

# Auricle

EDITION 3 / 2019

A smiling woman with brown hair tied back, wearing a light blue scrub top and a black necklace with a silver circular pendant. She is holding a spiral-bound notebook. The background is a brightly lit hospital hallway with a whiteboard on the left and a sign on the wall.

## Our Code Yellow response and innovation

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*Healthy lesson in  
Aboriginal culture*

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*Consumer feedback shapes  
chemotherapy ward*



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*Small steps pave road  
to MND therapies*

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*Moulin Rouge Ball  
raises over \$200,000*

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## Fun facts

### Telehealth



IN THE PAST 12 MONTHS, **169** STAFF AT BARWON HEALTH HAVE PARTICIPATED IN:

**925** PATIENT APPOINTMENTS VIA TELEHEALTH;

ACROSS **35** SERVICES;

SAVING OVER **187,000KM** OF PATIENT TRAVEL;

AND **2330** HOURS OF UNNECESSARY AND STRESSFUL JOURNEYS FOR OUR PATIENTS AND THEIR FAMILY MEMBERS;

AS WELL AS **27,400KG** CO<sub>2</sub> EMISSIONS.

**343** INTERPRETER APPOINTMENTS HAVE BEEN ATTENDED VIA TELEHEALTH.

*Cover: Special Care Nursery graduate nurse Zoe Gill visited the Narana Aboriginal Culture Centre with her Indigenous colleagues.*



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Auricle is edited and produced by Barwon Health's Public Affairs and Communications Department.



## Message from the CEO

*With services back to normal after the cyber security incident, it's important to reflect and show appreciation for the efforts that have guided us through this challenging time.*

It's thanks to the enormous contributions of so many people that we have been able to stay on course and resolve this issue without significant impact to the majority of the community needs we serve as a health provider.

Over the past few weeks, staff and volunteers have performed an outstanding role in making sure our care to patients can continue as we normally would, along with our resident and community care. Barwon Health's patients, residents and community are always our first priority and I'm proud to say our staff have really stepped up and gone above and beyond to support the work we do. The commitment and innovation of our staff is what has allowed us to continue delivering the best possible care and they've shown we should have full confidence in their ability to get on with the job in any circumstance.

There are lessons to be learned and we will certainly be strengthening our ICT and cybersecurity in the future. We truly appreciate the ongoing patience, support and understanding we've received from the community and the families of our staff, as we've worked through this incident.

It's encouraging that we've been able to put the incident behind us and reflect on a year of great accomplishments with the Barwon Best Care Awards on 12 November, showcasing the best of the initiatives

and individuals staff have nominated for recognition. This was a great opportunity to celebrate our best examples of excellence in safety, quality care, education and innovation for staff and consumers.

We must also congratulate those recognised at the Victorian Public Healthcare Awards, including the team behind our PROMPT trial (read more on page 30), and the highly commended Aboriginal Health Team.

I encourage all staff to look through our Annual Report and our Quality Account, as each publication shows a different side of what has been taking place across Barwon Health over the past year.

Of course, there's much to look forward to in 2020, especially with the opening of Barwon Health North, which has been a topic of discussion recently as the site of our Annual General Meeting and Open Access Board Meeting on 22 November. It's been a long journey to get here, but we are excited to soon provide a range of much-needed services to the community in Geelong's north and I want to thank everyone involved in the project since it was first announced in 2014.

Frances Diver | CEO



## NEWEST PUBLICATIONS

The 2018/19 Quality Account and 2018/19 Annual Report were recently published and made available online. To find out more about what's been happening around Barwon Health, read these on the Barwon Health website > About Us > Publications.





The Barwon Health  
Medical Staff Group  
donated  
**\$10,000**  
to Medical Santo

## DONATED MACHINE MAKES WORLD OF DIFFERENCE

*A group of senior medical staff has helped a Vanuatu health service purchase an i-Stat point of care machine.*

The Barwon Health Medical Staff Group (MSG) donated \$10,000 to Medical Santo for an i-STAT point of care pathology testing machine. A Medical Santo spokesperson said the new machine had already been important during times of emergency and after hours when tests were needed quickly.

"We used to see around 300 to 400 patients a month, but we have been steadily increasing and now average around 1000 as we are becoming more known," the Medical Santo spokesperson said.

"People rely on us after we assisted during the 2017 and 2018 State of Emergencies when the volcano eruptions occurred on Ambae. We are so grateful to our volunteers and donor partners."

*Pictured: Medical Santo acting service manager Judith Anderson uses the donated i-Stat machine.*

## LEADING EDGE TECHNOLOGY INTRODUCED TO NUCLEAR MEDICINE TEAM

*Barwon Medical Imaging's (BMI) nuclear medicine team is providing the field's latest scanning technology on a new GE SPECT CT system – the most advanced in Geelong and the first of its kind in Australia.*

The GE 870 DR scanner was installed into a purpose-built area on Level 1 of University Hospital Geelong, co-located with the current ICT, with training beginning in September.

The new scanner offers increased image optimisation for accurate functional data and parameters not attainable via other imaging modalities. This improves lesion detection, identifying and monitoring neurodegenerative conditions, mapping of nodule diseases, and functional cardiac imaging.

A reduced radiation dose (roughly 50 per cent) compared to older SPECT systems will benefit patients and staff, with shorter scan times.



*BMI's nuclear medicine team began training with new equipment in September.*

## BARWON HEALTH WINS VICTORIAN HEALTH SERVICES CHALLENGE

*Our workers are officially the most generous in the country when it comes to blood donation!*

As part of the Blood Service's Red25 Health Services Challenge, Barwon Health took out the top spot in Victoria, donating more than any other health service with 198 donations saving 596 lives.

The Geelong Blood Donor Centre received 309 donations from local health service workers, nearly 40 more than any other donor centre in the country.

*Barwon Health took out the top spot in Victoria with 198 donations saving 596 lives.*



BMI staff member and blood donor Kim Moore.



*Deakin Black collaborates on one of the scenarios in the Interprofessional Twilight Challenge.*

## CLUB BELMONT TAKES TWILIGHT CHALLENGE

*Congratulations to Club Belmont (Belmont CRC) who took out the title of the most collaborative team in this year's Interprofessional Twilight Challenge.*

The fun and interactive annual event saw 15 teams from Barwon Health and Deakin University compete to crown the "most collaborative healthcare team", based on responses to a variety of simulated scenarios.

The challenge is an engaging opportunity for participants to practice interprofessional team-based problem-solving activities focused on improving client care.

## NEW TELEHEALTH PLATFORM

*Telehealth implemented a successful transition to the Healthdirect Video Call Platform on 2 September.*

The new system provides the same functionality, and initial feedback from clinicians and patients is that it easy to use and that they had no technical issues.

The new platform has some additional features (and future developments planned) that provide great tools to support services to provide care at a distance and an improved patient experience. These include sharing documents and making downloads available to the patient.

# OUR CODE YELLOW RESPONSE AND INNOVATION

*On 30 September, Barwon Health was one of several regional health services from across Victoria that experienced a significant cyber security incident. As a result, access to our usual IT systems and clinical apps was impacted and a Code Yellow was called, lasting several weeks.*

During this time, we saw staff rise to the challenge of adapting, taking on different roles, and implementing new processes to continue delivering high quality care to the community.

Here are some examples of the responses and innovations implemented by staff during the Code Yellow:

## **Pharmacy staff**

Pharmacy staff found innovative work-arounds to ensure patients were getting the right information. Records of logs and waiting times moved to paper and a staff member typed up medication profiles until systems were restored.



*The Pharmacy team.*



Leo Mithen from the Access and Resource Unit working in the Emergency Department



Outpatients NUM Dianne Day (centre) with nurses.



The Aboriginal Health team.

### Emergency Department (ED)

With clinical apps offline, executive assistants recorded ED patient information that could later be entered into digital files when systems were restored. The information included patient names, unique records, arrival and discharge times. The Access and Resource Unit also operated on the ED floor to liaise with the nurse-in-charge and the hospital bed manager. This allowed the nurse-in-charge to do more clinical work and the bed manager to focus on allocating patients to wards.

### Outpatients

Outpatients staff processes became completely paper-based, with new systems of triaging, reviewing and assessing about 400 patients daily. Given the changes, they managed minimal impact on patient rescheduling, even during the most impacted period of the Code Yellow.

### Customer Service and Admissions

Head of revenue and customer service Brett Jobling described his team's efforts during the Code Yellow as an example of staff modelling the Barwon Health values of commitment, innovation and compassion. He praised their willingness to switch processes and their ability to problem solve, as they worked closely with Health Information Services, IT and government reporting, putting their skills, knowledge and ideas on the table to find the best way forward.

### Community Palliative Care

Community palliative care staff usually provide their 24/7 service in a paperless environment. To continue offering support after hours, staff developed a series of processes to ensure safe clinical handover to external providers, along with the same excellent care to clients.

### Community Call Centre

With clinical apps offline, a call centre was set up to support the community in finding information about rescheduled appointments, locating family members and general enquiries. The phones were manned by staff from various areas, including Finance and Aboriginal Health.

