

2019 Calendar



KERANG DISTRICT HEALTH - QUALITY ACCOUNT

Dear Community Member

On behalf of Kerang District Health I am very pleased to provide to you the Kerang District Health Quality Account for 2018 as a Calendar for 2019.

The Quality Account is aimed at providing information to the community about the range of quality systems we have in place at Kerang District Health.

The last twelve months has been an extremely busy time with an organisation wide accreditation survey carried out by the Australian Council of Healthcare Standards in June 2017.

In August 2017 the Australian Aged Care Quality Agency carried out a Quality Review of the Common Home Care Standards of our district nursing and community services.

In December 2017 the Australian Aged Care Quality Agency carried out a re-accreditation of "Glenarm", our residential aged care home. In March 2018 the Kerang Medical Clinic was re-accredited by the Australian General Practice and our Catering and Domestic Services were required to meet the requirements of a Food Safety Audit and a Cleaning Audit.

Our Partnering with Consumers Committee has continued to meet on a monthly basis throughout 2017/18 and a consumer committee has also been established for Glenarm.

Throughout 2017/18 Kerang District Health received fantastic results via the patient satisfaction surveys carried out and I would like to acknowledge the time taken by patients in providing this valuable feedback. In closing I would personally like to thank and acknowledge the contribution of the Board of Management, management, staff and visiting medical officers in the quality improvement process at Kerang District Health.

Robert Jarman

Chief Executive Officer



Our Vision

Kerang District Health seeks to improve the health and wellbeing of the community.

Caring

- We will be person-centred, show compassion and empathy

Accountability

- We will be transparent, trustworthy, and responsible for our actions

Respect

- We will embrace and be considerate of the differences, between all people.

Excellence

- We will be dedicated to every person, every time.



Kerang District Health acknowledges the traditional Aboriginal owners of the land on which we operate. We pay our respects to them, their living culture and Elders past, present and future.



Translating and Interpreter services are available for patients who require this service and can be accessed by staff or families through the Translating and Interpreter Service National (TIS National) by phoning 131450

January 2019

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"Coming together"



The cloak can be viewed in the main reception area at Kerang District Health.

Possum skin cloaks are used as a healing process for aboriginal people; they are wrapped in the cloak to ward away poor health but also an item for warmth, community spirit and storytelling. The possum skin cloak will be used as a comforter during times of ill health for our indigenous patients. The possum skin cloak was presented to Kerang District Health and the community at the Open Board Meeting 2018. The community can view the cloak at the main reception at Kerang District Health.



A traditional possum skin cloak has been made by a number of interested community members and staff at Kerang District Health, under the guidance and direction of local Barapa Barapa Elder, Aunty Esther Kirby OAM. Esther is Kerang District Health's Aboriginal Health Liaison Officer supporting the health journeys for many of our indigenous people accessing our service and services within the community.

The possum skin cloak took several months to make and the process involved people coming together, sharing and yarning while stitching the skins together. The paintings on the cloak were completed by Aunty Esther and her daughter Laura Kirby.

February 2019

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LGBTI – inclusive service



Kerang District Health has added rainbow stickers and flags to all areas of our service. This is to promote inclusive practice for our Lesbian, Gay, Bi-sexual Transgender and Intersex community; the flags support our LGBTI community to know that we are an inclusive service and welcome diversity.



I could not fault the care I received during my stay. Thank You Kerang Hospital

The Maintenance Department has been working establishing the gardens and grounds at Kerang District Health. A new ride on mower has been recently purchased with a number of safety features.

Kerang District Health Board of Management, Executives, Department of Health, Worksafe Victoria and Kerang District Health staff make every effort ensuring a safe work environment.



Occupational Violence and Aggression (OVA) is not tolerated at Kerang District Health.

If you feel worse, call a nurse!

Our staff are trained in identifying changes in your health, but you can help staff by letting them know if you are experiencing any of the following symptoms:

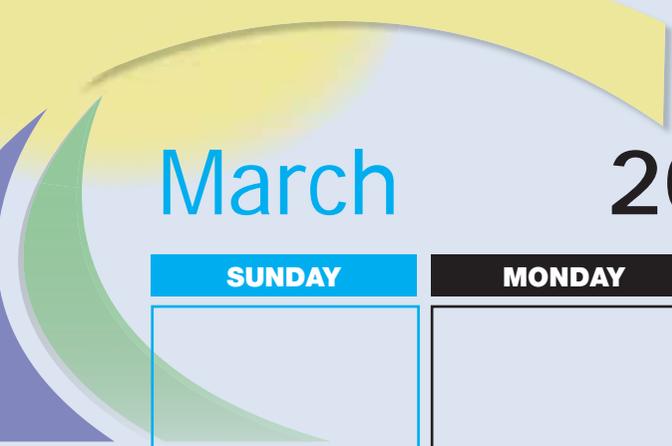
- *If you suddenly feel unwell*
- *Chest pain*
- *Bleeding*
- *Difficulty breathing*
- *Severe pain or discomfort*
- *Nausea*

All family members and friends of patients are encouraged to report any changes in their loved ones condition.



