

HealthMatters




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Three-year-old Kobey Macquire was the first patient through the doors at Robina Hospital. He was assessed and did not require admission, but returned with Mum the following day to share his experience with local media. Photograph courtesy of Gold Coast Bulletin. Robina Hospital opening Page 3.

Queensland Health reforms

directions Uschi Schreiber, Director-General

Overseas doctors essential



Since 2005 we have made significant progress in implementing the Health Action Plan.

I am very pleased that we have been able to employ an additional 1049 doctors to provide medical services within Queensland Health.

These increases in clinical staff will translate to better patient care for our clients.

I would particularly like to welcome medical staff who have made the decision to move from other countries to take up the opportunity to work and live in Queensland.

Queensland, like other states and territories, remains dependent on the recruitment of international medical graduates to meet medical shortages.

I would like to acknowledge the valuable contribution of international medical graduates to health services in this state.

Our commitment to supporting international medical graduates has involved imple-

mentation of enhanced standards and initiatives for recruitment, registration, immigration and transition to employment within Queensland Health.

One of these initiatives is highlighted in an article in this edition of Health Matters (See Pages 7-8).

I would encourage you to read about the Centre for International Medical Graduates and its work in supporting our international medical graduate workforce to prepare for the Australian Medical Council examinations.

The article highlights a valuable multi-media information resource developed to support international medical graduates as they prepare for the Australian Medical Council examinations and seek to obtain general registration within Australia.

I encourage you to continue in your support and respect for our internationally trained doctors and other health practitioners in Queensland Health.

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147 - 163 Charlotte Street
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Editor
Ian Ross
Phone: (07) 3234 1090
Fax: (07) 3234 1909
Email: rossi@health.qld.gov.au

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Queensland Health reforms

\$3b hospitals planning on track

Planning is on track for new tertiary hospitals on the Gold and Sunshine Coasts and the new Queensland Children's Hospital.

The three tertiary hospitals, worth a total \$3 billion, form part of the largest health infrastructure program ever undertaken in Australia.

Health Minister Stephen Robertson told State Parliament last month that teams of consultants were commissioned in August to plan and design the Children's and Gold Coast hospitals.

"Consultants have been commissioned to start the planning phase for the Sunshine Coast Hospital and develop a business case as part of the Public Private Partnership evaluation process," he said

"The size and complexity of these projects attracted interest from some of the industry's most experienced consultancy companies."

Mr Robertson said negotiations had begun with landholders to acquire the preferred site for the 750-bed Gold Coast University Hospital at Parklands.

He said he had been advised the meetings were progressing well and negotiations would not impact on the project's schedule.

"Clinical service planning for the new hospital at the Gold Coast is also underway," he said.

"Queensland Health is working with the Office of Urban Management to complete a Gold Coast University Hospital and Knowledge Precinct Master Plan by the end of this month.

"The Master Plan will maximise opportunities to integrate the hospital and nearby infrastructure such as the Rapid-Transit System for the benefit of the community."

Mr Robertson said a health services plan for the new children's hospital had been drafted and would be distributed for broader consultation.

"This plan will inform Government and the community of the range of services the new hospital will deliver when built," he said.

"The design phase has also commenced with the first of a series of master planning workshops held."

On the Sunshine Coast, a Precinct Planning Group has been set up with representatives from Main Roads, TransLink, Stocklands and Caloundra City Council.

This group has met to review access issues, transport integration, and infrastructure requirements to support the new hospital.

A Sunshine Coast stakeholder advisory group, involving members of the community, local and state government, and health care and education providers, has been formed and has held meetings.

Training starts to fulfil a vital role

Several members of the Fraser Coast Health Community Coast had the opportunity to attend a Community Engagement training workshop held in Maryborough on 29 August.

The workshop was conducted by Dr Jim Cavaye, from the North Brisbane Institute of TAFE, and was aimed at helping Queensland's public sector to better engage with stakeholders.

The Chairperson of the Fraser Coast Health Community Council, Barbara Paterson said community engagement played a new and vital role in the direction of recently established health community councils.

"The training offered by Dr Jim Cavaye gave participants an insight into aspects of community engagement, ranging

from the great benefits to the avoidable pitfalls," she said.

"All participants were given the opportunity to explore the theoretical side of engagement and to plan a practical engagement program.

"The stimulating, interactive training gave participants the confidence to deal with issues that may arise. It was an exciting and informative day."

Four Council members including Barbara, Julie Arthur, Trudy Yuginovich and Kerry McKeon attended the Maryborough workshop, together with Fraser Coast Health Service District Manager, Kerry Winsor.

Contact: Brad Smith, Manager, Health Community Council Coordination, phone 3234 1561 or e-mail brad_smith@health.qld.gov.au

Queensland Health reforms

Robina has immediate impact



Staff from the \$40 million Robina Hospital expansion.



Pictured during an inspection of Robina Hospital are, from left, Director of Nephrology Dr Balaji Hiremagalur, Health Minister Stephen Robertson, Nurse Unit Manager Renal Dialysis Lorraine Bublitz, and Director-General Uschi Schreiber.

The newly opened Robina Hospital Emergency Department is already having a significant impact on the provision of emergency care on the Gold Coast.

In its first week the number of attendances at the Gold Coast Hospital's Southport emergency department dropped by an average of 30 patients per day.

The Robina Hospital Emergency Department is part of a \$40 million expansion officially opened last month by the Premier Anna Bligh and Minister for Health Stephen Robertson.

The expansion includes an emergency department, an intensive care/coronary care unit and additional renal services.

It also includes a major boost to key infrastructure such as pathology, radiology, medical records, allied health and other support areas.

Dr David Green, Gold Coast Health Service District Director of Emergency, said the services were easing pressure on the busy Gold Coast Hospital Emergency Department at Southport.

Dr Green said patient numbers have reduced and ambulance access to the emergency department at Southport has improved.

"About 60 to 70 patients are being treated daily at the Robina facility and it is expected to further increase to around 90-100 patients over the next two

months," he said.

"It is also clear that the patients presenting to the Robina Hospital are genuine emergency cases and not suffering ailments better managed by general practitioners

"Patients requiring acute care can be taken directly from emergency to the advanced resources of the 10-bed intensive care/coronary care unit via a dedicated lift.

"A specially equipped balcony enables patients to benefit from fresh air and Gold Coast sunshine as part of their recovery process."

The contemporary architectural design of the new facilities complements current models of care and provides a refreshing and practical environment to deliver patient care.

A decontamination area specially equipped for biohazard emergencies or patients suffering from infectious diseases has been incorporated into the design.

More than 450 additional staff have been employed as a result of the expansion, bringing the total Robina Hospital workforce to around 1000 employees.

The \$40 million extension represents stage one in a major expansion that will see Robina Hospital grow to a 364-bed teaching hospital by 2010.

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Queensland Health reforms

Two-year investigation audits surgical deaths

All surgical deaths in Queensland public hospitals will be independently investigated in another measure to build a better, safer health system.

The Queensland Audit of Surgical Mortality, to be carried out by the Australasian College of Surgeons, was formally launched last month by Health Minister Stephen Robertson.

Mr Robertson said the audit would complement a range of other strategies to address patient safety and become more open and transparent about the care provided in public hospitals.

He said these included the formation of the independent Health Quality and Complaints Commission, the quarterly Public Hospitals Performance Reports, and the first annual report on critical incidents and sentinel events, released this year.

Participating in audit are Cairns Hospital, Townsville Hospital, Rockhampton Hospital, Nambour Hospital, Redcliffe Hospital, The Prince Charles Hospital, Royal Brisbane and Women's Hospital, Princess Alexandra Hospital, Queen Elizabeth II Jubilee Hospital, Logan Hospital, Gold Coast Hospital – Southport, Ipswich Hospital, Toowoomba Hospital, Mackay Hospital, Mater Adults Hospital.

Mr Robertson said this was yet another important development in the transformation of Queensland's health system.

