

MURRUMBIDGEE

ISSUE 12 SPRING 2020

# MATTERS

MAGAZINE

Celebrating  
EXCELLENCE  
2020 AWARDS

THIS ISSUE:  
COVID-19  
UPDATE



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## ABOUT US

Murrumbidgee Local Health District (MLHD) provides a range of public health services to the Riverina and Murray regions of NSW, Australia.

We provide services across a geographic area of about 125,561 square kilometres to a population of more than 240,700 residents. People of Aboriginal and Torres Strait Islander heritage make up four per cent of the population.

As the largest employer in the region, with more than 3,800 healthcare staff working across 33 hospitals and 12 primary health care centres, we are supported by hundreds of volunteers who make an invaluable contribution to enriching the lives of people in our care.

Our services are provided through:

- 1 Rural Referral Hospital
- 1 Base Hospital
- 8 District Health Services
- 5 Community Hospitals
- 16 Multipurpose Services
- 2 Mercy Care Public Hospitals
- 12 Community Health Posts
- 1 Brain Injury Rehabilitation Service

## PUBLICATION

We would like to acknowledge the traditional owners of the land covering MLHD and remind people that we live and work on Aboriginal land.

Welcome to the 12th issue of Murrumbidgee Matters Magazine.

This quarterly publication is developed by MLHD. Information is correct at time of printing.

Publication costs are subsidised by income generated from advertising.

## FRONT COVER

*Riverina Canola fields in Spring.*

*Photo by Grant Higginson, Cut Above Productions*

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### OUR VISION

Wellness is our Goal

Excellence is our Passion

Our People are Our Future

# 2020 Excellence Awards

## Celebrating Excellence

Murrumbidgee Local Health District (MLHD) announced the winners of its annual awards ceremony held for the first time via live stream.

The 2020 Excellence Awards celebrated the initiatives of staff across the Murrumbidgee region and acknowledged the dedication and contribution exceptional employees have made over the year.

"This year, more than ever before it is important for us to celebrate and acknowledge the great work of our staff in the great diversity of roles they perform across the region," said Chief Executive Jill Ludford.

The 2020 MLHD Excellence Awards were streamed via Facebook enabling people watch the presentations simultaneously across the district.

"This year we embraced technology and celebrated announcing two award winners each day over the week. These presentations were live streamed from Tuesday 8 September to Friday 11 September.

This year a new Resilience Award category was introduced to reflect on the challenges faced by staff in their pursuit of excellence.

"Congratulations to all the finalists, you are all winners," said Ms Ludford.

Ms Ludford also gave a shout out to everyone who nominated.

If you missed out on the live awards presentation, you can catch it on our Facebook page.



*Teams from across the District watched on as winners were announced virtually.*



## Aboriginal Leadership Award

**Awarded to: Lisa Curry**

Lisa is an EN who works in Cardiology at Griffith Base Hospital. Lisa is a quiet achiever who makes a big difference in the lives and health outcomes of Aboriginal people in her community. She is a role model for the community with her career choices and advocate for our District as a great place to work.

She delivers outstanding customer service, is passionate about transforming health systems to help better engage with her elder Aboriginal Community. She wants to connect the importance of healthy heart checks as a preventative measure to battle heart disease.

Lisa's commitment to excellent clinical care for Aboriginal communities has inspired her to further education. She is currently studying for her Registered Nursing degree and has been an active participant in the Marrambidya Program.

## Diversity Award



**Awarded to: Virginia Sykes, Tuberculosis Care Coordinator**

As the Tuberculosis or TB Care Coordinator, Ginny works mostly with people new to Australia, from culturally and linguistically diverse populations. These people are vulnerable often having limited understanding of Australia's healthcare system, limited access to support and resources, instability in work and accommodation and speaking English as a second (or third or fourth) language. Ginny is tireless in her aim to support culturally and linguistically diverse people in order to improve tuberculosis-related outcomes and she uses many creative methods to provide patient centred care.



## Collaboration Award

**Awarded to: Wellbeing and Health In-Reach Nurse Team**

The WHIN nurses are hosted within school communities in Young, Tumut, Tumbarumba and Deniliquin and work collaboratively with internal and external partner agencies to facilitate access to health, education, community and social services from both the government and non-government sector. Their collaborative and coordinated approach leads to improved outcomes including reduced ED presentations, reduced school refusal rates, and improved student and family wellbeing.

*(Pictured left: WHIN team member Caitlin Larter RN, Wellbeing nurse)*

# Excellence Award

**Awarded to: Angela Farrell, Clinical Leader for Eating Disorders**



Angela successfully manages a complex portfolio that includes all MLHD community and hospital based services involved in the provision of care for people with eating disorders.

positive working relationships with a diverse range of individuals and services. This is evidenced by her recent work in supporting District staff affected by the bushfires and COVID-19 pandemic.

The portfolio also includes engaging with services external to the district such as Wagga Wagga headspace, tertiary based services in Sydney and the InsideOut Institute (Australia's national institute for research and clinical excellence in eating disorders).

Angela has embraced the use of telehealth to support clinicians across the district to enable them to provide evidence based care to people with eating disorders.

Angela is driven, incredibly hard working and has a passion for improving services for people with eating disorders. Angela is particularly skilled in building

The Mental Health Drug and Alcohol service is also currently participating in a formal trial that will address the treatment needs of families in remote, rural or under-represented parts of New South Wales by delivering Maudsley Family Based Therapy (MFBT) via



videoconferencing.

The study is the first to attempt this method of

treatment delivery for adolescents with Anorexia Nervosa in Australia.



# Focus On Wellness Award

**Awarded to: Virtual Pulmonary Rehabilitation Program**

Mainstream Pulmonary Rehabilitation (PR) services have proven to have a number of benefits to patients including increasing their participation in everyday activities and quality of life by reducing activity limitation and fatigue. Services have traditionally been delivered as a face to face centre based intervention. At the onset of COVID-19 the Pulmonary Rehab Team considered ways to continue providing a service to their clients.

The Respiratory Team are now able to connect with their clients, follow their progress and troubleshoot any problems.

The virtual model supports networking across MLHD for the Respiratory Team and has provided the opportunity for improved time and skill utilisation. It also provides the opportunity to partner and share groups and ideas for the future.

Clients with chronic lung conditions are at a higher risk of further impacts due to weather and air borne viruses, therefore remaining at home while accessing this education, provides a higher level of safety. A virtual program was successfully trialled and evaluated using the PEXIP platform.

The Virtual Pulmonary Rehab program has empowered clients with technology to access an alternative option for care in order to receive education and support in a more equitable fashion and in a group environment.



## Our People Our Future Award

**Awarded to: Fever Workshops**

MLHD's People and Culture team created a big-impact experience designed to inspire change this year; FEVER, a unique one-day workshop which encourages leaders to engage with both good and bad lived experiences of patients and staff in order to embed a culture of excellence.

The FEVER experience was fast-paced and far from conventional, incorporating a big red bus and tracks from the Bee Gees (think Saturday Night Fever). It aims for leaders to inspire others across the district, spreading their influence and inspiration so others 'catch the fever'.

Delivered out of town against a beautiful regional backdrop, FEVER provided a reminder of the vast area staff work across and the challenges this poses. The workshop was designed to ensure managers have clarity and direction, understand how they contribute, and have mechanisms to measure how they are tracking.

FEVER workshops, which have been put on hold because of COVID, are evaluated using a model with four levels of learning: reaction, learning, behaviour and results. It is delivered by leaders from different directorates and roles, who are already demonstrating excellence in their respective practices.

## Quality & Safety Award



**Awarded to: MLHD Melissa Sinclair, Essential of Care Coordinator and Penny Patterson, Emergency Clinical Nurse Consultant**

Melissa and Penny demonstrate an unwavering commitment to support clinicians across the district to improve clinical outcomes and enhance consumer experiences. They recognised the need to support clinicians to conduct comprehensive, systematic and holistic assessments and to evidence the quality care provided. They developed the A-G+H Comprehensive Approach to Assessment and Documentation Initiative.

