

Northern exposure



Health
Northern NSW
Local Health District

Newsletter, Issue 3
April 2013

YourSay

The 2013 Your Say Survey went live on the 25th of March 2013. The purpose of the YourSay Survey is to give all staff an opportunity to actively input into the development of a positive workplace culture by completing a number of brief Survey questions.

This is the second of three planned Surveys. The first Survey took place in May 2011. The third and final Survey is planned for mid 2014. The results of the initial 2011 Survey revealed two common themes that represent opportunity for improvement. The themes were: how we communicate with each other, and how we treat each other.



Survey Champions L-R: Kimberley Montgomery, Administrative Assistant and Josie Wills, Administration Trainee promoting the YourSay Survey within Mental Health Services.

Utilising these results, Malcolm Brown, Manager Culture, Equity and Development is supporting facilities and services across the Northern NSW Local Health District (NNSW LHD) in refining and implementing their workplace culture action plans designed to make positive improvements to our workplace culture.

Many of the action plans are built around positive behaviour change related to the way we interact, as individuals, and as an organisation.

The quality of our interactions greatly influences the quality of our professional relationships. The quality of these professional relationships determine the quality of the organisation.



Survey Champion Laura Fitzpatrick (centre) is pictured with Chris Crawford, Chief Executive and Katie Willey, Manager Workforce Change and Sustainability Service to remind Staff of the YourSay Survey.

The current 2013 YourSay Survey represents a further opportunity to consider our individual interactions and their contribution to our workplace culture and ultimately the quality of our services.

The current 2013 YourSay Survey is available through the following link for five weeks until 26 April 2013.

<http://internal.health.nsw.gov.au/YourSay2013/index.html>

For those Staff not able to access the Survey electronically, paper Surveys can be obtained from your Survey Champions from 25 March 2013 onwards. Please see the current list below of Survey Champions:

- **Chief Executive Unit** - Cassandra Neasbey;
- **Grafton** - Donna Flavelle, Eve Turner and Nareen Clarke;
- **Lismore Base Hospital** – Diane Loza, Narelle Al-Manro, Jacinta Felsch, Tammy Reeves, Di Goldie, Kym Hickey, Paula Scarp, Nikkia Goldsmith, Melissa Lovegrove, Kannika Whitfield, Coral Anderson, Chris Kemp and Jenny Siddle
- **Lismore Mental Health** - Ashley Wallwork, Bec Organ, Dominique Lazzaroni, Helena Bernard, Jocie Wills, Kate Oatley-Charles, Kimberley Montgomery, and Natalia Lees;
- **Multi-Purpose Service (MPS) Network, Kyogle Nimbin, Urbenville** - Nancy Martin;
- **Tweed Heads** - Cynthia Green, Lynn Cobb, Pam Bristow; and
- **Workforce Change and Sustainability Service** - Laura Fitzpatrick.

Staff are strongly encouraged to complete the YourSay Survey. Survey responses are confidential.

A word from the Editor, Susan Walker



Thank you to Delma Makejev, Infection Control Nurse at LBH for giving us all the Fluvax... didn't hurt a bit.

This week the NSW Ministry of Health put out a release on vaccination, titled 'Save the Date to Vaccinate'.

The Far North Coast is known for low vaccination rates in children and we want to encourage everyone to be vaccinated.

As you will see on the following page, the NNSW LHD Board and some of the Executive, including the Chief Executive were vaccinated against the Flu.

NSW Health is making it easier for parents to ensure their children are fully immunised on time with an innovative App that will help ensure they are protected against vaccine-preventable diseases such as whooping cough.

While around 90% of children at 1 and 2 years of age in NSW are fully immunised, 95% coverage is needed for effective disease control.

There is also evidence that some parents are having their children vaccinated later than the recommended ages, often due to time pressure and busy lives. This delay means children are unprotected from serious diseases.



NSW Health Director of Health Protection, Dr Jeremy McAnulty said this new "Save the Date to Vaccinate" campaign reminds parents about the importance of vaccinating children on time, and provides a range of handy tools and resources to make this easier.

Above: Kerry Morrow, Clinical Nurse Specialist Infection Control at Mullumbimby Hospital is promoting the Fluvax Clinic at the Hospital. Staff receive a lollipop and a ticket in the "Lucky Arm Prize"—a basket of goodies for the winner, courtesy of Kerry.

Paul Farmer - Quiet Achiever

Paul Farmer joined the Mullumbimby & District War Memorial Hospital Team as the Maintenance Supervisor for both the Mullumbimby and Byron Hospitals in September 2000, after moving from Sydney.

