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A NEWSLETTER FOR ACT HEALTHCARE PROVIDERS

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Sketch plans released for new Women's and Children's Hospital

ACT Health released Preliminary Sketch Plans of the new Women's and Children's Hospital (WCH) for comment on 17 May 2010.

The new hospital will bring together a range of WCH services that are currently dispersed across the Canberra Hospital – including the relocation of the Paediatric Unit and collocation of Maternity Services, Neonatal Intensive Care Unit (NICU), Gynaecology, Foetal Medicine and specialised outpatient services / ambulatory care. This will provide a more integrated and higher quality service for patients.

The new WCH hospital will provide 146 beds – an increase of 35 beds over the current number of Women's and Children's Services beds at the Canberra Hospital. This includes an additional 6 delivery suites. The new hospital's obstetrics, gynaecology and paediatric services will have over 80 per cent single rooms to enhance patient privacy and maximise infection control. All the rooms will be much larger.



The Canberra Birth Centre will continue to be a key feature of the new WCH hospital. Birth Centre birthing rooms will increase from 3 to 5 in the new hospital.

The new hospital will allow an expansion of current services, and the provision of new services including a maternity assessment unit which will be able to see women who are more than 16 weeks pregnant with pregnancy related issues and concerns about early labour.

The new hospital will be family focussed and friendly. There will

be a 12 bed family accommodation unit for parents of all services. There will be family resource centre for the whole building, and family space on each floor. There will also be a playground and café.

There will be parent spaces, including quiet rooms, parent lounges, rooming in rooms in NICU for transition to home care, and bereavement rooms. The building will provide office space for 158 staff. Construction is expected to commence in June 2010 and be completed in September 2012.

Walk-in Centre opens



Walk-in Centre nurses with Federal Minister for Health Nicola Roxon and ACT Minister for Health Katy Gallagher

Australia's first public nurse-led Walk-in Centre opened to the public on Tuesday
18 May.

The new Centre, located opposite the Emergency Department at Canberra Hospital, provides free treatment for people with minor illnesses or injuries.

The Centre is staffed by specialised nursing staff and provide Canberrans with a new health service option.

The Walk-in Centre is designed to help people get fast, free, one-off treatment for minor illnesses and injuries.

Nurses provide advice, assessment and treatment for conditions such as cuts and bruises, minor infections, strains, sprains, skin complaints, and coughs and colds.

If necessary, people will be redirected to more appropriate services, such as their GP or the emergency department.

The nurses who work in the Walk-in Centre have all completed additional training, and the care they provide is guided by established protocols.

The operation of the Walk-in Centre will be externally evaluated after its first year of operation. That evaluation will provide valuable information about the success of the new service and how we could further extend the concept to other areas of Canberra.

The Walk-in-Centre is open from 7am to 11pm, every day of the year.

For further information, go to www.walkincentre.act.gov.au



Canberra Hospital Birth Centre turns Eighteen

On April 1, the Birth Centre at Canberra Hospital celebrated eighteen years of service and dedication to the women, children and families of ACT and surrounding regions.

The Birth Centre aims to create an environment that fosters the normal process of childbirth, is responsive to the needs of women and their babies and promotes healthy birthing experiences.

The philosophy of the Birth Centre/
Canberra Midwifery Program is
"pregnancy and childbirth are a very
normal life event for most women and
families." The Birth Centre provides care
for women who require a low intervention,
natural approach to pregnancy and birth.

Women who choose to birth in this model of care are supported by a known midwife

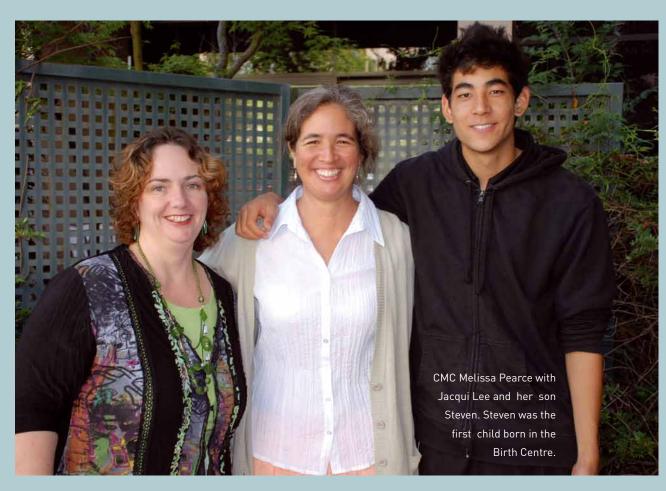
who provides midwifery care, education and support to the woman from early pregnancy through to labour and birth and into the early postnatal period. This allows the midwife and woman to work in partnership and promotes a sense of trust, choice and control for the woman.