Staff assist button for urgent help.

Having stayed in numerous hospitals, this is by far the most efficient, friendly and delightful medical facility I have experienced. Congratulations, well done!



March

2019

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“Bringing Brett Home”

Brett is a 24-year-old man from the tiny town of Wakool in rural NSW. Brett was left quadriplegic following a motor vehicle accident in March 2017. Brett values the simple things in life – family, fresh air and being with his faithful dogs. Brett was in hospital in Melbourne, 400 kilometres from his home, in a city of strangers recovering from his accident. This was not where Brett wanted to be.

Brett asked his spinal team to find a way to get him home.

Brett has no recollection of the accident; his positivity following the devastating accident is to be commended. He knew he wanted to get back home but how this was going to happen was a task in itself.

Brett spent 8 months at a rehabilitation unit in Melbourne where he learnt to speak and eat again. Brett has amazing support from his family and returning closer to home was also important for them as a family unit.

Kerang District Health was approached to take on this challenge of bringing Brett home. As a small rural service the clinical staff had to be equipped to manage all Brett’s needs. Due to his damaged spinal cord, Brett cannot breathe on his own. He has a tracheostomy and needs a ventilator to help him breathe. Our small rural service has never nursed a patient with these needs. Education and support for all staff was needed to allow Brett to transition to KDH, hence being a step closer to home.

Education in all areas of Brett’s care was carefully planned with some staff visiting Melbourne for education and then returning home to support our staff in preparation for the arrival of Brett to Kerang District Health.

Brett arrived at Kerang District Health in October 2017 where he settled in while waiting for his house in Wakool to be renovated. Brett’s goal on arrival to KDH was to return home with his girlfriend Ebony in time for Christmas 2017.

“The staff here have been awesome, the facilities and food are amazing”.

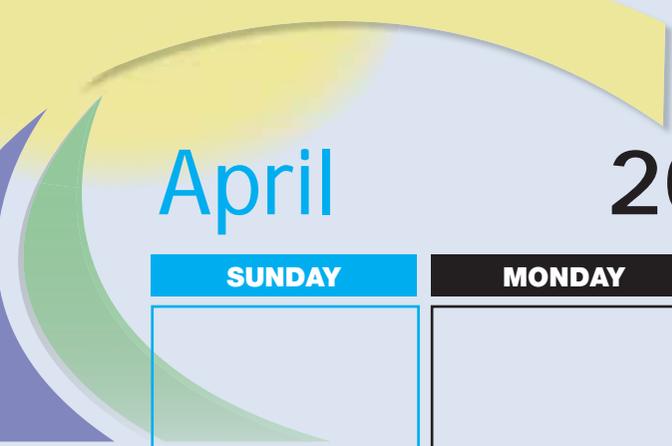
“It’s been a long trip for me and they have all helped me”

Brett’s journey with us ended in December 2017.

His house was completed and he was going home for Christmas as planned. Brett and Ebony are now engaged and living at Wakool.



Brett and Ebony pictured with the staff before leaving for home.
From left: Lesley Finch, Ebony, Chloe Keogh, Trishelle Martin, Jess O’Donohue,
Sally Evans and Jake Nixon.

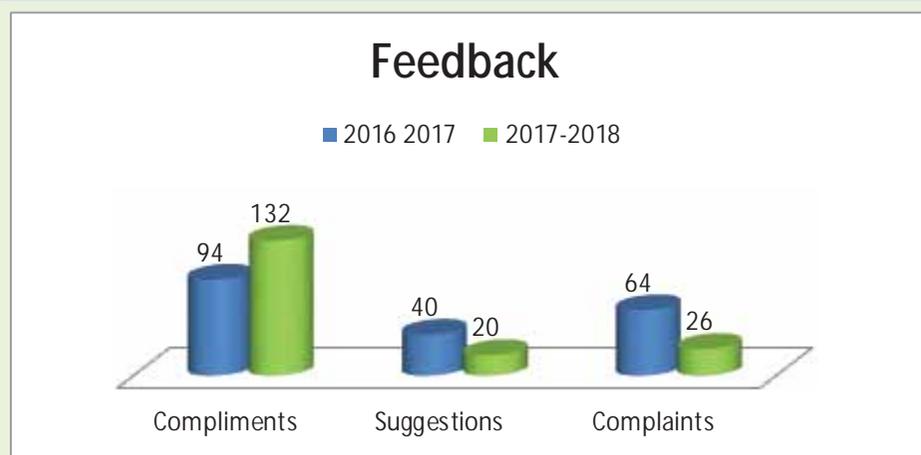


April

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Your feedback is welcome - Feedback provides information about what we do well, and what we could do better, assisting in the allocation of resources to make improvements in the most appropriate areas. Feedback can be shared in many ways at Kerang District Health. We encourage our patients to provide feedback directly, or if you would prefer you can write or email us. All feedback is reviewed and improvements are generated where possible.

