

**CANN VALLEY BUSH
NURSING CENTRE INC**

REG: A11159

**ANNUAL REPORT
2010**





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ANNUAL REPORT 2010

38th Annual Report and Consolidated Financial Statements
as presented to the Annual General Meeting held on 13 October, 2010

The Cann Valley Bush Nursing Centre Vision and Mission for 2009 - 2010 financial year was:

OUR VISION

“As a remote nursing service the Centre is a single entry point, one stop shop, has a community based and well matched multidisciplinary services, primary care, immediate response, 24 hour access, innovation, Remote Area Nurse with the trust of the people, a range of services, comprehensive assessment, community ownership and excellent outcomes for all people in or passing through the Cann Valley and surrounding areas”.

OUR MISSION

“To assist people to reach their potential in health and well-being”.

PRESIDENT'S MESSAGE

This year has seen another busy year at our centre.

Unfortunately the submission for the major refurbishment of the centre was unsuccessful, firstly with Department of Health and then Department of Health and ageing. It has been re-submitted to Department of Health and Ageing and we are awaiting further news.

A major problem encountered throughout the year, and still not resolved, concerns drainage. Parts of the Centre were flooded in October 2009 and later in August 2010. Initially we believed the problem had been resolved but further flooding indicated this was not so. The issue is still being pursued.

The area outside the front of the building requires better drainage and this issue has been raised for many years with both East Gippsland Shire Council and VIC Roads. It seems that this is just something we need to constantly remind them of. Access is quite difficult for some of our frailer clients after/during wet weather.

We were successful in obtaining grants for a ride on mower, plus trailer and a bigger garden shed. We also extended the working area of the Men's Shed. This provides the group with much needed space.

An agreement was signed with Orbest Regional Health to provide a public and school dentist from the centre on 3 Thursdays each month. The 4th Thursday being for a private dentist. This has provided a much needed service not only to our community but to the wider community as well.

Staff social - August 2009 was well attended and enjoyed by Committee of Management members, staff and volunteers.



Emergency Services lunch - July 10. Representatives from the CVBNC, AV, SES, Police, CFA attended. It was a very pleasant get together.

Our kitchen has now been registered with East Gippsland Shire Council for food preparation. This may enable us to have meals prepared for clients now receiving them from local cafes or even for the PAG lunches.

The Clerical Assistant position has seen some changes this year. We have been fortunate to enjoy the work experiences of Jennica McShane, Kelli Grace and now Sarah Nation. Both Jennica and Kelli left the area to take up new positions. Welcome to Sarah and we hope she stays for quite some time.

Thanks to all Committee of Management members who have made a contribution this year. We all fulfil a vital community service. Thank you also to our wonderful staff and volunteers. You are the ones who give the Centre the distinction it deserves.

Judy McKinnon - President, Committee of Management

COMMITTEE OF MANAGEMENT

Cann Valley Bush Nursing Centre is governed by a volunteer Committee of Management.

President Judy McKinnon
Vice President Jennifer McShane
Treasurer Rose Young

Committee Tony Stephenson, Judy Howell, Myrna Richter, Raphael Mills,
Lee Walker, Pauline Stephenson, Adrian Nation, Ian Quick

Resignations Kate Eunson resigned September 2009

Life Members
Tony Stephenson
Ian Quick



Committee of Management Re-Election rotation

As At 2009/2010

Elected Member	Re-Election Years			
Tony Stephenson	2010	2013	2016	2019
Ian Quick	2011	2014	2017	2020
Judy McKinnon	2012	2015	2018	2021
Pauline Stephenson	2010	2013	2016	2019
Rose Young	2012	2015	2018	2021
Judy Howell	2010	2013	2016	2019
Myrna Richter	2011	2014	2017	2020
Jennifer McShane	2010	2013	2016	2019
Adrian Nation	2012	2015	2018	2021
Lee Walker	2011	2014	2017	2020
Raphael Mills	2011	2014	2017	2020

Past Members:

	Resigned		Resigned
Ross Walker	1993	Jean Broome	1993
Reg Armstrong	1993	Cheryl Nugent	1993
Maurie Stanford	1994	Carlene Day	1994
Debbi Rainbow	1994	Kerri Woodleigh	1994
Sid Cummings	1995	Nora Webb	1995
Sue Martinussen	1996	Sandra Marriot	1996
Linda Kelly	1996	John Garland	1998
Nathan Trushell	1998	Kym Bull	1998
Sarah Nation	1998	Tricia Whitford	2000
Jason Pyne	2000	Adrian Nation	2001
Paula Rykers	2001	Marg Stevens	2002
Lisa Broome	2003	Joan Myles	2003
Jennifer McShane	2003	Patricia Cox	2006
Steve Hunt	2008	Kate Eunson	2009



ADMINISTRATIVE OFFICER REPORT

2009/2010 has seen Cann Valley Bush Nursing Centre continuing to provide its wide range of services to the local community and visitors to our local area.

The Incorporation currently has a membership of 77 families and 51 single members. Members are entitled to receive a nursing service at no cost during Centre opening hours for the term of their membership. For a pre-determined fee, non-members are entitled to receive a nursing service during opening hours. All consumables and out-of-hours and/or out-of-centre calls attract a fee for all clients and are paid for by the client despite membership.

We would like to acknowledge with thanks our funding bodies which keep the centre's doors open. They are:

- Department of Health & Ageing - MPC & RHS Grants, CACP & EACH Packages.
- Department of Health - Small Rural/HACC Health Care and Support Grant
- Orbest Regional Health - HACC Grant.

This year Department of Health & Ageing (DoHA) has merged MPC & RHS grants into a new grant called Rural Primary Health Services (RPHS). This change will streamline the reporting requirements associated with Department of Health & Ageing guidelines.

During 2009/2010 we have been blessed to have volunteer assistance by the local community. A big thanks to Gus McKinnon and his team of workers for donating their time to clear the surrounds around our centre to help create a safer environment for our bush fire season.

We have completed our garden shed project which was funded by Department of Health (DH). The ride on mower which was also funded by DH is being regularly used to provide home property maintenance for our clients.

