



WOOMELANG & DISTRICT

BUSH NURSING CENTRE



2022 - 2026 STRATEGIC PLAN

**WOOMELANG & DISTRICT
BUSH NURSING CENTRE**

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WHO WE ARE

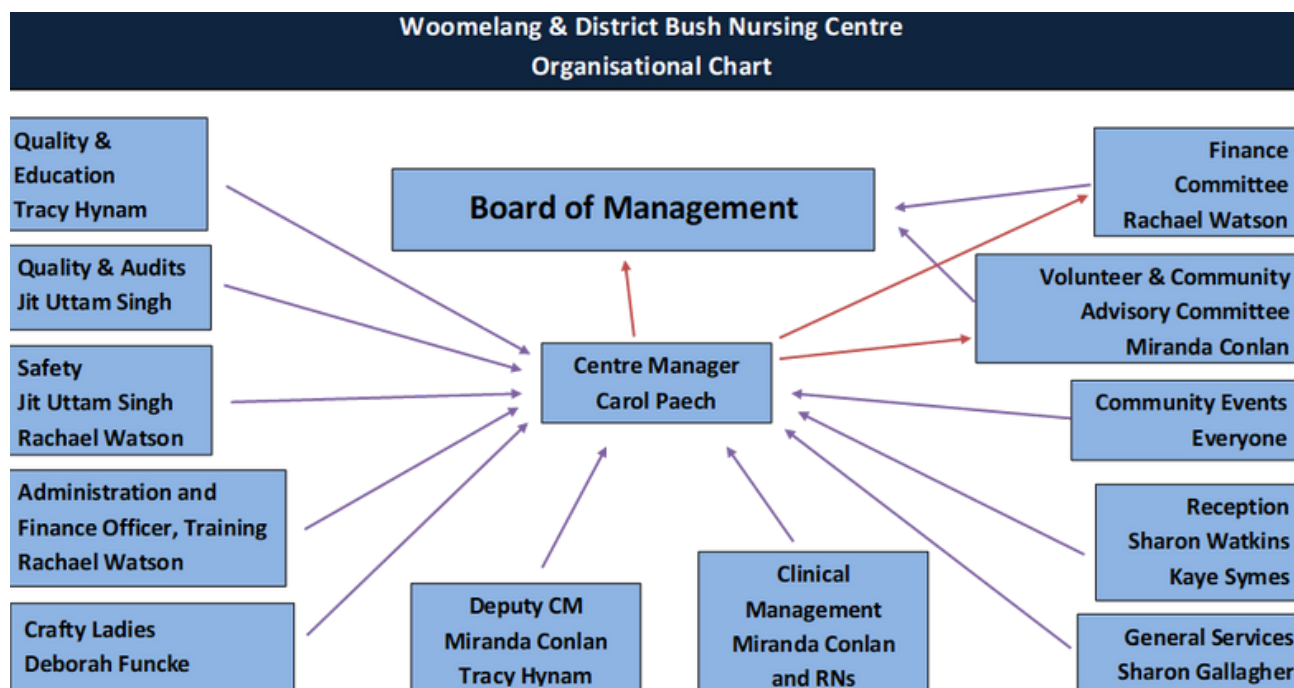
The Woomelang & District Bush Nursing Centre (WDBNC) has been successfully operating for more than 57 years.

The WDBNC is overseen by a Board of Management consisting of community volunteers and health professionals. Members of the Board of Management include:

Grant Doxey (President)	Jason Collins
Amanda Bailey	Patricia Fraser
Peter Funcke	Ray Gentle
Leanne Adcock	Monica Outen



Sub-committees, drawn from members of the Board of Management and additional key stakeholders, include the: Safety and Quality Committee, Safety Committee, Finance and Administration Committee, and Volunteer and Community Advisory Committee.