This involves engaging patients in meaningful conversations around psychosocial influences to health, health literacy and providing person centred education and support to improve patient safety. They have done this through the development of user friendly, practical resources including flip books and lanyards, training materials and webinars, along with a system of evaluation and feedback.



# Resilience Award



**Awarded to: Health Promotion Team**

The MLHD Health Promotion team is responsible for preventative health and building stronger healthier, resilient communities. They operate across a broad range of programs to promote healthy living, eating and exercise from healthy eating in schools to active elderly, and maintaining good mental health.

In response to the strict COVID-19 pandemic lockdown restrictions, the Health Promotion Team significantly and creatively adapted their programs to adjust to the lockdown requirements.

Teams were quickly upskilled in the use of technology to adapt core field work to a virtual setting using zoom and webinars to stay connected with coaches and volunteers. A phone management system allow them to deal with high volume of phone calls during the COVID-19 surge.

Physical activities leaders adapted their delivery models to continue to provide access to participants to exercising, maintain positivity and their mental wellbeing through participating in a team walking challenge.

Increase focus on diet and activity for school aged children through social media and animations has resulted in strengthened engagement with schools. ■



“The world is full of people making their mark in their own individual way and doing extraordinary things.”

- Sally Bryant, ABC Riverina Radio

# 2020 Excellence Awards

## *Celebrating Excellence*

**PROUDLY SUPPORTED BY:**

# From the Chief Executive

*Jill Ludford*



Chief Executive Jill Ludford on site at Tumut redevelopment



## APPLAUDING EXCELLENCE

It was with great delight that we were able to proceed with our 2020 MLHD Excellence Awards this year via live stream.

I'd like to thank everyone who took the time to nominate someone who they believe has gone above and beyond the call of duty. Recognition of our special people is so important.

Thank you also to our sponsors. Your financial contribution to the awards has made it possible for our winners to be rewarded with a tangible gift that will contribute to their professional development or education and training.

Thank you to the judging panels, including the Local Health Advisory Committee members who gave their time to review all of the nominations and shortlist the finalists and winners.

We received 55 entries for eight categories and I know the judging panels had a really tough job choosing the winners!

Last but not least, congratulations to everyone who was nominated- even if you were not a winner on the day. The very fact that someone can see the difference you make in your daily work and the way you impact on the lives of our patients, residents, carers and consumers shows just how special you really are. Thank you.

### NEW MODELS OF CARE - HOSPITAL IN THE HOME (HITH)

In a giant leap forward for improving patient safety and enabling remote patient monitoring, we have partnered with ehealth NSW and Alcidion to provide our clinicians with real-time data via mobile technology. The technology will enhance clinical decision making, and improve the safety and quality of care during a patient's stay in hospital, or if they choose, in their own home.

The technology, which uses a simple arm band worn by the patient was first trialled in the Emergency Department of MLHD's biggest hospital, the 325-bed Wagga Wagga Base Hospital. This project explored how critical information could be shared securely and in real-time via mobile devices to enhance clinical decision-making. The clinicians felt this had real potential to assist them in making decisions about the diagnosis and treatment of patients in time-pressured environments like the ED.



**THE SKY'S THE LIMIT FOR SCHOOL BASED TRAINEES**

16 Aboriginal School based trainees were officially orientated to the District recently. The trainees will study their year 11/12 studies, attend TAFE one day a week and participate in work placement one day a week in their local communities.

One of the Murrumbidgee Local Health District Aboriginal Workforce Strategies is to encourage Aboriginal people into health roles. The Aboriginal School Based Trainee program supports the development of the next generation of health professionals in MLHD. This includes:

- 8 Assistants in Nursing
- 5 Allied Health Assistants
- 3 Business Administration

The trainees also toured Wagga Wagga Base Hospital with a once in a lifetime visit to the Helipad! Training Services NSW (TSNSW) coordinated the program with funding from Regional Industry Education Partnerships (RIEP) Program.



*Above: School based trainees visit the Wagga Wagga Base Hospital Helipad during their orientation day*

**BUILDING WORKS PROGRESS**

It feels like we are really progressing quickly now with our building projects and we have included a section in this issue around the progress at each of our sites. I've really enjoyed visiting the sites and seeing the projects advance and the buzz of excitement with staff and in the community around their progress.

**A NEW DIRECTION - MLHD GOALS**

We have recently been working hard with the MLHD Board and Executive to set new strategic goals for our organisation.

These goals are defined by the challenges that lie ahead and set in place a series of actions so that we can tackle these issues and work towards achieving better health outcomes for people in our communities.

The new goals for our District are in the table below.

Jill Ludford  
Chief Executive

**INVEST IN OUR PEOPLE**



**Goal 1 - Increase engagement and culture**

Creating a culture of excellence where staff are working in team environments that are positive, caring and supportive, that enables them to do their best work



**Goal 2 – Enhance staff capability and confidence**

Developing the skill, knowledge and capability of staff to deliver great health care, now and into the future



**Goal 3 – Increase Aboriginal staff levels**

Supporting teams to strengthen the care we provide to Aboriginal people and to ensure cultural safety, across all aspects of the workforce

**FOCUS ON WELLNESS**



**Goal 4 – Build a paediatric service for Aboriginal children**

Keeping children and families connected to healthcare, focussed on approaches that matter to Aboriginal families, in their communities



**Goal 5 – Advance towards zero suicides**

Focussed on connected with people at risk in the community, and providing appropriate environments for people to receive care

**ASPIRE TO EXCELLENCE**



**Goal 6 – Sustain in-reach into residential aged care**

Providing care for older people in their place of residence to support each person's physical, emotional and cultural needs.



**Goal 7 – Deliver consumer focussed care**

Providing a compassionate and consumer focussed health care system, with flexible models of care to ensure people receive quality, safe services as close to their home as possible

# MURRUMBIDGEE PRIMARY HEALTH NETWORK PROUD SPONSORS OF THE FOCUS ON WELLNESS AWARD



Murrumbidgee Primary Health Network (MPHN) Chief Executive Officer Melissa Neal announced the winner of the Focus on Wellness Award at the 2020 MLHD Excellence Awards.

The MPHN contributed \$1,500 for the winner to undertake professional development. The Focus on Wellness Award is presented in recognition of an individual or team who showcase MLHD as the best place to work, lead, practise, volunteer, teach, learn or grow.

**THE WINNER: Virtual Pulmonary Rehabilitation Program**  
Mainstream Pulmonary Rehabilitation (PR) services have proven to have a number of benefits to patients including increasing their participation in everyday activities and quality of life by reducing activity limitation and fatigue. Services have traditionally been delivered as a face to face centre based intervention. At the onset of COVID-19 the Pulmonary Rehab Team considered ways to continue providing a service to their clients.

Clients with chronic lung conditions are at a higher risk of further impacts due to weather and air borne viruses, therefore remaining at home while accessing this education, provides a higher level of safety. A virtual program was successfully trialled and evaluated using the PEXIP platform.

The Respiratory Team are now able to connect with their clients, follow their progress and troubleshoot any problems. The virtual model supports networking across MLHD for the Respiratory Team and has provided the opportunity to improved time and skill utilisation, whilst also providing the opportunity to partner and share groups and ideas for the future.

The Virtual Pulmonary Rehab program has empowered clients with technology to access an alternative option for care in order to receive education and support in a more equitable fashion and in a group environment.

## FINALIST: Renal Supportive Care Team

The Renal Supportive Care team provides a holistic, supportive model of care that enhances patient's choice in their medical care. Renal Supportive Care does not compete with dialysis or in any way deny life-saving treatment; but is designed to enhance the quality of life for patients with end stage kidney disease.