In 1980 the Capital Territory Health Commission announced in principle support for the establishment of a birth centre. In 1989 the Federal Government announced funding for "Alternative Birthing Services" and this was used to establish the Birth Centre at Canberra Hospital.

In 1992 the first birth occurred in the Centre in March 1992 and the centre was officially opened on 1 April 1992 by Mr Wayne Berry. In 1996 the rollout of the Pilot Canberra Midwifery Program commenced. In 1998 the Birth Centre amalgamated with the Pilot Canberra Midwifery Program.

In 2001 caseload midwifery commenced providing one to one care from a known midwife through the pregnancy, labour/birth and post natal period. This midwifery care is now recognised as the gold standard.

As part of the Capital Asset Development Plan (CADP) for Women and Children's services at Canberra Hospital, a model of care is being developed that will enable increased access to continuity of midwifery care for up to fifty percent of all women at TCH regardless of the level of risk associated with their pregnancy.



ACT Awards Acknowledge Quality Healthcare

Applications for the ACT Quality in Healthcare Awards 2010 opened on Monday 31 May.

The Awards are presented annually and were inaugurated in 2002 to recognise leadership and innovation in patient safety and quality of care.

Everyone working in the health sector, including organisations such as ACT Health, private hospitals and clinics, General Practitioners and students enrolled in under-graduate and postgraduate health disciplines, can submit applications for these prestigious awards.

The wide variety and high standard of projects submitted in 2009 clearly demonstrate the strong local commitment to exploring innovative ways to achieve quality improvement lead to better patient outcomes.

ACT Health Minister Katy Gallagher will present the ACT Quality in Healthcare Awards to the winners in each category at a presentation dinner in November.

The Award categories are:

- Safety
- Access and Efficiency
- Innovative models of care
- Consumer participation
- Systems support
- Students

Applicants can download guidelines and application forms for the ACT Quality in Healthcare Awards from the ACT Health website: www.health.act.gov.au from Monday, 31 May. Applications close on 6 August.

Call ACT Health's Patient Safety and Quality Unit on (02) 6244 3014 or email: qualityathealth@act.gov.au

Practitioner Regulation National Law Bill 2009

The ACT is the first jurisdiction to pass Health Practitioner Regulations into law.

The passing of the Health Practitioner Regulation National Law Bill 2009 in March has enabled the ACT to join the national scheme for registering and accrediting health practitioners.

The national scheme was agreed to in March 2008 by the Council of Australian Governments with the aim of creating a nationally consistent, rigorous registration and accreditation scheme, and to improve public protection through the regulation of health practitioners and students.

Ten health professions including chiropractors, dental care practitioners, medical practitioners, nurses and midwives, optometrists, osteopaths, pharmacists, physiotherapists, podiatrists, and psychologists are included in the national registration and accreditation scheme that commenced 1 July.



SCHOLARSHIPS

Supporting General Practice:

2010 ACT Health – ANU GP Scholarships

New scholarships announced recently could help solve the GP shortage in Canberra, in a new program that will encourage Australian National University (ANU) medical students to specialise in general practice and support them to work in Canberra after graduation.

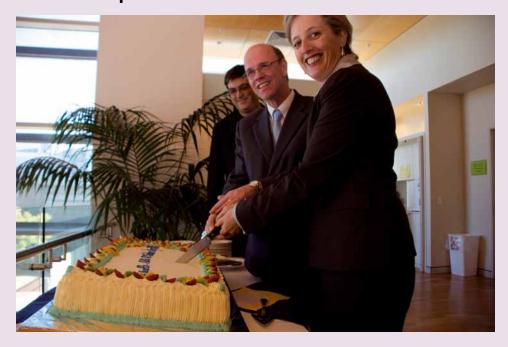
The GP Scholarships Program valued at \$1.25 million over four years will provide up to ten scholarships to support ANU third year medical students planning to specialise in general practice at the end of their studies.

Canberrans are well aware that the ACT is experiencing a GP shortage and this is one of a number of initiatives to support general practice. It stands alongside the \$12 million package announced in the 2009-10 Budget.

This new program presents an exciting opportunity for ANU medical students. The value of each GP Scholarship is \$30,000, paid in two instalments of \$15,000 per annum.

One scholarship has been allocated for an Aboriginal and/or Torres Strait Islander student. In the event that this Scholarship is unable to be awarded to an Aboriginal student, it will be granted to a student from the wider ANU Medical School community.

The Scholarships will be assessed on criteria such as demonstrated commitment to the learning, maintenance and further development of skills in the area of General Practice, and a strong dedication to the primary healthcare of residents of the ACT and surrounding region.



The Dean of Medicine and Health Sciences at ANU, Professor Nicholas Glasgow, has welcomed the announcement.

"Our medical students gain a lot from working in primary health care settings in the ACT, and we know they want to give back in return. These scholarships will help us deepen our existing connections with the Canberra community, and help young GPs kick-start their careers."