WDBNC employs a total of nine staff for a total EFT of 2.9. The staffing profile is as follows:

- Centre Manager (Carol Paech) EFT 1.0
- Administration and Finance Officer (Rachael Watson) EFT 0.4
- General Services (Sharon Gallagher) EFT 0.3
- Reception (Sharon Watson and Kaye Symes) EFT 0.3
- Nurses (Miranda Conlan, Jit Uttam Singh, Tracy Hynam, Deborah Funcke) EFT 0.9

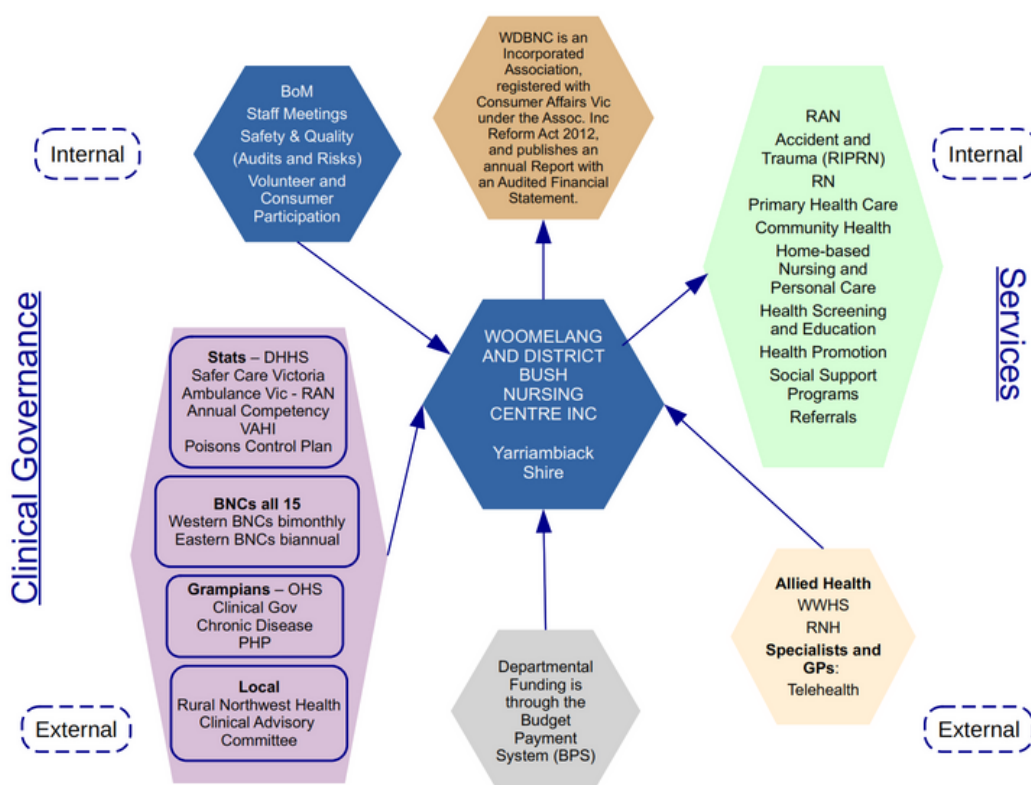


WHAT WE DO

The Woomelang District Bush Nursing Centre offers the following services and programmes to the community:

- Nurse led Clinics (including Community Health Nurse, Home Nursing, Immunisation, attending community Aged Care package clients)
- Visiting Maternal & Child Health
- Telehealth coordination, delivery and professional support during appointments if required
- Adult Emergency Response Care, Remote Area Nurse Emergency/trauma stabilisation
- Palliative Care / Medicine
- General Practice/GP predominantly telehealth by phone or referral for an appointment
- Mental Health and Wellbeing services – face to face or some use telehealth
- Community Groups (including Men's Shed, Woomelang Walkers, Crafty Ladies, and Garden Club)

- Allied health services onsite – Podiatry, Exercise physiology and Rural Outreach mental health support, other allied health, directed to the closest practitioner (including Dietetics, Diabetes Educator, Occupational therapy, Physiotherapy)
- Health information, health promotion, resources, literacy and referral (including Pharmacy Depot, Pathology Collection, Disability aids, Continence Care / Information, Breast Screen bookings)
- Transport support (including Community Bus, Volunteer Driver and Client transport to medical appointments)





OUR VISION, MISSION & VALUES

VISION

To offer a safe, holistic health and wellbeing service that is inclusive, flexible, adaptive and always improving

MISSION

We welcome our diverse and wider communities and strive to provide them with safe and high-quality health and wellbeing services throughout their lives

VALUES

Social Inclusion & Social Justice: Valuing the uniqueness of every individual and responding without prejudice.

