



Merri Health
Healthcare that moves with you

With you for every age and stage of life

Annual and Quality of Care report
2016



Merri Health creates healthy, connected communities through local health services for people at every age and stage of life.



We've been part of our community for over 40 years.

We know that at different times, your health needs change. That's why we support you throughout life, with services spanning from children's health to aged care.



50

54yrs – Diabetes education

60

66yrs – Physiotherapy

70

72yrs – Podiatry

Hello

Welcome to our 2015/2016 Annual and Quality of Care report.

In the past year there have been many great outcomes, celebrations, challenges and changes at Merri Health and we're pleased to be able to take you on the journey throughout this report.

We hope you enjoy this year's report and have an opportunity to play with our new feature; videos that come to life! If you have a smart phone, check out page 7 to start your virtual journey as we snapshot our year in a flash.

Happy reading!

Merri Health team



Connect with us

-  Merri-Health
-  @MerriHealth
-  goo.gl/gWrGqi

About this report

About the Annual and Quality of Care report

The first section of this report is our Annual Report. This section provides you with information about our organisation, how it is structured, Board of Directors and governance, our services and financial reporting.

The remainder of the document is our Quality of Care report. This report is broken up into three sections:

- > Consumer, carer and community participation
- > Quality and safety
- > Continuity of care

The report highlights stories about our clients, community and outcomes, services, systems and processes in the last financial year.

How do we put this information together?

Many teams across the organisation were involved in the preparation of this report and we consult with community representatives from our Community Engagement sub-committee. This helps us to provide you with updates that are informative and of interest to many people. Our Annual and Quality of Care Reports are reviewed by our Board, executive leadership team and management leadership team for accuracy and relevance.

Where to find this report

This report can be found at each of our sites. See page 92 to find an office location near you. The report is also available on our website, www.merrihealth.org.au.

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Video reporting



Bring the pages of our report to life wherever you see this image.

Using the Blippar App, scan the page to view our digital stories and bring the story to life!



Acknowledgements

We acknowledge that our work in the community takes place on the traditional lands of the Wurundjeri people of the Kulin nation. We respectfully recognise Elders both past and present.

We acknowledge the financial support received from the Victorian and Federal Governments in addition to several local government areas and revenue we generate through our other activities to support our service delivery.

Merri Health is a large multidisciplinary community health organisation operating across Northern Metropolitan Melbourne.

Our highlights



1. Our vision

A healthy and connected community.

2. Our mission

Improving health and wellness through provision of community based services.

3. Our values

We take PRIDEE in everything that we do. We value Passion, Responsibility, Integrity, Diversity, Engagement and Excellence.



For more information visit merrihealth.org.au/about-us

“Our team are there for you at every age and stage of life. We’ve been part of your community for over 40 years and continue to go strength to strength every year. This has been an exciting year and we’ve been able to continue to expand our services and reach.”

Nigel Fidgeon
Chief Executive Officer

\$30,411,200

TOTAL REVENUE

165,463

PEOPLE WE SAW
IN 2014–15¹

10

SITES

356

STAFF MEMBERS

156

ACTIVE
VOLUNTEERS

125+

PARTNERS

40+

YEARS SERVING
THE COMMUNITY

Who are we?

Merri Health creates healthy, connected communities through local health services for people at every age and stage of life.

We know that at different times, your health needs change. That’s why we support you throughout life via one local network. Our services help:

- > Children and young people
- > Carer support
- > Chronic disease management
- > Mental health
- > Disability support
- > Population health
- > Aged care

We’ve been part of your community for over 40 years. As a not-for-profit organisation, our focus is on partnering with people, responding to local needs, and strengthening the health of our entire community.

¹ Estimate based on our two main data systems. Clients may be duplicated in these systems. There are many other client systems that are not included in this estimate.

Welcome to Merri Health, it's our new name. However not much has changed as we remain committed to being a community managed health service.

Chair's report

On behalf of the Board I would like to thank the staff and the management team of Merri Health for their work. I would also like to thank my fellow Board members for their contribution and dedication to Merri Health. Together we look forward to the challenges of the future with optimism and determination to do better.

This year has seen the continuing growth of our organisation in a period of change. Merri Health continues to perform well. Our service delivery is strong. We are making the appropriate preparations to ensure we remain competitive in a more demanding and competitive health market.

As government funding increasingly demands greater competition, it means we need to change to sustain and grow our services. One new challenge is the introduction of the National Disability Insurance Scheme (NDIS). It provides for increased health and wellbeing services to our disabled community; however as a service provider we will be competing with many other providers to offer NDIS services.

Regardless of the more competitive environment, the Board and the organisation remain committed to the provision of locally based and appropriate services to our community. The Board also remains committed to the principle that the community is involved in the running of our organisation.

Our strong financial position has given us the opportunity to improve our branding, marketing and information services to our community.

The Board is looking at further improvement to our facilities, with various options and expansions of our buildings. Our financial reserves are strong which gives us the opportunity to build for the future.

In response to the more demanding and changing environment the Board continues a strategy of maintaining partnerships with organisations that share our values and our view of community health. The Board and management are also committed to providing leadership in the community health sector. We are involved in various forums to understand and to input into the policy process.

I am proud that Merri Health has earned a Rainbow Tick for its provision of safe and high quality services that are inclusive of gay, lesbian, bisexual, transgender, intersex and queer clients and respects their needs, wants and aspirations.

This year as Chair I was fortunate to be part of a delegation with the Moreland Friends of Aileu group, to East Timor. I was able to witness the positive accomplishments of the Friends of Aileu and I am proud that Merri Health will maintain its commitment to the rebuilding of East Timor.



Looking to the future by being proactive and working together, we will continue to provide services that support and benefit our community.

Carlo Carli
Chair, Merri Health

It is a pleasure to present our annual report, marking the end of an extremely busy year of continued growth and success for the organisation.

A message from our CEO

We have continued to expand our services to new areas and increase access to a range of our services in responding to community needs. We have championed several new and innovative models of care and new service initiatives, many that are showcased throughout this report and for which we have received various accolades and awards throughout the year. This is testament to the quality and nature of the services we deliver.

During the year we launched our new brand and name as Merri Health. The decision to undertake this was reflective of what our clients and the community already know and call us, while also better describing the full range of health services we deliver to communities. This brand refresh has also been accompanied by the continued upgrade of many of our facilities for our clients and staff.

Our continued commitment to local communities has seen many of our teams working closely with various groups to tailor services that respond to increasing demand, and developing innovative and new approaches to the way we deliver these services.

There has been significant work undertaken across the organisation to prepare for a range of major health reforms that has positioned the organisation well as we transition to new funding arrangements for many services. This includes the introduction of the National Disability Insurance Scheme in July 2016 with the first roll out in the north east region of metropolitan Melbourne.

All of our achievements could not have happened without the dedication of our staff. We undertook our fourth staff climate survey in April 2016 and saw our highest participation rate of 85%, with continued excellent results and the highest level of engagement from our staff on record! This obviously translates into the quality of the services we deliver which can be seen in our client survey where results showed that 94% of our clients were either satisfied or very satisfied with the services we provide.

The performance of the organisation has remained strong, meeting and exceeding many of our activity and performance targets while also achieving strong financial performance. This has allowed the Board to continue to reinvest in the organisation in supporting the work we undertake with communities.

The services we provide often have us working in partnership with a range of stakeholders and I would like to thank all our partner organisations for their collaboration and support, including the support of the Victorian and Commonwealth Government, who fund our role as a major provider of primary and community health services.



I would like to thank the Board of Directors for their commitment and strong governance at a time of significant change across the sector, and extend this to our dedicated staff and volunteers who work with many communities across northern Melbourne and regional Victoria.

Nigel Fidgeon
CEO, Merri Health



Merri Health is among the largest community health providers in Victoria, providing services across North West metropolitan Melbourne and regional Victoria.

Our catchment at a glance

North and West metropolitan region

The North and West metropolitan region is the most diverse region, covering 2,981 square kilometres and 14 local government areas. It has an estimated resident population of 1.67 million¹ people.

Diversity

The region has the most diverse population in the state with nearly 29.8% of residents born in non-English speaking countries² and over one third speak a language other than English at home, with Italian the most common language.

Health³

There are a greater percentage of people who are overweight or obese in Moreland and Hume.

Smoking is higher in Darebin and Hume with adolescent smoking at its highest in Yarra, Moonee Valley and Moreland.

Chronic health is widespread with diabetes rates at its highest in Yarra, Moonee Valley, Moreland, Darebin and Hume. Lung cancer incidences are at their highest in Darebin.

Languages spoken⁴

The top five languages spoken other than English are Italian, Vietnamese, Greek, Arabic and Mandarin.

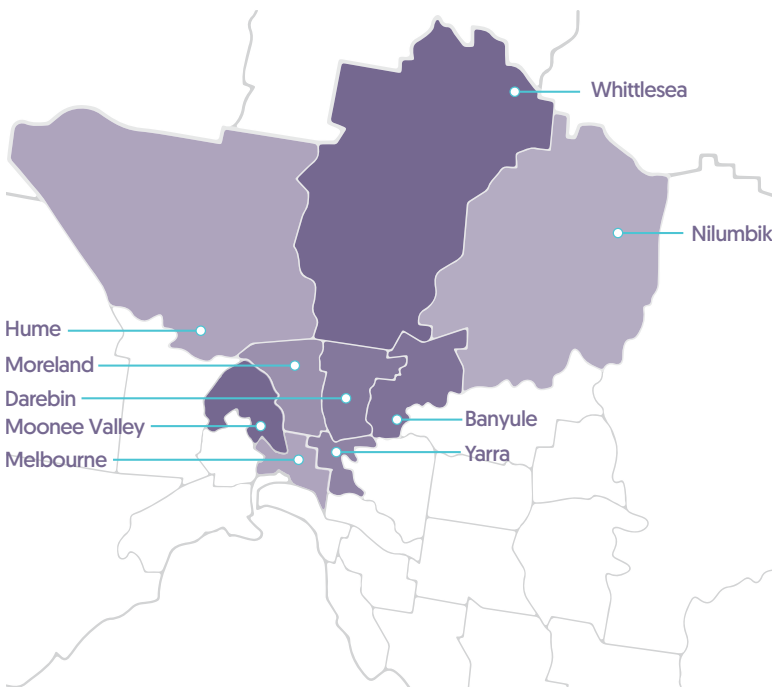
Age groups⁵

The region has a large proportion of younger people with those under 45 over represented. The largest group is aged between 25–44 years old, with 608,004 people making up 34.0% of the population in the area.

Disadvantage⁶

Unemployment is among the highest in the state. There are seven local government areas in the northern metropolitan region, an area where we provide a large number of services.

Two local government areas are among the 40 most disadvantaged areas in Victoria according to the SEIFA Index of Disadvantage. They are Whittlesea with a SEIFA score of 988.6, which places it 38, and Darebin with a SEIFA score of 990.3 that places it 39. A lower score on the index means a higher level of disadvantage.



29.8%
are born in non-english speaking country

1.67m
residents

34%
of people are aged 25–44 years old

65+

BASE SERVICES

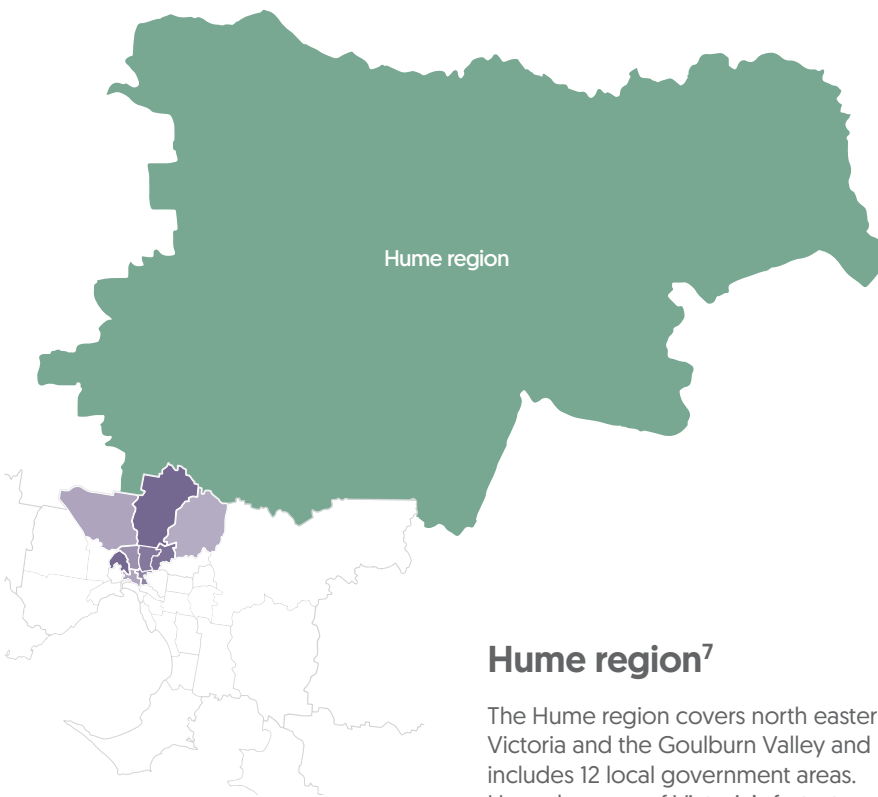
in addition to many short-term services and programs.

OUR SERVICES HELP PEOPLE IN:

- > Banyule
- > Nillumbik
- > Yarra
- > Moreland
- > Darebin
- > Moonee Valley
- > Whittlesea
- > Hume
- > Melbourne
- > Hume region

What is SEIFA?

SEIFA Index of Disadvantage measures the relative level of socioeconomic disadvantage based on a range of Census characteristics like low income, educational attainment and job type.



38%

expected population growth by 2031

Hume region⁷

The Hume region covers north eastern Victoria and the Goulburn Valley and includes 12 local government areas. Hume has one of Victoria’s fastest population growth that is projected to grow by over 38% over 20 years to 2031.

Diversity

The region has a small percentage of people born overseas with 11.1% compared to Victoria with 27.7%. Only 6.6% of the population speaks a language other than English and only 0.8% has low English proficiency.

The Aboriginal and Torres Strait Islander population percentage is twice the Victorian average.

Health

The region has a high overweight or obese population with 55%. Just over half of the total population are non-smokers with 53%.

Age groups

The region has a large young population – those aged 45–64 years represent the largest group with 27.7%, followed closely by those under 14 years at 19.7%.

Disadvantage

Most of the local government areas in the Hume region score close to 1,000 on the SEIFA Index of Disadvantage. Greater Shepparton is the most disadvantaged area, scoring 967.8. The areas with highest disadvantage are Shepparton, Wodonga, Benalla, Wangaratta and Myrtleford.

11.1%

are born overseas

47%

are smokers

55%

are overweight or obese

See page 92 for references.

Merri Health is a large community health provider that helps people at every age and stage of life.

About Merri Health

10%

increase of overall engagement sitting

We have a strong and committed workforce and aim to recruit, develop and retain a competent and diverse workforce that provide high quality services to our clients, their families and the wider community.

Our 2016 Employee Engagement Survey results highlighted an improvement of 10% with overall engagement sitting at 59.2% and 69% agreeing that Merri Health is a truly great place to work. This shows that we have a culture of ambition.

69%

of staff agree Merri Health is a **great place to work**

We value the diversity of skills and professional experience that each team member brings to the organisation. Ongoing support is provided to our employees through education, training, regular appraisals, clinical supervision, good employment provisions and flexible working options to ensure all employees are given every opportunity to succeed in their roles. Our success is very much attributed to the performance and contributions of all our employees

Occupational Health & Safety

Merri Health and its senior management are committed to ensuring the health, safety and wellbeing of the working environment for employees, contractors, locums, students, volunteers, clients and visitors. In keeping with our values, we seek to promote a culture where harm through work is unacceptable. We encourage everyone to be responsible for accident prevention and keep their work environment safe.