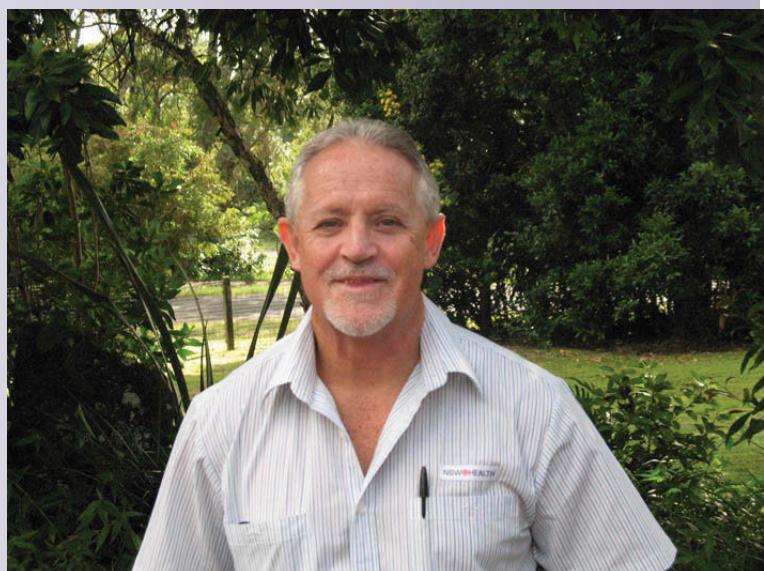
Paul has been responsible for all maintenance, repairs and liaison with tradespeople for both sites.

With the age of the Mullumbimby site, it is fair to say it is not without its challenges. Regardless of this, Paul continues to turn up un-phased, always with a smile on his face and a spring in his step.

Paul has been exemplary regarding the standards required to manage a workplace with asbestos containment, a key challenge that requires ongoing diligence and safety monitoring.

Paul is committed to workplace safety and lends his expertise to promoting the safety of the workplace through his tireless efforts as a Fire Safety Officer and his input into the Work Health & Safety Committee. He was even tricked into having this photo taken because he thought it was for the Work Health & Safety notice board.

Paul is the most senior and experienced member of the famed 'Vinylians', a local chapter of devotees to all music stored on vinyl. He is the first to offer his expertise and



knowledge on all matters associated with 70s rock music. He is reported to be able to dance like a bandit and is therefore a great sport to work with.

He is also the first to give up his free time for any fundraising to support for the local Hospitals and Staff. Paul is highly regarded by the staff and a valued work colleague.

Paul Farmer was nominated by Jenny Shaw, Executive Officer, Director of Nursing & Midwifery, Mullumbimby Hospital.

Flu Vaccination - This season's must have!



Delma Makejev, Lismore Base Hospital Infection Control Nurse was kept busy on Wednesday 3rd April giving Flu vaccinations to some of the NNSW LHD Board members and Executive, from left Hazel Bridgett, Malcolm Marshall with Chris Crawford waiting his turn, Deborah Monaghan and Lesley Barclay.

The 2013 Flu season is upon us and the NNSW LHD is encouraging all Staff to adhere to the sound advice from Immunise Australia and to get vaccinated. The 2013 seasonal inactivated trivalent influenza (flu) vaccine is now available free of charge for all staff.

As health professionals we owe it to ourselves, our colleagues and our patients to make every effort to reduce the potential for the spread of influenza. We need to set an example to all staff both within our own NNSW LHD and other districts by making a difference just by having a simple injection.

NNSW LHD has established a program to provide factual information to Staff regarding Influenza vaccinations and to increase the availability and access to vaccination.

What is the Flu?

The flu is more than a bad cold; it is a serious disease that can lead to hospitalisation and sometimes even death.

Why get vaccinated?

Every flu season is different and the influenza infection can affect people differently. Even healthy people can get very sick from the flu and spread it to others. During this time, flu viruses are circulating in the population. An annual seasonal flu vaccine is the best way to reduce the chances that you will get seasonal flu and lessen the chance that you will spread it to others. When more people get vaccinated against the flu, less flu can spread through that community. Remember if you do contract the flu stay at home until well.

Contact your Manager or Immuniser - Staff Health for further information on accessing your Influenza Vaccination. For those staff who hate to have needles or have a fear of injections, ask your Immuniser for a cream to be applied before you have the injection. For more information please use the link below
http://www.health.nsw.gov.au/immunisation/Pages/seasonal_flu_vaccination.aspx



Left: Jenny Cleaver, Executive Assistant to the Chief Executive and right, Rosie Kew, Board member.

Myth Busters

There is a range of false information that surrounds flu vaccination. As Health Care workers, it's important to know the facts. Here are some common examples:

1. The vaccine gave me the flu!
It is a killed vaccine, it cannot give you influenza, it is impossible.
2. I never get the flu, so I don't need the vaccine.
So far you've been lucky; it's only a matter of time!
3. Only old people get the flu.
Influenza can infect anyone and the groups who are more likely to die of influenza are the very young, the pregnant and the elderly. How would you feel if you had the flu and spread it to someone who didn't recover from it like you did?
4. I can prevent influenza or treat it by taking Echinacea or vitamin C.
None of these concoctions have any efficacy whatsoever against influenza. Nor do they boost your immune system.
5. Flu isn't that bad
The influenza virus directly and indirectly kills 20,000 and leads to hospitalisation of 200,000 in the US each year.
6. I am not at risk of flu
If you are breathing, you are at risk of flu.
7. The vaccine is worse than the disease.
Unless you think that a sore deltoid is too high a price to pay to prevent two weeks of high fevers, severe muscle aches and an intractable cough.
8. I had the vaccine last year so I don't need it this year.
Each year new strains of influenza circulate across the world. You need a new shot every year.
9. I had the vaccine and still got the flu.
You may have had one of the many respiratory viruses around; the vaccine only covers the influenza, the virus that has the potential to kill you.



