



health hope opportunity

quality account 2015-2016

each

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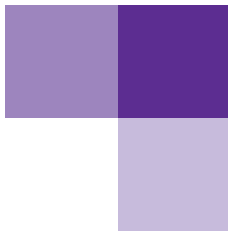
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Customer Definition

In this quality account, we use the word customer to describe the people whom we interact and work with. See below for our definition.

Customer: EACH is committed to being a customer centric organisation. Our broad definition of customer means we are inclusive of all people who interact or engage with us, either externally or internally. Our customers include consumers, clients, participants, patients, carers, the community, stakeholders, partners, staff, volunteers and members.



Smoking ceremony performed at the Dreaming on the Edge retreat

Acknowledgement

We begin by acknowledging the traditional custodians of the land on which we work, and we pay our respects to Elders past and present. We acknowledge the sorrow of the Stolen Generations and the impacts of colonisation on Aboriginal and Torres Strait Islander people. We recognise the resilience, strength and pride of the Aboriginal community. We embrace diversity in all its forms, and respect everyone's strengths and contributions irrespective of gender, ethnicity, culture, religious beliefs, sexual orientation and political views.



Health Hope and Opportunity

It is with pleasure that we present EACH's Quality Account for 2015-2016. This report was previously titled the 'Quality of Care' report and is prepared annually to provide a snapshot of EACH's many programs across States and Territories. This year, our report is titled 'Health, Hope and Opportunity' which reflects the themes running through the stories. The Board's Service Quality and Risk Committee has oversight of EACH's commitment to providing high quality and safe services to all our customers within an environment that empowers people to take control of their health and wellbeing.

EACH knows that genuine engagement of our customers in the planning, design, delivery and evaluation of our services helps us deliver better outcomes. This year has been an important year for EACH in our continuing journey to co-design our services with customers. We were pleased to develop our new Service Principles through a series of Innovation Labs conducted within the communities we work in throughout Australia. Almost 200 customers participated in the workshops contributing their experiences, reflections and ideas to the process of co-designing a set of Service Principles which will guide services and programs across EACH, no matter where they are or what types of services they provide.

The 10 Service Principles that were developed as a result of the Innovation Labs play an important role in our new Strategic Plan – EACH 2020: A National Strategy 2016 – 2020. They will ensure that every part of our organisation offers a consistent way of engaging with and responding



to our customers. Thank you to all the customers and staff who contributed to this important process.

We hope you enjoy learning more about EACH's work through the stories of our customers. We would really appreciate feedback on our report, so please see inside the back cover for ways to provide your comments.

Judith Woodland
Chair, Services Quality
and Risk Committee

Peter Ruzyla
CEO

Keeping EACH and everybody safe

The EACH Board of Directors has the responsibility to make sure that EACH is continually improving the quality and safety of the services it provides. To focus attention on this, the EACH Board has a dedicated Service Quality and Risk Committee. This committee focuses on service governance, which assists the Board, together with the CEO, to take responsibility for providing effective, safe care to our customers and safety for our staff. EACH has a commitment to continuous improvement in service provision and safety. The committee monitors four main areas of quality and safety:

- customer engagement
- service effectiveness
- effective workforce
- risk management

To help the committee fulfill its duty each meeting it receives reports that cover these four areas. Reports are scheduled throughout the year so the committee is provided with current information. Below are examples of the information the committee reviews.



Child Safe Standards: the Board has the responsibility to make certain all children that come to EACH are safe and kept safe. The committee checks that EACH conforms to these standards.



Customer and staff incidents: including the number and types of incidents and actions taken to reduce or prevent similar incidents in the future.



Accreditation: monitor preparation for accreditation, review reports of accreditation assessments and plans to address any issues highlighted.



EACH's Quality Improvement Plan: review the plan and monitor progress and completion of each section of the plan.



Legislation and regulation: regularly review EACH's compliance with relevant laws and regulations, including any that are new or updated.



Staff credentials: ensure staff have the right qualifications, skills, experience and registration, and have completed any required training to undertake the work they are doing.

Who we are

EACH provides a range of health, disability, counselling and community mental health services to the people in Victoria, New South Wales, Queensland and Tasmania.

We recognise that health and wellbeing is affected by factors such as unemployment, homelessness, financial difficulties, social exclusion and addiction so we offer a wide range of supports to our community to lead happier, healthier lives. Our services address the physical, mental and psychosocial needs at a community and individual level. We recognise the increasing need for effective links between service areas, particularly for people with complex needs. We strive to provide coordinated care that meets these needs.

On these pages, we provide a snapshot of the types and variety of services and programs offered by EACH.

Counselling

A range of counselling services for both individuals and groups of all ages including families and youth in the areas of:

- combined mental health and substance abuse concerns
- alcohol and other drugs
- mental health
- financial concerns and budget services
- risk of homelessness



- anxiety and depression
- gambling issues
- victims of crime
- domestic violence

Health Services

These services are referred to as community health services and include:

- physiotherapy and occupational therapy
- Aboriginal health
- well women's clinic
- podiatry
- dietetics
- refugee health
- general practice
- diabetes education
- group programs such as; Tai Chi, hydrotherapy

Child, Youth and Family

Specialised services for children, youth and families:

- family counselling
- family relationship counselling
- youth clinic
- child care
- speech pathology
- oral health (dental)
- child psychology
- post natal depression

Support for Older Adults

As well as having access to all other EACH services older adults have access to:

- activity groups
- allied health and therapies
- individualised support

Mental Health Services

A range of services to support mental health recovery, covering:

- youth health
- alcohol and other drug counselling
- anxiety and depression
- homeless or at risk of homelessness

Disability Services

Support for individuals and their families and carers:

- recreation and social programs
- support and respite for families and carers
- in-home support
- self-advocacy
- employment services

2015-2016 Snapshot



54

Sites across
Australia



1,024

Staff



271

Volunteers



40,215

Volunteer hours

Child safe standards

Children have the right to feel safe and be safe. To protect this right the Victorian Government has introduced child safe standards to improve the way organisations that provide childrens' services prevent and respond to child abuse and neglect. This provides organisations with a consistent approach to protecting children. The main aim of the standards is to create a culture where protecting children is part of the everyday thinking and practice of the Board, managers, staff and volunteers.

EACH as a provider of childrens' services started preparing for the standards in 2015. As a result, policies, processes, and tools have been developed.

The standards make it clear that we all have a role to play in keeping children safe. To confirm this commitment, EACH has developed the following statement.

"All children who come to EACH have a right to feel and be safe. EACH is committed to the safety and wellbeing of all children whether they are direct service recipients or indirectly linked to our services such as children of clients or carers. The welfare of children and young people will always be our first priority. We aim to create a child safe and child friendly environment where all children are valued and heard, are safe and protected."



The child safe standards:

1. strategies to embed an organisational culture of child safety, including through effective leadership arrangements
2. a child safe policy or statement of commitment to child safety
3. a code of conduct that establishes clear expectations for appropriate behaviour with children
4. screening, supervision, training and other human resource practices that reduce the risk of child abuse by new and existing personnel
5. processes for responding to and reporting suspected child abuse
6. strategies to identify and reduce or remove risks of child abuse
7. strategies to promote the participation and empowerment of children

Getting NDIS ready

EACH is committed to the National Disability Insurance Scheme (NDIS), the new way of providing individualised support for eligible people with permanent and significant disability, their families and carers.

