

# Quality Account

2018-2019



**djerriwarrh  
health services**



We are committed to the principals of social justice and aim to ensure every individual is treated with dignity and respect regardless of their cultural background, ability, ethnicity, gender identity, sexual orientation or religion.

# enabling healthier lives

## snapshot 2018-19

**67,575**  
**OUTPATIENT  
APPOINTMENTS**

**3,448**  
**SURGERIES  
UNDERTAKEN**

**533**  
**BABIES  
BORN**

**7,166**  
**DIALYSIS  
SESSIONS**

**5,131**  
**DENTAL  
UNDERTAKEN**

**20,421**  
**URGENT  
CARE**

Djerriwarrh Health Services covers a diverse and vibrant population of 163,900 people and is in one of the fastest growing catchments in Australia. We currently employ in excess of 700 staff making Djerriwarrh Health Services one of the larger employers in the area. The catchment includes Bacchus Marsh and surrounding region, Melton and Caroline Springs as well as incorporating local government areas belonging to the City of Melton and Moorabool Shire.

We provide a comprehensive range of general and specialist services across key medical and healthcare disciplines including acute care, sub-acute care, residential aged care services, community nursing, allied health services and dental.

# Vision

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enabling healthier lives

# Mission

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Helping people to better health and wellbeing

# Values

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Compassion | Leadership | Excellence  
Accountability | Respect

# Content

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**The term “patient” found throughout this document refers to clients, residents and consumers of health care.**

	ABOUT US	03
	VISION MISSION VALUES	04
	WELCOME	06
1.	CONSUMER, CARER AND COMMUNITY PARTICIPATION	08
	2. QUALITY AND SAFETY	13
3.	COMPREHENSIVE CARE	22
	FEEDBACK	23

# WELCOME MESSAGE



## **2018-19 has been a very productive year for Djerriwarrh Health Services.**

On 11 January 2019 the Health Service was awarded full Accreditation from the Australian Council of Healthcare Standards, along with Grant Lodge Aged Care who also received full accreditation by the Australian Aged Care Quality Agency in November 2018.

The \$9million Theatre renovation works at Bacchus Marsh are now complete. These works included the introduction of 3 new state of the art theatres to ensure we can provide safe, effective care for the community.

The \$21million Melton Health & Community Services building was opened by The Hon. Minister Mikakos on 8 May 2019, with all

partners now providing services out of the hub.

The Health Service will shortly commence work on a sensory garden in Grant Lodge thanks to the successful submission for \$104,000 via the Significant Facility Refurbishment Grant from the State Government.

Djerriwarrh Health Services continues to focus on providing quality patient centred care, serving the growing and diverse communities of Melton, Bacchus Marsh and Caroline Springs.

A handwritten signature in black ink that reads "John Ballard". The signature is fluid and cursive.

Dr John Ballard  
Administrator





**The past 12 months have seen many changes to Djerriwarrh Health Services to improve the standard of care we provide our patients.**

The new theatres are open and as a result we have increased the number of patient operations we have performed. The patients have expressed their satisfaction with the new facilities.

Our Special Care Nursery opened on 15 July 2019. The nursery enables mothers and babies to stay together at our hospital in those critical first few hours for observation, rather than being transferred to a larger health service.

We have also finalised our 2019-2024 Strategic Plan which sets the goals and direction of the health service for the next 5 years.

It is an exciting time to be a part of Djerriwarrh Health Services and along with my colleagues, I look forward to continuing the amazing work across all sites to enable healthier lives.

A handwritten signature in black ink, appearing to read 'B. Scott'.