*Outpatients staff managed minimal impact on patient rescheduling, even during the most impacted period of the Code Yellow.*



The Customer Service and Admissions team.



The Palliative Care team.



THE HEART OF THE MATTER

A MESSAGE FROM THE

BOARD  
CHAIR



*I had many reactions on 30 September when I heard that Barwon Health had been hacked. These included what would this mean for our patients, clients and aged care residents, for our staff, for our city. How did this happen in the first place? Then my thoughts jumped to what needs to be done right now. How do we move forward? How can we fix this quickly and ensure it will not happen again?*

**BRIAN COOK** | BARWON HEALTH BOARD CHAIR AND GEELONG FOOTBALL CLUB CHIEF EXECUTIVE

In every trial we face, there is an opportunity to rise above the challenge and show what we are truly made of.

As the chair of Barwon Health's Board, I'm incredibly proud of how staff and volunteers have responded in this time. I feel I'm able to provide an outsider's perspective on their incredible efforts around the region over the past month.

Since that afternoon when systems and services went down, I have witnessed many workarounds and innovations from staff and volunteers that ensured patients were still cared for. I've been blown away by everybody's ability to get on with the task at hand, despite the challenges. Whether they

are nurses, doctors, volunteers, administrative staff, management, clinicians or cleaners, everyone across Barwon Health had their workload impacted during the incident.

To see so many people work together to overcome these challenges with such a positive attitude has honestly been an inspiration, with eyes set on the collective goal of delivering safe and high quality healthcare to Geelong and the surrounding regions.

When I joined the Geelong Football Club in 1999 as chief executive, my immediate focus was on changing the internal culture. Being able to achieve this has been my proudest achievement in my time with the Cats, knowing how much it would influence our

future success and allow us to set a new standard for the club.

We have ranked first in terms of culture and engagement for several years, according to league surveys, and even in difficult times, the attitudes around the club have been incredibly positive.

I believe that maintaining that mindset throughout a long and challenging season is a sign that we are on the right path for success, and in a similar way, Barwon Health's cyber security incident showed that staff truly care for each other as they work towards a common goal.



*Staff have shown we should have full confidence in their ability to get on with the job in any circumstance, doing everything possible to keep the community safe and healthy.*

Much like our football club, they're driven as a team, they adjust to different roles when asked to, and they're focused on the community around them.

It would have been easy for staff to complain or feel like the extra work required was unfair, but the feedback about our staff response during the crisis has been overwhelmingly positive.

I have learned about many examples where people simply adapted to the circumstances to best support Barwon Health's vision, even taking up additional or different roles to help ensure positive outcomes.

We had administrative staff redeployed to help keep paper records in the Emergency Department. Some IT staff spent the early days delivering bulletins with updates and workarounds, while staff from finance and the Aboriginal Health departments worked the phones to assist the community with enquiries about their appointments and loved ones receiving treatment.

So many people worked around the clock to continue delivering care to the community, and sometimes these admirable efforts



*Barwon Health Board Chair and Geelong Football Club chief executive, Brian Cook.*

are easy to overlook when there is so much focus on getting services back to normal and finding the criminals responsible for the cyber security incident.

There are certainly lessons to be learned from this experience. The Barwon Health Board will be doing what we can to support the organisation as it strengthens cyber security. As a Board, we truly appreciate the ongoing patience, support and understanding Barwon Health has received from the community and the families of staff members working through the incident.

As Geelong residents, I believe we should be truly grateful to have an organisation with staff so willing to go the extra mile to

take care of our health needs. Over the past month, staff and volunteers have performed an outstanding role in making sure patients and aged care residents are able to access their usual standard of care.

It has been the commitment and innovation of Barwon Health staff that has allowed our community to continue receiving the best possible care, with only a small number of rescheduled appointments and elective surgeries.

These staff have shown we should have full confidence in their ability to get on with the job in any circumstance, doing everything possible to keep the community safe and healthy.



# Healthy lesson in culture

A cultural awareness event was run for Indigenous cadets and nurse graduates at the Narana Aboriginal Culture Centre.

*Barwon Health hosted a cultural development day for young Aboriginal healthcare staff from across the state on 4 September.*

Members of the Victorian Aboriginal Graduate and Cadet Network and representatives from the Department of Health and Human Services visited the Narana Aboriginal Culture Centre for activities followed by a networking opportunity.

Cadets and graduates took the chance to further develop an understanding of Aboriginal culture, strengthening their identity as young Aboriginal people, leaders, and health professionals.

Zoe Gill is a graduate nurse working in Barwon Health's Special Care Nursery and said she enjoyed the experience of meeting other Aboriginal healthcare staff from across Victoria.

"My mother was adopted and her biological mother was Aboriginal, so this is all learning to me," she said.

"It's still a new experience and I'm enjoying finding out about Aboriginal language, the understanding of history and culture.

"There's a lot of people from the community who come in as patients, so it's good to be able to help them and feel a sense of connection.

**"I think it's important to express culture and it can change your perspective on healthcare." – Zoe Gill**

"I think it's important to express culture and it can change your perspective on healthcare."

The day was organised by Aboriginal Health Unit manager Renee Owen, and Nursing and Midwifery Graduate Program co-ordinators Kate Lake and Kelly-Ann Humphrys.

# Catwalk dazzles at 10-year fashion celebration

*Catwalk for Cancer celebrated its 10th year of raising funds for Barwon Health's Andrew Love Cancer Centre on 31 August at GMHBA stadium.*

Raising over \$42,000, more than 400 guests were treated to a sparkly affair of the latest fashion from local designers and fashion outlets.

Local model Hayleigh Grima took part in the runway show and was pleased to help the cancer centre and staff that made a difference for her brother Paul, who was a patient for 13 years.

Paul began treatment for Aplastic Anaemia when he was only 11-years-old and he became the face of the #ProjectLove Appeal in 2015, but passed away the same year at just 24.

The Barwon Health Foundation brought stylist Deni Todorovic on board as the event's creative director to ensure the 10-year celebration was one to remember.

The theme of *Diamonds Are Forever* was inspired by the diamond as the stone of the 10-year anniversary.

Thanks to the event's major sponsors Cancer After Care Group Geelong, Blondie Salon, Gartland Property, Charles Rose Jewellers, IGBY Productions, and All About Travel with Josie.

**Raising over \$42,000, more than 400 guests were treated to a sparkly affair of the latest fashion from local designers and fashion outlets.**

*Right: Model Hayleigh Grima's late brother Paul was a face of the #ProjectLove Appeal in 2015.*



## REDUCING CARBON FOOTPRINT OF EDUCATION

*Clinical Education and Training (CET) staff have made a commitment to reducing their carbon footprint.*



*Clinical Nurse Educators Georgie Richardson and Julia O'Brien encourage greener choices.*

More than 900 polystyrene cups were going to landfill every month and the team decided it was time to take action.

Paediatric clinical nurse educator Julia O'Brien led the charge, investigating options to reduce, reuse and recycle.

**More than 900 polystyrene cups were going to landfill every month and the team decided it was time to take action.**

"I was getting ready for staff coming to attend a short course and started questioning why we were supplying non-recyclable polystyrene cups," Julia said.

"It's important to change our mindset and bring a water bottle, mug or keep cup to reduce our waste. We have already adapted well to the plastic bag ban at supermarkets."

CET replaced the polystyrene and plastic with bio cups and bamboo spoons – a small change that will make a large impact to the department's waste.

The team has also enabled digital certificates in Grow, eliminating the need to print hard copies for course attendees.

**How can you help CET with the war on waste?**

Please bring your own drink bottle, keep cup or mug to your next training session.

If you forget, biodegradable cups and bamboo spoons are available.



# Thirty years of Geelong renal services

Some of the 2019 Renal Services Unit team at the Swanston Street site.

*This year, Barwon Health's Renal Services celebrated its 30th anniversary, with many staff hitting milestones of 20 and even 30 years of service.*

Three long-serving staff members have reflected on their years working in renal health, demonstrating the evolution of the Geelong service, the technological advancements in healthcare, and the growing demand for life-changing dialysis treatments.

## **INNOVATION IN RENAL SERVICES**

### **Associate Professor Christine Somerville, Barwon Health renal services director - 25 years at Barwon Health**

When I joined the renal unit in the mid-1990s, it was still reasonably small, but it's grown with the hospital to meet the needs of people with kidney disease in a growing community. I miss the small unit where you knew everyone very well, but I think we are still a pretty cohesive unit that works well as a team despite this growth. Renal Services is a team of doctors, nurses, social workers, dietitians, technicians and patients working closely together, which has made it a pleasure to work there over the years.

We were the first regional dialysis unit in Victoria. Before John Agar set up our haemodialysis unit in 1989, people were travelling to Melbourne three times a week. Although we're a relatively small unit compared to some in Melbourne, we have developed a good reputation in our field. Led by Professor Agar, we've been at the forefront of green dialysis to make our unit more ecologically sound. We use thousands and thousands of litres of water, so in the early days during the middle of the big drought, we started reusing discarded water to flush our toilets and water the Barwon Health garden. The Geelong council even started using our water. More recently, we've been exploring ways to safely minimise the use of plastic and reusing it to minimise our carbon footprint. We have been innovators with nocturnal home haemodialysis, as the first unit to offer it in Australia after John Agar and Rosie Simonds brought it back from a study tour in Canada. I'm proud that we've been able to remain at the forefront of this field.



