Byron Central Hospital at lock-up

The Northern Rivers turned on its charm recently when NSW Minister for Health Jillian Skinner flew into Ballina to check on the progress of the new $88m Byron Central Hospital (BCH). With the sun shining brightly and the temperature a near-perfect 24 degrees, Mrs Skinner together with NNSW LHD and HI representatives toured the facility which is now at ‘lock-up’.

See Page 3 for details.
Benjamin Franklin once said: ‘In this world nothing can be said to be certain, except death and taxes.’ I would add that we can also be certain of change.

Change is perhaps the most constant companion in our lives, yet human nature dictates that we rarely enjoy the experience of change.

In the past three months I have experienced, and witnessed, a lot of change. Stepping into this role, I left behind my clinical role as a Child and Family Psychologist to revisit my previous career as a journalist/media manager.

In this role I have witnessed much change from the opening of a new Emergency Department for Casino District Hospital, to the continuing construction of Lismore Base Hospital (LBH), to the development of Byron Central Hospital.

Nationally, I have witnessed the change of our Prime Minister, while further abroad the tragic unfolding of the Syrian refugee crisis has evoked a strong emotional response. Throughout all these things, I have been mindful of not only my own personal reaction to change, but of those around me.

For the Northern NSW Local Health District (NNSW LHD), the biggest change announced during the past three months has, in my opinion, been the decision by Chief Executive Chris Crawford to pass on the baton after 15 years at the helm.

As witnessed with the change from Tony Abbott to Malcolm Turnbull, new leaders usually result in new ideas, a new focus, a new leadership style, and sometimes a whole new direction in which to steer the ship.

Regardless of whether the change, and new leadership, is welcome or not, adjustment to these many changes takes time and as we adjust to these new changes, we may feel vulnerable and uncomfortable.

I find at times such as this, the best advice to follow is that of Dory: just keep swimming!

Your say
Do you have anything you would like to share with your colleagues and readers of Northern Exposure?
Contributions can be emailed to susan.walker@ncahs.health.nsw.gov.au and should be no longer than 250 words.

Rebecca Burke - Quiet Achiever

Nominated by Heather Baker, Deputy Director of Nursing at Grafton Base Hospital (GBH), for “going over and above the expectations of her job and being a good patient advocate”.

For the past 11 years, the sick, injured, socially disadvantaged, abused, neglected, chronically ill and dying have all been cared for by Rebecca Burke, the Social Welfare Officer for GBH.

“I don’t think that staff who share similar roles in the larger metropolitan Hospitals would understand some of the things Rebecca does,” Heather said.

“In the bush and small rural communities we have to look after our own given the limited resources, and often long distances, that people have to travel to access specialist medical treatment”.

“What Rebecca does is problem solve. She works across a broad range of issues including palliative care, chronic illness, grief and loss, supportive counselling, crisis management, child protection, advocacy, homelessness, victims of Domestic Violence and Guardianship applications. She also assists with accessing transport and financial assistance, arranges contract funerals, information and referral where people may require more specific expertise, IPTAAS, and basically anything to do with navigating the Health system.”

When Rebecca was nominated for this month’s Quiet Achiever, special mention was made of her dedication to clients, going above and beyond the constraints of the hospital.

During flood times, it is often very difficult for other services to get into Grafton to provide assistance out in the community.

“There have been times during flooding of the Clarence Valley when Rebecca has had to go out to patient’s house to feed and check on the welfare of their dogs, because there were no services available to assist,” Heather said.

“This is an extreme example, but people in the bush will understand. There is definitely a sense of uniqueness working in a rural hospital and you learn to become very creative.”

Rebecca said she had witnessed a lot of changes during the past 11 years at GBH, yet there was one thing that remained the same.

“It is such a great bunch of people whom I work with, and that has never changed,” Rebecca said.
From Page 1

During her tour of the facility, Mrs Skinner was accompanied by Parliamentary Secretary for the North Coast, and Member for Clarence, Chris Gulaptis, NNSW LHD CE Chris Crawford, NNSW LHD Board Chairman, Dr Brian Pezzutti, and Executive Director Tweed Byron Health Service Group Bernadette Loughnane.

