

Northern exposure



Health
Northern NSW
Local Health District

Newsletter, Issue 2
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\$48 million upgrade for The Tweed Hospital



Deputy Premier Troy Grant, Health Minister Jillian Skinner and Tweed MP Geoff Provest visited The Tweed Hospital (TTH) on Tuesday 10 February to announce a \$48 million commitment to begin the upgrade of the Hospital.

Seated from left: Troy Grant, Deputy Premier; Ian McPhee; Karen Brown CSSD Manager; Bernadette Loughnane; Geoff Provest, Member for Tweed. Standing from left: Brian Pezzutti, Chair NNSW LHD Board; Chris Crawford, Chief Executive; Doug Turner and Minister Skinner with Doctors and Nurses at the hospital.

The \$48 million investment will deliver an expanded Emergency Department (ED), an enhancement of Wards and Specialist Units, and a new Multi-Storey Car Park. Also other infrastructure upgrades to support enhanced clinical services will be developed on the advice of TTH Clinicians, who will soon undertake a re-prioritisation of the Hospital's most urgent clinical service needs.

Mr Grant said the upgrade of TTH is a priority. TTH cares for patients from right across the North Coast and this \$48 million commitment will ensure it can deliver its first-class care from an even better facility.



Health Minister Jillian Skinner has visited TTH on many occasions over the past few years and has met with TTH Clinicians to discuss future planning and priorities for the Hospital. Mrs Skinner said TTH provides comprehensive care for its community and these upgrades will benefit

Patients and Staff. Mrs Skinner said, "TTH is a remarkable facility but it is in need of a redevelopment to ensure it can meet patient demand into the future."



Pictured far left: Minister Skinner with Troy Grant, NSW Deputy Premier discuss positive patient feedback with Tony Lochead, Nurse Unit Manager (NUM) in TTH ED. Above from left: Bernadette Loughnane, Andrea Thawley, RN; Minister Skinner, Geoff Provest; Tony Lochead and Rob Davies, Director of Emergency Services for Tweed Byron Health Service with the 'real time' survey tablets, which are given to patients to complete while in ED and provide feedback on their experience in the ED.

The funding announcement was welcome news to TTH Clinicians and the Northern NSW Local Health District (NNSW LHD) Board and Executive.

Workplace Safety is everyone's job



February has been a month packed with Ministerial and other VIP visits with announcements to make, which is good news for the LHD. Also this month we have welcomed new Medical Graduates who have commenced their internships and some of the Nursing & Midwifery Graduates.

It was Volunteer Appreciation Day on 24 February and Lismore Base Hospital (LBH) Management held a morning tea to thank those special people who volunteer their time in the Cancer Care Unit, Renal Unit and the Hospital Auxiliary.

Lynne Weir, Executive Director, Richmond Clarence Health Service Group read a poem about Volunteers to those present and with the help of Narelle Gleeson, Director of Nursing and Midwifery handed out gifts to all the volunteers present, who are in the photo below. The poem went like this:

*Dedicated hearts like yours
Are not so easy to find.
It takes a special person to be
So generous and kind.
To care so much for your fellow man
Is a quality all too rare.
Yet you give of your time and talents,
For all in need to share.
So thank you for being a volunteer,
We're privileged to work with you.
We want you to know how appreciated you are,
Not just today, but the whole year through.*

Thomas George also attended the Volunteer Morning Tea and presented Rita Richards, LBH Auxiliary President with the Lismore Electorate Women of the Year Award. Mr George said the NSW Women of the Year Awards showcase inspirational stories of commitment, sacrifice and extraordinary achievement. Mrs Richards, who has been an Auxiliary member since 1990 firstly at Kyogle after which she joined the LBH Auxiliary in 2003 and is the current President, was taken by surprise at this announcement.

Upcoming Staff Survey

The third **Your Say Survey** is coming soon. The last Your Say Survey was held in 2013. The purpose of the Your Say Survey is to give all Staff an opportunity to actively provide input into the development of a **positive workplace culture** by completing a number of brief Survey questions. Many of us spend much of our time in the workplace and sometimes the way we start the day can affect those who we interact with. For example, there may be an occasion when a colleague did not have a good start to their day. *It may help to start the day with a smile and say 'good morning or hello' to someone you work with. A few kind words can often make a positive difference to their day and yours.*



Ryan Armstrong - the not so "Quiet Achiever"

Nominated by Bernadette Loughnane and supported by Ann Schefe, Pam Barrett and Bernie Waller.

Ryan is a pleasure to work with and a valuable member of our team. He truly contributed to the Whole of Hospital Project by working collaboratively with all members of the team. He gained respect from his peers for his commitment to working alongside the team to ensure everyone was in the project together.

Slowly he chipped away introducing change, demonstrating new ways of patient flow throughout TTH.

Ryan is a team player, always has been. This was evident early when as a school boy, he was voted the most 'helpful and caring student'. As a budding cricketer in his early years right through to his career representing the State and as Captain Coach of his local club, the one thing he excels in is communication and team work.

Ryan communicates with and listens to the team. This inclusion ensures people are empowered and it engenders respect.

As a Register Nurse (RN) Project Lead, A/Nurse Unit Manager (NUM) and now as a NUM, Ryan always acknowledges the contribution of the team in achieving the desired outcome of safe patient care.

What I'm most proud about is his approach to caring for people. Uppermost he never forgets why he is a nurse and makes the patient the central focus of every decision made.