Belinda Scott  
Chief Executive



# 1. CONSUMER, CARER AND COMMUNITY PARTICIPATION

## 1.1 VICTORIAN HEALTH EXPERIENCE SURVEY (VHES)

**Understanding the consumer journey, from access through to discharge is important. It allows Djerriwarrh Health Services to comprehensively, and effectively, reflect on the care provided.**

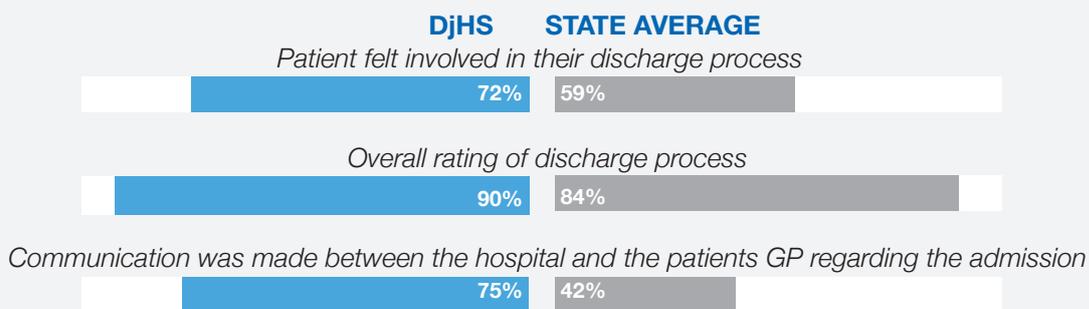
Each consumer spends a varied amount of time within Djerriwarrh Health Services (DjHS), and may access single or multiple services. The Victorian Health Experience Survey (VHES) provides DjHS the opportunity to review consumer feedback regarding the care they received, and compare it to other health services across the state.

Consumer feedback is valued throughout the organisation as an opportunity to understand how the consumer experience the services we provide and how we can make changes to improve care.

Djerriwarrh Health Service uses patient feedback to drive improvements, and to strives to create an environment where patients receive high quality healthcare, while feeling welcome, safe and listened to.

Examples of quality improvements within DjHS that have resulted from patient feedback include:

- Additional disabled parks at Melton Health
- Increased signage across the Organisation to support patients accessing the health services and improve their experience.



Overall, the results from consumer experience at DjHS is positive and demonstrates above average consumer satisfaction.



Discharge planning has been highlighted, as a significant part of comprehensive care planning and requires the involvement of consumers and their families. Staff at DjHS work with patients and their families to identify the services and requirements that may be needed for each individual upon discharge and initiate planning and referrals from the beginning of each healthcare episode.

## 1.2 COMMUNITY HEALTH SERVICES VHES RESULTS

**Primary care is often the first point of contact people have with the health system. Community Health services play a key role in the early intervention and management of people with chronic conditions.**

Djerriwarrh Health Service provides a wide range of community health services including:

- Alcohol And Other Drug Services
- Audiology Clinic
- Breast Cancer Support
- Community Health Nurse
- Counselling
- Chronic Disease Management
- Day Rehabilitation
- Diabetes Education
- Dietetics
- Friendly Visiting Program
- Health Coach Service
- Health Promotions
- Healthy Mothers Healthy Babies Program
- Lymphoedema Service
- Mortgage Well Being Service
- Occupational Therapy
- Paediatric Programs
- Physiotherapy
- Podiatry
- Speech Pathology
- Stomal Therapy
- Wound Care

### DjHS STATE AVERAGE

*Utilising the health service was beneficial to the health and wellbeing of the patient*



*Overall rating of community care received*



*Consumers felt they were treated with dignity and respect*



*Consumers felt comfortable raising issues that were important to them*



*Consumers know how to provide feedback*



*Consumers were given information in a language that they could understand*



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### 1.3 CONSUMERS, CARERS AND COMMUNITY PARTICIPATING FULLY AND EFFECTIVELY IN THEIR HEALTHCARE.

**Developing a partnership between the consumer and clinician is integral to the delivery of safe and effective health care. To ensure this is an effective and meaningful process, there must be good communication, trust and respect.**

This is achieved in many ways at DjHS, including shared decision-making and goal setting, individualised care planning and co-design of the health service.

