

Case Study Report



Enabling Resilience with Western District Health Service

An output of the Rural People; Resilient Futures Project



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Images

Courtesy of Western District Health Service. 2014

Disclaimer

The views expressed herein do not represent those of the Victorian Government. They are the views of the report authors.

This case study report is a co-developed research output of the Rural People, Resilient Futures project, funded through the Victorian Adaptation and Sustainability Partnership Grant Scheme, through the Victorian Department of Environment and Primary Industries. This report was co-written by Western District Health Service, the Southern Grampians and Glenelg Primary Care Partnership, as well as researchers from RMIT University. Chapter 4 of this report outlines information gathered through consultations undertaken throughout the project and the report captures the views of the project partners and the researchers involved.

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1. About us

Western District Health Service has a proud reputation as one of Victoria's leading and innovative Rural and Regional Health Service providers. We have a strong commitment to our vision of 'Excellence in Healthcare, Putting People First'. It is our aim to provide the most comprehensive range of high quality person centred and safe healthcare services within our capabilities to our community.

The Primary and Preventative Health Department played a key role in the Rural People; Resilience Futures Project with champions from District Nursing, Youth Services and Planned Activity Group.



Figure 1: Frances Hewett Community Centre & Allied Health Centre – Western District Health Service, Hamilton, Victoria.

2. The Rural People; Resilient Futures Project

Our organisation is a member agency of the Southern Grampians and Glenelg Primary Care Partnership (PCP in the following), who have been involved in a project funded by the Victorian government through the Victorian Adaptation and Sustainability Partnership Grant Scheme. The project entitled '*Rural People; Resilient Futures*' (RPRF in the following) has been conducted to investigate the nature of vulnerability in a rural Shire, understand how this will vary under the impacts of climate change, how the capacity of these groups can be increased and who can help.

The project is a collaborative endeavour between the Southern Grampians and Glenelg Shire (the Shire in the following), the PCP and researchers from RMIT University. Eight member agencies of the PCP, and various other stakeholders were involved in all phases of the project, and facilitated engagement with community members throughout the Shire.

2.2 The process

The RPRF project involved four phases, over a 12 month period. Key member agency engagement was facilitated through one-on-one consultations with the PCP and researchers, as well as workshops throughout all phases of the project. The project phases are outlined below:

Phase 1:

Baseline Understanding
What does vulnerability look like in SGSC.

Phase 2:

How does climate change complicate this vulnerability?

Phase 3:

What can we do locally?
Focus on integration into plans and policies

Phase 4:

Information sharing to inform community and stakeholders

3. Getting started

3.1 Why we wanted to participate

Our organisation was interested in learning more about how we can plan and educate our clients, volunteers and the wider community on extreme weather and climate change, and how to better support those who access our services.

At the time of expressing an interest in the project the Youth Development Officer had already taken steps to adapt holiday activity documentation / policy (cancellation of excursions during extreme heat). But was interested to find out what was happening across associated departments and organisations.

"Something which is common sense for one staff member may not be for another – therefore updated checklists and risk assessments are essential part of the workplace."

The Planned Activity Group (PAG) discovered they were already taking "common sense steps" to looking after staff and clients during extreme weather periods; it was simply a case of revising applicable documents.

We considered sources such as Department of Health, Country Fire Authority, local council and other local organisations to gain valuable knowledge on how to better promote education and ideas to promote building resilience for our clients and the wider community.

4. Engagement in the Process

4.1 Initial consultations – Phase 1

We initially engaged with the PCP for this project in April 2014 through a Phase 1 Consultation Interview. During this meeting, PCP representatives engaged with us on the following questions:

- Who do you work with?
- What makes life tough for community members?
- What are community members doing to make life easier?
- What happened during the last heatwave?
- How can we make life easier?

Our key response to these questions outlined:

- Our clients are from all abilities, ages and backgrounds;
- Some areas which make life tough for our clients include; unemployment, financial stresses, health difficulties, extreme weather conditions (hot/cold), access to transport;
- During the last heatwave outdoor programs / activities were postponed following WDHS Extreme Heat Policy. PAG clients continue to attend activities in air-conditioning during heatwave as they can be monitored;
- District Nursing encourages family / carers to 'step up' and monitor the health of the elderly during extreme heat / cold;
- Clearer communication of hospital policies / protocols for staff would make life easier (sometimes information can be lost in translation, pictograms have been a wonderful tool in all services); and
- Family supports and social networks increase our client's health and wellbeing.

During this phase, an informal community consultation workshop was undertaken at Hamilton Community House as well as a Stakeholder Workshop where we were invited to discuss means to manage the complexity of vulnerability in rural Victoria. These workshops were purposed to understand what vulnerability really means in the Shire from the perspective of the community.

Simultaneously, the researchers from RMIT University undertook a literature review to understand what the academic and grey literature outlined about vulnerability. This was presented to our team through a workshop in Phase 2.

We worked with the PCP to complete a climate and vulnerability workbook produced by the research team, to help understand what our organisation, service delivery and clients may be vulnerable to already.

From this process, we understood that currently we are most vulnerable to the following:

- Extreme weather conditions and code red days.
- Knowing associated procedures on code red days for other organisations that directly affect our services (changes to town bus)
- Clear understanding of what can be done to reduce heat wave symptoms for both clients and staff
- Ensuring that all information is easy for all clients to understand and accessible.

What does climate change mean for your community service organisation?