Department of Health has provided funding to implement the Active Service Model (ASM). Also a new incident reporting system, Victorian Health Incident Management System (VHIMS) has been provided by DH.

Our nursing staff have changed from PJB client software to UNITI. This has been a challenge, but hopefully will prove to be a more efficient and uniform system of client record management.

All in all the administrative staff are kept very busy meeting the requirements of the various government departments and the day to day operations at the centre.

This year has again seen us meeting many and varied challenges and we look forward to another successful year ahead.

Kym McLeod
Administrative Officer

NURSE MANAGER REPORT

While maintaining a high level of quality but a low level of bureaucracy the varied needs of the community can be met in a very timely, efficient, flexible and coordinated way.

To illustrate this I'd like to let you have a look at a day in the life of a Bush Nurse.

8:30am

- Unlock rooms. Mobile phone on charger
- Check vaccine fridge temperature (high, low & present)
- Check various items of equipment (listed for day/month)
- Give baby 6 months vaccinations
- Take 4 phone calls
 - one needing food services assistance
 - one requesting appointment with masseur
 - one re Planned Activity Group
 - one concerned re friend
- Data to computer
- Six people (individual visits) requiring specimens taken and sent to pathology - Bairnsdale. Spin some specimens in centrifuge.
- Two phone calls to pathology and to dentist
- Visitor calls in with travel sickness
- Dressing to one man's leg - check re his Home Care service
- Three phone calls re dentist, meeting at Bairnsdale, re equipment
- Check child's cause of high temperature - treat ear infection
- Data to computer
- Remove splinter from lady's arm
- Give regular injection to a man
- Police call in re "Incident Management meeting"
- House visit to deliver shower stool & commode
- House visit - palliative care - refill 24 hour medication "syringe driver". Give hot-towel-bath
- Two phone calls out to doctor and chemist
- Data to computer
- LUNCH
- Phone re "Comprehensive Assessment" tomorrow
- Change (daily) IV antibiotic. Dress ulcer/wound. Dress IV site
- Refill man's dosette with week's supply of medication
- Pathology courier arrives - give specimens
- Remove man's sutures inserted last week. Discuss need to manage low income
- Check emergency drugs
- 4 phone calls in - one from Orbost Hospital, one Swifts Creek BNC
- Reorder supplies
- Sterilize instruments
- Arrange tutoring session for Home Carers (Cert III in HACCC)
- 4 phone calls out re podiatrist's change of visit date
- Write a draft "Active Service Model Implementation Plan" for DH



cont.....

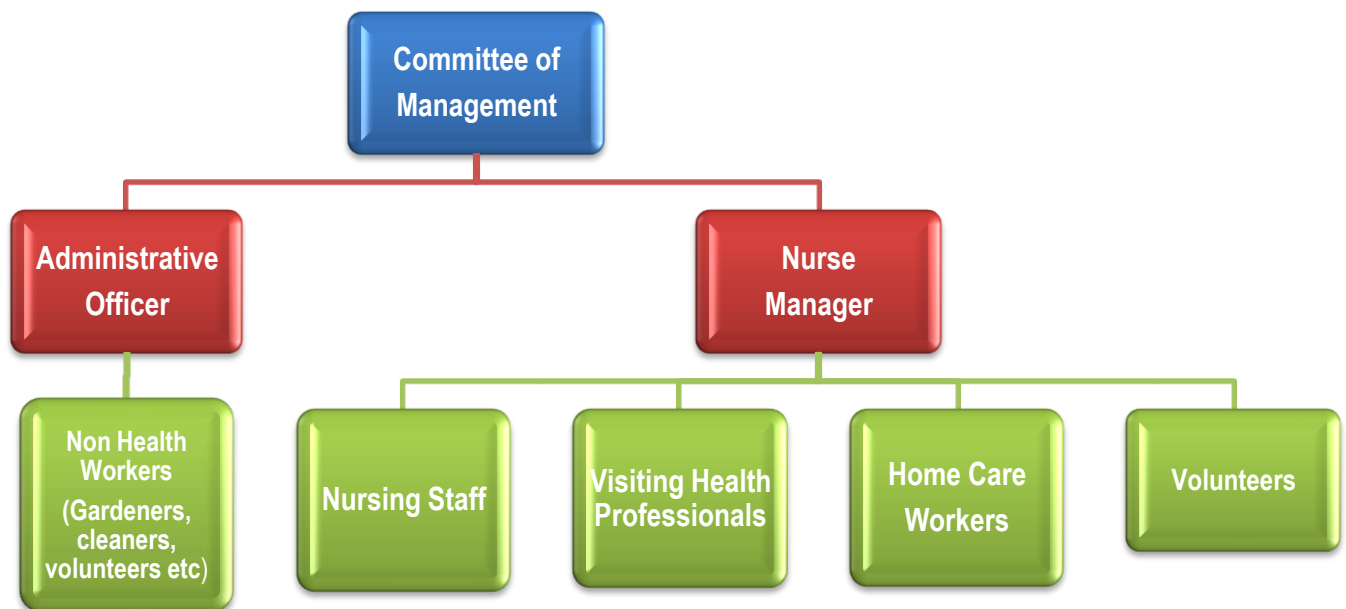
- Data to computer
- Lock up and go home - "Good day - not as busy as some"
- (some details changed for anonymity)
- 11pm woken by ambulance pager re emergency at Club Terrace
- Phone call to ambulance to notify that nurse is responding
- Dress including bright yellow RAN gear
- Five km down road to Cann River - pager call re motor vehicle accident (man with severely injured face) on Princes Highway at Noorinbee Nth near Beehive track
- Phone call to ambulance who suggest I leave the Club Terrace patient to Orbost ambulance and attend to the car accident instead. I explained to ambulance (Ballarat) the need to ignore the Noorinbee Nth on Princes Hwy bit of message - no logic with that - tourists possibly unsure of their whereabouts
- Drive through fog to Mt Drummer (half way to Genoa) to find car driver with torch warning traffic of her smashed car around next bend. She had dodged wild-life but hit the bank. (her dents were much worse than mine from a few days earlier when I hadn't swerved in time!)
- Use great new flashing beacon torches (4) out of Bush Nurse car placed on road and on smashed car bonnet
- Walk down beyond further bend to find a man warning traffic from other direction. Few facial lacerations & bruises. Cold.
- Wave down car with torch - found to be police from Mallacoota on way to Noorinbee Nth!
- Sit man on road-side guard rail while I check him again.
- Time - 5 past midnight
- Phone ambulance to call off helicopter and to give report.
- Walk to Bush nurse car - sit man on car seat
- Check man and lady driver - fill in form - rain tending to blow open car door. Try not to smudge form.
- CFA and ambulance arrive
- Dress man's face & reassure
- See ambulance off - collect beacons not needed now.
- Drive back to Cann River
- Phone ambulance to sign off - complete form (Leave computer data for next day)
- Tidy equipment in car
- Home to bed 2am - "How did that happen?"
- A quiet weep for our palliative care client and a little chuckle over the "Noorinbee Nth" accident then a bit more sleep