People living with a disability will be able to make their own decisions about the care services they access and the type of services they choose to give them a better quality of life. EACH has a long history of providing services and supports to people living with a disability in the areas of employment, independent living, flexible living options, social opportunities, leisure and recreation. Support can be provided on an individual basis, or in group activities through:

- individualised planning, co-ordination and case management
- assistance with personal care and household tasks
- support to attend health appointments, school, work and other services
- provision of social and recreational support
- empowering people and advocating for their rights and needs
- supporting carers and family members with counselling, peer support and respite
- specialised early intervention services for children



The NDIS is being rolled out across EACH over the next few years and is expected to be fully rolled out across Australia by 2018-19. During this time, EACH will continue to provide services to people living with a disability and their families under the existing system as well as under the NDIS in applicable locations.

Transitioning into the NDIS is an exciting time for people living with a disability, their families and carers. EACH is registered to provide support for NDIS participants and can offer an integrated range of health services that promote everyone's wellbeing from early childhood to older adults.

Becoming customer centric

In 2015-2016 EACH has worked to increase the opportunities for customers, carers and the community to be involved. They have been included in activities to plan, develop, design and evaluate EACH services and programs. Their time and commitment has been recognised by the EACH Board of Directors through a policy that provides a gift voucher and transport support. Customer involvement has helped EACH to achieve many significant milestones and in the process taught us how to be more customer centric. These pages illustrate what has been achieved through customer, carer and community involvement.

The development of the EACH Strategic Plan

EACH 2020: A National Strategy 2016-2020, provides direction for what EACH wants to achieve in the next four years. Customers, carers and the community were involved in focus groups to provide input into the development of our strategic directions:

9 focus groups held in Victoria, Queensland, New South Wales and Tasmania

67 participants from Victoria, Queensland, New South Wales and Tasmania

Outcome: EACH Strategy 2020



The development of the EACH Service Principles

In 2016 a set of Service Principles were co-designed through a series of Innovation Labs. The Innovation Lab offered a unique way for both customers and EACH staff to work together to create and test the service principles.

158 customer, carer and community representatives

14 workshops

Outcome: The development of Service Principles embedded in EACH Strategy 2020

Advisory Committees and Working Groups

Customers, carers and other community members work on a number of committees and special working groups across EACH and in different states.

Committees or Working Groups	Number of consumer, carer or community members
Consumer, Carer and Community Advisory Committee	9
Consumer, Carer and Community Engagement Working Group	2
Quality of Care Committee	5
Primary Health Consumer Participation Committee	5
Mental Health Recovery Consumer Carer Advisory Group Committee	11
People and Choice Consumer Reference Group	5
Aboriginal and Torres Strait Islander Health and Wellbeing	9
Youth Reference Group (headspace, New South Wales)	10
eachchild Parent Advisory Committee	6



Outcome: These advisory committees and working groups combined have made significant contributions and improvements, such as:

- guidance for the implementation of the EACH Community Engagement Framework
- input into Strategy 2020
- Service Principles
- review of the photography consent form and process
- input into policy and procedures regarding customer, carer and community engagement including guidelines for remuneration for specific consultation processes
- review of rights and responsibilities information
- improving the EACH website

Reconciliation Action Plan (RAP) specific outcomes:

- implementation of the EACH RAP
- Acknowledgement of Traditional Owners signage
- Welcome to Country and Acknowledgement of Country policy and procedure
- staff guidelines for working with Aboriginal and Torres Strait Islander Community members

Celebrating together

EACH supports the gay, lesbian, bisexual, transgender, intersex and questioning (GLBTIQ) community and is dedicated to providing services that are welcoming, accessible and understanding of needs of the GLBTIQ community. This year a customised EACH information postcard was designed, reminding the community that our services are GLBTIQ friendly.

EACH is working on ways to make the GLBTIQ community aware of its services and to be recognised as being GLBTIQ welcoming. In the past year EACH staff have attended, been involved in and celebrated the following events:

Tilde - Trans & Gender Diverse Film Festival:

In 2015, EACH sponsored the Tilde – Melbourne’s trans and gender diverse film festival. The festival was created to showcase and support the work of trans and gender diverse filmmakers along with works that have trans and gender diverse content. EACH presence at this event means staff are on hand to provide information about services.

Midsumma Festival:

Held annually in Melbourne’s Alexandra Gardens the festival is a hub of markets, community group stalls, and family activities celebrating GLBTIQ culture. EACH had a significant presence throughout the festival and joined in the celebrations with activities including a photo booth, face painting and the popular EACH temporary tattoos.



Melbourne Queer Film Festival:

In 2016, EACH again was a sponsor for the Melbourne Queer Film festival. This year we showed *Margarita with a Straw*, a film about an Indian woman with cerebral palsy, that illustrated many of the challenges people with disabilities face. EACH CEO, Peter Ruzyla, introduced the film prior to the session, highlighting EACH’s long term commitment to supporting people with disabilities in the community.

IDAHOBIT:

IDAHOBIT stands for international day against homophobia, biphobia and transphobia. As part of IDAHOBIT Day, EACH staff got together to support the cause and show their stance against homophobia, biphobia and transphobia.

Partners in Recovery

New England, New South Wales

Partners in Recovery is a program that provides coordinated support for people with severe and on-going mental health issues.

The EACH Partners in Recovery staff help participants to identify and reach their recovery goals by linking them with a wide range of services and supports that best fit their recovery plan.

One participant who has made great strides in her 11 months participation in the program is Donna, who has successfully overcome obstacles created by trauma, depression, anxiety, addiction, suicidality and family breakdown. Donna attended regular, coordinated meetings with her support team including EACH, Freeman House and The Benevolent Society.

Donna has:

- achieved and maintained sobriety
- stabilised her mood after medication review
- overcome debt through financial counselling
- gained shared custody of her youngest son
- accessed Partners in Recovery funding to:
 - de-clutter her house and make it liveable
 - buy orthopaedic shoes, increasing her mobility and independence
 - buy an efficient heater
- regularly taken part in social outings



Donna also actively participated in EACH's Connect and Recover eHealth (CARE) Program which helps people with severe mental health issues to use online support services. Donna joined Facebook and reunited with her estranged older children. She also accessed an exercise physiologist and dietician supporting her weight-loss goals. Donna now sees her children more regularly, continues to lose weight, eats healthily, is quitting smoking, and is about to join a gym.

Contributing to Donna's success are her determination and perseverance, as well as the collaborative support team sharing duties and responsibilities, enabling the service to be sustainable.

Dreaming on the Edge

"I just found so much peace and relaxation. People didn't judge me. I felt safe."

Over 100 Aboriginal and Torres Strait Islander Community members attended the Dreaming on the Edge retreat. Following the success of the 2014 retreat funding was successfully received to hold a second one in 2016. The retreat focused on mental, emotional and spiritual wellbeing.

The event was held in an old school camp set in bushland near Healesville, complete with native birds and abundant kangaroos. The venue was well set up with a large kitchen, an open fireplace, dormitory style accommodation and a huge pit for yarning and singing in the evening.

The retreat started with a smoking ceremony conducted by a local Community member, followed by the Mullum Mullum Indigenous Gathering Place Choir who sang traditional songs in language. The evenings included a performance by 'Kinja' who play traditional bush music combined with Celtic tunes. A harpist shared her music and an Elder led community singing and damper making.



There was a strong focus on culture with sharing of food and music. Activities included community art, bushwalking, swimming, yarning circles and deep listening or 'dadirri'. There were tears, laughter and joy as people explored their own stories and heard the stories of others.

The retreat provided a safe space where Community members could share their stories and experiences of mental health recovery. They were able to discuss trauma, healing and hope in a culturally appropriate manner.