\$115 million for emergency mental health in country communities



Left: Senior Mental Health Staff attended a meeting with the Minister for Mental Health, Jai Rowell (seated third right) with Chris Crawford and Richard Buss. Thomas George, Lismore MP are standing behind Mr Rowell.

Below: Telehealth link up with Grafton, Hunter New England and Mid North Coast LHDs.

The NSW Minister for Mental Health and Healthy Lifestyles, and Assistant Minister for Health, the Hon. Jai Rowell visited Lismore Mental Health Services on Thursday 19 February to announce \$3.4 million in funding that will provide access to emergency mental health care in NNSW LHD EDs.

Mr Rowell detailed how the pioneering use of video-conferencing facilities in communities throughout North-Eastern NSW would provide rapid assessment and triage of people with urgent mental health needs in rural communities.

"Leading mental health clinicians from the NNSW, Mid North Coast and Hunter New England LHDs have banded together to introduce the use of tele-conferencing facilities to provide remote assessment of mental health patients," Mr Rowell said.

Clinicians will use video conferencing technology to deliver services remotely that will include:

- Rapid Mental Health assessments of people presenting to smaller rural and remote hospital EDs.
- Consultation and advice to staff working at smaller hospitals to manage the care of people presenting with Mental Health problems locally where this is safe and appropriate.
- Support in managing the care of patients with challenging behaviours.
- Coordination of transport and admission where admission to a Mental Health inpatient unit is necessary.
- Education, training and Mental Health support to generalist health staff across the LHDs in managing mental health presentations.

"The introduction of Telepsychiatry will reduce unnecessary long distance transportation of patients. It will provide high quality

Update on Bonalbo Multi-Purpose Service

On 4 February 2015 a Communications Workshop was held with Health Infrastructure (HI) about the Bonalbo MPS Communication Plan, to discuss in detail the site requirements and to ensure the local community is regularly informed of progress. Pictured around the table from left is Michael Brooks, Senior Project Director, Planning & Technical HI; Cheryl Ducat, EO/DoN Bonalbo; Sally Druitt, Communications Manager, HI; Murray Spriggs, Manager, Community and Clinical Engagement; Scott Huxley, Project Officer; Nancy Martin, EO/DoN, Nimbin, Kyogle and Urbenville; Lynne Weir, Executive Director, Richmond Clarence Health Service; Ben Cohen, Associate Director, Planning & Technical and Dave Churchyard, Project Manager, Construction, HI.



consultation and support to staff working in rural and remote facilities as well as enhance the skills of the local workforce in responding to Mental Health emergencies," Mr Rowell said.

This new service will also benefit the Ambulance Service and the Police Force, who will not need to leave their local communities as frequently to transport Mental Health patients to district Referral Hospital Inpatient Units. Therefore, the Ambulance and Police Officers will be more readily available to their local communities.

"Importantly, it means that patients will receive a timely specialist assessment. It also means that other service providers can access timely specialist advice and other consultation assistance when they need it."

Through this initiative, the capacity of staff working in smaller rural hospitals will be enhanced to support the provision of the care they provide to people presenting locally, where this is safe and appropriate. An allocation of \$125,000 has been made to train Staff in the use of this new Telepsychiatry system.



Families need to have discussion about organ donation

NSW Organ and Tissue Donation Service's General Manager and State Medical Director visited Lismore on Monday 16 February 2015 and met with the NSW LHD Executive as part of the State-wide goal to increase organ and tissue donation outcomes in NSW and support hospital services.

Whilst the NSW LHD community have continued to support organ donation in a positive way, the 40 per cent of families who chose not to consent to donation in NSW in 2014, is an important reminder to everyone to think about organ donation and discuss it with their families.

NNSW LHD Medical Donation Director, Dr Mike Lindley-Jones and the team of donation specialists based at Lismore Base Hospital (LBH) and TTH are faced with the challenge of increasing organ and tissue donations in the LHD.

"The team and I have undergone specialist training to support families through the donation decision and are also very committed to getting out in the community to talk about organ donation," Dr Lindley Jones said.

"Organ donation and death is not a common topic and the work that we do is to continually try to get people of all ages to think about organ donation now, to ask questions, talk to their families and register their wishes on the Australian Organ Donor Register.

"Numbers on transplant waiting lists, which include locals from the Northern NSW region, always outweigh the number of donors. To be able to continue to increase organ donation rates in Australia, we need Australian families to consider organ donation now and be prepared to uphold the wishes of their loved one should they ever be in that situation."

One such transplant recipient is Banora Point resident Marion Walsham who received her life-saving double lung transplant almost six years ago at the age of 62.



L-R: Organ and Tissue Donation Service: Danielle Fisher, General Manager and Dr Elena Cavazzoni, State Medical Director; Juliana Celcer, NSW Clinical Manager; Marion Walsham, Transplant recipient with Dr Mike Lindley Jones, Donation Medical Director and Mary Campbell CNS Organ & Tissue, NNSW LHD.

"I suffered from the incurable lung disease, Idiopathic Pulmonary Fibrosis, which had already taken the lives of my father and my brother. I felt I was too young to die. Then I received the news that there was a possibility for transplant.

I'll never forget those golden words: 'The donors lungs are a match and surgery will go ahead.'

I am forever grateful that I was able to receive the gift of life and I hope I can urge as many people as possible to register to become an organ donor and discuss their wishes with their family. It could save someone's life," Ms Walsham said.