"For the first time in Queensland all surgical deaths in public hospitals will be independently investigated and we expect all private hospitals to participate as the project is phased in," he said.

"Queensland Health is providing \$1.15 million over two years to fully fund the audit, to be carried out by the Royal Australasian College of Surgeons with an expert team led by Dr Jon Cohen."

Mr Robertson said the audit was a breakthrough project for patient safety and surgical excellence.

"Queensland's two largest hospitals, the Royal Brisbane and Women's Hospital and the Princess Alexandra Hospital, will play a major role in the audit," he said.

"About 400 audits of surgical deaths will be conducted this financial year with about 800 audits the following year as the project is rolled out statewide.

"Over time when this project is fine tuned, we expect all surgical deaths in every hospital, both public and private, to be independently investigated in Queensland."

Major program to stop elderly falls

An expanded \$1.96 million Queensland Health program will help prevent falls among the more than 1600 older Queenslanders over 65 who are hospitalised for fall injuries every month.

Chief Health Officer, Dr Jeannette Young, said Queensland Health was tackling this growing problem through an expanded falls prevention program, coordinated by its Patient Safety Centre, and other work by population health units.

"As part of the program we run workshops for staff of public hospitals and nursing homes, showing them how to identify and reduce the risk of falls," she said.

"Hospital patients are particularly vulnerable of course, and we work closely with patients and their carers to plan how to avert possible falls either at the hospital or when the patient leaves.

"We have a \$1.96 million budget and are recruiting six additional falls safety officers, to enable us to work more with regional and rural public hospitals and aged care facili-

ties, as well as community agencies.

"We'll provide them with support, advice and prevention resource material."

Jeannette said Queensland's ageing population and the number of retirees moving here meant the state's rising injury rate for falls seemed certain to continue.

In the decade to 2005-06 the hospitalisation rate for over-65s injured in this way rose by 20 per cent.

"Future population trends mean we can expect a sharp rise in these injuries."

Jeannette said falls involving the over-65s were increasing in line with an ageing population – yet most falls were preventable.

"Falls are a growing concern, with latest figures showing half of all Queensland hospitalisations for these injuries – 53 per cent – now involve people aged over 65," she said.

A falls resource kit is available online at: www.health.qld.gov.au/hacc

Queensland Health reforms

Grant to boost training

A \$50,000 State Government grant to a Queensland nursing support organisation will help boost longer-term training and development of the profession.

The cheque was presented to the Association of Queensland Nurse Leaders (AQNL) by Health Minister Stephen Robertson at the association's annual conference in Brisbane last month.

The one-off \$50,000 grant, which will assist both public and private nurses, is in addition to \$1 million for nurses and \$1 million for midwives from this year's State Budget for continued education and training.

"The grant recognises the outstanding work the association undertakes on behalf of the nursing profession and will

enable it to continue mentoring, training and developing nurse leaders into the future," Mr Robertson said.

He said the AQNL had been a powerhouse in delivering training nurse leaders in Queensland for almost 60 years.

The AQNL has more than 160 members across the state, including nurses from within the public, private and non-government sectors.

Originally membership was only open to Directors of Nursing, but in 2003 the association extended its membership to registered nurses at nursing officer level 4 (or equivalent) and above.

In the past year, the association has increased its memberships by about 70 per cent.

Scholarships available

Nursing or allied health professions working in Queensland can apply from 15 October for the Queensland Health Community Rehabilitation Postgraduate Scholarship Scheme.

Scholarships for postgraduate coursework (including mandatory travel) are available to nursing and allied health professionals working within and outside Queensland Health, for study starting in semester 1 next year.

Preferential funding has been allocated to the new Graduate Certificate in Community Rehabilitation at Griffith University.

Applicants can also apply for other coursework pro-

grams if it can be demonstrated they will be able to apply the knowledge gained for the benefit of community rehabilitation clients.

Applications close at 9am on 19 November. The Scholarship Scheme Information Booklet and Guidelines 2008, and Application Kit detailing eligibility, financial assistance, the selection and application process, and obligations of recipients will be available at <http://www.health.qld.gov.au/qhcrwp>

The scheme is a key aspect of the Community Rehabilitation Workforce Project which is funded through the Pathways Home Program.

Patient survey begins

The Queensland Health statewide patient satisfaction survey is being conducted via a computer-assisted telephone interview of medical overnight patients.

Cohort samples are being drawn from July to December 2007 data.

Pilot surveying occurred during last month and the main survey will begin this month. Final interviews will be held in

mid-April next year and it is envisaged reports will be available at the end of July.

To ensure the validity of survey results, staff are asked to encourage the completion of the Feedback Consent form on patient admission.

Contact: Jenny Burton, QMSU, phone 3636 9875, or e-mail patientsatisfactionsurvey@health.qld.gov.au

Queensland Health reforms

from the *Chief Nursing Officer*



Pauline Ross

Clinical education and training is a fundamental component of overall education for nurses and midwives.

The clinical practicum is part of the program for enrolled nurses, registered nurses, undergraduate midwifery students, refresher and re-entry participants, postgraduate specialist training (midwifery, peri-operative, ICU etc).

Increasingly, placing students for clinical practicum has become more difficult for the universities and TAFEs, to the point where the universities are not in a position to increase their student intakes in 2008.

This means that by 2011 the supply of new graduates will not be sufficient to meet growing demand as we undertake major capital and service developments.

For this reason, the Queensland Health Education Standing Committee (Nursing and Midwifery) discussed the issues at its August meeting and agreed that clinical education and training was in need of major reform.

The committee, with representatives from Queensland Health, universities, TAFE, students, private, non-government sector, and the community, acknowledged the difficulties with clinical placements needs to be addressed as a matter of priority.

The Executive Management Team has approved

the Office of the Chief Nursing Officer putting out for tender a review and reform of clinical education and training.

It is expected this reform will result in some major changes over the next two to three years.

It is anticipated the successful tenderer(s) will be selected before Christmas and that the consultancy will be completed over a period of about eight months.

It is expected a major change management process will be undertaken throughout 2008-2009

In addition to reforming undergraduate and enrolled nursing clinical education and training, the reform will address the Queensland Health competency based programs so we can ensure the number and types of programs are in place to meet demand for specialist nurses over the coming three to five years.

A small group of key stakeholders will oversee the consultancy to monitor milestones and outcomes so there is a smooth transition between the recommendations arising from the review and the implementation of required changes.

More information will be provided as the reform gets underway

New interpreter service introduced

A new statewide interpreter service arrangement for Queensland Health is being launched next month, implementing findings of a review into lack of consistency in interpreter services.

The new service is based on area health services being responsible for the overall coordination and quality of interpreter services and local coordination of interpreter services within each health service district.

The new service arrangement comprises two tiers:

- preferential use of health service district internal interpreters where possible (ie. where demand for a language is high enough)
- all other interpreter services across the state, including those for the hearing impaired, provided externally through a Standing Offer Arrangement (SOA).

ONCALL Interpreters and Translators Agency was awarded the Standing Offer Arrangement in June 2007, effective from 26 November.

As from 26 November, Queensland Health is legally obliged to purchase interpreter services from ONCALL (if no staff inter-

preters are available ie. Princess Alexandra and Mater hospitals) under the Standing Offer Arrangement.

Interpreter services will be coordinated at the health service district level through an interpreter services coordinator. This role coordinates the requesting, booking and confirmation of interpreter services and verifies interpreter service invoice charges.

Staff no longer book interpreter services directly, except for after hours or emergency interpreter requests. In these situations, staff will directly telephone ONCALL.

The HSD interpreter service coordinators are supported by their area health service interpreter quality officer, who is responsible for the quality of the interpreting service at the area health service level.

To minimise the impact of local coordination on health service districts, the Interpreter Service Information System is being developed and will be available in May next year.