Applications for the 2010 ACT Health – ANU GP Scholarships closed in May. Applications for the 2011 Scholarships will be invited later this year.

For further information, visit www.health.act.gov.au/gpscholarships

(from left) Professor Marjan Kljakovic, Professor Nick Glasgow and ACT Minister for Health Katy Gallagher at the launch of the ANU GP Scholarships.

Aboriginal family donates 'Possum Dreaming' to Canberra Hospital



The ACT Health Minister, Katy Gallagher has accepted an artwork 'Possum Dreaming' from an Aboriginal family who donated the painting as a way of thanking Canberra Hospital staff for the culturally sensitive care, commitment and professionalism provided to a family member.

The family wanted to express its appreciation to hospital staff who demonstrated care, commitment, compassion and professionalism, while acknowledging cultural diversity and sensitivities in their busy and demanding hospital environment.

'Possum Dreaming' is a magnificent piece of art, which will be hung in a significant position within the hospital where staff, patients and relatives can appreciate its beauty.

The value of Aboriginal art to its people is in its expression of their stories and culture. This artwork is a wonderful addition to the existing Aboriginal collection we have on display and will help create a culturally welcoming environment within the hospital for Aboriginal people.

Fee Review for Access to Health Records

ACT Health in May 2010 communicated recent changes to the ACT Health Records (Privacy & Access) Act 1997 which will commence on 1 October 2010. The changes arose from the GP Taskforce Final Report following the closure of a number of GP practices in the ACT last year. The changes will affect patient health record keepers.

All health records access fees are scheduled to be reviewed and, as part of the review process, a background paper and online survey is posted on the ACT Health website and is open until 5pm 23 July 2010.

From the homepage www.health.act.gov. au, select 'Consumer Information' on the left side menu.

People who do not have access to the internet can request a hard copy by calling ACT Health Policy Division on 6207 7927. Survey responses may be mailed to ACT Health Chronic and Primary Health Policy Unit, Level 2, 11 Moore Street, CANBERRA CITY ACT 2601 or faxed to ACT Health Chronic and Primary Health Policy Unit on [02] 6205 0866 by 5pm 23 July 2010.

ACT Health to fund mortality audit project

ACT Health will fund a three year project to improve surgical outcomes for patients in the Territory through an audit of surgical mortality.

The ACT Audit of Surgical Mortality (ACTASM) project is an initiative of the Royal Australasian College of Surgeons (RACS).

The audit process is designed to gather information on factors involved in the death of patients who are under the care of a surgeon.

This information can help identify patterns, system or process issues and develop strategies to redress these through Qualified Privilege legislation.

The ACTASM project has been operational for over eight years, and the College has rolled the program out nationally with all states and territories, including the ACT participating from 2010.

In the coming months, the establishment of the ACTASM project will allow ACT surgeons from both public and private hospitals to participate.

ACT Health has agreed to undertake and fund the three year project with the RACS and will cover both the public and private sectors across the ACT.

A project manager will oversee the project, and recruitment for a surgeon to take on the part time role of Clinical Director is underway.

ACT Health Human Research Ethics Committee

Emeritus Professor John Biggs has been appointed Chair of the ACT Health Human Research Ethics Committee (ACTH HREC) following the resignation of Dr Elizabeth Grant AM who had served as committee chair for many years.

This completes the revitalisation of the ACTH HREC promised with the development of the ACT Health Research Office.

Professor Biggs has expressed his enthusiasm for working with the Research Office to reform many of the committee processes, including:

- Introducing a low risk track, bench-marking of fees with similar organisations;
- Moving the committee's work stepwise to an electronic system; and
- Joining in the Harmonisation of Ethics Review process (HoMER) currently being introduced through AHMAC.

The HREC secretariat also has a new enthusiastic team of August Marchesi and Amy Bryant.

Health winner in ACT Budget

Health services received substantial ongoing support in the ACT Budget handed down in May, with an additional \$177 million over four years in recurrent funding allocated to health services, as well as ongoing support for new infrastructure projects. This will assist ACT Health to continue to respond to the growing demand being experienced across most areas of the portfolio.

The following recurrent funding has been provided over the next four years:

- \$41.5 million to meet growth pressures and increases in activity, mainly in the acute and cancer sectors;
- \$26.014 million to provide 22 new sub-acute hospital beds (The location of these beds is yet to be determined);
- \$14.7 million to meet growing demand for elective surgery (This is expected to deliver an additional 800 elective surgical procedures in 2010/2011);
- \$13 million to meet growing demand for acute care services at public hospitals, including the opening of the new 16 bed Surgical Assessment and Planning Unit (SAPU);

- \$11.381 million to expand the Calvary Hospital Intensive Care Unit by adding two High Dependency beds;
- \$10.459 million to increase our critical care capacity through 'flexup' capacity for intensive care beds (up to a total of 20 beds) at Canberra Hospital;
- \$9.622 million to support operating costs for the new neuro-suite at TCH;
- \$9.468 million to expand Home and Community Care (HACC) services to support frail older people and young people with a disability to remain at home;
- \$8.6 million for increased service demand in Obstetrics and Gynaecology at Canberra Hospital;
- \$4.184 million to meet demand for mental health services in the community;
- \$4.184 million to meet continuing growth in cancer service activity;
- \$4.184 million to meet the growing demands for health services by older Canberrans;

- \$4.184 million to support people in our community suffering from chronic disease, and to implement a range of activities to reduce secondary diseases for people with diabetes; and
- \$15.514 million for National Health Reform (including to reduce wait times in the emergency departments and some flexible funding).