Coordinated services: Richard's story

I am Rockin' Richard Lewis and I have been getting help from EACH in Ferntree Gully for a few years now. My name comes from 40 years as a lead singer, guitarist, band manager, agent, disc jockey and dancer in the early rock'n'roll and rockabilly scene. I am an Indigenous man from my mother's side of the family. Our mob is the Kurna people from the Adelaide Hills area. My father's ancestry is from Wales and we came to Australia in 1830. My father's genes won out when it came to skin colour, so I have white pasty Welsh skin. It just goes to show that not all indigenous Australians are obviously black.

When I came to EACH, I was a mess. Medically, physically and mentally, I had given up on life and yet I did not want to die. My traumatic life has included, from a young age, diabetes, parents separating and dying, seven year addiction to tranquilisers, death of best friends, chronic anxiety and depression, retirement at age 24. As well as seven long term relationships that did not succeed due to no fault of my own, I have no kids of my own because the six that I raised and loved were all somebody else's. And those were the good years!

EACH turned me around. EACH believe that change is possible, and now I do too. EACH has addressed each of the issues I suffer from. Each time I go to EACH, staff are open and friendly and they coordinate and communicate with each other.

Diabetes specialist, counsellor, podiatrist, dietician, indigenous care people, endocrinologist and managers, each one of them are superb at what they do, and make each person feel at home, regardless of nationality. There is a lot of 'healthcare' in Australia, but in 56 years this is the first time I have experienced health CARE. I now have direction in my life, goals and things to look forward to. Thank you EACH.

The Care Coordination and Supplementary Services Program (CCSS) coordinates care for Aboriginal and Torres Strait Islander People with chronic health conditions. Care Coordination involves linking a person to the right services so they get treatment and care at the right time.



I choose how I want to feel: a story of recovery

EACH's Reconnexion programs and services focus on the challenges of anxiety, stress, depression and benzodiazepine (tranquillisers and sleeping pills) dependency. Shared here are excerpts from a personal account of recovery.

Some days are harder than others. I need all of my strength at times but it can get better. Support is crucial: family, EACH, doctors. But most important is for me to be positive, determined and brave in my recovery.

Even if people around me are upset, I determine who I am, and where I'm going. I stay calm and collected, do my breathing when I need to. Life is really a good thing, and starting to get brighter for me. I know soon that something good is going to happen to me. I want to feel the sunshine on me, and bring me out of the darkness. No more stress, just to be free again excites me.

It's been and is hard work but I have to put in 100 percent. Others can advise me but I have to do the work. After five years it appears to be getting brighter. I am beginning to see more daylight for longer periods at a time.

Through my new thoughts, and happiness it is now clear to me how many years my children and I were dealt terrible treatments from the one person that was supposed to love us all unconditionally forever. Violence, physical and mental abuse for 17 years.



Severe depression set, I never told a soul. I was stupid, dumb and couldn't succeed at anything; so I was told. Well, I did do something smart. I took my much loved boys and left.

And I did another smart thing, I went on to study child care receiving all A's and 1 B. I realise now I do count, I am someone that has feelings, and dreams, and I will continue to follow them. I'm not perfect, no one is, what I do know is that when you've been in the darkest hole imaginable for a long time, it is possible to come out. Keep working hard, put yourself at number one and watch the sun coming up again. I deserve it for the strength, commitment and hard work I have done and will continue to do.

This person was able to find the strength and skills she needed, supported by EACH Reconnexion counsellors and programs.

Helping people quit

The EACH Tobacco Free Clinic provides a welcoming space for people to talk about reducing or quitting smoking. The clinic is unique because it is staffed by trained health professionals who work closely with people to not only address dependence on nicotine but also to look at the physical and emotional triggers and the behavioural habits connected to smoking.

The Tobacco Free Clinic has been working towards being a leader in the delivery of stop smoking services. In 2016 the Tobacco Free Clinic health psychologist presented at the Smoking Cessation Forum. Highlighted were: the Tobacco Free Clinic and its successful outcomes; the latest in how counselling can help stop smoking; monitoring the use of nicotine replacement therapies and working with medical teams to monitor medication to help people to quit.

The Tobacco Free Clinic has also been working towards innovation in service delivery, working with the local Aboriginal Community to co-design a culturally appropriate program to help Aboriginal people to have better access to the clinic services.

The Tobacco Free Clinic provided outreach at Mullum Mullum Indigenous Gathering Place Aboriginal Health Days. The health psychologist commented, "We've found that this has been a great way to meet Aboriginal Community members... and now we've got the momentum we're continuing



to develop creative strategies to explore more ways we can work together to address smoking behaviour."

The work the Tobacco Free Clinic and the Aboriginal Community have done together, to build conversations about addressing smoking, is to be presented at the LOWITJA Institute International Indigenous Health and Wellbeing Conference 2016.

386 Tobacco Free
Clinic sessions
in 2015-2016

Capturing the staff experience

To make sure our customers have a great experience using our services it is really important to make sure our staff are also having a great experience in the workplace. In 2015 we sent all staff a survey that was conducted by Best Practice Australia, to find out about how our staff feel about working at EACH.

Fifty-seven per cent of our staff completed this survey. One of the sections of the survey focused on Quality and Innovation. Results were benchmarked with other health and community services and for 36 out of the 42 questions asked EACH was rated 'near the norm' or 'above the norm'.

The questions in the Quality and Innovation section focused on areas such as engagement, leadership, change management, values and behaviours, improvement and quality and safety. The two questions relating to customer and staff safety were:

Survey Question	Rating
The organisation addresses any potential for adverse client safety events	77%
The organisation addresses employee safety issues	75%



The survey results will help EACH identify areas for improvement and assist us in building a strong culture of quality and safety. One thing that we have already started to do regarding this is the development of a Quality, Research and Evaluation framework.

Preventing violence against women through gender equality



Every year there is a worldwide event named, '16 days of Activism'.

Communities take action to address violence against women. In 2015, EACH contributed to this global action by engaging its staff, customers and communities in the Women's Health East's campaign, Hands Up for Gender Equality. Through a variety of types of action, including online, EACH was able to get gender equality messages to approximately 73,000 people.

EACH's campaign included displays at EACH sites, emails, social media and conversations about the positive benefits that gender equality would bring to everyone.

Topics included: equal and respectful relationships; no violence against women; equal pay; engaging more women in leadership roles; and creating a culture where girls, boys and diverse genders experience equal opportunities without gender stereotypes.

Through these conversations, planned actions were documented and displayed at EACH sites and on social media.

Key activities and outcomes from the EACH campaign included:

- 21 posts on the EACH Facebook page and 23 posts on PLEDGE Facebook site (a partnership project facilitated by EACH focused on promoting gender equality in Knox) with a reach of 7,544 people
- a Leader newspaper article with a readership of over 59,000
- a workshop, led by PLEDGE, with one outcome being a workplace deciding to undertake training in gender equality
- displays at six EACH sites and staff photos with Hands Up for Gender Equality. One site encouraged visitors to write and display their message promoting gender equality

The work the Tobacco Free Clinic and the Aboriginal Community have done together, to build conversations about addressing smoking, is to be presented at the LOWITJA Institute International Indigenous Health and Wellbeing Conference 2016.

Wilderness program

From paddling the Murray, Glenelg, Goulburn, Yarra and Big rivers, sailing the Gippsland Lakes, hiking mountain ranges, climbing rock faces, caving underground rivers and boulders, mountain biking cross country tracks, to snorkelling the bay and swimming with seals, the EACH Wilderness program sees its work as exploring both external and internal landscapes.

In 2016, wilderness programs ranged from day activities to nine day remote expeditions as well as year round weekly activities. The historical focus of the team is on supporting young people at risk of homelessness and disengagement from community and family.