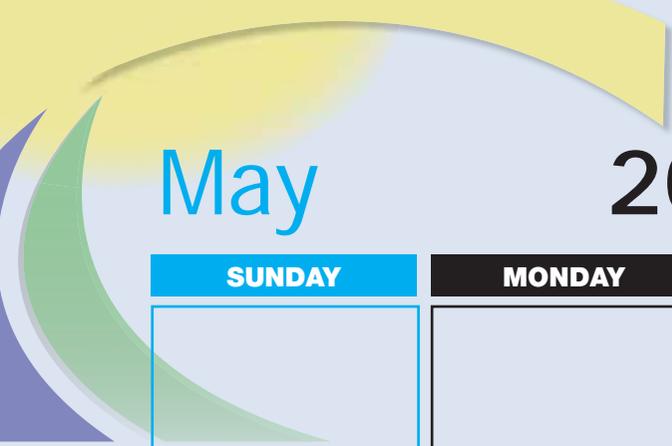


YOU SAID	WE DID
Glenarm residents would like to watch documentaries, old movies and live sport	Foxtel has been installed in the main lounge for resident's enjoyment.
Patients and family noted when in Palliative Care you were able to see into Glenarm and vice versa, this was a privacy issue for both areas.	Decals have been installed on the affected windows, the garden view can still be seen from the inside of the room, and privacy is now maintained for both areas.
Several complaints enquired about the car parking and access to Allied Health	Board of Management have approved new works for the car park, new works will include: extra wide parking spaces, parking closer to Allied Health, a drop off pick up area and more parking spaces. The redevelopment of the car park will begin shortly.
No garbage bin in the foyer area	Garbage bin added to foyer area.
Glenarm residents were receiving their morning and afternoon tea on a serviette	New crockery has been purchased for Glenarm, all meals including morning and afternoon tea is served on crockery, and encourages a more homelike atmosphere.



Decals added to the Palliative Care Room and Glenarm windows. (Design taken from Possum Skin Cloak)

Everyone communicated with me all the way through my procedure. I felt I was the most important person in the room, thanks to all.



May

2019

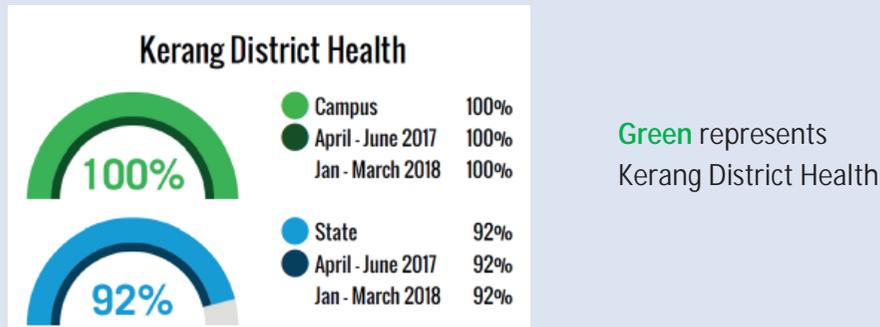
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Have you received a survey from VHES?

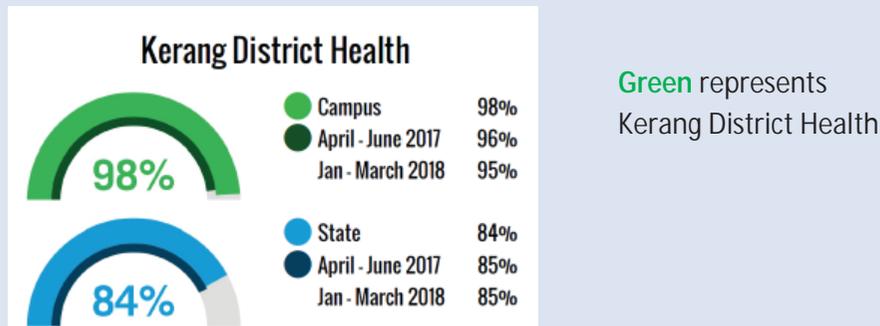
The Victorian Healthcare Experience Survey (VHES) allows a wide range of people to provide feedback on their experiences.

Following discharge a survey is sent to all patients to rate their experience of Kerang District Health's service. Quarterly results are received and areas for improvement are identified. If we do not have enough responses to this survey a score is not generated. April to June 2018 quarter Kerang District Health did receive sufficient responses to generate a report.

OVERALL, THE CARE RECEIVED WAS GOOD OR VERY GOOD



OVERALL, THE DISCHARGE PROCESS WAS GOOD OR VERY GOOD



*To Glenarm Staff,
Thank you for your care and support of our loved one. You all made his stay in Glenarm a happy one.
Your care in his final days was outstanding to make him as comfortable as possible and the compassion and care shown to myself was much appreciated.
We will miss our visits to Glenarm and catching up with all the residents and staff.
You all made us feel so welcome.*



We want to hear your story.