Thanks to all staff, committee members, volunteers, community members, visiting health professionals, funding departments and all those agencies that partner with us to provide care in a very collaborative fashion.

Mary Filmer
Nurse Manager

ORGANISATIONAL FLOWCHART



The Committee of Management is made up of local volunteers who meet on the second Wednesday each month (except January).

Without these volunteers this centre would not be able to operate.

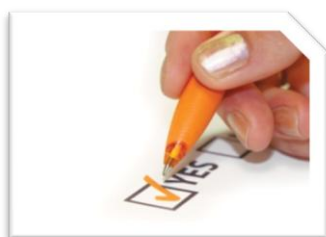
SIGNIFICANT ACHIEVEMENTS IN 2009-2010

CACPS & EACH PROVISION

The provision of CACPS and EACH packages have helped maintain some of our older members of our community in their own homes. Hardworking Home Carers and Property Maintenance Workers assist greatly as well as volunteers and of course the nurses.



COMMUNITY SURVEY



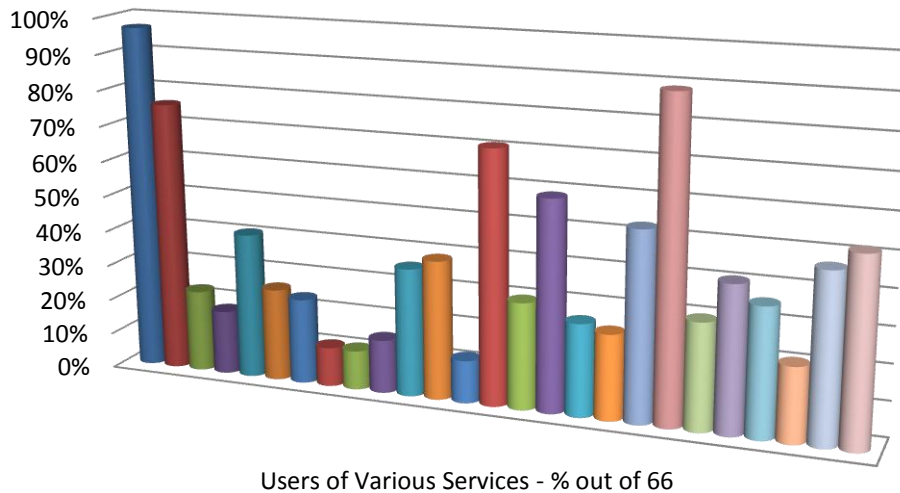
A Community Survey (April 2010) was well responded to enabling the centre to read what consumers like most about the various services they have used as well as what they thought could be improved and needs they have that are not being met. This survey enabled us to obtain a good idea of the views of the community members.

Some of the services provided are rare for a Bush Nursing Centre such as Home Based Services, Volunteer driving, Pathology specimen collection, delivery of parcels from Orbest Pharmacy, Immunisations, Dental and other Allied Health Services. Specific grants from State and Federal Departments as well as partnerships enable these to occur.



From the completed surveys the following graph shows percentage of users of various services.

Survey Results



- Nursing 97%
- 24/7 on call 76%
- Planned Activity Group 23%
- Men's Shed 18%
- Bus to Bairnsdale 41%
- Home Care 26%
- Property Maintenance 24%
- Food Services 11%
- Respite Care 11%
- Home Nursing/Palliative Care 15%
- Physiotherapist 36%
- Podiatry 39%
- Speech Pathology 12%
- Pathology Specimen Collection 71%
- Equipment Hire 30%
- Immunisations 59%
- Women's Health Nurse 26%
- Outreach Visiting 24%
- Health Promotion 53%
- Doctor 89%
- Maternal & Child Health Nurse 30%
- Private Dentist 41%
- Public & School Dentist 36%
- Counsellors 21%
- Masseurs 47%
- Optometrist 52%

HEALTH PROMOTION

Health promotion and Early Detection work has included the following:

- Adult Interest Group (elderly and younger invalid) have had information and discussion sessions on Summer First Aid and CPR Update.
- Breast Health sessions conducted at Cann River and Club Terrace.
- Free bus to Breast Screening (Group booking) Orbost.
- Well-Womens Clinic
- “Apply First Aid” courses x 3
- CPR Course x 1
- “Anaphylaxis/Epipen” (First Aid) course.
- Australia Day Health Checks in the Park (at the Bush Poets Breakfast)
- “Life-Ball” with Adult Interest Group.
- Men’s Night - Tea with free full skin checks by Dr Hulme Hay and informative talk by Dr Hay.
- Peach Tree Creek AED Defibrillator - assistance with purchase (in cooperation with Peach Tree Creek residents and East Gippsland Shire)
- Waiting Room Displays on various topics
 - Bowl & Bladder Continence
 - Curtain & Blind cords safety
 - Diabetes - early detection
 - Bush Fire Safety
 - Staying Healthy in the Heat



Planned Activity group enjoying “Life Ball”

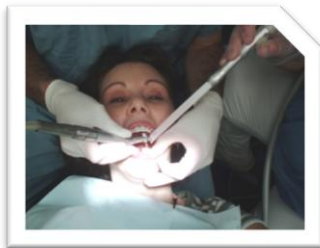
REMOTE AREA NURSES (RANs)

The Nurses at the Bush Nursing Centres once again have maintained their accreditation with the annual Emergency Care Update Program conducted by Ambulance Victoria with protocols matching those of the ambulance service but including a greater range of emergency medications.