In 2016, we supported these young people by working in regional Victoria in Warrnambool and Gippsland, and working in collaboration with Aboriginal agencies, learning centres, high schools and homelessness support services.

Internally, the team worked in partnership with EACH's integrated therapeutic community to deliver the Wild program, tailoring adventure, leadership and self-development activities for young people experiencing a severe mental illness. EACH Wilderness also worked in partnership with the Mental Health Recovery Eastern team to deliver the Amazing Adventures program, - which saw participants into their 50s connecting and creating community and pushing their comfort zones. Upwey High School piloted a highly successful Murray canoe journey based on self-regulation and mindfulness.



In 2015-16 we also piloted the Bridging the Gap program, an early intervention pilot program targeting youth substance abuse and offending behaviours, tailored around snorkelling certification. Key partners were Victoria Police, the EACH Youth and Family Team and the Youth Support and Advocacy Service (YSAS).

A comprehensive external evaluation of this program was conducted which concluded that this was an effective and dynamic program. Findings indicated program success in achieving personal outcomes for the participants, including an increase in confidence, willingness to seek help, self-control, and sense of optimism and purpose.

EACH Wilderness is open to collaborating with any agency, internal or external, on therapeutic nature-based programs. Our goal is to bring energy, movement and positive change into the lives of the communities that we work with.

Innovative disability housing development

To respond to increasing demand in the community, EACH Housing undertook a \$3 million housing development in Ringwood, for people with physical disabilities to live independently. The development includes six fully self-contained units, each with a kitchen, bathroom, double bedroom, living/dining area and laundry. While the focus of the building is on independent, self-contained apartment living, it also has shared areas for socialising with family, friends and other residents. Importantly, the units are designed to be homes, with great care being taken in the design to eliminate the clinical feel so often associated with accessible living.

The Ringwood project provides independent yet cooperative living that is supported with the use of technology and carer support. The supportive technology includes tablet technology to allow residents greater mobility for important operations such as controlling heating, blinds and lights, and careful design of bathrooms and other facilities to help improve care and independence.

This project responds to only a fraction of the demand for independent living options for people with disabilities who are often inappropriately placed in aged care facilities or other unsuitable arrangements. EACH Housing is currently developing an evaluation framework to measure outcomes for people residing in the units.

One of the new tenants, Cas, tells about her experiences of living with a disability.



Michael Sukkar MP, Cas and EACH CEO Peter Ruzyla

What has been your past experience with shared accommodation for those with disabilities?

I have lived in an independent living retirement village, (like Greenwood Avenue) and received support, as well as respite care in a shared supported accommodation. Shared supported accommodation is great but I have seen they have quite a clinical and political approach. Depending on the nature of disparity, residents tend to lose a sense of voice and independence to a certain extent.

Is there enough support on offer?

At present in Victoria, there are mainly 24 hour supported group homes but not 24 hour independent living.

What will this six-unit complex mean for those who live here?

Greater independence, allowing them to live as they choose, as valued members of society despite being ably-diverse.

What are the biggest stumbling blocks when it comes to providing shared accommodation for those with physical disabilities?

Funding, recognising human rights and valuing what ably-diverse can provide just like anyone else.

Accreditation

Safety and good quality of care is important for our customers. EACH undertakes accreditation to assure the community we are meeting safety and health guidelines and continuously improving our services.

In 2015-2016 EACH was successfully accredited against nine sets of standards. See the table on the opposite page for details of our accredited services.





Following the accreditation process EACH develop a Quality Work Plan. The plan includes recommendations for improvements made by the external accreditation assessors as well as improvements identified by EACH services and customers.

Two areas for improvement we have been working on are:

1. Improved communication: During the accreditation process, the assessors identified that customers and staff are not always kept informed of changes or events. As a result, improvements to communication are being addressed. Some of these improvements are:
 - focus groups to help EACH develop its strategic plan included both staff and customers. This allowed these groups to provide feedback on what is important to them
 - EACH series of leadership forums for managers, coordinators and team leaders included a session on communication and influence
 - the introduction of the EACH intranet 'The Grid' aims to improve internal communication across EACH

- the redevelopment of the EACH website based on human centred design making it easier to navigate and find the services required
 - EACH advisory groups and committees are reviewing both written and oral communications to ensure they are in plain language and avoids the use of acronyms
2. Develop a Cultural Action Plan: as a way to attract people from culturally and linguistically diverse backgrounds. This also includes a framework to define the way in which EACH will engage and work with diverse communities, including written documentation. Some achievements already include:
- the EACH website now includes a translation tab
 - EACH has developed a Consumer, Carer and Community Engagement Strategy and established a Consumer, Carer and Community Engagement Working Group
 - EACH has developed a Reconciliation Action Plan in partnership with Aboriginal and Torres Strait Islander People



ACCREDITATION STANDARDS	SERVICES and PROGRAMS ACCREDITED 2015-2016	
Quality Improvement Council Health & Community Service Standards (QIC)	EACH successfully accredited against the 18 QIC standards in March 2015. A mid cycle Review is scheduled for October 2016. This will include a review of the EACH Quality Work Plan	
National Safety & Quality Healthcare Standards (NSQHS)	EACH Oral Health Program fully accredited in March 2015. A mid cycle Review is scheduled for October 2016.	
National Standards for Mental Health Services (NSMHS)	EACH Mental Health Services fully accredited in March 2015	
Human Service Standards (HSS)	EACH Disability services, Child and Family and Family Violence services, Shades fully accredited in March 2015, and a mid cycle review is scheduled for October 2016. A Quality Action Plan has been submitted to Department of Health and Human Services.	
Attendant Carer Industry Standards (ACIS)	EACH Lifetime Care & Support program NSW achieved full three year accreditation in March 2016	
National Standards for Disability Services (NSDS)	EACH Disability Employment Services achieved full three year accreditation in January 2015. Annual review completed January 2016 .	
Home Care Community Standards (CCC)	EACH Older Adult Services, Homecare packages, Social Activity Groups, Victorian : Full three year review accredited April 2016 NSW: Full three year review to be accredited November 2016	
Home Care Community Standards (HCS)	EACH Shiralee Respite Program (Lead Agency Life Assist) Audit; completed September 2016	
Work Health Safety	Accredited March 2016	

Refugee health

EACH's Refugee Health Program covers the Eastern Region of Melbourne, and has been operating since 2009. The program consists of:

- refugee health nursing - including nursing assessments, catch-up vaccination clinic, monthly Mantoux Clinic (screening for latent tuberculosis), training and education
- specialist general practitioners
- outreach clinics - Royal Children's Hospital Clinic, Australian College of Optometry and Better Hearing
- allied health support
- community projects

Customers attending the refugee health program have multiple and often complex health issues, most of which they have not received treatment for in the past.

The refugee health assessment carried out by the refugee health nurses result in referrals to a number of allied health services. These referrals support people to access health services and take a proactive approach to health care.

The number of people seen by the refugee health program has steadily increased by 60% over the past five years. This year alone the program has seen 350 people of refugee background, or seeking asylum, who have settled into the Eastern Region. The most frequently



represented groups in terms of country of origin include Burma, Thailand, Malaysia, Iran, Iraq, Afghanistan and Syria.

The majority of customers are in the 6-49 age groups, with an even distribution across this age range. This distribution has remained relatively stable over the last five years. Over the past five years, 96% of new clients seen for health assessments have required an interpreter.

Meeting the nurses is often the first experience people have of the Australian health care system and the team feel privileged to assist them in their navigation and referral pathways in a culturally sensitive way.

