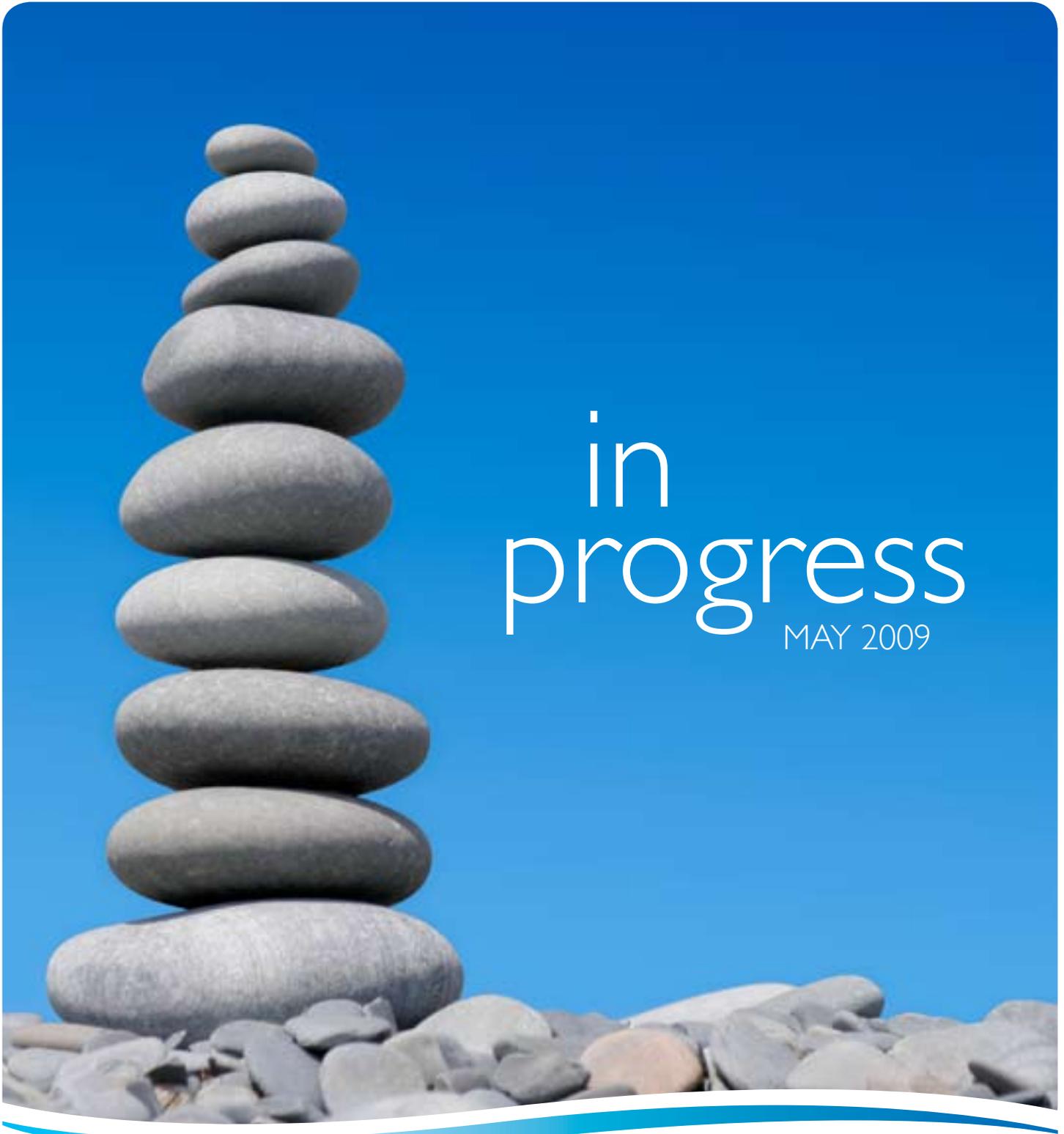


# Tasmania's Health Plan



in  
progress  
MAY 2009

# Contents

1	Tasmania's Health Plan 2nd anniversary	48-49	Saved lives no stroke of luck
2-3	More dollars making good health sense	50-51	Mersey on a mission possible
4-6	Future Health ... diagnosis looks brighter	52	Shiny new hospital reflects well on George Town
7	Magnetic scanner draws a crowd	53	Shot in arm for primary health services
8-11	Ambulance service picks up	54-55	North in chronic disease action
12-15	Nurses care for Tasmania	56	Coastal community clinics on crest of wave
16-18	Care comes closer to communities	57	Health on mend in North
19	Germ warfare is declared	58	Community in consultation
20-23	Wired for sound ... and vision	59	Survey shows sickbay satisfaction
24-27	Elective surgery scrubs up	60-61	Networks to prove net worth
28	New deal for rural doctors	62-63	Funding foremost for Flinders
29	More GPs call Tasmania home	64	Time to tackle chronic disease
30	Smithton hospital back in good health	65	Digital highway takes coastal shortcut
31	Royal treatment for children	66	Building a better Royal
32-33	LGH hospital renovation revs up	67	Public gets Royal PET scanner
34	Health expansion for northern towns	68-69	Cancer carers calm concerns
35	Westbury: far more than bricks and mortar	70	Cancer treatment accelerates at Royal
36-37	Patients on road rest easier	71	House calls a phone call away
38-39	Thoroughly modern Mersey	72	Rosebery centre responds to residents' needs
40-41	Decisions on diabetes danger	73	Two coasts' residents now transparent
42	Our hospitals are baby-friendly	74	Pointing the way for easier care access
43	Bruny lands purpose-built health centre	75	Building health workforce by degrees
44	Community care takes centre stage	76-77	We're on a bold journey
45	Community antenatal services and clinic born	78	Scottsdale hospital enjoys serious makeover
46-47	Quitters are winners	79	Index

## Tasmania's Health Plan in Progress

Tasmania's Health Plan in Progress outlines many of the key healthcare projects completed or in progress on the second anniversary of Tasmania's Health Plan (24 May 2009).

Other Tasmania's Health Plan projects will continue to roll out in 2009 and beyond.

Tasmania's Health Plan in Progress is an update on Tasmania's Health Plan. This update is a feature the Government's commitment to keep the public informed about its activities, policies, programs and services.

# Tasmania's Health Plan

providing Tasmanians with the care they need, when they need it

In May 2007, the State Government released Tasmania's Health Plan as a roadmap to an integrated healthcare system that meets community needs today and into the future.

Tasmania's Health Plan was developed because our health system faces many challenges that cannot be ignored:

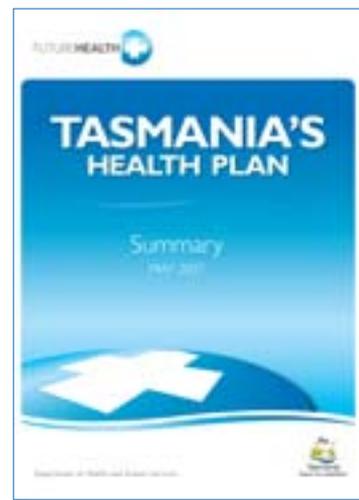
- a dramatic increase in chronic disease
- an ageing population
- increasing costs of healthcare
- an ageing workforce and difficulties recruiting staff.

Tasmania's Health Plan is helping create a safe, sustainable and efficient health system that meets community needs.

Tasmania's Health Plan declares that all our health services will be:

- as close as possible to where people live, providing services can be delivered safely, effectively and at an acceptable cost
- appropriate to community needs
- client and family focused
- integrated through effective service coordination and partnerships between providers
- designed for sustainability
- focused on being well, not just treating illness
- delivered in a culturally appropriate manner.

Tasmania's Health Plan is a roadmap to an integrated healthcare system that will meet community needs into the future.



Where services cannot be delivered safely, effectively and at an acceptable cost from within local communities, access to services should be provided through:

- service coordination
- outreach services from an external base
- the use of technology
- transport assistance
- other appropriate community support.

Tasmania's Health Plan increases the focus on disease prevention, health promotion and community-based care, with acute hospitals reserved for patients that community services cannot manage.

In addition to personal benefits for individuals, these changes can help relieve the pressure on our hospitals.

In short, Tasmania's Health Plan will ensure Tasmanians get the best value for their massive investment in health and a system they can rely on to meet their needs. ➔

Find more about Tasmania's Health Plan, including monthly newsletters and reports, at [www.dhhs.tas.gov.au/thp](http://www.dhhs.tas.gov.au/thp)

# more dollars making good

## 11.2 per cent budget increase for state's health system

**The 2008-09 state budget delivered a \$153 million boost to health and human services bringing the total spend for the year to over \$1.52 billion.**

The budget also locked in funding for major capital investment and the rollout of service reforms over the next four years in line with Tasmania's Health Plan.

The budget provided a sustainable financial base for existing services and allowed the Department of Health and Human Services to invest in its extensive reform program.