Honesty & Transparency: To be a source of truthfulness and integrity reflecting open communication.

Connectedness: Caring about our community, partners and wider relationships.

Innovation: To be creative, inventive and responsive to our community.

Partnering: To provide a united and improved effort through beneficial associations with other people, agencies and associations.

Excellence: To offer best practice through qualified and credentialed staff and volunteers.

OUR COMMUNITY - POPULATION

Between the Census data collection periods of 2016 and 2021 a number of demographic changes can be observed across the communities of Woomelang, Lascelles and Watchupga (referred to as Suburbs and Localities or SALs). Key changes include:

- A total population of 335 people in 2016 decreased slightly to 316 in 2021,
- The total number of families decreased from 91 in 2016 to 75 in 2021. This decrease was witnessed in each of the three reported SALs of Woomelang, Lascelles and Watchupga,
- The total number of 'All private dwellings' decreased from 218 in 2016 to 199 in 2021,
- The 'median age' increased in both Woomelang and Lascelles – from 58 years to 63 years in Woomelang and from 39 years to 47 years in Lascelles showing a significantly ageing profile. Watchupga was unchanged with a median age of 43 years,
- For Woomelang 'Country of Birth (Australia)' declined from 84.0% in 2016 to 73.3% in 2021 – indicating an increase in cultural diversity for the community,
- Financial statistics showed variability across the three communities. Of note were indications of increasing financial hardship in the community of Woomelang. For example; 'Median weekly household income' fell from \$789 in 2016 to \$745 in 2021, yet over the same period 'Median monthly mortgage repayments' increased from \$455 to \$520 and 'Median weekly rent' increased from \$80 to \$100.

POPULATION

Between 2016 and 2021 the combined population of Woomelang, Lascelles and Watchupga decreased from 335 to 316 people.

MEDIAN AGE

Between the 2016 and 2021 Census periods the median age of Woomelang residents increased from 58 years to 63 years.

INCOME

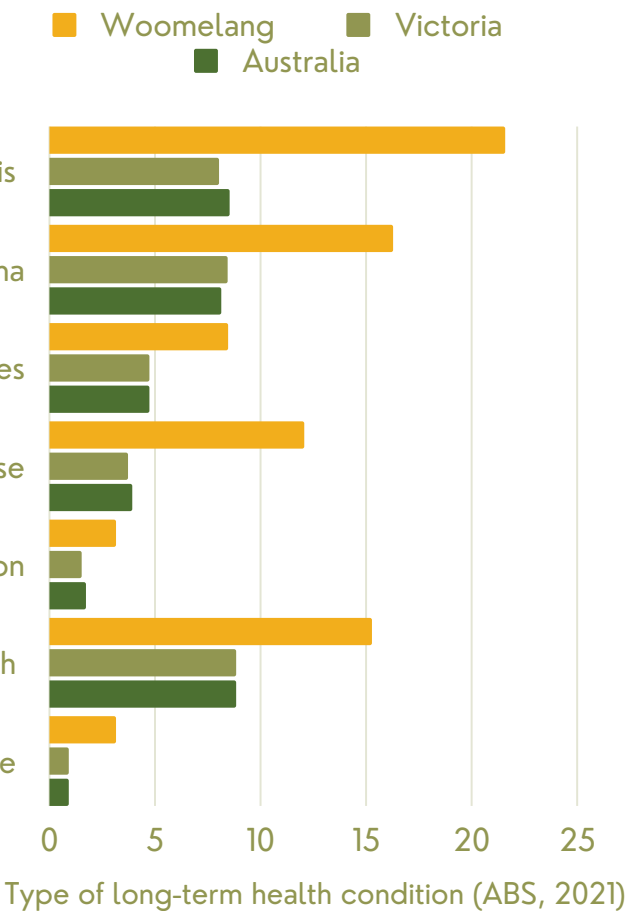
Between 2016 and 2021 the Median weekly household income in Woomelang fell from \$789 to \$745. Over the same period mortgage repayments and rental costs increased.