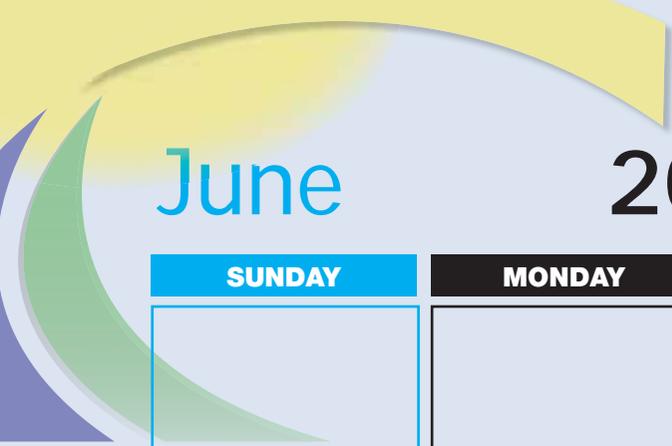
Kerang District Health has been successful in gaining a subscription to Patient Opinion Australia supported by Safer care Victoria for the next 12 months. Patient Opinion enables our patients, residents, clients and their representatives to have a voice and be heard, when providing feedback about our service. All stories are reviewed by Patient Opinion, de-identified, uploaded and then responded to by our service.

Experiences can be shared online or by filling in a Patient Opinion comment form and directly sending it to Patient Opinion.

At the end of each month we are able to collate the stories we have received, share these with our staff, drive and share changes to improve our service.

Brochures and cards are displayed throughout Kerang District Health; please share your story or experience to help us improve our service.

www.patientopinion.org.au



June

2019

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Murray to Moyne – “pedalling for funds”

We were greeted with a magnificent morning on the Murray River at Echuca for the start of the 32nd Murray to Moyne ride on the 7th April. A great breakfast provided by the "Rapid Relief Team" was gobbled down, (we needed "fuel,") while bikes were being unloaded and checked. Motorcycle marshals, cyclists and bus drivers assembled for a briefing on the 520 km cycling ride from Echuca to the Moyne River at Port Fairy. The sun was shining, the wind, what there was of it, was predicted to be very favourable. What more could we ask for?

On our way rolling over the kilometres through Mitiamo, Pyramid Hill, Boort, Charlton, St Arnaud, then to Stawell for our evening meal. Headlights on, we then took on the rolling hills on the east side of the Grampians to Pomonal, Moyston, and then turned westward toward Dunkeld. You would imagine after a day's riding, we would roll into Hamilton at a very sedate pace, but no, a 50 kph sprint ensured we would miss the rather obscure sign, so a few extra kilometres were added to the days total. Arriving at our quarters for the night and signing in at just after 11 pm, saw everyone shower and bunk down fairly quickly.

The next morning we left Hamilton at about 7.20 am and had a fantastic tail wind all the way to Port Fairy, an awesome ride. "The best", according to Scott Wishart who completed his 14th Murray to Moyne ride.



As a team we are very grateful for the wonderful support we receive from our local community and beyond. We again want to express our sincere thanks for joining with us in helping to raise approximately \$11,000 this year.

Over the last two years your dollars have been spent on exercise equipment etc. in the WD Thomas Activity Centre. Classes and participants have increased quite considerably, and the centre is proving to be very popular and well used for ongoing health.

This year your money will be contributing toward a new gastroscope for theatre.



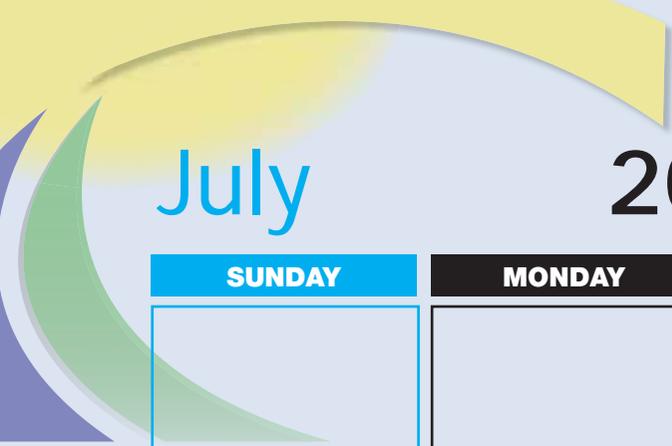
Margy Christian and Lynne Gibbons with the new Gastroscope purchased from the generous donation through Murray to Moyne.

Advance Care Directive

An Advance Care Directive is a process of thinking about, talking about and writing down your health care wishes. Advance Care Directives are the best way to ensure that your wishes are known, understood and respected. Kerang District Health is able to assist and guide you to start the conversation and prepare your Advance Care Directive.

In 2017–2018, 83 conversations were held with consumers and 22 Advance Care Directives were completed and received at Kerang District Health. It's never too early to start the conversation, speak to your GP or contact Kerang District Health 03 54 509200 for more information.