Mrs Skinner said reaching ‘lock-up’ was a significant milestone and represented the point at which the building was fitted with all the windows and exterior doors.

“The BCH project has progressed very well since construction began in late 2014,” Mrs Skinner said.

“Construction is on schedule for completion early next year and the entire team of project managers is to be congratulated for their hard work.

“It won’t be long before the fully functional BCH is treating its first patients.”

Mr Gulaptis said when the hospital opens mid-2016 it will replace the smaller district hospitals in Byron Bay and Mullumbimby, offering expanded services at a higher level.

“This new hospital is a wonderful asset for Byron Shire’s busy and growing community and will allow more residents and visitors to receive their treatment locally,” Mr Gulaptis said.

Byron Central Hospital Progressing

Construction of the new hospital’s three main buildings and associated site works is proceeding apace, with progress clearly visible to passing motorists.

Despite intermittent rain in the early stages of work, BCH construction is on track for completion in March 2016. Following up to eight weeks of commissioning by the LHD, the $88M, purpose-built facility will be operational by next June.

Services at the new BCH will include: 24-hour Emergency Department, in-patient beds, low risk maternity unit with birthing suites, enhanced X-ray and medical imaging including on-site CT scanning, dental services, Community Health, and a 20-bed, non-acute Mental Health inpatient unit.

Redevelopment of LBH is progressing on schedule, with Stage 3A providing increased capacity, a greater range of services and improved facilities for patients.

The funding approved is for Stages 3A and 3B of the LBH Redevelopment, as well as the new car-park opposite LBH, to progress each of these three aspects of the LBH upgrade.

The project has a capital budget of $80.25 million ($60.25 million from the Australian Government’s Health and Hospitals Fund with a $20m co-contribution from the NSW Government).

Construction on the new multi-level carpark is continuing apace with the build of the excavation work now completed.

The detail footing excavation to level one has been completed, with the concrete pour for the retaining walls and pad footings now commenced.

Construction of Stage One of the new carpark is expected to be completed by January 2016, weather permitting.
In Brief...

R U OK? Day checks in on our mates

This year, R U OK? Day and World Suicide Prevention Day fell on the same date, with 10 September 2015 drawing attention to Australia’s role in addressing this global public health issue.

Campaign Director Rebecca Lewis said every 40 seconds someone died by suicide, with it being everyone’s responsibility to do as much as possible to prevent feelings of isolation and loneliness occurring in our community.

More than 2500 Australians suicide each year, equating to about seven people every day.

Suicide is the biggest killer of Australians under 44 years, with men accounting for around 75 per cent of all suicide deaths in Australia.

“R U OK? Day is a national reminder for us all to start a conversation that could change a life,” Rebecca said.

IT aids Parkinson’s

Scientists at the University of Western Sydney (UWS) are now taking advantage of sophisticated software and IT tools to personalise medical care as doctors wrestle with increasingly complex drug combinations.

Dr Ahmed Moustafa from the UWS MARCS Institute is currently testing new computer models in Parkinson’s Disease Clinics to aid Neurologists as they treat the disease.

“The ultimate goal is to rely on both human and machine intelligence – that is, both doctors and sophisticated computer models – to provide better treatment,” Dr Moustafa said.

“By using mathematical models of the brain, Neurologists will be able to find the best drug combinations and dosages for each individual patient.”

Recognition for local nurse

Lindt Café siege survivor Louisa Hope, seated, and award recipient Elizabeth Dolan (middle), of Lismore Base Hospital, with Health Minister Jillian Skinner, left, and NSW Chief Nursing and Midwifery Officer Susan Pearce at Parliament House.

Lismore Base Hospital (LBH) Registered Nurse Elizabeth Dolan received one of the highest accolades in nursing last month when she was named a category winner at the 2015 NSW Health Excellence in Nursing and Midwifery Awards.