This package includes \$67 million of Commonwealth funding that has been provided as a result of the historic National Health Reform deal signed at COAG on 19 and 20 April this year, of which \$15.1 million has been earmarked for capital expenditure to assist with meeting elective surgery and emergency department targets.

NURSING & MIDWIFERY



Nursing and Midwifery Awards

The annual Nursing and Midwifery
Awards were held in May to honour and
celebrate the contribution of nurses and
midwives to health service delivery in the
ACT. Amy Faden was named ACT Nurse
of the Year and Mary Kirk, ACT Midwife of
the Year.

Other award winners were:

- Kerry Cargill (Staff Development Unit), Education excellence
- Melissa Pearce (Community Midwifery Program), Clinical excellence
- Wendy Woodman (Drug and Alcohol services), Management excellence
- Catherine Hungerford (University of Canberra), Research excellence
- Loretta O'Reilly (Aged Care and Rehabilitation Service), Enrolled Nurse excellence
- Jason Mills (Goodwin Care),
 Assistant-in-Nursing excellence
- Naida Fletcher, General Practice Nursing Excellence

- Coronary Care Unit (Canberra Hospital), Team excellence
- Lynne Nicholas (Perioperative Services, Canberra Hospital),
 Encouragement Award

Mary Kirk has held numerous management roles over her 30-year career as a midwife, including Director of Nursing and Executive Officer Queen Elizabeth II Family Centre, Canberra Mothercraft Society (CMS), as a Member National Nursing & Midwifery Board of Australia, President ACT Nursing & Midwifery Board (2000-2005), Executive Member Australian Nursing & Midwifery Council National Executive Member & Treasurer ACMI (2000-2005), Director International Congress of Midwives ICM Congresses (2005 & 2002), International Midwifery Consultancies for WHO Kiribati, AUSAID in Philippines and Australian Government in the Cocos Islands.

Amy Faden's knowledge and experience in the field of alcohol and other drug dependency nursing is immense, particularly in the area of opioid dependency treatment. Amy demonstrates empathy to all clients, whilst continuing to work within legal and ethical parameters. Amy coordinates the Opioid Treatment Team, a team of five nurses, which delivers services to over 800 clients daily, 7 days per week.

About 200 clients attend the clinic at Building 7 daily and 600 clients receive doses at community pharmacies. Both senarios are coordinated from Amy's team. Amy strives to maintain a high level of service delivery, with safety as the most important aspect for clients on opioid replacement therapy and the community overall.

NURSING & MIDWIFERY

Record amount of scholarship funding for ACT nurses and midwives

ACT Health will deliver an unprecedented amount of funding this year to support the professional development of the ACT's nurses and midwives. Professional education is a cornerstone of quality healthcare provision, and ACT Health places great importance on supporting the development and maintenance of a highly skilled nursing and midwifery workforce.

ACT Health will provide almost \$300,000 in Nursing and Midwifery scholarships in the 2009-10 financial year.

In 2000, a scholarship fund was established to assist enrolled nurses, registered nurses and registered midwives to meet the costs of studying accredited education programs.

The scholarship fund aims to reinforce a culture of learning within ACT Health, while strengthening the recruitment and retention of nurses and midwives.



TOWARDS A HEALTHIER ACT

- A STRATEGIC FRAMEWORK FOR THE POPULATION HEALTH DIVISION (2010-2015) Population Health Division has released a Strategic Framework which outlines the context and guiding principles for the Division's work over the next five years.

The Framework also sets out the objectives and strategic priorities, with a focus on improving health outcomes for the people of the ACT through the delivery of public health, environmental health and health promotion activities.

The Framework recognises that many of the factors that influence health are outside the direct control of the health

system and commits the Division to working collaboratively with other ACT Health Divisions, other government agencies and non-government organisations.

The key objectives underpinning the Framework are to: monitor the health of the ACT population; promote health; prevent disease; improve health equity; protect the health of the public; and support public health workforce excellence.

GP

PATIENT SAFETY TASKFORCE AND QUALITY UNIT

Access to Health Records clarified

The ACT Legislative Assembly passed the Health Legislation Amendment Bill No.2 to require general practices to notify ACT Health and consumers of practice closures, mergers and relocations.