Aboriginal Health Awareness Bus Trip



Ngayundi Aboriginal Health Council

Ngayundi Aboriginal Health Council hosted a Cultural Awareness Bus Trip for Senior Health Leaders including the Chris Crawford, Chief Executive; Vahid Saberi, Chief Executive Officer, North Coast Medicare Local; Sharon Miskell, Director of Medical Services for LBH; NNSW LHD Board Chair Brian Pezzutti, Board members Joe Ogg, Leone Crayden, Sue Page and David Frazer.

Aunty Muriel Burns a Yaegl Elder and Ngayundi Chair and Aunty Grace Cowan Elder from Coraki accompanied the trip which included visits to Box Ridge Health Post, Casino Aboriginal Medical Service (CAMS), Jabulum Land Council and the Bundjalung exhibition at the Lismore Visitors Centre.

During the Bus Trip Jenny Smith, Manager Aboriginal Health conducted a Quiz, which related to Aboriginal Culture and History that led to some lengthy discussion and friendly competition.

Many of the questions used will be included in the NNSW LHD local online Cultural Awareness Training package which is currently being developed in consultation with the Ngayundi Aboriginal Health Council.

Participants were provided with an overview of services and issues from the various sites. They felt that the day was a success and are supportive of similar bus trips being undertaken across

Above visiting the Aboriginal Medical Service at Casino from left: Dr Joe Ogg, Board Member; Jenny Smith, NNSW LHD Aboriginal Health Co-ordinator; Board members Leone Crayden and Deborah Monaghan; Dr David Hutton, Executive Director, Clinical Governance; Chris Crawford, Chief Executive; David Frazer, Board Member; Muriel Burns from Ngayundi Aboriginal Health Council; Dr Brian Pezzutti, Chair NNSW LHD Board and Dr Sharon Miskell, LBH Director of Medical Services and below at Box Ridge Community Centre



the Local Health District visiting other Aboriginal Communities, Health Posts, Aboriginal Medical Services and Land Councils in the future.

Thank you to Sharon Cook (Box Ridge) Steve Blunden (CAMS) Cheryl Ducat and Maryanne Pholi (Jabulum) for their contribution towards organising such a successful day.



Above: Muriel Burns and right Deborah Monaghan speak with Aboriginal Elder Aunty Grace. Left: Joe Ogg, Steve Blunden, Vahid Saberi and Sharon Miskell at Casino Aboriginal Medical Service.



Chief Executive Report

Say Survey, which was conducted in May of 2011. It gave the LHD baseline data about how Staff were feeling and what their concerns were. This information was utilised as an important input, when the workplace culture improvement strategies were developed.

Now two years later, another Your Say Survey is being conducted. The feedback received from this Survey will allow the different Facilities and Services within the LHD to most likely fine-tune or if necessary, radically revise their strategies to improve our workplace culture. It will provide more up-to-date data about how Staff are feeling and their concerns. Therefore, it is important that you complete the Your Say Survey, so that this up-to-date feedback is received from as many Staff as possible.



Delma Makejev gives Chris Crawford his Flu injection while Narelle Al-Manro, Acting LBH Director of Nursing waits her turn

The LHD is embarking on a big promotion campaign to encourage Staff to complete this Your Say Survey, so you should come across reminders to complete the Survey all over the place.

Just to give you advance notice a third Your Say Survey will be conducted around this time next year. By that time it is hoped that our workplace improvement strategies will be making a difference and there will be noticeable improvements in the workplace culture.

Work Health and Safety

The LHD Board has asked that Management gives special attention to Work Health and Safety (WHS) within the LHD.

As WHS has always been one of my highest priorities, I was glad to get this request from the Board. As well as working with

Yvette Bowen, WHS Manager, on further ways that we can improve WHS within the LHD, I have also asked her to develop and then collect new WHS indicators, so the LHD can better measure how it is performing.

So Yvette is currently compiling a new suite of WHS indicators that we can use to measure WHS performance. These indicators will not be used in a punitive way but rather will be an early alert system. They will tell us which parts of the LHD need more support and with regards to what type of WHS issue (eg manual handling) the support is required. This will allow the WHS team to respond more quickly when problems arise.

We can all do our bit to promote good WHS practices. Therefore, I ask all Staff and Managers to give their highest priority to following good WHS practices and procedures.

Winter Strategies

Summer is gone and Winter is not too far away. As a consequence, the LHD Executive is working with the Hospitals and other Health Services to ensure that we are ready for Winter.