For more information go to www.donatelife.gov.au and register your wishes on Medicare's Australian Organ Donor Register online or at any Medicare office.



Byron Central Hospital

The photo to the right, which is a few weeks old now, shows some of the progress being made on the Byron Central Hospital site. These enabling works have included the completion of internal road base preparation, site in-ground drainage, with major excavation work undertaken and the installation of temporary site sheds.

Below at the Community Reference Group meeting held in late January. Photos from left show Jeffrey Arthur, Project Director from Health Infrastructure addressing the group and Byron Shire Mayor Simon Richardson (pictured front far right) in discussion about drainage. Some of the other topics discussed were road access to the new hospital and surgical services.



Chief Executive Report

Mental Health Enhancements

It is good to see enhancements starting to flow again to Mental Health Services after a slow period. But now both the Federal and State Governments are again starting to enhance the services delivered to people experiencing a Mental Illness.



Last year a high level meeting was held at the Lismore Headspace facility which was attended by Senior Managers from all levels of Government: Chris Crawford is pictured third left with Mary Folley, Secretary, NSW Ministry of Health far right.

This flow of enhancements was kicked off by the Commonwealth Government, which has provided funding for two Headspace services within the Northern Rivers. These Headspace services are targeted to support young people under the age of twenty-five, who are experiencing mild to moderate Mental Illness. They are a comfortable entry point to the Health System for young people. These two new Headspace services are auspiced by the North Coast NSW Medicare Local and are located in Lismore and Tweed Heads. They operate on a network model and draw support from NNSW LHD, local Schools, the Family and Community Services Cluster and related Non-Government Organisations (NGOs).

The catalyst for the enhancement of Mental Health Services by the State Government was the release of the NSW Mental Health Commission Strategic Plan, which is described in an article on page 7. In response to this Strategic Plan, the State Government has committed \$115.0 million over a two and a half year period to enhance Mental Health Services. There will be several strands of initiatives that will be supported by this enhancement funding. Some will be spent on innovative programs, such as LikeMinds and Y-POPs, which have the objective of making Mental Health Services more accessible to adults and youth alike.

Other funding will be spent on the provision of additional Community Mental Health Services. This includes more Mental Health Services provided by NGOs, the deinstitutionalisation of long stay Mental Health Patients, assisting complex longer stay Mental Health patients, who no longer need acute care, to transfer out of acute Inpatient Mental Health Units into more appropriate accommodation. The development of 24/7 Telepsychiatry in Hunter New England, Mid North Coast and NNSW LHDs, so smaller and more remote Hospitals can receive Psychiatrist support, will also be funded from this enhancement.

TTH Stage 4 Redevelopment

It was a very exciting occasion for many of us, when the Deputy Premier and Minister for Health and Medical Research visited TTH to announce that the NSW Government would allocate \$48.0 million to support the first two Phases of the Stage 4 Redevelopment of the Hospital. This Redevelopment is urgently needed due to the growth in ED, Elective Surgery and Cancer Care Patients accessing services at the Hospital. The Clinicians have

done a great job of providing high quality timely patient care to this increased number of Patients within the existing infrastructure but with more growth in Patient demand anticipated over the next few years, it will require new and expanded infrastructure to enable the Clinicians to continue to produce such good results.

In many ways this has been a model Redevelopment project. A comprehensive Clinical Services Plan (CSP) was produced in 2011 and 2012. This had considerable Clinician input with the Medical Clinicians very involved in its development due to the leadership provided by the Medical Staff Council Chair, Dr Ian McPhee. The NNSW LHD Planning and Performance Unit, particularly Ms Maureen Lane, played a big role in producing the required demographic and activity data and in writing up the information provided by the Clinicians into several drafts of the CSP, which were widely consulted upon until a final version of the CSP was endorsed by the Board. Then a Master Plan, which outlines the extra infrastructure that is required to support the implementation of the new and expanded Clinical Services, was produced with the assistance of the Architects, Health Projects International. Once again, the Clinicians were very involved in providing input to and comments on drafts of the Master Plan. Support in developing the Master Plan was also provided by the NNSW LHD Capital Works Unit. The NNSW LHD Board endorsed the Master Plan in late 2013.

Then the advocacy in support of the Project began. The CSP and Master Plan provided the evidence that the redevelopment is required and outlined how it should be carried out. The highlights of these documents were compressed into a power-point presentation, which was presented to the key decision-makers. They included the Member for Tweed, Tweed Shire Council, the Chief Executive of Health Infrastructure and the Minister for Health and Medical Research. In addition to this more formal advocacy, much informal advocacy was also undertaken. This advocacy reached a crescendo, when some TTH Medical Clinicians conducted a public campaign in support of the Redevelopment. In response to all the advocacy undertaken, the Government gave recognition to the importance of TTH Stage 4 Redevelopment and announced that it will provide funding to support its first two Phases.

External Advice

Regularly, I say to Managers and Staff alike, never believe that you know it all, because we can all learn from each other and from external advisers. This is the reason that I strongly support the external Quality Accreditation process, where some external experts come into our organisation, give us the once over and provide advice in selected areas about how we can do things better. Life long learning is not a slogan it is a sobering reality!

Only recently the LHD had a diagnostic review of its financial performance, arranged by the NSW Ministry of Health. This diagnostic provided some useful advice on how we can improve the efficiency of some of our service delivery and made suggestions about how we can raise more own source revenue.