NSW Health Minister Jillian Skinner presented the third annual awards, with 11 award winners and 24 finalists selected from a record field of 239 nominees.

Ms Dolan won the Consumer Appreciation Award category, with the award presented by Louisa Hope, a survivor of the Lindt Café siege.

Ms Hope, who has multiple sclerosis, was shot in the foot during the police operation which ended December’s siege.

LBH Director of Nursing and Midwifery Narelle Gleeson said the award recognised the hundreds of hours Ms Dolan had contributed to the community in assisting patients and families during the dying process.

“Elizabeth works with patients who are palliative, providing support to the patient, and their families, during the most difficult time of their life,” Ms Gleeson said.

“Winning this award recognises the high standard of care with which Elizabeth conducts herself on a daily basis.

Child Protection is everyone’s business

Lismore children during Child Protection Week.

The NNSW LHD Child Protection Team ran a competition for staff as part of this year’s Child Protection Week, in relation to mandatory reporting.

The winner of the $50 open order was Allan Knox, Maintenance Supervisor at Grafton Base Hospital.

The Team sincerely thank those staff who participated for their involvement.
Achievements
When you are about to leave a role after being in it for a long time, you reflect upon what has been achieved. All of us working together and supported by Governments of both Parties have achieved much over the last fifteen years, that has, and will continue to benefit patients.

Below I set out some of the achievements that have occurred during my time managing North Coast health services.

New and Expanded Clinical Services
Entirely new services have been developed at LBH for Cardiac and Cancer patients. The former can now undergo Cardiac Catheterization treatment while the latter can undergo Radiotherapy for the first time.

Orthopaedic Surgical Services at LBH and TTH have expanded significantly and a new Orthopaedic Surgical service has been established at GBH.

Renal Dialysis Services have expanded in Ballina and Grafton with a new 12 Chair Renal Dialysis Unit established at TTH.

Oral Health Services have expanded significantly with support in more recent years from the Commonwealth Government with new or expanded services having been developed in Tweed Heads, Pottsville, Ballina, Yamba and Grafton.

Infrastructure Upgrades:
Emergency Department upgrades: TTH, MDH, Byron Central (BCH), LBH, GBH, Casino, Ballina and Maclean Hospitals;

New Mental Health Units: TTH, LBH (Adult, and Child and Adolescent) and BCH;

New Multipurpose Services: Kyogle and Nimbin;

New Community Health Centres/HealthOnes: Kingscliff, Murwillumbah, Pottsville and Yamba;

Major new diagnostic equipment: TTH (MRI), Murwillumbah (CT), BCH (CT), LBH (PET Scanner, MRI, Linear Accelerators) and GBH (CT);

New Cancer Centres: LBH, Coffs Harbour Base and Port Macquarie Base Hospitals;

New Dental Clinics: Tweed Heads, Pottsville, Ewingsdale, Ballina, Yamba and Grafton.

Increase in Admitted Patients:
Inpatients – By 46,569 (79.0%) from 58,944 (2000) to 105,363 (2015);

Education and Research:
Collaborated with NSW Universities to establish University Centre for Rural Health Campuses co-located with the LBH, GBH, BDH and MDH Hospitals.

Joined with Griffith and Bond Universities to establish an education floor for Medical Student training at TTH.

Quality/Patient Safety:
All NNSW LHD Facilities are accredited pursuant to the National Quality and Safety Standards by the Australian Council on Health Care Standards.

Public Health/Health Promotion:
Fluoridation of all local water supplies except in the Byron Shire;

Tooty Fruity Veggie - Anti-Child Obesity Program;

Stay on Your Feet – Anti-Falls Program; Banned Smoking from all NNSW LHD Health Campuses.

Innovation Awards:
Two Premier’s Awards;
Two Health Minister’s Awards,
Multiple Statewide Quality Awards.

These achievements would not have been possible without the dedicated contribution of so many talented Clinicians and Staff, as well as the LHD’s supporters and consultants, such as our Architects and Builders.