The Bill also seeks to clarify the law around consumer access to health records.

The Bill reflects the majority of the legislative recommendations made by the GP Taskforce and aims to strike a balance between the interests of health record keepers and consumers.

The ACT was the first jurisdiction in Australia to enact legislation to recognise the rights of consumers to access their health records in 1997, and remains one of only three jurisdictions which recognise this right. This Bill continues the ACT's progressive treatment of consumer access to health records and strengthens the 1997 Act to fill in gaps and clarify ambiguities that have come to light following several practice closures last year.

ACT Health Better Practice Award Winners

Congratulations to the winners of the ACT Health Better Practice Awards, which were presented at the Quality Forum held at Canberra Hospital on 18 May.

The Better Practice (Clinical) Award was won by the Exercise Rehabilitation Service, Aged Care and Rehabilitation Service, for developing a physical activity program for children and adolescents with diabetes or at risk of diabetes. demonstrating significantly improved clinical outcomes.

Sarah Howard, Bethany Leach and Nataly McCann developed and evaluated this program.

The winner of the Better Practice (Corporate) Award was Kristine Dalton and her team in the Canberra Hospital Operating Theatres Storeroom who reviewed anaesthetic stock and demonstrated improvements and cost savings.

The Better Practice Awards (clinical and corporate categories) are presented three times a year at our Quality Forums. All staff within ACT Health who undertake evaluation with a view to improving quality and safety, and who submit a completed QI Activity Form to the Patient Safety and Quality Unit (PSQU) are eligible for the awards.

ALLIED HEALTH

ACT Health building the capacity of allied health



ACT Health will deliver more than \$130,000 in funding this year to support the professional development of the ACT's allied health professionals.

Allied health professionals play a key role in ACT Health's multidisciplinary healthcare team providing quality care to clients and their families. The Allied Health Postgraduate Scholarship Scheme has been in operation since 2005. During the last five years the Scheme has assisted a diversity of allied health professionals to support their learning and development.

Full scholarships enabling reimbursement of postgraduate study fees for the 2010 study year were awarded to twenty-nine allied health professionals including occupational therapists, pharmacists, sonographers, respiratory scientists, medical laboratory scientists and social workers.

Similar to their medical and nursing colleagues, allied health professionals face recruitment and retention difficulties and the Scholarship Scheme not only reinforces the culture of learning within ACT Health but also strengthens the recruitment and retention of allied health professionals.

For more information visit: www.health.act.gov.au

Expansion of Suicide Prevention Services

The ACT Health Minister launched OzHelp Foundation's new premises and the renaming of its program to OzHelp Community Services reflected the successful expansion of its suicide prevention programs.

The Minister spoke at the launch of the new national office premises and OzHelp Community Services (formally known as VYNE@ OzHelp).

The ACT Government places great value on the supportive activities undertaken by groups such as OzHelp, as well as their wider work in suicide prevention.

The ACT Government remains committed to working with community organisations such as OzHelp to address the issue of suicide, particularly in our younger population.

COMMUNITY HEALTH

Effective Management of Chronic Disease in Primary Health Care

By Professor Mark Harris and Professor Nicholas Zwar

HEALTH REFORM AND CHRONIC DISEASE CARE

As part of the National Primary Health Care Strategy, the Commonwealth Government announced a new program to support coordinated care for people with diabetes.

This involves patients enrolling with a practice which is then block funded to provide multidisciplinary care - the model which is likely to be extended to other chronic conditions in the future.

The recent budget also announced block funding for practices to employ nurses and the introduction of some Medicare items to support practice nurse involvement in chronic disease management.

The health reform agenda has been in part based on the rising prevalence of chronic diseases such as diabetes in Australia and the burden that this places on the community and the health system.

Primary health care has an important role in the early and effective management of these conditions to prevent complications and the need for hospitalisation. However, available evidence suggests a gap between current practice and that which is required to achieve these outcomes.

WHAT IS NEEDED FOR EFFECTIVE CHRONIC DISEASE MANAGEMENT IN PRIMARY HEALTH CARE?

Effective chronic disease management requires a shift away from episodic to more structured approaches to care. The Chronic Care Model provides a framework for the organisation of care for patients with chronic disease.

A systematic review conducted in 2006 identified the importance of some key elements of the model in improving quality of care and health outcomes, especially the combination of support for patient self management and multidisciplinary team care.

Multidisciplinary care planning has been supported by the Enhanced Primary Care (EPC) program introduced in 1999 and subsequently modified in 2005 to provide patients with chronic complex conditions with access to Medicare funding for a limited number of allied providers visits as part of a multidisciplinary care plan.

There have also been incentive payments through the Practice Incentive Program (PIP) for completion of an annual cycle of care (including assessment of physiological and behavioural risk factors and complication screening). Both these have had positive impacts.