START THE CONVERSATION



July

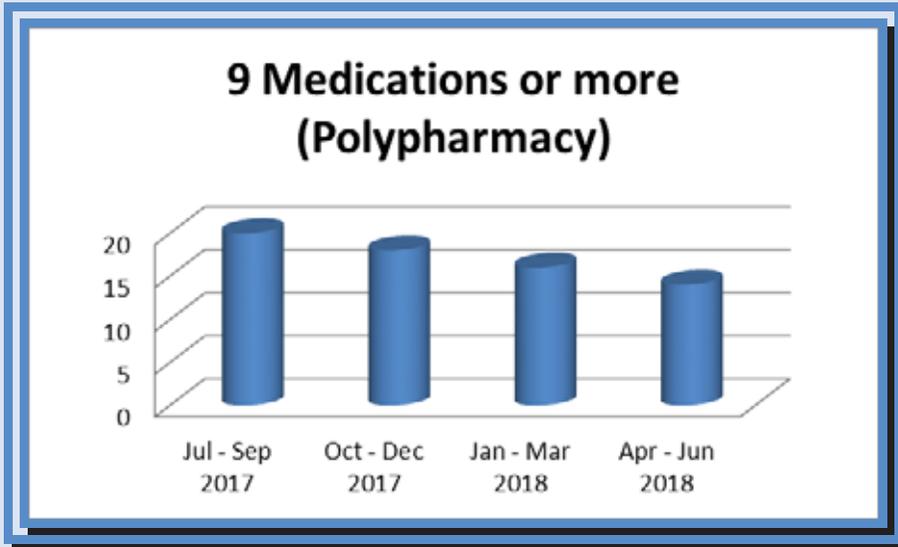
2019

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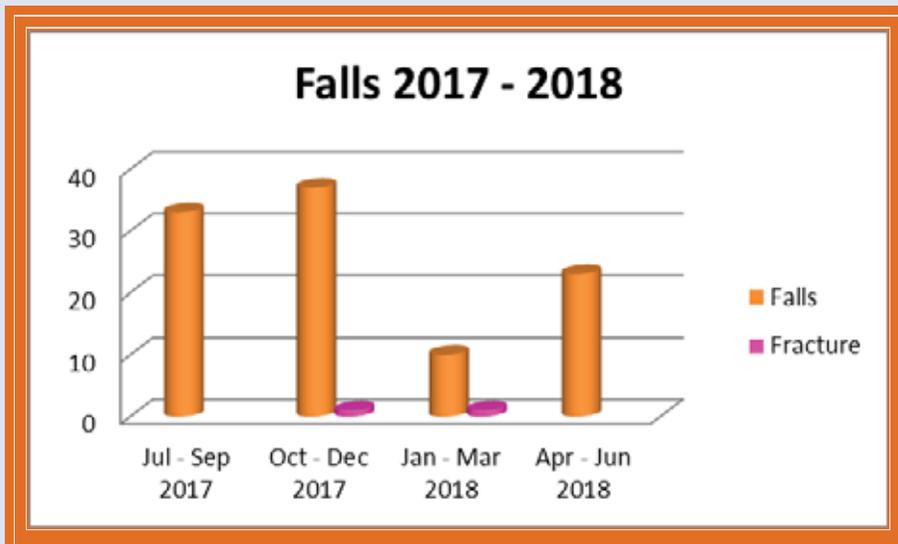
Glenarm Residential Aged Care



Polypharmacy is defined as 9 medications or more. Glenarm has continued to review resident's medication with a Geriatrician to work towards lowering the amount of unnecessary medications taken by the resident. Resident's medications are reviewed and recommendations are shared with the treating Doctor. Since 2016 there has been an overall reduction of polypharmacy from 73% of residents on 9 medications or more to 46%. As you can see from the graph a reduction has been achieved over this reporting period and ongoing reviews continue.



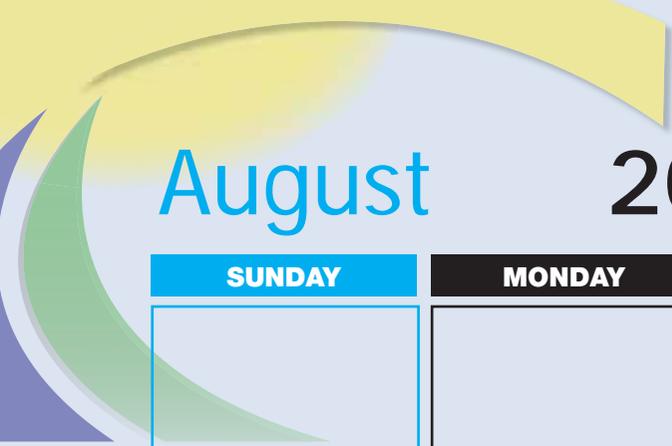
A decrease in residents receiving polypharmacy has been achieved for this reporting period.



Note: Three (3) residents with two (2) or more falls for the April – June Quarter.



As you grow older, changes in your body such as vision problems, weakening muscles and stiffening joints can increase your chances of falling. Falls can also be a sign of a new health problem. Glenarm has introduced strategies to reduce the risk of falling for our residents: commencing hourly rounding, this is where we check our resident more frequently and ask questions related to pain, position and toileting, all areas where our resident is more likely to try to be independent and not ask for assistance when walking, hence leading to a higher risk of falling. Residents needing assistance to mobilise have an identifying label on their walking aide to alert all staff of the assistance required. This has enabled our kitchen and cleaning staff to assist the nursing staff to keep our residents safe.