Key initiatives included:

**Health and human services reforms** – \$80 million to support the implementation of reforms and development of new service models including \$20.1 million for clinical services, \$4.5 million for primary health services, \$6 million for out of home care and \$17.1 million for alcohol, tobacco and other drug services.

**Hospital and health facility investment** – In the 2008-09 budget a commitment of \$69m over four years was made for redevelopment of community health centres in rural and urban locations as well as Integrated Care Centres at Clarence and Launceston. Recent announcements have been made for an investment of \$100 million over five years for redevelopment of the Royal Hobart Hospital.

At the Launceston General Hospital there is an existing commitment of \$12m for a new emergency department on which work is well advanced; \$15m for a new car park to be built in conjunction with the Integrated Care Centre and the most recent announcement of \$40 million in Commonwealth funding for development of an Acute Medical Unit and major redevelopment of wards and surgical area.

**More nurses** – \$20.8 million for additional nurses in our public hospitals.

**Allied health in North** – \$3 million in 2008-09, increasing to \$4 million in 2009-10, for extra allied health and rehabilitation services in northern Tasmania, including at the LGH.

**Hospital equipment fund** – \$14 million for vital equipment for Tasmanian hospitals and towards completing the purchase of new linear accelerators for the RHH and LGH, replacement of the patient administration system, a new pharmacy information system and a new statewide perinatal database.

**Ambulance and patient transport services** – \$11.6 million funding, including \$5 million for ambulance and patient transport services. \$4.9 million for new vehicles as part of a four-year ambulance replacement program. \$1.7 million for building new ambulance



# health sense

stations on the East Coast and Tasman Peninsula, and for more paramedics in Queenstown, New Norfolk, Sorell and Huonville, and the East Coast and Tasman Peninsula.

**Smoking cessation** – \$2.7 million for measures to help Tasmanians give up smoking, including appointment of a statewide coordinator; smoking cessation nurses in public hospitals, an additional Quitline counsellor and partnerships with GPs, practice nurses and NGOs to help people overcome tobacco addiction.

**Dental services** – \$3.2 million to continue implementation of the Better Dental Care package, including seven additional dentists working in the public sector and funding for 48,000 general dental treatments in the private sector for public dental clients.

**Information technology** – \$18.5 million over four years will go for new IT systems. This will, among other things, build clinical capacity by providing doctors and nurses with instant bedside access to information and will enable better online clinical data transfer between hospitals to help with diagnosis and treatment. [+](#)

Initiatives for Tasmanians living in rural areas include:

- Health care centre upgrades – over \$31 million for the upgrade of healthcare centres around the state: Glenorchy (\$8.5 million), Bruny Island (\$3 million) and Longford/Westbury (\$2 million). Work on centres at King Island (\$5 million), Flinders Island (\$6 million) and Kingston (\$6.5 million)
- Smithton District Hospital – \$1.5 million for the completion of the \$5.8 million Smithton District Hospital redevelopment
- Northern Integrated Care Centre – \$18 million in partnership with the Australian Government for a new facility that will collocate and streamline health service delivery for northern Tasmanians and reduce demand on the LGH
- Clarence GP Super Clinic/Integrated Care Centre – \$18 million in partnership with the Australian Government to build a modern care centre to streamline access and service delivery for people living on Hobart's eastern shore and reduce demand on the RHH.



# Future Health ... diagnosis looks

second anniversary of Tasmania's Health Plan reveals much progress

**Health Minister Lara Giddings launched Tasmania's Health Plan in May 2007 to tackle an almost "perfect storm" threatening to deluge the state's healthcare system.**

Tasmanians smoke more, put on more weight, get less exercise and so die younger – and they are older than other Australians.

At the same time, health system costs are escalating and the health workforce is getting older and retiring while it becomes harder to recruit replacements.

It was in these dire circumstances that Tasmania's Health Plan was developed by health system experts, in consultation with clinical staff and the community, with a focus on system-wide reform.

Two years on and Tasmania's health system is clearly on the mend if not yet fit and well.

Ms Giddings says the two-year milestone gives cause to reflect on the progress and impact of Tasmania's Health Plan.

"When we launched the Plan in May 2007 we had one clear objective: to deliver a high quality, sustainable, responsive and integrated health system to meet the future needs of the Tasmanian community," Ms Giddings says.

"Tasmania's Health Plan is based on providing services as close as possible to where people live, as long as quality and safety standards are met in all cases.

"Unfortunately, because of Tasmania's small but widespread population it is not possible to provide specialist care in every hospital. To do so would compromise standards and put lives at risk."

Ms Giddings says it was clear from the outset that confronting difficult decisions was a necessary but challenging task.

"Back at the launch of the Plan, I said that for almost 50 years governments of all stripes had tried to grasp healthcare reform in this state and that they, despite best intentions, had found it almost impossible to tackle the big issues.



## much brighter

"There were plenty of visions and even more reports, but little effective action. By 2007, we had simply run out of time," she says.

"Two years on, we are now well into the implementation stage of the most significant health reform the state has ever undertaken and the benefits are already apparent.

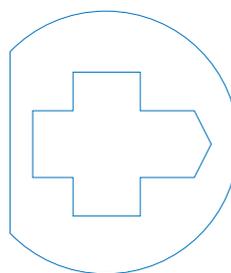
"Tasmania's public hospitals have turned the corner and now have a strong and clear direction to move forward under.

"There is more funding for our acute hospitals, new equipment and more beds.

"We have employed more doctors and nurses and have updated and expanded ambulance services. Information technology is playing a far bigger role today than two years ago and is helping to overcome some clinical shortages," Ms Giddings says.

During this time, the health department has undergone a major reorganisation to further increase its focus on patients and clients.

*continued next page ...*



"I am convinced that beyond the horizon lies a brighter, healthier future for all Tasmanians."



## Future Health ... diagnosis looks much brighter

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The central agency now focuses primarily on policy, strategy, performance and governance. It accounts for less than three per cent of the health budget.

Management of health services is moving out of head office and closer to the communities they serve.

The state is now divided into three health service management areas: North West, North and South, under the leadership of local CEOs.

As part of this move, primary and acute care sectors have begun to integrate under one management team in each of the three areas.

There is also a clear service delivery charter for the operational units, which are responsible for around 87 per cent of the health budget.

"The major reforms introduced by Tasmania's Health Plan are now much more closely reflected in the department's structure," Ms Giddings says.

"I am particularly pleased that the acute hospital and primary health functions are being brought together to break down the barriers between our hospital and community health services.

"The changes will allow greater autonomy for our major hospitals with clearly defined accountability."

Perhaps the Plan's most fundamental change is an increased focus on disease prevention, health promotion and community-based care. This focus reserves acute hospital care for patients that community services cannot manage.

The rollout of these reforms is in motion and more will become visible during 2009–10, such as the opening of integrated care centres.

"Besides the bigger ticket, headline items like the new Smithton hospital, many more behind-the-scenes components of the Plan are either completed or making good progress." Ms Giddings says.

"Planning helped us lift our heads to the horizon to see what was coming our way.

"Two years ago that revealed an alarming vision. It still does; but we are now in a much stronger position to cope with it. I am convinced that beyond the horizon lies a brighter, healthier future for all Tasmanians." 

### Small state takes the strain

Tasmania's public health system provides services at over 350 sites around the state. Every year it:

- responds to over 64,000 ambulance callouts
- admits almost 100,000 people to hospital
- treats more than 120,000 people in emergency departments
- provides over 850,000 occasions of outpatient service.

### Keeping faith with the community

The health department has maintained full transparency throughout the implementation of Tasmania's Health Plan.

It has conducted many community forums, and appointed and consulted with consumer representatives while making all information available through regular newsletters and on the web: [www.dhhs.tas.gov.au/thp](http://www.dhhs.tas.gov.au/thp)

The Government has continued to front up to the public in the face of difficult situations like the changes to Mersey hospital and the Howard Government's subsequent takeover.

The department has negotiated openly with communities to find acceptable solutions as in the cases of Ouse and Rosebery.

Community consultation has been the hallmark of Tasmania's Health Plan.

# magnetic scanner draws a crowd

## diagnosis more accessible for North's public patients

**Northern Tasmania's first public MRI scanner has boosted Launceston General Hospital's diagnostic capacity and will cater for up to 4000 patients a year.**

Until the introduction of the new \$2.4 million machine in July 2008, Calvary St Luke's campus had the only MRI (magnetic resonance imaging) scanner in the North.

This meant LGH patients had to move backwards and forwards between hospitals to use a machine that better diagnoses their condition.

LGH patients and outpatients can now conveniently access a scanner in the same building in which their specialists work.

Tasmania's Health Plan identified the MRI machine as a priority for LGH and with the cooperation of the Commonwealth Government delivery was prompt.

The Commonwealth Government has also granted the LGH scanner eligibility under the Medicare scheme so patients can be bulk-billed for services. ➡



MRI scanners obtain images using super-conductive electronics to produce a magnetic field 20,000 to 30,000 times stronger than the Earth's.