Structured care planning is associated with improved intermediate outcomes (such as HbA1c) especially for patients with initially poor control. Shared care systems and the introduction of the diabetes incentives were associated with improved quality of care and intermediate outcomes.

A major cause of the remaining gap between evidence and current practice in the management of chronic disease in general practice is the limited organisation capacity for regular monitoring, patient recall, education to support self management and referral to other providers.

Cross sectional studies have found associations between multidisciplinary teamwork within practices and access to and quality of care as perceived by patients.

Patients with chronic disease recognise the constraints and are receptive to more structured approaches and the involvement of other providers, including practice nurses and other non GP staff as long as this does not erode their continuity of care with their GP.

FUTURE DIRECTIONS

Creating the right conditions for structured multidisciplinary care in general practice is challenging. The National Primary Care Collaboratives have demonstrated that improvements are possible with the right incentives and supports. General practice networks have a key role to play in the facilitating these improvements.

Facilitation of team roles for practice nurses and administrative staff has been found to be associated with improved patient assessed quality of care for diabetes and cardiovascular disease.

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COMMUNITY HEALTH

Effective Management of Chronic Disease in Primary Health Care

Creating teams across organisational or cultural boundaries (especially between private and public services) is more difficult. Super clinics and other models of integrated primary health care are also envisaged to provide a model for co-located multidisciplinary teams to provide better care for patients with chronic disease.

The impact of these models on quality care for chronic disease should be evaluated and, if successful, they could be extended to other general practices.

In summary, there is evidence to support a systematic and planned approach to multidisciplinary care for patients with chronic disease in primary care. Despite some positive programs in recent years, significant barriers have remained.

The initiatives announced as part of the current reforms go some way towards addressing these barriers, especially in providing more flexible arrangements to fund team care and encouraging continuity of chronic disease care.

Some questions remain about their suitability for patients with multiple co-morbid conditions rather than single diseases and whether the funding provided is sufficient for the complex needs of some patients. There are also concerns about the impact of pay for performance on the doctor-patient relationship. These need to be monitored and explored in further research.

ACT Health wins Healthy Communities Grant

ACT Health has been awarded a Commonwealth grant to help prevent overweight and related chronic conditions amongst disadvantaged adults in the ACT. Initial funding of \$410,000 will be provided over 15 months to increase participation in dietary education and physical activity programs by at risk adults who are predominantly not in the paid workforce.

Programs that help people to adopt healthier lifestyles can be difficult for vulnerable people to access, therefore the initiative will provide targeted programs for people who are: unemployed; older; of Aboriginal and Torres Strait Islander background; culturally and linguistically diverse; and carers.

The grant will fund a pilot in the North Canberra area which will form a basis for future roll-out in other priority areas of the ACT.

The grant is one of twelve initial grants awarded to Local Government Areas across Australia under the National Partnership Agreement on Preventive Health.

Funding for a further two years (\$270,000 per annum) will be available to Local Government Areas following a successful review of their performance at the end of the pilot phase. Work on the new initiative commenced in April.

INTERPROFESSIONAL LEARNING

Interprofessional collaborative practice - conference update

ACT Health is one of only two health services in Australasia employing a full time driver for interprofessional collaborative care. ACT Health was one of the sponsors of the recent 'All Together Better Health 5 Conference' - the 5th international inter-professional conference held in Sydney in April.

Leaders, innovators and supporters of interprofessional collaborative practice from all around the globe attended the conference. A total of 360 delegates attended representing; Australia, Belgium, Brazil, Canada, Denmark, Finland, Iran, Ireland, Japan, Nauru, New Zealand, Norway, Qatar, Scotland, Singapore, South Africa, Sweden, UK and USA.

This conference aimed to advance interprofessional collaborative practice and support the recommendations of the recent World Health Organisation publication 'Framework for Action on Interprofessional Education & Collaborative Practice, 2010'.

This is the first time this gathering has taken place in the Southern Hemisphere and feedback indicates it was a success with several important outcomes;

- the endorsement of the 'Sydney Interprofessional Declaration', which sets down 5 articles articulating the agenda for interprofessional collaborative practice,
- the beginnings of a global overarching network - possibly an 'international federation of interprofessional collaborative practice' - which will be a consultation point for governments and provide a linked framework for all the various national networks, and
- a commitment to further advance the research and implementation of interprofessional collaborative practice towards the next 'All Together Better Health 6' conference to be held in Kobe, Japan, 2012.

AUSTRALIAN PRIMARY HEALTH CARE RESEARCH INSTITUTE (APHCRI)

For the latest information on conferences, lectures and other events, please visit http://www.anu.edu.au/aphcri/

APHCRI is an initiative of the Australian Government as part of the Primary Health Care Research, Evaluation and Development (PHC RED) strategy and is supported by a grant from the Australian Government Department of Health and Ageing.