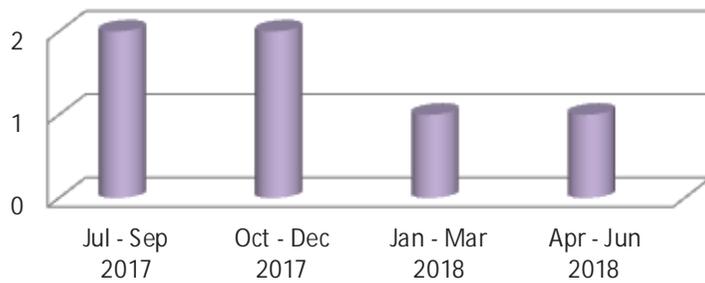
August

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Glenarm Residential Aged Care - continued

Restraint



A **restraint** is a device or medication that is used to restrict a **Glenarm** resident's voluntary movement. Review of restraint is in consultation with the resident and their family. While we avoid the use of restraint, residents can choose to use devices such as bed sides for their own sense of security; however this must be recorded as a restraint.



Pressure injuries are areas of damage to the skin and the tissues underneath the skin. They are caused by constant pressure or friction and often occur over bony areas such as the tailbone, elbows, heels or hips. They are also known as bed sores, ulcers or pressure sores.

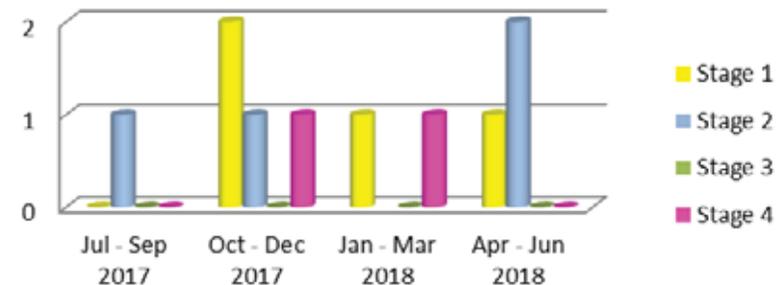
Pressure injuries are classified in stages (stage 1 minor injury to stage 4 extreme injury) and are prevented by changing position to relieve pressure. Pressure relieving devices are also utilised to help to relieve pressure. Residents are encouraged and assisted to change position to relieve pressure.

Weight loss



Glenarm resident's **weight loss** is monitored closely and referrals are generated to specialist services such as a dietitian or speech pathologist to assist in managing weight loss.

Pressure Injury



Glenarm's results for 2017 – 2018 show a higher than average stage 2 injury for the reporting period, resulting in new pressure relieving devices being purchased to assist in the prevention of pressure injury.

September 2019

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Everyone has the right to feel safe at home.

Strengthening Hospital Responses to Family Violence

What is Family violence?

It is patterned, repeated behaviour intended to assert power and control. Research shows that family violence is a deeply gendered issue that affects people across their life span - mostly women and their children. Statistics show 1:4 women have been affected by family violence. Family violence is a serious health issue that has a major impact on the psychological and physical well-being of those affected. The health sector is a critical entry point for identifying people affected by family violence, providing medical care and a pathway to specialist support and assistance. For many people, a visit to a health professional is the first and sometimes the only step enabling them to access support and care. Kerang District Health has joined in the state wide plan to educate our staff to enable them to identify and support our patients when affected by Family Violence. Kerang District health has included questions about family violence at the admission process for both inpatients and urgent care presentations, this is to encourage people experiencing family violence to seek support or gain knowledge of what services are available for them to access.

We understand family violence.

Our staff can help or you can call 1800 RESPECT.

Accreditation Status

NSQHS Standards – Acute Services	Compliant - 2020
AACQA Standards - Glenarm	Compliant – 2021
AACQA Standards – District Services	Compliant - 2020
Food Safety Standards	Compliant - 2019

Students at Kerang District Health



Kamela, Suzanne, Vish & Myriam would like to say thank you to all for your support and guidance during their clinical placement at Kerang District Health

Kerang District Health is a teaching hospital for nurses. We support local and international students to gain skills and knowledge through student placement in all areas of our service. We work closely with Swan Hill, Bendigo and Melbourne to place students for their clinical training. You may have a student looking after you during your stay and this enables the student to gain valuable insight into our community and to learn from you as a patient.

October 2019

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Infection Control

Flu vaccination program

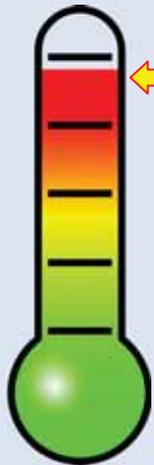
From 1 May 2018, Australian Government-subsidised providers of residential aged care are required to have in place a flu vaccination program that:

- Provides **staff and volunteers** of the service with access to a free flu vaccination on an annual basis.

Vaccinations can be offered either:

- directly, for example, with vaccinations provided on site; or
- Indirectly, for example, making arrangements for staff to be able to access a vaccine at a local chemist or general practitioner.