Number
of new
clients



Family Yoga – a family story and road to excellence

Family Yoga is a unique program, which was developed in response to the needs of families. Counsellors talk a lot about theories that will help clients but it is often a challenge to help them to shift from understanding to being able to apply it to real life. Family Yoga involves all members of the family in the 'doing'. We have found it more successful in shifting family dynamics than family therapy and individual child counselling.

The program uses trauma aware principles to create a safe environment to support individuals with their emotional and physiological states, while also strengthening family attachment relationships.

This program has been responsive to, and made improvements based on client feedback. For example, the group changed from a six week to an eight week program.

The story of Emma and her children

Emma is a single parent of three children. The family experienced family violence for several years from Emma's former partner and father of the children. The family had no sense of fun, connection or togetherness. The effects of the family violence were expressed in hostile family patterns of communication, with unhealthy and aggressive ways of interacting with each other. This impacted on each family member's anxiety and stress response. They were not in tune with their bodies and each other, which impacted on their safety.



Family Yoga supported Emma's family to shift patterns of communication from hostile and aggressive to respectful and kind. It also created a sense of team work and togetherness. Family Yoga provided the space and permission for Emma and her children to enjoy being around each other.

Emma about Family Yoga

"Make it longer. We loved it! Haven't had so much fun with my kids in years... 'Mum, it's Tuesday, yeah, we have yoga'. Thank you so much for this course. It has brought my children and I together in a happy, healthy, safe and fun environment".

Road to Excellence and International Recognition

The Family Yoga program was presented at the International Childhood Trauma Conference in Melbourne this year, giving EACH an opportunity to showcase this program and demonstrate the excellence in our trauma informed practice in supporting our vulnerable families.

1300 Service Access

The Service Access team is the first point of contact for people when they want to access a service or find out more information about EACH services.

The Service Access team manages the 1300 00 EACH (1300 00 3224), which provides both service information and referral to many services and programs across 54 offices and four states in Australia.

It is vital that Service Access provides and collects consistent, clear and easy to understand information. As an opportunity for improvement, the Service Access team together with the EACH Consumer, Carer and Community Advisory Committee reviewed the current information and messages. They also checked feedback received from over 200 customers in developing the new EACH Strategic Plan and Service Principles.

EACH identified that customers want:

- services to be safe and welcoming
- to talk to someone who knows all about EACH services when they call the 1300 number
- to join services quickly
- to know what is happening and when
- information on how to get to services when they have an appointment or meeting time



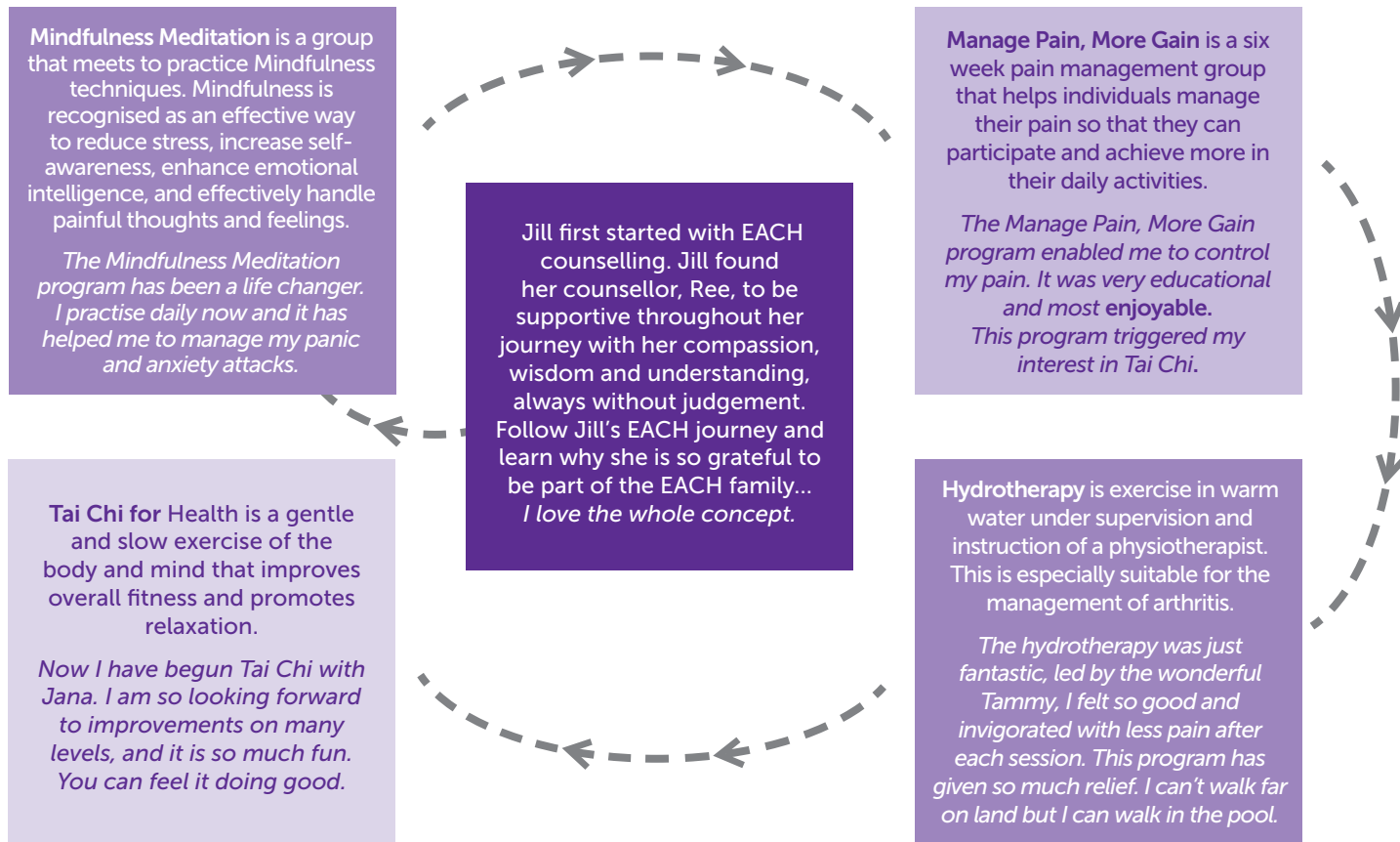
About 60% of Australians have low health literacy, this means they do not have the knowledge they need to find, understand and use information about their health and wellbeing. As part of the improvement process, health literacy principles were applied to the information and questions asked when people contact Service Access. As a result, a number of questions were developed for the Service Access team to ensure that consistent information was being gathered.

These improvements have assisted Service Access phone communications to be welcoming, consistent and easy to understand.

Coordinated and customer centred: Jill's story

Placing the customer at the centre of EACH's attention and connecting services with the customer's needs is how services are coordinated. Jill's story tells us how she was connected to a number of services. This holistic approach highlights how those with chronic conditions often have other health and wellbeing issues that can delay their recovery.

Jill, a single 69 year old grandmother, shares her experience since she *joined the EACH family*. Jill suffers from heart disease, chronic fatigue, fibromyalgia and arthritis. Realising that she *needed to take serious steps to improve my health and general wellbeing* she contacted EACH.