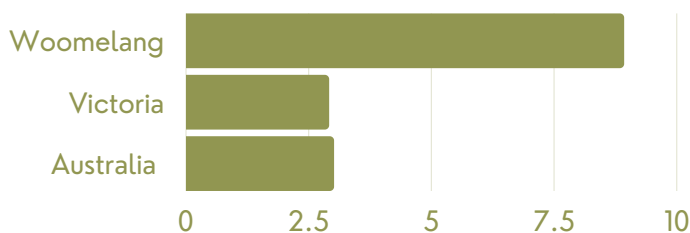
OUR COMMUNITY - HEALTH

Responses to the Census variable 'Type of long-term health condition' revealed Woomelang SAL had higher incidences of chronic disease than both their State and National peers for all conditions with the exception of Dementia and Kidney disease.

- Conditions with greater than twice the incidence in Woomelang comparative to Victoria or Australia included:
- Arthritis: 21.5% compared to 8.0% across Victoria and 8.5% nationally,
 - Asthma: 16.2% compared to 8.4% and 8.1% respectively,
 - Heart disease (including heart attack or angina): 12.0% compared to 3.7% and 3.9% respectively,
 - Stroke: 3.1% compared to 0.9% and 0.9% respectively,
 - 'Any other long-term health condition(s)': 18.3% of the Woomelang population indicated 'yes' compared to 8.0% (Vic) and 8.0% (Aust).



Count of selected long-term health conditions - three or more conditions (ABS, 2021)



Significantly, data reveals the complexity of health needs in the Woomelang SAL – with 8.9% of the population presenting with 'Three or more conditions' compared to only 2.9% and 3.0% of their Victorian and Australian counterparts (respectively).

21.5%
of the Woomelang population responded as having Arthritis compared to 8.0% of the Victorian and 8.5% of the Australian population.

"No matter how big or small the problem WDNC is always there to help or offer suggestions. [They are] Community focussed to deliver an many services as possible internally or through partnerships."

OUR 2022-2026 STRATEGIC DIRECTIONS



1 Safety & Quality

2 Maintain & Strengthen Organisational Governance & Viability

3 Deliver Holistic, Inclusive & Adaptive Health & Wellbeing Services

STRATEGIC DIRECTION 1

SAFETY & QUALITY

OBJECTIVES	ACTIONS
A. Provide education to support adherence to all governance frameworks	<ol style="list-style-type: none">1. Centre Manager to support staff, Board of Management and all sub-committee members in their understanding of the National Safety and Quality Health Service Standards (National Standards), the assessment and accreditation process and their responsibilities to both the National Standards and clients2. Participate in National Standards audits to enable accreditation3. Understand all National Standards policies and procedures required to support safe service delivery
B. WDBNC staff, Board of Management, sub-committee members and volunteers understand the importance of safety and quality	<ol style="list-style-type: none">1. Provide orientation for all staff, Board of Management, committee members and volunteers in the National Safety and Quality Health Service Standards with particular reference to Standards 1 and 2
C. Identify opportunities for, and participate in, safety and quality improvement activities	<ol style="list-style-type: none">1. Drawing on National Standards 1 and 2 establish beneficial relationships with other providers in order to optimise service delivery to the client