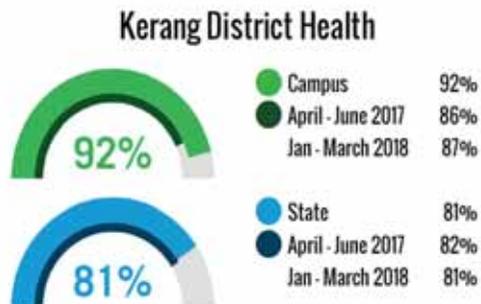
Services must actively promote the benefits of an annual vaccination for their staff and volunteers, and for the health outcomes of care recipients.



84% of Kerang District Health Staff have been vaccinated for flu.
State target for Staff flu vaccination is 75% of all staff

All volunteers at Kerang District Health were offered the flu vaccination in 2018 to comply with the recent Government program changes.

STAFF ALWAYS CLEANED HANDS BEFORE EXAMINING PATIENTS



Green represents Kerang District Health

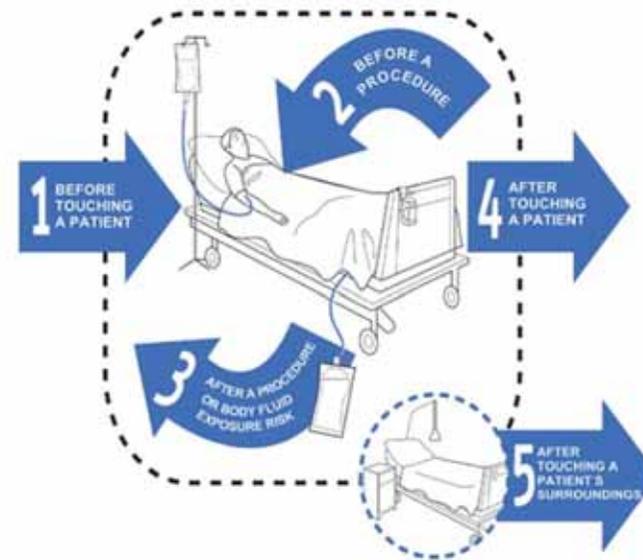
Staphylococcus Aureus Bacteraemia is a serious blood stream infection. Kerang District Health has had no reported cases of Staphylococcus aureus bacteraemia for this reporting period. Hand Hygiene is the most effective way to prevent hospital acquired infections.

It's OK to ask our staff if they have washed their hands or used the alcohol rub before attending to your care. We continually monitor compliance with hand hygiene to ensure we provide a safe environment for our patients.

National Hand Hygiene compliance is 84%.

In July to October 2017 audit Kerang District Health received a score of 86.8%, which is extremely low for our service. Areas where improvement could be generated were identified and actions were taken.

Compliance for the following two(2) audits 2017 – 2018 achieved results of 94.3% and 92%.



The 5 Moments of Hand Hygiene strengthen our systems to prevent hospital acquired infections.

Our staff are educated to wash their hands before during and after the 5 moments.

All visitors are encouraged to wash or use the hand hygiene rub to assist Kerang District Health and their loved one in the prevention of infection. Hand Hygiene stations are located at the entrances and throughout the health service.

November 2019

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Our Staff Matter- 2017 survey

Every year our staff complete a people matter survey.

The survey gives our staff the opportunity to express their views on how our shared public sector values and employment principles are demonstrated within their organisation by colleagues, managers and senior leaders. The survey also measures the level of staff engagement and job satisfaction. Our 2017 Engagement index was 74% which is 1% more than the average score for our comparator group.

76% of our staff were satisfied with their job, this includes getting feedback on a regular basis, having autonomy and the chance to be creative.

Our staff told us they were engaged, they felt attached and proud to be part of Kerang District Health.

Survey	Action
<p>Focus Area 1: Values and Standards of Behaviour</p> <p>Staff said that bullying is not tolerated in our organisation, in fact 69% of staff were in positive agreement with this statement, this is close to the average positive response of our comparator group which was 70%.</p> <p>Staff also told us that our procedures and processes for resolving grievances are clear, we had 82% of staff in positive agreement with this statement which is 10% higher than the average positive response of our comparator group. However, staff felt that bullying was still an issue.</p>	<p>We will remind all staff what workplace bullying is and that it is not tolerated at KDH.</p> <p>We will extend our Above and Below the line behaviours and train all staff in the six steps to calling behaviours.</p> <p>We will acknowledge with staff work above the line.</p> <p>We will appoint more Contact Officers and promote their role in the organisation.</p> <p>We will manage workplace grievances in accordance with our policy and procedure.</p>

Focus Area 4: Patient Safety

Q. We provide a safe environment for our patients. In fact 77% of our staff were in positive agreement with this, this % was also the average for our comparator group.

Patient safety includes:

- Patient care errors are handled appropriately
- The organisation does a good job of training staff
- I am encouraged to report patient safety concerns
- Our culture makes it easy to learn from concerns and errors
- My suggestions are acted upon
- I would recommend a friend or relative to be treated here

It was wonderful to read that 93% of our staff believe that we provide a high quality service to the Victorian community and 88% would recommend a friend or relative to be treated as a patient here, this is 6% more than the average of our comparator group.

