions.

Whether it be digging, weeding, getting rid of the cuttings and green waste, putting the worm farms together or feeding the worms, all the men were able to contribute.

## Exploring issues of family violence

Family violence occurs across all strata of society. It can include physical, sexual, emotional, verbal, financial, cultural, spiritual, elder and social abuse.

### What did we do?

Gateway Health has been running the nine-week WINGS program for women who have experienced, or are living with family violence. The group program provides the women who participate with an opportunity to explore the issues of family violence.

The program is delivered in a safe environment for women and seeks to develop the participants' understanding of the effects of family violence on themselves and their children.

The sessions use psycho-education, exercises and activities to encourage reflection by the participants and to foster a sense of personal awareness, insight and healing.

The program aims to provide the women with empowering ideas for building on strategies they already have in place and enable them to develop an understanding of the challenges involved in moving on to a life free from family violence.

### Did we make a difference?

Feedback from participants included the positive outcomes of feeling supported, being heard, being believed and validated, meeting other women who have had similar experiences, feeling happy and stronger and understanding that what they experienced was not their fault.

Other feedback was that they wanted the program to go longer!

## Keeping men's cooking lessons on the menu

The Men's Cooking group has been running since 2018, building the capacity of older men to develop and improve food management skills – including meal planning and budgeting, understanding and following recipes and learning new cooking methods.

Dietitians and Allied Health Assistants work with clients to develop their individual food management skills, to meet their specific needs.

### What did we do?

Delivering a Covid-safe cooking program during lockdown to an audience not always up to date with technology, was no easy feat!

The Be Connected program was a vital ingredient in enabling participation for many of our budding chefs and the Zoom account was soon running hot with participants. They tuned in every Wednesday to learn a new recipe, some culinary tips and tricks and to share photos of their tasty (and sometimes not so tasty) meals prepared during the week.

### Did we make a difference?

In July 2020 the Men's Cooking program was featured in an edition of the Department of Health's Health Victoria newsletter, highlighting the importance of allied health care and activities in regional areas.

The success and adaptability of the program has indicated how community aged care programs can empower people to learn new skills and greatly improve their capacity to live well.

## Supporting women's and maternal health

"Midwives are essential providers of primary health care and can play a major role in this area as well as other levels of the health system: in addition to maternity care, they provide a wide range of clinical interventions and contribute to broader health goals, such as addressing sexual and reproductive rights, promoting self-care interventions and empowering women and adolescent girls." The State of the World's Midwifery Report, 2021.

### What did we do?

A pilot Endorsed Midwife Care program was commenced at Gateway Health by Vanessa Page, a Nurse Practitioner (NP) and Endorsed Midwife (EM).

The program works in collaboration with the Medical Practice and complements Gateway Health's existing women's and maternal health services.

Vanessa is providing family planning and women's healthcare, before, during and after pregnancy.



Vanessa Page - Endorsed Midwife Care Program

### Did we make a difference?

Vanessa works very closely with Tamara Curtain from the Healthy Mothers Healthy Babies Program and together they provide comprehensive holistic continuity of care to pregnant women and their families.

## Keeping people safe in high risk accommodation

The High-Risk Accommodation Response (HRAR) project is part of a state-wide COVID-19 Pandemic project. The project uses a community engagement approach to ensure appropriate public health measures and suitable service supports (including health and social services, food and essential supplies) are in place across the north-east of Victoria to protect the health and safety of people living in high risk accommodation.

The HRAR project focuses on minimising the risk of COVID-19 infection and transmission, especially in areas such as shared laundries, shared kitchens and courtyards, and works to ensure residents have up to date information on testing, isolation and vaccination.

### What did we do?

A small and dedicated band of Gateway Health staff successfully pulled off a major challenge over December 2020 and January 2021, setting up the program in two weeks, and achieving its initial engagement goal in eight weeks.

The team attended more than 600 residential addresses, engaging with more than 500 residents from Corryong to Seymour, and from Bonnie Doon to Wangaratta.

Site visits included public housing, supported residential services, rooming houses and caravan and camping grounds across the catchment.

Team members fanned out in Gateway Health vehicles loaded up with information materials and care packs. Proprietors were notified prior to the visits, and on the allotted day the team turned up and began Covid-safe door-knocking.

### Did we make a difference?

At each location team members provided information and guidance in regard to social distancing, cleanliness, hygiene and other critical aspects of reducing infection risk.

And the team didn't just give out advice, they worked with those they met on broader issues. People who had been isolated were engaged and many were linked in with other services, including vaccination.



Kitchens got cleaned and spaces were cleared, improving safety. In some cases, an information stand was set up to attract further attention and invite discussion to increase engagement on following visits.

According to Jonelle Hill-Uebergang, General Manager, Primary Care, the project has had many positive outcomes, not just in terms of keeping at-risk people safe in a pandemic.

"We have also seen the benefits of community engagement and the results that come from reaching community members that are hidden and struggling, removing barriers for access to quality care and supports."

## First Nations Senior Consultative Circle

The First Nations Senior Consultative Circle (FNSCC) seniors' group was formed in 2018 and is facilitated by Gateway Health. Under self-determination principles, the group has developed their name, terms of reference, logo and shirts with their logo.

The group started with 10 members and has grown to 27 members. Twenty members regularly attend the monthly meetings which continued whenever possible through lockdowns and restrictions.

The FNSCC went on a cultural tour of the Victoria western district to Halls Gap in February 2020 and had planned a tour to Gurnai Kurnai country (Gippsland through to Lake Tyers), which unfortunately was postponed due to the pandemic.

### Did we make a difference?

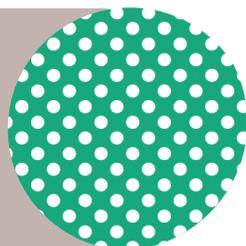
There have been some very positive outcomes achieved.

- The seniors' voice is captured, as members engage in meetings, forums and activities.

- Strong leadership and wisdom are documented.
- Connections are strengthened with cultural places and other senior people across Ovens Murray area and Victoria.
- Stories are shared with other seniors and young people.
- Knowledge is shared with agencies and Aboriginal Community Controlled Organisations.
- Healing and support is gained through sharing, caring, programs and yarns.



FNSCC trip to Halls Gap, Feb 2021





## Wrapping up 2020/2021

We would like to take this opportunity to thank our clients and their families, our staff and our communities for their input, understanding and support in helping us to listen, to learn, and to make a difference.

### Accreditation





# gateway health

People living well

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