Rotary House was the first site of Barwon Health's renal services in 1989.



Founding renal service staff members Rosie Simmonds and Professor John Agar with dialysis patient Steve Coleman at Rotary House in 1989.

## THE EVOLUTION OF RENAL SERVICES

### Rosie Simmonds, nurse practitioner and Renal Home Therapy nurse unit manager – 30 years at Barwon Health

I am lucky enough to have been here from the very first day of the opening of Rotary House and I have seen the unit develop and grow into the wonderful service it is today, providing world-class care to the Geelong community. Renal nursing is a very special type of nursing – you have relationships with people quite often over very many years. I have cared for some of my patients for over 20, sometimes 30 years. That is a very special relationship, because of course I know them as well as they know me and my family.

The unit was started in February 1989 after a lot of hard work, commitment and lobbying by local family and friends who were affected by chronic kidney disease. The renovation of the Rotary House building and site at 325 Ryrie Street was carried out as a combined project with many of the Rotary Clubs of Geelong for the 1988 Bicentenary. When it opened, we had eight dialysis chairs, six patients and three nurses (with two still working in our Renal Service today). In the mid-1990s, the Geelong Hospital Renal Service assisted with the opening of dialysis units in Lorne, Apollo Bay, Colac, Terang and Timboon, as demand for dialysis facilities in these rural communities became apparent.

The dialysis units in Lorne and Colac continue to dialyse people in their communities today, supported by the University Hospital Geelong

Renal Service, while the Portland District Hospital Dialysis Unit transferred to come under our service this year. An acute dialysis unit opened in the hospital eventually finding a permanent home on level 4 in Kardinia House. This unit provides dialysis for the more frail and sick patients and our Barwon Health inpatients. In 2018 it relocated to a renovated Birdsey Wing 5. When the renal service outgrew Rotary House in the late 1990s, the dialysis units in South Geelong and Newcomb Community Health Centre were established and today they still provide dialysis three times a week to people with chronic kidney disease in a community-based setting.

The Geelong Hospital Renal Unit was the first in Australia to run a home haemodialysis program that advocated for overnight, extended hour and more frequent dialysis – nocturnal dialysis – and soon became known as one of the world leaders in this area, with many publications and accolades in this area of treatment. We've continued to grow with the demand, even in recent years, with the home dialysis service moving into the new purpose-built Renal Services building in Swanston Street in August 2018 and with the opening of the new dialysis unit within Barwon Health North in 2020.

## CHANGES IN DIALYSIS

### Richard Knight, renal services operations manager – 20 years at Barwon Health

When I started we had about 50 or so patients on dialysis and now we're up to about 160. With the rising incidence of diabetes, there's

been a parallel with kidney disease and the number of people needing dialysis. The average age of our patients is just beyond 70 now, so with people living longer we tend to see more patients deciding to take dialysis as an option. With the exception of the past two years, our growth has been very steady and we've got data since 1994 showing the steady rise of patients needing dialysis, so our expansion of more sites and services has been keeping up with the population growth and our ageing community.

The dialysis machines have become more user-friendly and biocompatible than they were years ago, making them better for home dialysis. We're proud to be a forerunner for home dialysis, as the first unit in Australia to start nocturnal haemodialysis. The more people dialyse, the better they're going to be, as this better replicates normal kidney function. Regardless of what the technology offers, the demand will always be there because the majority of patients will only have dialysis as an option. There's certainly been a move towards trying to encourage more patients to do home dialysis, which has been successful, but it's still a challenge to get patients to accept that responsibility. We're training them to become independent in operating this machine next to their bed, putting needles in their arm and controlling their own treatment. Dialysis is not for everyone and we've learned for some of the frailer patients it may offer more burden than benefit. Therefore, nephrologists have become more comfortable and confident at having those difficult conversations about whether to dialyse or not dialyse.



THE HEART OF THE MATTER

# A DOSE OF CARE

*International Overdose Day on 31 August acted as a reminder to consider the lives lost to avoidable overdose across the globe, and how we can reduce these deaths in our community. The use of psychoactive drugs, which impact the brain to temporarily change perception, mood, consciousness and behaviour, has been occurring since ancient times, in all cultures, men and women, young and old, rich and poor. Attitudes towards the use of these chemical substances have created stigmas that perpetuate myths about these people.*

**CRAIG HARVEY** | MENTAL HEALTH, DRUGS AND ALCOHOL SERVICES HARM REDUCTION CO-ORDINATOR

Heroin in particular has been the focus of countless media portrayals, from the television to newspapers, and it is rarely painted accurately. The most common depiction of someone who uses this drug, or one of its many cousins, is one of crime, violence and abject poverty. While this can be true, the reality is often markedly different.

Recently, attention has turned to prescription opioids. These medicines have been prescribed for decades and play an important role in vital pain relief for many people. Yet, they are now a major contributor

to overdose deaths, killing four Australians a day - far more than the number of lives lost on our roads. Marketing campaigns from government-funded agencies should be applauded for their efforts in reducing the road toll and the destruction it leaves in its wake, but we must now turn equal, if not greater, attention to this other widespread tragedy of opioid dependence.

I started my healthcare career in the late 1990s, with a particular focus on those who used drugs. I can still recall those early times of walking around my city

late at night, talking with the homeless, the disenfranchised and lonely, huddled up against the cold. Housing was near impossible to get and access to medical care was limited, even before you consider the stigma associated with drug use that kept most people from entering services in the first place. What I found was a rich and diverse melting pot of humanity on the streets. Fine art jewellers, business operators, fathers, mothers, and former shop owners were all amongst those the system did not accommodate.

*We need to persist with our efforts if we want to stop these preventable deaths, which now far exceed the loss of life from road trauma in Victoria.*



*Mental Health, Drugs and Alcohol Services harm reduction co-ordinator, Craig Harvey*

I still have a photograph of these individuals, sitting in my desk drawer. It shows me, in my early twenties, having dinner with them at a dining table in a hostel together, before they returned to the streets, to the squats and doorways. Most of the people in the photo are dead now. Nearly all of them died a lonely and miserable, and most importantly, preventable death from opioid overdose.

In 1961, a medicine to treat opioid overdose was patented, called Naloxone Hydrochloride, or Narcan. It was approved some 10 years later in the USA and has become an extremely cheap, generic medication. The World Health Organisation lists it as an essential medicine and it is available without a prescription, simply purchased over the counter of a local pharmacy.

It is estimated that roughly 70 per cent of all fatal overdoses are witnessed by another person, who can be a potential lifesaver with the right training and the medicine to help. Unfortunately, it took more than another decade for Naloxone to eventually find its way into the hands of those who need it most – people who use substances, take opioid pain relief, or their families, friends and carers.

Australia began Naloxone programs most earnestly in 2011, which was followed by a Victorian Government-funded pilot program in 2013 to train the Alcohol and Other Drugs workforce in providing this intervention. Barwon Health began its Naloxone program in 2014 and since then we have trained more than 900 people to help prevent overdose deaths. Most importantly, we have recorded more than 190 occasions where Narcan saved a life and expect there have been many more we don't know about.

However, we still have a long way to go. Despite halving the heroin-involved fatalities in the region between 2016 and 2017, we have seen a rise over the past year.

The focus of our work for the future will be broadening the range of programs to include homeless individuals, those who do not access mainstream services such as people from Aboriginal and Torres Strait Island backgrounds, and those who may not know they are at risk, such as prescription opioid patients. We need to persist with our efforts if we want to stop these preventable deaths, which now far exceed the loss of life from road trauma in Victoria.



# ED video shows wide impact of trauma

Emergency staff volunteered to simulate a resuscitation scenario in the road trauma education video.

*Barwon Health has produced a short film highlighting the impact that road trauma has on its victims, their families, and emergency workers.*

The narrative production was filmed at University Hospital Geelong's Emergency Department and shows staff attempting to resuscitate a 20-year-old man involved in a road accident, while telling the true story of a physician who lost his teenage brother in a car crash.

The video, which surpassed 110,000 views on Facebook in its first week, was produced for an event called You Just Never Know. The road trauma awareness session was held at Geelong Performing Arts Centre on August 19 with an audience of more than 1200 teenagers.

The sessions aimed to raise awareness and provide education around the dangers of irresponsible driving, targeting Year 11 and 12 students from Geelong region schools who are starting to make important decisions as drivers and passengers.

Speakers at the event included representatives from Victoria Police, Geelong Magistrates' Court, Ambulance Victoria, Channel Nine, Geelong Football Club and a road trauma survivor, with support from Geelong Advertiser.

Emergency Department director Dr Michael Sheridan said the video, filmed and produced by Barwon Health's Public Affairs and Communications team, conveyed the impact road trauma could have on families and emergency workers, as well as the victims.