The organisation embraces the principles of shared decision-making, and involves patients and their families in their care. An example of this is bedside handover, which is the handover of information between clinicians with the patient present and involved. Recent audits of this process showed 100 % compliance of ward based bedside handover.

Patient partnerships are strongly linked to the governance structures across Djerriwarrh

Health Services. Community Representatives volunteer their time to participate on organisational committees which monitor patient safety, workplace wellbeing and clinical service delivery. The principles of consumer participation, patient experience, effective communication and access to the health services are all values that are embedded into organisational policies and procedures.

DjHS seeks contribution and feedback from both patients and the community when developing its services. Examples of this include:

- Patients reviewing new and revised patient information to ensure that it is easy to understand
- Patients involved in the co-design projects such as relocating the Lactation Consultant to Maternity Services.
- Community representatives on the building projects for Melton Health & Community Services and Operating Theatres

**The health service was fortunate to have a consumer representative offering a community voice to multiple aspects of the new building.**



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## 1.4 INTERPRETERS TO PATIENTS WHO REQUIRE ONE

### **Djerriwarrh Health Services utilises a professional Interpreting Service which staff and patient feel comfort that correct information is being shared.**

An example the Occupational Therapist (OT) contacted a patient as requested by another service provider who seemed quite confused regarding a letter they received in the mail. This patient has limited English and required a Burmese interpreter to assist with information gathering. As the OT was new to the patient, a home visit was organised with an interpreter to introduce themselves and assist the patient to understand the letter/s they received. The staff organised an interpreter through the Victorian Interpreting and Translating Service. The OT and interpreter initially met prior to seeing the patient for all parties to understand the reason for the home visit. During the home visit it

was identified that the patient and their family had received letters from the NDIS requesting completion of the application form. The letters were written in English and therefore the patient did not understand what was required. With the use of the interpreter, the staff explained the reasons for the NDIS letters and with consent, assisted the patient to complete the NDIS paperwork. The patient was very happy with the information provided by the staff through the use of the interpreter. The interpreter was very professional which made the home visit comfortable for the patient, resulting in a successful home visit.



- > Dinka
- > Punjabi
- > Mandarin
- > Italian
- > Spanish
- > Greek
- > Vietnamese
- > Croatian
- > Serbian
- > Maltese

## 1.5 DISABILITY ACTION PLAN

**The Djerriwarrh Health Service Disability Action Plan is a 2 year plan which aims to promote the inclusion of people with disabilities, facilitate access to services, promote health and wellbeing, while reducing barriers to health care.**

The DjHS Disability Action Plan aligns with the 4 key priorities identified in the Victorian State Disability Action plan, specifically:

- Inclusive communities
- Health, housing and wellbeing
- Fairness and safety
- Contributing lives.

The DjHS Disability Action plan marks the first stand alone Disability Action Plan for DjHS; recognizing that people with a disability experience greater disadvantage and health inequities. The plan builds on previous work undertaken as part of the organisation's Diversity Plan and takes a whole of organization approach to foster an equitable and inclusive service.

The DjHS Disability Action Plan serves to strengthen the approach to addressing the needs of people with a disability by:

- Enhancing accessibility of patient information and services.
- Facilitating workforce development to enhance the delivery of client services
- Strengthening opportunities for workforce participation and volunteerism.

Partnering with patients and gaining valuable input through presence on the Diversity Steering Group.

To date DjHS has made steady progress towards the achievement of its deliverables (Table 1). This has been reflected in the organisation's roll out of the National Disability Insurance Scheme (NDIS) and the establishment of systems to support access to services. The NDIS represents a significant change in the delivery of client services and a positive step towards achieving improved independence and quality of life for people with disability.

Disability Action Plan 2018-2020

Action Areas	% Deliverables	Complete
Domain 1	Inclusive communities	30%
Domain 2	Health, housing & wellbeing	100%
Domain 3	Fairness and safety	50%
Domain 4:	Contributing lives	25%

In tandem to the roll out of the NDIS, DjHS is committed to improving the accessibility and health literacy of service information and patient resources. To date, work continues to improve the quality of DjHS information for patients. DjHS has established strong networks and partnerships with local service providers and patient groups to enhance the delivery of services in addition to supporting opportunities for employment and volunteerism for people with disabilities.