For more information about the new interpreter service arrangements visit www.health.qld.gov.au/multicultural

Queensland Health reforms

DVD kit to help pass AMC exams



Pictured with a group of international medical graduate doctors at a Gold Coast examination are, from left, Dr Justin Perron, Surgical Registrar at Royal Brisbane and Women's Hospital, Dr Navid Adib, Staff Specialist, Paediatrics, Logan Hospital, and Professor Errol Maguire, Director of Surgery, Gold Coast Hospital.

I am working as Surgical Principal House Officer at the Fraser Coast Health Service District.

"I plan to finish my AMC and also apply to the Royal College of Surgeons for accreditation for the training and experience that I have had.

"I feel the CIMG team is doing a phenomenal work by helping us foreign doctors in Australia because the system is new for us.

"I feel proud that Queensland is the only state which supports IMGs with excellent guidance from its professional team, the CIMG.

"I would like to thank everyone involved at CIMG, for their untiring and selfless effort to help us." – Dr Muzib Razak

A **multi-media** resource to assist international medical graduates (IMGs) in preparing for the Australian Medical Council (AMC) examinations will be released this month by the Queensland Health Centre for International Medical Graduates (CIMG).

Jennifer Young, CIMG Manager, said the DVD, entitled Preparing for the AMC Exams, had been developed to complement the CIMG Preparation Programs and was designed to be used by medical educators in group preparation and by individual doctors in regional and remote facilities.

She said it comprises:

- an explanation of the Medical Board of Queensland requirement for IMGs to progress along the pathway to general registration within four years, presented by Dr Jeannette Young, Chief Health Officer
- an introduction to the AMC MCQ Examination: techniques, preparation and useful resources
- an introduction to the AMC Clinical Examination: the format, the content and performance factors
- an overview of a CIMG Trial Examination with tips from IMGs about how to approach the exam and what works well
- a demonstration of a typical 10 minute CIMG Trial Examination Station.

Preparing for the AMC Exams will be distributed by CIMG and Medical Educators to all IMGs preparing for the AMC Exams.

CIMG is an education unit with four educators assisting Queensland Health IMGs in their transition to clinical practice in Queensland.

CIMG is part of the Recruitment, Assessment Placement Training and Support Program (RAPTS) for Queensland Health's international medical graduates.

CIMG has been providing preparation programs for the two AMC Examinations since 1996.

The programs are offered at no cost to Queensland Health working doctors.

These are:

- Multiple Choice Question (MCQ) Preparation Program which includes Introductory Workshops and five Trial Examination Workshops; these workshops provide an examination experience with face-to-face consultant feedback in the various disciplines
- Clinical Preparation Program which includes weekly interactive role play workshops in clinical disciplines which are video-conferenced across the state.

Trial Examinations which simulate the AMC Clinical Examination are offered to provide an opportunity to refine examination techniques. Consultants provide individual and group feedback which is valued by all participants.

CIMG is able to provide the current level of assistance to IMGs because of the invaluable support and commitment pro-

vided by consultants, directors of clinical training and medical educators in the expert delivery of education sessions and workshops, writing trial examination questions and scenarios, examining and providing succinct and useful feedback.

With support from the Clinical Director of the RAPTS Program, Dr Susan O'Dwyer, CIMG has been able to introduce several initiatives designed to facilitate the delivery of programs at district level.

Flexible program curricula, which include the use of communication technology such as video-conferencing, DVD/CD and Online Discussion Forums have been introduced this year.

"The weekly delivery of the clinical workshops is video-conferenced to 22 sites and the feedback has been overwhelmingly positive," Susan said.

"They are an opportunity for IMGs to come together in a supportive environment and benefit from the input from their senior colleagues."

The most important initiative in program delivery is the establishment of three CIMG educators across the area health services.

Vickie Owens, in Cairns, coordinates the CIMG Programs in the Northern Area. Suzanne Davies, in Brisbane, is responsible for IMGs in the Central Area Health Service. Angela Ham, who facilitates all CIMG programs for IMGs in the Southern Area Health Service, is based at the Gold Coast.

CIMG educators encourage the IMGs to form study groups, practise the exam format and give each other useful feedback on their performance.

"This is considered the most valuable way to improve their examination techniques and skills," Susan said.

CIMG conducts regular Clinical Trial Examinations to coincide with the AMC Clinical Examinations.

A trial examination is held in each of the three area health services to support IMGs at local levels.

The recent CIMG Clinical Trial Exam, which comprised 20 stations, was held at Griffith University Medical School, Southport.

Senior consultants, registrars and medical students provided a valuable learning opportunity in an exam environment for 68 IMGs from 20 districts.

To further support Queensland Health IMGs in their examination preparation, CIMG educators provide communication and cultural workshops in districts across the state.

These workshops will be further enhanced by the release of a Communication and Cultural Workshop DVD which is planned for the new year.

IMGs who are preparing to sit the AMC MCQ or Clinical Exams should contact CIMG@health.qld.gov.au

Queensland Health reforms

Facing the challenges

Four Queensland Health international medical graduate surgeons gave presentations to a panel discussion during last month's Royal Australasian College of Surgeons (Queensland) conference at Palm Cove.

The panel, Dr Raad Almehti, Dr Nils Wagner, Dr Pieter Prinsloo, and Dr Conroy Howson, gave a brief summary of their "journeys" to obtain accreditation of their specialist qualifications.

Dr Almehti (graduated in Iraq, now based in Mackay); Dr Wagner (Germany - Mackay); Dr Prinsloo (South Africa - Cairns); Dr Howson (South Africa - Cairns)

Dr Wagner started working in West Australia as a deemed specialist. He said he was the only surgeon in the vast areas of the Kimberley and had to go through the challenge of isolation for a long time.

He obtained FRACS after remote supervision was approved by the College and took up the position of consultant at Mackay in late 2006

Dr Prinsloo described the delays, frustrations, and broken promises he faced going through the accreditation process while his family and children were waiting at home.

"All this could have been prevented if there was a single stop where the recruitment agencies, Queensland Health, and the RACS could help evaluate, screen and settle suitably

qualified IMG candidates into positions," he said.

Dr Howson said he arrived in Australia with more hope for a smooth accreditation, since he was promised that his training was of good standard.

He had to undergo further waiting period and an examination before he was given the position of specialist, though there was a strong need for the ENT service in the community.

Dr Almehti gave the concluding presentation, titled *The long and Winding Road: Reflections on the Stations of International Journeys*.

"The essence of my talk was to highlight the challenges faced by the IMGs in the speciality of surgery," he said.

"It emphasised all the known challenges of the IMGs (relocating to a new country, cultural diversity, new health system, absence of familiar contacts and family).

"It also put a spotlight on the stress faced by IMG on how an incident of the "Patel" type could easily sweep through all their lives here if there was an absence of a strong and understanding support system that integrates them here.

"These effective solutions need the essential acceptance and support of Queensland Health, as well as the College of Surgeons' organisational frame in order to achieve positive outcome."

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Staff gain new skills

A Queensland Health initiative to train staff in nutrition and dietetic support recently completed its first course at Redcliffe and Royal Brisbane and Women's hospitals.

A total of 36 Queensland Health staff completed the Certificate III in Health Service Assistance – Nutrition and Dietetic Support, the first time this program has been offered in Queensland.

Staff representing four districts included 25 staff from Northside District (Caboolture, Redcliffe and Prince Charles Hospitals), four from Royal Brisbane Women's Hospital (RBWH), four from Princess Alexandra Hospital, one from Southside District (Redlands Hospital) and two from Toowoomba and Southern Downs (Baillie-Henderson and Dalby Hospitals).

The Certificate III Health Service Assistance course was developed by Michelle Suter, Food Service Dietitian (RBWH), Denise Cruickshank, Nutrition and Foodservice Manager (Redcliffe-Caboolture), Angela Vivanti Research and Development Dietitian (PAH), and Fiona Hjortshoj, Mental Health Dietitian (Toowoomba-Darling Downs).

The course was supported by Yangulla Central Area Training Unit and Sunshine Coast TAFE.