One of the key outcomes of Renal Support Care is to ensure management of symptom burden and preserved patient's quality of life offering a conservative pathway instead of renal replacement therapies.

Underpinning the model is that patients are not required to travel to receive this expert care; instead the team travels to local health care sites or connects via telehealth to bring their skills to their patient.

## FINALIST: Tiffany Thompson Coordinator Consumer Participation Strategy

Tiffany is the Coordinator Consumer Participation Strategy- and a member of the Mental Health Drug and Alcohol Executive Team.

She has an excellent understanding of the personal, social and structural challenges facing consumers and carers when engaging with mental health and drug and alcohol services.

Tiffany is leading innovate strategies to increase consumer participation in Mental Health Drug and Alcohol Services.

One such way is the development of the Mental Health Drug and Alcohol Consumer and Carer Participation Model. This model has led to the formation of the Lived Experience Network which provides a forum for consumers and carers to share their experience, provide input and participate in systems design and development.

Tiffany is playing an integral role in the planning of the Towards Zero Suicide initiatives, ensuring people with lived experience are included in the co-design of the models of care.

Tiffany has directly contributed towards an increase in the level of consumer and carer participation in service development initiatives in Mental Health Drug and Alcohol. ■



*Virtual Pulmonary Rehabilitation Program team, winner of the 2020 Focus on Wellness Award.*

# Spring Thunderstorm Asthma...

## Preparing for a Bumper Season

People in the Murrumbidgee area who have breathing difficulties related to asthma and hay fever need to prepare now for the start of the spring thunderstorm season, advises the Murrumbidgee Asthma Collaborative.

Murrumbidgee Local Health District (MLHD) clinical nurse consultant for asthma and respiratory Robyn Paton said asthma flare-ups traditionally increase in spring throughout the Murrumbidgee due to high pollen counts, in conjunction with thunderstorm-related weather conditions.

“The key message for people who wheeze and sneeze when preparing for spring is to visit their GP or respiratory specialist for an assessment of their lung health, obtain a current prescription for preventer as well as reliever medication and a written Asthma Action Plan, and then use them,” Ms Paton said.

Local respiratory physician Dr Adriaan Venter said people with asthma need to ensure that their asthma is totally controlled during this period.

“The devastating thunderstorm asthma epidemic in Melbourne in November 2016, and epidemics that have occurred in the Riverina, are evidence of the dangers the weather can pose at this time,” Dr Venter said.

“Wheezing and sneezing have been in abundance in recent months. Mix these conditions with elevated levels of pollen and the typical thunderstorms during the late spring, and we may be at risk of experiencing another epidemic of respiratory-related conditions such as asthma flare-ups.

“If someone does have these symptoms they need to be assessed for asthma and take preventative treatment.”

People experiencing asthma symptoms need to use preventer medication each day plus reliever medication as required. They should not rely on symptomatic treatment such as Ventolin if they have breathing problems. If they have hay fever and sinus these conditions also need to be discussed with their doctor to determine appropriate treatment.

“If breathing difficulties continue when taking a preventer and after taking a reliever medication, it is essential to seek medical help immediately. We aim for control, and good management means not having any asthma symptoms,” Dr Venter said.

The annual spring thunderstorm asthma campaign is promoted by the Murrumbidgee Asthma Collaborative which includes representatives from MLHD,

MPHN, Wagga Wagga Base Hospital (WWBH), CSU, Asthma Australia, pharmacy and interested community groups.

This spring thunderstorm asthma campaign launch will also include information about an online register ([science.csu.edu.au/asthma](http://science.csu.edu.au/asthma)) for people with asthma to receive alerts via email or SMS when thunderstorm asthma risk is elevated.

Murrumbidgee Local Health District also reminds people that symptoms of COVID-19 can include a dry cough, runny or stuffy nose, shortness of breath, fever and loss of taste or smell. If you experience any of these symptoms speak to your GP or call the Murrumbidgee COVID-19 Hotline 1800 831 099 to arrange a test. ■

# SPRING THUNDERSTORM ASTHMA ALERT

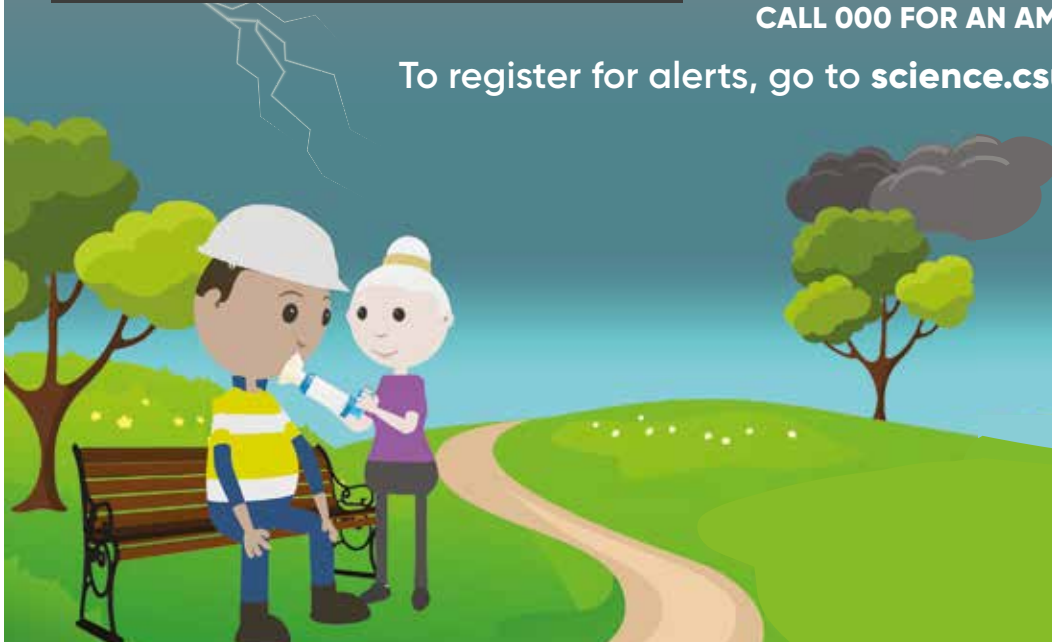
## HOW TO PREPARE YOURSELF:

If you **SNEEZE** and **WHEEZE** in Spring, please

- See your doctor for an Asthma Action Plan
- Use inhaled Asthma preventer medication for all the weeks of Spring, and use a reliever (Blue Puffer) if breathing problems occur
- If you have difficulty breathing go to Hospital immediately

**CALL 000 FOR AN AMBULANCE**

To register for alerts, go to [science.csu.edu.au/asthma](http://science.csu.edu.au/asthma)



Murrumbidgee  
Asthma & COPD  
Collaborative

A message from the  
Asthma Community  
Collaborative Committee

# RIVERINA RURAL TRAINING HUB

## PROUD SUPPORTER OF THE MLHD EXCELLENCE AWARDS



*Fran Trench, Executive Officer, Riverina Rural Training Hub announces the 2020 Collaboration Award winner.*

For the past two years the Riverina Regional Training Hub has been supporting the MLHD Excellence Awards providing sponsorship and a trophy for the Collaboration Award.

It has been fascinating to hear how collaboratively the teams that won this award previously have used it.

### **2018 Collaboration Award winners: The Got It! team**

2018 winners, John Dean and the Got It! team, were able to bring a trainer from the Bouverie Centre (Victoria’s Family Institute) to run a workshop locally.

In their roles supporting our regional families, they often have only one opportunity to connect with a child and their family. To make the most of this the team focused on improving their Single Session Thinking (SST) skills. This approach makes the most of each encounter with clients by treating each contact, but especially the first, as though it may be the only contact, but at the same time laying the foundation for ongoing work if required and requested by the client.