Currently, at the suggestion of the Board Chair, we are seeking some external advice. The Improving Clinician Engagement Paper and Action Plan have been submitted to the Health Education and Training Institute (HETI) for review. The NSW LHD Executive is looking forward to receiving HETI's feedback on any omissions from these documents and on how the existing content can be strengthened. Over the last couple of days, we have had a visit from the Chief Executive and Director of Clinical Services Integration from the Sydney LHD, which is one of the top performing LHDs. They generously gave their time to share with Members of the Executive, especially those with more operational management responsibilities, some of the initiatives that the Sydney LHD utilises to maintain its high level of performance.



The New South Wales Health Workplace Survey is coming to you!!

Your Say - the NSW Health Workplace Survey is your opportunity to give feedback on what it's like to work with us. Everyone working for NSW Health is invited to participate. An independent research company is conducting the survey and all responses are strictly confidential.

The Survey will only take 10 minutes to complete, we encourage all staff to participate as your feedback is very important to us, as it will help us build a better workplace for everyone who works for Northern New South Wales Local Health District as well as our patients and visitors.

**When: Monday 30th March 2015 to
Friday 24th April 2015**

**Put the dates in your diary so you
don't forget to complete**

Survey Champions have been appointed throughout the District, names and contact details will be provided in due course, additionally, access will be either on line or a paper survey can be completed. Paper Surveys will be available through your Manager or Survey Champions.

More information will be made available closer to the Survey period, however, if you have any queries, please send an email to:
Rahenna.jolley@ncahs.health.nsw.gov.au

Trauma Informed Care

It is estimated that ninety percent of people utilising Public Mental Health Services have a history of interpersonal trauma. The single most significant predictor that an individual will end up in the Mental Health System is a history of childhood trauma. There is now extensive evidence of a link between childhood trauma and Mental Health and Drug and Alcohol problems.

The Adverse Childhood Experiences (ACE) study, found significant links between childhood trauma and smoking, sexually transmitted disease, inactivity and severe obesity, as well as ischemic heart disease, cancer, chronic lung disease, skeletal fractures and liver disease.

Studies on the brain have demonstrated that there are profound and enduring changes to brain structure and processes as a result of being subjected to interpersonal trauma. Some of these effects include:

- Difficulties using language
- Difficulties with attention, learning or memory
- Difficulty establishing context when experiencing fear
- Heightened emotions
- Sensitivity to cues for threat
- Difficulty interpreting and regulating emotion
- Less reward and pleasure anticipated from activity
- Greater attention to nonverbal 'negative' information.

Yet a major international study shows that when health practitioners identify and acknowledge the prior trauma of adult patients, who have experienced adverse events in childhood, there is a 35% reduction in visits to doctors' surgeries, an 11%



reduction in visits to EDs and a 3% reduction in crisis intervention.

Trauma Informed Care (TIC) describes a way of delivering services which:

- Acknowledge the prevalence and impact of trauma
- Consider the question – "what has happened to you?" not just "what is wrong with you?"
- Recognise that people use coping strategies for survival but which may have other, problematic impacts or consequences
- Prioritise safety for the person in all aspects of service delivery
- Work collaboratively with the person
- Maximise choice
- Promote hope.

There are effective therapeutic approaches to working with people who live with the consequences of multiple and/or complex trauma, assisting them to recover from these experiences. It is not always the role of LHDs to offer such services. It is, however, imperative that the delivery of health services by LHDs do not inadvertently re-traumatise or add to the history of trauma. TIC is person-centred care with the added understanding of the prevalence and impact of trauma.

Useful resources:

Trauma-Informed Care and Practice: Towards a cultural shift in policy reform across mental health and human services in Australia. Mental Health Coordinating Council 2013.

Trauma-Informed Practice Guide (British Columbia):

http://bccewh.bc.ca/wp-content/uploads/2012/05/2013_TIP-Guide.pdf

NSW Mental Health Commission Plan: Living Well

Living Well is a Strategic Plan for Mental Health Service provision in NSW. It is a ten year plan from 2014 to 2024. The Plan is from the NSW Mental Health Commission. It covers a range of areas including:

- Planning for our future
- Making it local
- Getting in early
- Putting people first
- Providing the right type of care
- Better responses
- Care for all
- Supporting reform
- Governance of Mental Health within NSW.

The overall aim of the Plan is to provide NSW with a whole of Government strategy for Mental Health Services that covers both NSW Health and other Government and Non-Government Agencies involved in Mental Health Care across NSW. The Plan aims to have:

- Stronger local decision-making and greater accountability
- Stronger partnerships with Aboriginal Communities
- Consumer and Carer participation at all levels
- Improved prevention and early intervention for children and young people
- Complete deinstitutionalisation over time
- Revitalized community based Mental Health System
- Better integration of care
- Coordinated response across Human Services

LIVING WELL



OCTOBER 2014

The Plan provides a good foundation for work both in the Health Sector and at the LHD level for the provision of Mental Health Services across the Community. The Plan is broad and covers a range of areas with actions associated with each of the elements. These actions and narrative provide the way forward for Mental Health Services. All LHD Services and those of other Agencies providing assistance to people with a Mental Illness will utilise this Plan to guide the further positive development of Mental Health Services.