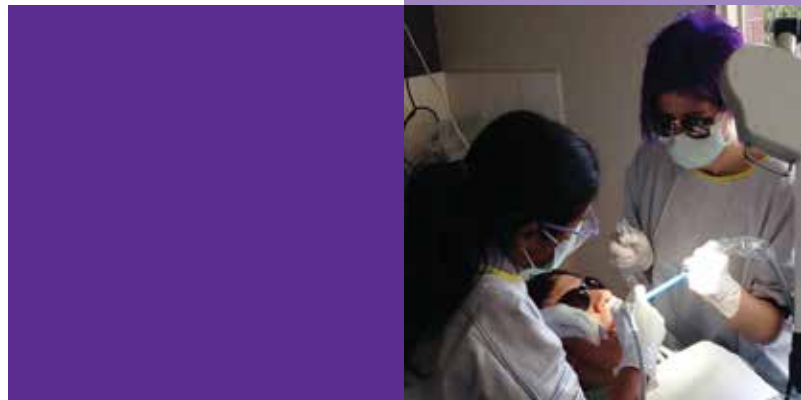
Dental services for people living with disabilities

A group of community oral health services in the Melbourne Eastern Metropolitan Region has been working together with local disability support services to help people living with a disability to access dental care. Despite this, only a small number of customers with disabilities are attending community dental clinics within the region.

To address this, the “Oral Health Outreach Project to Children and Adults with Disabilities” was started. It aimed to:

- build a relationship between the oral health team, the customers and staff at the disability service
- provide preventative dental care on site to customers of disability services
- talk to families about the current barriers to accessing dental care

EACH engaged six services supporting adults and children with a disability in the Knox and Maroondah local government areas in the program. A dental team attended each service, using portable dental equipment, and completed the required dental checks. Over the course of the program, 91 children and adults participated. Customers needing more complicated treatment were referred to either the EACH Ferntree Gully dental clinic or the Special Needs Unit at the Royal Dental Hospital of Melbourne. The majority of customers received all their treatment on site, with fewer than a quarter needing to be referred to the dental hospital.



Importantly, dental team members were able to speak with families of people living with a disability about why they did not seek regular dental care. Some of the barriers to regular dental care include costs and uncertainty about which clinics would have the skills to work with people living with a disability. As a result of the project, training for dental staff working in community clinics is being explored to help decrease the number of customers needing to be referred to the Royal Dental Hospital of Melbourne.

The project has provided dental care to many people with disabilities in our community who had not recently used dental services. Acceptance of the program was seen on a return visit to one of the services, with an increase in numbers of people living with disabilities wanting to be seen by the dental team.

Chinese peer support

In 2016 the Chinese Peer Support Program was presented with the Minister for Health Volunteer Award for outstanding achievement by a volunteer, improving public health care. The awards celebrate volunteering and recognise the individuals that demonstrate commitment to public healthcare in Victoria.

The Chinese Peer Support Program supports members of the Chinese community and their families who are dealing with problem gambling. The service provides telephone support staffed by Chinese-speaking volunteers who have lived experience with problem gambling.

The program began in 2009 and has grown to a group of 15 volunteers providing an average of four hours of their time each week. It took some years for the program to take traction in a community that did not want to talk about gambling problems. However, 12 months ago the Chinese community was invited to take part in Responsible Gambling Awareness Week. To the program's delight more than 300 Chinese people attended. Without the support of the Chinese Peer Support Program, the Chinese community would not have the much needed support from this wonderful program that provides hope and encouragement to all those who experience gambling-related harm.



Chinese volunteers with award from the Minister of Health, Jill Hennessy MP

华人同伴支持

华人同伴支持项目的义工对改善公共健康表现突出，在2016年获得祝贺他们的优秀表现，承认他们为维州公共健康作出贡献的健康部长颁奖。

华人同伴支持项目对面临问题赌博的华人及其家属提供支持。这项服务由对问题赌博有切身体会的义工提供华语电话支持服务。

这个项目始于2009年，现已发展壮大到有15位义工参与，平均每周用4小时的私人时间提供服务。华人社区过往对问题赌博避而不谈，令项目经历几年的时间才在华人社区发挥出影响。十二个月前，华人社区被邀请参与负责任博彩宣传周的活动。项目的同仁高兴地看到三百多位华人出席活动。若没有华人同伴支持项目，华人社区就会欠缺了这样一个极为需要的，对遭受赌博问题伤害的人们给予希望和鼓励的非常好的支持服务。

Quality dental services

2015-2016 Snapshot
31,444: Dental appointments
3,700: Number of children

In 2015/2016 EACH delivered oral health care to 12,836 people at two locations, Ferntree Gully and Ringwood East, as well as a mobile dental van that visits the outer areas of the Yarra Ranges and Maroondah.

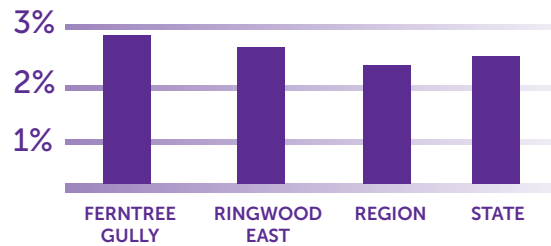
The oral health team provides onsite dental care for people who cannot easily access the dental clinics, such as those in Supported Residential Services, disability services and aged care facilities. They also prioritise care for the following population groups, meaning there is no need for these groups to wait: Aboriginal and Torres Strait Islanders, refugees and asylum seekers, people living with a disability and those at risk of homelessness.

One way the oral health program monitors the safety and quality of the dental care provided is by reviewing the dental reports provided by Dental Health Services Victoria. These reports allow the EACH oral health team to check how they perform against other community based services statewide. The dental team is able to review individual cases as well as look at any trends and make improvements where necessary. The EACH Board also regularly review these reports.



This indicator refers to the number of fillings in adult teeth that needed to be replaced or fixed. Over 10,000 teeth were treated and less than 7% needed to return for further care.

Restorative retreatment within six months-child



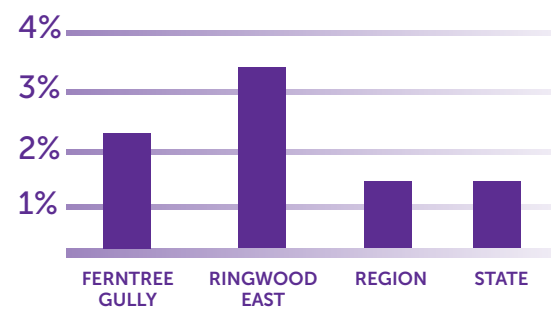
Sometimes a child needs to have a filling replaced or fixed. This happened to less than 3% of the 2,903 fillings completed in children's teeth at the EACH dental clinics.

Dentures remade within twelve months



This indicator refers to the number of customers who had to have their dentures made again. Of the 1,061 dentures made in the previous year, less than 2% of customers needed to have dentures remade.

Unplanned return within seven days of tooth extraction



This indicator refers to the percentage of customers returning within seven days after having a tooth taken out. Customers are encouraged to return for further care if they have any concerns. To help customers know what to expect after having a tooth taken out the dental clinicians provide verbal and written advice on how to care for their mouth.

Spotlight on infection prevention and control

Workplaces have an important role in promoting an awareness of infection prevention and control processes. In 2016, EACH held a training session for allied health and oral health staff about infection control and prevention in health care settings. This quality initiative supports the continued provision of safe, quality care to customers and a safe work environment for staff and volunteers. The training included:

- the fundamental principles and practices for cleaning, disinfection and sterilisation
- the management of infection risks including needle stick injuries
- work practices that prevent transmission of infection at work and in the first aid setting, effective hand hygiene, waste management, environmental cleaning and food safety
- staff immunisation requirements

Oral health

Staff in the oral health program undertake annual hand hygiene training. Selected oral health staff have been trained by Hand Hygiene Australia and Dental Health Service Victoria to become hand hygiene auditors. The auditors monitor staff on how well hand hygiene complies with expected hand hygiene practices. These audits can identify areas for improvement and help provide feedback to staff.