Overall, DjHS is on track to achieve its commitments in the DjHS Disability Action plan with further actions to be implemented in 2019-20.

## 2. QUALITY AND SAFETY

### 2.1 CONSUMERS AND STAFF EXPERIENCE

**Complaints and compliments are an integral part of continuous improvement at Djerriwarrh Health Services.**

It is important that we facilitate multiple options of feedback provision to our patients, their families and carers. This includes: face to face, telephone, email, letters and individually designed post cards. The feedback postcards were approved by our Diversity and Consumer Advisory group.

All compliments are delivered to staff, individually and as a team. Complaints are managed through both the Quality and Chief Executive office, and are all responded to in a timely manner.



*Compliments and complaints*

**103 Compliments**

**71 Complaints**

**7 Suggestions**



## 2.3 INTEGRATED COMMUNITY HEALTH SERVICES

**The Dietetics team was very excited to move into the new Melton Community Health Centre and start using the modern kitchen for our cooking groups this year.**

The team run practical skills cooking groups monthly. The aim of the groups is to help people learn new cooking skills and try healthy, tasty recipes in a friendly social environment. Djerrwarrah Health Services also provides education on different topics each month through the Dietetic Team. This year topics have included meal planning and shopping, using herbs and spices, the benefit of using frozen foods, portion sizes and busting food myths! An average of 6 individuals attend each month and have given us positive feedback on the sessions.

The recipes are vegetarian and often use legumes such as lentils and chickpeas. Participants have found it useful to learn how to make cheaper meals without meat. Also, they have learnt how to cook with new ingredients and herbs and spices. Everyone has a go and contributes to the cooking. Many have recommended the group to friends or family who also now attend.

Comments from participants:

**“Very informative discussion on portions and other interesting topics. Thanks”**

**“Another great cooking class - loved the burgers and Salad great quick and easy recipes. I made up the ‘Tuna salad’ tonight and used Quinoa instead. The Roasted Capsicum and Chilli sauce was delicious!”**

**“I loved both recipes, healthy, tasty with very low salt content. It is amazing what you can accomplish with the use of spices”**

**The first group to do a cooking session in the new kitchen**



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## 2.4 ACCREDITATION

**The National Safety and Quality Health Service Standards outline the minimum requirements of health services, with the aim of improving the quality of health care provided and protecting patients from harm.**

During the 2018-2019 period, Djerriwarrh Health Services successfully gained accreditation against the National Safety and Quality in Healthcare standards as well as the Aged Care Standards and Human Service Standards. Djerriwarrh Health Services is accredited until 1 March 2022.

Djerriwarrh Health Services has transitioned to the second edition of the National Standards and implemented many improvements to patient care as a result.

Significant improvements have been made to strengthen clinical governance, leadership and culture. Organisational developments can be seen in patient safety and patient satisfaction.

Some major examples of improvements include:

1. Implementing comprehensive screening of patient risks and addressing associated need while in hospital and upon discharge.
2. Safety Crosses have been implemented to identify risk and ensure a timely management plan is put in place, and the co-operation of the entire team. Safety crosses at Djerriwarrh Health were developed to highlight risks that are relevant to each clinical area, for example falls and medication errors. A red cross indicates there has been an error, or an incident, a green cross indicates the shift thus far has been incident free. Staff huddles occur to allow staff to share patient risks.
3. Standardising all points of communication to ensure that they are effective and timely, and involving the patient and their family.
4. Care planning based on the individual needs of each patient. Incorporating a multidisciplinary team to achieve positive healthcare that meets each patient's specific wishes.

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## 2.5 THE NUMBER OF SENTINEL EVENTS AND ADVERSE EVENTS

**An adverse event is defined as “an incident in which unintended harm resulted to a person receiving health care”. Sentinel events are adverse events that result in death or serious harm to a patient while in the care of a health service.**

All adverse events are recorded in our Victorian Hospitals Incident Management System and reported to Safer Care Victoria.