It sits within the PHC RED strategy sharing the common overall aim of embedding a research culture in Australian general practice specifically, and primary health care more generally.

The mission of APHCRI is to "Provide national leadership in improving the quality and effectiveness of primary health care through the conduct of high quality priority-driven research and the support and promotion of best practice. It focuses on important sectoral questions relating to the organisation, financing, delivery and performance of primary health care, including its interaction with public health and the secondary and tertiary health care sectors."

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MENTAL HEALTH

Mental Health assessment unit

Consumers with mental health issues including those in crisis or acutely unwell will now receive assessment, treatment and support in a new environment following the official opening of a new Mental Health Assessment Unit at Canberra Hospital.

The new facility is a 6-bed short stay observation unit aimed at providing a more appropriate mental health assessment and treatment environment at the hospital's emergency department.

It aims to provide improved services and reduced assessment times for our mental health consumers. The new unit will form part of an integrated psychiatric assessment service and ensure that our mental health consumers are well cared for in a safe and supportive environment.

The service aims to deliver better care and improved medical outcomes for people with mental health problems while also reducing the level of aggressive incidents and staff assaults in the emergency department.

Hospital emergency departments have traditionally not been designed to comprehensively serve the needs of mental health consumers, particularly those with acute mental health illnesses or disorders presenting with significant behavioural risk such as aggression or self harm.

Until now, the Emergency Department at Canberra Hospital has had limited capacity to assess people presenting with symptoms of mental illness as the designated area is restricted to one assessment bed.

The new 6-bed unit will ensure a 24 hour mental health staff presence in the Emergency Department. It includes a reception area, a private waiting room for consumers and carers, interview room, lounge and dining room, as well as improved facilities for staff.

Acting Director of Mental Health ACT, Dr Peter Norrie said that the new unit would provide improved pathways to healing for mental health consumers presenting to the emergency department. "Following an assessment, a consumer may undergo a period of observation and further assessment, be referred to the community for appropriate follow-up or admitted to an inpatient unit," Dr Norrie said

"The new unit will ensure that people who have a mental health condition receive the best possible care and treatment in the least restrictive environment,"

Dr Norrie continued.

The development of the new assessment unit is part of the ACT Government's redevelopment program to overhaul and expand all aspects of the ACT health system.

The new unit has been constructed at a cost of \$2.01m and is a part of a suite of new mental health facilities being developed by the ACT Government.

OUR WELLNESS FOUNDATION

Strike against stroke

Stroke is a very common disease. Maybe you thought that this description would be used for the flu, being very common, but not stroke. It is the third leading cause of death in Australia. But we always think "I will never have a stroke".

About one in four stroke suffers die in the acute period after a stroke and about one in three are left disabled.

Cerebral infarction, stroke due to artery blockage, is much more common than haemorrhage, bleeding into the brain, and carries a better prognosis overall.

Stroke Awareness Week, 13-18 September, should be used to check your own condition and whether you are susceptible to stroke.

Some of the risk factors associated with stroke can be avoided, such as high blood pressure, high cholesterol level, diabetes and cigarette smoking. Other risk factors include advanced age and irregular heart beat.

Check your blood pressure regularly, stop cigarette smoking if you have started, have regular cholesterol check-ups and through diet, prevent diabetes. Stroke is a medical emergency and time is critical. If you see the signs of stroke call 000 immediately. The *FAST* test is an easy way to remember and recognise the signs of stroke. *FAST* stands for **F**ace, **A**rms, **S**peech, **T**ime to act.

Using the FAST test involves asking three simple questions.

- **F** Check their FACE. Has their mouth drooped?
- A Can they lift their ARMS?
- **S** Is their SPEECH SLURRED? Do they understand you?
- T TIME is critical. If you see any of these signs call 000 immediately.

The Canberra Hospital is organising "Strike Against Stroke" as part of Stroke Awareness Week on 17-18 September at the Belconnen and Tuggeranong Bowling Centres. Both centres will remain open for 24 hours from 12noon Friday 17 September.

"Strike Against Stroke" will be raising funds for the Stroke Unit and the Rehabilitation ward at the Canberra Hospital. The funds will be used to purchase special equipment for use by those people recovering from a stroke.

By bowling, at either of the centres, obtaining sponsors, making a donation or maybe just attending to watch the bowlers, you will be supporting the fundraiser and maybe becoming aware of stroke and preventing the effects it has on the community, your family, friends or even yourself.

"Strike Against Stroke" is a fun way to promote awareness and raise funds for the Hospital areas treating stroke sufferers. Contact the Fundraising Office at the Canberra Hospital for information on how you can help Strike Against Stroke. Phone (02) 6244 2555

For further information about stroke contact the Stroke Foundation on 1300 194 196 or

www.strokefoundation.com.au

CANBERRA HOSPITAL



State-of-the-art neurosurgery suite a step closer

A major milestone was reached during May when ACT Health took delivery of a 5 tonne magnet to be used in its new intra-operative Magnetic Resonance Imaging (MRI) neurosurgery suite.