# ambulance service

## funding for expansions and upgrades drives improvements

**The Tasmanian Ambulance Service has taken care of a number of long-standing issues with a series of multi-million dollar initiatives.**

Funding under Tasmania's Health Plan has paved the way for new facilities, more staff, equipment and systems upgrades.

There is a new ambulance station at Mowbray and projects to establish new paramedic ambulance bases at Triabunna, Nubeena and Queenstown.

New volunteer first-response units now operate out of Poatina, Longford, Port Sorell and most recently South Arm.

Ambulance staff numbers have jumped by an additional 100 positions to boost staff numbers at the Huonville, Hobart, New Norfolk and Sorell stations as well as providing 24-hour coverage from the new Mowbray station.

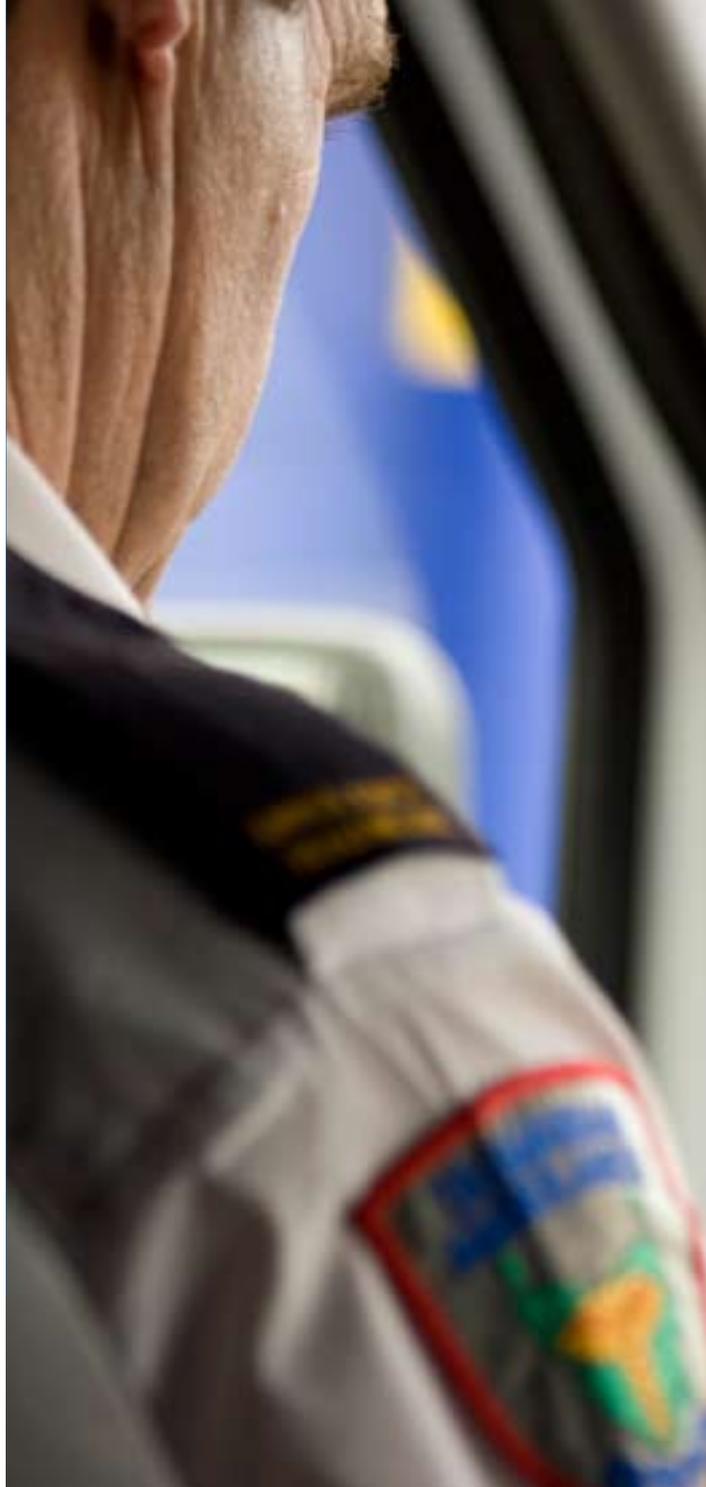
Additional paramedic positions have or are being advertised for Queenstown, East Coast and Tasman Peninsula.

The air ambulance retrieval service has also hired extra staff.

On the road, 75 of the 100-strong ambulance fleet upgrade are in action while above ground the air ambulance and the Tasmanian Police rescue helicopter have both had upgrades.

In another initiative TAS has upgraded its computer-aided dispatch system to allocate crews to emergency cases.

It is also in the final stages of implementing a patient transport computer-aided dispatch system as well as a patient referral process that will see patients with lower acuity needs transferred to appropriate referral care providers.



# picks up

TAS has also introduced an electronic patient care record in collaboration with the Victorian and Queensland ambulance services.

The system, using Toughbook computers, lets crews enter case information on the road, allowing instant download of details when an ambulance reaches a hospital.

Further enhancements will shortly allow the transfer of patient care and cardiac monitor details to the receiving hospital before the ambulance arrives.

In addition, an upgrade of the VACIS program will see information from the computer-aided dispatch sent directly to crews via the Toughbook computers on the road.

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## North gets brand new ambo base

Tasmania's newest ambulance station at Mowbray in Launceston will cut emergency response times in the North and reduce swelling caseload pressures.

The \$650,000 new base, with \$1 million recurrent funding to support 24-hour-a-day crewing, will help reduce response times in Launceston's northern suburbs and surrounding areas.

The new Mowbray station was built in recognition of the significant increase in caseload in this part of Launceston over recent years, particularly in emergency call-outs.



Tasmania's Health Plan reinforced the importance of the Tasmanian Ambulance Service in supporting rural facilities.



## Ambo Sprinters fleet of foot

The Tasmanian Ambulance Service now has 75 new Mercedes Sprinter ambulances on the road and another 25 are progressively coming into service.

The \$10.7 million overhaul of Tasmania's fleet is on target with \$4 million spent on new vehicles in 2008 alone.

Fitted out by North West company Mader International, the new ambulances provide substantial savings for TAS by reducing maintenance costs.

Most importantly, the new vehicles come with advanced safety features including six airbags, anti-lock brakes and stability control.

The Sprinters come with an extended warranty of an extra 100,000km over three years compared with the previous model. This will further ease vehicle downtime and help keep ambulances on the roads at a time when the caseload is rising at 7.5 per cent a year.

Almost the entire ambulance fleet will be upgraded by 2010.

Eight Toyota Land Cruisers are also now in service and are fitted out to retrieval unit specifications.

An additional \$5 million was allocated in 2008-09 for ambulance and patient transport services.

These initiatives allow concentration of costly acute health services at a regional and statewide level, as envisaged in Tasmania's Health Plan, and are consistent with ensuring clinical safety and quality standards.

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Work is also underway on a vehicle tracking and a locational interface that lets the command and control centre see vehicle locations across the state and provide crews with voice guidance to help locate patient addresses.

All stations across the state have had their computer network upgraded to high speed access for better communication with rural and remote centres.

Most recently, TAS has just introduced an electronic incident reporting system so ambulance staff can report incidents and near misses.

The system aids in the identification, investigation and management of safety and quality problems, and will help prevent recurrences.

TAS is also in the final stages of rolling out a new manual handling program with the help of the South Australian Ambulance Service. The use of new equipment and a new system of patient manual handling will potentially cut TAS WorkCover claims. ➡



## More money for training

The Tasmanian Ambulance Service has received more than \$170,000 for training equipment and new lightweight medical trauma and oxygen kits for ambulances.

The funding boosts resources for the TAS clinical education and training unit and will also increase training opportunities for student ambulance officers.

The number of students has doubled in recent years because of the expansion of ambulance services. At the same time, there are now more educators and new positions for volunteer training.

The financial injection has fully equipped two former ambulances, now retired from the fleet, as training vehicles to let students train in realistic circumstances before they are rostered on active duty.

The two training vehicles are based in Hobart, but used statewide.

The funding has also bought a \$5000 manikin baby to help students develop and practice the special skills needed for dealing with infants.

The southern region has a new electronic simulation manikin and a clinical practice and education unit costing \$90,000. In the North and North West, a further \$120,000 has bought two high fidelity simulation manikins to increase the high level of training that comes from real life simulation.

Meanwhile, TAS has formed a new academic alliance with the University of Tasmania for undergraduate training and is about to move to a new pre-vocational degree course.



# nurses care for Tasmania

## more nurses enrol to join Tassie public health system

**Nursing in Tasmania is undergoing a quiet revolution in order to overcome staff shortages and to develop new career paths to help retain nurses.**

Reforming and expanding Tasmania's nursing workforce, the largest professional group in the state, is critical to the future of the state's health services.

With a large slice of Tasmania's health workforce heading for retirement, the health department has taken urgent steps to future-proof the state's health system.

This has seen nurse numbers rise and a brave new world of professional development options open up under Tasmania's Health Plan.