At Djerriwarrh Health Services we strive to ensure that we are providing high quality care to all patients.

We promote a safety culture, encouraging and supporting staff to report clinical incidents. All adverse events are investigated using a robust process which includes a thorough investigation by staff skilled in clinical incident investigation.

Learning from adverse events and making improvements is a critical element of this process. Adverse events are classified by severity according to the level of harm and or care required as a result of the adverse event.

**ISR 1** - Severe harm or death.

**ISR 2** - Moderate harm resulting in advanced treatment/specialist care.

Last year, Djerriwarrh Health Services had one “ISR 1” event and 35 “ISR 2” events. This represents a 49% reduction from the previous year.



## 2.6 PREVENTION AND CONTROL OF HEALTHCARE-ASSOCIATED INFECTIONS

**Djerriwarrh Health Service has a very thorough surgical site infections surveillance systems. This is accompanied by an antimicrobial stewardship program that monitors usage of antibiotics.**

Staphylococcus blood stream infection is one of the main key performance measures whereby the organisation collects data, monitors trends, implements strategies and reports data to the Victorian Department of Health & Human Services via the Victorian Nosocomial Infection Surveillance System (VICNISS).



## 2.7 HEALTHCARE WORKER IMMUNISATION AGAINST INFLUENZA.

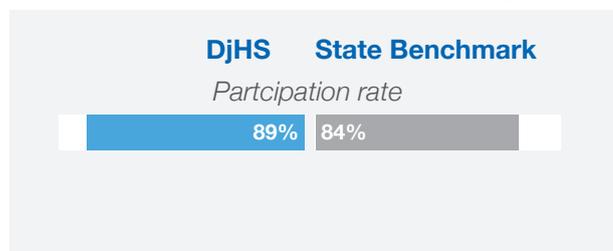
**Maintaining a healthy workforce helps prevent the transfer of influenza to patients, visitors and their families.**

Djerriwarrh Health Service has a workforce immunization program which includes free flu vaccination running from April through to August.

Our influenza plan includes:

- Contingency outbreak
- Management of staff & patients diagnosed with flu
- Flu tracking for staff diagnosed with flu, staff flu vaccination and outreach flu vaccination
- Vaccine storage
- Responding to flu vaccine adverse side effects and reporting
- Survey to evaluate reasons some staff declined the flu vaccination.

### Participation rate for Immunization Program



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## 2.8 PERINATAL SERVICES PERFORMANCE INDICATORS

**Being a birth professional is a privilege. No two ways about it. It's joyous, messy, at times gruelling, and we wouldn't have it any other way. Knowing that we are witnessing a woman meeting her baby is fulfilling privilege.**

1) Percentage of singleton full-term babies (without congenital anomalies) who are considered in poor condition shortly after birth.

Between 2018 and 2019, this rate was 0.8%. This is a consistently good result attributed to most staff holding FSEP Level 3 clinician status and well embedded escalation procedures. We would like to see this reduce further in the coming year, with a plan to further refine the fetal surveillance prompts for escalation.

2) Percentage of singleton babies with severe fetal growth restriction delivered at 40 or more weeks gestation.

Acceptable results at 25% of the cohort, which we would like to see movement toward reduction of this result. We have been vigilant in frequent assessment of women with suspected Fetal Growth Restriction and focusing on indication for induction of labour at 39 weeks gestation



## 2.9 RESIDENTIAL AGED CARE SERVICES

**Grant Lodge Residential Aged Care Facility is required to report against key metrics of the Residents' health and wellbeing to the Department of Health each quarter.**

**The key metrics are:**

- Falls
- Pressure injuries
- Number of residents on nine or more medications
- Unplanned weight loss
- Use of physical restraint

### Pressure Injuries

Pressure injuries are a significant risk to older people due to fragile skin, medications and moving less, this causes pain and requires treatment which has a negative impact on their lives.