Thank you one and all for improving the infrastructure and services that are available to care for our Patients.

Chris Crawford
Medicare tops one million hits

For the first time ever, more than one million billings a day are being received by Medicare, a figure that outstrips the number of new patients over the past decade by three-to-one.

Announcing the Medicare statistics for 2014-15, Federal Health Minister Sussan Ley said 21 million Australians accessed more than 368 million individual services on the Medicare Benefit Schedule (MBS).

The cost to taxpayers exceeds $20 billion annually. According to Minister Ley, about 90 per cent of the nation’s 23.95M population accessed Medicare last year, with an average number of 17 items being recorded per patient, at an average cost of $800 per person.

Medication furphy

A new Australian study has found that an anti-depression drug, prescribed in the millions to children, has an increased risk of suicide and no clear benefit.

An international team of researchers obtained previously buried data from a trial of the antidepressant medication paroxetine, sold under the brand names Aropax.

Drug company GlaxoSmithKline encouraged doctors to prescribe Aropax ‘off-label’ to teens – for which it had not been formally approved – relying on a key study that claimed the drug demonstrated ‘remarkable’ efficacy and safety.

However Professor Jureidini, from the University of Adelaide’s Critical and Ethical Mental Health Research Group, found far higher rates of serious incidents in children taking the drug than previously thought, with no evidence the drug worked for depression.

Lismore Base Hospital (LBH) Stroke Team turned the spotlight on stroke as part of National Stroke Awareness Week, held nationally from 14–20 September 2015.

A Stroke Awareness stall in the LBH Foyer was held offering free blood pressure checks each day.

LBH Stroke Coordinator Kim Hoffman said stroke was Australia’s second biggest killer after coronary disease and a leading cause of disability.

“By hosting the stroke awareness stall, we encouraged all community members to learn the signs of stroke and how to minimise their own risk,” Ms Hoffman said.

“It was all about bringing people together to have fun, encourage healthy living, and to get regular health checks.”

Be F.A.S.T in fighting strokes

Lismore Base Hospital (LBH) Stroke Team turned the spotlight on stroke as part of National Stroke Awareness Week, held nationally from 14–20 September 2015.

A Stroke Awareness stall in the LBH Foyer was held offering free blood pressure checks each day.

LBH Stroke Coordinator Kim Hoffman said stroke was Australia’s second biggest killer after coronary disease and a leading cause of disability.

“By hosting the stroke awareness stall, we encouraged all community members to learn the signs of stroke and how to minimise their own risk,” Ms Hoffman said.

“It was all about bringing people together to have fun, encourage healthy living, and to get regular health checks.”

LBB Stroke Coordinator Kim Hoffman, left, performs a blood pressure check on Vicki Gersh from Women’s Health, LBH.

Ms Hoffman said the National Stroke Foundation recommended the F.A.S.T. test as an easy way to remember the most common signs of stroke.

• Face - Check their face. Has their mouth drooped?
• Arms - Can they lift both arms?
• Speech - Is their speech slurred? Do they understand you?
• Time - Is critical. If you see any of these signs call 000 straight away.

Fall prevention is forum focus

One in three people older than 65 have a fall each year and up to one fifth of these people experience multiple falls. No other single cause of injury, including road trauma, costs the health system more than falls.

Noting this fact, more than 140 health workers and service providers, both private and public, have registered to attend the Northern NSW Falls Prevention Forum at Southern Cross University on Thursday 8 October from 9am to 3pm.

Topics will include:

• exercise for falls prevention;
• confusion and falls;
• fear of falling;
• research updates from Neuroscience Research Australia (NEURA);
• and an expert panel discussion.

For further information on the forum, contact NNSW LHD Falls Prevention Coordinator Julia Dayhew on phone 6620 7262.

Community nursing week

Community and Primary Health Care Nursing Week was held during September to pay tribute to the vital role community nurses provide.

To mark the week, community nurses at Casino, Lismore and Ballina Community Health put together displays of images from throughout the past 100 years of community nursing.