We will review how we provide feedback to staff regarding errors and ensure that we are providing it in a way that is conducive to learning. This review will cover how we investigate errors and how what we learn translates to training for staff.



Distribution of the Quality Account

Please complete the enclosed survey for feedback on the publication of the Quality Account. Twenty three responses from last year's publication were received. Suggestions from the survey returns have been implemented into this year's Quality Account.

The Quality account is distributed widely throughout the district through letterbox drop and mail run services.

December 2019

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Partnering with Consumers

Standard 2 of the National Safety and Quality Health Service (NSQHS) Standards is focused on fostering partnerships with consumers in the governance of the organisation.

Consumers have a unique perspective that can help Kerang District Health identify opportunities for improvement that might not otherwise be apparent.

At Kerang District Health our Consumer Committee meets monthly and is involved in areas for improvement such as: brochure development, identifying areas of community concern, educating the community in a way they can understand.

Glenarm Consumer Committee has recently commenced and is currently reviewing the information folder given to assist in the decision making process before becoming a resident. Glenarm Committee has also been involved with suggesting ways to give Glenarm a more homelike atmosphere.

If you would like to become a Consumer representative please contact Kerang District Health on 03 54 509200.

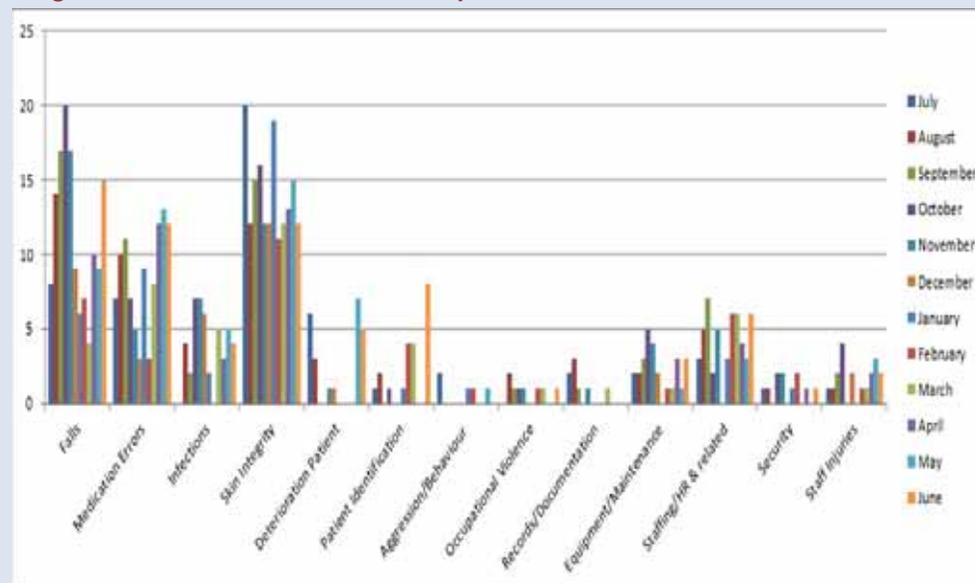


Consumer Committee: Lorraine Morris, Lyn Martens, Jean Cotter, Lyndsay Maplestone, Esther Kirby, Jenny Kelly and Jenny Makeham

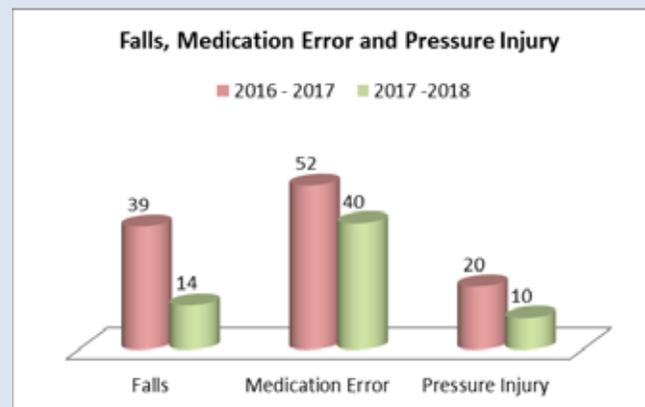
Adverse Events – If you see something, say something

An Adverse Event is an incident that has caused harm or near miss of harm whilst receiving care at our service. Our staff are encouraged to report harm and near misses of harm to prevent reoccurrence and generate improvement. All adverse events are recorded, reviewed and reported to the highest level of governance.

Organisational Adverse Events reported for 2017 - 2018



In 2017 – 2018 a total of 634 Adverse Events were reported.



Acute Services

A decrease in falls, medication errors and pressure injury has been achieved for this reporting period.



Glenarm Staff dressing up for Book Week with a pirate theme.

Val looking the part for Melbourne Cup 2017.



Betty and Leon getting on with the afternoon chores – peeling and dicing vegetables for soup.



June getting into the Easter spirit.

Maree having quality time with the baby lamb.



Footy Fun Day - Jean and Thelma enjoying meat pies, finger food and football games.