While health staff remain under pressure due to the increasing demands of an ageing population and more chronic illness, the health department is steadily putting the building blocks for a healthier Tasmania in to place.

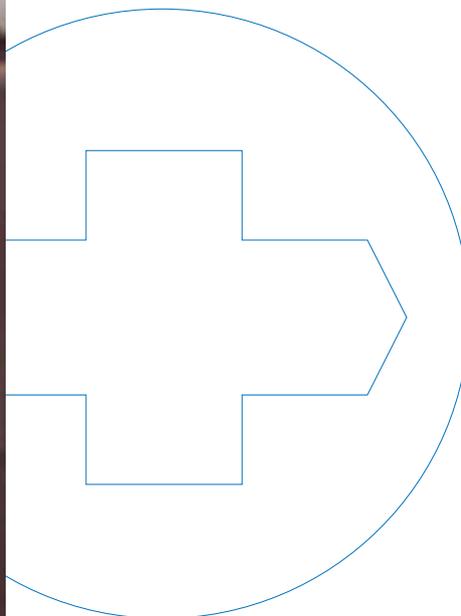
For a start, the role of nurses is expanding with highly trained nurse practitioners a new reality in Tasmania. Nurse practitioners will have advanced assessment skills and within an agreed formulary will prescribe and dispense medications as part of a wider healthcare team.

Mental Health Services will appoint one nurse practitioner in the South and another in the North to work in community mental health teams.

Education and training opportunities now abound.

A perioperative course for enrolled nurses concluded late last year has qualified 11 enrolled nurses to join operating theatre teams across Tasmania as circulation and instrument nurses.

The qualification for enrolled nurses wishing to join nursing has now changed from a certificate IV to a Diploma of Nursing and is newly available through the VET Sector.



Tasmania's Health Plan argues that a sustainable health system needs an appropriately skilled and supported workforce.

The Department of Health and Human Services is also working with the School of Nursing and Midwifery on a new program that offers more flexibility for refreshing the skills of nurses who wish to re-enter the workforce after a substantial time away.

In addition, the department has appointed Prof Mary FitzGerald as Professor of Nursing Practice at the Royal Hobart Hospital to further develop nursing education and research in the workplace .

On the workforce front, there are now nearly 20 per cent more nurses today than four years ago.

In this time, the department has hired 296 more (full time equivalent) nurses in Tasmania's major public hospitals.

A three-year nursing enterprise bargaining agreement signed in 2007 provides better pay for nurses and a review to develop a new workload model to help the state retain nursing staff.

At the same time, RHH is working to improve flexibility for its nursing workforce by examining ways to develop its nursing pool to help staff work around family commitments. ➕

### New nurse numbers

Nurses and midwives make up over one third of the health department workforce.

**Royal Hobart Hospital** 41 nurses including five registered nurses for neo natal intensive care and a mixture of enrolled and registered nurses for the emergency department, paediatrics, critical care and surgery.

**Launceston General Hospital** 40 nurses including six registered nursing positions in intensive care/coronary and a mixture of registered and enrolled nurses for various wards, theatres and departments.

**North West Regional Hospital** 13 nurses including six registered and enrolled nurses for an operating suite and three for the emergency department.

*Numbers as at 30 June 2008*



## nurses care for Tasmania

### Nurses perform in theatre

**A program to boost the number of nurses qualified to assist in operating theatres across Tasmania has begun in Launceston.**

The enrolled nurse perioperative practice program will help overcome a shortage of skilled theatre staff by qualifying enrolled nurses to join operating theatre teams as circulating and instrument nurses.

Eleven nurses completed the first six-month course that enables enrolled nurses to perform a wider range of roles in operating theatres.

The course, provided on-site in Tasmania by the College of Nursing (NSW), offers another career path to help retain nurses in the state.

Clinical nurse educators in the perioperative suites collaborated closely with the College of Nursing to present a program that provides contemporary best practice knowledge and skills. 🏥

### Nurse teaching and learning healthier

Royal Hobart Hospital has appointed a Professor of Nursing Practice Development to lead nursing education, training and practice development.

Newly appointed to the position, Prof Mary FitzGerald will link professional and nursing workforce development with academic programs of teaching, learning and research for nurses.

Prof Mary FitzGerald leads a large team of nurses including clinical nurse educators, professional development coordinators and researchers at the RHH.

Prof FitzGerald will also contribute to nursing practice development in primary health services.

Another priority is to create a sustainable program of nursing and midwifery practice and research that will include developing a centre of excellence.

The conjoint appointment with the University of Tasmania involves collaboration with senior nursing executives at a policy, academic and regulatory level.

Meanwhile, in 2009 a group of 36 nurses officially graduated from a year-long graduate nurse transition program into northern Tasmania's public health system.

The DHHS program is essential for nurses moving from university education to full-time employment in the state's health system.

Graduates took jobs at the Launceston General Hospital, in community health services, and child health and parenting.

The transition program provides a unique chance for graduate nurses to gain practical experience in a variety of nursing areas and to sample different career options.

Participants may spend six months working in a community setting and the remaining six months on a ward at the LGH.

Forty-three new nurse educators are working around the state.



## Nurse practitioners to practise

**In a Tasmanian first, the Nursing Board earlier this year authorised the state's first nurse practitioners to practise.**

Nurse practitioners have developed the skills and knowledge to expand their role to include things "traditionally" performed by other health professionals such as prescribing medications and ordering diagnostic tests.

Nurse practitioners can now prescribe and dispense medications from an authorised medication list, once the sole province of doctors.

Tasmania's Chief Nurse Assoc Prof Fiona Stoker says the nurse practitioner role offers a clear new clinical career pathway for more highly skilled nurses to remain in clinical practice.

"We envisage that this new role will enhance nursing recruitment and retention, by offering young nurses another exciting career pathway," Assoc Prof Stoker says.

"This is the culmination of many years of hard work and I am very excited about the future of nurse practitioners in this state."

Assoc Prof Stoker says she welcomes the broad support from the state branch of the Australian Medical Association for the introduction of nurse practitioners in Tasmania as part of the multi-disciplinary team.

"There are well over 250 authorised nurse practitioners in Australia in a range of practice areas including primary health, mental health, emergency, critical care, palliative care, renal, women's health and aged care," she says.

"Tasmania is now catching up. Nurse practitioners offer the potential to improve access to services and healthcare outcomes for consumers as well as satisfaction levels for the care provided.

"They are complementary to, not a replacement for, other members of the healthcare team. They will operate as part of an interdisciplinary healthcare team.

"Establishing the role of the nurse practitioner is part of the health department's commitment to building a strong, sustainable nursing workforce and is an integral part of Tasmania's Health Plan.

"Nurse practitioners will enable other highly skilled health professionals to manage the increasing complexity of care in an environment that will struggle to train sufficient health professionals in the future."

Mental health is the first area in the department to embrace the new role.

Mental Health and Statewide Services CEO Dr John Crawshaw is pleased his area is leading the way on progressing careers for nurses as well as providing positive benefits for clients.

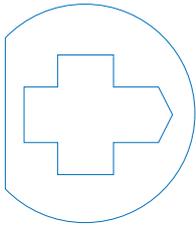
"We expect the client to benefit from prompt and attentive care at the same time as the skills within our community teams are expanded," Dr Crawshaw says.

As a nurse practitioner in mental health, applicants must successfully complete a clinical Masters degree in nursing and additional training in pharmacology and medical diagnostics.

They must also have at least five years experience in the practice for which they are applying.

The health department is working with hospitals on the introduction of nurse practitioners in aged care.

Legislative and regulatory changes are in place to support the implementation of the nurse practitioner role. ➔



Tasmania's Health Plan provides a blueprint for integrating primary and acute health services statewide.



# care comes closer

new health centre model to bring more care closer to home

**An exciting new model of community care is unfolding in Tasmania that will move a number of services out of the state's hospitals and closer to people's homes.**

Until now, healthcare delivery was determined largely by who funded the service – State, Commonwealth or private – which often put organisational considerations ahead of client needs.

Tasmania's Health Plan has recognised the urgent need to integrate services to reduce gaps and duplication for the benefit of clients and patients.

This has led to the development of community-based Integrated Care Centres (ICCs) that will provide efficient, integrated health and community services regardless of who funds, owns or provides each element of the services.

Sites are under development at Launceston in the North and in Clarence and Kingston in the South.

ICCs will provide people with chronic and complex conditions with a wide range of health services, including more specialised care, under one roof.

They will use an innovative model of patient care where health professionals work as a team with the individual and their family on treatment and support.

On-site services will include community nursing, child health and parenting, mental health, alcohol and drug, allied health, community rehabilitation and health promotion.

ICCs will house other visiting services and specialists, including professional medical specialists.

ICCs will have a particular focus on providing services for people with complex and chronic conditions and at some sites may offer some acute services traditionally delivered in hospitals such as infusion services, renal dialysis and antenatal care.

The \$15 million northern ICC, for example, will provide a community-based renal dialysis service with home-based support.