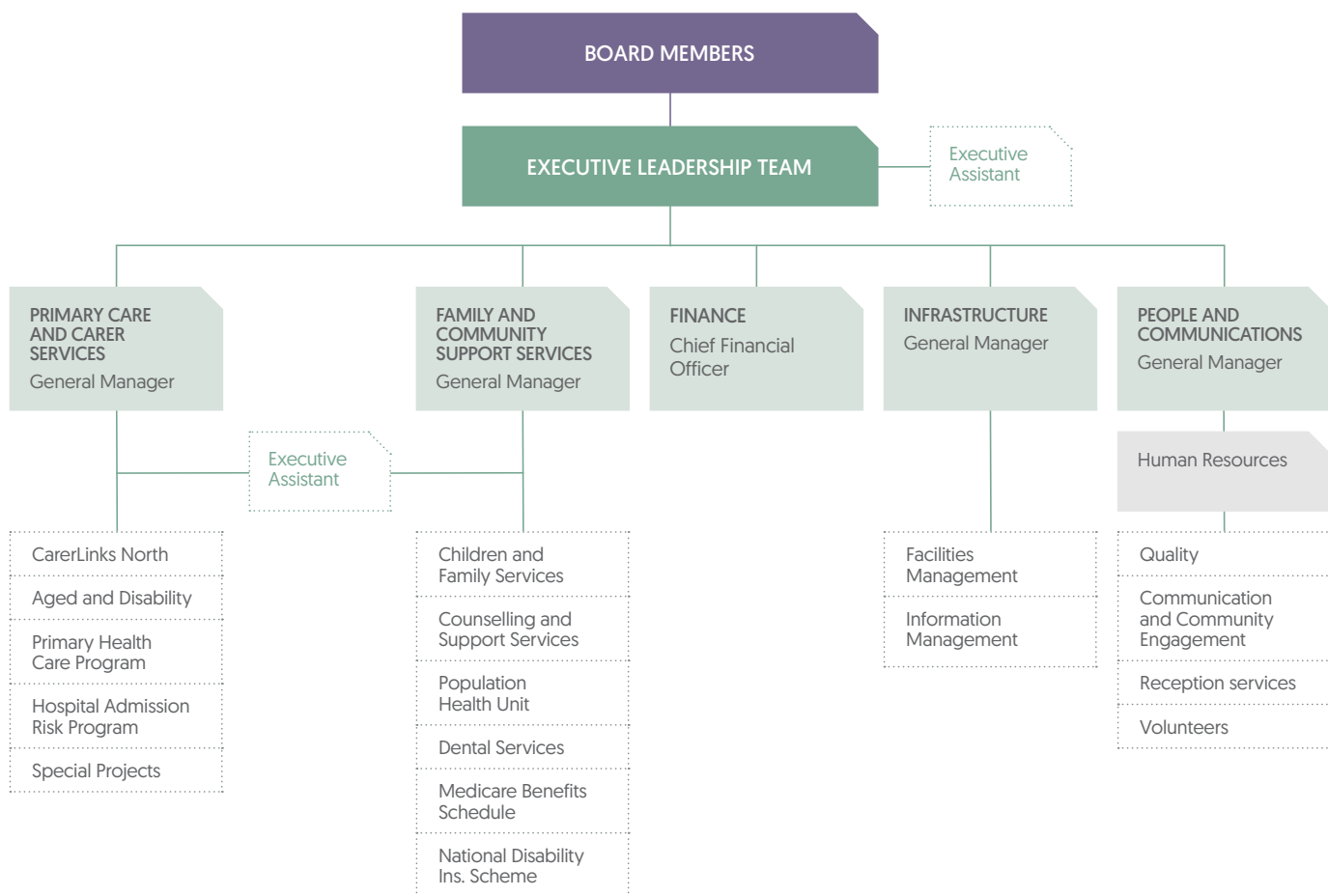
About our workforce

Workforce highlights

We developed our *Position description builder*, introducing templates with standardised position statements which are dependent on the potential employee's level of organisational responsibility, and provides a consistent approach to Occupational Health & Safety, line management and organisational responsibilities.

Equal opportunity

Merri Health is committed to fostering a safe workplace culture free from discrimination, harassment and bullying. We recognise that equal opportunity is a matter of employment obligation, social justice and legal responsibility, prohibit discriminatory policies and procedures, and support sound management practice.



Workforce profile

	No. of employees	% of total workforce
Male	45	13 %
Female	305	87 %
Total employees	350	
Full-time	123	35 %
Part-time	178	51 %
Casual	49	14 %
Executive	6	2 %
Management	20	6 %
Team leaders	29	8 %
Allied health professionals	40	11 %
Dental	6	2 %
Early childhood	2	1 %
Nursing	16	5 %
Social and community service workers	156	44 %
Support services	75	21 %

Merri mentions

- > Our *Puberty and Human Relations* education program was a finalist for the 2016 Victorian Disability Awards for Excellence in Advocacy and Promotion of Human Rights. The team deliver educational groups for young people with intellectual or learning disabilities.
- > Merri Health was a finalist for 2016 Community Organisation of the Year. Presented by Quality Innovation Performance; Australia's most comprehensive health, community and human services accreditation providers, the Excellence Awards celebrate organisations leading quality improvements, innovation and dedication to patient care.
- > Our YGLAM, queer youth theatre was a finalist in the 2015 VicHealth Awards for Building Health through Arts.
- > YGLAM were also recipients of the 2015 Moreland City Council awards for Community Event of the Year, for the production *You're Not Alone*. The performance highlighted challenges faced by same-sex attracted and gender diverse young people and was praised for starting conversations and changing attitudes of high school students in Moreland.

Our Board

Merri Health is led by a Board of Directors. The Board is made up of nine members; six Directors are elected by our members and three are specialist Directors appointed by the Board with expertise in financial management, legal practice and clinical governance.



CARLO CARLI
Chair

Carlo is a Moreland resident and has been involved in public policy for most of his professional career. Carlo has been a public advocate for access and equity, multiculturalism and broader human rights issues and was a Member of Parliament in Brunswick for 16 years. He is fluent in English, Italian and Spanish and has a good command of the French language.

JOAN WILKINSON
Board secretary

Joan has worked with Merri Health for 18 years and has been the Board secretary for 11 years.



DARRYL ANNETT
Deputy Chair

Darryl has lived in the northern suburbs of Melbourne for over 22 years and has been actively involved in the community through local school groups and sports clubs.

Daryl is a lawyer that has 30 years' experience, with a legal career in the public sector and private practice, in criminal defence advocacy and criminal prosecution work. He held a four-year appointment as Deputy Chair of the Business Licensing Authority and is currently the coordinator of the Salvation Army's Urban Justice Centre.



MICHAEL BEAHAN
Board member

Michael has been a Brunswick resident for the past six years and serves on two committees for the Australian Neighbourhood Houses and Centres Association. Michael was a senator in the Australian Parliament for nine years and served for three years as President of the senate. He was state secretary of the Western Australia Branch of the Australian Labor Party and directed a Commonwealth statutory authority, providing education for union officials.

Michael has degrees in Arts and Education from the University of Western Australia and was awarded an AM in the 2011 Australia Day honours.



MICHAEL MALAKONAS

Board member

Michael has over 23 years finance and management experience, with over 17 years of service within the financial services industry, of which 13 have been with GE Capital.

Prior to his current general manager role with GE Premium Funding, Michael was the Chief Financial Officer of Pacific Premium Funding.

Michael is a Fellow CPA and also holds a CPA MBA from Deakin University, majoring in leadership and communication. Michael has lived in both the inner and outer northern suburbs of Melbourne all his life, with the last 18 years based in Northcote.



HASAN ERDOGAN

Board member

Hasan been a Moreland resident his whole life and for the past five years has worked as an Accountant for a public practice in Moreland.

Hasan has a Bachelor of Commerce majoring in Accounting from La Trobe University and is an Associate CPA member. Hasan has also completed a Certificate IV in Domestic Building and Construction from the Housing Industry of Australia (HIA).

Hasan is passionate about health policy and is committed to ensuring the evolving health needs of our community are met. He is fluent in English and Turkish and has some proficiency in Kurdish.



KATERINA ANGELOPOULOS

Board member

Katerina is an experienced Director with a background in corporate management, health issues planning, human resources and community engagement. In 2008 Katerina was appointed to the University of Notre Dame School of Medicine Advisory Committee, and is actively engaged in governance activities with a number of Melbourne-based organisations.

Katerina has lived in the Brunswick and Coburg areas for 45 years. For 25 of these years she has been involved in community service, including the local YMCA, Ethnic Communities Council and counsellor with Moreland City Council.



MARLENE RAFFOUL

Board member

Marlene has been a resident of the City of Moreland for 13 years and has been involved in various committees within the area. Marlene has been educated in three languages and her knowledge extends to teaching and business expertise. She is passionate and committed to improving health services to the multicultural community of Moreland, and looks forward to extending her expertise to its residents.



JULIE MCCORMACK

Board member

Julie is the manager of the clinical training unit at Dental Health Services Victoria, where she has been since May 2012.

Julie has a background in education and public health and is a Director of a small business called Incompany, Women in Trades. Julie holds a Masters in Public Health (Women's Health), Graduate Diploma in Education and Certificate IV in Training and Assessment, Bachelor of Arts and a Graduate Diploma in Frontline Management. She has trained as a mediator.



GIUSEPPE ARDICA

Board member

Giuseppe has been a Moreland resident for seven years. A community activist largely involved with local groups, Giuseppe has been a volunteer, Board member and executive in the community.

Giuseppe is a revenue specialist in the energy industry and at work is a member of the staff engagement committee and an award winner on 'People Engagement'. Giuseppe previously worked at INCA, the Italian Migrant Welfare organization in Coburg.

Our Executive Leadership team

The Executive Leadership team lead our staff to achieve common goals that are in line with our vision and purpose. Members of this team include the Chief Executive Officer, Chief Financial Officer and four General Managers.



NIGEL FIDGEON
MHA, BN, GAICD, FCNA, FCHSM
Chief Executive Officer

Nigel has extensive executive management and CEO experience in leading and managing complex organisations across the public and private health sector at both the strategic and operational levels in acute and non-acute settings.

Nigel is a Board member of the Australian Healthcare and Hospitals Association, a Board member of the Victorian Hospital Industrial Association, Chair of the Health Committee of the Australian Institute of Company Directors, and a member of the Victorian State Governments Health Workforce Reform Implementation Taskforce.

Nigel holds a Master of Health Administration, a Bachelor of Science (Nursing) along with educational experience gained at the Wharton School of Business at the University of Philadelphia, USA and executive training at the Harvard School of Business in Boston USA.



ANTOINETTE MERTINS
DrPH, PDipHRM, BBSoc, AFCHSE, GAICD
**General Manager
Primary Care and
Carer Services**

Antoinette has extensive experience working in the public and not-for-profit sector across a diverse range of organisational forms. Antoinette has strong skills in driving workforce reform, development of innovative community based models of care and developing partnerships across aged care, health and primary care sectors.

Antoinette is a public health practitioner with an extensive background in community-based health care leadership and management, service planning and development, and leading diverse multidisciplinary teams to deliver innovative services. Antoinette is committed to population health approaches as a means to improve health and wellbeing outcomes.

Antoinette holds a Doctor of Public Health degree, a Post Graduate Diploma in Health Research Methodology and a Bachelor of Behavioural Sciences (Psychology). She is an Associate Fellow of the Australian College of Health Service Management and a recent Graduate and member of the Australian Institute of Company Directors.



TASSIA MICHALEAS

BEC, BSW, MBA, AFCHSM, GAICD

**General Manager
Family and Community
Support Services**

Tassia has extensive experience in the not-for-profit and community sector and commenced her career in community health in 1996. Tassia has experience working across leadership and operational areas and takes a pro-active approach in developing and delivering innovative services and programs, to identified and emerging community needs.

Tassia has strong skills in advocacy, streamlining of systems and processes, effective engagement of stakeholders and developing partnerships. Tassia has a Bachelor of Economics, a Bachelor of Social Work and a Master of Business Administration.



GAVIN THOMPSON

B.Bus (Acc), CPA

Chief Financial Officer

Gavin has held a range of senior finance positions across not-for-profit, corporate and international sectors. He has worked in financial management in the homelessness and community service sector as well as roles in a variety of industries such as Aerospace, Investment Banking, Software Development, Retail Banking, Hotels and Trustee services.

Gavin has skills in providing strong financial stewardship to organisations while maintaining co-operative and helpful approach to aid service delivery programs.

Gavin holds a Bachelor of Business and is a Certified Practising Accountant (CPA).



NESSÁ PASTOORS

BCCJ, MER, EMBA (in progress)

**General Manager
People and Communications**

Nessá has worked in the non-for-profit sector for 12 years and has 10 years of leadership and management experience in employment relations, project management and governance. With a proven track record of building workforce capacity contributing to organisational growth, Nessá has been instrumental in driving organisational capacity and cultural change in previous roles.

Nessá's strengths lie in industrial relations, change management, stakeholder engagement and communications and marketing. Nessá holds a Bachelor of Criminology and Criminal Justice, Masters of Employment Relations, Certificate in Business and Human Resources Management, and is currently completing an Executive Masters of Business Administration.



PHILLIP HARRIS

MBA, GAICD

**General Manager
Infrastructure**

Phill has held senior executive roles within the information technology and infrastructure management portfolios spanning a number of industries including education, government, telecommunications and media, most recently within the health sector.

Phill's experience includes strategic planning, business process improvement, project management, procurement and facilities management.

Phill has a Master of Business Administration, is a Graduate of the Australian Institute of Company Directors and has a Graduate Certificate in Leadership in Education and Training, as well as ITIL Service Management and Prince2 Project Management qualifications.

It has been a wonderful year of triumphs and celebrations for volunteer services at Merri Health.

Our volunteers

120

active volunteers,
up from 104

2yrs

average engagement
from our volunteers

When working with volunteers, we take into account people's needs and motivations for choosing to volunteer and aim to match these to our service delivery needs.

Since July last year, we have seen a growth in volunteers, with a jump from 104 active volunteers to 120 at 30 June 2016. From 1 July 2015 to 30 June 2016, we were fortunate to have 145 volunteers engaged in our service delivery across the organisation.

With volunteer numbers falling in the sector over the past years, it's encouraging to see that most engage with our service for a minimum of two years, with many remaining for six or more years!

Over the past year we have grown volunteering opportunities. We have created new long-term roles in some of our program areas, and short-term projects have given us the opportunity to offer one-off volunteering opportunities, like at our Fawkner Food Festival in 2016.

The Community Grocer Fawkner

The introduction of *The Community Grocer* in Fawkner in November 2015, a low-cost market for fresh fruit and vegetables, saw new opportunities for volunteers.

The success of the market has allowed us to extend the project period beyond February 2016, and with the help of our volunteers is still tracking well and a huge success!

Training

Volunteers have continued to take advantage of the various in-house training opportunities available including:

- > Equal opportunity,
- > Gay, lesbian, bi-sexual, transgender and intersex inclusive practice,
- > Working with Aboriginal and Torres Strait Islander clients,
- > Cultural diversity and,
- > Professional boundaries and volunteering.





Celebrations

Volunteers together with Merri Health staff enjoyed the festivities of our Mogies event extravaganza – a parody of the Australian TV Logies awards, where everyone enjoyed the attention of paparazzi and their 15 minutes of fame in celebration of all their achievements in 2015!

We also recognised and celebrated the achievements and dedication of our volunteer workforce during National Volunteer Week held each year in May. Following this year's theme of Give Happy, Live Happy, we thank each and every one of our volunteers for spreading happiness to those who are often most in need!

Top: Clockwise from the top – Day to Day Living volunteers with Premier Daniel Andrews
 Above left: Achmel Temple
 Above right: Chris Lewis

Awards and recognition

We're proud to see our volunteers recognised for their efforts.

- > The Community Grocer Fawkner – Finalists, 2015 Minister for Health Volunteer Awards. Supporting food security and access in Fawkner.
- > Achmel Temple – Recipient, Most Outstanding Youth Volunteer, 2015 Premier Volunteer Champions Award. Achmel supports young people experiencing issues with alcohol and other drugs to make informed choices.
- > Day to Day Living group – Recipient, Most Outstanding Volunteer Team, 2015 Premier's Volunteer Champions Awards. The team were recognised for their efforts in supporting people with mental health issues. Well done Sue, Renee, Kyleigh, Fatma, Aishwary, Roba, Katherine, Victoria and Kristen!
- > Chris Lewis – Recipient, Youth Contribution, 2015 Moreland City Council awards. Chris is a mentor with our *TRACK Out* program that works to educate young people about alcohol and drug use.

All part of your **Merri Health** network.

Our services

Our updated service streams

In February 2016 we announced our new name, Merri Health. With this came an update to how we group our services, to make it easier for everyone to find what they're after.

We now have nine updated service streams. More information can be found on page 19.

Service divisions

Primary Care and Carer Services

- > CarerLinks North
- > Aged care
- > Disability: allied health, activity groups and respite.
- > Health and wellness
- > Management of chronic conditions
- > Young adults: respite under our *Interchange North West* program, and help for young carers.

Family and Community Support Services

- > Child and family services
- > Dental
- > Disability: Puberty and Human Relations Education and MerriKids early childhood intervention.
- > Mental health
- > Young adults: Personal Helpers and Mentors service, services for same-sex attracted and gender diverse young people, youth counselling and Puberty and Human Relations Education.
- > Population Health Unit

Service support divisions

Our service support team is based at Harding Street, Coburg and include divisions People and Communications and Infrastructure.

People and Communications

- > Human resources
- > Marketing and communications
- > Quality and innovation

Infrastructure

- > Information management
- > Facilities





Child and family

By working in partnership, our services promote happy, healthy children and strong families. This includes services like MerriKids early childhood intervention, family services and *Victims Assistance Program*.



Aged care

We promote wellness and independence to help older people stay connected in their community. This includes services like allied health, activity groups and short-term education and exercise groups.



Young adults

Our services and support help put young adults on track for a healthy, connected and fulfilling life. This includes respite under our *Interchange North West* program, and help for young carers, Personal Helpers and Mentors service, services for same-sex attracted and gender diverse young people, youth counselling and Puberty and Human Relations Education.



Management of chronic conditions

We help people with an ongoing health problem get treatment and support that makes managing their condition easier. This includes services like the *Hospital Admission Risk Program*, community nursing and the Healthy Eating and Lifestyle group.



Health and wellness

We help people take control of their health and boost their overall wellbeing through services including allied health, nursing, exercise programs and education.



Mental health

We help people improve their mental health, feel well and take an active part in their community. This includes services like counselling, mental health support and the *Victims Assistance Program*.



Dental

We support strong oral health through quality dental services, ongoing education and community outreach projects. This includes general dental, oral health program *Smile 4 Miles* and *Little Smiles*.



Disability services

Giving opportunity to people with a disability to live life to the full, with flexible health services and greater choices. This includes services like Puberty and Human Relations Education, MerriKids early childhood intervention, allied health, activity groups and respite.



CarerLinks North

Supporting carers of all types in their roles, helping them get the flexible, individualised assistance they need.

At the start of each year, our team comes together to develop and review planning, to better address your needs throughout the year. We're always looking at how we can improve what we do.

