

**Rochester Floods  
January 2011  
Emergency Planning & Effect  
on Rochester & Elmore  
District Health Service**

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# Overview

- Rochester & Elmore District Health Service (REDHS) – who & where are we?
- Background
- How did REDHS fare with the Nat Stds & what were the issues
- Observations
- Thoughts...evolving

# REDHS – Who & Where Are We?

- 'Small Rural Health Service'
- Integrated Health Service
  - Primary Care/Community Health services
  - 12 Bed Acute Ward
  - Day Procedure Unit
  - Residential Aged Care – Nursing Home & Hostel
  - 104 FTE / 185 staff
  - GP Clinics – two Rochester, one Elmore



Echuca Road



Bendigo/Melb  
Road

Rochester & Elmore District  
Health Service

Murray Goulburn Factory

# Background

- My background
- ACHS OWS 20 & 21 September
- Additional Day 22 September for Nat Stds
- Timetable structure – combined
- OWS results

# How did REDHS Fare with the National Standards?

Standard	Result
1 – Governance for Safety and Quality	Not Met
2 – Partnering with Consumers	Not Met
3 – Preventing & Controlling Healthcare Infections	Not Met
4 – Medication Safety	Not Met
5 – Patient Identification & Procedure Matching	Met
6 – Clinical Handover	Met
7 – Blood & Blood Products	Met
8 – Preventing and Managing Pressure Injuries	Met
9 – Recognising & Responding to Clinical Deterioration	Met
10 – Preventing Falls & Harm from Falls	Met

# What were the issues?

- Policy & system development
- Education
- Compliance
- Reporting

# Observations

- Very time pressured to complete
- No Self-Assessment
- Report – Repetitious & time consuming
- Scoring system black & white

# My thoughts...at this stage

- Non-clinical considerations
- Continue with ACHS – mindful of duplication
- Principle is right – focus on patient safety
- Mindset regarding EQuIP vs Nat Stds
- Evolutionary nature – EQuIP 5 has taken 35 years to develop!
- Broader view – national landscape