This skill has become a significant tool in the team’s suite. The workshop has also created an ongoing relationship for the team with the Bouverie Centre allowing them to be well placed to work together during COVID-19 using video. What a great outcome for the team and our regional families.

### **2019 Collaboration Award winners: The HOPE Project team**

Joel O’Loughlin, Occupational Therapist with Mental Health Drug and Alcohol Service part of last year’s winning team described how they used the Award sponsorship to upskill and certify key clinicians in the use of the Montreal Cognitive Assessment Tool (MoCA). MoCA is an assessment tool used world-wide. It is evidence based and a sensitive cognitive assessment tool. It provides uniform information for use across many different areas of health, allowing better collaboration between clinicians and importantly, better patient outcomes. The tool can pinpoint specific patient needs to provide them with the care and help they need.

Joel shared a lovely story of a patient who arrived needing their care in great distress exacerbated by domestic violence. The team used their skills with the MoCA tool to determine this patient’s personal requirements. With good health care and proper nutrition, help with motivation and good routines their cognitive capacity and quality of life was measurably improved. Another health win for our region partly made possible by the RRTH’s collaboration with the MLHD.

**Congratulations to this year award winners -**



*2018 Collaboration Award winners - the Got It team.*

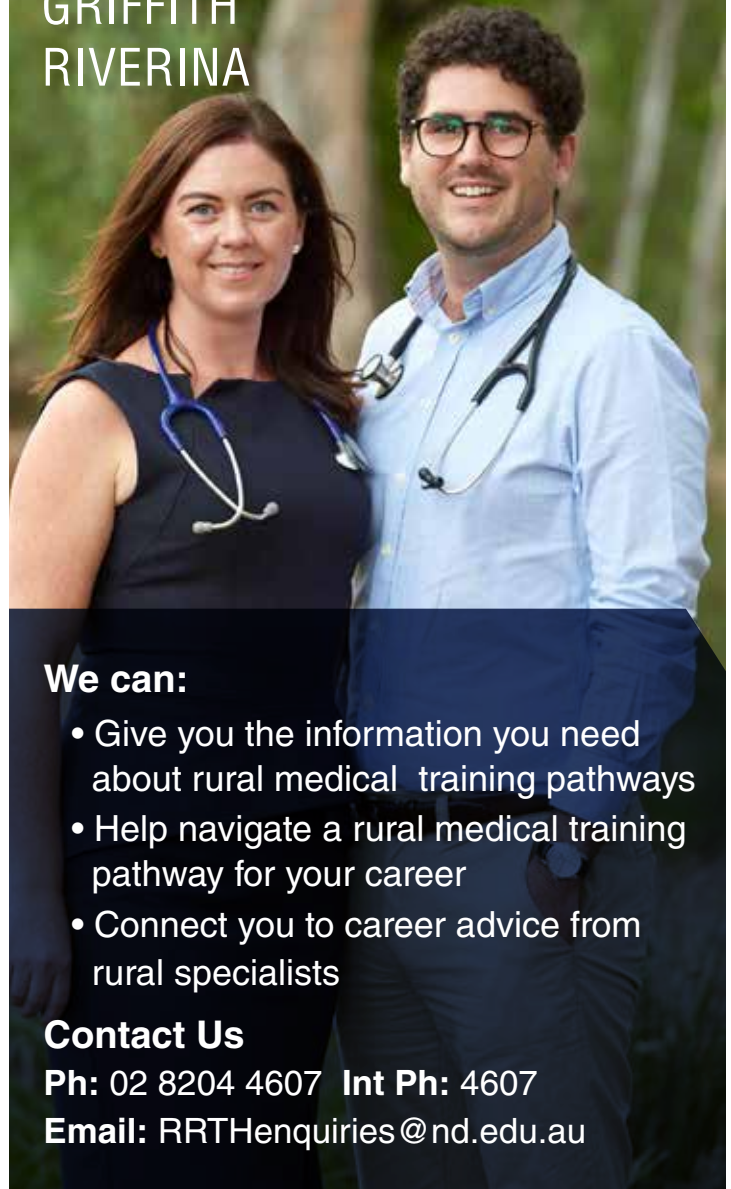


*2019 Collaboration Award winners - HOPE project team.*

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*Brendan Scrifleet is one of the  
Wellbeing Health In-reach Nurse team*

### 2020 collaboration award winners: WHIN team

The collaboration award is presented in recognition of partnerships that achieve mutual success as a result of collaboration. The winner of this award receives \$1500 towards their professional development.

I'm delighted to congratulate 2020 winners the Wellbeing and Health In-Reach Nurse Team (WHIN) who won from a very strong field.

The WHIN nurses are hosted within school communities in Young, Tumut, Tumbarumba and Deniliquin and work collaboratively with internal and external partner agencies to facilitate access to health, education, community and social services from both the government and non-government sector. Their collaborative and coordinated approach leads to improved outcomes including reduced ED presentations, reduced school refusal rates, and improved student and family wellbeing. Another great collaboration.

We shall look forward to hearing how they use their Award.

Fran Trench  
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# Meet our People

## Disaster Manager Denise Garner

We would like to introduce you to our people.

With over 3,500 people who work with Murrumbidgee Local Health District, we have some amazing stories to tell.

Here are just a few...

Denise Garner is no pessimist, but she does spend an awful lot of time thinking about worst-case scenarios and things going horribly wrong.

As Murrumbidgee Local Health District's Disaster Manager, she works out how we prevent and prepare for disasters, respond to them, and recover, whether it's multiple vehicle accidents, terrorism attacks, floods, bush fires or communicable disease outbreaks.

Over the past few months, Denise's focus has been the coronavirus; not just limiting her thinking to the pandemic, but also how a COVID-19 outbreak would be managed if other emergencies occurred at the same time.

Preventing and containing a pandemic requires a coordinated team approach across many organisations and agencies. So in addition to managing the emergency response for 32 health facilities across the Murrumbidgee, Denise works closely with agencies including police, ambulance, emergency services and Albury Wodonga Health to ensure everyone is on the same page.

Having written risk assessments, mitigation strategies and response plans, Denise brings all of this carefully documented theory to life through scenario training, where she conjures up a hypothetical disaster and rolls it out, step-by-step over Skype. As her imaginary plot thickens, with challenging twists and turns, key players explain their thinking and responses.

Denise's many hats include her role on MHLHD's Health Emergency Operations Centre (HEOC) team – a specialised team formed earlier this year to focus on the key operations, planning, logistics and public information that underpin a successful response to COVID-19.

The HEOC has been working quietly behind the scenes to increase intensive care capacity, strengthen hospital-in-the-home services, manage personal protective equipment and make testing widely available. It also established an incident management team to support the COVID-19 response, within health facilities and across the community.

"We need to know how we are going to treat COVID-19 patients at every facility, and be clear on where people with a respiratory illness would be isolated with care and support until test results come back," Denise says.

"Each facility has an escalation plan, which covers how they maintain essential services if staff are required elsewhere, and where they have capacity for further beds they could surge into.

Denise is also a local administrator for the Australian Medical Assistant Teams (AusMAT) database. Most recently, she deployed a staff member to Wuhan, China, to help repatriate Australians, and another to Darwin to meet Diamond Princess passengers from Japan and care for them during their two weeks of quarantine. ■

# Trailblazing Paramedic Lee Clout

Back in the mid-1970s, when Lee Clout was a teenager living in Tumut, women received clear and consistent messages about which careers were open to them.

She was inspired by her Dad's volunteer rescue work, but when jobs came up in emergency services it was made clear they were for men.

"Everyone, except my Dad, said don't even think about applying," she said. "My parents never told me I couldn't do something because of my gender. They may have because it was an inappropriate or not well thought out plan, but never for gender."

"It was just accepted there were no females in the ambulance service and there weren't going to be any."