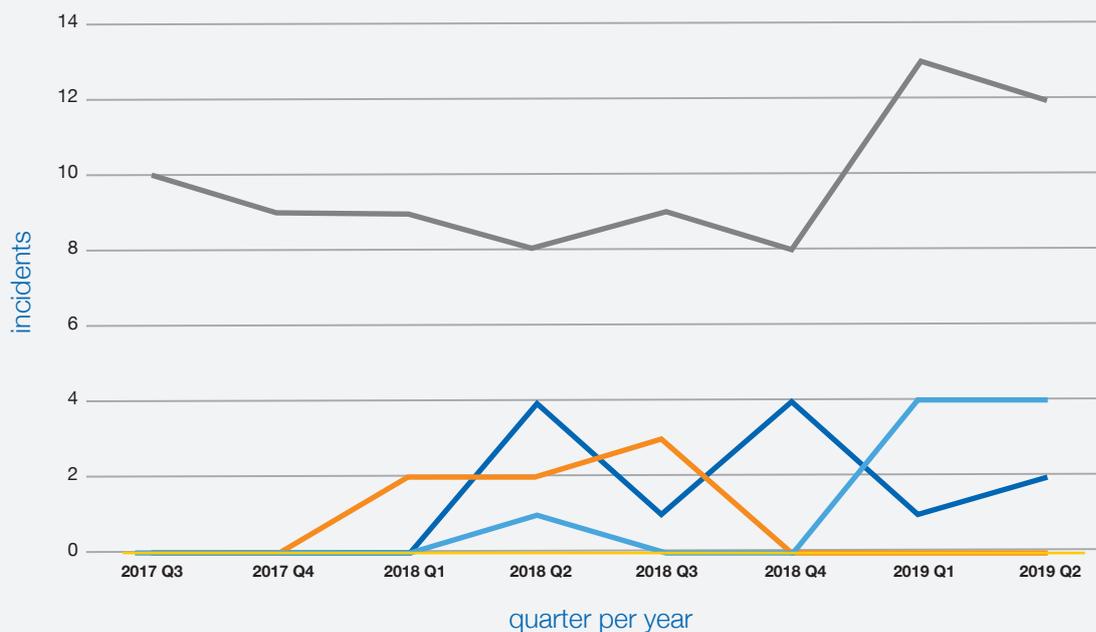
Prevention is the key focus at DjHS with all patients who are identified as "at risk" of developing a pressure injury have strategies put in place to reduce the risk.

These Strategies include, pressure relieving devices, mobility supports, assistance with hygiene, and monitoring of food intake.

### Strategies for the prevention of Pressure Injuries

- pressure relieving devices
- mobility supports
- assistance with hygiene
- monitoring of food intake

**Table 1 shows the reportable incidents for Aged care Residents and rates for residents at DjHS from 2018-2019.**



#### Legend

- use of nine or more medications
- pressure injuries
- unplanned weight loss
- falls and fractures
- use of physical restraint

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## Falls

Falls risks are high within the aged care environment and therefore pose the greatest risk to our residents. DjHS screens all residents for their potential falls risk by assessing their physical, psychological and cognitive status, current medications and any recent falls history. There are many contributing factor to why people fall, and a lack of strength is one of those contributors.

Through the Allied Health program, Grant Lodge Residential Aged Care Facility provides residents with an exercise program and activities to keep them active..

The exercise programs are aimed at improving the residents overall strength, balance, coordination and pain. The specific exercises are designed based on the Allied Health assessments to establish the residents' physical status, and include seated and standing exercises where applicable.

Keeping up our residents muscle mass is important. We have a movement group which gets together twice a week, here our residents do seated passive exercises using hand weights for resistance.