CVBNC Nurses participating in the RAN training

DENTAL SERVICES



People have been travelling an hour from locations in the east and west to access the private, public and student dental services. A grant from Department of Health and Ageing under the National Rural & Remote Health Infrastructure Program (NRRHIP) has enabled us to keep the dental services well equipped.

BOBs (Bloke's Only Business)

With the assistance of a co-ordinator twice a month, BOBs has been well attended and enjoyed - so much so that with registered volunteers it has been used weekly.



BOBs group at work!

VOLUNTEERS

Sincere thanks to our volunteer drivers who made 73 trips in the last financial year to Orbost (17), Bairnsdale (26), Paynesville (2), Sale (5), Traralgon (3), Bombala (5) and Bega (3).



TRAINING DURING FINANCIAL YEAR

- Wound Management Workshop
- Wound Management Conference
- Pandemic Flu (H1N1) management
- Health coaching
- Breast Health Update
- Life-ball
- Immunisation Courses
- Applied Suicide Intervention Skills
- Dementia Essentials
- Paediatric Trauma
- Burns
- Food Handling Supervisor Course
- Catheterisation
- Vocational Graduate Certificate in Continence Promotion and Management
- Understanding Elder Abuse
- Remote Area Nurse Emergency Care Update Program
- Planned Activity Group Network Forum
- Immunisation Update forum
- Training in Certificate III in Home and Community Care continues to ensure our carers are well qualified.

OUR SERVICES

Cann Valley Bush Nursing Centre is a Multi Purpose Centre that provides an array of services to meet your needs.

Our dedicated and professional staff and visitors are pleased to provide the following services:

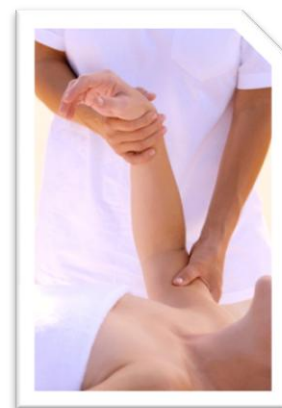
Acute

- Clinical
- Emergency
- Medical
- Palliative Care
- Pathology



Home Based Services

- Carer Support
- Delivered Meals
- District Nursing
- Home and Community Care
- In-home Respite Care
- Palliative Care
- Personal Care
- Post Acute Care
- Property Maintenance
- Volunteer Friendly Visiting



Primary Health Care

- Adult Day Activity
- Bus trips/Respite
- Community Health Nursing
- Counselling
- Diabetes Management
- Dietetics and Nutrition
- Drug & Alcohol Support
- Family & Child Health
- General Practitioners
- Health Promotion
- Immunisation Clinics
- Masseurs
- Men's Health (including Men's Shed)
- Mental Health
- Occupational Therapy
- Oral Health/Dental
- Physiotherapy
- Podiatry
- Speech Pathology
- Support and Activity Groups
- Volunteer Driving
- Women's Health Clinic

Human Resources (Staff, Contractors, Volunteers) 2009 - 2010

Nurse Manager

Mary Filmer

Administrative Officer

Kym McLeod

Clerical Assistant

Jennica McShane (resigned Sept 2009)

Kelli Grace (resigned April 2010)

Sarah Nation

Clinical Services

Nursing - Division 1 Registered Nurses

Mary Filmer

Anne Swift

Marija Mrcic

Catherine Hannon

Nicola Gorwell

Diane Coxon

Home Based Services

Terri Lobley

Cheryl Checkley

Kaye Henderson

Henry Taylor

Ross Leary

Lorraine Vare

George Bennett

Sarah Perkins-Sands

Brian Dumper

Volunteers

Kaye Henderson

Andy McLeod

Garry Smith

George Bennett

Lee Walker

Rose Young

Environmental Services

Kaye Henderson

Henry Taylor

Maria Taylor

Planned Activity Group (Adult Interest Group)

Coordinator - Sarah Perkins-Sands

Assistant - Kaye Henderson

Assistant - Jennet Young

Planned Activity Group (Men's Shed)

Coordinator - Jason Gardner



Henry (centre gardener)
& Maria Taylor's wedding

Visiting Services (Independent of CVBNC)

General Practitioners

Dr Hulme Hay, MBBS, ANZCOG, FRACGP
Dr Elizabeth Christie, MBBS, BSc, MPM, CertFam Therapy
Dr Sybille Dobber, DRS, FFP, ACUP

Dental Services

Dr Peter Favaloro, B.D.Sc (Melb), L.D.S (Vic)
Debbie Fall (Dental Assistant)
Dr Philip Ng
Jayde Joiner (Dental Assistant)
Syarna Baker (Dental Assistant)

Community Mental Health

Peter Mahoney, RN Psych
Steve Siers, RN Psych

Family & Child Health

Katy Radic
Helen McCarthy

Dietician

Amanda Banfield

Occupational Therapist

Lisa Manser

Allied Health

Podiatrist - Stephen Learhinan
Speech Pathologist - Toni Seiler
Physiotherapist - Pat Helmore