Construction has begun on the new \$10.5 million neurosurgery suite at Canberra Hospital. This project will deliver a specialist neurosurgery operating suite and will make Canberra Hospital the first hospital in Australia (and one of only 25 around the world) to allow surgeons to safely conduct MRI scans of patients in the operating room during brain surgery.

It will enable the equipment to be moved around the patient, minimising movement of the patient during brain surgery.

Construction of the Neurosurgery suite is at an advanced stage with current construction activities including construction of internal walls, plaster boarding, floor topping and joinery.

In August this year a Nurse Clinical Trainer from Canada will come to Canberra Hospital to train staff on the system itself, how the software works and on the clinical application of the system in a neurosurgical operation. When commissioned, the neurosurgery suite will enhance the complex brain surgery that can be undertaken at the Canberra Hospital in a world's best practice facility. Construction is expected to be completed in the next 12 months.

POPULATION HEALTH

New regulations planned for solaria and tanning units

Solaria and tanning units will need to be registered and their owners and operators licensed under new regulations being developed by the ACT Government.

Amendments to the *Radiation Protection Regulation 2007* would be based on proposed national standards.

Under the new amendments:

- operators of tanning units will need to be appropriately trained;
- the use of tanning units by persons under 18 will not be permitted;
- the use of tanning units by people with a skin type that burns rather than tans (pale white skin) will also not be permitted; and
- all persons using tanning units will need to sign a consent form that advises them of the risks associated with use of the units and precautions to be taken.

The ACT Government has been a strong supporter of national consistency in the regulation of all forms of radiation and sources of radiation, including solaria.

National consistency is achieved through amendments to the National Directory for Radiation Protection. This requires endorsement by several committees, and approval by the Australian Health Ministers' Council.

The ACT Government decided to move ahead with the amendments, anticipating that the national model will be endorsed during 2010. This will ensure the ACT is well placed when the national model legislation is passed.

The ACT Government is working to ensure any new regulations on solaria are as consistent as possible with both the national agenda and with our closest neighbours New South Wales which has now enacted similar legislation. This should maximise cross-border consistency in regard to obligations and penalties imposed on owners and operators of solaria.

Consultation with businesses affected by the new regulations will be conducted during the development of the regulations to ensure a workable date for commencement is achieved.

HEALTHY FUTURE - eHEALTH

New patient management technology for Calvary Hospital

ACT Health has signed a contract worth more than \$2 million with iSOFT Group Limited for new patient and emergency software applications at Calvary Public Hospital.

The contract is part of the ACT
Government's \$90 million e-health
project funded in last year's Budget
which will see major investment in
new information and communication
technologies to improve efficiency, patient
safety and information sharing.

The agreement is for the installation of iSOFT Patient Management and iSOFT Emergency at the 280-bed Calvary Hospital.

The deal follows the roll out of similar solutions at Canberra Hospital and across community health centres in the Territory, and meets ACT Health's goal of providing integrated patient care across all services.

Emergency department specialists, who routinely work at both the Calvary and Canberra hospitals will also benefit from a common system. iSOFT's solutions are anticipated to be the foundation for fully integrated healthcare services and were fundamental for actively improving efficiency and the quality of care services.

Giving doctors and clinical staff instant access to accurate patient information anywhere across our acute and community settings will help improve patient care.

Dennis Tebbutt, Managing Director of iSOFT Australia and New Zealand, said iSOFT's 10-year association with ACT Health was a huge testament to the quality of its applications and service and the dedication of its people.

KIDS AT PLAY: KEEPING ACT KIDS HEALTHY AND WELL



ACT Health recently launched new resources for the *Kids at Play - Active Play and Eating Well Project*.

The project and resources aim to advance the health and wellbeing of ACT children aged 0-5 years by promoting healthy eating and physical activity to families and the early childhood sector.

The Kids at Play Active Play and Eating Well Project is an initiative of the ACT Government through the joint partnership of ACT Health, Sport and Recreation Services and the Heart Foundation ACT.

The Kids at Play project aims to promote active play and healthy eating to families of children aged birth to five years in the ACT and the early childhood sector.

The project promotes five key health messages including Active play everyday; Tap into water everyday; Switch to play everyday; Munch into veg and fruit everyday; and Breastfeeding - good for baby, good for mum.

For more information, go to www.kidsatplay.act.gov.au

Feedback

Healthy Territory is ACT Health's newsletter for people providing healthcare and health related services across the ACT. Healthy Territory tells what is happening at the policy and planning level, and shares information about key issues, directions and events within the ACT health system.

Contributions, comments and any feedback are gratefully accepted from anyone working in our health sector. Healthy Territory is for all ACT healthcare providers, so have your say and voice your ideas, opinions and criticisms.

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