So aged 16, Lee compromised and headed into nursing. Within a short time, she realised compromising had been a mistake. She disliked working indoors and resented being expected to work in maternity or midwifery wards. She wanted to be in the ED. Being a stubborn and determined soul, she renewed her focus on the career she'd always wanted, and under the guidance of a forward-thinking superintendent, she became NSW's first female paramedic.

"I knew females could do the job and nothing was going to stop me from doing it," says Lee.

"If something went wrong, it was only because of a lack of training or understanding on my part. I didn't have any problems because I was female."

Lee retrained from scratch. Different skills are required outside a sterile hospital environment, treating people on a bitumen road or river bank. In 1979, at age of 20, Lee worked for a short time in Wagga Wagga with the support of a buddy, before being sent to Tumut where she often worked alone.

There were daunting occasions where she thought she'd need help – five or six people injured in a car crash – but police and firemen attending the scene were always prepared to help out.

"It wasn't unusual for the police or fire to drive the ambulance so you could look after your patients," she says.

"You'd get the worst patients in to

hospital, and leave the walking wounded for the next car that could come out from Batlow, Gundagai or Wagga."

Some memories are harrowing and will stay with her forever; dealing with the drowning of a child – and then six days later, the unthinkable – another child drowning as well; sitting and trying to console an 80-year-old lady after the death of her partner of 60 years.

"Sometimes I can open up that box of memories and I'm fine and other times I might not sleep for a couple of nights," says Lee.

"After five years on the road, Lee decided to have a family, but wasn't able to secure ambulance work part time. She tried to manage working full time, with a three-month-old baby and a husband who worked away, but soon saw sense. Prioritising her family, she secured a range of other part-time positions while raising her three children.

Her ambulance service career took off again in the communications centre, which led to a role as Senior Communications Officer with the Police Force for 11 years.

"We would take all their 000 calls and radio work, looking after pursuits and armed robberies, sending out resources. We used to map where they were so we could have police in different spots if they had escapees, or in case they needed to send the dog squad out."

It was a complex planning and logistics role, which was such a neat fit for Lee that she describes it as requiring only simple common sense.

It was the perfect background for her current role managing patient transport for Murrumbidgee Local Health District, which covers inter-hospital transfers, moving people between acute and sub-acute services, and flying patients sometimes with nurses to Sydney and Melbourne.

"The amount of work our staff did through the bushfires was amazing," says Lee.

"I was so proud to be leading the team through that time; we had people on leave offering to come back and help.

"We evacuated Tumut, Batlow and



Tumbarumba Hospitals, the two nursing homes in Tumut and the nursing home in Tumbarumba, and took people as far away as West Wyalong.

"The aged care residents loved it; we got them on a bus singing 'the wheels on the bus go round and round'. Some of the people from Tumbarumba were 95 and one was 98 and they'd never been to West Wyalong before. They were amazed by how flat it was."

From the bushfires, Lee's focus went straight to COVID, working out how patients could be safely transported without risk of transmission, and setting up a hotline and mobile clinics. Lee's role is key to making sure people with the right scope of practice and training are in the right place at the right time.

One challenge she faced was helping to set up a testing clinic in Albury in less than 24 hours; ensuring adequate staffing and personal protective equipment. At that time the most swabbing done in one day at a single location was 150, which seemed a reasonable basis for planning what was to come. But 250 people turned up for testing each day for four days, creating an unprecedented demand that brought out exceptional teamwork.

"We knew it was crunch time and we had to protect our community," says Lee, who has also chipped in and done swabbing when required.

"I'm inspired by the people who have made our work successful. The plan came together well in the end, but only because of the support from wonderful staff who will take on a challenge and run with it." ■

# Meet our People

Emma Field



Emma Field, MLHD COVID-19 Coordinator

## from Psychologist to Pandemic Preparedness

Emma Field trained as a psychologist and spent nearly two decades supporting traumatised children and adult survivors.

Her career trajectory has recently taken her to the planning role in Murrumbidgee Local Health District's response to COVID-19. This has been an opportunity to be a strong advocate for people in rural and regional areas, and has given her the most fulfilment in her career.

"I'm passionate about rural health and making sure we have better outcomes for our people," Emma says.

"I've always been very vocal about needing to close the gap in rural health, and passionate about using telehealth to get services to the bush."

Just recently, Emma has supported and coordinated the COVID-19 response across a large geographic area with many considerations and challenges of living rurally.

"It is important to tailor initiatives to suit people living in rural areas," said Emma. "We require novel thinking to support how we get healthcare to our individual communities who are all unique with multifaceted needs."

Emma is a member on Statewide working groups supporting policy relating to women and children. Her role as a 'rural representative' on these groups is to ensure the rural and regional lens is applied to all policy development and new initiatives.

The role in child protection was the start of a 17-year-focus on people affected by domestic violence and child abuse. While working and raising her own children, she also continued further post-graduate study with a focus on criminology and forensics.

"Every one of these vulnerable people has a story to tell and it challenged me to think about what is going on for people at home first and apply a trauma lens to my work," Emma says.

"Their struggles are real and they are so entrenched, with generational abuse particularly. The rewarding thing was the small gains you would see in children and families – something positive happening so they could get some momentum in their life."

Emma acknowledges the roles were challenging and her advice to all students she's supervised since is to ensure they have good debriefing techniques and opportunities.

"You can't do this work without it."

She also credits her own family, especially her mum and dad in providing great role models in shaping her to be strong, inquisitive with a good sense of optimism for life in general. Emma's father, Friday Field passed away suddenly in 2003 and also shared these same values. Emma credits her mother, Anne as the most significant reason her career has been so dynamic. Anne provides her family with all the support they need and has been with her daughter every step of the way, never waivering, 'I often say to people, I could not have done any of this without my mum, she truly is a pillar of strength, kindness and support'.

Emma's qualifications and expertise has enabled Wagga Wagga Base Hospital's Emergency Department to conduct forensic medical assessments for children, which are essential to obtaining evidence required in abuse or sexual assault cases.

The service, which has saved local children having to travel at what is obviously a stressful time, received an award for excellence in 2016 and replicated at various sites nationally.

"As a result of that, I went on to work with the NSW Health Ministry as one of the Principal Investigators for the state-wide domestic violence pilot," Emma says.

Emma led the Wagga Wagga based pilot for MLHD, looking at a fast and effective domestic violence screening process for women aged 16-45. The process, which was the first of its kind, used a screening tool never used in an Emergency Department environment previously to identify domestic violence risk. Staff were then able to offer psychosocial services as an on call response supporting women and safe discharge. It was a success, filling a much-needed gap, and as a result this service was rolled out across the District to support a 24 hour Domestic Violence assessment and support service for all MLHD sites.

The District became the first rural and regional LHD in the state to support a multi-level domestic violence support response. Emma has co-authored a number of publications relating to this screening tool with the most recent appearing in the Emergency Medicine Australasia Journal this year. The research



is continuing with a focus on an extended electronic version.

Emma says her psychology background has been useful in her latest role as the Health Emergency Operations Centre (HEOC) COVID-19 Coordinator and lead for Planning in pulling together MLHD's coordinated planning to COVID-19. She likens her job to being an ant on the ground, coordinating teams across a range of functions, from logistics and support services to operations.

Emma has been working on MLHD's response since the beginning and as well as the planning function, she oversees the distribution of information, data, and resources. She maintains current information regarding the incident status for all facility staff and ensures MLHD emergency planning and response is current.

The pandemic has placed unprecedented stressors and pressures on health staff. Landing so soon after devastating bushfires, fighting it has proven more a marathon than a sprint.

"Everyone is weary, but this is going to go on for a long time, so as a psychologist I'm very mindful of utilising motivational techniques, showing empathy, and having good problem solving skills," she says.

"Challenging decisions come from a strength-based approach, the problem is not us, the issue is the virus. Our focus needs to be maintained with that at the centre."