Planned Activity group enjoying
Australia Day Lunch

Masseurs

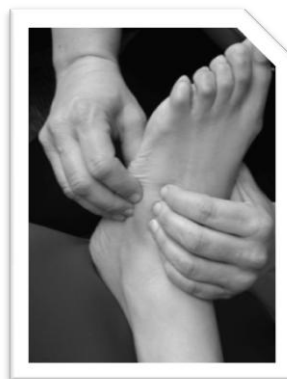
Colleen Reitschel
Christine Liedkte

Optometrist

Dyson & Long

Diabetes Educator

Katy Radic

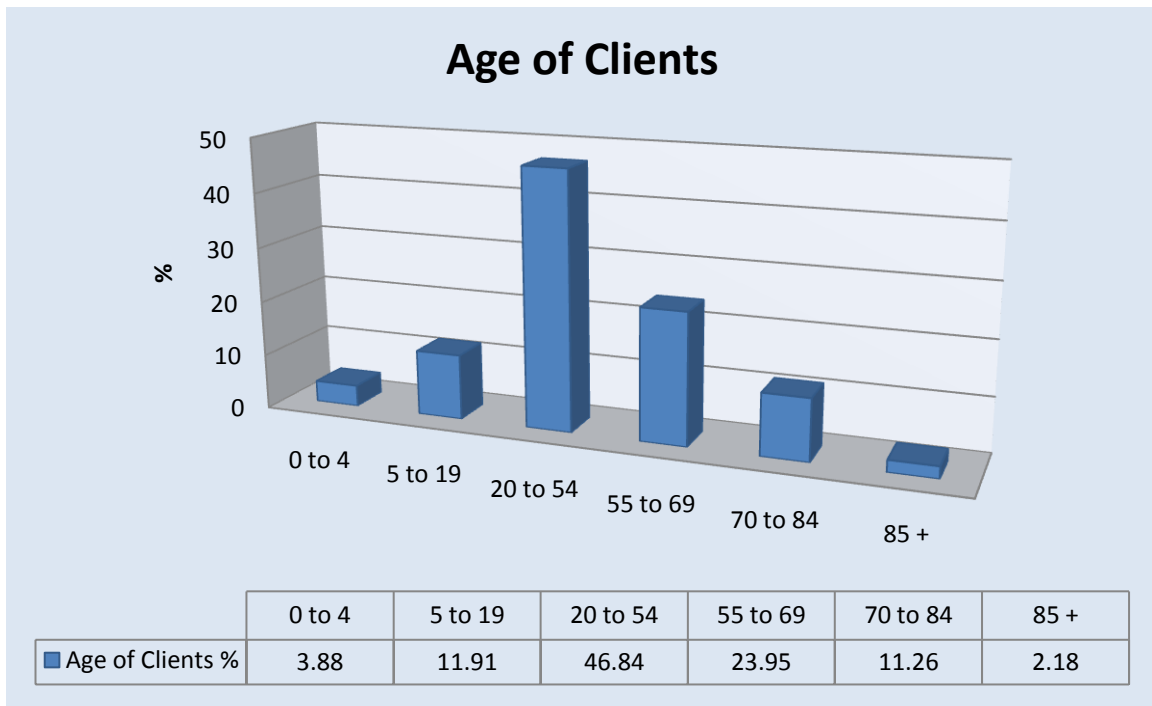


SERVICE LEVEL & ACTIVITY

	2009/2010	2008/2009	2007/2008
Nursing at Centre - number of contacts	6917	6910	8054
Number of clients involved	632	624	604
Nursing out of Centre	788	938	530
Number of clients involved	172	175	157
Nursing out of hours	505	457	455
Number of clients involved	206	176	197
Planned Activity Group Contacts	298	313	227
Number of clients involved	55	53	58
Physiotherapy contacts	63	60	81
Number of clients involved	32	29	39
Speech Pathology contacts	44	43	33
Number of clients involved	14	17	19
Podiatry contacts	95	74	100
Number of clients involved	32	27	43
<u>Visiting Services Independent of CVBNC</u>			
(Including Family & Child Health, General Practitioner, Community Mental Health, Counsellors, Masseurs, Dentists, Dietician and Occupational Therapist)			
Number of contacts	1378	1385	1116
Number of clients involved	415	386	288
<u>Home Based Services</u>			
(as well as Nursing out of Centre as above)			
Home Care/Personal Care (occasions of service)	512	832	603
Delivered Meals (number of meals)	450	832	189
Property Maintenance (occasions of service)	298	291	254

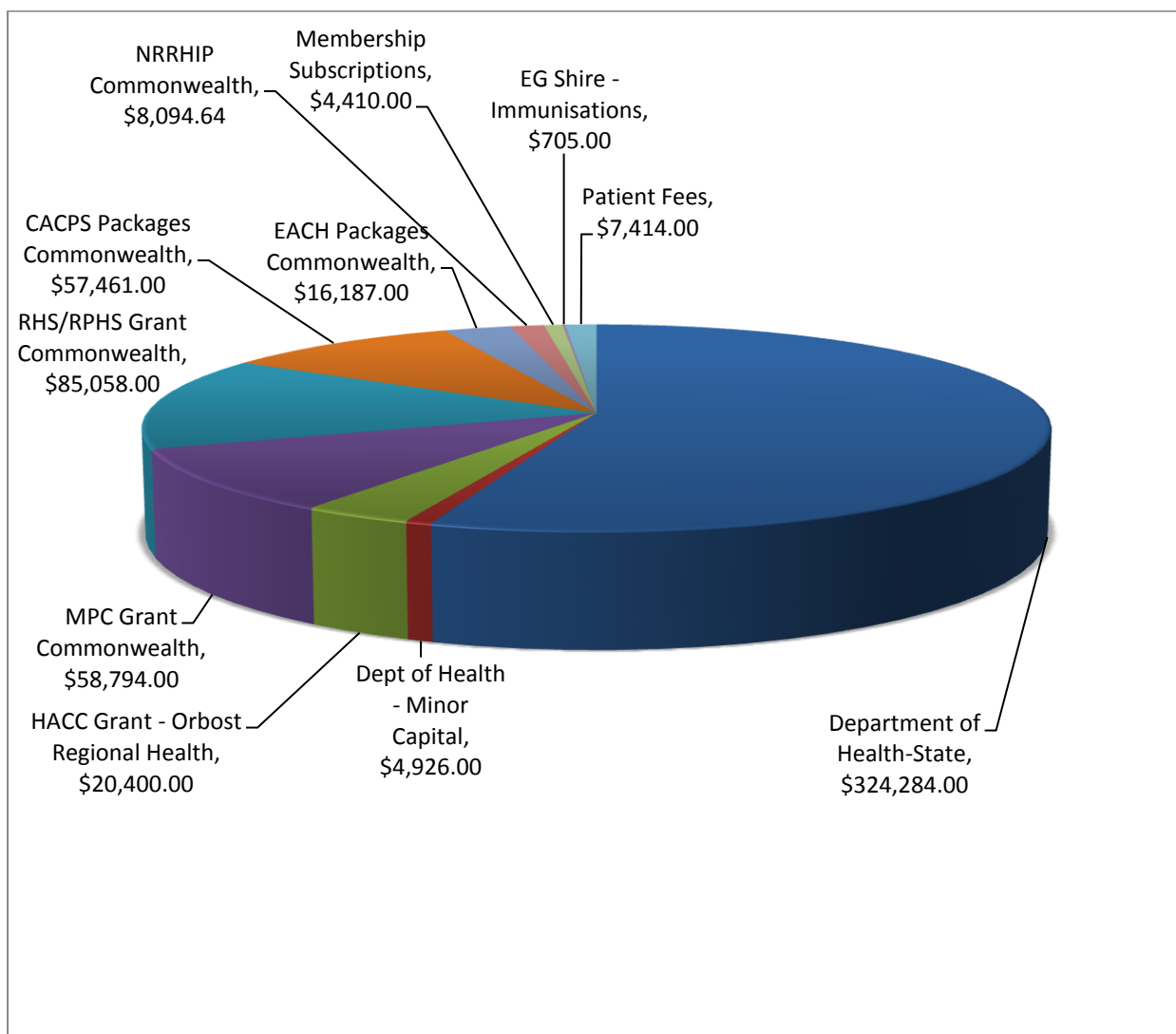
SERVICE LEVEL & ACTIVITY CONT.....