Casino Community Health NUM Robyn Rose with the Casino Hospital display.

“Community and primary health care nurses work in a broad variety of settings outside the hospital setting, to ensure individuals are able to more effectively manage their well-being within their community and home,” Lismore Community Health Centre Clinical Nurse Educator Sharon Whalley said.
This month we talk to Dr Ann Warrell, MB, BS, FRCPA, FIAC, who has been the North Coast Director of Pathology, Pathology North since 2011. Dr Warrell’s special interests include fine needle aspiration cytology, gastrointestinal pathology, biochemistry, microbiology and haematology.

Q: Director of Pathology is an interesting title. What exactly does your job entail?

A: A large part of the job involves reporting histopathology.

For example, we will examine a tumour in the bowel by selecting parts of the surgical specimen to see the pattern of the cancer and what cancer markers there are and from that point, if there are any secondary cancers in the patient.

Part of this process is to examine the specimen under the microscope to analyse and diagnose the tumour for the clinician in order to provide ‘staging’ of the tumour.

By determining the stage and type of cancer, we provide valuable information to the clinician and oncologists in order for them to determine treatment and prognosis.

Q: Is it just cancers and tumours that you examine?

A: No. We also look at a range of inflammatory diseases, lung diseases, Ear Nose Throat (ENT) biopsies, benign lesions, benign breast lesions, urinary tract lesions and skin lesions. However a lot of the work we do for the hospital patients is in deciding whether or not a patient has cancer or not.

The rest of the work which I supervise is blood work, which includes blood counts, how the cells appear, the chemistry of the blood, coagulation, basic electrolyte and renal and liver function etc. It is all very interesting.

Q: So how did you end up becoming a pathologist?

A: My father was a soil scientist and I pretty much grew up in his laboratory, paddling around his feet. When I left High School I started a Science degree in Canberra and at the end of my first year, I met a group of first year doctors, and, after talking to them, I thought what they were doing was far more interesting than what I was studying, so I changed and commenced Medicine at the University of Queensland.

Six years later when I was doing my residency and working with patients, I realised how much I missed working in the laboratory! There is an old saying: GPs work with patients for the patient’s entire life, anaesthetists for about half an hour while the patient is conscious, and pathologists only through the eye of a microscope.

I love histopathology and cytopathology, which is the study and diagnosis of disease at a cellular level.

Q: There seems to be so much media attention these days on cancer. Has cancer increased within the community?

A: Cancer is so common and occurs so often these days we are finding more than one cancer in a single patient. This is why better IT and e-records for clients is so vital in tracking an individual client’s history so that we can see if he/she has had cancer in their past.

E-Health is so good because we can track cancers. Tumours can change quite a lot and as such may not resemble the primary tumour, yet with the use of antibody markers we can define the tumour and track its morphology to see if this is a new cancer in the client or the return of a pre-existing tumour.

In terms of whether cancer rates have increased in our community, I think the answer is yes.

Q: Is tracking cancers a specialist field in pathology?

A: Essentially yes. Immunohistochemistry is the process of looking at the antibodies or proteins within a tumour. As time goes by, a lot more cancer markers are being identified which enables us to develop specific treatments for a specific tumour.

More often with an individual client, they may have a bowel cancer and then develop a chronic leukaemia which is brand new, but then there may be another tumour found during the course of the leukaemia treatment which the examination and markers will identify as being a secondary tumour to the original bowel tumour.

Q: Do you think we will find a cure of cancer in your lifetime?

A: To most cancers, definitely yes. Each decade we are managing to treat more and more cancers.

We are also picking up a lot of cancers far earlier than we used to, and are able to identify more markers. In breast cancer alone, in the past 10 years we have gone from being able to identify two markers to now four markers, and all this helps in the treatment and eventual cure of specific cancers.

One day we will be able to develop a specific antibody for your specific cancer and it will attack just those cancer cells, unlike current treatments such as chemotherapy which attacks other cells as well.

Already we have had spectacular success with childhood cancers and preventative measures like the HPV vaccine means that we are now looking at pap screening being phased out in 2017.