On top of the "to do" list is to get more Staff vaccinated by having their flu shots early. Board and Executive Members are having their flu shots and some are pictured doing so in this edition of Northern Exposure to set an example.

In particular, we want more Clinical Staff to be vaccinated this year than in recent years. Last Winter there was considerable sick leave due to flu during Winter, especially amongst the Nursing Staff. For this reason we are running a special campaign to encourage more Clinical Staff to have their flu shots early.

Other key parts of the Winter preparation will be to ensure that our permanent Nursing Staff numbers are adequate and that the Hospitals in particular are not relying excessively on casual Nurses as we enter Winter. Also, we will be increasing capacity at some Hospitals. As well, we will be utilising some innovative strategies to improve the patient journey. These will be commented upon in more detail in the next edition of Northern Exposure.

Chris Crawford

Storms and Floods

As you are all very well aware we have had a very wet start to 2013. This has involved some quite violent storms and flooding in some parts of the Local Health District (LHD). Some of the details of these storms and floods have been reported on in earlier editions of Northern Exposure.

In opening this report I want to say a big thank you to all the Staff and Managers (and there are many of both), who have made a special effort to assist their Hospital or Health Service to respond to a storm or flood or the ongoing consequences of them. Well done! It is great the way that we can pull together when we experience natural disasters.

Workplace Culture

It is also pleasing to report that all parts of the LHD, except one, have developed strategies to improve their workplace culture. As you may recall this process was kicked off by the Board and Executive initially agreeing to the strategies that they would pursue. Then other parts of the LHD have formulated strategies that best meet their needs to improve the culture in their workplaces. The implementation of these strategies is underway.

While there are differences in the workplace culture improvement strategies developed, there are also similarities. Two common themes come through from many of the strategies that have been developed. These are the importance of how we communicate with each other and how we treat each other. So in one way or another, many of the strategies are about improved communications and relating to each other better. When faced by an external disaster we show compassion and do that bit extra for each other. We need to try and weave these types of responses into the way we conduct ourselves on a day to day basis.

Your Say Survey No. 2

The springboard into the workplace culture improvement strategies was the first Your

Aged Care In Emergency (ACE) Program Launched at LBH

Lismore Base Hospital (LBH) in collaboration with North Coast Medicare Local, launched the Aged Care in Emergency (ACE) Program on 18th March.

The ACE Program is currently being rolled out across selected public hospitals in NSW. ACE is a model of care specifically aimed to improve the management of residents from Residential Aged Care Facilities when they become acutely unwell by providing support and care in their own place of residence and efficient flow through the Emergency Department (ED) if a presentation is required.

Isla Attewell and Kathleen Shaw, Clinical Nurse Consultants (CNC) - ACE Program, are excited about the potential for the Program to prevent unnecessary presentations of aged care residents to the ED.

"During the planning and implementation of the Program, we have been working closely with Residential Aged Care Facilities, General Practitioners (GP), Medicare Local, Emergency and Aged Care Specialists with the shared goal of benefiting our residents / patients.



Chris Gavaghan, Medical Director, LBHED; Kathleen Shaw, ACE CNC; Christine Reeves, Residential Manager, BCS Maranoa Centre Lismore; Isla Attewell, ACE CNC; Vahid Saberi, CEO North Coast Medicare Local; Mary Lou McFadzean, NUM LBH ED and Kylie Connelly, Care Manager, Caroona Jarman Hostel.



The ACE Team from left: Kathleen Shaw and Isla Attewell with Hospital in the Home Nurses Alison Chessells and Karen Walsh.

Staff in the Residential Aged Care Facilities have been trained in the use of standard guidelines that relate to common problems experienced by residents. Staff will refer to the guideline, where appropriate and make contact with the ACE CNC by phone for support.

If the resident requires transfer to the ED, the CNC will do their best to make sure care is expedited through the ED, so the resident is able to return home or be admitted to the Hospital in a timely fashion.



Chris Gavaghan, Medical Director, LBH ED said, "Each year in excess of 200 residents present to the ED for assessment and management of common health problems.

ACE, in conjunction with the resident's GP, will support residents to receive the care they need in their home and avoid an unnecessary trip to Emergency."

Marilyn Jolley, Acting Regional Director of UnitedCare Ageing, North Coast Region acknowledged that UnitedCare were proud to be part of this exciting partnership.

Ms Jolley said, "This kind of networking and engagement with GPs, Medicare Local and NNSW LHD to provide acute care for residents in their own environment will greatly reduce the stress and anxiety often experienced when residents fall ill, enhance recovery times, and optimise wellness for people in our care.

It highlights importance of relationships between local service providers to deliver real benefits to aged people in residential care and is a reflection of UnitedCare Ageing's inspired care philosophy and person centred approach to providing care services," Ms Jolley said.

Christine Reeves, Residential Manager, Baptist Community Services (BCS) Centre, Maranoa can see the benefit of the Program to Maranoa residents.