"Our video was attempting to highlight that road trauma touches everyone in the community," Dr Sheridan said.

"It shows the impact road trauma has on so many different people and we're pleased to see the video has now resonated with a wider audience on social media.

***"It was really powerful to see the multi-disciplinary approach where people from different emergency services and organisations had given up their own time to positively impact the community for years to come."***

"I thought the presentations and speakers at the live event complemented each other really well and the impact was palpable within the room.

"We were happy with the feedback we received from teachers, students and from Victoria Police.

"It was really powerful to see the multi-disciplinary approach where people from different emergency services and organisations had given up their own time to positively impact the community for years to come."

 <http://bit.ly/youjustneverknow>



# DAVID EDEY'S STORY

(EXCERPTS FROM THE VIDEO INTERVIEW)

*My name's David Edey, I'm an emergency physician, and I lost my brother to road trauma on the eve of my 18th birthday.*

The day my brother died, he'd been out playing sport with mates, and unfortunately the driver of the vehicle he was travelling home in was intoxicated and ran off the road into a river where my brother drowned.

I had driven across this bridge two hours before on a foggy night. I was in bed and I remember footsteps on the driveway thinking it was my brother coming home, but it was a knock on the door and there were two policemen there. I remember their words, I remember my mother sobbing, and I remember seeing my father cry for the first time. It's something I will never forget.

The impact of my brother's death on my family is hard to estimate. My parents are elderly but they still grieve for him and we think of him every day. It's something you never get over. As a parent myself, I cannot imagine losing a child to trauma. It's bad enough losing a brother.

Emergency nurses and doctors go to work every day knowing we could encounter severe trauma or similar tragedy. Treating a severe road trauma patient is often the most challenging thing we can do. Staff often question their own performance and decision-making when a patient dies, despite everything we've done for them. The overwhelming feeling amongst staff is a sense of waste.

In the end, we like to think we've made a difference in patients who survive and even to relatives of patients who don't. I can put myself exactly in those parents or relatives shoes and identify exactly what they're going through. I hope that helps me relate to them at the time, but it doesn't make it any easier.

It's absolutely vital that young people make good decisions on the roads, whether you're a driver or a passenger deciding who you choose to get in a car with. One poor decision, one error of judgement can affect your life or the lives of others for years and years to come.

My message to young drivers is that you just never know when your next decision may change your life, or someone else's, forever.

*"My message to young drivers is that you just never know when your next decision may change your life, or someone else's, forever."*



*Emergency Department physician Dr David Edey featured in the video, talking about the impact of losing his brother to road trauma and what it's like to be involved in an emergency resuscitation process.*



**Year 11 student at Surf Coast Secondary, Kayla Hardy –**

*"This program was really good because it makes people think – if it hasn't happened before that doesn't mean that it can't. I liked that they had different perspectives, with real life situations and how it affects not just the families, but the paramedics and the people involved. At a young age, you don't think about the consequences and you think you're bullet proof."*

**Surf Coast Secondary assistant principal, Erin Wright –**

*"It was a good reminder to students about the dangers of complacency when it comes to making decisions about driving. It's not about shock tactics for young people – it's about the reality that they really need to think about what they do when they're on the road. I think all of our young people coming out of the theatre were really sombre and thoughtful. I know when I was at school some things really made a difference and I can see this program really making a difference when it comes to whether they make the right choices or not in the future."*

*Left: You Just Never Know: Dr Michael Sheridan speaks to students at the Geelong Performing Arts Centre event run by Victoria Police.*



## Hospital's spe-shell attraction

Many visitors to University Hospital Geelong are shell-shocked to discover the existence of a turtle enclosure on level 1.

Originally built in the 1980s, the turtle pond enclosure was created by hospital staff including gardeners, plumbers and electricians. With the original front entrance of the hospital just along that corridor, the turtles were a popular attraction to visitors as they entered the site. The area is now part of Barwon Medical Imaging (BMI).

The inhabitants – eastern long necked turtles – have all been donated by the community and there are currently eight turtles who call the area home.

To assist with keeping their shells healthy and to prevent bone disease, Barwon Health gardening staff installed a UVB lamp: a little area for the turtles to stay warm and provide essential light for vitamin D3. The gardeners are also responsible for ensuring the turtles are fed and the enclosure is kept clean.

As they come out of winter hibernation, their appetites increase and the turtles are fed their staple diet of chicken livers,

which have a coating of calcium powder for extra nutrients. They are fed once a week and will also graze on tadpoles, insects and worms. Turtles don't have teeth so they tear their food apart with their front claws.

Over summer, the turtles spend the bulk of their days either in the pond or sunbaking on its edge. Turtles can lay still for hours at a time and on many occasions, Building Services have been called by BMI staff worried the lack of movement signifies the turtle is dead! At one point, the turtles had their own emergency hotline with BMI staff constantly requesting someone to check on them.

**Turtle-y fun fact:**  
**When threatened, the eastern long necked turtle can emit pungent secretions from its glands.**

While there have been many turtles come and go over the years, they've never officially been named, except one – he was Private Ryan, as he only had three legs.

One requirement of donating a turtle is that it needs to pass a vet check. Because turtles carry diseases, staff need to ensure they are not adding an ill turtle to the enclosure, which is also why they are behind glass and not accessible to touch.

## IMPACT SHOWCASE IN SUPPORT OF RESEARCH MERGER

The inaugural iMPACT Showcase was held on 11 September as a keystone event to support the future merger between two of Deakin University's most productive strategic research centres.

The centre for Innovation in Mental and Physical Health and Clinical Treatment (IMPACT) and the Centre for Molecular and Medical Research (CMMR) have conducted much of their research in close collaboration with Barwon Health and will form a new institute – the Institute for Mental and Physical Health and Clinical Translation (IMPACT) in an important step for the future of research in the region.

Speakers at the event included the Institute's scientific director Professor Michael Berk and deputy director Professor Ken Walder, Deakin University's vice chancellor Professor Iain Martin, deputy vice chancellor of research Professor Julie Owens, and Barwon Health's chief executive Frances Diver.

Ms Diver spoke about the ongoing excellence of the research conducted within the centres and the potential for continual collaboration to further benefit our communities.



IMPACT Director Prof Michael Berk, DVC (Research) Prof Julie Owens, vice chancellor Prof Iain Martin, Centre for Molecular and Medical Research director Prof Ken Walder, and Barwon Health chief executive Francis Diver. Photo credit: Deakin University

## Introducing Barwon Health's Motor Neurone Disease Clinic Team

Barwon Health's Progressive Neurology Clinic has been rebranded as the Motor Neurone Disease (MND) Clinic to emphasise the service's core business in providing MND care.



The Progressive Neurology Clinic's allied health team (back to front, left to right): Jennifer Buchanan, Lee Fatone, Cheryl Vanderkaay, Diana Ormeno, Renee Heard, Ingrid Swain, Katie Hurst, and Jeanette Wallish.

Demand for the specialist service has increased rapidly since opening in 2012, allowing MND patients to access treatment closer to home in Geelong by working with regional and rural health services to provide secondary consultation.

Clinic co-ordinator Jeanette Wallish said staff were privileged to hold families' hands as

they navigated the challenges of the rapidly deteriorating disease.

"While we wait for a cure to be discovered, the numbers of people being diagnosed are increasing," she said.

"We partner with Austin Health's Victorian Respiratory Support Service, which comes

down to Geelong once a month, as well as MND Victoria, Fight MND, Palliative Care services, NDIS and many Barwon Health teams.

"We have a new name – but we will always assist where we can to provide advice regarding referral options for people with other progressive neurological conditions."



Ken Trevaskis is a regular at the Transit Lounge - even when he's not receiving treatment, he visits to say hello to the friendly staff and volunteers.

## A FRIENDLY TRANSITION HOME

*After a year in action, University Hospital Geelong's Transit Lounge is making patient discharges as smooth as possible.*

Patients have provided positive feedback about the lounge's convenient location near the hospital entrance and the welcoming staff who can give nursing care when necessary.

Geelong resident Ken Trevaskis has been a patient at University Hospital Geelong every few months over the past two years, receiving treatment for prostate and bowel cancer, as well as an eye condition.

He encouraged others to utilise the Transit Lounge service and enjoy the smoother transition home in the care of friendly staff and volunteers.

"I've been a patient through the Transit Lounge four times, but I always come in here when I have appointments or I'm visiting friends because they make me feel welcome," he said.

"They always talk to me and make me a coffee. It's different to being in a bed on a ward because you can relax and the staff have time to chat when they're not taking care of you.

"A lot of people are still learning about the Transit Lounge, but I think it's very important."

While patients wait for their ride home, they can receive their medical certificates and discharge medications from the nearby pharmacy. Staff and volunteers can provide beverages and food as patients relax, with newspaper, magazine and TV options.



# CONSUMER ENGAGEMENT

*Barwon Health's Consumer Engagement program gives a voice to patients and consumers of the health service, ensuring the community's needs are being met and information is conveyed in relatable ways.*

*Below: Consumer engagement manager Rebecca Kress speaks at an information session in August.*

Consumer engagement manager Rebecca Kress runs two key programs that use patient and carer experiences to shape the health service – WISE (Written Information Simply Explained) and the Consumer Representative Program.