From data collected daily during the year 2009-2010 at the centre, the ages of people contacted by or attending the centre's services have been:



Out of all people contacted by/attended at the centre's services Aboriginal people have averaged 3%.

REPORT OF OPERATIONS - Revenue by Source



QUALITY OF CARE REPORT

Quality improvements during last 12 months

Building a Quality Organisation with:

- Further work on Supervision systems
- OH&S System and Audit processes
- Information technology plan
- Clarification of role and responsibility of Committee of Management
- Policies & Procedures for all identified risks
- Assessment, integration strategies and monitoring of risks

Providing Quality Services & Programs by:

- Ensuring changes are made in response to audits
- Nurse Manager reports proforma
- Monitoring process of Cultural Plan

Sustaining Quality External Relationships

- Incorporating and contributing to, what is currently seen as accepted good practice relevant to the services of the centre.





DENTAL STUDY

The utilisation and effectiveness of dental treatment in a remote, rural Victorian community - internal study.

A.Mary Filmer, RN, Ba.App.Sc (Nursing), MRH, MRHP, Grad Dip Social Science, OAM

Cann Valley Bush Nursing Centre, Cann River, Victoria, Australia

INTRODUCTION

Objectives: To determine the utilisation of a dental clinic in a remote Victorian town and explore the effect of access to dental treatment on the incidence of tooth abscess in the small, isolated, rural community.

Design: Utilisation data, a survey of clients, interviews with visiting dentists for anecdotal evidence and a comparison study of the incidence of dental abscess requiring antibiotic treatment during the 12 months before and after the commencement of the dental service.

Setting: A remote, rural Bush Nursing Centre in Victoria

Participants: Visiting dentists and clients.

Main outcome measures: Utilisation of the service, a survey of community self assessment of dental problems as well as the prevalence dental abscesses presented to the Nurse at the Cann Valley Bush Nursing Centre (CVBNC).

KEY WORDS: tooth abscess, remote, Bush nursing.

SIGNIFICANCE OF ORAL HEALTH

Dental disease is a major health problem for people in remote, rural areas. Difficult access to dental services exacerbates the problem with people receiving attention mainly when there is an acute painful condition. There is a tendency for many country people to postpone a visit to the dentist because it involves making a special trip (National Rural Health Alliance, 1998).

Severe tooth decay can affect a person's appearance, self-esteem and social interaction and can also cause difficulties eating and speaking (Alexander, B., 2006).

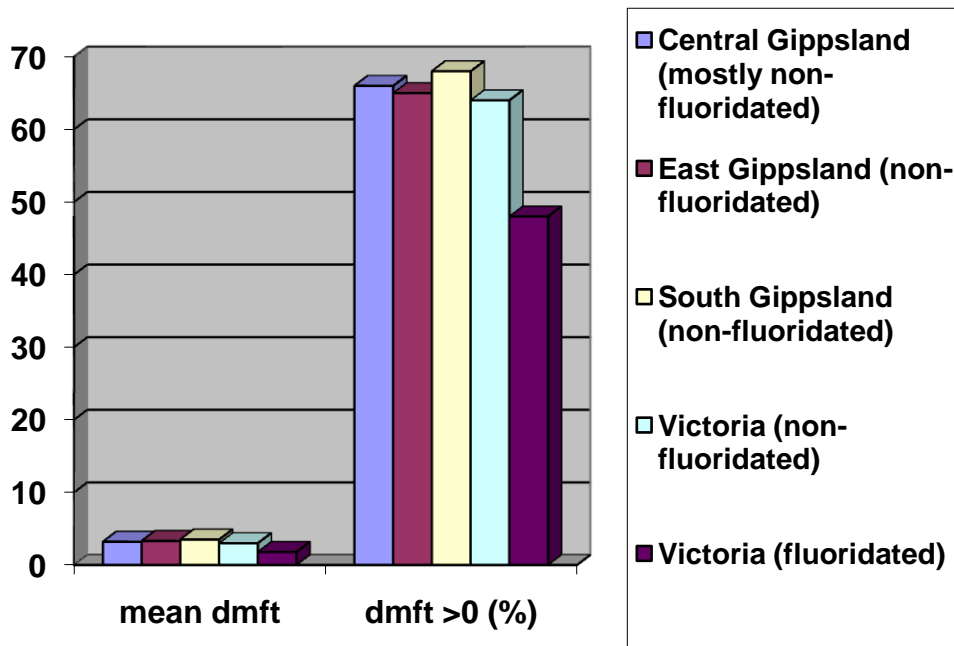
Periodontal disease is also seen to be a contributor towards the risk of cardiovascular disease and stroke and recent research has shown that heart disease can be lessened with dental treatment (Genco et al, 2006). A common form of acute periodontal problems is periodontal abscess (Colgate, 2006)

The East Gippsland region of Victoria contains remote, rural areas and has a high incidence of dental caries as shown in Table 1 and Figure1.