The Clarence ICC will also have a GP Super Clinic that brings together GPs and other healthcare providers in the one place.

The GP Super Clinic will focus on chronic disease prevention and management, and will support neighbouring GPs with allied health and nursing services.

Developed in partnership with the Australian Government, GP Super Clinics are also planned for Devonport, Burnie and Sorell. The State and Australian Governments are working with local GPs to overcome gaps and duplication by integrating services. ➦



# to communities

## Clarence a model of care

**In 2010, Hobart's eastern shore will have access to improved health services with the redevelopment of the Clarence Community Health Centre as a new Integrated Care Centre.**

The \$18.5 million development will include a new building on the site and will herald a new way of providing care and services currently only available at Tasmania's major hospitals.

Home to Tasmania's first ICC, the new centre will care for residents with complex conditions and chronic diseases. It will also incorporate a \$5.5 million GP Super Clinic as well as other government and non-government community-based health services.

The ICC will provide a specialised secondary care role to support acute hospitals and primary health services.

The centre will have a focus on caring for people with conditions such as chronic airways disease, chronic pain, muscular skeletal conditions, cancer and diabetes.

A range of experienced health professionals drawn from community and hospital services, including nurses, psychologists, physiotherapists, occupational therapists and dietitians will staff the centre.

Visiting specialists from the acute hospitals will provide outpatient clinics and support the on-site team.

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## Integrated care coming to Kingston

Development of a \$14.5 million Integrated Care Centre will bring primary and acute health services together in a single health hub for Kingborough Municipality residents.

Kingborough is one of the state's fastest growing areas and Tasmania's Health Plan identifies the need for an ICC to meet the area's health needs.

This development means Kingborough residents will have easier access to many more health services. It will also reduce demand on the Royal Hobart Hospital.

The project will provide high standard contemporary facilities that meet modern health system demands.

Phase one of the project will replace the existing small and cramped Community Health Centre and will expand primary health and community health services.

Phase two will develop the ICC, combining the extended primary and community health services with a range of acute care services currently provided at RHH.

The ICC will replace the existing Kingston Community Health Centre.



# care comes closer to communities

... continued from previous page

The site will also provide a major education and teaching centre for medical, nursing and other health professionals in partnership with the University of Tasmania.

The GP Super Clinic will provide GP services at Clarence and Risdon Vale as well as multidisciplinary primary health, child and youth health and antenatal services.

The ICC and GP Super Clinic will receive support from other primary care services including oral health and the needle and syringe service. It will also include:

- specialist clinics such as aged care, endocrinology and continence
- community care services such as community nursing and allied health operating an outreach service to people's homes and other service outlets
- mental health, and alcohol and drug services
- education and healthy lifestyle programs.

Extensive consultation has taken place on the redevelopment with the community, local government and with healthcare providers.

The Tasmanian Government is providing \$13 million and the Australian Government \$5.5 million for the redevelopment.

The GP Super Clinic will open in June 2010 and the ICC will open in December 2010. 

## Grants for a healthier Huon

Earlier this year the State Government made around \$250,000 in grants available to improve the health of people living in the Huon Valley.

The grants for local groups and organisations came out of recurrent funding from savings following the closure of the Huon District Hospital.

The Government has reinvested the savings from the hospital closure into programs and events that support community health and wellbeing.

Development and implementation of the new health and wellbeing programs and activities will also promote community engagement in local affairs.

The grants will lead to a number of locally driven health initiatives and services that best match community needs.

The Huon Valley Health Services Advisory Committee, formed late last year to foster better health and wellbeing for Huon Valley residents and to support community participation in local health services, oversaw the grants program.

## Glenorchy health centre upgrades

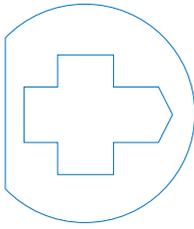
An \$8.5 million redevelopment of the Glenorchy Community Health Centre will better meet growing healthcare needs in Hobart's northern suburbs.

Due for completion by 2012, the centre will combine services from existing facilities and provide new models of care for people who currently receive treatment at the Royal Hobart Hospital.

The modern building will accommodate a range of services that will evolve over time.

The new facility will improve working conditions for health professionals and help recruit and retain health staff in the South.

The Glenorchy development is a crucial element in delivering on Tasmania's Health Plan.



Tasmania's Health Plan aims to apply continuous quality improvement practices and principles to ensure patient safety.



Annette Edwards (left) and Helen West on World Hand Hygiene Day (May 5) at Mersey Hospital

# germ warfare is declared

## new infection prevention and control unit launched

**A major infection prevention and control initiative to further improve patient safety in Tasmanian public hospitals and health facilities is underway.**

The work of the new Tasmanian Infection Prevention and Control Unit will help cut the number of infections patients catch while receiving healthcare and treatment.

Tasmanian hospitals have over one million admissions, emergency department assessments and treatments, and outpatient appointments each year.

While hospital care results are positive, figures show people have an eight to 10 per cent chance of catching an infection as a result of receiving healthcare.

The new unit tackles infection head-on and provide information and education for areas without direct access to infection control specialist staff.

Many healthcare-associated infections are preventable and simple hand hygiene for staff and visitors is one of the easiest ways to prevent the spread of germs and infection.

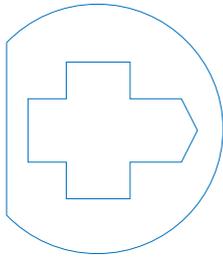
Royal Hobart Hospital Infection Prevention and Control Director Dr Tara Anderson says the creation of the new unit is a significant development for Tasmania.

"It has assisted in raising the profile of infection control throughout the state," Dr Anderson says.

"A variety of strategies directed towards the prevention of healthcare-associated infections have included enhanced statewide surveillance and the coordination of a statewide hand hygiene culture change program," she says.

Tasmania has signed-up to a planned national hand hygiene initiative and launched its own hand hygiene campaign in hospitals.

The Mersey and the North West Regional Hospital at Burnie already have alcohol-based hand gels throughout their premises for staff and visitors, including at the foot of most beds. 🧼



VirtualRounds is a perfect example of the future for healthcare as envisaged in Tasmania's Health Plan.



# wired for sound . . .

## broadband and real-time video bring specialists

**Tasmania's health system is taking full advantage of the latest information technology to broaden and improve medical services for rural and regional Tasmanians.**

Tasmania's Health Plan states that information technology offers the potential to improve service quality, deliver services closer to local populations and manage workforce shortages.

In the North West a high-tech telemedicine system is allowing some patients at Mersey Community Hospital at Latrobe to receive specialist bedside consultations without moving to Burnie's North West Regional Hospital.

A \$28,000 system known as VirtualRounds, set up under the health department's telemedicine/telehealth network, links Burnie hospital's specialists with patients, clinicians and other staff in Mersey's High Dependency Unit.

North West Area Health Services' CEO Jane Holden says VirtualRounds is already providing benefits.

"VirtualRounds is an example of sophisticated technology breaking down geographic boundaries and distance while bringing real benefits to patients, staff, the two hospitals and Tasmania's health system as a whole," she says.

Ms Holden says VirtualRounds is improving regional care for Mersey patients through access to a wider range of specialists.

"Patients who need high-level, non-intensive care can be treated in their own community rather than transferring between sites – a disruptive process for them and their families, and a costly one in retrieval expense," she says.

"The new system is a perfect example of the future for healthcare as envisaged in Tasmania's Health Plan."

North West Regional Hospital Critical Care Director Assoc Prof Marcus Skinner says the system consists of a portable unit in each hospital that can connect to the local area network at several points.



*Above: VirtualRounds links Burnie hospital's specialists with patients, clinicians and other staff in Mersey's High Dependency Unit.*

# and vision to rural patients' bedsides

"The units can be wheeled up to any high dependency care bed and connected to the other hospital simply with the click of a mouse," Assoc Prof Skinner says.

"The high-quality real-time video enhances interaction between the two sites through creating a sense of 'telepresence'."

Assoc Prof Skinner says the system also cuts travel for Mersey staff and improves working relationships among clinicians at the two hospitals.

Mersey HDU nurse manager Jacqueline van den Berg says the telemedicine system is a significant step forward in the management of high-dependency patients at the hospital.

"It is very interactive, meaning that we can get direct clinical input from specialists ... literally at the touch of a button," Ms van den Berg says.

"This means better health results for our patients. At the same time, the system has meant a very effective boost for staff learning and training."

Mersey's High Dependency Unit treats around 750 people a year. ➕

## VirtualCare

VirtualRounds is one of many initiatives DHHS's VirtualCare@Tas program delivers to increase access to health services and support in Tasmania's rural and remote areas via reliable broadband.

Others include a new tele-oncology patient electronic records system at Launceston General Hospital and videoconference support by the North West's occupational therapy team.

Yet another broadband-based health initiative will trial shortly in the Central Highlands.

VirtualCare@Tas is a joint Commonwealth-State initiative under the Australian Government's Clever Networks Program.