The pilot program, consisting of 12 modules, was offered at RBWH and Redcliffe-Caboolture.

The course was conducted over seven sessions, with workbook exercises, workplace assessments, classroom learning and case studies.

Students completed modules as diverse as workplace health and safety, religious and cultural awareness, supporting nutrition and dietetic management of patients, communication in the workplace and an introduction to aged care.

Completing the program provides graduates with a nationally recognised qualification as a Nutrition Assistant and supports Queensland Health directives for Allied Health Recruitment and Retention.

Graduation ceremonies celebrating the completion of the course were held at both training sites.

Northside District Manager, Mary Montgomery attended the ceremony at Redcliffe Hospital to present Northside graduates with their certificates. She told the graduates they should be proud of what they had achieved.

"It's hard work to balance work, family life and study, but you did it, and you have every right to feel very good about what you've managed to achieve," she said.

Discussions are being held between Queensland Health and TAFE Queensland to implement the Certificate III in Health Service Assistance – Nutrition and Dietetic Support across the state.

Isa underground boost

The Mount Isa Underground Hospital and Beth Anderson Museum will be able to proceed with expansion plans following agreement with Queensland Health for the use of additional land.

The additional land includes a hill area behind the Mount Isa Hospital that was not included in any Queensland Health development planning.

The Underground Hospital Committee identified the area as part of its expansion program some time ago.

Committee members want to undertake expansions to their present facilities and create a better area for educational and historic reference.

The underground hospital was established in 1942 when the hospital's medical superintendent Edward Ryan became

concerned about possible Japanese air raids following the first bombing of Darwin on 18 February.

Local miners volunteered to work on the underground hospital in their spare time and on weekends and excavated a bunker out of solid rock in the hill besides the hospital.

Three shafts were sunk into the side of the hill behind the hospital, with each tunnel measuring about 10 metres long, joined by a shaft of about 40 metres.

One shaft was a theatre, another for a women's ward and the third for a maternity ward. The spine of the E was used as a men's ward and a general section.

The hospital had room for 100 patients, running water and electricity and medical supplies.

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Embracing diversity and harmony



Charleville residents learnt Thai fruit carving from Noi Maher.

Charleville has hosted a Harmony and Water Festival and a Migrant Forum to celebrate its cultural diversity, health and well-being and create an inclusive environment for its new migrant community members.

Funded by the Murweh Shire Regional Arts Development Fund, the festival was a community partnership involving Queensland Health, South West Healthy Communities, Lifeline, the Charleville Cultural Diversity Group and local schools.

Deb Alick, South West Population Health Unit, said that during the two-day festival, community members shared traditional dancing, artwork and healthy food from African, Vietnamese, Japanese, Thai, New Zealand Maori, Papua New Guinean, Indian and Aboriginal Australian cultures.

Mila Arts performers conducted African drumming workshops and held a jam session with local Aboriginal didgeridoo players Ernie Adams and Blackjack before teaming up with Queensland Health public health nutritionist Kym McClymont who juggled oranges as part of her Go for 2&5 fruit and vegetable nutrition promotion.

Charleville residents learnt Thai fruit carving from Noi Maher and origami and sushi making from local Japanese teachers Chiemi No No and Pauline Smith.

They also sampled traditional Vietnamese foods and admired village silk items, all of which were on sale.

Deb said a feature of the festival was a parade of lanterns by local primary school students in the lead up to the fireworks display.

“Over three weeks, the South West Healthy Communi-

ties/Lifeline Indigenous Women’s Group and Ernie Adams taught 90 children how to make lanterns decorated with traditional Indigenous cultural symbols,” she said.

“The festival provided local children with the opportunity to explore Vietnamese and African art.”

The Harmony and Water Festival helped focus the Queensland outback community’s attention on its local natural resources.

“Festival attendees were encouraged to nurture a very usual plant, helping it establish healthy foliage from what was a dead tree stump,” Deb said.

“By writing down their thoughts on what water means to them, on paper leaves to hang on the bare tree branches, they have begun to bring the plant to life.

“Since the festival, the Charleville Tree of Life has appeared at the Charleville Show, the Murweh Shire Council Library and the Migrant Forum, gathering and sharing the thoughts of 70 community members.”

The Tree of Life is a joint initiative of the Murweh Shire Council, South West Population Health Unit and South West NRM Ltd to compliment a range of community activities encouraging people to work together to build a healthy and sustainable region by effectively managing local natural resources.

“The symbolic activity aims to explore what water means to different people from different cultures, prompting interest and debate on a vital community issue from a range of perspectives,” Deb said.

“It’s been a popular activity for people of all ages, especially mothers and children.”

Ferret gets a performance review

The effectiveness and deficiencies of Ferret – the computer-based system for planning Indigenous patient care – is currently being reviewed.

Ferret is used to access information for the Indigenous community – patients, community groups and health care councils – and for primary health care service providers and managers.

It is the only significant information system tool that Queensland Health has in place, to support and underpin primary health care service provision to Aboriginal and Torres Strait Islander communities.

Dr Linda Selvey, Senior Director Population Health, is the sponsor for this work which is proceeding with the advice and guidance of a steering committee.

Staff will be consulted at primary health care centres servicing (mostly remote) communities such as Yarrabah, Weipa and Napranum, Mapoon, Badu, Thursday Island, Cherbourg, Rockhampton and Djarra.

This provides an opportunity for staff to relate their experiences with the use of Ferret.

Whatever the recommendations, and short and long-term consequences of the review, Ferret should continue to be used as per the current direction of local health service managers and district management.

The Ferret review report is due this month. Contact: Linda Selvey, phone 3234 1145 or Linda Hill, Director, Information Systems and Data Management Unit, 3896 3732.

Joan helped by buddy



Joan Hart has maintained weight loss.

focus: how I keep fit

Rockhampton Hospital midwife Joan Hart began aqua aerobics in November 2004 just after she started the weight watchers program.

“At the time I weighed 95 kg. I found a buddy to come to aqua aerobics with me and my daughter, for exercise, not weight loss,” she said.

“We fronted up at least once a week, mostly twice and sometimes I went three times a week.

“I reached my goal weight of 62.5 kg in May 2005 and now I continue at goal weight with doing aqua aerobics twice a week still and staying on the weight watchers maintenance program.

“I finished my general nursing training at Rockhampton Hospital in 1982, then started at Birribi in 1994, going to Pool in 1995 and studying Midwifery at CQU from 1998 to 2000, and commencing work in Maternity Ward in 2002.”

Joan said she became motivated to doing aqua aerobics

as a resistance exercise in losing weight to tone muscles as you go - which certainly worked well.

“I was motivated by weight loss, whether I went twice or three times a week. I have continued to do aqua aerobics once a week as I love the exercise and the chance to catch up with my exercise buddy.

“Other staff attending aqua aerobics are Lynda Fraser from Surgical Ward, who has recently become engaged, and Lea Schloss from the casual list.”

Joan’s main hobby is horse riding, particularly trail riding at The Caves with other experienced riders, travelling 10 to 25km on a monthly ride.

“I do horse sports at Mt Morgan but will start it at The Caves next year,” she said.

“I breed Australian Small Performance Horses and love looking after them as they all have different temperaments.

“I also do creative memories as I love taking and arranging photos.

“The highlight of my weight loss was being able to wear my wedding dress on my 25th wedding anniversary on 23 June, but my husband wore a newer suit.”

Inspire others to keep fit

We would like to hear from Queensland Health staff on how they have changed their lifestyles to keep health and fit. We would like to show how the average person can change their eating and exercise habits of a lifetime.

Hopefully, your example will inspire others. Tell us what motivated you to face the challenge to take off those extra kilos and change your way of life. Send your story (with pictures if possible) to Ian Ross, Editor, Health Matters, rossi@health.qld.gov.au

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New device cuts blood clot danger



Professor Ross Crawford

A tiny mechanical device may be at the front line in reducing blood clots after surgery, following a successful trial run at The Prince Charles Hospital.