A key aim of the Plan is to improve Community Mental Health Services and the provision of service delivery to individuals within a community setting. This will require an examination of the bed base across NSW and the deinstitutionalisation of Patients from some Mental Health facilities. The Plan aims to improve the Mental Health and wellbeing of our Community but is particularly concerned with ensuring that those with a moderate to severe Mental Illness are supported to remain well in the community. The Plan will provide the foundation from which NSW Mental Health Services are strengthened by enhancement over the next few years.

Interview with John Moran



John Moran has been a VMO at Murwillumbah Hospital since 1 July 1983 - 32 years ago. He is a man of many hats. I learnt of his passion for training young doctors and helping others. He was instrumental in the establishment of the University Centre for Rural Health (UCRH)

adjacent to Murwillumbah Hospital. Dr Moran, through the UCRH won a Premier's Award for Regional Innovation and separately, he also won a Premiers Award for decreasing the use of Pethidine in Emergency Services, in association with other North Coast Area Health Service Staff. His Practice, in which he is managing partner, won an a Immunization Award and is one of the top 100 Practices in Australia, a title awarded by the General Practice accreditation body. He recently became a member of the NNSW LHD Board. John also has a 1963 Fiat Bambino, which he is trying to restore and is hoping to have this project finished this year. I don't know how he finds the time to do all that he does. It was an absolute pleasure to listen to his story and of his many interests and how the UCRH came about but that's another story for a future issue.

Where were you before you came to Murwillumbah?

I trained at the University of NSW and then went to St. George Hospital in Sydney. Then having made a decision to go into Rural General Practice, I went to Tamworth for a few years and finished up being the Director of Emergency and Deputy Medical Superintendent.

What did you do when you first came to Murwillumbah?

I became a VMO at the Hospital where I became the Director of A&E for about 25 years and I left that position about six years ago. I also joined a couple of Doctors in a practice they had in Wollumbin Street. Later we moved to King Street and built our own premises, known as the 'King Street Medical Centre'. It has expanded over time as originally we started with three, then four and now we have ten to eleven doctors, some are fulltime and some part time. The practice includes Registrars both junior and senior and fulltime medical students, both male and female with multiple skills .

Is that when you became involved with the UCRH?

It became obvious to us that we could no longer continue to keep doing 24 hour shifts and maintain a practice. We reached burnout and it was time for a change and I was becoming interested in other things, like medical education. About this time Prof John Beard asked if I would become involved with a full time rural medical education program and I have been doing this ever since.

How did you start?

We have been involved in medical student education for many years but our involvement with UCRH formalized and structured the process to make it a much better experience for the full time medical students that come to Murwillumbah. I became a Lecturer and I am now Clinical Sub-Dean.

What are the other things that interest you?

My interests away from here are that I am the Doctor for the Australian International Transplant Games, which are held every two years at various locations around the world.

Is that like Organ and Tissue Donation?

Yes, solid organ transplants. There are around 78 countries that send people to all of these games. The standard of the sporting involvement ranges from people who are just enjoying life following a transplant, to those who are very competitive sports people. This has been a very interesting and enjoyable thing to do over the last ten years.

I am also the Doctor for the Queensland Junior Rugby Teams for the Queensland State Championships, which I've been doing now for about ten to twelve years

Do you take any students with you?

Yes, I usually take a student who has an interest in sports medicine. In fact one of our very early students, who finished his exams and did his internship, his residency and was a Registrar, is now back working in my practice as a Senior Registrar. He came to the Queensland Championship and I'm hoping he will come again. He is just one of them who has gone on to Rural General Practice.

Where did he do all his GP Training?

He has been to Byron through North Coast GP Training. He is now here doing his Senior Registration with us. He will probably look at doing something in this area.

Does that happen often, do Registrars return to work here?

Generally, students will come to us with a different idea of what they want to be but after their experience working in a rural practice, they often change their mind. In fact, out of the people who have come through and graduated, there are about 75% who after finishing their exams, apply for a rural internship, which is what all this is about.

So obviously you are passionate about medicine and training young doctors and rugby - did you ever play rugby?

Yes, I played at school and after school. I also played for Western Suburbs in Sydney and got the hell beaten out of me! I thought I was better than I was but I wasn't. Now I'm a much better rugby player on the side line!

Anything else?

Yes, I am involved in fundraising for the Flying Doctor Service, which I go on with the Salmat team - a company team that raises money for the Flying Doctors. Then there is the overseas Doctor exchange, which is run through our practice. A change is as good as a holiday, so every few years we do a Doctor Exchange overseas. We have organized to work in England and each member of the practice rotates through the same job, so providing continuity for the people. It means that we can all go to England and look at how they do things from a different perspective. I have also worked in Ireland, New Zealand and the Solomons on several occasions.

Currently, the King Street Medical Centre has been involved with Rotary and others to build a hospital in the Solomon Islands, which is just about finished.

We are grateful to the Health Service for offering second hand equipment that was surplus to its needs. This very generous donation will make a huge difference to the people needing medical care in the Hospital we have established on the Solomon Island.

That's fantastic

We have also worked with Prof Steve Lynch, a transplant surgeon in Brisbane and Head of Surgery at Princess Alexandria Hospital.

"Another thing we did was some research on isolated Doctors in single doctor towns."

How did that come about?

We identified the need for doctors in isolated areas, where there is only one doctor, to see what peer support is available. Whereas in my practice, if there is a problem you can ask another doctor to have a look at something but doctors in those isolated country areas don't have that option. So we organized an exchange with a Doctor from Bingara. I went to work in her practice and she worked in my practice. We swapped houses and practices. One of the nicest things that came out of that was the Doctors' children said

"We have mummy for breakfast and for dinner."