*"We want to make sure the people utilising our healthcare service are also the people influencing the way in which the service functions," she said.*

*"In the past 12 months, WISE sessions have evolved to invite staff who have submitted information to attend workshops and witness the consumer input and insights that lead to improved consumer communication.*

*"Meaningful engagement with consumers is crucial for developing and improving services that meet the needs of consumers, and it is critical that consumers and carers are meaningfully involved in decisions at all levels in Barwon Health.*

*"Whether it is consumer representatives talking about their own healthcare, involving consumers in decisions regarding service design and delivery, or influencing decisions on governance, policy and planning at the organisation level, there are so many positive outcomes from our program that couldn't have happened without talking to people with experience as patients."*

*Some practical examples of improvements made via consumer engagement include pregnancy information on the maternity services microsite, adding optional privacy screens to the Andrew Love Cancer Centre chemotherapy day ward, and introducing orientation boards for patients experiencing delirium.*

*A detailed recruitment process takes place to select consumer representatives and key contact staff who will be involved with an initiative or project. Following their involvement, the key contact and consumer representative are required to complete an important evaluation to help Barwon Health learn from, improve, and promote great consumer engagement examples.*



*"We want to make sure the people utilising our healthcare service are also the people influencing the way in which the service functions,"  
- Rebecca Kress*



# Consumer feedback shapes chemotherapy ward

*Justine Martin has been a Barwon Health consumer representative for about two years, using experiences as a patient receiving cancer treatment.*

*Experiences as a mystery shopper and a patient receiving cancer treatment have made Justine Martin the perfect person to help shape various services at University Hospital Geelong.*

Consumer representative Justine was an instrumental voice in the refurbishment of Barwon Health's Andrew Love Cancer Centre chemotherapy day ward this year, using her familiarity with the area as a patient over the past couple of years.

Now in remission, she returned to the day ward in September to receive antibodies via Intragam infusions, after originally being treated for melanoma, chronic lymphocytic leukaemia, and small lymphocytic lymphoma.

"About two and a half years ago, I was having treatment in the Andrew Love Cancer Centre and had a couple of bad experiences in the hospital, so I thought my experiences could help improve patient care," she said.

"I was a mystery shopper for 13 years evaluating customer service, so it was a natural progression to become a consumer representative."

Justine said she had been involved in about six Barwon Health committees, giving feedback and shaping projects including the chemotherapy day ward refurbishment, integrated cancer services, health and literacy, and food services.

Now as a returning patient to the day ward, one of her suggestions is on full display, with optional screens to provide patients with privacy during treatment.

"I had a Hickman line in my chest when I was going through chemo and I remember looking across at an elderly gentleman having his own treatment. We were both uncomfortable and I thought we should be offered some privacy screens.

**"I didn't expect I'd be back here, but it's rewarding to see I've made a bit of a difference to other people's lives."**

"I didn't expect I'd be back here, but it's rewarding to see I've made a bit of a difference to other people's lives.

"We have a very good facility here, but there are always improvements.

"I definitely encourage other patients and carers to get involved in the consumer rep program. If clinicians don't know what their patients are experiencing, how can a problem be fixed?"

**To get involved in the Consumer Representative Program as a patient or carer, contact [rebecca.kress@barwonhealth.org.au](mailto:rebecca.kress@barwonhealth.org.au).**



# AT THE MOVIES WITH SAM



## THE LION KING

Rated PG. Starring Donald Glover, Beyonce, Seth Rogen, James Earl Jones

### The plot

A young lion prince flees his pride after a family tragedy and experiences a 'no worries' life in the jungle. All the while his pride is pushed into ruin by his evil uncle's unwavering determination on being the rightful king. A reimagining of the original Disney animation replayed in full CGI glory, with modern technology making you almost convinced this is a wildlife documentary rather than an animated film.

### Best bits

Visual experience.

### Favourite characters

Pumbaa and Timon are able to up the humour, as James Earl Jones reprises his original Mufasa role, allowing for a beautiful reminder of the original film.

### Any weak bits?

If you have seen the original Disney animation as many times as I have, you might just feel like it is the same again (which it is). The littlies may bore of the documentary style and could be terrified of the hyenas who have lost their cute appeal in this version.

### Hit or miss?

Hit for the newbies, memories for the old.

### Rating (1-5)

★★★★ for theatrical beauty.

**Sam Napier is a Barwon Health Clinical Application Specialist, Staff Activities Club treasurer, and movie buff.**

NOW AVAILABLE ON BLU-RAY



Past and present Gretta Volum Centre staff celebrate 30 years of operation.

## Gretta Volum Centre celebrates 30 years

Past and present staff of the Gretta Volum Centre celebrated its 30 year anniversary on 14 June.

Opened by Premier John Cain in June 1989, the Gretta Volum Day Stay Centre was made possible thanks to a \$500,000 donation by Geelong charity worker and active community member, Margaret 'Gretta' Volum (nee Kernot).

More than 7500 operative procedures are performed annually, compared to 3000 when the centre first opened.

Receptionist Shirley Lyon is one of the original staff members from 1989 and said the biggest change she had witnessed in three decades was the advances in technology.

"Originally there was only one small computer here for theatre data entry that reception staff entered each evening," Shirley said." Also, the increase in patient numbers and the flow of patient journeys at the Gretta Volum Centre is now more streamlined, with less waiting time before and after care."

More than **7500** operative procedures are performed annually, compared to 3000 when the centre first opened.

## DEATH CAFÉ BROUGHT TO LIFE

*The Barwon Health Death Café helped educate and increase death literacy on Dying to Know Day, August 8.*

About 50 people from the community attended at Pako Raw, in Geelong West, as Dignity Therapy volunteer Alyson Welch introduced the concept and the history of the Death Café over coffee and cake.

Death Cafés have helped relax the taboo of speaking about death, particularly with strangers, and encouraged people to express their own wishes for after they die. The open-ended discussions also provide an avenue to express thoughts about one's own life stirred up by the death of a family member.

**Death Cafés have helped relax the taboo of speaking about death, particularly with strangers, and encouraged people to express their own wishes for after they die.**



*Workplace resilience expert Michelle Bihary teaches healthcare workers about "compassion fatigue" at the first of four workshops.*

## Staff take lesson in professional resilience

*About 170 health workers from the Barwon South West region learned ways to improve professional resilience and address compassion fatigue, with four workshops run by Barwon Health Clinical Education and Training.*

The Department of Health and Human Services (DHHS) generously supported the events in June and July, which were presented by workplace resilience expert Michelle Bihary.

The sessions were designed to build emotional intelligence, stress management and mindfulness, manage own and others' emotional triggers and other resilience-building strategies.

With extensive experience as both an occupational therapy clinical specialist and leader in the public and private sectors, Michelle spoke about the unique challenges facing the health workforce.

Community OT senior clinician Kate Ingwersen said she enjoyed the pace and content of the workshop, with several strategies she could immediately try out.

"It provided a great opportunity to listen to colleagues and normalise the reactions clinicians are having with the current pace of complex, changing work practices and the effects of this on work life balance," she said.

"I particularly enjoyed the discussions around discretionary energy, the reluctance of clinicians to offer compassion to themselves whilst prioritising giving it others, and the importance of self-monitoring risk factors for professional burnout.

"It reminded me that many of the professionals I work with are experiencing high levels of stress and that I need to check in more regularly and support them in developing strategies to support themselves."



THE HEART OF THE MATTER

# SMALL STEPS PAVE ROAD TO MND THERAPIES

*As a neurologist, my area of subspecialty interest is motor neurone disease (MND), a progressive neurological disorder, currently with no effective therapies that halt disease progression.*

ASSOCIATE PROFESSOR PAUL TALMAN | DIRECTOR OF NEUROSCIENCES

When you can't affect a change in the outcome, it becomes about helping the patient understand what's happening to them and making their journey through that disease the best it can be. While there is not yet a cure, there are a lot of supportive therapies that can be used to manage the symptoms caused by progressive motor paralysis.

June 21 was Global MND Awareness Day and naturally the conversation around the disease is often about finding a cure. While a cure is always the goal, we also need to understand it's not going to be a quick fix or an overnight discovery. I always hoped we would have effective therapies into

the 2020s and there are some promising drugs, currently in early phase trials that might slow down the rate of progression. However, there's nothing imminent that will dramatically shift the survival of patients with MND. I can see it might take 10, 20 or even 30 years before truly effective therapies are available. There is a lot of activity and progress within Australia and internationally, greatly assisted by the current surge in awareness and philanthropic funding.

Finding the answer to this complex and multi-faceted disease will take a very organised, collaborative and systematic approach. With all the Australian MND players

now in one consortium of the National Health and Medical Research Council, we're now able to organise an effective approach with international collaborations. This partnership grant is bringing organisations into one group of research, care, and advocacy to ask what we're we good at, what research we can do, what care we can provide, and what information we can generate to help future generations manage the disease. By directing research and care to the right areas, we will have a springboard to a strategy for the next decade, which is a huge advance in fighting MND and ensuring resources are effectively used.