"BCS Maranoa Centre in Lismore congratulates NNSW LHD and LBH ED for initiating the Aged Care Emergency (ACE) Program in this area. The program will be beneficial for our elderly residents in assisting them to remain in their Maranoa home environment while receiving appropriate acute care without hospital admission," Ms Reeves said.

Left: The ACE Launch provided a good opportunity for some networking with colleagues from left: Anne Moehead, Nurse Practitioner Psychogeriatrics/Dementia with Rita Field, Lisa Vagners and Rita Field.

Interview with Jillian Adams, Health Promotion



Jillian commenced with the North Coast Health Promotion Unit in 1989 as a Community Nutritionist. Since that time Jillian has held other positions including Public Health Nutritionist, Health Promotion Officer, Co-ordinator of Nutrition and Physical Activity. In 2001 Jillian and her team won the Baxter Health Awards in 2001 for the Tooty Fruity Program and the Minister's Award.

Jillian grew up in Melbourne and after leaving University she went to London where she worked as a Dietician in an up-market Health Resort before returning to Australia and moving to the North Coast.

Jillian has been acting as Manager of Health Promotion since Uta Dietrich left, so I asked ...

Do you enjoy acting in this position?

Yes I do, I love it. I didn't know that I would at first but I have found that I really enjoy the role.

I was interested to find out what's happening in Health Promotion?

Our major projects are Falls Prevention, Tobacco and Healthy Weight. These are our State-wide Programs. In healthy weight, we are still mainly focussed on children. We aim to run healthy eating and physical activity programs in at least 80% of all Child Care Centres and Primary Schools with the aim of overall health improvement, not just reducing obesity.

Is obesity in children improving?

Childhood obesity levels have been rising for 20 years but now they are starting to plateau, so we hope that we have seen the worst and now it is getting better.

We also have our own innovative projects such as CHEGS physical activity programs and RRISK. RRISK (stands for Reduce Risk Increase Student Knowledge) was recently evaluated by the George Institute and they found that young people that had attended the RRISK program had a 44% reduction in car crashes compared to young people that had attended other car safety programs.

That's fantastic, especially with all the alcohol issues arising as a result of some young adults over indulging.

Because of that they have offered us the opportunity to go for a big grant and to try and roll the program out in another locality. Reyna Dight, who coordinates the program does a fantastic job. We have such really good staff and they are all passionate about what they do.

What else is happening?

We are reviewing the Smoke Free Health Care Policy as there is new legislation coming out.

Quit for New Life is about to start next month, so we are gearing up for this. It is aimed at helping Aboriginal pregnant women quit smoking. 47% of Aboriginal pregnant women smoke cigarettes and so this is an important target group we need to help.

What is health promotion and why does it matter?

Around 32% of the burden of disease is caused by modifiable lifestyle factors: smoking, inadequate physical activity, unhealthy diet, unhealthy weight and risky drinking. Yet only around 2% of the total health care budget in Australia is spent on preventive health measures (but this is starting to change). One of the reasons for this imbalance is that treating illness is so much more costly than preventing it in the first place.

If a GP is the first point of contact when we are sick, who should be the first point of contact to remain healthy?

GPs can provide advice on how to stay healthy. In the Northern Rivers we have a small health promotion team who focus on state-wide population based interventions, plus a couple of our own innovations that are nationally recognized.

We work with many partners including schools and child care centres. A lot of our work is "behind the scenes" but very extensive.

For example, we coordinate the Munch and Move physical activity and healthy eating program in over 80% of all child care centers.

We are also rolling out the "Live Life Well at School" healthy eating and physical activity program to at least 80% of primary schools – that is about 30,000 children.

Rather than give advice, we work to try and make the healthy choice the easy choice. Most people know how to live a healthy life; it's just that living an unhealthy life is often easier.

A third example of our work is the Go4Fun program which is run for children who are above their healthy weight, and their parents.

The program is intensive and runs twice a week over 10 weeks. Children come along to the sessions with their parents and learn to create healthy eating and physical activity habits for life.

The evaluation of the program shows that kids (and their parents) not only lose weight and waist circumference but they also improve their eating and activity habits and self-esteem and these benefits continue, for at least 12 months.

What are five tips to stay healthy?

- Don't smoke
- Avoid risky drinking (more than 2 standard serves of alcohol a day with 2 alcohol free days per week)
- Get at least 30 minutes of physical activity a day – try walking for short trips instead of using the car
- Eat a healthy diet and drink water instead of sweet drinks
- Maintain a healthy weight.

If you would like any more information on these and other health promotion programs contact jillian.adams@ncahs.health.nsw.gov.au

LBH Pain Clinic Celebrates Tenth Anniversary

On the 2nd April 2013 an afternoon tea was held to celebrate the 10th Anniversary of the opening of the Multidisciplinary Pain Management Clinic at Lismore Base Hospital (LBH). Members of the LBH Executive, Clinic Staff and some Patients of the service attended this event.