Strategic and activity planning

4

overarching organisational plans

Strategic plan

The plan is developed by the Board of Directors in consultation with our leadership team that adopt the plan. Outlining the goals for the organisation the current plan outlines strategies for the 2016–2018 period, to help Merri Health advance as an active, innovative and responsive organisation, which supports our communities in exercising choice and control over their health and wellness.

Diversity plan

Diversity is a defining characteristic of the North and West region. Our plan sets the overall direction and goals for our organisation, in relation to diversity planning and practices for hard-to-reach groups. The plan focuses on five special-needs groups:

1. Aboriginal and Torres Strait Islander peoples,
2. Culturally and linguistically diverse communities,
3. People with dementia,
4. People experiencing financial disadvantage and,
5. Same-sex attracted and gender diverse communities.

Gender equity plan

Gender equity at Merri Health is a phased, whole of organisation approach to the primary prevention of violence against women. The project looks to prevent violence against women before it happens. We do this by building organisational capacity to respond and support victims of family violence.

 Read more about our outcomes on page 55.

Marketing and communications plan

Our plan provides a framework for how we will communicate and engage with our community over the next two years. It sets the overall direction and goals for our organisation, with a coordinated approach to engagement and marketing.

The 2016–18 plan includes input from Merri Health teams and is in its final stages of development.

Merri Health is an active participant and contributor in ongoing research and evaluation.

Research and innovation

By completing ongoing reviews of our programs and services, we can ensure our services are based on best practice, are evidence-based and aligned to the needs of our community.

We report on our research and innovation via our bi-annual *Research and Innovation* newsletter. In the past financial year we:

> Expanded our *Victims Assistance Program* to the Hume region to help victims of crime in isolated areas.

 [Read about this on page 57.](#)

> Introduced new services to better support consumer directed care for home care packages.

 [Read about this on page 68.](#)

> Introduced carer health and wellbeing coaching. This service supports carers to take time out for them.


> Brought together people with aphasia to form a community support group.

 [Read about this on page 59.](#)

> Finalised the *Healthy Ageing Project*, working in partnerships with people in the sector to help at-risk people living in public housing, linking them with local health services.

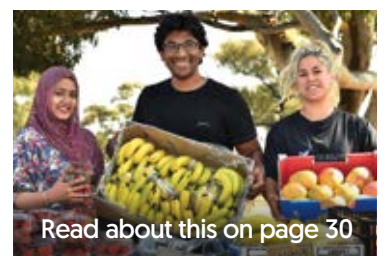
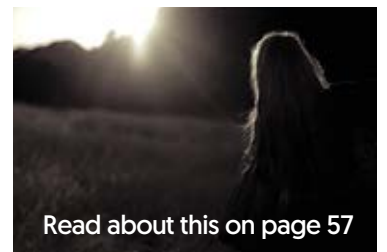
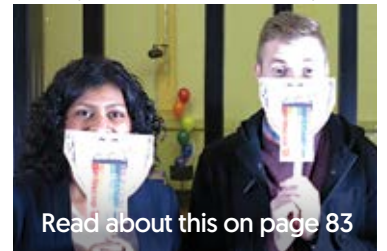
 [Read about this on page 33.](#)

> Launched *This Campaign Is Queer*, a social media support project for young people that identify as same-sex attracted and gender diverse. The project is managed by young people of the community.

 [Read about this on page 83.](#)

> Established *The Community Grocer Fawkner*, providing food security and access to cheap fruit and vegetables for at-risk people in Fawkner.

 [Read about this on page 30.](#)



Partnerships are important as we can bring expertise and resources together for better outcomes for our community.

Partnerships

125+
partners

We work with many partners like universities, TAFE, other community health providers, hospitals, Primary Healthcare Network, community groups and neighbourhood houses.

The Collaborative

The Collaborative is a partnership between North Western Melbourne Primary Healthcare Network, Melbourne Health, cohealth and Merri Health. We bring our resources together to change local health outcomes.

We do this by coordinating our approach to service planning, reviewing service gaps and challenges together, developing common pathways, looking at innovative ways of improving client care and access, and sharing ideas, resources and knowledge.

In December 2015, we renewed our commitment to the partnership with the release of the Collaborative Framework 2016–2020. The framework sets out how we will address high numbers of people with chronic conditions, increased demand for health services, and the need for better prevention strategies.

Partnering with local council

Earlier this year, Merri Health entered a memorandum of understanding with Moreland City Council, for better health and wellbeing outcomes for Moreland residents.

The signing of the agreement is an important step for the residents of Moreland and neighbouring areas, as both organisations partner to grow community-based health and wellbeing services.

“It’s important for Council and Merri to continue to build on our strong partnership to strengthen services,” Mayor Ratnam said.

Both organisations are already working on key projects, with the finalisation of the Moreland Early Years Strategy and a number of projects associated with the health and wellbeing of Moreland residents.

“It is important we continue to work together, especially in the context of significant government policy reform that has potential to impact on funding for community based services,” Mr Carli said.

Moreland is home to more than 160,000 residents, many who have chronic health conditions including higher than the state average for socio-economic disadvantage.




“It’s important for Council and Merri to continue to build on our strong partnership to strengthen services.”

Mayor Samantha Ratnam
Moreland City Council

Consumer networking

In February this year, we came together with other health providers to look at how we can better support people in our community to network and provide feedback about their health experiences.

 Read about the partnership on page 38.

Better pathways for Indigenous people

Merri Health is working in partnership to better support victims of crime that identify as Aboriginal or Torres Strait Islander.

Following the appointment of a *Victims Assistance Program* case manager dedicated to helping Indigenous clients, our team came together with the Victorian Aboriginal Health Service, Victorian Aboriginal Legal Service and Victorian Aboriginal Family Violence Prevention Legal Service. The collaboration aims to:

- > Inform and support the development of the role to engage with the community and achieve best outcomes and,
- > Review current services and gaps and establish relationships with stakeholders to help in the delivery of the service.

 Read about the *Victims Assistance Program* on page 43.



Read about this on page 38



Read about this on page 43



Key achievements over 2015/16 included:

- > Improved health pathways for diabetes management and service coordination.
- > Increased appreciation of early detection of chronic kidney disease in the community with the publication of a toolkit.
- > Promotion of the personally held electronic client record.
- > Initiating conversations and training to incorporate Advanced Care Planning in primary care.
- > Embedding advanced practice back pain care in the community with improved pathways between hospital and community health back pain clinics.
- > Mentoring other hospitals and community health centres across Melbourne to replicate our successful community back pain clinics.

Community consultation is important for Merri Health as it helps us to better understand your needs and plan for the future.

Consulting with our community

50%

of our sites had achieved a score between **7–9** in our **cultural site audit**

Community consultation is important for Merri Health as it helps us to better understand your needs, improve information provided to you and implement strategies where possible, that meet your needs.



Community Engagement Sub-committee

This group is made up of community representatives, staff and Board members from our organisation. We consult with community representatives on activities and services to ensure that we're addressing current needs of the community.

Accessible information for our community

It is important that our clients understand information, marketing materials, forms and brochures that have been given to them. This helps them make an informed choice about their health and the services they want to use.

Merri Health has made a commitment to improving access to health information by providing information in easy English or plain English. We also recently underwent a process and were awarded the Communication Access symbol for two of our main sites, that tells people that our staff and sites have processes in place to help people navigate our services and sites.



Read about this on page 31.

Reconciliation Action Plan working group

This group advises Merri Health on issues related to the Aboriginal and Torres Strait Islander community to help close the health gap. The group were responsible for helping to develop our Reconciliation Action Plan and is made up of community representatives from the Aboriginal community, staff and Board members.

Above: Sydney Road, Coburg



Cultural site audits

As part of our commitment to improving accessibility for our Aboriginal and Torres Strait Islander community, Merri Health conducts annual audits of our sites to ensure they are physically welcoming and culturally appropriate.

The most recent cultural site audit conducted in 2015 shows an increase in our ratings from previous years. On a scale of 0–9 (with 0 being very poor and 9 being ideal), half of our sites had achieved a score between 7–9, with the remaining half resting in the middle bracket of 4–6 with some minor improvement opportunities identified.



Above: Reception at our Bell Street, Coburg site

Media watch

Throughout the year, Merri Health work with local media and partners to highlight what is happening in the community.

The aim is to raise awareness of services and support, to help link the community with supports they need. In the last financial year, we had:

- > Monthly articles in the local Leader papers, The Melbourne Times, Herald Sun online, educational publications and online publications
- > Cover feature in the Moreland Leader
- > Various feature articles in the Moreland and Preston Leader
- > Radio interviews on RRR and Joy FM

We saw our teams interviewed in the paper for:

- > This Campaign is Queer
- > The Community Grocer Fawkner
- > TRACKS alcohol and drug education
- > TRACKS award recipients
- > Breaking the Binary
- > Campaign for Change
- > Birds and the bees event about sexuality education
- > Awareness of help for women with a disability that have been a victim of crime
- > Chronic health awareness
- > and much more!

You can read about all these services throughout this report.

Above: Merri Health Vic Place site in Coburg

Merri Health acknowledges the contribution carers make in the community and is proud to support carers across every age and stage of life.

Victorian Carers Recognition Act

As a major service provider supporting carers across the northern metropolitan region, every year we re-evaluate our strategies under each principle. Below is how we progressed over the last financial year.

Our responsibilities

We have a number of processes in place to ensure our responsibilities are being met under the Act. This year we are excited to highlight some of the innovative services we have set up to help carers in the community.

1. Ensure that employees and agents have an awareness and understanding of the care relationship principles.

- > Principles of the Act are reinforced at staff meetings and supervision.
- > Staff are aware of privacy and confidentiality requirements and principles of informed consent.
- > Staff are familiar with organisational policy and procedures about advocacy and complaints processes, and support clients to apply these systems to their personal situations.
- > Staff work in partnership with carers to ensure they are actively involved in developing goal-oriented care plans that are appropriate for their needs.
- > We have developed a carer engagement framework which formalises CarerLinks North's approach to community engagement. The framework embeds how we foster a carer-centred approach to service planning, delivery and evaluation.

2. Ensure that persons who are in care relationships and receiving services have an awareness and understanding of the care relationship principles.

- > Carers are provided with information in a language that is appropriate and accessible.
- > Carers are given timely information and support that focuses on care solutions that are tailored to the individual family needs, such as emergency and short-term respite.
- > Information and advice is provided at key life stages via the carer support teams.
- > Culturally safe services are being delivered to families from the Aboriginal and/or Torres Strait Islander community through our newly established protocols, *Supporting families at CarerLinks North*, contact SupportingFamilies. CLN@merrhealth.org.au. The protocols outline the need for a flexible, client-centred service to be delivered through a rapid response approach.
- > Continued commitment to improving access for culturally and linguistically diverse carers including partnerships with key regional stakeholders and strengthening relationships with providers.



3. Ensure that the organisation, its employees and agents reflect the care relationship principles in developing, providing or evaluating support and assistance for persons in care relationships.

- > Carers are provided with information about their rights and responsibilities, privacy as well as our feedback and complaints process.
- > Carers are encouraged to provide feedback on their level of satisfaction of services via an annual carer satisfaction survey. We also evaluate key activities and forums. Feedback from carers is used for future planning and to improve service delivery.
- > Based on feedback, we have established new offerings at CarerLinks North:
 - Carer health and wellbeing coaching,
 - Carer counselling,
 - Specialist carer dementia consultants and,
 - Dedicated carer peer support facilitators.

> We have reviewed the carer intake and referral process and found opportunities to improve access and response times. A key recommendation was the implementation of a holistic carer intake and assessment service. This will make services easier for carers to access, and reduce the number of times families will need to retell their personal stories, to get the help they're after.

The Victorian Carers Recognition Act sets out principles that recognise and support people in care relationships, including the responsibilities of organisations that support carers. This Act complements the Federal Government's Carer Recognition Act 2010 and is supported by the Victorian Charter supporting people in care relationships.

Above: Carers celebrate Carers' Week 2015 at Emu Bottom.

“Our intake and referral process is being reviewed to make access easier for carers and to minimize how many times carers re-tell their story to staff.”

CarerLinks North
Preston

Working together towards healthy
and connected communities.

Consumer, Carer and Community Participation

Contents

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Fresh idea sprouts in Fawkner

A new community market has sprouted in Fawkner providing low income households with access to fresh, seasonal produce.

Addressing food security in Fawkner, *The Community Grocer* market was set up in late 2015 for low income families and newly arrived and refugee groups. It provides regular access to fresh fruit and vegetables in an area saturated with takeaway shops and minimal public transport.

Ganesha started as a volunteer at the market and has seen the traffic grow over the last few months. He is now working closely with our team to look at better food distribution and opportunities to expand the market.

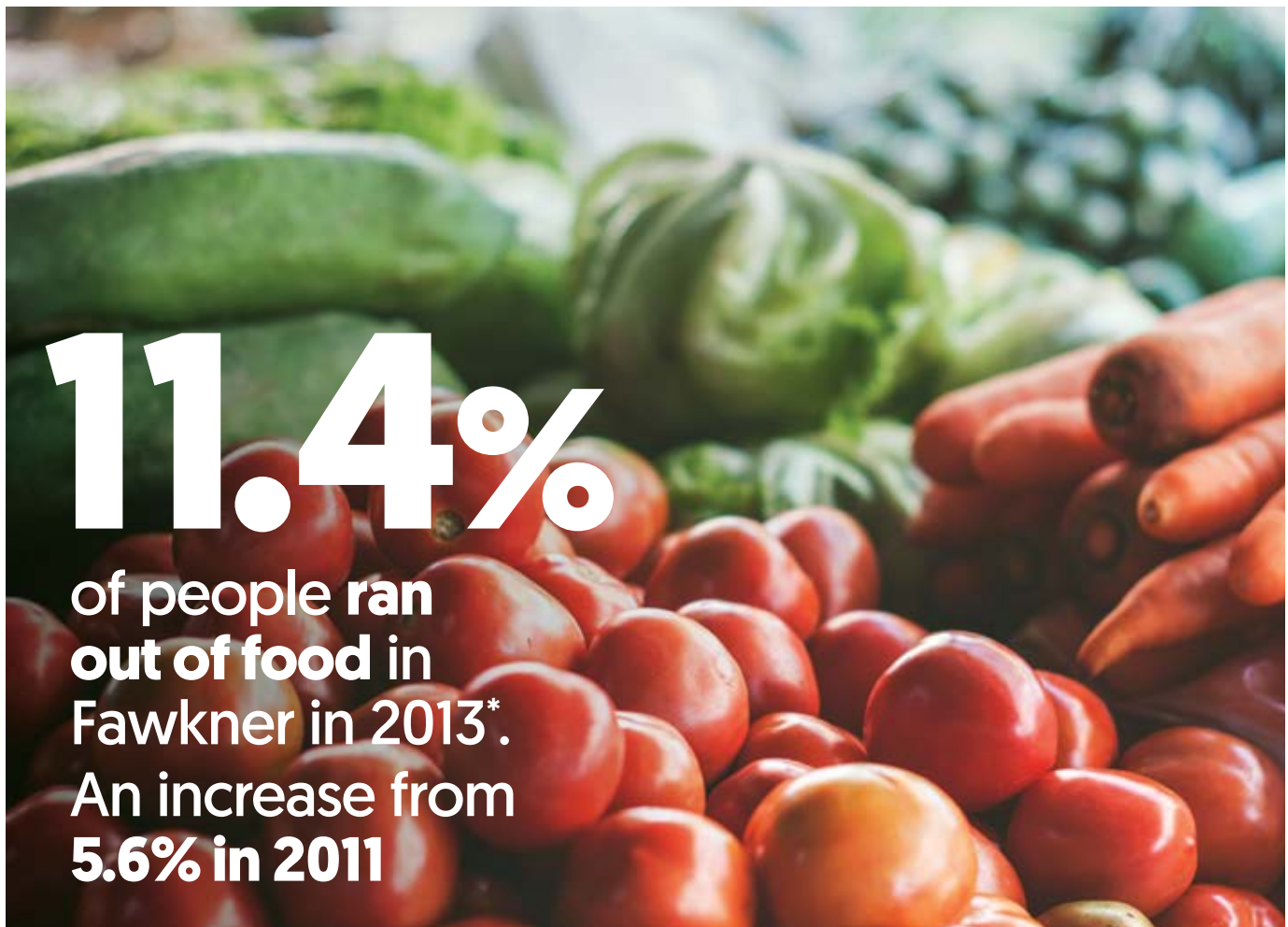
The market is an offshoot of the popular *The Community Grocer* in Carlton, which provides people living in public housing with access to affordable, high-quality and healthy food.

The project is led by *The Community Grocer* and Merri Health and is supported by the Fawkner Leisure Centre.

Come and join us!

The Community Grocer Fawkner is open to everyone, every Wednesday from 9.30am–12.30pm at CB Smith Reserve Fawkner, with a free vegetable barbeque at 12.00pm.

“It’s great to be part of a project that helps people access fresh affordable produce close to home. Many of our customers don’t drive so they really appreciate having a local market within walking distance to home where they can do their shopping and meet their neighbours,” said Ganesha Ganesha, Merri Health’s newly appointed market manager.



*Moreland Household Survey



1 in 7

Australians will have a **communication difficulty** at some stage in their life*.

Access for all



Merri Health is on its way to becoming communication accessible, with our Bell Street, Coburg and feedback phone line at Harding Street, Coburg being awarded the Communication Access symbol in February 2016.

We are the first community health service in northern Metropolitan Melbourne to be accredited under the Communication Accessibility standards!

To achieve the status of a communication accessible place, organisations are assessed by Scope to review how welcoming they are and how they work with people with communication difficulties.