The progress may be small and steady, but it's definitely taking place. I see the momentum increasing and the amount of research focus will lead to more discoveries. Compared to where we were 10 years ago, there are far more scientists and neuro clinicians focused on this disease and trying to find a cure or therapy that makes a difference. Serendipity can be a great thing in medical science, but in the absence of a discovery, we need to be organised with our research platforms and therapies.

However, there is always hope for a 'eureka' moment. That's one thing you can't remove from patients – the hope that a cure is around the corner. The support from MND Victoria, Fight MND, and on the home front, the Simko family and Rex Gorell, with their annual 'Rock Off MND' event. These groups and individuals are critically important in raising awareness and vital funds needed to tackle this disease. When you're faced with an inevitable outcome, it does help to know you're on that journey with other people doing their best for you.

For now, in the absence of a cure, there's a lot of care to provide to people with MND and that care needs to be well-organised and delivered efficiently to those patients. We are applying the most advanced emerging technologies back to MND to see if they change the way we look at the disease, and of course, improving the lives of people with MND.

*When you can't affect a change in the outcome, it becomes about helping the patient understand what's happening to them and making their journey through that disease the best it can be.*

*Associate Professor Paul Talman,  
Director of Neurosciences*

# Donate to save a life

DonateLife Week ran from 28 July to 4 August, highlighting the importance of organ donation and the difference it can make in people's lives. One story like this comes from Geelong woman Jessie Powell, whose mother Robyn, a Barwon Health patient, spent more than a year on the donor list for a lung transplant.



Geelong's Jessie Powell, pictured with her late mother Robyn, has become an advocate for organ donation.

For most of my life, I didn't know an awful lot about organ donation, other than what was taught briefly in high school. That changed when my family was thrust into the hard and sad reality of it with Mum's illness.

My mum Robyn had been sick for a number of years. We knew that without new lungs, the likelihood of her lasting more than two years was slim. This took a while to digest - how does she get new lungs? Then the realisation hit. It would mean someone else would have to die in order for her to survive. This in itself was extremely hard to come to terms with. How could I accept that someone else was going to die in order for my mother to live? Months passed and we were lucky enough to be heavily involved with her appointments with the incredible transplant team.

These days were often long, but it was well worth it to see Mum's excitement at the prospect of being able to breathe again. But the question still rang in my mind - "how can we be excited for this?"

My perspective changed at one of Mum's appointments after a nurse asked me, "If you lost a loved one, wouldn't you take comfort in knowing their death was not in vain and could save other lives?" Of course, my answer was yes.

As a family we waited for "the call", mentally preparing to help Mum through the hardest time of her life. It was absolutely heartbreaking the day she found out she was too sick and would be taken off the transplant waiting list. After more than 12 months of preparing, her lungs had given up. My brave mum Robyn passed away in February due to impaired lung function. It is now a great passion of mine to ensure my friends, family and the community are educated about organ and tissue donation.

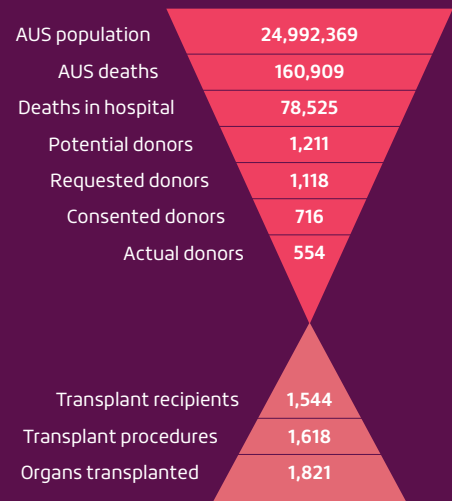
**For more information on organ donation, contact University Hospital Geelong nurse donation specialist Adele Williams on 0411 232 458 or [adele.williams@barwonhealth.org.au](mailto:adele.williams@barwonhealth.org.au).**

## Understanding donation

Donation is a precious and rare opportunity.

**Less than 2 per cent of hospital deaths occur in the very specific circumstances where organ donation is possible.**

The table below shows the impact 554 Australian donors had in 2018.



Stats provided by DonateLife.



Barwon Health's Aboriginal Health team and this year's award winners Diane Day, Lauren Tyrrell and Karen Todd.



Tarryn Love was the guest speaker at Barwon Health's annual NAIDOC Week event.

## NAIDOC Week event recognises healthcare improvements

**MORE than 100 people celebrated NAIDOC Week together in July, with a special event recognising efforts to improve Aboriginal health in the Geelong region.**

Indigenous law student, artist and footballer Tarryn Love was the guest speaker at the annual event, which highlights the work and achievements of Barwon Health's Aboriginal Health Unit. Tarryn spoke about growing up

having to defend her identity, learning about her ancestors, and her understanding of the "colonial fantasy".

Awards were presented to staff who have excelled in cultural awareness and targeting improvements to Aboriginal health, including social worker Lauren Tyrrell for engagement, Strengthening Health Service Response to Family Violence Program manager Karen Todd for leadership, and the Ophthalmology Clinic for innovation and change.

The Aboriginal eye access clinic was launched last year to target Aboriginal patients who needed cataract surgery, and passed its target of 25 patients in its first year.

Barwon Health is the largest healthcare provider in regional Victoria and recently launched its 2019-2021 Reconciliation Action Plan, providing a platform to close the ongoing health gap that exists between Aboriginal and Torres Strait Islanders and non-Indigenous Australians.



Cardiology Research Team L-R: Kate Sanders, Syneos senior clinical research auditor Michelle Nash (presenting the award), Anita Long, Associate Professor John Amerena, Krystle Wilson, Donna Soraghan, Anne Welsh, Karen Fogarty, Susan Ryan, and Toni Shanahan.

### TOP GONG FOR CARDIOLOGY RESEARCH UNIT

*Barwon Health's Cardiology Research Unit has been recognised with an international award for its clinical trials.*

Biopharmaceutical solutions company Syneos Health presented its Site Appreciation Award to the Geelong Cardiology Research Unit, which has been involved in clinical trials conduct since June 2000.

A clinical trial is a research study where volunteers agree to test a medicine, device or therapy to discover whether it is more beneficial than standard treatment.

The unit's director, Associate Professor John Amerena, said the team was very proud to have won such a prestigious award, which is presented to recognise the value of clinical research sites as partners in clinical research.

"Our unit prides itself on producing high quality data, and is proud to have been involved in the development of a number of new therapies, treatment options and interventional procedures that have now become standard of care for patients with heart disease and diabetes," A/Prof Amerena said.

"It is only through clinical trials with volunteer patients that important questions about new medicines and therapies can be answered."

# Patients who smoke

*We're setting the record straight when it comes to common myths about managing patients who smoke including the smoking cessation support mechanisms available.*

## **MYTH 1 – THERE'S NO POINT TALKING TO A LONG-TERM SMOKER ABOUT QUITTING - THE DAMAGE IS DONE.**

It's never too late to quit and it's never too late to support patients with their smoking. As soon as someone stops smoking, their body begins to repair itself. The benefits are greater the earlier the patient quits, but quitting at 50 almost halves the rate of smoking related death.

## **MYTH 2 – MOST PEOPLE WHO SMOKE ARE NOT INTERESTED IN QUITTING.**

According to a recent survey conducted by Quit Victoria, 8 out of 10 people who smoke want to quit! But quitting is hard and not everyone succeeds the first time, so our ongoing support and encouragement is important, as well as putting people in touch with services such as Quit and the Barwon Health Be Smokefree service. Our patients expect to be asked about smoking and if we don't ask, they are less likely to give up. Brief advice of even less than one minute can prompt a quit attempt.

## **MYTH 3 – NICOTINE REPLACEMENT THERAPY (NRT) CAN BE AS HARMFUL AS SMOKING.**

While nicotine is highly addictive, it is the other 7000 toxins and chemicals in tobacco smoke that are most harmful, particularly tar and carbon monoxide. In other words, nicotine causes addiction, not disease. NRT, used for a few weeks in combination with counselling support, is the best way to help someone quit, as it helps manage nicotine cravings and other withdrawal symptoms while the person addresses the habits and triggers associated with smoking.

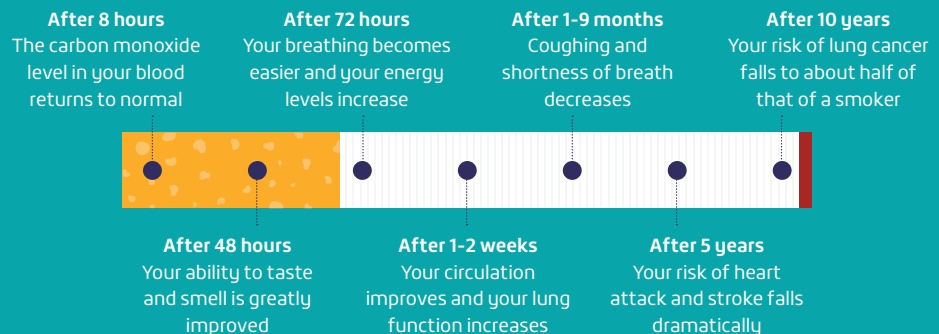
## **MYTH 4 – SMOKING HELPS RELIEVE STRESS.**

The symptoms of nicotine withdrawal (like irritability, anxiety and restlessness) cause a person to feel stressed. Having a cigarette relieves these symptoms temporarily but the cycle quickly resumes. Within six months of quitting, most people say their mood is better and they feel less stressed than when they smoked.