She was at the hospital early in the morning and in the practice all day with little time left for her family. This was published in the Australian Medical Journal (AMJ).

Did you always want to be a doctor?

I was five when I decided I no longer wanted to be Fireman, the rest is history, so I'm still here and hopefully for a while to come.

Latest Board News

The NNSW LHD Board has decided on its representation on the Board Governance and Advisory/Stakeholder Committees for the 2015 year. These Board Governance, Advisory and Stakeholder Committees are an essential component of the NNSW LHD Board's role in meeting governance requirements and in ensuring stakeholder participation.

Board representatives are detailed below:

Malcolm Marshall has been elected Deputy Chair of the Board.

Governance Committees

- **Finance and Performance**
Malcolm Marshall, Chair with Mark Humphries and John Moran as Members.
- **Health Care Quality**
Rosie Kew, Chair with Joe Ogg and Jean Collie as Members.
- **Health Services Development Committee**
Brian Pezzutti, Chair with Deb Monaghan and John Moran as Members.
- **Audit and Risk Committee**
David Frazer is a Member.

- **Medical and Dental Appointments**
Allan Tyson, Chair and Lesley Barclay is a Member.

Advisory, Stakeholder and Planning Committees

- **NNSWLHD District Clinical Council** - Rosie Kew, attendee.
- **North Coast Community Engagement Advisory Council** - Mark Humphries, attendee.
- **Ngayundi Aboriginal Health Council** - Leone Crayden and Deb Monaghan attendees.
- **Health Education Workforce and Research Forum** - Sue Page is a Member.
- **Mental Health Forum** – Deb Monaghan, Chair, David Frazer and Sue Page are Members.
- **Drug and Alcohol Forum** – Sue Page, Chair and Rosie Kew, Member.
- **Disaster Planning Committee** – Leone Crayden, Member and John Moran an attendee.
- **Aboriginal Health and Wellbeing Plan** - Deb Monaghan is Chair.

Board Member Profile - Lesley Barclay

Lesley Barclay was recently reappointed to the NNSW LHD Board for the period 1 January 2015 to 31 December 2018.

Professor Barclay is a Member of the following Board Committees:

- Medical and Dental Appointments Advisory Committee
- Health Education Workforce and Research Forum (in her role as Director University Centre Rural Health (UCRH)).

Principle area of expertise/knowledge: Clinical Practice /provision of health services to patients.

Lesley Barclay AO, is Professor and Director of the UCRH North Coast for Sydney University. Professor Barclay began her career as a Midwife and now is a maternity services researcher and health system reformer, whose projects have improved services in both remote and urban Australia and internationally, and whose educational leadership has strengthened the health workforce.

Lesley has led many research projects funded by the National Health and Medical Research Council (NHMRC), Australian Research Council (ARC) amongst others and her work has been published widely.

Her work has changed policy and systems nationally and internationally; for example in Australian remote maternal infant care for Aboriginal women in the Northern Territory. Internationally, her work in Samoa on traditional birth attendants



working with the health system has led to their ultimate registration. In Indonesia her research and advice has informed change in national policies around health worker education.

Professor Barclay is Deputy Chair of the National Rural Health Alliance; an organisation of 33 peak rural health bodies.

Locally, as well as being on the NNSW LHD Board, Professor Barclay is also on the Board of North Coast NSW Medicare Local. She is enthusiastic about the current opportunities for developing integrated patient centred care across the primary care and hospital systems.

Lesley Barclay is known for her mentoring and training. This is exemplified by 12 of the 30 PhD students she has supervised over the last decade, having been appointed as associate or full Professors in Midwifery or maternal child health.

Professor Barclay has written or edited two books in the last decade and has published 65 refereed papers in the last 5 years.

Whilst Lesley will be stepping down from her role at UCRH at the end of 2015 and will relocate to Sydney to spend more time with her family and grandchildren, she will continue to be active in health system reform including in her role as a NNSW LHD Board Member.

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Welcome to 2015 Medical Graduates and Nursing & Midwifery Graduates



Above from left: Brian Pezzutti, NNSW LHD Board Chair with Lynne Weir, Executive Director Richmond/Clarence Health Service Group; Thomas George, Member for Lismore and Katherine Willis-Sullivan, Director of Medical Services (second right) at a morning tea to welcome the Medical Graduates who are commencing their Internship at LBH.



Above: 2015 Richmond Nursing & Midwifery Graduates with at far left kneeling is Nicola Scanlon, Nurse Educator and far right standing is Charmaine Crispin, Nurse Educator with Narelle Gleeson, Director of Nursing and Midwifery at LBH.



Left: Geoff Provest, Member for Tweed (seated third from left) welcomed the new Medical Graduates and some of the new Nurse Graduates to TTH. Far left seated is Ann Scheife, Director of Nursing and Midwifery for The Tweed and Murwillumbah Hospitals and standing row two; second from right is Dr Nilesh Parmar, Deputy Director Medical Services for the Tweed Byron Health Service Group (TBHSG) and fifth from right is Bernadette Loughnane Executive Director for TBHSG is fourth left. Back row, second left is Dr Michael Hills, Director of Medical Services for TBHSG.

NNSW LHD Nursing & Midwifery Strategic Planning Day

Below left are some of the NNSW LHD Senior Nursing & Midwifery leaders who attended a Strategic Planning Workshop on 6 February 2015.