# wired for sound ... and vision



## Echonet resonates with medicos at Burnie

**A new broadband IT system developed by CSIRO is delivering real-time bedside consultation between North West Regional Hospital medicos and Royal Hobart Hospital's Intensive Care Unit and Cardiology Department.**

Echonet provides real-time specialist support from the Royal to specialists in the Burnie ICU and means patients get the highest level of care without leaving the region.

CSIRO project leader Dr Laurie Wilson and NWRH critical care services director Assoc Prof Marcus Skinner say Echonet provides many benefits for patients and staff.

"It would be very difficult for conventional telemedicine systems to do the job required," Dr Wilson says.

"Echonet has been specifically designed in consultation with the intensivists, cardiologists and other clinical staff from the two hospitals.

"Echocardiography requires sufficiently high bandwidth to visualise rapidly moving heart structures, and a simultaneous camera view of the patient facilitates guidance of this procedure by a distant expert."

The system has three units on trolleys that connect to each hospital's local area network. One unit is in each of the ICUs at the NWRH and RHH. A third is in the RHH Cardiology Department.

Assoc Prof Skinner says the system is necessarily user-friendly because clinical staff are focused on their patients and must operate the Echonet without technical support.

NWRH intensivist Dr Alan Rouse says Echonet has led to improved decision-making for patients at Burnie because of access to a wider range of specialists.

CSIRO and the Australian Government Department of Broadband, Communication and Digital Economy fund the project. ➔



## Broadband bridge to King Island community

### **A TeleHealth system on the North West coast is transforming how community healthcare is delivered in rural areas.**

Steadily increasing client demand and staffing challenges for the North West community occupational therapy team was causing appointment delays.

That was until it was found that remote clients can receive services almost immediately using the DHHS videoconferencing infrastructure TeleHealth.

Under the leadership of occupational therapy manager Brad Birlison, an innovative strategy of better communication and support for local community nursing staff started in May 2008.

For King Island, occupational therapy support now includes a weekly videoconference to work out strategies for clients that local staff can implement.

TeleHealth provides local staff with regular opportunities to present vital visual information in their discussions with the occupational therapy practitioners, including data and digital images.

Direct assessment of the client in person is even possible and King Island staff receive training by videoconference, too.

King Island community nurse Ricci Bishop is a regular member of the weekly meetings and a big fan of TeleHealth.

“We feel better connected to our occupational therapy colleagues through the TeleHealth consultations and we’ve noticed improving outcomes for our clients – it’s been great!” Ms Bishop says.

The weekly videoconference link-ups are also available to Circular Head and West Coast communities. 

## Electronic records for cancer care

The Statewide Medical Oncology Electronic Record system went live at Launceston General Hospital in March.

The tele-oncology system includes patient electronic health records and videoconferencing facilities, and forms part of a Statewide Radiation Oncology Database System.

The system provides better care for oncology patients by improving consistency, accuracy and access to the information recorded across the state.

As it is rolled out, this system will become accessible to all sites that deliver medical oncology or haematology oncology treatment.

Tasmania’s Health Plan states:

*The use of technology where appropriate can support good service coordination practice, including the transfer of client information where appropriate consent has been provided.*



# elective surgery

## big jump in surgical admissions recorded

**In 2008, Tasmanian hospitals increased the total number of elective surgery admissions by 14 per cent to almost 14,000, excluding Mersey.**

The state's public hospitals significantly exceeded elective surgery targets laid down in the Commonwealth Elective Surgery Initiative last year.

The Commonwealth asked for an additional 895 elective procedures in return for its \$8.1 million funding. Figures show Tasmania's hospitals achieved 1 637 extra admissions.

These procedures are in addition to emergency surgery.

The increase occurred across the board from orthopaedic and ear, nose and throat surgery to gynaecology and ophthalmology.

All four hospitals had made significant advances.

The Royal Hobart Hospital completed an extra 579 cases in the 12 months to December, taking total elective surgery admissions to 6483 for the year.

The Launceston General Hospital lifted elective admissions by 618 to 5155.

The North West Regional Hospital increased elective admissions by 473 to 2283 and the Mersey Community Hospital by 252 to 1824.

However, while the additional surgery targeted long-wait cases by March there were still 2501 Tasmanians on elective surgery waiting lists for over a year.

The Department of Health and Human Services is working with hospitals to further reduce waiting lists and waiting times.

The Royal Hobart Hospital has extended the hours of its day procedure unit to 10 pm, which provides an additional 20 hours a week to improve throughput of elective procedures.

The Launceston General Hospital has a 23-hour unit to help meet the demand for elective surgery.

Necessarily, the treatment of emergency and urgent cases remains the first priority for all hospitals. ☺



# scrubs up

## around state

### Tasmania's elective surgery plan

The State Government's \$8.4 million Improving Time to Treatment: Elective Surgery Improvement Plan aims to:

- deliver shorter waiting times for elective surgery
- improve categorisation of patients across the state to manage access to surgery fairly
- better inform patients and their doctors about waiting times through a public website and a telephone service
- promote better partnerships and referrals between hospitals
- measure improvements to the elective surgery system.

The plan includes:

- \$4.3 million for hospitals to overcome obstacles and develop alternatives, including new models of care that help hospitals provide more surgery
- \$500,000 for clinical facilitators and support staff to improve sustainable surgical systems in hospitals by better use of resources, eliminating duplication and improving coordination of patient care
- \$2 million to reduce statewide waiting list numbers and waiting time by improving throughput and purchasing up to 1 000 additional procedures in the private sector
- almost \$285,000 to introduce dedicated elective surgery managers in hospitals
- set up a Statewide Elective Surgery Coordination Unit to help hospitals cut waiting times
- Funding to help expand day surgery and fund the Mersey hospital's dedicated 23-hour short-stay centre.



## Plan boosts surgery numbers

Released late last year, Tasmania's Elective Surgery Improvement Plan includes an extra \$8.4 million to build sustainable elective surgery capacity across the state and fund additional operations.

For the first time, Tasmania will develop a consistent statewide approach to collaboratively manage elective surgery services through a new Elective Surgery Coordination Unit.

The elective surgery plan is working in combination with the Commonwealth Elective Surgery Initiative and Tasmania's Health Plan to improve elective surgery management across Tasmania.

Strategies will be developed to identify long waiting patients and facilitate their treatment. Such approaches can include the use of clinical reviews, active case management to facilitate access to surgery, patient transfer to for more timely treatment and unit based waiting lists to reduce waiting times across a specialty where appropriate.

Under the Plan, patients will have access to improved information about elective surgery waiting times.

## Cataract surgery surge

**A \$2 million surgery blitz will remove cataracts from the eyes of more than 1000 Tasmanians from around the state by the end of the year.**

The cataract surgery surge will spearhead a campaign to clear long-wait cases from elective surgery lists.

The cataract program will see an extra 437 cataract procedures performed at the Royal Hobart Hospital, 325 at the Launceston General Hospital and 240 in the North West.

RHH will deliver the additional procedures partly by increasing surgery contracted through private hospitals.

The North West Area Health Service is increasing the number of cataract sessions at the Mersey Community Hospital to provide an extra 20 cases a week.

The additional 1002 procedures will address many long-wait cases from the cataract surgery waiting list and significantly reduce the extent of the list overall. ➕



### Burnie boosts operations

**The North West Regional Hospital has cut long waits for elective surgery with a significant boost in the number of operations performed in Burnie.**

North West Area Health Service CEO Jane Holden says elective surgery waiting list numbers will continue to fall.

“We are using our current theatres more efficiently to allow our excellent team of surgeons, nursing and allied health support staff to increase elective surgery cases by about 15 per cent,” Ms Holden says.

“That’s around an extra 500 surgical procedures carried out between January and October 2008.

“To further reduce the waiting list we have now employed an additional general surgeon, Trevor Leese.”

The NWRH is also working to open a fourth theatre to help boost capacity.

“We are committed to increasing the volume of surgery at the Mersey. To help achieve this we are acquiring additional theatre equipment,” Ms Holden says. ➦

### Mersey elects for short-stay model

The Mersey short-stay unit is expanding the provision of day-only and 23-hour elective surgery services in general surgery, gynaecology, orthopaedics, ophthalmology and diagnostic endoscopy.

This provides the potential for patients around the state to gain access to this service, however, it has a particular focus on those from the North West.

While some overnight surgery will continue, the plan proposes that the Mersey provide same-day surgery for 40 per cent of same-day patients from the Burnie referral area, 90 per cent of same-day patients from the Mersey area and 15 per cent of same-day patients from the Launceston General Hospital.



Funding to GP Tasmania will increase its capacity to work with DHHS on Tasmania's Health Plan projects.

# new deal for rural doctors

## investing in rural Tasmania's medical workforce

**In recognition of their valuable role in delivering primary healthcare to rural Tasmanians, the State Government has set up Rural Doctor Partnerships, a "New Deal" for rural GPs.**

Rural Doctor Partnerships represents an additional \$2.5 million investment in rural general practice.