She says she's always been a quick learner and adaptive to new and novel environments, one of her strengths and this has supported her once again in this role learning "very quickly the nature of epidemiology and infectious diseases and all things COVID-speak".

"I'm lucky I have good people around me. The goodwill and can-do attitude that our staff have shown has been the highlight of this role, and it empowers me to think we can beat this virus. We can achieve this. We have the resources here in our district to do this.

"It's has really shown me there are people willing to go above and beyond, because they genuinely care for their communities."

Overall, Emma says it's a privilege to work and be involved with a talented group of people. ■

## BOARD CHAIR'S MESSAGE

During COVID the MLHD Board has continued to meet monthly as set down in state legislation. Directors have been meeting virtually but we are looking forward to returning to face to face meetings in the near future.

Each month we have a set Board meeting with two speciality meetings alternating monthly. One month we have a Health Care, Safety and Quality Sub-Committee and the other month Planning, Resource and Performance Sub-Committee. We also have presentations that relate to areas of interest by Directors. Recently we have presentations from the NSW Cross Border Commissioner and his Victorian counterpart. At our last meeting we had presentations on research.

At the August Health Care, Safety and Quality Meeting one of the areas discussed was diets and meals. It is important that patients, staff and HealthShare staff, who provide hospitals meals, work closely together to ensure patients get quality meals that meet their dietary condition. This is especially important for people with diabetes. It is just as important that a record is made on whether or not the patient eats their meals. This is especially important for elderly patients who may suffer from malnutrition. At this meeting we also discussed a paper on Breastscreen and looked at the results of research on remote radiology which will be a valuable asset in rural areas.

Topics of discussions in our Board Meeting were private and public residential care during COVID and the need to work together, keeping everyone safe in ED, the importance of being healthy during pregnancy and work, health and safety obligations.

In August as part of our site visit program the CE and I went to Wagga Wagga Base Hospital. We visited the Stroke Unit with clinicians Martin Jude and Kath Mohr. The unit is working consistently on education for consumers and GPs so



*MLHD Board Chair Gayle Murphy*

they can recognise the symptoms of the onset of a stroke. The sooner someone experiencing a stroke seeks treatment the better outcome there is to return to a normal life.

The Unit is trialling a new monitor called the HealthBug which allows people to be monitored from the comfort of their own home. The Unit were celebrating Stroke Week.

We then visited the Cardiac Cath Lab to look at the valuable work they are doing. The Lab is continually planning to extend their service to improve patient experiences. Patients no longer have to be transferred to other facility for this service.

We finished the day by visiting the Rehabilitation Outreach and Telerehab Unit. This is an excellent program that support people to move closer to home to receive the latter part of their rehab. A combination of face-to-face and telehealth has enabled the unit to support people in an outreach program.

Keep safe,

Gayle Murphy  
Proud MLHD Chair



# Meet our People

Tracey Oakman

Tracey Oakman, Director Public Health

## Pandemic premonition or just good planning?

More than a decade ago, before swine flu had swept the globe, Tracey Oakman became fascinated with a conundrum sparked by her role as head of a public health department.

How do you get the general public to understand the serious nature of a pandemic when the concept seems so far-fetched?

Tracey decided to write a book – a piece of fiction titled “The Pandemic Plan”. And while it was published under the genre of “science fiction and fantasy”, Tracy’s foray into fiction has clearly proven prophetic.

The book tells the story of Estelle, the director of a public health unit, whose team is responsible for containing a menacing flu pandemic. The synopsis sets the scene; “Hospitals are stretched beyond capabilities and people are dying in the thousands. The ugly side of humanity is seen but is also balanced by the noble care for others.”

Tracey’s book drew on her learnings as Director of Public Health for Murrumbidgee and Southern NSW Local Health Districts; a role she holds still. After work and while travelling she pulled her storyline together, hoping her action-packed story “of fear, survival and courage” would serve as covert public health education.

“Even before swine flu, we had always done planning for outbreaks and pandemics and always been prepared. And even though every pandemic teaches us something new, there are underlying principles that we have been trained in over a long time,” says Tracey.

“I could see a pandemic happening, and so I wrote the book because I thought ‘How do you educate the public on something as unlikely as a pandemic?’”

Shortly after the book was written, swine flu gave Tracey her first opportunity to swing that training into action.

“That pandemic wasn’t as severe as our current situation, but the lessons learned from it were huge and have been carried over to our response to COVID-19,” she says.

Tracey’s team worked long hours right from the start, when most cases were coming from overseas. They were tracing contacts and ensuring they isolated, so they weren’t spreading the disease. Not seeing new cases for over a month demonstrated the effectiveness of that vigilant approach, which has continued. Legislation has been enacted to ensure testing and isolation can be enforced, should people not comply with orders.

Contact tracing relies on a state-wide questionnaire to elicit where infected

people have been, what they’ve done and who they’ve been in contact with. That information is then used to determine where they contracted the virus and identify anyone who may have been exposed. Some people with COVID-19 had only two or three contacts, while others had indirect contact with up to 1500 people.

“When it does get to significant numbers like 1500, the Ministry of Health supports us in finding the contacts, because our goal is to get to them within a day or two,” Tracey says.

“We determine whether they are a close contact and need to isolate, or if they’re a casual contact exposed at a very low level, in which case they need to be extremely vigilant in looking out for symptoms.”

One key challenge of a pandemic is the way knowledge evolves over time, making it essential for public health professionals to keep up with huge volumes of new information.

“People want certainty and with a pandemic sometimes we can’t know the answers, because no-one does,” Tracey says.

“It’s a challenging time to provide stability in a very unstable environment. One of the highlights this year has been

working with my extraordinary hard-working team, who are adaptable and do what it takes to get the issues resolved.”

While Tracey’s current focus has been on two health districts’ public health emergency response, her team also needs to keep their other critical roles functioning. And there’s a lot to do.

Behind the scenes, staff are ensuring our water is safe to drink, and preventing legionella outbreaks. There’s a team working on school-based vaccination programs, ensuring a safe vaccine supply and supporting doctors and nurses with technical questions.

Elsewhere, health promotion experts are behind healthy food in school canteens and exercise programs for the elderly. HIV-programs are providing medication and health care, a needle syringe program, sexual health clinics and coordinating Hepatitis C clinics. A team of epidemiologists are using infectious disease statistics to inform what services are made available and where.

Heading up a public health unit is a role that Tracey, 54, felt passionate about from the outset. She headed into the field having studied a Masters of Health Administration and Information Systems while working as a medical laboratory scientist. In her first public health role, she started a Surveillance Office of infectious diseases and served as an Immunisations Coordinator before becoming Director.

“I love public health because I believe it is the underlying foundation for keeping people healthy and safe, and that crosses all socio-economic boundaries. It helps the poor, the rich, the able and people who are disadvantaged. We provide the foundations that enable people to then look after their personal health. That is my passion.”

A self-confessed “studyholic”, Tracey enrolled in a series of courses at TAFE after completing her Masters. She has a real estate certificate, did some accounting subjects and has an advanced certificate in creative writing, which included a semester of journalism.

“I truly believe nothing you do with education or learning is ever wasted,

## INTRODUCING JOHN IRELAND

I became a Partner of a local Law Firm in 1970 and continued till 2002 having in the interim completed examinations relevant to the specialities then provided by the Law Society in both Personal Injury and Mediation.

I left the firm in 2002 upon being appointed by the New South Wales Government as an Arbitrator to the Worker’s Compensation Commission and an Assessor to the Motor Accident Authority. I continued in these roles until approximately four years ago when I embarked on a career as a Mediator and Arbitrator to the District Court.

Until recently my wife and I owned a farming and grazing property breeding angus cattle and first cross lambs. Having sold the property I am hopeful there will be time to follow/renew my interest in horses and hopefully take up sculling.