Another quality initiative was Dental Health Services Victoria undertaking an infection control audit of the Ringwood East and Ferntree Gully oral health sites. The results were exceptional with 93% for Ringwood East and 99% for Ferntree Gully. The consultant commented:

“The clinic is excellent, clean, well-organised with an extremely good sterilisation room”

The inappropriate and over use of antibiotics both in Australia and overseas means that cases of resistance to antibiotics are increasing, partly due to inappropriate antibiotic prescribing. The EACH oral health program regularly audits the antibiotic prescribing practices of its dentists. These audit results are reviewed against the recommended therapeutic guidelines and communicated to staff.

Creating Service Principles

In 2016 a set of Service Principles was developed by EACH staff and customers. The aim of the Service Principles is to develop a recognisable 'EACH way' and a point of difference in the way we work with, and communicate to, customers and the wider community. By applying the Service Principles to their everyday work EACH staff will provide customers with a consistent level and quality of service.

The Service Principles are based on eight best practice principles of service delivery developed by Minkoff and Cline (2004). An Innovation Lab was created as a way to adapt and test the Minkoff and Cline model into a set of EACH-specific Service Principles. The Lab was co-designed with input from an advisory group and a creative team consisting of a diverse representation of EACH staff, customers and carers.

Almost 200 customers participated in 14 Innovation Lab workshops, facilitated by over 50 EACH staff members and customers across Victoria, Tasmania, New South Wales and Queensland. The Innovation Lab participants said they felt 'listened to', 'heard', 'involved' and 'included'.

'We welcome you with empathy and hope' is the theme guiding the EACH Service Principles:

1. We make services safe, responsive and easy to access
2. We are trained to understand and respond to all your needs



3. We respect diversity, and learn about you and your culture
4. We recognise and respond to the impact of trauma
5. We include the people important to you
6. We believe making change is possible
7. We respect your lived experience, and work with your strengths
8. We work together with you and others to respond to your needs
9. We advocate with you and for you and your community
10. We are committed to getting better at all that we do

Consumer profile: Wendy

Wendy is a customer of EACH in many ways: she is a client, a group participant, a volunteer and a committee member.

My name is Wendy and I want to tell you about my journey with EACH. Initially I contacted EACH about having work done on my teeth. They were in desperate need of repair. The dental team removed the bad teeth and replaced them with a great set of new dentures. I now have a lovely smile that I am proud of.

Next, I was put in touch with a drug and alcohol counsellor. My counsellor has been able to help me with many different issues including my mental health. I suffer with anxiety and struggle to make social connections and he suggested that I try the Peer Support group.

Peer Support is a great group of people in various stages of mental health recovery making social connections. This is where I learnt about Project Hope. Project Hope have produced a book and DVD called "Walk a mile in my shoes". This included stories, poems and pictures from people in the Peer Support group. It was a fun project, I was happy to be part of, talking and writing about my lived experience. Members from peer support were also involved in a bus tour for drug and alcohol workers that visited services available to their clients. Peer Support group members acted as tour guides to talk about our own

experience of these services. Another opportunity to be involved was when I was asked to become a volunteer. Every Monday I work as an administrative assistant to the Alcohol Tobacco and Other Drug team. It is the highlight of my week and gives me a great sense of purpose.

I am a member of the EACH quality account committee. We meet once a month to discuss the development of the Quality Account and my contribution is valued. I was also involved in the EACH Innovation Lab. This was a series of workshops run with customers to help develop the EACH service principles. My part was on the advisory committee, workshop facilitator and as a participant in the Lab.

Therefore, as you can see EACH has played a large part in my recovery and has also helped in dealing with my anxiety. I am proud to be a part of EACH as a customer, volunteer and committee member.



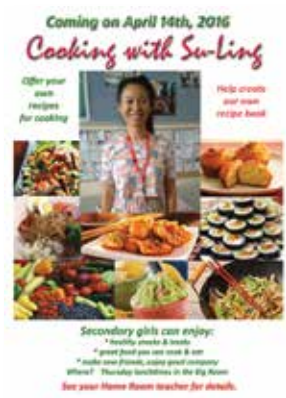
Becoming a health promoting school

Eighty per cent of the student population at Blackburn English Language School (BELS) is newly arrived refugees from the Burmese Chin community. Many of these families have no English, little formal education and have spent years in a refugee camp.

In 2011 EACH signed a Partnership Agreement with BELS to work together to improve the health of the school community. EACH has supplied a Health Promotion Officer at the school one day a week. The school has a Health Promoting Schools committee which identifies needs in the school and runs programs to address these needs. The Health Promotion Officer motivates others to change the culture of the school to be health promoting.

Professionals work with the school on its individual needs. The process and journey are just as important as the successes. To date EACH and the school have collaborated on a number of initiatives and two of these are:

- the Books in Homes project
- cooking with Su-Ling



The Books in Homes project

The aim of the Books in Homes project is to encourage children to read in their own time. In providing students the opportunity to choose books reflecting their interests, anticipation is created, making the act of reading and owning a book personal and special. This also is an opportunity for children from culturally and linguistically diverse backgrounds to become interested in literacy.

Cooking with Su-Ling.

EACH Refugee Dietician, Su-Ling, has held cooking classes for the senior girls. The purpose of the classes has been to introduce the girls to Australian cooking, develop relationships between the girls and to encourage leadership. The simple act of making a vegemite sandwich can stimulate interest and discussion between girls who may not normally mix together outside the class. After the program 85% of the students said that they had made new friends in the class and 100% reported that they had learnt a lot.

Person centred support: Iris's story

Iris is an 81 year old lady who lives with her husband. She has always been very independent and still actively participates in her local choir group. She loves to sing and always reiterates, "it doesn't matter whether you can or not, if you love it, do it!"

Iris was recently diagnosed with the early stages of Alzheimer's Disease. She gathered as much information as she could so she could prepare herself for the road ahead. She also suffers from depression and anxiety that can isolate her.

Iris recently accepted a Home Care Package, which allows her to be as independent as possible with choice and control over the supports and services she has in her home. Initially things were not ideal with the new care arrangements. Iris is very fussy about her house cleaning and advised her case manager that she was unhappy with her carer who, in her opinion, was not up to scratch! The case manager discussed with Iris the need for an adjustment period and Iris agreed to this.

The carer realised and understands that Iris was finding the changes to care arrangements difficult as it is the one thing in her life that she has some "control" over and that soon she will "lose control of her mind".

Iris's hope for the future is that she and the carer can continue on this journey together.



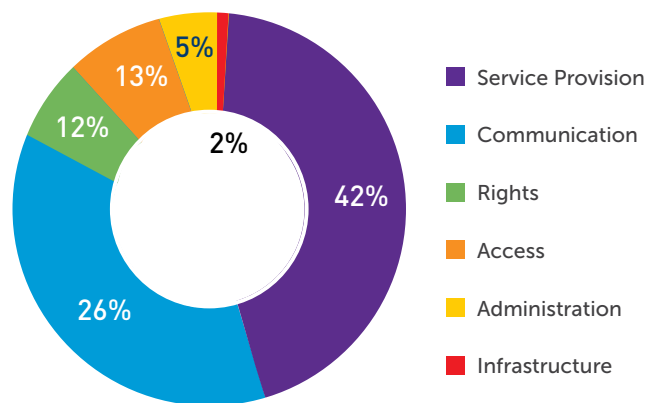
Home Care packages provide support to older adults so they can stay living in their own home. Services can include case management, personal care for showering, in-home respite, nursing care, assistance for house cleaning, meal preparation, transport for shopping or to attend appointments, bill paying, allied health services, basic home gardening and maintenance and social support.