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## 2.10 PATIENT ESCALATION OF CARE PROCESSES

**“It’s Your Call” is a mechanism for the healthcare organisation to partner with patients in their care. Effective partnerships work towards a positive experience for patients during their stay.**

“It’s Your Call” is a brochure that outlines how patients and their families can alert staff when they are worried about their condition. The phone number provided allows the patient or their family to speak to a delegate within the healthcare organisation about their concerns. This brochure is currently given to patients when they are admitted to the ward. There is also a poster in the wards with this information available at all times.

A survey of patient’s knowledge of this brochure’s availability and what the information means to them showed that patients have an understanding of the brochure and that it is available. There have been no “It’s Your Call” calls made over the past 24 months at Djerriwarrh Health Services.

Improved recognition and response systems, contemporary observations charts and staff education focused on safe patient care that detects problems and issues early has contributed to the results of the patient’s survey of “It’s Your Call”.

All clinical staff complete Basic Life Support training annually, where early recognition and response is the cornerstone of training. In 2019, over 100 staff members have renewed their resuscitation training to date.

Co design of the “It’s Your Call” brochure where collaboration with both our staff, our patients and carers is in progress. This will ensure that the information is easy to understand and describes how to use the “It’s Your Call” system



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## 2.12 INTEGRATED COMMUNITY HEALTH SERVICES

### **A patients experience with a health service starts long before they get to their point of care. First impressions can also influence one's perceptions of the services they receive.**

For many patients, the time at which they require health services is a time of increased stress due to the impact of their health condition on their day to day life and general function. It is therefore important for health services to ensure that patient's initial contact with the health service is positive and easy to manage.

The 2018 Victorian Health Care Experience Survey reviewed patient perceptions of DjHS Community Health Services and explored aspects such as service awareness, booking appointments, service waiting times, maintenance of DjHS facilities, privacy and staff courtesy.

In 2018/19, 66% of respondents indicated that it was easy to find out the community health service existed compared to 68% in 2017 and 79% for Victoria. Despite the introduction of My Aged Care and the new online service directory, community awareness remains challenging. In response to this, staff have undertaken multiple GP and community group promotional visits in addition to building on existing networks with other local service providers to raise community awareness of DjHS services.

Djerriwarh health Services has experienced many exciting infrastructure changes. In 2019

the opening of the new Melton Community health and Community Services building saw the re-location and expansion of services. For example, the Family Violence Services is now co-located within the same building as the counselling service. Multidisciplinary care is shown to have a positive outcome for patients, particularly disadvantaged and at risk groups within the community.

61% of patients reported positive feedback on the available transport and parking facilities across Community Health. This figure was down on the previous year and could be attributed to the reduction in parking at the new Caroline Springs site.

The introduction of My Aged Care has marked a significant change to the way that people access community health services. From October 2018, patients aged 65 years and over could no longer present to community health for services without a referral via My Aged Care. This change adds another layer of complexity for patients seeking a service which has resulted in an 11% drop in patient rating their ease to make an appointment with DjHS. Despite this however, DjHS rated higher (75%) than the Victorian average (71%) which also displayed a downward trend.

Compared with Victoria, DjHS feedback was in line with the state average for perceptions of safety, feeling welcome and adhering to privacy while attending DjHS services.

### **DjHS      State Average**

Patients found it easy to find the service



Ease of appointments



# 3. COMPREHENSIVE CARE

## 3.1 ACTIONS ARISING FROM THE COMMUNITY HEALTH SERVICES VHS RESULTS

### **Chronic disease care is a core focus of DjHS Community Health Services which provide a strong multidisciplinary approach to patient management.**

This model aims to ensure the delivery of comprehensive assessment, treatment and education to improve patient self-management at home.