TABLE 1: Department of Human Services *Oral Health Dental Caries by Water Catchment Area*

Notes: dmft: decayed missing filled deciduous teeth

Geographic Area	mean dmft	dmft >0 (%)
Central Gippsland (mostly non-fluoridated)	3.2	66
East Gippsland (non-fluoridated)	3.3	65
South Gippsland (non-fluoridated)	3.5	68
Victoria (non-fluoridated)	3.0	64
Victoria (fluoridated)	1.8	48



Source: Victorian School of Dental Services Data Set 2001

Department of Human Services **Oral Health DMFT by DHS Region, 2001** Department of Human Services, 2006.

FIGURE 1: *Oral Health Dental Caries by Water Catchment Area*



Rural and remote Australians face access difficulties to dental health care.

Access to private dental care was provided at a remote, rural centre at Cann River.

The Cann Valley Bush Nursing Centre (CVBNC) endeavours to provide multidisciplinary services to the community of the Cann River area. Cann River's ARIA score of remoteness is 5.33 and the ARIA category 3.

This was a very innovative project as the response from dentists was quite unexpected due to the lengthy waiting time for an appointment in the large regional towns and cities.

The objective was to obtain the services of a visiting dentist through the supply of the equipment necessary along with the room and support at the Centre.

Access to a dentist was considered to greatly improve with this project as the nearest private dental service was about 110 km distance away, over a difficult road, with the waiting time visit away and home again in the one day. As well, the 2001 census it was shown that 28 households in the community were without a motor vehicle.

The Nurses at the CVBNC often consulted per telephone with dentists in other areas especially those at Lakes Entrance and Bairnsdale.

In this remote, rural area this project was to gain funding from the Rural Private Access program of the Department t support and increase the range of privately insurable health services with the potential to encourage people to take up private health insurance.

The Cann Valley Bush Nursing Centre is the only health facility in the community. The nursing service operates on weekdays with out of house on call service for emergencies. Home Care, Volunteer Driving, Planned Activity Group and Respite Care are some of the additional services provided.

The CVBNC is a provider of 4 remote area CACPS packages and 2 EACH packages. A doctor visits, from the nearest medical practice 75km away, one day per fortnight. Other visiting allied health services that are accommodated at the centre are podiatrist, pathologist, counsellors, masseurs, maternal and child health nurse, and optometrist.

Two dentists that were approached showed interest in providing a visiting dental service.

This service was seen to greatly enhance the centre's ability to meet the health needs of the community.

A risk analysis was carried out prior to commencement of the service (see Table 1 below).

Table 1. Risk Analysis

Priority	Risk Name	Likelihood	Consequence	Rating	Proposed Action
1	Lack of Dentist.	Moderate	Project service would be on hold.	Very high	Contact second dentist that has shown interest. Seek further interest from other dentists.
2	Insufficient clients.	Low	Dentist's time wasted.	Medium	Longer space of time (more than the proposed one month) between clinics.
3	Insufficient funds for Dentist's travel expenses.	Moderate	Dentist unable to visit.	Very high	Prioritise funding being used for the travel costs of Allied Health visitors in consultation with the funding bodies (Department of Health and Ageing).

COMMUNITY NEED

The CannValley Bush Nursing Centre serves a population of approximately 670 in the far east corner of Victoria. The area is isolated from services as shown by the Aria score. The area serviced by the Cann Valley Bush Nursing Centre includes Cann River, Noorinbee, Noorinbee Nth., Chandlers Creek, Buldah, Club Terrace, Combienbar, Tonghi Creek, Wigan, Point Hicks, Tamboon Inlet. There are no other health service agencies in the area.

The nearest private dental service is one and three quarter hours drive from Cann River. Waiting times for dentist appointments within the one and three quarter to three hour radius are two to three months.


The dental service was considered to have the potential of also having a larger catchment area including Mallacoota, Genoa, Bemm River with another 1,400 people as these communities are the same distance as Cann River from a private dental service and within one hour's travel time from Cann River.

There is no fluoridisation of water in this area.

The community of the Cann Valley area is made up mainly of working class people with the main industries being timber milling, forest management and beef and dairy farming.

Travelling long distances for dental appointments has always been hard for the local community for the elderly, for workers who have to take a full day off work and for parents of small children and it is never easy driving the long distance home following dental treatment.

Easier access to dental treatment would improve the health of the community including the prevention and relief of pain and discomfort.



Recent research has also shown that heart disease can be lessened with dental treatment. Periodontal disease is seen to be a contributor towards the risk of heart disease and stroke (Genco et al, 2006).

CANN RIVER AS CENTRAL

A dental service was considered to have the potential of also having a larger catchment area including Mallacoota, Genoa, Bombala and Bemm River with another 5,500 people as these communities are the same distance as Cann River from a private dental service and within one hour's travel time from Cann River. Cann River is central to these locations.

COMMUNITY AND STAKEHOLDER CONSULTATION

Community consultation in the past have drawn comments regarding the need for dental services locally.

The COM which is made up of (100%) community members and staff of the CVBNC have often considered this need but obtaining this service had always seemed too difficult an undertaking. Anecdotal evidence showed a need for dental services and volunteer driving had been used to try to assist some members of the community travel to dental appointments. The most recent community consultation held in early 2006 showed that dentistry was a needed service.