The miniaturised Vascular Enhancement Device (VED) will be used on patients who are confined to bed during their recovery period, causing a higher risk of developing blood clots.

Believed to be a world first, the VED is an inflatable sleeve which is fitted to the patient's calf. It has multiple chambers which inflate and deflate in a wave like motion, increasing blood flow to the leg.

Sunshine Coast company Vascular Enhancement Technology has been developing the potentially life-saving apparatus for five years, with collaboration from Dr Greg Wren (general practitioner); Walter Meyer (instrument engineer); and Professor Ross Crawford (The Prince Charles Hospital's Orthopaedics Director and the Queensland University of Technology's Chair of Orthopaedic Research).

Vascular Enhancement Technology CEO, research scientist Wayne Bennett said the air pressure generated by the device created pressure and movement in the muscle similar to the normal effect created by walking.

"The continual intermittent pressure on the calf muscle and subsequent blood flow reduce the possibility that blood clots will form," he said.

"The portable device can be both mains-powered or battery-operated which allows the patient to remain mobile while they recover from surgery.

"The VED will provide an effective, economical and

comfortable alternative to larger, more cumbersome devices which significantly restrict patient mobility."

Professor Crawford said there was always a possibility blood clots might form in patients who were sedentary for long periods of time after complex surgery.

"This device ensures that blood is continually pumped from the patient's legs which minimises the risk of blood clots forming within the legs," he said.

"Most clots stay in the leg, but can travel to other parts of the body such as the heart or brain which in some cases can be fatal."

Dr Wren said the device potentially had other clinical applications such as draining fluid from swollen limbs and assisting in the healing of venous ulcers.

"It may improve the quality of life for people with damaged veins, or who have restricted mobility such as nursing home residents or stroke patients," he said.

"The device could also be used to prevent deep vein thrombosis caused by people who stay still for long periods during long distance travel or office-based work."

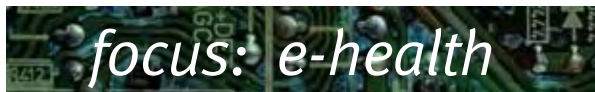
Development and trialling of the device was jointly funded by Vascular Enhancement Technology and a Federal Government Aus-Industry Comet Grant.

The device will be tested on 20 patients undergoing orthopaedic surgery at The Prince Charles Hospital over coming weeks.

The development team will publish a medical research paper after the initial trial and carry out further clinical trials to refine the device.

Receive Health Matters regularly

If you, your friends or colleagues would like to be placed on the Health Matters mailing list phone Public Affairs, Queensland Health, on **3234 1135** or fax your details to **3234 1909**.



Five bid for eHealth partner status

Five leading international professional services firms have submitted bids as part of a Request for Offer process to help deliver Queensland Health's eHealth program over the next five to seven years.

Peter Grant, Queensland Health's Chief Information Officer, said that although the companies could not yet be identified, he was delighted with the calibre of applications.

"The firms which have submitted bids are all regarded as leaders globally and, in most cases, have a strong Australian presence," he said.

"We could not have hoped for a better result from the RFO.

"Although, we are yet to go through what will be a rigorous selection process, we are confident that from these applicants, we will find the expertise and understanding we are looking for to complement our own areas of expertise and knowledge, and help us accelerate the delivery of the eHealth program."

The call for organisations to bid to become the eHealth Alliance Partner to help with the management of change and the delivery of advanced technologies and information systems is a first for Queensland Health.

Peter Grant said: "If Queensland is to meet the needs of an ageing and growing population, the eHealth program needs to be forward-looking, practical, well designed and delivered to time.

"And to do that we need to ensure we've got the right people and resources on board and also completely committed to what we're doing from the very beginning, which is the ultimate goal of the partnership approach."

Insight gained from global study

A global market study into countries and organisations implementing work similar to that being considered as part of Queensland Health's eHealth Strategy is providing new insight into what's happening in eHealth.

The study, conducted by experts based in the USA, UK and Australia, examines data repositories being put in place by organisations of a similar size, scale and complexity to Queensland Health.

The development of such a repository, designed to draw together patient information from across the state in a centralised electronic database, is a key cornerstone to the eHealth Strategy.

"The introduction of a data repository will be a huge step forward for healthcare across Queensland," said Queensland Health Chief Information Officer Peter Grant.

"It will allow the appropriate and authorised care providers, both within and external to Queensland Health, to access accurate, reliable and up to the minute, patient information.

The call for offers followed the State Government announcement earlier in the year to invest an additional \$240 million over a four year period, to upgrade and develop new information systems and applications.

This program of eHealth change will help the medical workforce spend less time on finding information and more time focused on where their services are required the most, the care of patients.

It will involve the upgrade to telecommunications infrastructure such as wireless technology to significantly improve the flexibility and mobility of rural and remote health care workers thus reducing waiting times and capacity to deliver much needed services in the bush.

For patients, it will mean better access to specialist care services, reduced waiting times and trips to care providers and treatments.

Better management of information also means improved safety through fewer medical errors and adverse drug events, due to improved prescribing and clinical decision making.

The Request For Offer was advertised on the Queensland Government Marketplace website for a period of five weeks and closed on Friday 31 August.

A selection process will take place over the next four months, which will involve senior and executive healthcare professionals to ensure that the organisation chosen understands the healthcare environment and how to address the challenges of achieving the eHealth agenda.

Contact: InfoAcces, phone: 3131 1625 or <http://qheps.health.qld.gov.au/ehealth/home.htm>

"The repository is a key deliverable of the eHealth Strategy and we now have one of the most detailed studies into what some of the leading players from around the world have experienced.

"This knowledge will help us determine the best type of system and technologies need to be developed or sourced, considering what we aim to achieve, how it is implemented and where potential vendors might come from.

Organisations of a similar size, scale and complexity to Queensland Health were closely examined during the study.

Some of these included Scottish Care Information, the NHS Care Record Service (UK), DHE Copenhagen, HealthOne Global: Platinum South Africa, Canadian Infoway and the VHA HealthVet Health Data Repository in the United States.

Contact: <http://qheps.health.qld.gov.au/ehealth/home.htm>

Ipswich leads the way



Ipswich Hospital has achieved major water savings.

Ipswich Hospital has achieved dramatic results through a series of new energy and water saving initiatives, cutting water consumption by more than 25 per cent.

Ipswich is one of the Queensland Health facilities taking part in the statewide Queensland Health Eco-Efficiency Program.

Through innovative energy and water saving technologies, together with energy performance contracting, the hospital will see annual carbon dioxide (Greenhouse Gas) emissions reduced by up to 4154 tonnes.

A 1200 sq m tracking solar parabolic reflection field has been strategically placed on the existing multi-storey car park to maximise collection of free energy from the sun.

This energy in the form of heat is reflected into an oil-based product which transfers the stored heat to a recirculating water system through an absorption unit.

The absorption unit transforms this heat energy into chilled water to support the air conditioning system throughout the hospital.

High efficiency heat pumps have been installed for domestic water heating and hydrotherapy pool heating, lighting fixtures upgraded and lighting controls installed all contributing to lower power consumption.

Modifications to the air conditioner equipment have reduced power consumption by a large amount and these initiatives have contributed to optimising efficiency.

The hospital's Rainwater Harvesting System has been operating since February to help meet the level 4 and 5 requirements of the Queensland Water Commission.

Four 30,000 litre water tanks have been installed on

the campus to capture rainwater. They have contributed towards a reduction in water use by more than 22,000 kilolitres (2004/05 consumption figures compared with the 12 months from April 2006 to April 2007).

Pam Lane, Manager, West Moreton South Burnett Health Service District, said that in the three months after installation, the water tanks collected 90,000 litres of water from just 18mm of rain.

"Rain in June produced an added harvest of 76,600 litres. Instead of being lost down the storm water drains, rainwater is collected off several hospital buildings and roadways for use in our cooling towers, saving town water," she said.