I have been a Member and held executive positions with a number of service clubs and currently am a Director of The Riverine Club, Equex



*MLHD Board Director John Ireland*

Wagga Wagga and the past three years a member of the Board of the Murrumbidgee Local Health District a role I have found both challenging and at the same time rewarding.

My most recent appointment has been to the advisory building committee of the Conservatorium of Music. Clearly not picked for my musical skills. ■

even if it doesn’t seem directly relevant to your current job,” she says.

Her latest learning effort will bring rewards outside of work and she’s persisting despite the ebbing and waning of her success.

“I’m a hooked and avid golfer,” she says, explaining that she was keen to learn so she and her husband can play together when they retire.

“I’m really not good, but there is always hope.

“You hit one good ball and think, ‘maybe I can do it, after all’. ■



# DISTRICT CATCHES FEVER

Sometimes, when you want to have a big impact that will inspire change, you need to think outside the square and deliver something that resonates because it is extraordinary. That's exactly what MLHD's People and Culture team did this year when they created FEVER, a unique one-day workshop that is resetting leaders approach to growing a culture of excellence.

FEVER's valuable contribution towards leadership, the most influential factor in shaping organisational culture, has seen it awarded a 2020 MLHD Excellence Award. The Our People Our Future Award recognises a team that showcases MLHD as the best place to work, lead, practise, volunteer, teach, learn and grow.

The FEVER experience was fast-paced and far from conventional, incorporating a big red bus and tracks from the Bee Gees (think Saturday Night Fever). It aims for leaders to inspire others across the district, spreading their influence and inspiration so others 'catch the fever'.

"We delivered FEVER out of town with a beautiful regional backdrop behind us, because this is the space we live, work

and breathe in, and so do our patients and consumers", says Project Lead, Brooke Andersen.

"It was a reminder of the geography we work across and the unique challenges we face in a regional community."

Brooke says FEVER was designed to ensure managers feel connected to their purpose, have clarity in their role as a leader and have the capability and confidence to embed new ways of working.

"FEVER confirms and aligns the behaviours and practices that will enable us to grow a culture of excellence – empowering managers to lead workplaces that both directly and indirectly improve patient outcomes through an engaged, purpose-driven workforce."

FEVER was designed to be confronting. The workshop immersed leaders in lived experiences of staff, patients, families and consumers who have received care through our services. The varying experiences empowered leaders to see the role they play in shaping our

organisational culture and understand the link between what they do and improved health outcomes for our communities.

"When we talk about a culture of excellence, it is underpinned by the understanding that every person in our organisation shapes our culture, and we want that culture to be one where staff feel supported, appreciated, and motivated to contribute their best efforts," Brooke says.

"We know that results in great health outcomes and experiences for our patients."

Director of People and Culture and Executive Sponsor, Helen Emmerson, says that FEVER is just one of the unique ways that MLHD is investing in our people, lifting the capability of managers and strengthening leadership approach.

The FEVER workshops which have been put on hold because of COVID-19, are delivered by leaders from different directorates and roles, who are already demonstrating excellence in their respective practices. ■

# Celebrating a Career of Dedication and Changes

article contributed by Leanne Robinson

July 2020 brought about the retirement of Steve Haughey, Chief Radiographer and Sonographer of Young Health Service since 1989. Steve began his Medical Imaging career in Sydney in 1973 as a radiographer, trained in the very challenging science of Medical Ultrasound and was Chief at Ryde whilst also servicing Mona Vale Hospital until relocating to Young in 1989.

A move to the country certainly didn't slow him down, working full-time for 30+ years whilst providing after hours on-call Xray and Ultrasound services, for what accounts to 50% of his 'free-time'. Certainly a different way of life for many people but it has shown his dedication to the community and rural health provision.

On top of this workload came the many changes in the Medical imaging industry-from hand operated chemical film processing in a red-light darkroom, semi-automatic and automatic chemical processing to the amazing introduction of chemical-free computed radiography, Steve's career has covered it all. The installation of a new Direct Radiology system, allowing images to be directly transferred from an electrical plate to the computer for viewing, within 2 seconds without the use of an xray cassette, will be the final change he sees before hanging up the work phone for good.

The changes he has seen over the years do not stop at Xray. As a rare 'dual-qualified' Radiographer/Sonographer, Steve has scanned up to 3 generations of families on fast-changing Ultrasound technology. He has been fortunate enough to be present during all the exciting technological changes that Ultrasound has provided since it's introduction in the late 1970's to the almost life-like 4D images that can be produced today.

Innumerable radiography students have learnt important clinical skills on their placements in at Young under Steve's guidance and supervision but more importantly have learnt from him the priceless skill of happy, friendly cooperation



RETIREMENT: Steve Haughey, Chief Radiographer and Sonographer of Young Health Service since 1989.

with fellow Health workers- Doctors, Nurses, Allied Health professionals, Administration and Health support staff, Maintenance and delivery staff, all treated with equal respect for their important roles. Doctors and Medical students alike have also benefitted from his years of experience, with advice and xray interpretation especially important in the days when Xrays were couriered to Sydney, reported and returned to Young 2 days later.

Young Health Service, staff past and present, would like to thank Steve for his years of dedicated service and wish him all the best as he puts his feet up and turns off the on-call phone once and for all. The Departments and hallways will certainly be very different without him. ■



*PHOTO: An aerial view from the corner of Edward and Docker streets in Wagga Wagga showing work on the façade of the new Stage 3 building.*

## New health building in Wagga Wagga

2020 is a busy year for the largest redevelopment project in the Murrumbidgee Local Health District.

The new six storey building adjacent to the Wagga Wagga Base Hospital is the third and final stage of the \$431 million Wagga Wagga Health Service Redevelopment. Stage 1 – a new Mental Health building- was completed in late 2013. The new Wagga Wagga Base Hospital, as Stage 2 of the project, opened to patients at the start of 2016.

The new Stage 3 building reached its highest construction point in February this year. Since then, construction workers have moved through each level from the undercroft parking to the plant room on the top levels 1 and 4.

By the start of Spring 2020, a major plant had been installed, the services rough-in installation was completed, ceiling framing, floor vinyl, joinery and painting were progressing from the lower levels up, the building's windows were being installed and progress was made on the façade panel installation. Several prototype rooms have been completed along with the completion of the communication rooms.

The action is not all confined to the construction site. Planning is underway in the background for the operational commissioning of the new Stage 3 building. Operational commissioning is an important part of the delivery of a new health facility. It involves ensuring that all components and systems of the new

facility are installed, tested, operated and maintained to requirements.

Staff, currently located on 12 different sites on the health campus and in Wagga Wagga, will move into the new building early 2021. The relocation and opening of services to the public will be staged due to the large number of services.

Construction and operational commissioning of the building will be complete in early 2021. ■

# Griffith Base Hospital Redevelopment continues



Above: Griffith Ambulatory Care Hub has opened

Important milestones in the early works phase of the Griffith Base Redevelopment were marked during May with the completion of two extensions to the hospital and the opening of the Ambulatory Care Hub (ACH).

The community will visit the ACH to access outpatient services: oncology, specialist clinics, rehabilitation, allied health and Hospital in the Home.

All specialist clinics transferred to the Ambulatory Care Hub with the exception of obstetrics, gynaecology, pregnancy care, cardiology and paediatrics- these services remain in the same location in the Hospital.

A 99 kw rooftop photovoltaic solar system was installed on the roof of the ACH to assist with energy-efficiency and reduce electricity costs. These new panels will further supplement the extensive solar power already installed on the hospital's main administration building.

Other works completed as part of the Redevelopment are the expansion to the Medical Services Building to incorporate

additional support areas in the Critical Care Unit and Perioperative areas. An expansion to the Medical and Surgical floors in the Inpatient Unit, including an inpatient rehabilitation gymnasium was also completed.

These works represent an important stage in the redevelopment project which ensures the continued operation of the health service once the main construction works get underway.