Q: It seems that there is so much more to being a pathologist than just taking blood?

A: Pathology is an exciting field. Most people only think of Forensic Pathology like CSI or Silent Witness, or when I started Quincy, but when you think of surgical and anatomical pathology it is much more interesting as we are dealing with the living, not the dead.

While we are progressing in finding cures for most cancers, our work isn’t really made for television. Yet the work we do each day in helping people survive cancers and recover from illness is so rewarding.

Dr Ann Warrell, Director of Pathology.
Following on from the success of the 2014 UHA/LBH Fete, another Fundraiser Fete will be held on Saturday 31 October 2015, from 10am to 3pm.

One of the highlights in 2014 was the Bed Races and by popular demand these will be running again this year.

There will also be:
- A Fruit & Vegetable Auction
- A Junk Auction
- Best Halloween Costume
- Carved Pumpkin competition
- Stalls – including pre-loved clothes, books, plants, cakes, craft, Christmas gifts, etc
- Live entertainment
- Petting zoo, jumping castle, face painting, NRL development games
- Food court.

The goal of the day is to raise money for new hospital equipment.

For information contact Diane Loza on 6620 2354.

Last year’s popular bed races will return to this year’s UHA/LBH Fete on 31 October.

Value your mind

NNSW LHD Mental Health staff will be campaigning for residents to ‘value their mind’ as part of October’s Mental Health Month activities.

Mental Health Month is held nationally during October to coincide with World Mental Health Day on 10 October and with national Stress Less Day on October 26.

On the Northern Rivers various activities will be held to mark Mental Health Month, including a morning tea with real estate agents to discuss private housing issues for mentally unwell individuals, community forums, and static displays raising awareness of the issues facing an individual with mental illness.

For further information on Mental Health Week visit http://www.mentalhealth.asn.au. Mental health is everyone’s business.

Time to check your breasts

October is Breast Cancer Awareness Month with BreastScreen NSW urging women on the Northern Rivers to get themselves checked.

Breast cancer remains the most common cancer among Australian women, with survival rates continuing to improve in Australia.
Community’s voice

The Northern NSW Community Engagement Advisory Council (CEAC) Forum was held in September in Ballina, with more than 20 attendees from across the LHD.

CEAC was provided with updates and an opportunity to raise issues with the NNSW LHD CE and Executive Directors for the Richmond Clarence and Tweed Byron Health Services Groups, Lynne Weir and Bernadette Loughmane.

An update on the Murwillumbah Birthing Service review was provided by both the CE and by Sally Cusack who was one of two Community Representatives on the Review Committee.

Following a request, Dr Richard Buss Executive Director Mental Health and Drug and Alcohol Services provided an update to upcoming changes in Mental Health Services including Peer Workers, 20 Sub Acute beds for Byron Central Hospital and Older Persons beds at LBH.

Christine Minkov, Manager, Substance Misuse Program North Coast Primary Health Network provided a comprehensive and informative presentation relating to Crystal Methamphetamine and provided feedback on the Northern NSW Ice Symposium.

A lengthy discussion relating to learning from patient stories and patient experience was held and CEAC reiterated this as a key focus for the Community Engagement Conference December 2015.

NSW Kids and Families overview

At the last NNSW LHD Board meeting Joanna Holt provided an overview of NSW Kids and Families.

Among those attending the meeting were, pictured from left, David Hutton, Executive Director Clinical Governance, Joanna Holt Chief Executive NSW Kids and Families, Chris Crawford Chief Executive NNSW LHD, Professor Les White Chief Paediatrician NSW Kids and Families, Brian Pezzutti Chairman NNSW LHD Board (seated) and Malcolm Marshall Deputy Chair NNSW LHD Board.