STRATEGIC DIRECTION 2

MAINTAIN & STRENGTHEN ORGANISATIONAL GOVERNANCE & VIABILITY

OBJECTIVES	ACTIONS
A. Manage the administrative and compliance burden experienced by the WDBNC staff and Board of Management	<ol style="list-style-type: none"> 1. Investigate funding for the provision of additional hours required to meet the compliance workload 2. Investigate opportunities for strategic alliances (e.g. other Bush Nursing Centres or Health Services) to support the more efficient delivery of compliance requirements
B. Explore partnerships to enable corporate and clinical good governance and risk management	<ol style="list-style-type: none"> 1. Continue to nurture and explore partnerships to enable corporate good governance and risk management
C. Secure and retain appropriately qualified staff who are sensitive to the full diversity of the client community	<ol style="list-style-type: none"> 1. Proactively identify staffing 'gaps' and recruit accordingly 2. Develop an 'Induction to Diversity at WDBNC' brief for new and existing staff (include community specific ATSI, CALD, socio-economic and organisational cultural advice) 3. Undertake induction as required
D. Provide transparent and accountable financial management to ensure viability	<ol style="list-style-type: none"> 1. Treasurer and Administration roles are skilled and supported in fulfilling financial management and reporting responsibilities 2. Board of Management is enabled in understanding all financial management responsibilities 3. All financial reporting responsibilities are met in a transparent and timely manner
E. Maintain and enhance facilities and capital works	<ol style="list-style-type: none"> 1. Maintain existing Centre assets through scheduled cataloguing and review of assets 2. Explore opportunities to value add on existing assets including through opportunities for alternative use



STRATEGIC DIRECTION 3

DELIVER HOLISTIC, INCLUSIVE & ADAPTIVE HEALTH & WELLBEING SERVICES

OBJECTIVES	ACTIONS
A. Comprehensive promotion of WDBNC services and supports to increase client awareness of, and engagement with, the Centre	<ol style="list-style-type: none"> 1. Review diversity of WDBNC communities and develop a multifaceted (in both methods and messaging) promotion plan to reach all identified cohorts 2. Implement WDBNC promotion plan, evaluate, review and evolve 3. Revise and increase promotion of 'Welcome to WDBNC' pack to WDBNC communities. Include information about the Centre, membership benefits, services offered, and how to influence Centre service / program delivery
B. Increase client participation in their health and wellbeing literacy	<ol style="list-style-type: none"> 1. Using health service data and community feedback identify key health and wellbeing literacy target areas. Locate / create literacy resources suitable to the target audience(s) 2. Provide health promotion and education sessions regarding identified key health and wellbeing target areas with a focus on modifiable risk factors and significant health warning signs to increase health literacy
C. Increase awareness and use of Telehealth	<ol style="list-style-type: none"> 1. Promote breadth of telehealth services available at WDBNC – including models of delivery (i.e. with or without staff support, video / phone-based) and the range of services and support available via telehealth
D. Respond to client / community requests for health and wellbeing services to meet identified needs. Partner with other services to assist in delivery as required	<ol style="list-style-type: none"> 1. Create opportunities for clients and communities to inform the delivery of WDBNC services (to better meet their health and wellbeing needs) through the development and promotion of information collection systems to gather accurate and thorough client data (i.e. requests, surveys, OFIs) 2. Strengthen a framework to support clients as partners in their care, enabling them to express their health needs, communicate their health expectations and co-design options for assistance 3. Drawing on identified service gaps explore partnerships with other service providers that might close this gap, achieving the best possible outcomes for our communities
E. Adapt to the changing needs of the community and environmental challenges and opportunities to create responsive and high viability 'client driven' service growth	<ol style="list-style-type: none"> 1. Uphold a commitment to be responsive to unexpected events (e.g. Covid 19) 2. Continue to explore environmental opportunities which align with the Centre's strengths to create high viability services including: Aged Care support and packages, NDIS support and package, movement to RIPEN status for all RNs, some after-hours service provision, a 'Grey Nomad' / travelling tourist health check program / telehealth service



ACKNOWLEDGEMENTS

The Woomelang & District Bush Nursing Centre would like to gratefully acknowledge the ongoing and generous contributions of the following people and organisations:

- The Woomelang and surrounding communities who support and utilise the WDBNC,
- Our volunteers,
- Our dedicated staff,
- Our Board of Management members and sub-committee members,
- Our partner organisations including Mallee Track Health and Community Service and ?? Rural NorthWest Health
- APNA & other key funding bodies
- ??
- ??

CONTACT

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The Woomelang and District Bush Nursing Centre is on the lands of the Wotjobaluk, Jaadwa, Jadawadjali, Wergaia and Jupagalk Nations and wishes to acknowledge them as Traditional Owners.