We started the process with a self-evaluation to find out how we were performing in meeting the needs of clients from non-English speaking backgrounds and those with complex communication needs. In doing this, we found we would need to:

- > Improve our physical environment,
- > Develop resources to help our clients communicate and,
- > Provide more training for our reception and quality teams.

Working closely with Scope's regional communication service and our clients, we:

- > Trained our front-of-house staff and our quality managers,
- > Developed communication boards to help clients when talking to our team at reception and,
- > Updated signage inside our Bell Street site to help people find their way around the building.

What does this mean for you?

We now have more accessible points of entry and our staff can better support clients who do not speak much English or have trouble communicating in person or by phone.

Our plan for the future is to review how we can apply what we have learnt to other sites to improve access across Merri Health.

When you see the Communication Access symbol that is pictured above, it means that the business or service you are visiting is communication accessible.

The Communication Access symbol is endorsed by the International Society for Augmentative and Alternative Communication, Department of Health and Human Service and National Disability Services.

Above: Our reception team at Bell Street, Coburg using Communication Access tools

*Scope, 2016

Making good tracks



Above: Our TRACKS team

“It’s a really good experience as I learn from them as well as teaching them. There’s this one kid who’s pretty much exactly like me when I was younger. The way he talks – he’s got that street talk – it makes me realise I was this kid once.”

Chris Lewis
on Moreland City News

Local young people are set to receive better alcohol and drug education in 2017.

In June this year, Merri Health’s *TRACK Out* program was awarded a \$10,000 CommBank Community Grant to help the team provide a leadership program. Working with young people aged 13 to 18 whose lives have been affected by drugs and alcohol, family violence or poor mental health, the program will provide weekly sessions, outdoor adventure therapy and a camp.

“This means that we are able to deliver a model of practice that works. We feel very strongly about youth participation and believe that young people have the insight into what they need to equip themselves to improve their lives,” said Melanye Dolan, alcohol and drugs youth and family counsellor at Merri Health.

The program will take place in early 2017, using creative engagement strategies. It will allow young people to challenge themselves, learn positive strategies, adopt a healthier lifestyle and overcome underlying mental health issues with the help of mentors.

Supporting merry kids

On the 1 July 2016, the National Disability Insurance Scheme, known as the NDIS began to roll out across Australia. The NDIS is a new national Government initiative for people living with a permanent and significant disability.

Helping to make the NDIS easier to understand and navigate, our MerriKids early childhood intervention team were contacted by Early Childhood Intervention Australia. They were putting together a video for The Inclusion Hub and our team were asked to help to take part, following the success of our last video; *Development delay in children: how MerriKids can help*.

How does the NDIS help parents with a child with a disability?
[Click here to watch.](#)



MerriKids early childhood intervention service supports children with a disability or developmental delay and their families.

Our aim is to help you to support your child to learn, develop and reach their full potential. We’ll work with your family when and where it suits you.



63,000

public housing
accommodated

46%

public housing
residents are over
the age of 55

Healthy ageing in public housing

“Typically residents in public housing reach a crisis point before accessing medical services. A proactive and preventative approach is vital for this population.”

Merri Health, 2014

In early 2016, Merri Health came together with the Inner North West Primary Care Partnership to develop an assertive outreach model and referral pathways.

Our aim was to help older persons aged 50+ living in public housing to access community health services.

In Victoria there are almost 63,000 households accommodated in public housing with approximately 46% of residents over the age of 55 [DHS, 2016].

We went out to talk with the local community living in public housing to find out more about them, what they knew about services and how they would like to receive information.

In response, we developed materials to keep them connected and remind them that there are services available, and distributed information postcards for partners that work with people living in public housing.

The project was successful with a three-fold increase in the number of public housing residents accessing services at Merri Health during the project period. We also found that the most commonly requested appointments at outreach events were dental, optometry and occupational therapy.

A key benefit was streamlining access to services. More work will go into sustainability planning and the development of referral pathways.

This project was funded by the Department of Health and Human Services.

CarerLinks North supports carers of all types in their roles and helps them get the flexible, individualised assistance they need.

Supporting carers

Carers go boot scootin'

Among the willowy trees and old woolshed, carers came together to celebrate their annual lunch at Victoria's oldest homestead, Emu Bottom in Sunbury.

Held during Carers' Week celebrations in October 2015, our CarerLinks North team welcomed carers to take some time out for themselves.

Attended by 80 carers, the day is more than some time out and helps carers by:

- > Connecting with other carers,
- > Raising awareness of services available to them,
- > Providing social and peer support opportunities,
- > Delivering information and resources that support and enhance their caring role and,
- > Providing an opportunity to make contact with staff.

Carers enjoyed a spit roast buffet lunch and bush band entertainment with some enthusiastic line dancing. Following the luncheon, guests were able to participate in a guided tour of the historic Homestead.

Participant feedback from the event was positive with 94% of respondents telling us that they valued the opportunity to meet other people in a similar situation.

Co-design for the future

At Merri Health, we know that engagement with our clients is vital to ensure that services we deliver are appropriate, accessible and relevant to different needs. As such, we're working on strategies to ensure that we co-design with your help.

CarerLinks North has formalised a carer engagement framework which will enhance service planning, delivery and evaluation.

Engagement with our clients will:

- > Improve the quality of policy being developed, making it more practical and relevant,
- > Ensure that services are delivered in a more effective and efficient way and,
- > Promote our service as open, accountable and willing to listen.

For carers and the community, engagement with CarerLinks will:

- > Provide a platform for your voices to be heard on issues which matter to you,
- > Promote ownership of solutions,
- > Help build plans for the future so that the carers share in the decision-making,
- > Foster a sense of belonging to community and,
- > Support clients to become empowered and proactive towards issues that affect them.



Are you a carer?

If you are a carer, you are not alone. It's ok to take time out and ask for help, that's why we're here.

Call our team for support on:

 03 9495 2500

 carerlinksnorth@merrihhealth.org.au



CarerLinks North

Part of your **Merri Health** network



My story: Aisha

Aisha first moved to Darebin in 2015, after living on the streets with her mother for many years, since their arrival in Australia from a refugee camp in Africa.

As a 17 year old carer, Aisha looks after her mother who suffers from post-traumatic stress disorder. Having gone through many difficult experiences, both Aisha and her mother experience feelings of grief and loss, which were made worse with their move to Darebin, as contact with their local Melbourne African community became more difficult.

As newly arrived migrants, the family were not well connected to ongoing services. Aisha's caring responsibilities were having a significant impact on her social and emotional wellbeing and making it difficult for her to focus at school.

Since connecting with our young carer support team, Aisha's wellbeing has started to improve as she is linked with services that help both her and her mother.

It's great to see some of Aisha's achievements. Aisha has:

- > Achieved her VCE certificate,
- > Received a young carer scholarship which she will use to further her goal of becoming a nurse,
- > Gained acceptance into the La Trobe University Tertiary Enabling program,
- > Learnt to drive through the L2P program and,
- > Settled into permanent accommodation with her mother closer to their local Melbourne African community,



Voices in Motion

Above: Garden area at the Supported Residential Service, Brunswick which was put together with the help of clients

In Victoria we have Supported Residential Services which are privately owned facilities that offer accommodation and low level support to adults who are unable to live independently.

Supported Residential Services have to legally meet minimal standards of care; however residents usually have little power to influence how standards translate into their daily living. *Voices in Motion* set to change this. Funded by the Department of Health and Human Services the project investigated how changes could help provide more choice and control for residents.

There were a series of consultation and feedback cycles involving both residents and providers, moving from residents' pain points through to dialogue and action. At the end of this process residents found their voices were heard.

Residents:

- > Influenced change in the house rules,
- > Gained access to the site's kitchen for personal use,
- > Influenced decisions about the colour of the walls and contributed to the painting of feature walls,
- > Participated in the purchase and selection of new furniture for common areas and,
- > Helped shape the use of an under-utilised area that was converted into a space for residents to meet in private with visitors.

The Supporting Connections team will continue to build on the learnings from this project and will help support a more inclusive and participatory culture at the lodges.

Diabetes education

Diabetes is the fastest growing chronic health condition in Australia and affects over 8,700 people in Moreland.

The most common type of diabetes is type-2 diabetes and is often linked to lifestyle issues, like a poor diet and lack of regular exercise.

In the 2015–2016 financial year, Merri Health’s diabetes educators provided individual services to more than 300 clients and ran three group programs attended by 30 clients.

Diabetes educators provide information, guidance and support at all stages of diabetes and pre-diabetes, helping people to better manage on their own. The advice and information provided also helps family and friends, as they learn from participants.

8,700

people in Moreland are affected

Delays in identifying and managing diabetes are linked to serious health problems like **heart disease, stroke, blindness** and **kidney failure**.



Would you like help with managing your diabetes?

Call our Service Access team

 03 9388 9933



Move yourself to better health

At Merri Health we see clients of all ages, abilities and needs.

We understand that everyone’s life and goals are different, and support clients to participate in as much activity as possible for better health.

As part of our allied health team, we have exercise physiologists who set up exercise programs to help avoid or manage chronic conditions like diabetes, heart disease, mental health issues, cancers, respiratory conditions and musculoskeletal problems.

Our team take into consideration your abilities and can help with things like making home duties and activities easier, designing regular exercises and working towards having you take part in sports or work.

“I have had cancer for some time and due to my medication and treatment I became very deconditioned. With the help of my exercise physiologist I am now able to walk to the shops and complete some regular exercise. I feel so much better. I would not be where I am without the support”.

Miriam, 57



Health issues

Do you have an ongoing health issue and would like to check whether exercise could help? Our team are here for you.

Call our Service Access team

 03 9388 9933

Above: Clients take part in exercise sessions at our Bell Street, Coburg site



One voice

82%

of people said they would like to attend another consumer engagement event and **77%** found the information **relevant and interesting**.

In February this year, we came together with other health providers to look at how we can better support consumer representatives to network and share their experiences about working with health providers.

Across the region, we have many consumers that sit on community consultation groups however they often don't have many opportunities to come together to share ideas and network outside of the health services they access. With this in mind, seven health providers brought together 53 consumers from across Victoria.

Held on the 10 February 2016, consumers told us what was working well for them, new or innovative ways to engage with others, and how services could work together to support people across the region.

Above: Locals at this year's consumer networking event

What did consumers tell us?

Consumers said:

- > It's important to be respected,
- > They need good communication from health services,
- > They want more feedback from decision makers about the outcomes of projects and,
- > Consumer engagement activities could be improved.

We are planning to hold another event in February 2017 and are exploring the possibility of an online networking site for consumers.

Consumer networking was supported by Merri Health, North Western Melbourne Primary Health Network, Royal Melbourne Hospital, Royal Children's Hospital, Royal Women's Hospital, cohealth and Peter MacCallum Cancer Centre.

People supporting people

For the past few years, our team has been developing peer-led models within the mental health day program, which saw the introduction of the *Day to Day Living Program (D2DL)*.

D2DL is a group-based program for people experiencing mental health issues. It provides them the opportunity to enjoy social time together, learn new skills and support each other through their recovery journey. Participation from consumers is encouraged and they are provided with opportunities to plan, lead and facilitate groups.

A number of peer-led groups are now part of the program, including a men's group, singing group and music performance. These groups thrive on the passion and commitment of consumer leaders, allowing them to direct how the group is run and how they are best supported.



Golfing for charity

Westfield Victoria's golf charity event proved to be a success once again, with players, charities and supporters returning to show their support and raise money to help people with disabilities.

Now in its third year, every year we're fortunate to receive funds from the event to support our *Interchange North West* program run annual camps for young people with a disability.

"The camp allowed my family to get away and be supported by staff. It allowed my daughter to see that she's not the only one that has a sibling with a disability. It gives us time out in a relaxed and positive environment with great support," said Jesta*, a young mother within our program.

This year we've been able to run Mount Eliza and Phillip Island family camps, as well as a trip to ski at Falls Creek, which provided young people with the opportunity to experience new activities. Families were able to spend time with others with similar experiences and siblings were supported by others who also had a brother or sister with a disability.

We would like to thank everyone that supported this wonderful fundraiser, Westfield Victoria for their amazing effort in putting together this successful day and our local donors that contributed to this great cause.

*Names have been changed to respect the privacy of our clients. Stories and quotes have been included with the permission of the client.



"Our Interchange North West program provides recreation and respite opportunities for children and young people with disabilities, as well as for their families."

Top left: Golf charity fun in partnership with Westfield Victoria
Top right: Jenny from Signiversal enjoying the day

Feature spread

Closing the health gap

“It’s wonderful to see younger generations learning about Aboriginal history.”

Michael Long



Students from St Mark’s Primary School take part in reconciliation activities

Little Long Walk to reconciliation

Merri Health and Fawkner primary school commemorated former Australian rules footballer Michael Long’s walk, with Moreland’s first *The Little Long Walk* in May this year.

On Thursday 19 May 2016, students from St Mark’s primary school in Fawkner made the walk along the Merri Creek Trail to the Aboriginal Community Elders Service (ACES) in East Brunswick, to mark the first *The Little Long Walk*; highlighting reconciliation and hope.

Advocate and spokesperson for Indigenous rights Michael Long supported the reenactment of his 1994 Long Walk journey to Canberra, as students led the way.

“It’s wonderful to see younger generations learning about Aboriginal history and actively working together to keep the history of *The Long Walk* alive. I applaud the groups involved for coming together and putting *The Little Long Walk* on the map – I hope this is the start of something big for our younger generations,” Michael said.

Students had the opportunity to hear about Michael’s journey and experience via *The Long Walk* Foundation, as well as talk to Elders at ACES to gain a deeper understanding of Aboriginal culture and heritage in Australia.

The Little Long Walk was supported by *The Long Walk* Foundation, ACES, St. Mark’s Primary School and Merri Health.

Did you know?

The Long Walk took place on 21 November 1994 where Michael Long embarked on a historic trek from his home in Melbourne to Parliament House in Canberra, with the aim of getting Aboriginal and Torres Strait Islander issues back on government agenda.

Celebrating achievements

Well done to Liz Phillips, our Koorie community engagement officer who was nominated for Moreland City Council's 2015 Lisa Bellear award for her contribution towards reconciliation activities.

This nomination was an acknowledgement of the outstanding work Liz has achieved in this area since joining our organisation in 2010. Although Liz was not the award recipient on this occasion, we would like to acknowledge and thank Liz for her steadfast commitment in this area.

Supporting staff

Earlier this year, Liz Phillips, our Koorie community engagement officer jet-set off to sunny Western Australia, to take part in a three-day National Australian Health Promotion Association Conference.

Liz was the recipient of a scholarship from the Department of Health Western Australia and Curtin University, who provided opportunities for Aboriginal and Torres Strait Islander people working in the field of Health Promotion to attend.

Celebrating this year's theme, Connecting the dots, the conference brought together people from across Australia to look at how we could work together across health promotion practice, policy and research and its link to Indigenous Australians.



Above: Liz Phillips and her family at the Moreland City Council awards

Deadly fun at carer celebrations

On Thursday 22 October 2015, CarerLinks North hosted more than 40 people at the annual Koorie carer lunch.

Elders and family members were invited to the Lynda Blundell Centre in Dallas where they were greeted by a relaxed and festive atmosphere and enjoyed time with Elders, a roast buffet lunch, meeting new people and reconnecting with old friends.

"The girls were lots of fun and had the elders up and dancing – we have to have it again in the new year! Too deadly!" said carer Lisa*.

Feedback from everyone proved it was a great success with overwhelmingly positive responses telling our team they are looking forward to the 2016 event!

"We have to have it again in the new year! Too deadly!"

Lisa*
carer

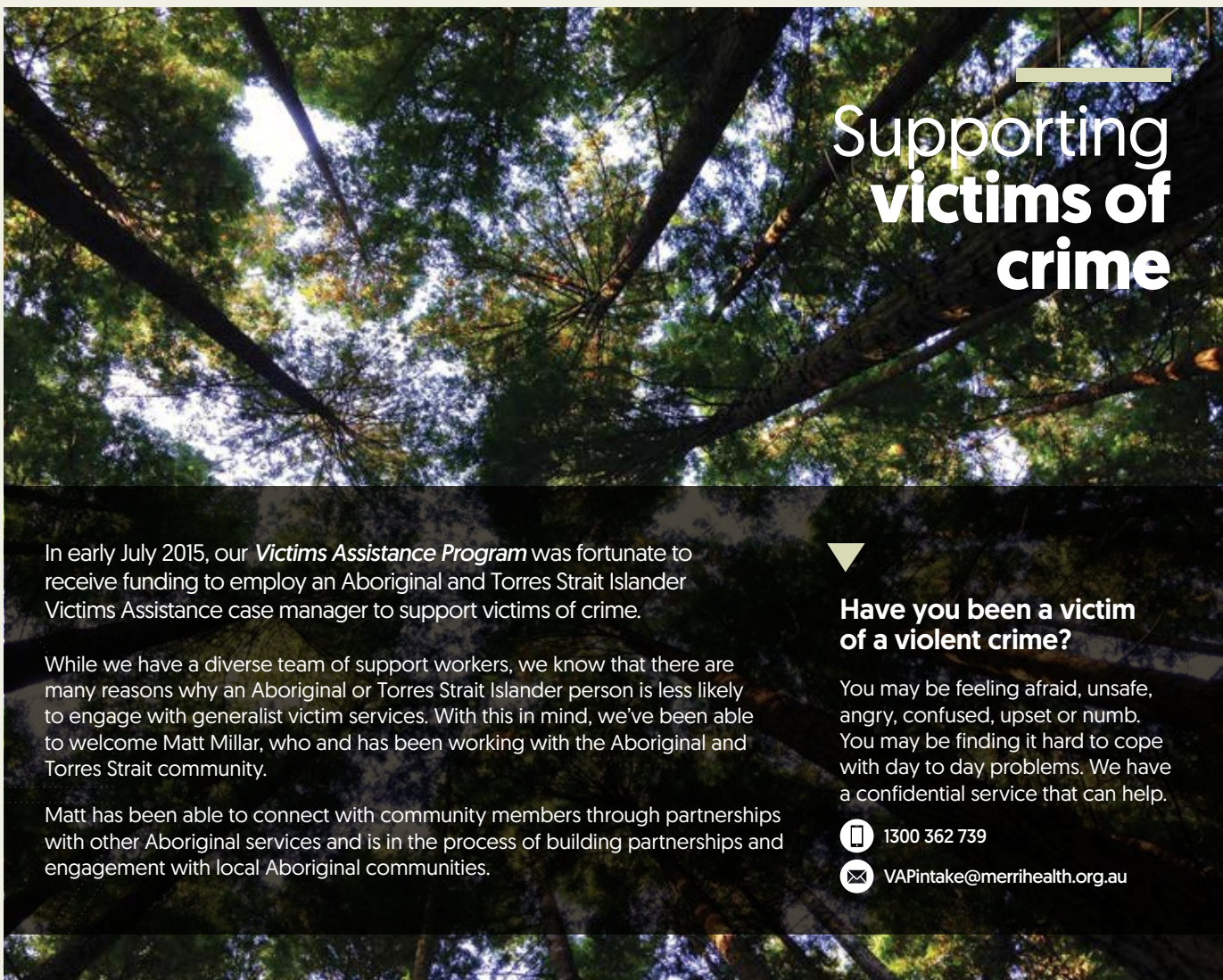
*Names have been changed to respect the privacy of our clients. Stories and quotes have been included with the permission of the client.