Board Member Profile - Sue Page

-appointed: 1 January 2011 to 30 December 2016

Board Committees: Chair Drug and Alcohol Community Advisory Committee; Health Education Workforce Research Forum

Principle area of expertise/knowledge: Clinical Practice/ Provision of Health Services

Dr Sue Page AM moved to the North Coast 25 years ago to work at the Nimbin Medical Centre and Hospital as part of her post-graduate training for the Royal Australian College of General Practitioners (RACGP).

She loved the country lifestyle and soon bought a farm and settled in to delivering babies at Ballina Hospital.

Dr Page became a local, then State and National representative for the Rural Doctors Association, becoming their first female President.

In this role she succeeded Dr Richard Buss, Executive Director Mental Health and Drug & Alcohol, Medical Indemnity, Pharmacy Professional Programs, Medical Workforce and the NSW Commission of Audit.

In addition to the Board of NNSW LHD, Dr Page is a Director for North Coast GP Training, Deputy-Chair of RACGP-Rural, and a member of the Medical Services Advisory Committee for the Australian Government, which examines the cost and benefit evidence underpinning new Medicare items.

Dr Page currently works in Residential Aged Care in Banora Point and still lives on the same farm.
The Get Healthy At Work program visited LBH last month with staff learning about weight loss, healthy eating, increasing fitness, Mental Health, Women’s Health, Breast Screening and Fitness Testing. Staff were also able to make their own fruit and vegetable smoothies by using leg power on the specially modified exercise ‘blender bike’.

(LBH staff Get Healthy at work)

Above, Tessa Brauer from Southern Cross University Gym talks to LBH Technician Ryan Moldenhauer. Right, LBH Director of Nursing and Midwifery Narelle Gleeson pedals her way to a smoothie under the watchful eye of LBH student Lana Hoffman.

Flouridation in Richmond’s water

Rous Water has commenced operation of four fluoridation plants to enable fluoridation of the majority of the Richmond Health Network. Fluoridated water is now supplied to most town water customers in the Ballina, Lismore and Richmond Valley Council areas.

Car leasing, made easy!

What is a novated lease?
A three way agreement between you, your employer and a finance company.
With a novated lease you’ve got choice - salary package a new, used or even your current car!

• **Time for your dream new car?**
  • Smartleasing can save you time and money:
  • Our buying power means we’ll find your new car at a great price
  • Pay no GST on the purchase price of the car
  • Our affiliations with local car dealers means we can source your ideal car and even arrange the test drives for you

• **Got your eye on a used car?**
  Salary package a used car as long as it’s less than 8 years old at the end of the lease.

• **Happy with your current car?**
  No problem, whether you own your current car outright or it’s on finance - you can effectively ‘sell and lease back’ this car.

Program aids people with ASD

A new program aimed at enabling one million people with autism around the world to find jobs within 10 years, and for 12,000 of those jobs to be in Australia, kicked off last month. The Dandelion program started with 24 jobs in this country: 11 in Adelaide and 13 in Brisbane.

What is an associate lease?
Your associate (spouse, partner, family trust or company) ‘leases’ a family car that they own to your employer - and your employer then provides the car back to you as a salary packaged fringe benefit. For your associate to be eligible to do this they must register for an ABN. The main advantage of an associate lease is that you can divert some of your taxable salary to a family member, trust or company to be taxed at a lower rate.

Better still – with ANY car lease you can enjoy these great benefits:

• Tax savings on your lease payments, insurance, rego, CTP, fuel and other running costs
• Fleet rates on service and maintenance
• A choice of fuel cards
• A wide range of vehicle insurance, warranty and membership products and services.

Interested?
To find out how you could benefit from a car lease with Smartleasing, call them on **1300 118 245**.
Locals in the winner’s circle in NSW Knockout

Tweed Goorie Go Getters, pictured at left, and Casino Bundjalung Burners, right, both made the winner’s circle in the Julie Young Challenge and Ronny Gibbs ‘Above the Line’ Challenge conducted as part of the 2015 NSW Knockout Health Challenges. Aboriginal Chronic Care Coordinator Anthony Franks said it was great to see participants losing weight, being healthier and taking on the Chronic Care messages that have been delivered to both Tweed and Casino teams. The key focus of the NSW Knockout Health Challenge is to ensure that Aboriginal people with, or at risk of, chronic disease have access to culturally appropriate rehabilitation programs to receive education and support to make healthy lifestyle choices to reduce the risk of developing chronic disease.