The Workshop's aim was to set a new strategic direction for the Nursing and Midwifery Directorate of NNSW LHD. This will ensure we continue to provide the best patient centred care, improve standards and processes, which support clinicians, and develop Nurses and Midwives into the future, to sustain our strong workforce.

This senior group are highly trained and skilled professionals, who have a vast number of years of both clinical and managerial experience between them. The nursing profession provides many career pathways, for example clinicians can go on to become Nurse Practitioners, Consultants, Educators or Managers.

Annette Symes, Executive Director of Nursing & Midwifery advises the NNSW LHD this year has 73 Nursing Graduates and 2 Midwifery Graduates, who will work across the District.





The Essentials of Care (EOC) program has been implemented on Ward C7 at Lismore Base Hospital for the past 12 months since the Hospital reconfiguration in 2014.

Leadership coaching and EOC have been pivotal in giving us the skills to communicate and work effectively together, resulting in a positive and dynamic ward.

Through engagement of patients and listening to their stories and experiences within ward, the Staff have identified that knowing the name of their allocated Nurse is at times difficult, because their name badges are often turned

obscuring their names and the white boards above the patient bed heads are not easily seen by the patient.

Some simple changes have been made in response to that feedback. C7 has moved the white boards from behind the bed

to the side, so they can be easily seen by all patients. A poster with the Staff member's photo and name on it, located in Patient rooms, has also been created to assist Patients and their families to more easily identify Staff.

Quotes are currently being sourced for fixed name badges for all Staff to be worn in addition to NSW ID tags. C7 has three EOC facilitators now and it will continue on the quest for improvement using the EOC framework. Gaining the Patients' perspective has been valuable and impacts positively on Patient care.



Staff of C7 Back L-R: Glenn Smith, Ben Mooney, Kim Hughes, Meaghan Gilbert, Seb Pilon, Michael Danby and Majella Dare. Front L-R: Jenny Willows, Adrian Hallman, Allison Wallis and Di Gorton-Weller.

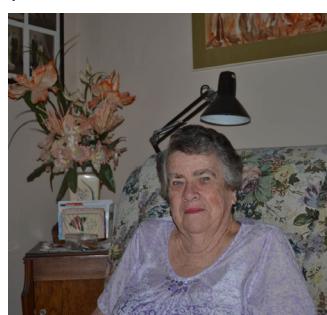
Australia Day Congratulations



On Australia Day this year, the Lismore Day Therapy Unit received a nomination for an Australia Day Award for Services in Community (Group). The Lismore Day Therapy Unit provides group based intervention for adult clients to manage a range of conditions, from neurological conditions to falls prevention. The nomination was provided by one of the clients of the Day Therapy Unit who advised this service provided "an enjoyable, fun environment, full of laughter, while assisting clients to achieve their goals." The nomination was presented by Clyde Campbell, Australia Day Representative (far left in picture) and Jenny Dowell, Mayor of Lismore City (far right). The Day Therapy Unit was represented by Patricia Tan, Physiotherapist (middle left) and Anthony Zuill, Occupational Therapist (middle right). The Day Therapy Unit did not receive the award, however it was an honour for the service to be nominated.

Photo courtesy of Paul Tuthill Photography

Austin Curtin was awarded the Lismore Citizen of the Year Award, for his over 30 years of dedication to ensuring residents of the Northern Rivers receive the best medical care possible. Dr Curtin's strong advocacy for patients has not only improved access to services for residents of the Northern Rivers but also across the State, as he travelled around the country as Co-Chair of the Ministerial Advisory Committee on Rural Health Services, in developing the Rural Health Plan, which the NSW Minister for Health and Medical Research chose to launch in Lismore. As Adjunct Professor at Southern Cross University and a Medical Educator, he has assisted local students to achieve their academic ambitions, so helping to develop a new generation of health professionals into the future.



Edna Fuller was awarded an Order of Australia Medal for her service to the Casino community. The list of community activities Mrs Fuller is involved with are many. NNSW LHD particularly acknowledges Mrs Fuller's volunteer work as a member of the Casino & District Memorial Hospital Auxiliary, mostly in her role as a former President and Secretary. The Auxiliary are a hard working group who provide enormous support to the Hospital and who have made some significant donations over the years that have been of great benefit to the Hospital's Patients and Staff. Mrs Fuller made a valuable contribution as a Consumer representative on the Casino Hospital Emergency Redevelopment Committee, which was appreciated.



Austin Curtin

Welcome



Cathy Osborne and Nanna Kreutzfeldt,

On 2 February the new Oral Health Leadership Team commenced in their new roles -

Dr Nanna Kreutzfeldt, Clinical Director, Oral Health brings to the role a wealth of experience both in Australia and overseas, including University roles in lecturing and student supervision, specialty paediatric dentistry and roles in both the private and public sectors. Most recently Nanna has held the role with NNSW LHD of Student Supervisor and Senior Dental Officer for the Ballina and Clarence Dental Clinics.

Catherine Osborne, Oral Health Manager has also worked in public and private dentistry in Australia and overseas. She has worked in senior management roles in both the Victorian and NSW public systems. Most recently Catherine held the role of Manager Healthy Communities and Oral Health in the Mid North Coast LHD. Nanna and Catherine have a clear common vision for Oral Health Services, with a focus on Clinical Excellence, Staff satisfaction and pride in the service.