Celebrating good times!

NAIDOC Week is an opportunity for Merri Health to celebrate and acknowledge a year of culture for Aboriginal and Torres Strait Islander people, by joining the local community for the NAIDOC Ball.

The 2015 NAIDOC Ball was held at the Melbourne Town Hall and saw the attendance of our Koorie community engagement officer along with four community members. The event was not only an opportunity to showcase some very talented Koorie entertainers, but also a chance to dress up and celebrate the end of another wonderful week of events!



Supporting victims of crime

In early July 2015, our *Victims Assistance Program* was fortunate to receive funding to employ an Aboriginal and Torres Strait Islander Victims Assistance case manager to support victims of crime.


While we have a diverse team of support workers, we know that there are many reasons why an Aboriginal or Torres Strait Islander person is less likely to engage with generalist victim services. With this in mind, we've been able to welcome Matt Millar, who has been working with the Aboriginal and Torres Strait community.


Matt has been able to connect with community members through partnerships with other Aboriginal services and is in the process of building partnerships and engagement with local Aboriginal communities.



Have you been a victim of a violent crime?

You may be feeling afraid, unsafe, angry, confused, upset or numb. You may be finding it hard to cope with day to day problems. We have a confidential service that can help.

 1300 362 739

 VAPintake@merrrihealth.org.au

We provide quality services based on best practice, through one local network.

Quality and safety

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We support strong oral health through quality dental services, ongoing education and community outreach projects.

Dental services

3,762

Number of people treated

57%

priority access

Our dental service provides dental treatment under the guidelines of Dental Health Services Victoria and is based at our Brunswick site at 11 Glenlyon Road. The dental team includes dentists, oral health therapists, a dental prosthetist, dental assistants and reception team members.

Each year we measure how well our dental service is responding to community needs and where we can improve.

There are a number of ways we look at this data. Examples of a dental indicator may include:

Infection control

Each year the dental team conduct an infection control audit to check if we are complying with accepted standards. Dental Health Services Victoria develop the audit tool which is used by all public dental clinics. We then develop an action plan to respond to any identified areas for improvement. The 2015 audit result was 96%, that shows we are performing a very high standard of infection control. Areas for follow up included getting external laboratories to confirm their processes, and having sterilisation indicator results available within three hours.

We also conduct an audit on hand hygiene three times per year. The audit looks at how well staff perform the action of hand hygiene and if they are doing it when it should be done. Our last results showed 97% compliance with the action and timing of hand hygiene.

How quickly we respond to emergency care

This is determined by how serious a dental issue is. We measure this by asking clients a number of questions, like whether they have been experiencing facial swelling, which is classified as a category 1 emergency, or if they have chipped a tooth, which may be a category 3 emergency.

The reception team at the Brunswick site are trained in a procedure to best determine which category the client's problem falls into which gives us an indication as to how we are offering emergency care.

Category 1

	Merri Health	Target
FY 2013/14	90.6%	85%
FY 2014/15	80.0%	85%
FY 2015/16	94.6%	85%

Category 2

	Merri Health	Target
FY 2013/14	96.6%	80%
FY 2014/15	92.6%	80%
FY 2015/16	95.6%	75%

Category 3

	Merri Health	Target
FY 2013/14	93.9%	75%
FY 2014/15	94.9%	75%
FY 2015/16	98.3%	75%



Our dental services in Brunswick



Homeless support and dental

We are proud to have successfully continued our program which prioritises people that are homeless to receive dental treatment and oral health care.

Over the past year, we have continued to keep one of our dental chairs allocated for half a day per week for homeless client access. Our successful partnership with The Royal District Nursing Service Homeless Person's Program has meant that this chair is almost always fully utilised each week, meaning some of the most vulnerable people in our community are able to access our dental service more easily and efficiently.

Prior to the introduction of this initiative, Merri Health treated very few clients who were homeless or at risk of homelessness, and the few clients we did treat were often attending the service once they were already in severe pain and with limited treatment options. This new program has not only allowed us to treat more clients, but it has also led to earlier intervention and treatment, which supports a more preventative approach and improves the overall health outcomes for the client.

Chair utilisation

This indicator measures how many of our four dental chairs at Brunswick are seeing clients. There are a number of factors that determine this such as funding, the number of vacant positions and how quickly we recruit if we have a vacancy within the team.

	Merri Health	Target
FY 2013/14	87%	100%
FY 2014/2015	100%	100%
FY 2015/2016	95%	100%

Number of priority access clients we see at Merri Health

There are a number of clients that eligible for priority access at dental clinics across Victoria. This is determined by Dental Health Services Victoria.

We use this indicator to determine how accessible dental care is to vulnerable clients that need dental care. Below is a table that shows the percentage of priority clients that our service sees. We have been able to link priority patients with our dental service which shows that our service is active in seeking out vulnerable patients to deliver timely care.

Merri Health	
FY 2013/2014	49%
FY 2014/2015	54%
FY 2015/2016	57%

Record keeping audit

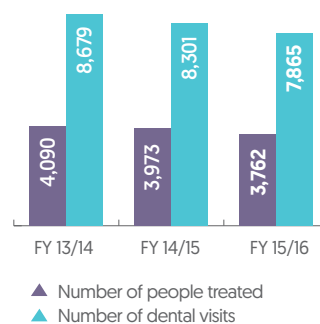
For the 2015 record keeping audit, the team achieved results higher than the region and state average in 18 out of 25 indicators. These indicators aim to show how thorough clinicians are in documenting and delivering quality dental care. An example of these indicators would be evidence of informed consent, instrument tracking and proof of clinical handover.

Good record keeping form an important component in defending a complaint or clinical negligence claim, maintains continuity of care and ensures the patient's needs are met comprehensively. These audit results highlight our clinic's improvement in this area and show the high standard that our clinicians uphold in maintaining an efficient and safe clinical practice.

Number of indicators over 90% and higher than state average

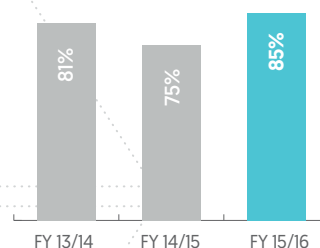
Merri Health	
FY 2013/2014	16 out of 25 – 64%
FY 2014/2015	17 out of 25 – 68%
FY 2015/2016	18 out of 25 – 72%

Number of people we see



General waiting list response rate

This indicator measures how many people accept an offer for dental services when their name comes to the top of the list. This helps us to determine how we actively contact clients who have been on our waiting list.



Infection control and cleaning

In February 2015 the podiatry program underwent an external infection control audit for compliance with the Australian Guidelines for the Prevention and Control of Infection in Healthcare and the podiatry specific infection control guidelines.

We do this in order to ensure that we are compliant with recognised infection control standards.

The reviewer identified some recommendations which could further improve infection controls including:

- > Increasing consistency in work practices,
- > Further staff training and,
- > Changes in how sharps disposal and clinical waste are handled.

Improvements

- > Late 2015 saw upgrades to the facilities used by the podiatry program that were identified as needing an upgrade or replacement as part of the podiatry external infection control audit.
- > We are currently planning how we best upgrade the podiatry program at our Brunswick site, to separate the sterilisation facilities of dental and podiatry.

Future

A podiatry infection prevention and control work practice document has been developed and implemented. These podiatry-specific work practices address the recommendations from the 2015 external podiatry infection control audit and aim to further prevent and stop spread of infectious diseases.

Falls prevention

Falls are common among older people aged over 65 and are the leading cause of injury in this age group.

In 2011–12, 96,385 people aged 65 and over were hospitalised for a fall-related injury. Falls can have serious consequences such as trauma, pain, impaired function, loss of confidence in carrying out of daily activities, loss of independence and autonomy, and even death.

There are many things that contribute to falls however reduced leg strength and balance are the main contributors.

How are we helping to prevent falls?

The falls and balance group is an eight-week exercise and education course that helps clients to look at risk factors for falls and helps them to take action to prevent falls through exercises. Clients participate in low intensity balance and strength training over eight weeks.

Overall the exercise program has been able to improve participants' strength and balance and improve their confidence in carrying out everyday activities without fear of falling.

The falls and balance group program is based on The Otago Exercise Program.

96,385

people aged 65+ were hospitalised in 2011–12



Cultural awareness training

Merri Health is actively committed to ensuring a culturally safe environment for our employees, clients and visitors.

In order to achieve this, we run several cultural awareness training programs for our workforce throughout the year, which were introduced in 2014.

The aim of these programs are to increase the cultural competence of our workforce to engage in inclusive practice and how they interact with colleagues, consumers, community members and partnering organisations. The programs provide a foundation level for employees working with diverse communities and also offer more specific learning and development in working with the Aboriginal and Torres Strait Islander, culturally and linguistically diverse people and same-sex attracted and gender diverse communities.

Our training programs are run in partnership with the Victorian Equal Opportunity and Human Rights Commission, AJ Williams-Tchen from Girraway Ganyi Consulting, and Gay & Lesbian Victoria.

Results

These programs have proved successful with:

- > 83% of client responses to the annual survey showed that Merri Health did a good job in respecting clients' diversity, like religion, gender identity, sexual orientation and race.

How are we progressing?

18%

completed **diversity foundations** course

32%

completed **Aboriginal and Torres Strait Islander** awareness program

82%

completed **gay, lesbian, bisexual, transgender, intersex and queer** inclusive practice courses



Child safety

From 1 January 2016, Victoria introduced compulsory minimum standards that apply to organisations that provide services for children, to help protect children from all forms of abuse.

With the help of a passionate and committed working group, Merri Health audited its current processes and using the standards, identified 25 ways to improve its services. These were recorded in a work plan.

We have already completed the following actions:

- > Revised our Code of Conduct to include specific information about child safety,
- > Drafted a revised Child Safety Policy and Procedure to reflect requirements from the standards,
- > Added a few questions to our interview question list about child safety and,
- > Revised our recruitment template to state our commitment to child safety.

Over the coming months, some of the further improvements that we have planned are:

- > Training for all staff including the Board of Directors about child safety, the standards, reporting requirements and how to protect children at risk of abuse,
- > Development of simple information in an appealing format to give to families and children to let them know about our commitment to child safety and,
- > Sourcing tools such as checklist that can help our staff to assess the risk of child abuse.



Reporting an incident

An incident is any event that was not planned or expected that has the potential to cause harm.

Merri Health follows the Victorian health incident management policy which requires health services to identify and report any incidents that happen, and to have review processes in place to stop incidents from happening again. An incident is any event that was not planned or expected that has the potential to cause harm.

Incidents are grouped according to who is affected by the incident. Incidents that are related to service delivery and affect clients are called clinical incidents. Incidents that relate to harm or potential harm to employees of Merri Health are called occupational health and safety incidents.

Each incident is rated based on how much harm it caused, and any additional treatment that was required. The lowest rating is incident severity four which means it was a near miss and we were able to stop an event before it occurred, or the event did occur but did not cause

anyone any harm. The highest rating is incident severity one which means the event caused significant permanent injury or death.

The process that Merri Health follows to review an incident depends on how serious the incident was and how much harm was done to the affected people. Each health service submits reports to the government on the number and type of incidents that occur.

If a client is harmed as a result of an incident, then open disclosure should be carried out. This involves telling the client that something went wrong, explaining what we know about what went wrong, providing an apology and letting the client know about any consequences for them that may arise because of what went wrong. We also tell the client what we are doing to stop a similar event happening again.



Clinical governance

Clinical governance is about having systems in place to make sure that all of the organisation share responsibility and accountability for the quality of care that we provide.

This involves reviewing and monitoring the care we provide to make sure we are always improving, minimising risks, working with our clients, and supporting staff to provide excellent care.

At Merri Health, we have two committees that oversee this work:

- > The Clinical Governance Board Sub-Committee that oversees key strategies and higher level reports on clinical governance functions and,
- > An internal Clinical Governance Committee that oversees the Clinical Governance workplan.

We also participated in the Best Practice Clinical Learning Environment Project to consider how we can provide more structured experiences for students on placement at Merri Health.

The Clinical Governance Committees review information about:

- > Accreditation and quality improvement
- > Food safety
- > Client feedback
- > Scope of practice
- > Poisons control
- > Credentialing and professional registration
- > Needle Syringe Program

Any feedback or concerns regarding these reports are fed-back to the relevant area for follow up as needed.

Through our committees, we have continued to focus on improving:

- > Infection control
- > Monitoring referrals and wait lists
- > Client record documentation
- > Incident reporting and open disclosure
- > Scope of practice
- > Evidence-based guidelines
- > Outcome indicators and clinical risk



Accreditation status

Merri Health participates in a number of accreditation programs.

Home Care Standards

In September 2015, three of our programs were reviewed by the Australian Aged Care Quality Agency under the Home Care Standards. These three programs provide respite to carers or case management services to clients.

We were very pleased to have met all of the standards. A number of improvements were identified; some by us during the preparations and others by the reviewers, which would help us strengthen the quality of our services. We have been implementing these over the past nine months.

Upcoming accreditation assessment

All Merri Health services are accredited under the Quality Improvement Council standards. This is usually done every three years.

After being granted an extension in 2015, our next accreditation assessment will be conducted in December 2016 and we are currently preparing for this assessment.

At the same time, we will be assessed under the following three sets of standards:

- > National Safety and Quality in Health Service Standards, that mainly apply to our dental service,
- > Human Services Standards, which apply to our services funded by the Department of Health and Human Services and,
- > Rainbow Tick inclusive practice standards. These are voluntary standards and we were first accredited under these in late 2014.

Feedback and complaints

79
compliments

36
complaints

Merri Health appreciates clients and community members taking the time to provide feedback on our services.

Feedback gives us an opportunity to see where we are doing well and areas we can improve. As the feedback comes directly from people using our services it is a great insight into our clients' needs which is highly valued.

From July 2014 to June 2015 we received 36 complaints and 79 compliments. These complaints and compliments allowed us to put changes in place to benefit all clients. Some examples of these changes are:

Example 1:

A client raised concerns over the condition of some chairs at our Glenroy site which were showing signs of wear and tear. Our facilities manager reviewed the chairs and agreed. 20 new chairs have now been delivered to our Glenroy site and 26 new chairs were delivered to our Moreland Road, Brunswick West site.

Example 2:

An invitation was sent to clients asking them to RSVP to an event via a phone number. A client that cannot use the telephone wanted to attend the event but could not RSVP. The client sent an e-mail to the department who ensured that their RSVP was recorded and we made sure that all future information has different ways of responding.

We regularly review the comments, compliments and complaints received and look for quality improvement opportunities. We also report to the Board of Directors on the feedback received.

Thank you to everyone who has provided feedback and given us the opportunity to make positive changes.

Compliments and complaints by department

Department	Complaints	Compliment
Aged and Disability Services	4	17
CarerLinks North	5	7
Children and Family Services	0	13
Counselling Youth and Family Services	5	13
Dental	2	0
Hospital Admission Risk Program	1	0
Merri Health facility	2	
Reception services	6	2
Population Health Unit	1	4
Primary Health Care	6	23
Promotional items	2	
Technical issues	2	
TOTAL	36	79

Client satisfaction survey

We love to get feedback from our clients.

One way that we do this is by surveying our clients and asking them about the care we give them, our reception, how their life has changed and how they think we can improve. We last surveyed our clients in late 2015 and more than 528 clients completed a survey. Some were completed in languages such as Greek, Italian, Arabic and Mandarin.

Overall 94% of people were at least satisfied and 59% of those people were 'very satisfied' with our service. The areas where we scored best were the areas about being caring/supportive, open/honest, respecting client decisions and explaining things well.