The Clinic was officially opened on 17th March 2003 and supported by the world renowned Pain Management and Research Centre based at Royal North Shore Hospital in Sydney. The Clinic has a Medical Specialist, Clinical Psychologist, Physiotherapists, Nurse Practitioner and Administration Staff.

In the 10 years since the opening of the Clinic, there has been increased awareness of chronic pain across the world with growing recognition of the debilitating effects of this condition.



Pain Clinic Staff from left: Kathie Headford, Stuart Hayes, David Beveridge, Dean Phelps, Maree Bailey, Karen Drew, Sue Shaw and Dr Frank Wagner.



Patients of the Pain Clinic from left: Pauline Maczkowiack, Leonie Presbury, Paul le Bars and John Stretton.

Recently, five new regional Multidisciplinary Pain Management Clinics were opened in New South Wales and the design of these Clinics is a replication of the Lismore service.

The Multidisciplinary Pain Management Clinic provides a service targeted towards assisting those with persisting or chronic pain and takes a self-management approach. Treatment is focused on assisting patients to improve their level of function, decrease reliance on health services and re-engage in a higher quality of life.

Assessment and treatment of patients is from an interdisciplinary approach to managing pain. That is all the disciplines involved (Medical, Physiotherapy and Clinical Psychology) work together, treating Patients simultaneously, rather than working in parallel.

David Beveridge, Nurse Practitioner, advised that the treatment approach taken by the Clinic is strongly based in the current scientific literature, with a robust, evidence-based approach. This has resulted in high level patient outcomes. This point was reiterated by the Patients of the Pain Service who attended the function.

One of these patients, Mr Paul Le Bars, also spoke, explaining how debilitated he was with chronic pain for over 20 years prior to attending the three week IMPACT program in 2008. He said that, despite his pain continuing, he has been able to reclaim many aspects of his life through increased understanding, physical upgrading and attitudinal change. He went on to state that "...without the Clinic, I know that I would not be here today."

Patients are referred to the Pain Service by their General Practitioners and all undertake an extensive assessment. Following this, a treatment plan is generated with many of these Patients returning to undertake the intensive IMPACT program.

Look Good Feel Better

Look GoodFeel Better is a free national community service program that helps to improve the wellbeing and confidence of people undergoing treatment for any sort of cancer.

Kay Johnson pictured far right began a Look Good Feel Better Program in Lismore 15 years ago for Patients undergoing cancer treatment at LBH. Kay used to set up in the Ground Floor meeting room at Crawford House and women undergoing cancer would come and try wigs on and have make-up applied, all to make them feel better about themselves and to feel normal. Kay is presenting a Certificate of Recognition to LBH Cancer Nurse Unit Manager Nick Allen and Suzanne Whitney, CNC for their support over these 15 years. For more information about the program go to www.lgfb.org.au or call 1800 650 960



Social Media Usage - Responsibilities under the NSW Health Code of Conduct

As you are aware, NNSW LHD is committed to working towards a culture that encourages a safe workplace environment that values and respects the contribution of all Staff in delivering quality health care service to our communities.

As part of this commitment NNSW LHD is increasing the use of social media, including:



and Twitter, Inc.

I would like to take the opportunity to remind employees of their obligation under the revised NSW Health Code of Conduct PD2012_018 related to commentary made by an employee, or other as defined in the Code of Conduct, related to the organisation as a whole, other employees or patients/clients of the organisation.

The NSW Health Code of Conduct can be accessed through the following link: http://www.health.nsw.gov.au/policies/pd/2012/pdf/PD2012_018.pdf.

As indicated in Section 4 of the Code of Conduct:

"The Code requires Staff to adhere to the standards set out below. The standards in the Code also apply to social activities that take place outside work premises but under agency auspices and to the making of comments about other Staff or patients on social media where the status of that person making the comments as a NSW Health Staff member is identified or can be inferred."

As a further reminder, the standards within the Code of Conduct relate to:

- Promote a positive work environment;
- Demonstrate honesty and integrity;

- Acting professionally and ethically;
- Use of official resources lawfully, efficiently and only as authorised;
- Maintain the security and confidentiality and/or sensitivity of official information; and
- Maintain professional relationships with patients or clients.

Under the Code of Conduct, Staff must notify knowledge of possible inappropriate conduct which would include making of comments about other Staff or Patients on social media where the status of the person making the comments as a NSW Health Staff member is identified or can be inferred, and where such comments may represent a breach of one or more of the above standards.

These notifications should be made to a Senior Officer in your Facility or Service. An assessment of the notification regarding the appropriate steps in management of that notification will then be undertaken.

Staff wishing to raise concern as a Public Interest Disclosure (PID) should seek relevant information from the PID Intranet Webpage:

<http://int.nnswlhd.health.nsw.gov.au/chief-executive/public-interest-disclosures/>.

Proven breaches of the NSW Health Code of Conduct by NNSWLHD employees may result in disciplinary action including dismissal.

Your ongoing commitment and efforts in supporting a culture that encourages a safe workplace environment that values and respects the contribution of all Staff in delivering quality health care service to our communities is appreciated.