"The cooling towers disperse heat produced during the air conditioning process for the main hospital."

A new concrete separator collection tank in the storm water drain removes contaminants such as oil, dirt and leaves before the water is pumped via a filter unit into the water tanks.

"The largest contribution to water savings has been made by staff taking action in the workplace after becoming aware of the critical water situation," Pam said.

"Staff took individual and collective action to use water more efficiently. There has been a combined effort in implementing water conservation measures at the hospital.

"Flow restrictors in water reticulation pipes and equipment, locks on outdoor taps, stopping horticultural watering and educating staff and visitors have also resulted in significant water savings."

The staff awareness campaign has saved around 13,000,000 litres in 12 months.

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Learning traditional skills, games



Young people having a health check at the Emu Fest, as they discuss health eating, physical activity and healthy lifestyles.

Learning traditional Indigenous games, competing in canoeing, fishing and swimming activities, and exploring Aboriginal art and traditional dancing were popular activities at a traditional cultural fest.

More than 30 Aboriginal and Torres Strait Islander youth gathered to celebrate traditional culture at the four-day Emu Fest in July at Murra Murra.

Murra Murra, south east of Cunnamulla, is traditional Kooma land, a place of Indigenous cultural significance.

Queensland Health's Eamon Edwards and Allison Meek, Paroo Shire Council's Linda Wharton and Social Economic Development Services for Youth's Sonia Martin were busy organising the Emu Fest over the past six months.

"We aimed to foster a healthy competition among the different tribes and groups in Cunnamulla's Indigenous youth to strengthen cultural identity and tribal connections," Eamon said.

"We invited their families and relatives to come to Emu Fest as volunteers to promote intergenerational learning. The traditional owners gave us permission to use Murra Murra and local elders performed at Emu Fest in the opening and closing ceremonies."

The festival organisers secured funding from Queensland Health's Alcohol Tobacco and Other Drugs Indigenous Pilot Program to run the event as an alcohol and drug-free environment.

Eamon said that some of the key health messages at the camp were that 'smoking can cost us our culture' and 'smoking can cost us the game'.

He said the Emu Fest promoted healthy lifestyles, physical activity and Indigenous culture provided alternatives to substance misuse and helped develop young people's social and personal skills for independent and healthy living.

Alison Meek said that a feature of the Emu Fest was traditional Indigenous games which were almost lost after colonisation, but are now being creatively adapted through Queensland Health physical activity projects.

"Aboriginal and Torres Strait Islander children played games to help prepare them for the tasks of daily life. They ran, jumped, swam and climbed, tracked animals, threw spears and wrestled," she said.

"Their games enhanced their hunting skills and improved hand/eye coordination, agility and fitness. They encouraged story telling, taught language and were performed in sacred ceremonies.

"The modern versions use balls instead of spears and soft pool noodles instead of waddies.

"The traditional Indigenous games are viewed by many Aboriginal and Torres Strait Islanders as a strong indication of their culture's ability to survive, adapt and thrive.

"In this way, they are more than simply a way to engage Indigenous people in physical activity."

Festival organisers plan to run Emu Fest as an annual event for Cunnamulla's Indigenous youth.

South West Healthy Communities, Department of Youth Justice, Queensland Police Service and Paroo Shire Council assisted Queensland Health, Paroo Shire Council in staging this year's Emu Fest.

Accreditation a milestone

The Queensland Health Child Health and Safety Branch has gained five-year accreditation for Certificate IV in Child and Youth Health (Aboriginal and Torres Strait Islander).

The accreditation from the Accreditation Unit, Department of Education, Training and Arts, is a significant milestone in the development of a career pathway for Indigenous child health workers.

It will be a major contribution to the development of a highly competent Indigenous child health workforce.

In 2006 the Child Health and Safety Branch initiated and funded the development of a Certificate IV qualification in child health for Indigenous health workers and engaged the Cunningham Centre to coordinate the project.

A Course Development Advisory Committee (CDAC) was convened and had responsibility for validating the industry

need for the course and shaping the structure and design of the course, including the Australian Qualifications Framework (AQF) qualification to which it leads.

This process ensured the technical aspects of the course content would deliver the outcomes and standards required by industry/employers and licensing bodies.

The CDAC reviewed draft versions of the course structure and relevant units of competency and approved the final version before submission for accreditation.

The CDAC included membership from relevant industry bodies, professional groups and Queensland Health staff.

The formation of a CDAC was the primary method of ensuring that adequate procedures were observed and the appropriate industry and peak bodies were involved in the development of the course.

Getting heads around problem feet

Twenty-six healthcare workers in the South West region of Queensland are now getting their “Head around feet!” as part of the Indigenous Diabetic Foot Program (IDFP).

Combined funding from Queensland Health, Maranoa Health Enhancement project and the Southern Queensland Rural Division of General Practice brought the IDFP to St George and Roma and the surrounding areas.

The IDFP is a national program developed and managed by podiatrist Jason Warnock, from Townsville, for SARRAH (Services for Australian Rural and Remote Allied Health Inc.).

Nikki Thompson, Allied Health Team Leader, Roma Health Service District, said the program provided additional skills to members of the health workforce to assist with the prevention and early intervention of diabetic foot conditions.

“This knowledge skills healthcare workers to play an important role in the prevention of foot ulcerations and amputations,” she said.

“As a result, people with diabetes can lead a more active and independent life.

“The IDFP is a highly interactive and hands-on training program. Participants came from a variety of health sectors (small rural hospitals, community

health, Aboriginal health, aged care, HACC services, general practice, primary health care, bush nursing) to learn how to screen diabetic feet.

“They gain skills to advise people how to look after their own feet (self-management skills) and how to make more appropriate footwear recommendations.”

Nikki said the interaction of workshop participants helped support the integration of health services for people with diabetes and chronic diseases in the district.

She said the program met some of the goals of the Queensland Strategy for Chronic Disease 2005 – 2015.

Implementation of IDFP would assist the district to reduce avoidable hospital admissions and improve the quality of life for people with chronic disease.

“The program is suitable for all clients – Indigenous and non-Indigenous,” Nikki said.

“Diabetes is a major health concern in Australia. Presently 940,000 Australians have diabetes – that is almost 2 million at risk feet.

“Foot complications are the most common cause of hospital admissions for diabetes and most of these are preventable with good foot screening and foot care practices.”

Boosting immunisation

Aboriginal and Torres Strait Islanders in Logan are being urged to better protect themselves, their families and community against vaccine-preventable disease.

The Aboriginal and Torres Strait Islanders Immunisation Outreach Program is an initiative of the Bris-

bane Southside Population Health Unit and the Southside Health Service District.

The program aims to raise community awareness of the need for vaccination and to improve Aboriginal and Torres Strait Islander access to immunisation services and increase immunisation rates.

Wash the germs away



This winter's virulent influenza and norovirus outbreaks have highlighted the importance of adopting effective practices to prevent infection being transmitted or spread.

Hand hygiene is the main theme of a striking poster to promote Infection Prevention Week in Queensland being produced by the Queensland Health Centre for Healthcare Related Infection Surveillance and Prevention (CHRISP).

Infection Prevention Week is observed worldwide from 15-18 October – and now its vital messages will be reinforced across Queensland through this annual event.

Chief Health Officer Dr Jeannette Young, patron of the week, said hand hygiene was an integral part of prevention, so it is fitting that a major new program on hand hygiene was launched by Queensland Health on the eve of the week.

She said Clean Hands are Life Savers, a statewide program, was developed by CHRISP and involved a combination of education, motivation and system change.

Clean Hands is focused on improving hygiene practices in wards and departments which provide clinical care to patients.

The program involves:

- special training for around 40 staff representing every health district, who in turn will train colleagues
- clinicians becoming medical champions to support the

program

- team development and performance measures.

Jeannette said the Hand Hygiene Standard, recently released by the Health Quality and Complaints Commission, required all health service districts to ensure that hand hygiene processes were conducted in accordance with World Health Organisation guidelines.