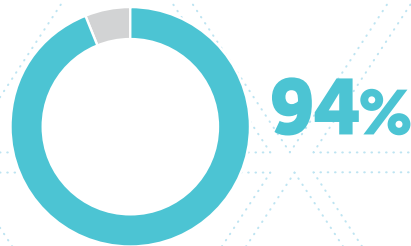
The results showed that we need to get better at reminding clients about their appointments, and letting clients know about and deferring to other services. After getting these results we have made plans to:

- > Investigate technology that will allow us to automatically confirm client appointments,
- > Organise focus groups to find out more about the information that clients would like to receive and how they would like to receive it and,
- > Improve the information that is available on our website.

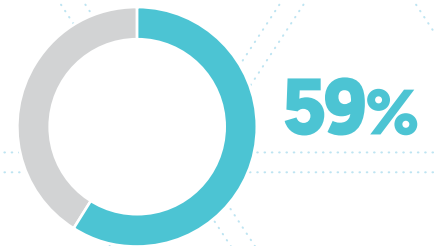
The overall key strengths are:

- > Explaining things in a way the client can understand **69% excellent**
- > Being open and honest **68% excellent**
- > Respecting the client's right to make decisions **67% excellent**
- > The worker being caring and supportive **67% excellent**

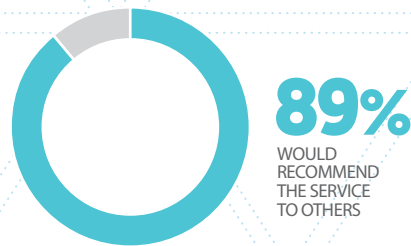
AT LEAST SATISFIED
Score 5–10/10



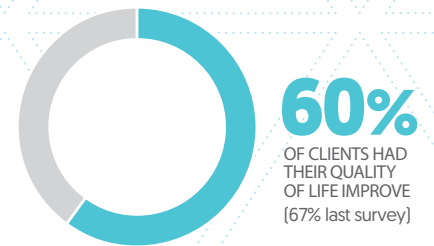
VERY SATISFIED
Score 9–10/10



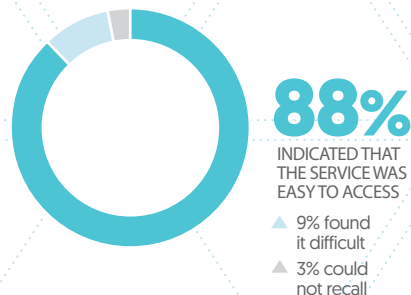
SERVICE RECOMMENDATION



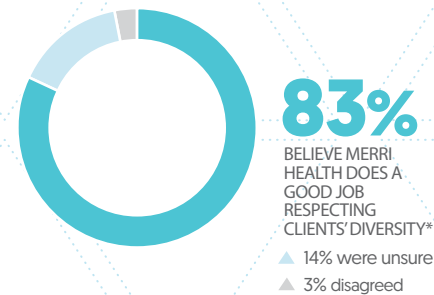
QUALITY OF LIFE
after using the service



ACCESSIBILITY



MERRI HEALTH



*with regard to religion, gender identity, sexual orientation and race

Feature spread

Respectful relationships – **Family violence, education and support**

“We’re looking at what we can put in place to support staff and stop it from happening in the first place.”

Preventing violence against women,
Merri Health 2015

Gender agenda

Merri Health is working to build gender equality across the organisation.

The gender equality project is a phased, whole of organisation approach to prevent violence against women, by looking at what we can put in place to support staff to stop it from happening in the first place.

The project complements existing work at our organisation that is building capacity to respond to and support victims of family violence.

Phase 1 is complete and included a literature review and organisational audit. This activity looked at what things we already have in place to prevent violence against women and opportunities to increase gender equality.

Phase 2 of the project is now underway, with a focus on developing leadership, knowledge and skills relating to gender equality, as well as changes to the physical environment and policy.

In addition to this, Merri Health continues to support Women’s Health in the North’s Building a Respectful Community and contributes to regional partnerships that are building gender equitable and safe communities for all.

Help for our furry friends

There are many that suffer with family violence.



Pets can also be on the receiving end of violent situations and many choose not to leave an unsafe home, for fear of leaving their furry friend behind.

We know that many emergency accommodation options like family violence refuges, do not take pets. Other options like staying with friends, family or couch-surfing, also has challenges with barriers to accessing local council managed animal shelters.

Taking this into consideration, our *Victims Assistance Program* has been working in partnership with seven local councils and family violence networks, to support workers to find emergency accommodation for pets when families flee family violence.

What are we doing?

The project will develop a regional brochure to provide support to families who are, or about to flee violence.

We are consulting with animal management teams and community safety workers at each council to formalise protocols and consider cross-council transfers to accommodate pets throughout a crisis. We are looking at possibilities of having pets for longer periods of time at the shelter while the family is trying to secure a safe environment, or transferring the pet to a shelter closer to other family members.



Would you like to talk to someone?

Call our *Victims Assistance Program*

 1300 362 739

 VAPintake@merrihealth.org.au

Every year, the Merri Health counselling team support a group of women to voice their stories via the Clothesline Project, which takes place in October during *Week Without Violence*.

Hanging out for all to see: The Clothesline Project



The Clothesline Project is an international project that bears witness to the violence against women. It first started in 1990 in Cape Cod, USA, where a group of women, inspired by the AIDS Quilt, wanted to create a unique way of taking the overwhelming statistics of domestic violence and turning them into an educational and healing tool.

The concept was simple; “let each woman tell her own story, in her own unique way and hang it out for all to see ... it is a way of airing society’s dirty laundry” [Carol Chichetto – Chair of Clothesline Steering Committee, USA].

“... let each woman tell her own story, in her own unique way and hang it out for all to see ... it is a way of airing society’s dirty laundry.”

Carol Chichetto
Chair of Clothesline Steering Committee, USA

Why are they erected for all to see?

The project aims to:

- > Empower women to share their stories and knowledge of abuse,
- > Educate the public about the extent, prevalence and impact of violence and,
- > Promote respectful relationships.

At Merri, we supported two t-shirt painting workshops in 2015 at our Vic Place, Coburg site and Elizabeth Morgan House Aboriginal Women’s Service. Participants are generally female survivors of family violence or supporters of those who have experienced violence.

Showcasing the women’s stories of hope and survival, clotheslines were erected in public places, including the Coburg Mall, Moreland library, police stations and Merri Health reception areas, with the aim of starting conversations and showcasing that it is never ok to be violent.




Would you like to speak with someone?

Do you feel alone, scared or anxious? We have a counselling team that can help.

Call our Service Access team

 03 9388 9933

For our social work service go to

 93 Bell Street, Coburg
Monday–Friday
1–3pm

Above: T-shirts on display at the Coburg mall for *The Clothesline Project*



More help, one site

Lawyer and family violence worker co-located at Merri

In October 2015, we welcomed a specialist family violence worker from Berry Street Victoria. Co-located at our Coburg site, the worker helps to provide a timely local response for women who have been referred to Berry Street's Northern Family and Domestic Violence Service through Victoria Police.

We're happy to report that the partnership has been highly successful, providing a safe and accessible space for women to meet with staff and access support, and for our teams to share information, skills, expertise and practice.

Following on from its success, the Northern Community Legal Centre out-posted a lawyer at Merri Health in July 2016, who works half a day at our Coburg site.

Boost for victims of violent crime

In early 2015, we heard of the establishment of the Royal Commission into Family Violence.

Addressing many items in relation to family violence, the Commission's outcomes will improve supports for family violence and work towards its elimination.

On Wednesday, 30 March 2016, the Commission completed their work and tabled a report to Parliament, with many recommendations. One recommendation was:

- > Identifying that *'immediate emergency funding was required to support women and their children when they need it most, with Victims Assistance Program a vital component of the support service sector for victims of family violence'*.

This recommendation saw our *Victims Assistance Program* receive one-off funding to increase support in case management and brokerage for victims of family violence. This was part of a \$1 million boost by Premier Daniel Andrews, for *Victims Assistance Programs* across Victoria, to support victims of crime in their recovery.

▼
The *Victims Assistance Program* provides help for people who have experienced violence. It helps you cope with the effects of crime.

Feature spread

Research and **innovation**



Work SMART

In 2015 we saw the introduction of consumer directed home care packages.


Consumer directed care is where clients work together with health professionals to develop their health and wellbeing plan to meet personalised goals. Consumer directed care is important as it allows clients to have more of a say in the type of care they can receive, what their package is used for and how their budget is tracking.

“We use SMART goals as they help track a client’s progress as goals must be specific, measurable, agreed-upon, realistic and time-based.”

Merri Health,
2016

Looking at how we could find the best outcomes for Merri Health clients, our team introduced the use of *Star Tool*® which helps our wellness advisors identify goals in partnership with a client. We use SMART goals as they help track a client’s progress as goals must be specific, measurable, agreed-upon, realistic and time-based.

Helping you and our team work smarter, the tool has been useful for all as it provides measurable and obvious outcomes. The client, wellness advisor, health professionals and carer or family is always kept up-to-date with how a client is progressing and we’re able to choose more targeted care, to ensure a client is benefiting from the service.

 To find out more about consumer directed care and the new services we have introduced, see page 68.



Aphasia project

Aphasia is as a communication disorder that happens when there is damage to parts of the brain that are responsible for language and speech.

Most often, the cause of the brain injury is a stroke. Aphasia does not affect intelligence but causes problems with speaking, listening, reading and writing.

Aiming to help people with aphasia, Merri Health along with La Trobe University brought together people living with chronic aphasia to conduct a research project on a community-based support group.

Participants came along to weekly to fortnightly sessions and:

- > Reflected on their lives before their stroke, how it is now and looking into the future.
- > Completed a personal portfolio looking at their strengths and areas of need for support and what they would like to work towards, like commitments, activities or conversations.

> Took part in activities linked to the *Enable Me* website.

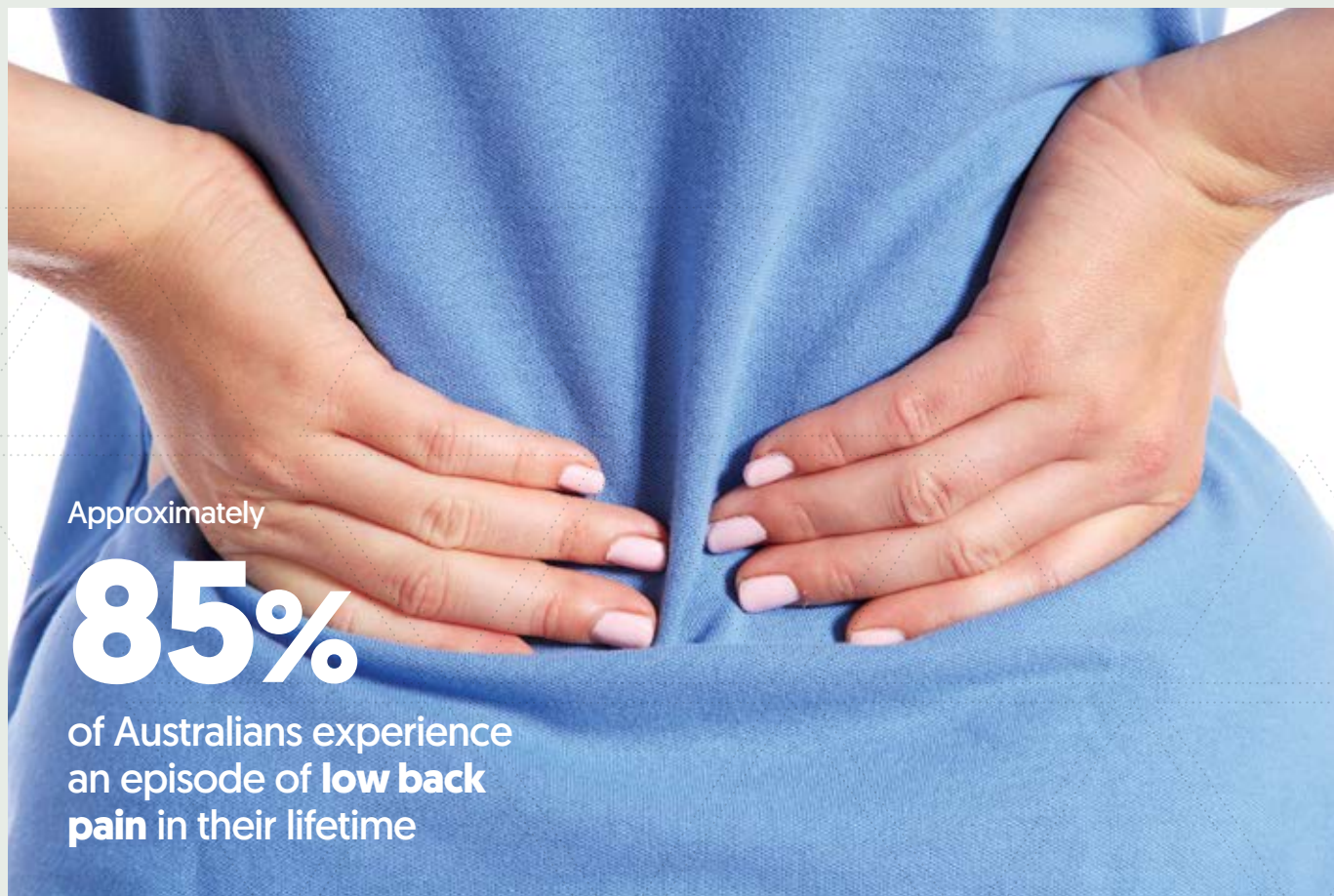
> Learnt about the role of the National Stroke Foundation.

> Engaged socially with other people with aphasia and provided peer support.

The group ran from February to June 2016. The research will be analysed over the coming months and submitted for publication later this year.

Timely access to services is important for managing many conditions; however long waiting lists can affect access to help. Back pain is one of these.

Back pain clinic helps cut hundreds from wait list



Approximately

85%

of Australians experience an episode of **low back pain** in their lifetime

Back pain is the most widespread musculoskeletal condition and a leading cause of disability across the world. Although most people improve with good advice and simple treatment, around 10% end up with significant disability.

Late last year, Merri Health partnered with the Royal Melbourne Hospital to help cut hundreds of patients from long hospital waitlists. Introducing a new spinal pain clinic in Moreland, it provides specialist assessment and management services to people with back pain without having to go to hospital.

We're pleased to report that in its first year, the clinic:

- > Helped reduce wait times to under 10 weeks from up to two years,
- > Provided clients with quicker access to non-surgical management which left people very satisfied and,
- > Resulted in the successful credentialing of Merri Health's physiotherapist as advanced practice physiotherapist.

The project has come a long way with the Department of Health and Human Services replicating the project in three other hospitals with their local community health partners. Along with Melbourne Health, we are supporting these new partnerships with resources and guidance to help set up the model in their communities.

The Back Pain clinic is supported by the Department of Health and Human Services.



Study

Exercise: what has better results?

Our Hospital Admission Risk Program known as HARP helps people with chronic and complex medical conditions that are regularly going to hospital because of their health.

We have a team of health professionals that work with The Royal Melbourne Hospital to help clients that regularly present at hospital. We help with care management in the community to help clients stay well at home, and keep them out of hospital.

Always looking to improve how we provide services, our team set out to understand how home-based exercise programs differed to centre-based exercise programs for elderly clients with chronic heart failure. We wanted to know whether the location of services made a difference to clients' health outcomes.

To measure how clients were tracking, we followed two groups and their progress, with 45 people taking part in the study. Each group took part in a 12-week home-based or centre-based exercise program.

What did we measure?

We took measurements at four stages:

- > At the start of the program,
- > At the end of the program,
- > Six months after they took part in the program and,
- > 12 months after they took part in the program.

At all of the above stages, we measured a client's exercise capacity through a six minute walking distance test, and their quality of life using the Minnesota Living with Heart Failure questionnaire.

What did we find?

Overall, we found that home-based and centre-based programs had similar effects on exercise capacity and quality of life. While home-based programs provided flexibility to the client, client engagement is a factor at the six and 12-month period.

What did we learn?

There was low participation of females in centre-based exercise program. When we asked clients, the reason was because of a fear of using taxis alone and limitations on time as many are carers.

With home-based and centre-based producing similar results, it tells us that there is flexibility for the client as to where to complete the program based on their needs.

This study was conducted by Chu Chan Yao, Peita Price, Mark Tacey, Monisha Sharma and Dr Dominica Zentner, from Merri Health, The Royal Melbourne Hospital and Melbourne EpiCentre, University of Melbourne.

Above: Clients take part in exercise sessions as part of our Hospital Admission Risk Program

We've been part of your community for over 40 years. Our focus is partnering with people to support continuity of care.

Continuity of care

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Victim support goes regional

“Our victims’ assistance team has strong practices that will allow us to provide the right support across regional Victoria – our clients and their needs are our priority.”

Vivianne Woska
Merri Health

Earlier this year, Merri Health announced it would extend its **Victims Assistance Program** to the Hume Region.

The victim support service is now provided by Merri Health over 12 municipalities, in addition to the already existing seven local government areas in northern metropolitan Melbourne.

Team leader of the victim support service, Vivianne Woska, said the service had seen an increase in demand in the recent January to March quarter and the team were ready to provide this much needed support to rural areas.

“This will be the first time Merri takes this service beyond the metropolitan catchment, extending support all the way up to the New South Wales border.

It provides us the opportunity to build synergies between metro and rural approaches to victim assistance,” said Vivianne.

In the Hume Region, the Victims Assistance Program will be delivered from the Wangaratta Government Centre with co-locations at the Benalla, Shepparton and Wodonga Police stations.

From July to December 2015, Merri Health registered 624 new client events and delivered 4,585 of *Victim Assistance Program* service hours across the northern metropolitan region.