Rural Doctor Partnerships puts in place a package of innovative measures that include:

- a rural medical practitioners' agreement that increases rural GP remuneration and improves working conditions
- direct financial help to recruit locums
- a rural doctors' reference group to develop closer working relationships between rural GPs and the health department.

The Department of Health and Human Services will set up the Rural Doctors' Reference Group to tackle issues of interest to both rural doctors and the department including workforce, support and the interface with hospitals.

DHHS is also setting up dedicated GP liaison positions within major hospitals and in specialised areas such as mental health, alcohol and drug, and primary health.

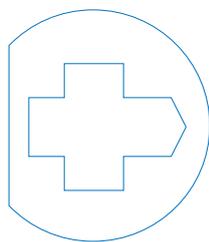
For the first time DHHS will provide rural practices with \$10,000 a year to recruit locums to help GPs meet the increasing demand from an ageing and chronically ill population.

In addition, new remuneration arrangements now make Tasmania competitive in the market to recruit doctors.

The enterprise agreement also increases call-back payments and an annual availability fee. There is also a new formula to calculate facility hours that better reflect time doctors spend with patients.

While GPs and DHHS work together on many different and often informal levels, Rural Doctor Partnerships will add a more formal interaction through the proposed Rural Doctors' Reference Group.

The reference group will provide advice on developing and implementing DHHS policy for rural GP support and for emerging quality and safety initiatives that improve patient care in rural facilities. 



As a result of Tasmania's Health Plan, vacancies in rural GP practices are being proactively managed to ensure service continuity.

# more GPs now call Tasmania home

## recruitment drive nets more GPs to rural areas

**Tasmania's Health Plan funding has helped GP Workforce Tasmania successfully recruit a crop of enthusiastic new GPs to rural Tasmanian practices.**

Five new doctors have relocated to Tasmania to take up vacant positions at Scottsdale, Deloraine, Geeveston and on the West Coast since July 2008.

The recruitment is part of a three-year, \$300,000 agreement between the Department of Health and Human Services and GP Workforce Tasmania to specifically recruit GPs into Tasmania.

In addition to recruitment, the funding helps GP Workforce give personalised support to new rural GPs and their families, including help with housing, education and employment for spouses.

Now, Scottsdale and Bridport residents are benefiting from the recruitment of English GP Dr Jane Hampson, who commenced practice in March.

Huon Valley residents are enjoying a renaissance in their medical and health services with the arrival earlier this year of two new doctors to the Geeveston Medical Centre.

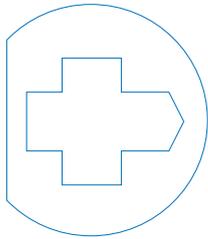
Dr Angela Retchford has relocated from South Australia to Geeveston while Dr John Riley and his wife have made the long trip from the US to be closer to their daughter and grandchildren.

Meanwhile, Dr Boniface Ochayi is now practicing on the West Coast while Dr Akila Samarakkody is serving the Deloraine community.

This is the first time a Tasmanian Government has committed funds to recruit and retain GPs.

Department funding also provides ongoing support to 12 rural medical practitioners – international medical graduates – to help them achieve Australian GP qualification.

A number of other projects involving DHHS and general practice are in advanced stages of planning, including funding general practice to provide allied health/chronic disease services. ➔



Tasmania's Health Plan  
advocates providing a full  
range of sustainable services  
locally, where possible.

# Smithton hospital back in good health

new hospital delivers integrated health services to Circular Head

**A completely modernised Smithton District Hospital and Community Health Centre that meets the needs of the whole community opened its doors in March.**

The new hospital brings together comprehensive, accessible and integrated services, including oral health and child health and parenting.

Because people's medical needs are often complex, integrating services increases accessibility and helps improve health outcomes.

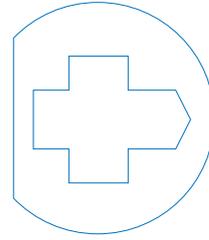
The redevelopment was crucial for this integration, which will help boost primary and preventative health services at Circular Head.

The one-stop shop hospital now has 16 acute care beds in new rooms, a friendly waiting room and three beds in the emergency area adjacent to the ambulance bays.

It also has four additional consulting rooms for visiting services like physiotherapy, allied health and mental health, as well as a spacious meeting area for education and community use.

The old District Hospital had some buildings dating back to the 1940s that were not up to standard for today's health needs.

The redevelopment relocated 22 aged care beds to Emmerton Park, to which the State Government contributed \$1 million. 



Tasmania's Health Plan recognises the statewide role played by RHH in neonatal and paediatric services, including surgery and oncology.

# Royal treatment for children

action to better look after children's medical and health needs

**Major new facilities under construction at the Royal Hobart Hospital will soon boost its range of children's services and create a child-friendly environment.**

The \$1.8 million first phase, underway since November, is building a new paediatric outpatient facility in the old lower ground floor emergency department.

Stage two will develop four new paediatric short-stay beds, adjacent to the current level paediatrics ward, and will also include an upgrade of the Women's and Children's Services consulting rooms.

The new facility will also consolidate and improve paediatric audiology services, including Universal Newborn Hearing Screening and Tasmanian Cochlear Implant Outreach, currently scattered around the hospital and greater Hobart.

The Paediatric Enhancement Project will build on major improvements already made in neonatal and paediatric intensive care, and on growing staff numbers in the area.

The children-friendly paediatric outpatient facility will have more space for clinics and consultations – including six new consulting rooms, with one for urgent cases – which will help cut appointment waiting times.

It will house an impressive range of improved paediatric services including:

- general outpatients and clinics
- ambulatory care
- oncology/haematology
- diabetes clinics
- cystic fibrosis clinics
- an eating disorders clinic
- a continence clinic
- a newborn follow-up clinic
- visiting specialists clinics, such as cardiology, neurology, genetics and endocrinology
- the home care service.

The new outpatient facility will also provide a better work space for staff and visiting specialists.

Stage two will begin on completion of stage one, expected by the end of May. 📍



# hospital renovation revs up

major capital works set to revitalise LGH

**More beds, more parking spaces and an Integrated Care Centre will shortly start to make more room at Launceston General Hospital.**

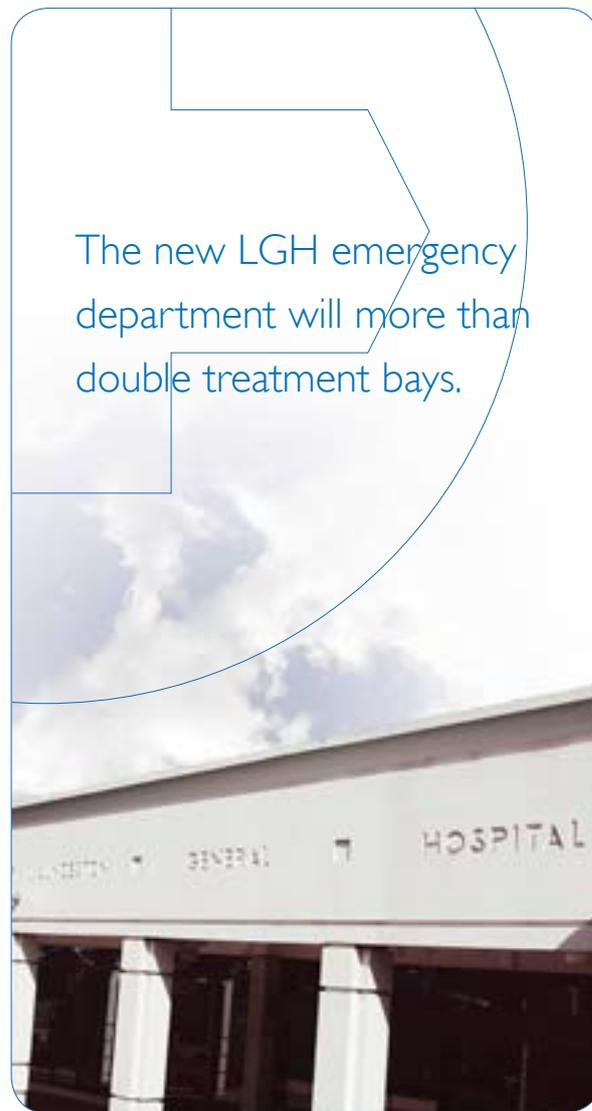
Like most Australian hospitals, LGH is under increasing pressure from the chronic disease epidemic, but a \$45 million capital works plan will soon begin alleviating problems on the ground.

Approval was given in March to a \$15 million project to fix chronic car parking problems at the hospital.

LGH has 520 parking spaces, of which 112 are for the public. The new car park will create an additional 400 spaces, mostly for public use.

LGH Chief Executive John Kirwan will oversee development of the car park as well as an \$18 million Launceston Integrated Care Centre and a new \$12 million Emergency Department.

Plans for the Emergency Department, which will also incorporate an Acute Medical Unit, are now with the Launceston City Council for approval.