The Oral Health Service is a discrete Clinical Services Stream with teams co-located with Hospitals and/or situated in Community Health Centers or HealthOnes in the LHD reporting through to the Executive Director of Allied Health, Chronic & Primary Care.



Rae Rafferty (formerly known as Conway) is welcomed back in her role as Nurse Manager, Workforce Development and Leadership, for Nursing and Midwifery. Rae has returned following a period of leave and a two year secondment to the position of Senior Research Fellow at the Collaborative Practice Unit (NNSW LHD and SCU). Rae is thrilled to be back in her role although she has well and truly been bitten by the 'research-bug' and is also completing a post-graduate research degree.

Her study entails conducting a Randomised Controlled Trial of Leadership Coaching Training involving 86 senior Nurses and Midwives from NNSW LHD.

During 2015, Rae plans to conduct some Advanced Coaching Training for those that have already completed their basic training and have been using these skills for more than 6 months. This training is focussed on (i) mastering advanced skills to have successful challenging and developmental conversations and (ii) building up a cohort of coaches who would be available to NNSW LHD Nurses and Midwives as needed. If you are interested in this Advanced Training please contact Rae on 02 6620 7232.



Judy Kirk has been appointed Respiratory Coordinator, Respiratory Services and Chronic Disease Program Manager for the NNSW LHD.

Judy is a Registered Nurse and Midwife with post graduate qualifications in Acute Care, Management and Health Law. Judy has been interested in Respiratory Medicine for over twenty five years and in that time become an Asthma Educator whilst working in Community Health in the former South Western Sydney AHS. Judy was the first Respiratory Liaison Nurse at Tweed Heads under the Priority Health Care Programs some 14-15 years ago. Since leaving that position Judy has pursued opportunities working in management within Rural and Remote areas throughout NSW and WA. Judy also gained the opportunity of working with a private International Health organisations, which found her back working in WA and overseas before returning to Australia in July 2014. Judy has always maintained an interest in the Respiratory field and looks forward to working within the NNSW LHD with a team of motivated Clinicians.



Jonathon Magill has been appointed to the new position of Nurse Manager, Nursing & Midwifery (N&M) Professional Development and Education. The position is a new senior position within the N&M Directorate, with professional responsibility for the effective facilitation of LHD education, training and development for N&M Staff. The position has responsibility for oversight of some multi-disciplinary programmes such as the CEC Foundational Clinical Leadership Program.



Congratulations to **Yvonne Foord** celebrated 40 years of service on 18 February 2015. Yvonne works in the Murwillumbah Hospital Operating Theatre as the Sterilisation Technician. Yvonne is pictured above with Athol Webb, John Anderson (Nurse Manager), Yvonne and Lynne Penglase (NUM Perioperative).

Farewell



Farewell

Dr Igor Petroff retired from public practice on 30 January 2015 after devoting over 42 years to improving Mental Health Services. Dr Petroff was a Clinical Director at LBH from 1973 until 1989. When Dr Petroff came to Lismore there was only one practicing Psychiatrist between Brisbane and Newcastle! A farewell was held for Dr Petroff at the Palate Cafe in Lismore where Dr Brian Pezzutti, Chair of NNSW LHD Board, thanked him for his incredible contribution to Mental Health Services and his involvement as a Visiting Medical Officer at LBH and Byron District Hospital but particularly for his work in establishing the Richmond Clinic Mental Health Unit. Johan Havenaar, Clinical Director Mental Health for the Richmond-Clarence Network, sang a traditional Russian song for Igor. Harry Freeman had his keyboard with him and played some background music. He will be greatly missed by his colleagues and former Staff Members, some of whom attended the farewell function.



Heather Gould commenced at LBH on the 27 January 1985 working in Intensive Care, where she was known as an outstanding and gifted Critical Care Nurse. In October 2004 Heather was appointed as Nurse Manager, Bed Management and Patient Flow, a position to which she applied her energy and organisational skills. Heather has been an integral part of the many changes that have occurred at LBH to improve access to services. Her resilience, optimism and positive attitude have inspired Staff and Managers. Heather retired on 30 January 2015 after providing 30 years of service. LBH Management arranged a farewell afternoon tea for Heather, with many members of Staff attending to say their goodbyes. Dr Pezzutti presented Heather with a Certificate of Appreciation on behalf of the NNSW LHD. Dr Pezzutti said he recalls working with Heather and that she was an outstanding Nurse.



Doug Hunter, Business and Performance Manager at Lismore Mental Health started working with the NSW Health system on 2 May 1974 and joined the North Coast Regional Office on 12 May 1992. After 41 years, Doug has decided to take 12 months leave and a Farewell Afternoon Tea was held for him on 6 February 2015 prior to his departure.

Letter of Thanks

To the Doctors and Staff at Lismore Base Hospital Ward C7 and Oncology Ward.

On behalf of my mother, Marge Juoson, my father and our family, we would like to thank you for the care you gave our Mum, while she was a Patient on your Ward for almost six weeks.

The Nursing and Domestic Staff and the Doctors were very professional, friendly and we all felt so welcomed and were always able to speak with the Staff concerning mum's health and her care. Our experience at the Hospital was a very positive one and we can't thank you all enough.

We would like to make a special mention to 'Dot' on the Domestic Staff, who couldn't help us enough as our family is large and visited often with our special Mother.

Dr Bull and his team were amazing and explained all Mum's care to us on most days.

With many thanks, Vicki, Sue, Sharon, Jenny, Richard and our families.