We value your feedback

EACH welcomes the views of all customers and offers many ways to provide this feedback: email, letter, phone, in person or via the EACH website. The feedback system aims to make it easy for customers to make positive comments as well as raise complaints. All feedback provides EACH with valuable information to review and improve services, facilities or systems.

Complaints

At EACH we make sure that our customers know about their right to make a complaint, including the right to have an advocate to assist them with this process. We also make sure that our staff know about our feedback processes and apply a standard of fairness when investigating a complaint.



Types of Complaints

In 2015-2016 EACH received 122 complaints. The above graph shows that our biggest complaint themes are Service Provision and Communication. Examples of service provision complaints are dissatisfaction with the level of service provided or the service outcome. Examples of communication complaints are when inadequate information is provided or staff display a poor attitude. To understand what people are complaining about in these areas we plan to review this data over time and use the results to assist the organisation to identify areas for improvement.

Compliments and Comments

In 2015-2016 EACH received 168 compliments and 20 comments. Compliments acknowledge what EACH staff do well. Comments and suggestions can provide ideas for improvements.

'Thank you very much. I needed urgent assistance and I'm much appreciative of the acknowledgement of my circumstances. Thankyou reception'

'There aren't enough ways I can say thankyou for everything you have done to help me...your support has been invaluable ... thankyou so much for telling me you are proud of me. No one has ever told me that before and it feels good.'

Ways to give feedback

If want to pass on a compliment, make a complaint or have a comment or suggestion you are encouraged to talk to an EACH staff member or complete a feedback form available at EACH sites. You can also pass on your feedback by:

- contacting the manager of the service
- emailing at feedbackandcomplaints@each.com.au
- completing a feedback form on the EACH internet
- speaking with the Consumer Liaison Officer on 8720 1100

Communicating with our diverse customers

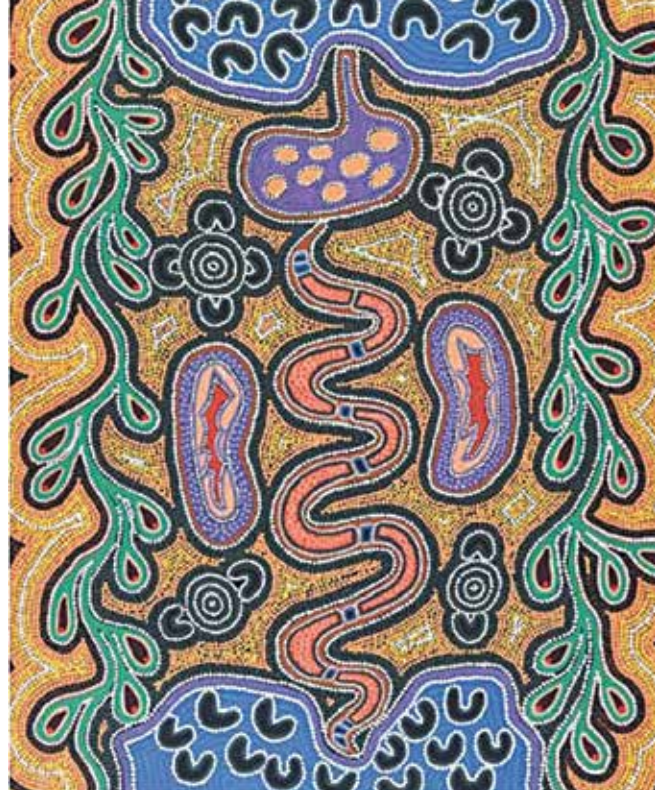
Good communication is important for both customers and EACH staff and is essential to providing safe, effective and high quality services. EACH staff have to understand the needs and concerns of our customers as well as being able to easily explain to customers what their service or treatment will involve.

Part of our commitment to good communication is using accredited interpreters. This helps our customers who speak a language other than English to actively participate in decisions about their service or treatment. Accredited interpreters are free for our customers and are trained to provide information in an accurate and impartial way. Interpreters can be used face to face or via phone. Posters about interpreter services are displayed in waiting rooms.

EACH encourages customers to ask for an accredited interpreter, even if a family member or friend is willing to interpret for them.

The top five languages that our clients speak other than English are:

- Burmese
- Mandarin
- Persian
- Arabic
- Cantonese



Painting by Irene Wanguda O'Loughlin
Narungga Mayi Yunggadja Wanggi ('receive good food in belly')

We will be working on our systems to better capture the numbers and types of interpreters we use and look forward to reporting on this in future Quality Account reports.

Introducing Staff Guidelines for Working with Aboriginal and Torres Strait Islander Community Members

EACH has a deep commitment to working respectfully with Aboriginal and Torres Strait Islander Communities. In 2016, the Staff Guidelines for Working with Aboriginal and Torres Strait Islander Community Members was launched. The guidelines were developed together with local Aboriginal and Torres Strait Islander Communities in Victoria. They are designed as a starting point to assist EACH staff to work with Community members in a culturally safe way. Further guidelines will be developed as EACH continues to learn from Aboriginal and Torres Strait Islander People across all states where our services are located.

Our commitment to you

Our Customer Charter is reflective of the EACH Service Principles which were co-designed with our consumers. Our charter states “what” you can expect from us, while the Service Principles outline “how” we will work to ensure that we deliver on our charter. Both of these inform our Values and Behaviours.

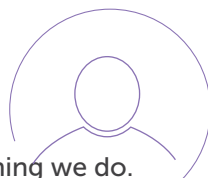
We are committed to being a customer centric organisation. Our broad definition of customer means we are inclusive of all people who interact or engage with us, either externally or internally. Our customers include consumers, clients, participants, patients, carers, the community, stakeholders, partners, staff, volunteers and members.

OUR CUSTOMER PROMISE

Health. Hope. Opportunity.

OUR CUSTOMER CHARTER

We put you at the centre of everything we do.



WE CARE

We welcome you with empathy and hope. We believe making change is possible for everyone.



WE LISTEN

We take time to learn about you, your experience and your culture. We never assume we know what's best for you.



WE ENGAGE

We work with the people important to you, and build the right network to support you. We communicate openly and ensure you and your key supports are always kept informed.



WE DELIVER

We find ways to say “yes” and always strive to do better. We build safe, responsive and innovative services that support you to achieve your goals, and grow with you as your needs change.



Acknowledgement of Funding Support

We would like to acknowledge that the services we deliver across Australia are made possible by funding from the federal and state governments:



Australian Government

- Department of Health (DoH)
- Department of Social Services (DSS)
- Department of Human Services (DHS)
- Department of Families, Housing, Community Services and Indigenous Affairs (DFaHCSIA)
- Department of Education and Training (DET)



- Department of Health and Human Services (DHHS)
- Department of Justice (DoJ)
- Dental Health Services Victoria (DHSV)
- Victorian Responsible Gambling Foundation (VGRF)



- NSW Health

We also recognise and value the support and partnerships of local governments and government agencies:

- Knox City Council
- Whitehorse City Council
- Primary Health Networks (PHN)
- Eastern Health
- National Disability Insurance Agency

We would like to acknowledge all the partnering health, community and advocacy organisations who collaborate with us to build healthy communities.



BOORAN MOTORS
WWW.BOORANMOTORS.AU



Thank you to Booran Motors and Freedom Furniture for their generous support of projects and services we provide in the community.

We value your feedback

We are committed to making this Quality Account an informative document for the whole community. To do this we need your help - we would like you to tell us what you think of the report and how we can make it more interesting.

To make it as easy as possible for you to get in touch with us, there are a number of ways that you can give your feedback:

Online: www.each.com.au/qocsurvey

Feedback form: At EACH sites

Telephone: 03 8720 1107

Email: feedbackandcomplaints@each.com.au

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