## **MYTH 5 – SMOKING JUST A FEW CIGARETTES A DAY IS FAIRLY HARMLESS.**

All smoking is harmful. Even those who smoke one to four cigarettes a day are up to five times more likely to develop a tobacco-related disease compared to a non-smoker.

### **YOUR HEALTH AND WELLBEING IMPROVES FROM THE DAY YOU QUIT SMOKING**



Source: Quit Victoria

For more information about NRT go to [www.quit.org.au](http://www.quit.org.au). Staff can check out the online GROW modules to learn more about how to support patients to be smokefree!

## INTERPROFESSIONAL STUDENT PLACEMENT MODEL SUCCESS

*A unique and innovative interprofessional student placement model at Barwon Health is improving outcomes and learning experiences for future midwives and women's health professionals.*

Barwon Health's Clinical Education and Training and Birth Suite introduced the model in July 2017 to increase support for placement time and learning opportunities for midwifery and medical students.

Data has shown learning requirements are being met with student participation in births increasing from 26.4 per cent to 34 per cent in two years.

Interprofessional placement clinical facilitator Jen D'Arcy said the model had allowed students from different professions to learn about each other's role in the team.

"By facilitating both medical and midwifery students, we are able to advocate for all student learning and tailor learning opportunities to suit each student," Jen said.

"It is satisfying to know that students are achieving their learning outcomes in an environment that emphasises the value of working and learning as a team and keeps the woman's care at the centre."

The model has been presented through posters, abstracts and conference presentations and has sparked interest from other sites still working with the more traditional, siloed approach to learning.



*Joseph Femia (med student), Nakia Orchard (midwifery student), Hollie Callahan (Interprofessional Placement Clinical Facilitator) and Tanya Hodgkinson (patient).*



*Telehealth co-ordinator Claire Hunter and Telehealth Program manager Alice King show their awareness messages during Telehealth Awareness Week.*

## Bringing healthcare to the community

*Staff celebrated Telehealth Awareness Week from 25 to 31 October, taking the opportunity to spread the word about the many benefits of telehealth for consumers.*

A campaign featuring more than 20 staff and consumers highlighted each person's view on telehealth, including benefits such as:

- healthcare delivered closer to home;
- reduced travel and accommodation costs; and
- less disruptions for families and work.

Accessing clinical telehealth services relies heavily on public awareness and clinician advocacy. Telehealth Awareness Week aimed to raise awareness and increase the use of telehealth-delivered services by encouraging consumers to ask if their appointment and care can occur via telehealth, and encouraging clinicians to consider when telehealth is an option for their patients.

**Accessing clinical telehealth services relies heavily on public awareness and clinician advocacy.**

# From Posados to Geelong – nurse reflects on 40 years at Barwon Health

*In August, enrolled nurse Aurora Delacruz celebrated her 40th anniversary at Barwon Health and reflected on her years in the maternity ward, as well as the experience of moving from Argentina to Geelong.*



I've got a very good memory, so it feels like yesterday when I started nursing.

In Posados in Argentina, I was working as a nurse in the doctor's room and used to go and visit the sick little old men in their home, then I moved to Buenos Aires when I was 24 and worked in the hospital for seven years.

I didn't study medicine because my parents were very poor, but I used to go to the medical library and read the books just because I like medicine.

I started in post-natal and the special care nursery, and then was in charge of the ICU night shifts.

I always wanted to see the world. I knew my husband since I was 17 and always said I wouldn't marry him, because I wasn't ready to be a housewife, but then he came to Australia and I changed my mind.

After I moved to Geelong and married him, I went to the Victorian Nursing Council because I wanted to be a nurse here, but 40 years ago if you didn't speak English, the door shut in your face. It took 150 times for them to open the door for me.

**“40 years ago if you didn't speak English, the door shut in your face. It took 150 times for them to open the door for me.”**

I met an American teacher in Geelong through a Spanish friend who was in the school of nursing, and she said “sometimes it's not who you are, but who you know.” I always remembered that. She introduced me to the matron who said I couldn't go to the school, but I would have to get 99 or 100 per cent on a test to be a nurse.

I sat the exam and got 99 per cent. They were nice to me and allowed me to write some of it in Spanish.

After 10 years in Baxter House, I had to work for four years in different wards. My legs were bringing me to a different ward, but my mind was always with the babies.

I love helping the mums and their babies. My colleagues are beautiful and for me it's like a family here. The midwives are like my daughters.

A lot has changed at the hospital. We have a lot of students and student doctors now, and I love working with them.

I couldn't speak much English when I first came here, so I can still help patients who don't speak English because I can read their mannerisms and their eyes.

I've learnt as a professional in medicine, you have to go with the flow.

I never get tired. I've got so much energy. I'm hyperactive. I get up at 5am and clean the house, then come to work, then I go home and socialise.

I'm still happy to be here and I never think about retiring, even though I'm 72.



## Moulin Rouge Ball raises over \$200,000

More than 300 people danced the night away at the 2019 Southern Star Group Moulin Rouge Gala Ball, hosted by the Barwon Health Foundation at the Palais in Geelong.

Just over \$212,000 was raised for Barwon Health Foundation on 5 October, with support from the Cancer After Care Group Geelong.

Guests were treated to a three-course food and wine experience, with entertainment including the internationally recognised Spiegeltent performers 'Rouge' and Amanda Jane, with live music from The Baker Boys.

*Pictured, clockwise from top left: Nicky Buckley was one of many special guests at the Moulin Rouge Ball; The Cancer After Care Group presents the Barwon Health Foundation and Board with a cheque for \$70,000; Entertainers worked the crowd in between performances at the ball.*

## INNOVATIVE PROMPT TRIAL EXTENDED

*The State Government has given a six-month extension to an innovative trial that partners Ambulance Victoria staff with Barwon Health mental health workers.*



*Minister for Mental Health Martin Foley discusses the PROMPT program with Advanced Life Support Paramedic Belinda Hadden, and Mental Health, Drugs and Alcohol Services clinical director Steve Moylan.*

Minister for Mental Health Martin Foley made the announcement in Geelong in early October, highlighting the improved outcomes for people in the community with acute mental health issues.

The PROMPT (Prehospital Response of Mental Health and Paramedic Team) trial pairs specialist mental health staff with paramedics attending call-outs where mental health may be a factor.

Mental Health, Drugs and Alcohol Services clinical director Steve Moylan said the program was an opportunity to push Barwon Health services into the community and build relationships with consumers.

"Some patients went directly to our inpatient psychiatric unit, while some were able to receive care in their home, instead of going through the potentially traumatic experience of being taken to a busy emergency department," A/Prof Moylan said.

Minister Foley said the trial had been a remarkable success, with patients being assessed and triaged sooner, and fewer taken to busy emergency departments.

"Around 75 per cent of the PROMPT team callouts have been successful in diverting patients from the Emergency Department," he said.

"Every indication is that this is a successful model. It ticks all the boxes about early intervention and delivery of primary support close to people's normal circumstances."

The trial was recognised at the Victorian Public Healthcare Awards in November, winning the Minister for Mental Health's Award for excellence in supporting the mental health and wellbeing of Victorians.



## Charity run raises \$138,864

*The Geelong community came out in force to support the Barwon Health Foundation's Run4Geelong on 17 November.*

Almost 4000 participants walked or ran to help raise funds for Barwon Health services.

A total of \$138,864 was raised to support mental health, cancer services, women's and children's services, hospital wards and community care.

This year's event finished at Geelong's iconic GMHBA stadium and gave participants the opportunity to run or walk through the foam and colour zone.

Thank you to all participants and volunteers that took part in this event, along with major sponsors Winslow Constructors and Geelong Advertiser and community sponsors TAC, Worksafe, McColl's, Bean Squeeze, RC Designer Gardens, Active Geelong, Hanlon Industries, Villarosa Real Estate, Geelong Independent Support Network and APCO Foundation.

Plans are already underway for Run4Geelong 2020, which will be held on Sunday 15 November.



*Picture: Alan Barber*

## CYCLISTS RAISE \$90,000 FOR CANCER AND COMMUNITY

*An interstate bike ride led by Barwon Health medical staff has raised more than \$90,000 for the Andrew Love Cancer Centre and local community groups.*

As part of a group of 20 cyclists from the Barwon Heads Cycling Club, Barwon Health staff Michael Sheridan, Ross Piper, Stephen Gill and Gavin Page rode from Adelaide to Barwon Heads between 18 and 22 September, covering about 175km each day.