The East Gippsland Primary Care Partnership's Community Health Plan 2003-2004 identified dental conditions as one of the five main reasons for hospital admissions in East Gippsland (East Gippsland Health and Wellbeing Plan 2004-2005, p 18)

The Rural and Regional Health Services Branch of the State Government of Victoria states in the document "Rural directions for a better state of health" (November, 2005, p 24) mentions their support for improving dental health of the community and encouraging development of a dental workforce in rural areas.

METHODS

Clinical data was collected involving the incidence of periodontal abscess assessed by the nurse at the Cann Valley Bush Nursing Centre between 10/2005 and 09/2006.

Data was collected from mailed self-completion questionnaires (Appendix 1) to the community as it has been suggested that this method of gaining consumers views

- "may be the most appropriate because --- they protect the identity of the recipient" (Smith et. Al., 2006:594)

The data consisted of a series of binary decisions (yes/no) for each of the categories.

One focus group of young mothers was also held as such groups

- "may be more inclusive and maximise response rates and the richness of the data" (ibid)

The opportunity was also taken at this group to promote oral hygiene care. Another anonymous questionnaire (Appendix 2) was given out at this group and their comments in the discussion was noted.

RESULTS

The number of cases of periodontal abscess presented to the Nurse at the CVBNC during the period of 12 months prior to commencement of dental clinic totalled 19 (Fig.2).

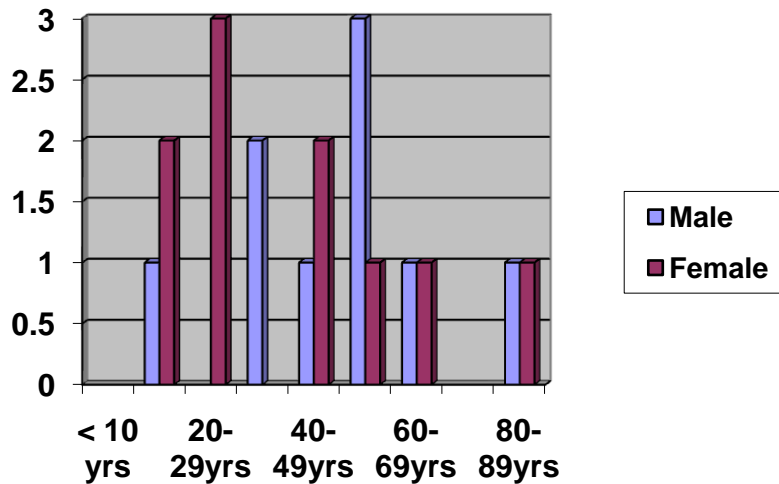


FIGURE 2: Prevalence of periodontal abscess presentations prior to the Dental Service (total: 19) at CVBNC over 12 months (10.2005-9.2006).

Following commencement of the dental clinic over a 12 month period the number of cases of periodontal abscess presented to the Nurses at the CVBNC totalled 2. (Fig 3)

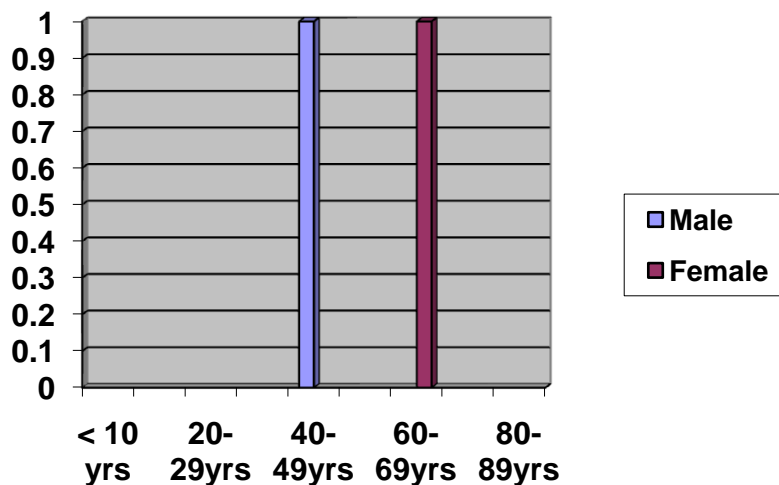


Figure 3: Prevalence of periodontal abscess presentations following commencement of Dental Service at CVBNC over 12 months (7/2009 - 6/2010)

Community self assessment prior to the Dental Service of dental health needs was surveyed with 226 questionnaires being distributed to the community. Confidentiality was maintained. Completed questionnaires were returned from 60 respondents, 26.55%.

Following commencement of the dental clinic another survey was conducted with 226 questionnaires distributed and 66 returned, 29.2%.

Results from both surveys are shown in Table 4 below.

TABLE 4: *Community self assessment*

Community Self Assessment	Before dental clinic		After dental clinic	
	Responses	Responses	Responses	Responses
	Yes	No	Yes	No
Have your teeth been causing pain recently?	27 (45%)	30 (50%)	12 (18%)	41 (62%)
Have you needed medication for them?	14 (23%)	40 (67%)	6 (9%)	48 (73%)
Do your teeth cause difficulty eating?	18 (30%)	38 (63%)	10 (15%)	42 (63%)
Do you suffer from bad breath despite cleaning teeth?	13 (22%)	43 (71%)	7 (10%)	46 (69%)
Do your teeth or lack of them cause embarrassment?	11 (18%)	45 (75%)	9 (13%)	44 (66%)

Prior to the dental service difficulties experienced in accessing dental services were stated to be time off work by twenty (33%) respondents, transport by twenty (33%) and thirty-five (58%) stated cost to be a hindrance. It is unclear as to whether the cost referred to dental charges or the cost of fuel for travel or for both.

Following the commencement of the dental service 300 visits were made over 37 sessions.

DISCUSSION

Although these results are not of statistical significance they are a fair evaluation.

CONCLUSION

The dental service at Cann River did develop with a private dental service one day a month and a public (and student) dental service once a week on the other weeks of each month. It has become central for a wide area, assisting people from Cann River, Mallacoota, Orbost, Bemm River, Noorinbee and Buldah and has proved to be a very valuable service in the remote rural setting.



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