Activity Book

Rural People; Resilient Futures Project
Southern Grampians and Glenelg Primary Care Partnership
Southern Grampians Shire Council
RMIT University

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Purpose: to determine the impacts of climate change on your service delivery and clients' vulnerability, and what can be done to manage this.¹

The Adaptation Process²

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graph TD; 1[1 Getting started] --> 2[2 Current climate vulnerability]; 2 --> 3[3 Future climate vulnerability]; 3 --> 4[4 Adaptation options]; 4 --> 5[5 Monitor & review]; 5 --> 1;
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¹ Workbook adapted from:
NHS – Adaptation to Climate Change for Health and Social Care Organisation
UKCIP - Local Climate Impacts Profile: how to do an LCIP
UKCIP – Adaptation Wizard Notepad

² UKCIP Adaptation Wizard, <http://www.ukcip.org.uk/wizard/>

Figure 2. The Climate and Vulnerability workbook¹

4.2 The impact of climate change - Phase 2

During this phase, the RMIT Researchers and PCP ran a workshop to understand how climate impacts may affect our organisation, service delivery and clients. We were taken through a climate impacts table¹, which PCP representatives later met with us to complete.

The table demonstrated which impacts are likely to occur to 2070, highlighting specific events and how they might increase in intensity or frequency. The table then investigated the 'Receptor: thing being affected', the 'Consequences', the 'Threats: negative impacts' and 'Opportunities: positive impacts' that may occur as a result of each climate impact.

At the end of the workshop, we ran through two possible scenarios that could affect our organisation and the Shire; heatwave combined with bushfire, and an extreme rainfall and flood event, illustrating a critical disaster point. We then worked back through time, over six months, two years, and five years to brainstorm adaptation actions that would have helped us to avoid the disaster in the first place. These formed the basis of our adaptation action planning and highlighted things that we are already doing to increase resilience. During this workshop, we participated in the production of a film on the project.



Figure 3. Filming phase two workshop

¹ Adapted from: UKCIP – Local Climate Impacts Profile

4.3 Current adaptation actions

Through the project process, we understood that we were already undertaking actions to ease the effects of changing weather conditions.

Youth services make it clear on holiday enrolment forms that activities will be cancelled during extreme heat; they also encourage hats, water and sunscreen.

PAG already has a comprehensive Risk Assessment Form and Activity Checklist.

Services throughout Primary and Preventative Health Department use relevant posters to display educational messages and information that is easy to read and relevant to our organisation and clients.

"Briana Picken (Youth Development Officer) uses social media such as Facebook to connect with young people and circulate messages such as 'tips to keep cool during hot weather'.

4.4 New adaptation actions – Phase 3

In October, the project team ran a workshop to demonstrate some adaptation action case studies that were relevant to our organisation. We then participated in a facilitated brainstorming session to decide on what actions we would commit to including in our existing practices.

We committed to:

- We will continue to research up-to-date information about the health impacts of climate change and the ways to reduce any impacts on those we support and our staff into the future;
- Review program guidelines and to develop supportive material for elderly clients / young people during extreme weather events;
- Circulate information using posters, handouts and information sessions; and

- To continue to discuss adaptation steps between fellow staff, departments and agencies.

5. Outcomes of the process

5.1 What did we learn?

- You see from a networking perspective how other stakeholders are dealing with adaptation issues and how we can learn from them / or adapt our own.
- Sometimes there is a 'grey' area in policy and procedures, and it's up for individual interpretation. This project allowed us to revisit areas of confusion and make real steps to change.
- We learnt that we were already taking steps towards adaptation in the workplace, and that it was simply a case of documenting actions and clarifying policies.
- Information to the community and clients should be delivered in a unified method.

"I suppose I've always had things in the back of my mind saying that we should do things differently, but I haven't really had the support to do things differently. This project presented the opportunity to voice our opinions"

5.2 What was challenging?

- Time commitment can be difficult with already full workloads in each job role - however with flexible and supportive project options these barriers were overcome.
- When trying to embed adaptation steps into the workplace efforts can occasionally be slowed or halted by 'red tape' or changes in local government policy. It's important to consider a number of different approaches when looking at change.

5.3 What has changed during this process?

- Our climate change lenses are now on when planning for activities, it's simply another consideration that needs addressing in our plans and procedures.

5.4 What was most important for us?

- The Planned Activity Group experienced a drop in participants during extreme heat and cold periods, but also during the milder months when allergy symptoms increase. The problems are not always directly related to climate change but part of the factors that help us adapt and keep us well, particularly in relation to social connection. The RPRF team delivered a 'Soft Systems Methodology' workshop tailored to the needs of services within Allied Health. The workshop demonstrated how a variety of activities and tools can be used to solve a range of complex problems within the workplace.
- Understanding that we were already taking steps towards adaptation gave us confidence.
- The project presented an opportunity to address concerns within the department regarding risk management / planning and procedures.

"Community members need basic information and basic steps to action during extreme events – if information is too complicated people do not listen".

6. What next? Moving forward.

- We will support and liaise with local and state services and organisations to share relevant information. We will review relevant policies and procedures regularly to ensure they are up to date.
- Networking between departments and agencies has opened doors for discussion around climate change and the way we plan for the future.
- Communicating to the wider hospital and local community about adaptation planning and the role we are playing.



Figure 4. Discussing Soft Systems Methodology and how it can be used in the workplace.