The Bridge2Bridge 2 (B2B2) campaign raised \$90,756 against a target of \$30,000, which will be shared between the Barwon Health Foundation and social projects supporting the local community via Give Where You Live.

The amazing result is partly due to an anonymous donor who matched the total

of \$45K and effectively doubled the amount, Dr Sheridan said.

"An anonymous donor wanted to support our effort and the charities, so they matched the online donations dollar for dollar," he said.

"Even without that, it was still amazing. We were delighted to exceed our target and reach \$45,000.

"The whole event went brilliantly. We had the wind behind us most of the way, no one was injured and we only had one day of rain.

"There were some great stories along the way as we stopped and met people who wanted to know what we were doing. A lot of people were giving us money out of their pockets when they found out."

He said the group expects to do a third charity ride in a few years.



*Barwon Health staff Michael Sheridan, Ross Piper, Stephen Gill, and Gavin Page in the days before their 850km charity ride.*





## Vale Cathy Gibbs

*Barwon Health lost a beloved employee and friend to many with the sudden passing of Cathy Gibbs in November.*

The Workforce Help Desk administrator was known as the smiling face who welcomed staff to the directorate, always eager to find an answer to help those arriving with issues.

Despite working at Barwon Health for only a couple of years, Cathy was recognised across the organisation for her friendly demeanour and thoughtful nature.

Colleagues said Cathy loved her job and was known to go the extra mile to not only help people, but to brighten their day.

From remembering birthdays to giving small gifts to those going through a tough time, she was a staff member you could count on to keep spirits up.

Cathy has been described as passionate, witty, and a shoulder to lean on, as someone who touched the hearts of many people just through her positivity and caring interactions.

More than 300 people attended Cathy's funeral, which was a testament to who she was and how much she will be missed by those who knew her.



## STAFF ACKNOWLEDGEMENTS

We pay respect to the life of **Brian Thom**, our hospital's board treasurer from 1970 to 1988, who died on 30 August aged 83. Brian was a Geelong hospital board member until 2001 and had an instrumental role in the 1998 amalgamation with the McKellar Centre and community health centres that formed our organisation, now known as Barwon Health. He also dedicated time to serve the Life Education Geelong committee and spent many years on the council of Geelong College. Along with his service to the community, Brian was known in Geelong as a respected employer with G.W. & B.G. Thom and the Capital Building Society. We extend our sympathies to his wife Elwyn, his four daughters and their families.

In September, staff were sad to farewell our Chief of Workforce and Culture Officer, **Perry Muncaster**, who has been a valued member of the executive team since 2001. In his time with Barwon Health, Perry's leadership oversaw substantial changes, including establishing the Barwon Health Values, StaffCare and the peer resolution program Wurru Ki, improving human

resources systems, and making available staff employment information via online resources. Above all, he has steered the organisation's strong occupational health and safety team, focussed on keeping our staff safe and happy in their roles. We wish Perry the best in his well-earned retirement.

**Barbara von Brandenstein** has retired from nursing after a career spanning 42 years.

Barb joined her district nursing colleagues at Barwon Health on the 1 April 1998 as the result of a voluntary amalgamation between Geelong Hospital and Surf Coast Community Health Centre. Her passion for nursing has been a motivator for all who have had the privilege of working with her. Barb worked to uphold the image of district nursing and her commitment and dedication to Barwon Health is truly appreciated. Barwon Health wishes her the very best in retirement Barb's, and her colleagues will miss having her knowledge at their fingertips.

*Below: Barbara von Brandenstein (second from left) with her family.*





# Length of Service

10  
years

*Congratulations to the following staff who celebrated Length of Service milestones between July and December 2019!*

- |                        |                  |                    |
|------------------------|------------------|--------------------|
| Holly Wardlaw          | Brenda O'Connor  | Jacinta Scanlon    |
| Dickson Ma             | Diana Mrzljak    | Michelle Webb      |
| Vivien Stirling        | Jandi Kim        | Maria Davies       |
| Dimity Fahey           | Melissa Mew      | Cheryl Russell     |
| Helen Byrne            | Joy Meulman      | Rachel Crawford    |
| Vanika Gunjaca         | Tony McDonald    | Louise Wilson      |
| Myra McRae             | Caroline Rowe    | Carmen Burns       |
| Barbara Ruzicka-Powell | Linda Solly      | Karen Andrews      |
| Jossy Antony           | Petronella Smith | Jeanette McWilliam |
| Bree McNeill           | Gillian Thomson  | Melinda Baulch     |
| Dot Haygarth           | Kate Greig       | Jennifer Carr      |
| John McDonald          | Duncan Brown     | Melissa Hill       |
| Terry Angelovich       | Geoffrey Wilson  | Andrea Chenery     |
| Meir Lichtenstein      | Val Skinner      | Sharon Bear        |
| Maria Biscombe         | John Eden        | Tracey Fabian      |
| Kira Swinton           | David McCormick  | Shannon Ryan       |
| Karen Siesmaa          | Meghan Stammers  | Kim Bhullar        |
| Barbara Watts          | Lan Anh Nguyen   | Lisa Peppers       |
| Christine Primmer      | Matthew Parrott  | Michael Shun       |
| Carol Finley           | Mark Brant       | Caroline Duggan    |
| Coralie Taylor         | Lisa Aitken      | Tenay Rankin       |
| Kim Sechtig            | Silva Baard      | Debby Myers        |
| Siobhan Schwaiger      | Robyn Munro      | Robyn McGearry     |
| Michael Borschmann     | Craig Harvey     | Terri Caldwell     |
| Hollie Laver           | John Turner      | Bec Hartwich       |
| Karen Jepsen           | Jeffrey Willis   | Michelle Sawers    |
| Chris Campbell         | Monica Harrop    | Jennifer Robe      |
| Marie Hageman          | Karen Joyce      | Simon Quick        |
| Andrea Louise Petrie   | Darren Yeatman   | Mei Yang           |
| Georgi Hammond         | Jo Chambers      |                    |

Please note, names and employment commencement dates are taken from official Barwon Health records. Please contact Workforce to check or update your details - [hrservices@barwonhealth.org.au](mailto:hrservices@barwonhealth.org.au).



years



years




years

Leesa Polwarth  
 Julie Johnson  
 Sue Keating  
 Kim Butler  
 Kathleen Slaymaker  
 John Beavis  
 Lea Smith  
 Faye Richmond  
 Christopher Lindner  
 Michael Duhamel  
 Isobel Leaming  
 Pauline Clancy  
 Mandy Williamson  
 Shae Lunnie  
 Jennifer Burns  
 Gabrielle Chalk  
 Julie Heath  
 Anne Hotchin  
 Helen Skoglund  
 May Nobel  
 Kim Keating


Ann Loney  
 Karen Hewitt  
 Laura-lee Harding  
 Dawn Sergent  
 Sam Breguet  
 Rosie Mawer  
 Loretta Little  
 Michelle Grundell  
 Susan Ryan  
 Jennifer Stelling  
 Michael O'Donnell  
 Jon Wood  
 Monika Hucker  
 Rebecca Stone  
 Anita Ciach  
 Leanne Cunningham  
 Richard Knight  
 Dean Grundell  
 Christine Uebergang  
 Jo Ryan  
 Cena Jovanovski

Christopher Boldkald  
 Simon Crowley  
 Gregory Mitchell  
 Christine Riddle  
 Pamela Fitzgerald  
 Shirley Lyons  
 Yvonne McManus  
 Averil Soulsby  
 Karen Sunderland  
 Carolyn Howard  
 Barbara Haines  
 Julie Forster  
 Philip Brough  
 Julie Warner  
 Jennifer Sumner  
 Alison King  
 Kim Perrins  
 Maree Hansen  
 Nigel Wood  
 David Mayer  
 Kerri McConachy  
 Janene Campbell

Ian Murrell  
 Debra Keown  
 Philip Eltringham  
 Margaret Wagner  
 Aurora Delacruz

RAISED OVER   
**\$335,775**  
for the 2019  
Hospital Appeal


  
135 businesses  
have supported us

OVER  
**\$500,000**  
medical equipment funded  


  
**\$2.1 million**  
in bequests received

**\$230,000**  
provided for  
research  


**\$112,000**  
donated to  
the Lasting  
Legacy Fund  


**264,000**  
people  
reached  
via social  
media  


 **467**  
Foundation  
Volunteers

  
**11,600**  
people met



**\$5.16 million**

Total funds raised in 2018/2019

through the wonderful support of  
our community.

  
**\$202,000**  
donated via direct mail

 **679**  
new donors


 **2997**  
donations  
received


**91**  
community  
groups  
fundraising for  
Barwon Health  


 **31,000**  
people attended  
our 15 hosted events

 **489**  
In memory  
donations

  
**\$179,000**  
of in-kind donations

 **\$20 million**  
raised for  
Barwon Health in  
the past 5 years

  
**2 ICU  
ventilators**  
funded for  
**\$97,000**

  
**\$4.1 million**  
committed to  
ProjectLove

OVER  
**\$2 million**  
raised for the Kids Appeal  




barwonhealthfoundation.org.au

Our Health.  
Our Community.

The Barwon Health Foundation proudly supports