The next phase of works on the site will commence later in 2020 and includes:

- Construction of a new non clinical services building housing the kitchen, maintenance and other essential support services with capacity to service the future new hospital
- Temporary relocation of the paediatric ward to free up the site for the future hospital and maintain this service with a close proximity to the maternity unit
- Demolition of redundant buildings within the construction zone
- Temporary car parking

The Griffith Base Hospital redevelopment is progressing in two streams: the continuation of enabling works; and the progression of the design for the new hospital.

The new Griffith Base Hospital is forecast to be completely operational by 2025.

Further information and to view a video of the newly completed Ambulatory Care Hub visit: <https://www.mlhd.health.nsw.gov.au/about-us/GBHRedev> ■

Read more about the Redevelopment projects underway in the MLHD: <https://www.mlhd.health.nsw.gov.au/about-us/our-building-projects>

# On Track in Tumut



*PHOTO: Wiradjuri Elder Winnie Bulger, Stan Russel from Cooee Cottage and MostynCopper Senior Project Manager Winsome Fox during the Wiradjuri Smoking Ceremony.*



Under a perfect late winter sky, the Tumut Hospital redevelopment marked an important step in the project in August.

Amid COVID-19 restrictions, a ceremony was held on the construction site to mark the first pour of the main concrete slab. By late 2021, this slab will be home to the Wellness Centre

The concrete pours will be followed by the erection of structural steel and roof framing.

The NSW Government is investing \$50 million in the planning, design and delivery of a new hospital.

Construction of the new health building is on track to be completed by late 2021.

The Tumut Hospital Redevelopment includes:

- Emergency Department
- Inpatient Unit
- Birthing Unit
- Operating Theatre and Day Surgery
- Wellness Centre – community health; community mental health; community drug and alcohol services; outpatient services; ambulatory clinics; space for education and group therapy services
- Quiet Room for families and a Cultural Room

- Clinical support services including a Medical Imaging Unit; Pharmacy; and Pathology with on-site laboratory
- Administration and non-clinical support areas
- Car parking and helipad

The latest on redeveloped and other building projects on the MLHD can be found here: [www.mlhd.health.nsw.gov.au/about-us/our-building-projects](http://www.mlhd.health.nsw.gov.au/about-us/our-building-projects)

## Smoking ceremony on site

There's been a precious reminder of the Traditional Owners of the land upon which the Tumut Hospital redevelopment is occurring with a Welcome to Country and a Smoking Ceremony held on the construction site in July.

Wiradjuri Elder Aunty Winnie Bulger gave a Welcome to Country in Wiradjuri.

As smoke from the blue gum or Eurabbie leaves wafted across the site, Stan Russell, from Cooee Cottage in Tumut, explained the significance of the Wiradjuri Smoking Ceremony. ■



# Construction complete at Tumbarumba

Construction works were completed at the new Multipurpose Service (MPS) at Tumbarumba in May. The final stage of works included the refurbishment of a second residential aged care wing, the demolition of old hospital buildings, landscaping and car parking. The project construction was completed by Richard Crookes Constructions.

The redevelopment of the Tumbarumba MPS includes:

- A new acute inpatient wing
- Refurbishment of the existing residential aged care building
- A new residential aged care wing
- Expanded Emergency Department including two resuscitation bays and consultation/triage rooms
- New and expanded Community Health area
- Lounge for families of Palliative Care and other patients



Above: Construction is complete at Tumbarumba MPS

- Three new staff accommodation units
- New carpark and landscaped gardens
- A landscaped cultural garden and mural which is being completed in collaboration with the local Aboriginal community

The new Emergency Department and Residential Aged Care Wing became operational in November last year.

Watch a time lapse video of the MPS redevelopment: [mps.health.nsw.gov.au/projects/Tumbarumba](https://mps.health.nsw.gov.au/projects/Tumbarumba) ■



Michelle Cottrell-Smith, MLHD Project Change Manager for the MLHD Tumut & the Multipurpose Service Program.

## Meet our People

### Michelle Cottrell-Smith

Michelle Cottrell-Smith is a MLHD hero, working tirelessly to plan and deliver new health facilities throughout the District. She is a valued member of the MLHD Redevelopment team, always generous with the skills and expertise that she has developed throughout her career spanning nearly 30 years.

With a professional background as a Registered Nurse, Michelle went on to lead numerous patient safety and quality improvements during her years with the Clinical Governance Unit. In recent years, Michelle has found her calling as Project Change Manager for the MLHD's Multipurpose Service Program.

Michelle oversees the planning, design, construction and commissioning of each project with fine attention to detail to ensure that each new facility is fit for purpose and will deliver an excellent experience for residents, patients, staff and their communities.

To date, Michelle has been instrumental in the successful completion of new health facilities at Culcairn, Barham, Tumbarumba and Harden-Murrumburrah which opened its doors in August.

While completing the final stages of the Harden project, Michelle is also working on the refurbishment and extension of the facility at Hay, and now turns her attention to the construction of the new Tumut District Hospital. We applaud Michelle for her passion, dedication and commitment to improving healthcare in our communities. ■

# Doors Open at Murrumburrah-Harden



There were smiles all round on 27 July as welcome rain fell and the community were welcomed inside for their first look at the new Murrumburrah-Harden Health Service.

Local MP Steph Cooke was on hand to say a few words to mark the occasion and thank MLHD, contractors Richard Crookes Constructions and Health Infrastructure for their hard work in bringing the project to fruition. Over the course of the day around 100 community members including the Hospital Auxiliary, Local Health Advisory Committee and Hilltops Council representatives enjoyed small group tours while maintaining social distancing requirements.

A large mural explaining the heritage of the Health Service was installed at the Reception area as a tribute to the past 100 years of health care in the community and it's continuation in the new purpose built facility.

The new Health Service was built on a greenfield site to the south of the existing facility.

The new facility became operational from 2 August when aged care residents, inpatients and all staff and equipment were transferred to the new hospital.

The 33 bed total has been maintained in the new facility, including flexible inpatient beds which can be used for both residential and inpatient care. Services include:

- Emergency Care
- Acute Inpatient
- Residential Aged Care in a home-like environment
- Integrated Primary and Community Health
- Ambulatory Care

Solar electricity panels were installed on the new Health Service to assist energy-efficiency and reduce running costs, enabling savings to be invested into the operations of our health system.

While commencement of operations marks a major milestone in the redevelopment project, finishing works will continue.

Next steps in the project include completion of the landscaping, construction of three new staff accommodation units and the demolition of the old hospital buildings.

The project is on track for completion in 2021.

The project is being funded as part of the NSW Government's \$304 million Multipurpose Service program to provide health and aged care services for small and remote rural communities.

Find out more about the project and take a video walk through tour of the new Health Service: <http://www.mps.health.nsw.gov.au/projects/harden>

The entrance to the hospital reception and public carpark is from Scott Street. Phone 6380 6600. ■

# PHOTO GALLERY



TOP: The Murrumburrah-Harden Hospital Auxiliary with local MP Steph Cooke.

ABOVE: Construction zone at Murrumburrah-Harden Health Service

LEFT: Staff farewell the old Murrumburrah-Harden Health Service

BOTTOM LEFT: Reception at the new Murrumburrah-Harden MPS

BELOW: Tumbarumba MPS construction is now complete.



# Feeling unwell?

## GET TESTED



call the COVID-19 hotline  
**1800 831 099**

### COVID-19 SYMPTOMS

Most common symptoms include fever and dry cough. Some people also experience sore throat, shortness of breath, or runny or stuffy nose.

### CALL NOW

Call the COVID-19 Hotline: 1800 831 099 (open 7am – 9pm everyday). Callers will receive a confidential over the phone assessment, and if they require testing, an appointment will be made for them at their nearest, or preferred location.



Health  
Murrumbidgee  
Local Health District