NSW Rural Palliative Care 23rd Annual Conference

Over 50 Palliative Care Nurses working in rural and remote locations from across the length and breadth of NSW met in Lismore on 13th and 14th March for the 23rd annual meeting.



Palliative Care Community team from left: Jo Cooper, Kate Nightingale, Jennifer Bewley and Helen Adams with Linda Hansen, Executive Officer for Palliative Care NSW.

The Palliative Care Nurses Group was established in 1990 and has steadily grown from an initial small membership to around 100 members. The Group's primary purpose is to advocate for improved palliative care services in rural and remote NSW, and to provide peer support to colleagues working in rural and remote palliative care.

Guest speakers include Linda Hansen, Palliative Care NSW Executive Officer, John Rosenberg, Director, Centre for Palliative Care Research, Dr Ken Marr, Palliative Care Medical Director for Northern NSW Local Health District (NNSW LHD), as well as Palliative Care Nurses from Griffith, Dubbo and Hunter New England LHD.

The Rural Palliative Care Conference was held at St Vincent's Hospital (Lismore) Education Centre, and organised by the current President, Joanne Cooper, Palliative Care CNC from NSW LHD.

National Hand Hygiene Initiative in NSW Update

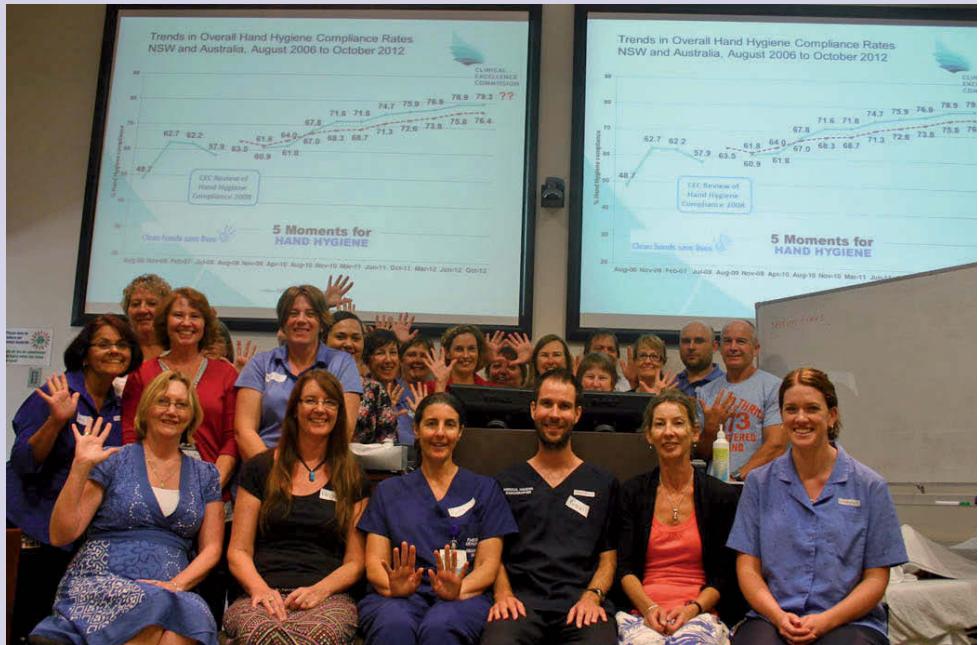
Over 25 Gold Standard Assessors and General Ward Auditors from Lismore, Ballina, Casino and Mullumbimby assembled at the University Centre for Rural Health on 26th March 2013 for an update on the National Hand Hygiene Initiative in NSW.

Three years after the National Hand Hygiene Initiative program commenced in the former North Coast Area Health Service (NCAHS) a significant increase in hand hygiene performance has been achieved.

Lively discussions from participants about how to provide performance feedback to Staff, innovations in data technology, collection methods and report formats were provided by Jen Gillott from the Clinical Excellence Commission and Kel Herd from Hand Hygiene Australia.

Overall Hand Hygiene performance rates have increased in NNSW LHD from 67% in August 2010 to 81.8% in October 2012. Sustaining and improving these performance rates requires team work by all health disciplines.

Ideas for promotional events for International Hand Hygiene Day, which is on 5th May should be discussed within your Facility, at Hand Hygiene Working Parties, with Gold Standard Assessors, Infection Prevention Staff, and at team meetings.



Above: At front far left is Robyn Donnellan, Clinical Nurse Consultant Infection Prevention & Control Service with attendees at the Hand Hygiene Update and background graph showing the progress of Hand Hygiene Performance over that last few years.

Short films, jingles, poster competitions are some of the methods used internationally to increase awareness about safe hand hygiene practice.

How will your team promote and improve local hand hygiene practices?

<http://www.hha.org.au/ForHealthcareWorkers/promotion.aspx>

MERIT on the Move

Recently the Magistrates Early Referral Into Treatment (MERIT) Program relocated from Molesworth Street to the Riverlands Drug and Alcohol Centre.