“Clean Hands is the vehicle by which we can lift our performance in this area and sustain it to comply with the standard,” she said.

“The 40 or so staff members spearheading this initiative received far more than basic hygiene training – they were mentored in engaging staff and creating a sense of urgency about this endeavour.

“The hope is Clean Hands will instruct and inspire staff in a vital area that can make a real difference to patient care throughout Queensland Health.”

Queensland's education authorities are also supporting Infection Prevention Week.

Good hand hygiene habits are formed early and education authorities are promoting them through the Population Health Germ Buster website feature and the department magazine, Education Views.

Greater help for state's homeless

Greater access to mental health services is now available to homeless people under an innovative outreach program being extended from Brisbane to cover four other major areas across Queensland.

The Homeless Health Outreach Team (HHOT) program was started by the Royal Brisbane and Women's Hospital and is being implemented by Queensland Health mental health teams in Cairns, Townsville, Gold Coast, and Mt Isa.

The Royal's HHOT program gives the homeless access to mental health services within a five kilometre radius of City Hall.

Team leader Julie Evans said HHOT addressed the complex health needs of people with mental illness and/or substance abuse problems who were living on the streets of Brisbane.

“The initiative is based on integration. It's about working together with both government and non-government agencies to address the many health and support needs of people who are homeless,” she said.

“HHOT is a recovery-orientated system of care in which individual strengths are identified and built upon to create a sense of accomplishment, while regaining a feeling of membership in the broader community.”

Julie said statistics suggested that more than 50 per cent of homeless Australians suffered from a drug or alcohol problem, and about 96 per cent had endured a traumatic event in their lifetime.

She said that alarmingly, almost half of the homeless popu-

lation was under the age of 24, and 25 per cent of all people living on the Australian streets were Indigenous Australians.

“The HHOT team deals with people from many backgrounds, including clients who have fled a domestic violence situation and need immediate support and practical assistance,” Julie said.

“Successful partnerships between RBWH, Princess Alexandra Hospital and Royal Children's Hospital, and collaboration between key government and non-government organisations have contributed to the success of this program.

“These partnerships ensure the homeless population has access to the health services that best meet their needs, and access that does not discriminate.

“This community-based service is provided in locations where homeless people frequent, are comfortable and where there is limited stigma attached to accessing mental health services.”

Julie said the team provided a service that was effective, appropriate and responsive to the needs of the homeless population.

“Our team engages with homeless people and encourages their participation in treatment,” she said.

“We regularly review the service, taking on board the feedback we receive from various clients. This means the model continues to meet its key objectives.

“We have developed a service that is able to meet the immediate needs of our clients.”

Healthy ideals adopted



David Sterling shows his friends how to throw an aerodynamic toy at the launch of Woodcrest College's health promoting schools project.

Springfield's Woodcrest College and Springfield Lakes State School are so committed to the health and well-being of their school communities that they are embarking on a three-year project to become 'health promoting schools'.

They'll be working closely with Queensland Health's West Moreton Population Health Unit and Child and Family Health Service, using the World Health Organisation's 'health promoting schools' framework to guide their activities.

Woodcrest College officially launch their involvement in the project with a range of healthy activities undertaken by its students on the school oval and the presentation of two portable sun shelters by the local population health unit.

Donna Matfin, health promotion officer said that over three years, both Woodcrest College and Springfield Lakes State School would use this internationally-recognised framework to have a positive impact on the health and well-being of their school communities.

"For example, they'll address nutrition, physical activity, sun safety, hygiene, oral health, resiliency, behaviour management, parenting, communication with families, staff

well-being and links with local health agencies," she said.

"With a shared vision of improving their own health and that of their local community, they'll develop and implement strategies to improve teaching and learning, school practices and policies, and local partnerships and environments.

"It's all about prevention and early intervention."

Donna said the Springfield project would pilot an innovative 'school health nurse service delivery model', customised to the needs of state primary school communities from prep year to year seven.

A senior health promotion officer and school health nurse from Queensland Health will assist the schools focus on providing a holistic approach to health.

Donna said children's early life experiences influenced their development and their short and long term health.

Schools that adopt a 'health promoting approach' could vastly improve children's ways of thinking about, and understanding their world, their problem solving abilities and their behaviour.

It also increased children's chances of future employment, mental health and living in safe communities.

Prevention strategies to avoid hospital trips

Reducing avoidable trips to hospital emergency departments by aged care residents is the aim of strategies introduced by the Brisbane South Community Health Service (BSCHS).

Dee Jeffrey, Community Access and Integration Service Manager for the BSCHS, said the initiatives were already working to reduce hospital trips.

She said acute clinical nursing support was provided in residential aged care facilities and the acute and palliative care in-the-home service received more than 40 new referrals each month.

"We have developed a clinical resource manual and educational resource kit for residential aged care facilities, which have helped to significantly cut back the number of 'avoidable' emergency department visits," Dee said.

Dee said that an \$81,000 Strengthening Aged Care grant had enabled the service to delivered the program to hundreds of aged care staff from 38 facilities across Brisbane's south side.

"Residential aged care staff now have the skills to carry out simple clinical procedures and manage health issues, such as male and female catheterisation, best practice

wound care and diabetes management," she said.

"Now that the aged care staff have these skills, unnecessary requests for treatment at a hospital can be avoided.

"QEII Jubilee and Princess Alexandra Hospital have seen the number of 'avoidable' presentations cut by about a third since 2004."

Dee said the service was working collaboratively with the Divisions of General Practice, Aged Care Queensland and Residential Aged Care Facilities (RACF) to better support residential aged care workers.

She said this year's clinical education program focused on the top five topics identified by RACF staff: wound care, catheters, diabetes, palliative care and challenging behaviour management.

The service has recently received funding to expand the program across the Southside Health Service District.

The manual and a clinical education resource kit are now available to districts planning education programs for residential aged care staff.

Copies of the kit and the RACF Clinical Resource Manual can be obtained through Dee Jeffrey at the Brisbane South Community Health Service on 3275 6795.

Get a check-up – now!



The bus carrying the sexual health awareness advertisement.

New insight into babies' eye health

Getting a sexual health check-up is still too often seen as one of those embarrassing things that many people would like to put off to the distant future.

But a large bus advertisement on the Sun Bus No 102 in Cairns is encouraging anyone who is sexually active to do just that.

Dr Darren Russell, Sexual Health Service Director, Cairns and Hinterland Health Service District, said the advertisement would run until December.

He said the campaign, run by the Queensland Association for Healthy Communities, with Queensland Health funding, was in response to ongoing high rates of sexually transmitted infections in the Far North and a spike in new HIV infections which occurred earlier this year.

“Between December 2006 and February 2007, Cairns district experienced a surge in new HIV infections with the average annual rate of new infections occurring within this three-month period,” he said.

Specialists at the Townsville Hospital’s Neonatal Intensive Care Unit will be able to better assess the eye health of premature babies following a donation by Mining company Xstrata and an anonymous donor.

The new Retcam machine captures digital images of the eyes of newborn babies which can then be displayed on a computer screen, stored for future comparison, or forwarded to colleagues in other centres for discussion and second opinions.

Simone Ryan, the Townsville Hospital Foundation’s Manager, said there were many donors who supported health services in Townsville and Thuringowa and Xstrata had been one of the biggest supporters of the hospital in recent years.

“Many of those newly diagnosed with HIV had recently acquired the infection in the Cairns district.”

Darren said other sexually transmitted infections such as chlamydia and gonorrhoea also represent an increased risk to Queenslanders.

He said chlamydia had become the most commonly notifiable disease in Queensland with 11,933 notifications in 2006, an 85 per cent increase since 2002.

“Cairns has unfortunately followed this statewide trend,” he said.

“Chlamydia infection does not usually cause any symptoms in both men and women but, if untreated in women, it can cause pelvic inflammatory disease and infertility.”