Merri Health was awarded the *Victim Assistance Program* contract for 2016–2018 by the Department of Justice and Regulation and will work closely with the Department in its service development.



4,585

Victims Assistance Program service hours delivered across northern metropolitan region



Jamie Oliver's Ministry of Food rolls in

"I'm learning how to make new meals which I'm now trying at home."

Tina
Participant

Locals were among the first Moreland group selected to take part in Jamie Oliver's Ministry of Food cooking classes.

Participants from our Good Food group took part in the five-week program in September 2015, aboard a mobile kitchen to learn basic food skills for better eating habits. Learning how to make nutritious meals on a budget, participants reported positive changes to both their physical health and mental wellbeing.

"The experience has been amazing. I'm learning how to make new meals which I'm now trying at home. I've made new friends along the way and we are all supporting each other through this – this has been so important for me," said participant Tina.

Targeting locals that experience disadvantage, the program aimed to change eating habits among vulnerable groups.

"People experiencing a mental health condition are more likely to suffer from physical ill health which can lead to diabetes, heart and other conditions related to poor diet and life style," said Kate Verghese, community mental health worker at Merri Health.

The fully equipped 14-metre mobile kitchen made its way across the state.

Above: Brian and Kristen aboard the Jamie Oliver food truck

Safe injecting

The *Needle and Syringe Program* is a free and confidential needle exchange service for people who inject drugs.

It is a public health initiative that aims to minimise the transmission of Human Immunodeficiency Virus (HIV), hepatitis B, hepatitis C and other blood borne viruses among injecting drug users, their sexual partners and children.

Merri Health is a secondary *Needle and Syringe Program* that means we provide limited needle syringe specific services beyond the distribution of equipment.

In May 2015 we successfully secured growth funding to grow access to sterile injecting equipment. We worked together with *Youth Projects*, a community organisation that provides a primary *Needle and Syringe Program* to people living in Moreland.

From 1 July 2015 to 30 June 2016:

- > **129,118 syringes distributed** at our Coburg and Brunswick sites, which is an increase of 105,802,
- > **531 new people** came to the service, which is an increase of 389 and,
- > **83 staff members** from Merri Health and *Youth Projects* were trained in harm reduction/*Needle and Syringe Program* overview, blood borne viruses, myths and discrimination, and performance and image enhancing drugs.

Final recommendations from the project are currently underway.

Let's get moving

Following the introduction of consumer directed home care packages, our team have been looking at new ways to provide clients with what they're after.

Earlier this year we introduced light chair-based exercise groups, which sees clients take part in a 30-minute upper and lower body exercises, with the aim of getting clients moving and feeling better.

Understanding that everyone is different, we have introduced specialised exercises for clients that have different needs or may have injuries and carers, and partners are welcome to attend or take part. Everyone is welcome to get moving for better health!



Clients take part in chair-based exercises at our Coburg site

10

cigarettes per day doubles your **risk of dying**

50%

of males and females **smoke in the Arabic-speaking community***

Up in smoke

Are you thinking of stopping smoking?

Call us to chat. We'll help you through it all.

📞 03 9388 9933

Earlier this year, we set up a stop smoking clinic in a bid to tackle high smoking rates in Moreland.

The sessions are run at two Merri Health sites based in Brunswick and Coburg and provide one-on-one sessions with the client's unique needs in mind.

"Our approach is a little different – we know how hard it is to stop smoking and try to make it as easy as possible for the person. It doesn't matter if we've seen you for the first time or the eighth time, every single time we see you, you move one step closer to quitting once and for all," said Christine Buckley, smoking cessation facilitator at Merri Health.

Local Indigenous man, Garry Charles knows first-hand the benefits of community support, as he self-referred to the service earlier this year.

"I want all my Aboriginal brothers and sisters who smoke to know that there is help and it works. Some of my cousins who have respiratory problems already know about it and are looking to get help. Talking to someone has been the best way to help me stop smoking – I'm getting there," Garry said.

According to the Cancer Council, smoking just 10 per cigarettes per day doubles your risk of dying, with current smokers estimated to die an average of 10 years earlier than non-smokers.

*Australian Institute of Health and Welfare, 2013

Your care, your say



“We work in partnership with you to look at your needs and develop goals together. You have more of a say in the type of care you receive and there is more transparency in how everything is tracking.”

Merri Health, 2016

Over the past year, we have been working on developing consumer directed home care packages.

Consumer directed care is when we work in partnership with a client to look at their needs and develop goals together. Clients have more say in the type of care they can receive and there is more transparency, as they are given information about how they are tracking and how their package budget is being used.

To ensure that clients get the best outcomes, we have been using the *Star Tool*® to identify goals that strengthen and improve areas of their health and wellbeing. We have also developed new service offerings to help with different areas of support, including:

- > **Client recipe book** – clients helped to put together a cook book, sharing recipes from their past, their family and friends. The aim of this exercise was to help clients think about their favourite recipes and ‘exercise’ their minds as they remembered recipes from many years ago.
- > **Outing groups and morning teas** – clients have had the opportunity to meet others, connect in a social environment and make new friends.
- > **Light chair-based exercises** – this has helped clients get moving, lifting their mood and helping them feel more active.

This is only the start of what we’ll have on offer and we’re working with clients to see what other options we can provide to help support their care plan.

Above: Working in partnership with our clients to meet your needs

New specialist footwear service

Merri Health provides a range of podiatry services to our clients and recognises the importance of good footwear.

For older clients who are at risk of increased falls, the need for comfortable, safe shoes is important to prevent injuries and ulcers, callus and corns.

We are currently establishing a new specialist footwear clinic to provide more services to our clients. Through the clinic, clients are able to learn about the best types of shoes for their feet and can buy a range of safe and comfortable shoes at a low and affordable price.

The clinic is run by an allied health assistant and all clients undergo a podiatry assessment prior to being seen, so that we can make recommendations for the most appropriate shoes.

All footwear provided through the clinic is medical grade footwear, which are high quality shoes designed by professionals. These shoes are available in a range of fittings that can be modified to suit the person's feet, and are particularly suited to clients with diabetes, arthritis, wide or swollen feet, bunions, clawed toes and who have a history of falls and poor balance.

If we're not able to find the right shoes, our allied health assistant can provide education and information on how to find a good shoe to make sure that everyone is supported.

Our podiatrists

A podiatrist will help you with the health of your feet, ankles and the lower leg. Our footwear clinic can help with specialist shoes at a low price.

 03 9388 9933



Our Hospital Admission Risk Program known as HARP helps people with chronic and complex medical conditions that are regularly going to hospital because of their health.

Partnerships for better health

800+
people with complex
medical needs

A team of experienced professionals work across North West Melbourne to provide health care in the community to about 800–900 people with complex medical needs. Working in partnership with five other health services, the service supports clients to manage their health at home by teaching them about their condition and what they can do to manage it, to reduce their risk of going to hospital.

Who are our clients?

Our clients have chronic diseases such as chronic heart failure, chronic respiratory disease and diabetes. Over half have more than five other medical conditions that affect their health, including problems often associated with long-term chronic illness.

The service is a one-stop-shop for clients as they receive help from many professionals like nurses, diabetes nurse educators, physiotherapists, pharmacists, specialist physicians, podiatrists, social workers and care coordinators. Services are provided in the community or in a client's home and they are also linked in with support services for when a client is ready to leave the program, to help them maintain their care.

People who have received the service tell us that it helped them understand their condition better and improved their quality of life.

The service is collaboration between Merri Health, The Royal Melbourne Hospital, Melbourne Primary Care Network, cohealth and The Royal District Nursing Services.

Below: Our *Easy Breathers* session as part of the HARP program





2,400
contact hours

Cardiac health

We're pleased to report that in the last financial year, our cardiac team cared for 120 people with chronic heart failure, providing over 2,400 contact hours including assessments, home visits, exercise sessions, telephone follow-up and clinic appointments.

83%

are over 70 years of age

34%

live alone

53%

are diabetic

32%

have chronic kidney disease

73%

list a language other than English as their first language

We know that by teaching people about how to take care of their condition, it helps improve their health. Our team teach people to understand their condition, to recognize symptoms and to know what to do when their condition starts to worsen. They also learn the importance of taking their medications, exercising, monitoring their weight daily, restricting fluids and a low salt diet.

This service is provided in partnership with The Royal Melbourne Hospital.



Coming soon: chronic heart failure

Merri Health is participating in a project to improve the care of people with chronic heart failure in the community.

The project will build on our current model of community support for high need clients to coordinate their care, as they move between the hospital and their home.

The project will:

- > Increase the level of support and sharing of information between The Royal Melbourne Hospital, local doctors and practice nurses,
- > Help for better communication between services and clients and,
- > Provide quick access to a specialist clinic.

Our Day to Day Living Program is a group program for people with mental health issues, which provides a safe and supportive environment for people to come together, learn new skills and support each other by taking part in a range of activities

Mental health and wellbeing



In January 2016 a community mental health nurse joined the team to provide health assessments and mindfulness groups, to support the connection between good physical and mental health.

This year, a group of consumers and staff went on a wellness retreat for two nights in Daylesford. The retreat provided an opportunity for consumers to have a break with the support of staff and peers.

“It helped me with my mental health and isolation, which gave me self-confidence,” said Raul* who attended the retreat.

“It was the best days of my life. A breathe of fresh air and great for my mental health”.

It was great to hear the good feedback and we’re hoping to run more events to support others in the near future.

*Names have been changed to respect the privacy of our clients. Stories and quotes have been included with the permission of the client.

“It helped me with my mental health and isolation, which gave me self-confidence.”

Raul
participant

Sue helps others

Our Hospital Admission Risk Program known as HARP, helps people with chronic and complex medical conditions that are regularly going to hospital because of their health.

A chronic health condition is a health problem that is ongoing and is affecting your life.

Sue* is a local that has been discharged from HARP and went on to volunteer, helping lead the air supply peer support group for people with chronic respiratory disease.

The group was formed with the help of the HARP respiratory team and now operates independently. Members meet monthly in a local café to socialize, support each other and share their experience of living with chronic lung disease.

We’re pleased that the group has seen so much success and is now registered with the Australian Lung Foundation’s LungNet website. It is open to anyone living in the area with chronic lung disease.

*Names have been changed to respect the privacy of our clients. Stories and quotes have been included with the permission of the client.


Right: Clients taking part in our gardening sessions as part of Planned Activity Groups



Activity groups

Activity groups provide fun and engaging group activities for older people and people with disabilities, to help them stay active.

Call us to find out if the groups are right for you.

 03 9388 9933



My story: Norma

Norma* is a local that attends our activity groups to help her stay connected to the community.

Norma shared her story of how attending the groups have helped her wellbeing, as she looks forward to getting out of the house and spending time with others each week.

Norma has been living on her own for many years and although she has family that live close-by and visit regularly, Norma is very independent and likes to have her own space to welcome visitors.

Not long ago, Norma had a stay in hospital and following some health issues and advice from her family, Norma had another assessment to see whether more supportive accommodation was needed. One of the suggestions was for Norma to attend a social group once a week, which is when she started attending our activity groups in Brunswick.

Norma tells us that she likes that staff work hard to make sure everyone receives a good service, especially considering there are people with different needs. She admires the workers' patience and handling of people.

Norma reports that her favourite part of the day is the exercise session and she really likes the good food.

"We always get a good lunch and then only need a small dinner!"

The group has given Norma an interest which she looks forward to each week.

"It is a regular day out where I know what I am going to do. It gets me out of the house as I hadn't been able to drive for some time. Whilst I do have regular visitors which I enjoy, going to the group gives me a focus each week. I have a commitment to the group – for the staff and for myself. It has become a good habit".

*Norma has given Merri Health permission to share her story and use her first name.



Client story: A helping hand

Our services are here to help people of all ages and at different stages in their life.

When we receive feedback, it helps us to see what we are doing well and where we can improve.

We recently received feedback from Soula* who has been getting help from our CarerLinks North team. CarerLinks North supports carers of all types in their roles and helps them get the flexible, individualised assistance they need.

“Carol told me of the contribution being offered from CarerLinks North. I cannot express my enormous gratitude for this very kind gesture.

As this has been a very difficult time, it could not have been a more welcome and unexpected surprise. I am so relieved. I would like to thank you and CarerLinks North for considering me for this most welcome support. It is a comfort to me to know that CarerLinks North is working in the background to help me where possible.

As you are aware, I am still trying to come to terms with what has happened to my dearly loved husband, the very sudden and complete change in our lives, and all the personal and financial difficulties that have come with it.

The kindness that has been given to me from both yourself and CarerLinks North is a great help and I am truly grateful. I am not sure how I would manage my situation under these difficult circumstances without your help.

Once again my heartfelt thanks for considering me for some help and also the very welcome respite”.

Thank you Soula for your wonderful feedback! It's great to hear that our team has been able to help during a time of need.

*Names have been changed to respect the privacy of our clients. Stories and quotes have been included with the permission of the client.

It was estimated that there were

2.86m

informal carers in Australia in 2015!



Are you looking after someone?

Are you looking after someone? Do you find it hard to keep up and take care of yourself? We're here to support you.

 03 9495 2500

Above: Carers take time out to enjoy our 2015 Carers' Week event at Emu Bottom.



Beyond the birds and the bees

Parents are being urged to open up and talk about sex with their children.

Earlier this year, our sexuality education team ran *Beyond the Birds and the Bees*, a free Coburg event to help parents, carers and educators talk to young people about sexuality, puberty and relationships.

Merri Health's sexuality education team have found that few parents are choosing to tackle the difficult subject and instead rely on teachers to inform their children.

"My mother had told me we were having a video about periods at school. I asked her what is a period and she seemed shocked that I didn't know but refused to tell me because that was what the video was for. When she refused to discuss it with me, it basically told me that she wasn't somebody I could talk to about periods, puberty and growing up," said Biyu* who took part in our puberty, sexuality and relationships education program.

Many young people report that they do not feel comfortable raising the topic at school and rely on other sources for information. Research shows that 43.6% of secondary students get their information about sexual health from the internet and 42.7% from a school program.

"In a world saturated with sexualized messages, it is important that parents and professionals are able to have honest conversations with young people to ensure that they have the correct information to make informed choices," said Carolyn Mogharbel, our sexuality educator.

The event was a partnership between Women's Health in the North, Darebin Community Health and Merri Health and was funded by the Department of Health and Human Services.

*Names have been changed to respect the privacy of our clients. Stories and quotes have been included with the permission of the client.



43.6%

secondary students
get their information
about sexual health
from the internet

Statistics tell us that people with an intellectual disability are more vulnerable to sexual exploitation and abuse.

This is why late this year, our *Victims Assistance Program* came together with key partners to educate, inform and empower women with disabilities to recognise and take action on violence or abuse.

Young women with intellectual disabilities from the local community were invited to attend a forum and heard about what is abuse and assault, where to seek help and had the opportunity to ask questions in a safe environment. The women were encouraged to ask important people in their lives, such as family, friends and support staff at their workplaces, to help them if they needed support to contact services and they were guided on how to get help from Victoria Police, Berry Street's family violence services and our *Victims Assistance Program*.

Each woman who attended received:

- > A copy of a DVD we made called *Hear Us: Our Stories Matter* that helps people with a disability who have been hurt to ask for help and,
- > Easy English booklets about their rights and how to report assault.

The event was a success and we're looking at running a similar event in late 2016.

The event was a partnership between Banyule City Council, Women's Health in the North, Victoria Police and Merri Health.



Preventing violence and abuse



105

children screened
across Moreland

**Health
promotion**

29%

were born
overseas

Little Smiles helps young children to keep healthy teeth.

Little Smiles

Little Smiles is a program that has been providing dental screening and oral health education for children and carers at Moreland playgroups since 2013.

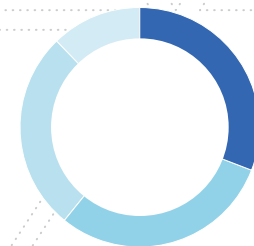
Merri Health’s dental team visit playgroups to provide oral health screenings to help improve health in children aged 0–4 years. This is done by looking for caries and tooth decay early, and focusing on prevention in early years.

In 2015–2016, Little Smiles screened 105 children in nine playgroups across Moreland. The general oral health of children’s teeth was good, with only six needing immediate attention at our dental service for caries (decay).

The home languages of the children screened were broad, which shows us how multicultural the Moreland community is. Of the children screened 29% were born overseas and almost a quarter of families had a health care card.

In late 2016, we will be working with Dental Health Services Victoria on a project to build the capacity of playgroup facilitators, so they can share key oral health messages with playgroups. This involves training playgroup facilitators in the use of the *Baby Teeth Count Too* flipchart, with sessions starting in mid-2016.

LANGUAGES SPOKEN AT HOME IN MORELAND
%



31%

URDU AND ENGLISH

- ▲ Urdu and English 31%
- ▲ Other languages 30%
- ▲ English only 27%
- ▲ Arabic and English 12%

Above: Health screenings at a local kindergarten



Sexuality and relationships

95%

of participants rated the training as very good or excellent

Pornography and young people

In late September, representatives from local schools and community organisations came together to learn about pornography and its influence on young people's behaviour. Led by Maree Crabbe, coordinator of Reality and Risk community education project, the session was part of Merri Health's youth health promotion team and their strategy to promote gender equity and prevent violence against women.

Participants had the opportunity to learn about how pornography has become more mainstream and hardcore, with consumption becoming normalised for young people, in particular young men.

The training explored how this is having a significant influence on the ways young people understand and experience gender, sex and relationships, and the serious implications this may have on their ability to negotiate free and full consent, for mutual respect, sexual health, and gender equality.