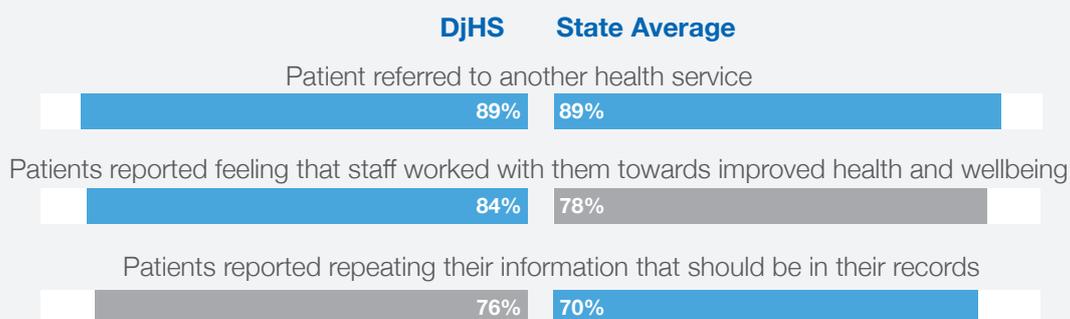
In 2018, 89% of patients reported to have been referred on to other services to assist in improving their health and wellbeing. This represents a drop on the previous year, yet in line with the Victorian state average (89%). 84% of patients reported staff at DjHS worked together to help them with their health and wellbeing.

This figure remains steady on data from the previous year and exceeds the Victoria state average of 78%.

We found 76% of patients reported to have to repeat their information that should be in their record, compared to 70% for the Victorian average. Although new systems are in place to reduce the repetition of patient information, particularly for patients accessing My Aged Care, further work is required to ensure that the necessary information is documented to prevent additional burden on patients. DjHS continues to work with referrers to build on current processes and strengthen the communication between services.

Overall the data demonstrates that DjHS staff works well within a multidisciplinary team and works together to improve the coordination of patient appointments to enhance patient health outcomes. This is demonstrated in the delivery of diabetes services within the community health setting where care coordination can otherwise be challenging to manage within an outpatient environment. Dietitians, Podiatrists and Diabetes Educators work together to deliver joint patient appointments which serve to reinforce health messages and reduce the burden on patient requiring multiple services.

Criteria Results January-March 2019



### 3.2 IMPROVE THE SERVICE EXPERIENCE FOR A PARTICULAR COMMUNITY HEALTH PRIORITY POPULATION.

**The staff at Djerriwarrh Health Services are encouraged to celebrate diversity within the workforce, patients and the broader community.**

The organisation is fostering partnerships with the local Aboriginal and Torres Strait Islander communities with the aim of improving access to the service and the health outcomes of the community. To support this, the organisation has established a partnership with Kirrip Aboriginal Corporation, and together are developing an Aboriginal Health implementation plan.

During 2019, the Aboriginal, Torres Strait Islander and Australian flags were raised for the first time across the organisation and an Aboriginal Smoking Ceremony was performed to mark the opening of the new Melton Health and Community Services building.

The health service will continue to engage groups within the community to further strengthening the values of inclusiveness and respect.



## Feedback

Our Quality Account with a link to provide feedback can be found on our website [www.DjHS.org.au](http://www.DjHS.org.au), we also have the QR code below will direct you straight to the survey.

1. Was the report easy to understand?
2. What did you like most about the report?
3. What information would you like to see in this report?
4. Do you have any suggestions or feedback on other services Djerriwarrh Health Services could offer the community?

Djerriwarrh Health Services appreciates your comments.

QR Code



scan to complete our survey online

**Bacchus Marsh & Melton Regional Hospital**

29-35 Grant Street,  
Bacchus Marsh, 3340

**Melton Health & Community Services**

195-209 Barries Road,  
Melton West, Vic, 3337

**Bacchus Marsh Community Health Centre**

29-35 Grant Street, (enter from Turner Street)  
Bacchus Marsh, 3340

**Caroline Springs Community Health Centre**

228-232 Caroline Springs Boulevard,  
Caroline Springs, 3023

**Grant Lodge Residential Aged Care**

6 Clarinda Street,  
Bacchus Marsh, 3340

**[www.DjHS.org.au](http://www.DjHS.org.au)**

**03 5367 2000**

**ABN 83 271 740 698**



**djerriwarrh  
health services**