In addition to practising safe sex by using condoms, the campaign encourages anyone who was sexually active to see their general practitioner, or visit the Cairns Sexual Health Service or Family Planning Queensland for a regular check-up.

The eyes of all babies at risk are routinely examined throughout Australia and early treatment is usually effective. The Retcam will allow better images to be stored for both diagnosis and prognosis.

Dr John Whitehall, Director of Neonatology, said that before having Retcam, specialists had to rely on hand written descriptions of what was happening with babies’ eyes.

“We are now able to look into the recesses of the baby’s eyes and capture accurate images,” he said.

“It’s a major step forward in diagnosing problems which regularly occur in premature babies.”

The more premature and the sicker a baby, the greater is the possibility of change at the back of the eye which can lead to blindness.

Drug links knowledge invaluable

A Bundaberg Hospital nurse gained invaluable knowledge and learnt more about the link between mental health and illegal drugs when he attended a national conference in Melbourne last month.

Russell Enright from the hospital’s Alcohol Tobacco and Other Drugs Services (ATODS) successfully gained a grant to attend the Anex Conference in Melbourne.

The conference, considered the premier harm reduction forum in Australasia, was attended by national and international experts as well as about 300 delegates.

Until recently, mental health and illegal drugs have not usually been spoken of in the same breath. The conference explored these links, known as dual diagnosis, which is an

area of interest for Russell.

A registered nurse since 1994, Russell started working in ATODS at Bundaberg Hospital in February this year.

He has been a mental health nurse in a number of different settings from acute/forensic mental health to community-based care.

“My experience in mental health has been used to great advantage in improving outcomes for my ATODS clients and this conference gave me more insight and solutions,” he said.

“In the drug and alcohol service I often work with clients with impaired physical and/or mental health.”

Queensland Health, through the BreastScreen Queensland Program, provides dedicated and accredited breast cancer screening services through a state-wide network of screening and assessment services.

Scheduled services

Mobile Services

Rockhampton: until 1 October, Barcaldine; 3-12 October, Springsure; 15-19 October, Capella; 29 October-14 November, Yeppoon.

Toowoomba: until early December, Warwick.

Townsville: until 19 October, Mount Isa; 22-26 October, Julia Creek; 29 October until 2 November, Richmond.

Relocatable Services

Bundaberg: 3-18 October, Wondai; 19 October until 3 November, Murgon.

Cairns: 1-3 October, Kowanyama; 10-11 October, Wujal Wujal; 15-17 October, Hopevale; 19 October until 2 November, Cooktown.

Gold Coast: until 18 October, Beenleigh; 22 October until 18 December, Beaudesert.

Ipswich: until 17 November, Goodna.

North Brisbane: until 9 November, Strathpine.

The BreastScreen Queensland Program continues to maintain extremely high standards of service and care.

Women can arrange a free breastscan by calling 13 20 50, for the cost of a local call, and will be connected to their nearest BreastScreen Queensland Service. Individual and group bookings are also available.

Contact: Cancer Screening Services Unit on 3234 1596.

infomatters

Musical insight into life's journey

A unique music competition giving people a special insight into the lives of people with a mental illness was held this month in Toowoomba.

In what is thought to be a first in Australia, competition organisers called on members of the community to perform a song that best illustrated Mental Health Week's theme this year - "Everybody's life is a hero's journey".

Paula Blomfield, Queensland Health social worker, who organised the event, said that songs, ideally written by the contestants, were performed at Grand Central Shopping Centre's main stage on 11 October.

"I came up with the idea of a singing competition because there is something quite powerful about expressing yourself in song, rather than the spoken word," she said.

"And people in the audience respond differently as well. Through melody and repetition, ideas can catch on more.

"The music program at the University of Southern Queensland - under coordinator Judith Crispin - agreed to come on board and lend their expertise.

"Through their networks, they provided judges and



Paula Blomfield shaking up interest in the music competition.

encouraged music groups and music students both at the tertiary level and schools to take part.

Dr Crispin said she was supportive of the project, saying it was a brilliant cause. The Schizophrenia Fellowship assisted in organising the competition.

State social workers meet

Twenty-two Queensland Health staff will give addresses at the inaugural state conference of the Australian Association of Social Workers Queensland and North Queensland branches in Yeppoon on 18-21 October.

The conference, with the theme Social Work: The Binders, The Separators and The Central Host, will be attended by social work practitioners, academics and post and under-

graduate students.

Janis Hinson, Director of Social Work, Royal Brisbane and Women's Hospital, will speak on When Two Worlds Collide: Social Work Practice with Trauma and the Complex Hospital Organisation - A work in progress.

Contact: eKiddna Event Management, phone 5548 6199, fax 3337 9855, e-mail info@e-Kiddna.com.au

Tackling the challenges

Good science will soon be flowing through our taps and into our homes - in the form of recycled water.

It's just one example of the sophisticated but highly practical science that was showcased by Queensland Health's Forensic and Scientific Services activities for National Science Week.

The week was commemorated from August 20 to 24 August at the Coopers Plains campus.

Highlights included Recycled Water Day, with key scientists from government and private industry tackling the

challenges of chemical and microbiological contaminants and setting agreed standards for water testing.

While prominent academics looked at emerging trends, new techniques, and the role of automation were showcased on Forensic Science Day.

National Science Week activities at Forensic and Scientific Services gave clients and the public a better understanding of the variety of work carried out by Forensic and Scientific Services. It was also an opportunity for staff from different disciplines to exchange ideas and experiences.

in retrospect

A review of some articles from previous Health Matters

April	Making best use of expertise Partnerships offer a new approach Advancement skills recognised	July	Queensland Health Statewide Leaders Symposium Consumers strong role in planning Proserpine Hospital approval rating high
May	Lessons on health care delivery Major commitment to transparency Special focus on Indigenous health	August	Strategic Plan 2007-2012 summary lift-out Meeting the challenges of Indigenous diabetes Protecting patients from adverse medical events
June	Record \$7.151 billion Queensland Health Budget Leadership Development Program under way Nursing career switch was an easy choice	September	e-health improves patient care and safety Staff survey encourages changes Queenslanders changing their lifestyles

diary

OCTOBER

Until	Nurse of the Year Campaign	13	National Herpes Day <i>Australian Herpes Management Forum</i> Phone: (02) 8230 3843
Nov	<i>Queensland Cancer Fund</i> Phone: 1300 656 585	13-14	Relay For Life (Maleny and Roma) <i>Queensland Cancer Fund</i> Phone: 1300 656 585
1-31	Girls Night In <i>Queensland Cancer Fund</i> Phone: 1300 656 585	13-19	National Week for Deaf People <i>Australian Association for the Deaf</i> Phone: 3357 8277
1	International Hepatitis C Awareness Day <i>United Nations</i> Phone: 3236 0610	13-20	Down Syndrome Awareness Week <i>Down Syndrome Association of Queensland</i> Phone: 3356 6655
1-5	Sock it to Suicide <i>White Wreath Association</i> Phone: 1300 766 177	14-20	National Carers Week <i>Carers Queensland</i> Phone: 3843 1401
1-7	National Hepatitis C Awareness Week <i>Hepatitis Council of Queensland Inc.</i> Phone: 3236 0610	20	World Osteoporosis Day <i>Arthritis and Osteoporosis Queensland</i> Phone: 1800 011 041
7-13	Haemophilia Awareness Week <i>Haemophilia Foundation Australia</i> Phone: 1800 807 173	22	Pink Ribbon Day <i>Queensland Cancer Fund</i> Phone: 1300 656 585
10	World Mental Health Day <i>United Nations and World Federation for Mental Health</i> Phone: (02) 9262 5111	28-3 Nov	Sleep Awareness Week <i>Sleep Disorders Australia (Queensland)</i> Phone: 3378 1610
12	International Arthritis Day <i>Arthritis Australia</i> Phone: 1800 011 041		

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(under Health Information/Events)