All services and programs offered by MERIT will continue and there will be no changes to services delivery.

Many thanks to the Staff of MERIT, who have undertaken this move and relocated with other Drug and Alcohol based services at Riverlands, said Richard Buss, Executive Director of Mental Health and Drug & Alcohol Services.

MERIT was based in Molesworth Street for over 10 years so this is a significant change and again the way that the move was conducted and the flexibility of the Staff is appreciated.

The MERIT Program operates in the New South Wales Local Court system. MERIT is a court based; pre-plea diversion program under which arrested defendants with illicit drug use problems may be bailed to undertake treatment and rehabilitation.

Hearings and final sentencing are deferred while the defendant completes the program. While on the program, defendants are subject to ongoing judicial management and are expected



Back row L to R: Rob Lendum, Kate Willock, Christian Tremblay, Shannon White and Kevin Roberts. Front row L to R: Kay Johnson, Goldie Adams and Deb Arthur.

to fulfil the objectives of an individual case plan that involves treatment and interventions in an attempt to elicit personal change.



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Our next visit times and dates BELOW.

Location	Dates	Room	Times
Maclean Hospital	Mon 8th April	Meeting Room Community Health	3.00pm - 4.00pm
Nimbin Hospital	Tues 9th April	Check with Reception	8.30am - 9.30am
Kyogle Hospital	Tues 9th April	Tele- Health Room	10.00am – 11.00am
Urbenville Hospital	Tues 9th April	Check with Reception	12noon – 1.00pm
Bonalbo	Tues 9th April	Check with Reception	1.30pm – 2.30pm
Casino Hospital	Tues 9th April	Dr's Room near Admin	3.30pm – 4.30pm
Tweed Hospital	Wed 10th April	Dolphin Room (Level 4 – near Admin)	1.00pm - 4.00pm

Information Booklet? Ask for a copy at health@salary.com.au

Letters of Praise

To the Nursing Staff of the Coronary Care Ward and Ward A7 Medical Ward
Lismore Base Hospital

"Thank you" These two little words do not seem adequate to convey my gratitude to each and every one of you, who cared for my husband Albert while he was a patient in your wards.

Albert is recovering slowly at home, thanks to the excellent care he received while under your care. We are truly blessed at having such dedicated Nurses at the Lismore Base Hospital.

Yours sincerely,
Mrs Jean Curtis

The following letter was sent to the NSW Minister for Health and a copy sent to Dan Madden, Executive Officer, Grafton Base and Maclean District Hospitals.

The Hon. Jillian Skinner
Minister for Health and Minister for Medical Research
NSW Ministry of Health

Dear Minister

In February this year my wife and I were holidaying at Brooms Head on the coast when my wife awoke on a Saturday morning with severe abdominal pain. She had had major surgery in September last year and was fearful of some complications from those procedures.

The local people directed us to the Maclean District Hospital for assistance.

We were totally surprised with the emergency facility and the professionalism of all the staff working in that ward. While the staff to patient ratio was very low the attention to detail and service was certainly equal to private emergency facilities we have used elsewhere before.

Everyone on the floor that day could not have done more for my wife and indeed the many other patients that presented that Saturday, which I assume would be a busier than average day.

The problem was diagnosed quickly and accurately and a referral for medical follow up provided. The community and district is fortunate to have such a good facility staffed by caring and competent people.

Our sincere congratulations and thanks go to all staff in the emergency ward that day for their care and level of service.

Yours faithfully

Greg and Dianne Starkey

Congratulations

First ADI – MetLife Foundation Awards
For Best Dementia Care Education Project



Kathy De Souza and Anne Moehead

In February Alzheimer's Australia (NSW) nominated the NSW DementiaCare resource and training network, Dementia e-Learning Project, for the ADI-MetLife Award for Dementia Care Education Projects.

The ADI-MetLife Foundation Awards for Best Dementia Care Education Project

aims to recognise the success of projects around the world that promotes better dementia care through providing training and education programmes to the general public, health professionals or family members. The awards were broken down into categories by world regions: The Americas, Europe, the Middle East and Africa and Asia Pacific.

Five people reviewed the applications and decided on the winning projects. The panel of five was made up of an internationally renowned expert on dementia, a person with dementia, a former carer and two medical professionals from the developing world.

The DementiaCare resource and training network was awarded runner up in the Alzheimer's Disease International MetLife Award for the Asia Pacific category for Dementia Care Education Projects.

This success is attributed to all on the DementiaCare team and the many people who have undertaken the course in order to translate learning into practice and provide better care for those people with dementia.

The Tweed Hospital Staff Award Winner Kim Northey Renal Department

Kim has relieved in the Renal NUM position twice recently and has been an amazing support to all Staff. Her calm positive preserve filters through the Unit and all Staff have mentioned how positive this has been. Kim is very caring and approachable, and remains totally professional at all times.



Kim Northey with John Mann from the Tweed Heads Bowls Club