Acknowledging that pornography is not going to go away, the training highlighted strategies that schools could use to support young people to develop respectful, safe and fully consenting relationships.

Feedback on the training was very positive, with 95% of participants rating the training as very good or excellent.

Evaluation about participants' knowledge, skills and confidence levels before and after the training showed that:

- > 96% agreed that training helped them to better understand pornography's influence on young people and its relationship to gender based violence
- > There was an increase in knowledge, skills, comfort and confidence around explicit sexual imagery

The training was hosted by Brunswick Secondary College.

barrased. So the rest of my education was from *Dolly Doctor!*"

"She taught me to be embarrassed by sex"

"I was totally confused about it all and had a lot of guilt"

29%

Main themes of the stories

Confusion, Lack of understanding, Frustration, 37%

Many respondents (37%) expressed feeling confusion, lack of understanding and frustration as a result of their sexuality education experiences. These feelings seemed to be a result of lack of education, participants' inability to ask questions, and an awareness that they hadn't been taught all of the things that they needed to know.

"I also felt uncomfortable for I think in the back of my mind that is was not right but I really did not know"

"I was totally confused about it all"

"Nobody asked questions, the teacher didn't give us any details about any..."



Findings from the research

Lessons from the past and present

In 2015, our youth health promotion team ran an anonymous online survey to find out about people's experiences with sexuality, relationship and gender education. Our aim was to find out where there are gaps in sex education and how we can address these.

Results show that people's experiences of sexuality, relationship and gender education shape their future experiences of intimacy, sex and relationships, as well as their sexual and reproductive health outcomes well after their educative experiences have concluded.

Common themes throughout the stories included shame, empowerment, frustration, embarrassment and confusion.

Sources of information included parents, friends, the internet, sexual experiences, teachers, romantic and/or sexual partners, siblings, cousins, pornography, and magazines such as *Dolly* and *Cosmopolitan*.

The results told us that young people often don't find school-based sex education to be relevant, and that many receive their information from community sources like the internet, a friend or a parent.

Equipped with this information, the team developed educational materials and strategies for young people and those who work with them, to help build knowledge and healthier relationships.

To find out more

To find out how we can help your school, call our youth health promotion team on

 03 9355 9900

Let's have the talk

The Talk is an online newsletter that was developed in response to the growing need expressed by local educators and youth workers for free information sharing and opportunities for collaboration.

Led by the *Puberty, Sexuality and Relationships* education program at Merri Health, The Talk publishes current, useful information for the sexuality education sector with guest interviews, news items, question and answer articles and links to new resources.

The Talk is published once per school term and we have so far distributed seven editions since 2015, with 66 subscribers and an average read of 389 times.

The Talk

Educators, stay up-to-date with The Talk. Sign up at

 <http://goo.gl/OpWauE>

Students stand for change

“We’re proud to support young students, to give them a platform where they can show leadership and encourage respectful relationships.”

Jillian Dent,
Merri Health,
health promotion officer

Local students made their voices heard in an effort to bring about change in attitudes that discriminate against ethnicity, sexuality, gender, religion and age.

Promoting respectful relationships, earlier this year, year 8 media students from Brunswick Secondary College challenged stereotypes which are commonly experienced by marginalised groups.

Project lead and Brunswick Secondary College teacher, Grace McCulloch said that students felt strongly about making this project work.

“Many of our students know first-hand what it feels like to be discriminated against because of a stereotype. It is important that they have the opportunity to speak out against it,” Grace said.

Sharing their messages through creative mediums including photography and film, the work was on display as part of the project’s *Campaign for Change* exhibition.

Jillian Dent, health promotion officer at Merri Health explained that discrimination can have a big impact on a person’s wellbeing, particularly their mental health.

“Having young people stand up to say that discrimination and stereotyping is not ok is helping to lead change. We’re proud to be able to support these young students – to help give them a platform where they can show leadership and encourage respectful relationships,” Jillian said.

Campaign for Change celebrated World Human Rights Day by launching its exhibition in December at the Mechanics Institute in Brunswick. The campaign was a recipient of the Moreland Local Leader Grants 2015, receiving great coverage across local media and gathered the highest number of votes across all Leader papers in Victoria.

Campaign for Change was supported by Merri Health and Brunswick Secondary College.

Below: Students and locals learn about *Campaign for Change* messages





120
participants

Supporting leadership for women

Over the past two years, an Urdu speaking women's group in Fawkner has grown to over 120 participants, which sees local women get together to support each other and learn about local services.

A peer-facilitated social group for Urdu-speaking women, the official language of Pakistan, living in or around Fawkner, the group has supported women to build friendships, supports and increase their knowledge about the broader community.

The group has also grown its online presence with 200 women receiving regular digital communication about community activities and opportunities.

"I have learnt so much, met different people. I was homesick but I feel better after meeting people," said Amina*

Group members have been supported to join the Fawkner Community House employment mentoring program, CERES food business incubator program, and to start an Urdu-language story-time at the Fawkner Library.

As a receipt of an Inner North West Primary Care Partnership grant the group will build its leadership capacity to be able to manage on its own, to continue to support newly arrived women connect with their community and opportunities.

*Names have been changed to respect the privacy of our clients. Stories and quotes have been included with the permission of the client.

"I have learnt so much, met different people. I was homesick but I feel better after meeting people."

Amina

Feature spread

Responding to your needs

Merri Health is one of only three Victorian community health providers with Rainbow Tick accreditation. We are a proud inclusive service provider and we work closely with same-sex attracted and gender diverse community, to provide safe, supportive and all-inclusive services for everyone.

A national campaign to help isolated same-sex attracted and gender diverse young people launched in May this year.

This Campaign Is Queer

Devised by Moreland's queer youth theatre, YGLAM, the social media campaign was the first of its kind as young people took full control of channels; developing content and managing activity across seven social media accounts and website.

This Campaign is Queer launched on the eve of International Day Against Homophobia, Transphobia and Biphobia to show young people that they are not alone. It was attended by more than 100 people including local council, Victoria Police and the shOUT Youth Chorus, and has engaged Australian celebrities, Tom Ballard, who helped us launch the campaign, Faustina Agolley known as Fuzzy, and Jordan Raskopoulos from the Axis of Awesome. All filmed a testimonial for queer young people, enforcing that there is always support available.

From May to July this year, YGLAM have established themselves on Facebook, Twitter, Instagram, YouTube, Vine and Snapchat, where they have connected with young people across Australia.

Since launching the campaign, we have had lots of coverage across social media and traditional media with a couple of articles in the Moreland Leader with an interview by a YGLAMMER.

What's the reach?

Facebook

#ThisCampaignIsQueer has had over 82,546 impressions on our Facebook page, with posts organically reaching 3,575 people. The celebrity videos reached more than 59,000 people and the page has maintained a steady growth in 'page likes' over the past two months. We receive an average of five new page likes per week, and post engagement have an average of 172 post clicks and 50 reactions, comments and shares.

Twitter

#ThisCampaignIsQueer's Twitter has had 5,355 impressions, 560 profile visits and is currently sitting on 132 followers. They have engaged with other media outlets through re-tweets and mentions and have received mentions from other large accounts. #ThisCampaignIsQueer's top Tweet has received over 302 impressions, eight likes and four re-tweets.

Instagram

The Instagram account is on a steady rise, with 25 new followers in the past week alone. #ThisCampaignIsQueer's top post has received 42 likes and had 1210 interactions in the past month alone.



In two months, we have:

82,546

impressions
on Facebook

5,355

impressions
on Twitter

1,210

interactions
on Instagram

As part of #ThisCampaignIsQueer, a few YGLAMMERS sat down to share their experience of YGLAM, what they get out of it and why it's important to them. Watch the video!

If you can't see the video, here is what they had to say ...

Our story: Be yourself



Ethan

"YGLAM is an important program because it gives an outlet for young queer people to express queer issues in theatre productions and through social media, and reach the wider community and make a difference."

"There are a lot of people who are in the closet about the sexuality or gender identity and they need to know that there are other people out there that are like them."



Jack

"I guess in a way, for a lot of members it's like a support group. It's like having all these other queer people around makes everyone feel less isolated. So much less isolated."

"... and we're all about making videos..."

"And it's to make them know that [sings] 'they're not alone ... We've got a song, ok?'"

"Watch our videos. Give them thumbs up on YouTube, 'like' them on Facebook ..."



Amy

"What I enjoy most about being part of YGLAM is just the support that I get from everyone in the group and it's helped me get through a lot of things personally."

"You can get to express yourself and explore ideas through theatre and other media means."



Charlie

"I think YGLAM is really important because it gives queer young people a place to go and feel like they are safe. Like, a lot of people don't have a safe space that they can go to, where they can just feel like they can be who they want to be. YGLAM gives young queer people that opportunity."

"But it's an acting experience as well, which I've enjoyed my entire life."

"Targeting queer young people who may be feeling isolated."

"We're on Vine, Instagram... and message some of us!"



Helium history

As part of *This Campaign Is Queer*, the YGLAM team have been getting creative with memes, videos and song creations.



Helium history is one of the team's great ideas that highlights same-sex attracted and gender diverse stories from history, like stories from Virginia Woolf and Freddie Mercury. The team got creative with a little helium to keep it interesting! Check out the final product for a mixture of learnings with a side of fun!



A shade of purple

In August last year, our staff proudly pulled out their best purple clothing to celebrate *Wear It Purple*.

A day dedicated to bringing thousands of supporter voices together to show rainbow young people that they are not alone.

Wear it Purple is working towards a world where every young person feels safe, supported and empowered, regardless of sex, sexuality or gender identity.

Every young person is unique, important and worthy of love. No one should be subject to bullying, belittlement and invalidation.

We celebrated the day by decorating our sites purple, encouraging staff to wear purple, selling *Wear it Purple* wrist bands and having purple themed morning teas. We also shared messages across social media and our website to show our support and share this important message.



Breaking the Binary

Merri Health's queer youth ensemble YGLAM performed for the first time at this year's Midsumma festival.

Developed and performed by queer young people, *Breaking the Binary* explored gender diversity for young people today.

"The performance used personal experiences and cultural provocations to explore gender identity in today's world. The young performers take care of everything; from writing to production and use shadow puppetry, multimedia,

original songs and storytelling to weave a rich tapestry that authentically portrays the experience of gender diverse young people today," said Russ Pirie, YGLAM project officer.

In the 18 years that YGLAM has operated, this is the first time the group represented queer youth at Melbourne's largest gay, lesbian, bisexual, transgender, intersex and queer festival.

Reshaping healthcare
since 1975.

Financial report

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Board of Directors proceedings

Board attendance at meetings

July 2015 to June 2016

Board Meetings	Attended	Eligible to Attend
Carlo Carli – Chair	11	11
Darryl Annett	9	11
Marleine Raffoul	9	11
Michael Beahan	10	11
Michael Malakonas	9	11
Katerina Angelopoulos	9	11
Giuseppe Ardica	10	11
Julie McCormack	9	11
Hasan Erdogan	8	11

Sub-committees

Finance, audit and risk management

This Sub-committee oversees financial performance, compliance, risk management and internal and external audits for Merri Health. The sub-committee meet six times a year (or more frequently if required) and is made up of at least two Board members, at least one community member with financial expertise and members of the Merri Health executive team.

Clinical governance

This Sub-committee meet quarterly (or more frequently if required) to oversee key strategies and higher level reports on clinical governance functions. The sub-committee is made up of at least two Board members, up to three community representatives with clinical and members of the Merri Health executive team.

Community engagement

This Sub-committee meet quarterly (or more frequently if required), with the purpose to consult with community representatives on activities and services of Merri Health. The Sub-committee make recommendations to the Board about how to engage with the community and obtain meaningful feedback, and potential improvements. The sub-committee is made up of at least two Board members, a minimum of four community and members of the Merri Health executive team.

We are grateful for the support we receive in-kind from community representatives on our Board Sub-committees.

Board engagement at sub-committees

2015/2016

	Attended	Eligible to Attend
Finance, audit and risk management		
Michael Malakonas – Chair	5	6
Darryl Annett	6	6
Carlo Carli	6	6
Hasan Erdogan*	2	3
Katerina Angelopoulos*	3	3
Clinical governance		
Julie McCormack - Chair	4	4
Marleine Raffoul	3	4
Katerina Angelopoulos*	1	2
Hasan Erdogan*	2	2
Community engagement		
Michael Beahan – Chair	3	3
Giuseppe Ardica	3	3

*Part year appointment

Community representation on Board sub-committees

	Attended	Eligible to Attend
Finance, audit and risk management		
Geraldine Allen	5	6
Clinical governance		
Cara Jane Millar	2	4
Deb Hill	2	2
Rohini Ratnakar	1	1
Community engagement		
Mairi Rowan	3	3
Mustafa Kouklan	1	3
George Jiang	2	3
Susy Pinchen	1	3
Sanjay Gund	2	3

Financial statements

The following pages form the Concise Financial Report for Merri Health and are extracted from the Audited Financial Report.

The Concise Financial Report cannot be expected to display a full understanding of the financial performance, financial position and financing and investing activities of Merri Health.

The full audited Financial Report is available at www.merrihealth.org.au

Statement of comprehensive income

for the year ended 30 June 2016

	2016 \$	2015 \$
State recurrent grants	22,333,051	22,034,392
Commonwealth recurrent grants	5,777,725	5,439,418
Other revenue from operations	1,464,876	1,380,573
Interest revenue	334,306	371,302
Profit/(Loss) on disposal of property, plant & equipment	131,039	[345]
Other revenues	245,256	168,868
Capital grants received for the acquisition of fixed assets	124,947	-
Total revenues	30,411,200	29,394,208
Employee benefits expense	19,874,339	18,495,868
Depreciation, amortisation & impairment expense	1,031,750	936,607
Finance costs	4,848	3,958
Supplies	263,248	232,055
Computer expenses	518,629	466,717
Consulting and legal costs	210,246	415,678
Client costs	3,580,629	3,567,950
Communication	366,079	279,514
Motor vehicle expenses	214,504	202,353
Occupancy costs	967,048	1,090,991
Payments to other agencies	1,391,955	1,463,928
Repairs and maintenance	225,658	209,040
Employment expenses	412,809	333,952
Other expenses	832,499	684,665
Total expenses	29,894,241	28,383,276
Total surplus for the year	516,959	1,010,932

Statement of financial position

as at 30 June 2016

	2016 \$	2015 \$
Current assets		
Cash and cash equivalents	10,952,490	10,796,311
Trade and other receivables	513,058	244,673
Other current assets	504,126	487,011
Total current assets	11,969,674	11,527,995
Non-current assets		
Property, plant and equipment	8,644,735	8,435,841
Total non-current assets	8,644,735	8,435,841
Total assets	20,614,409	19,963,836
Current liabilities		
Trade and other payables	3,347,665	3,418,555
Provisions	2,323,394	2,160,673
Total non-current assets	5,671,059	5,579,228
Non-current liabilities		
Provisions	1,083,847	1,042,064
Total non-current liabilities	1,083,847	1,042,064
Total liabilities	6,754,906	6,621,292
Net assets	13,859,503	13,342,544
Equity		
Reserves	2,162,989	2,162,989
Retained earnings	11,696,514	11,179,555
Total equity	13,859,503	13,342,544

Financial statements

continued

Statement of cash flows

for the year ended 30 June 2016

	2016 \$	2015 \$
Cash flows from operating activities		
Government grants received	30,339,697	29,181,697
Receipts from clients	503,485	521,127
Payments to suppliers and employees	(31,276,710)	(30,504,967)
Interest received	396,142	264,269
Other income received	1,384,869	1,224,275
Cash provided by operating activities	1,347,483	686,401
Proceeds from sale of property, plant & equipment	193,674	343
Purchase of property, plant and equipment	(1,384,978)	(434,530)
Net cash used in investing activities	(1,191,304)	(434,187)
Net increase in cash held	156,179	252,214
Cash at beginning of the financial year	10,796,311	10,544,097
Cash at end of the financial year	10,952,490	10,796,311

Statement of changes in equity

for the year ended 30 June 2016

	Total equity	Retained earnings	Asset revaluation reserve
Balance 1 July 2015	13,342,544	11,179,555	2,162,989
Surplus for the year	516,959	516,959	-
Balance 30 June 2016	13,859,503	11,696,514	2,162,989

References

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1. Department of Health, North & West Metro Region Profile 2014, Department of Health Australia, viewed 16 September 2015, www2.health.vic.gov.au
2. Department of Health, North & West Metro Region Profile 2014, Department of Health Australia, viewed 16 September 2015, www2.health.vic.gov.au
3. North Western Melbourne Primary Health Network, Population Health Snapshot 2015, viewed 2 August 2016, nwmpnhn.org.au
4. Australian Bureau of Statistics 2011 Census data.
5. Department of Health, North & West Metro Region Profile 2014, Department of Health Australia, viewed 16 September 2015, www2.health.vic.gov.au
6. Department of Health, North & West Metro Region Profile 2014, Department of Health Australia, viewed 16 September 2015, www2.health.vic.gov.au
7. Department of Health, 2012 Regional health status profiles, Hume region, viewed 2 August 2016, www2.health.vic.gov.au

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8. Carers Australia, The economic value of informal care in Australia in 2015, viewed 18 August 2016 < <http://www.carersaustralia.com.au/storage/Access%20Economics%20Report.pdf>>

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Connect with us

-  Merri-Health
-  @MerriHealth
-  goo.gl/gWrGqi

Your feedback is important to us

Your feedback helps us improve how we do things and better meet your needs. Tell us what you think of this report.

You can provide feedback by:

-  03 9389 2234
-  quality@merrhealth.org.au
-  merrhealth.org.au



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Healthcare that moves with you