Fitness Passport a big success

More than sufficient members across the LHD have so far signed up for corporate fitness program, Fitness Passport, with more continuing to sign up each week.

“Thank you to all who registered for the program as without your support it wouldn’t have been possible,” Manager, Health Promotion, Jillian Adams said.

Membership cards will be available from 2 October 2015.

Left: Health Promotion Officer Kelly Williams, explains how Fitness Passport works to Karen Hughes, Senior Pharmacy Technician at LBH.

Whooping cough on the rise again

Pertussis disease (whooping cough) notifications in NSW have been increasing since 2014.

In January 2014 there were 177 reported cases across the State, with this increasing to 501 in December 2014 – predominantly in the 0-14 year age group.

So far in 2015, there have been 70 cases reported amongst residents of the NNSW LHD, with 17 cases reported in August.

“Epidemics of pertussis occur about every three to four years, as community immunity wears down,” NNSW LHD Director of Public Health Paul Corben said.

“The last major outbreak was in early 2012 and we are again seeing the kinds of numbers that indicate we are experiencing another major outbreak.”

Meanwhile, two children have been paralysed in the first polio outbreak in Europe for five years, according to the World Health Organization (WHO).

Ms Moehead stated that Lismore Base Hospital (LBH) was currently implementing the Top 5 program across the Health Service to help personalise hospital care for patients with memory and thinking problems.

“Top 5 is a fantastic tool for medical staff working with carers to tap into their knowledge and expertise for the benefit of the patient, the carer, and the staff,” Ms Moehead said.

Ms Moehead said LBH was also rolling out the Care of the Confused Hospitalised Older Person (CHOPs) program.

Dementia Month focuses on the Top 5

September is Dementia Awareness Month across Australia, with this year’s theme being “Creating a Dementia-Friendly Nation”.

NNSW LHD Nurse Practitioner Psychogeriatrics, Anne Moehead, stated that the goal of Dementia Awareness Month was to encourage more members of the community to become dementia-aware.

“By having a greater understanding of what it is like for a person to live with dementia, we can as a community help support those with dementia to live a higher quality of life with meaning, purpose and value,” Ms Moehead said.
The last word ...

Neville’s service honoured

Tweed Meals on Wheels (MOW) President Neville Lesina has recently been given the ultimate ‘pat on the back’ by being granted an Order of Australia Medal (OAM) for his work with MOW.

Mr Lesina states he “was stunned” to receive the news he was to be granted an OAM. Mr Lesina, 88, is currently president of Tweed MOW and has been volunteering with the group since 1987.

Childhood vision in sight

Genetic eye disease in children and Retinoblastoma were among the topics discussed at a recent Paediatric Vision Forum attended by 12 NNSW LHD staff.

Pictured attending the forum are, rear from left, Liane Knight (STEPS Orthoptist), Di McClelland, Anna Tonkin (School Health Nurse Clinical Nurse Consultant), Cheryl Beerens, Alison Leaver, Deb Procter, Fran Slattery; front from left Annie Mobbs, Genevieve Dayman, Suzanne Wright, Kerrie Hardy, Jennifer McKay (STEPS Program Coordinator).

Moscow Circus fundraiser

Members of the The Tweed Hospital and Murwillumbah Hospital United Hospital Auxiliaries, pictured, are all smiles following the recent donation by Moscow Circus promoter Michael Edgeley of 500 tickets to raise funds for the UHAs.

Childhood vision in sight

50 years’ medal for June

The Tweed Hospital’s UHA member Tom Hawkes was a proud husband recently when he helped his wife June, pictured, celebrate being awarded a Diabetes Queensland Kellion Victory Medal. The Kellion Victory Medals mark the achievements of people who have lived with diabetes for 50, 60 and 70 years or more.