The new LGH emergency department will more than double treatment bays.

“The recent approval for an Acute Medical Unit in association with the new Emergency Department will bring emergency and acute medical care together to streamline assessment and admission,” Mr Kirwan says.

“Integrating emergency and acute medical care, with patients managed jointly by specialists from both areas in a collocated Acute Medical Unit, will improve patient flows and provide quicker treatment.”

Mr Kirwan says detailed planning will ensure the three projects capture the full benefits envisaged under Tasmania’s Health Plan, including integration of acute and primary health services and enhancement of the hospital’s tertiary referral role.

“The 920 parking spaces, available by the end of 2009, will allow for extra demand created by the increased call for services and an increase in staff,” he says.

The \$12 million emergency department, designed to address the high growth in patients, will more than

double the treatment bays from 20 to 43 and include three resuscitation rooms, assessment rooms, isolation rooms and a 10-bed short stay area.

Mr Kirwan says he expects construction to start by August and the emergency department to come online by September next year.

The development also allows for future construction of two levels above the emergency department.

Meanwhile, due to increasing demand, the number of full time equivalent nursing staff in the emergency department has risen by over one third since 2004.

Mr Kirwan says in the five months to February, LGH has recruited 14 locum specialists and registrars. It has bolstered staffing by recruiting GPs and qualified overseas specialists. Most recently, the Australian Government budget has provided a further \$40 million to create a world-class acute medical and surgical services unit. ➔



# healthy expansion for northern towns

## Longford and Westbury communities get funding infusion

**Health and community services at Longford and Westbury have received a richly deserved \$2 million capital injection.**

Longford picked up \$1.3 million for a new community health centre while the Westbury Community Health Centre gained \$700,000 for further development. Westbury had a significant redevelopment after a major fire, and reopened in 1999.

Construction work and upgrades at the centres are underway and both developments are due for completion in 2009-10.

The Longford development is badly needed as the child health, community nursing and oral health facilities are small single-occupancy buildings and in poor condition.

These services will locate into a single community health service to benefit clients and staff.

As these services are discretionary for clients, convenient access increases their use and supports early intervention and correction of client conditions.

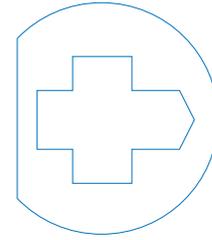
Combining the services also provides a more secure and supportive environment for staff.

The new Longford Community Health Service will include child dental, child health, community nursing and community care – home help and personal care – as well as three common consulting rooms for visiting services and a meeting room.

This places the right health services where they are needed and provides space for chronic disease groups and other small group sessions.

Meanwhile, the upgrade at Westbury Community Health Centre will increase client access and deliver more services across a wider geographical area. It will also enhance Westbury's leading role as a demonstration primary healthcare site for Tasmania.

The centre has already expanded and client numbers for its activities are up, but the centre is constrained by limited physical resources. The expansion project will allow Westbury to improve what it already does well. ➕



Providing flexible and appropriate services in the community holds centre stage in Tasmania's Health Plan.

# Westbury: far more than bricks and mortar

**In 2008, Department of Health and Human Services Secretary David Roberts visited the Westbury Community Health Centre. He talks here of his experience:**

"Before visiting the Westbury Community Health Centre for the first time my expectations were high, but realistic.

But after only a few minutes at Westbury, I realised my expectations would be far surpassed.

I found a small group of dedicated staff delivering outstanding patient services, supported by an army of committed volunteers.

The centre offers around 15 different health and community services that range from activities for older people with dementia through to outdoor programs for young people including caving, surfing and bushwalking.

One story told to me during my visit epitomises the centre's success.

A few years ago, staff took a young intellectually disabled man under their wing. The young man was having a particularly hard time. The centre's staff worked on a program to meet the young man's needs

including English and maths lessons – even classes in the art of making harps!

That same young man is now confident, handling his own day-to-day affairs and is excited about the future.

There is nowhere in the department's requirements for our staff to provide such support, but the staff at Westbury were determined to play a positive role in this young man's life.

In return, the community has rewarded the centre with its support.

The Westbury facility has lower admissions than average and patients return home quicker than average after their stay.

Staff promote a primary healthcare approach, working to prevent clients from getting sick in the first place, as well as helping people when they're at their worst.

I came away from Westbury in awe of the leadership being shown." 



# patients on road rest

## funding improves transport and accommodation

**A \$22 million reform package released late last year has heralded a new way forward for patient transport and accommodation services in Tasmania.**

The State and Commonwealth Governments' four-year deal quickly benefited travelling patients with a sizeable increase in Patient Travel Assistance Scheme (PTAS) subsidies.

The State Government will contribute \$12.4 million towards a range of initiatives, including absorbing the significant cost of increasing patient travel and accommodation subsidies.

Tasmania's Health Plan made some hard decisions about service delivery to ensure a sustainable health system for decades to come.

In return, the health department committed to providing more equitable access to healthcare by improving transport and accommodation – the glue that binds the services together.

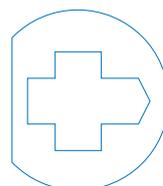
These reforms flow from recommendations in the Banskott Review of transport and accommodation and the Sharley Report into medical retrieval services.

The State Government accepted all but seven of the 91 Banskott Review recommendations and all of the Sharley Report recommendations.

The Commonwealth's \$10 million dollar contribution will fund a range of capital investments to improve patient transport, particularly in the North and North West.

In addition to the PTAS boost, there are immediate improvements to patient accommodation in Hobart, communications and medical retrieval services.

Over \$2.6 million has gone towards a new centralised communication centre to coordinate ambulance services, patient transport and medical retrieval services across the state. 



Developing integrated transport and accommodation services is one of the central commitments of Tasmania's Health Plan.



# easier options



## Transport subsidies driven higher

**In December, the fuel subsidy for travelling patients and their carers under PTAS increased from 13c/km to 19c/km, indexed annually. This makes Tasmania one of the national leaders in patient travel subsidises.**

Eligibility criteria has also expanded to include renal and oncology patients travelling more than 50km to Tasmania's major hospitals.

The health department is moving quickly to ensure all non-urgent patient transport is coordinated centrally to improve efficiency, with further centralisation to come down the track.

In addition, medical retrieval services will receive more than \$1.5 million.

The department will also strengthen services by coordinating the escort service from Hobart.

Over three years the Department of Health and Human Services will review the use of retrieval aircraft, including the fixed wing plane and the helicopter based in Hobart as well as the location of staff to support the service.

The department is committed, however, at this stage to ensuring existing services stay where they are until those reviews are finalised. ➔

## Governments single beds out for treatment

A number of recent initiatives have improved the accommodation options for Tasmanian outpatients needing overnight stays away from home.

As part of the department's reform package, the accommodation allowance for overnight stays within Tasmania has jumped substantially by \$16 to \$46 a night.

For Tasmanians having treatment interstate it has more than doubled from \$30 a night to \$64. This rate is in some instances twice as much as similar allowances offered in other states.

At the same time, the State Government has put \$70,000 towards a fit out and accessories for Hobart's new Fight Cancer Foundation House.

The house provides good quality accommodation in central Hobart for patients who travel from other parts of Tasmania for specialist medical services.

The property is only a few blocks from the Royal Hobart Hospital, close to public car parking and on the edge of Hobart's CBD.

The Government supports Fight Cancer Foundation House through PTAS subsidies for eligible patients staying in the facility.

Healthcare cardholders can stay in the house for only \$10 a night more than the new \$46 Government subsidy.

Fight Cancer Foundation House is the outcome of collaboration between members of the community sector and the health department.



# thoroughly modern

*Above: Gastroenterologist Jarrad Wilson (centre) shows Health Minister Lara Giddings an endoscope at the recent opening of Mersey's new endoscopy suite.*

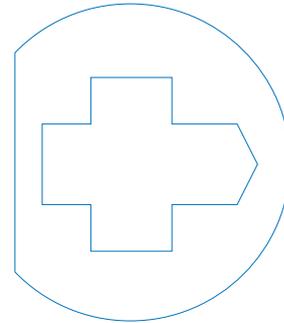
**North West residents can now have minimally invasive diagnostic medical procedures in the comfort of Australia's most modern endoscopy suite.**

The \$500,000 high-tech suite was opened at the Mersey Community Hospital in April and will handle all endoscopies across the North West region.

Using the best available technology, the suite will provide top level care for those needing endoscopic procedures such as colonoscopies or gastroscopies.

These procedures are projected to increase by 38 per cent across the region this financial year, partly because of the Australian Government's National Bowel Screening Program.

North West Area Health Service CEO Jane Holden says centralising endoscopic procedures in the new suite and the appointment of a new gastroenterologist mean the Mersey is now geared up to meet increased demand well into the future.



“The new suite and direct referral system demonstrates our determination to put the patient first.”

# Mersey

## new endoscopy suite for North West community

“Our new gastroenterologist Dr Jarrad Wilson will also help set up a direct referral system for GPs to streamline the patient pathway through the system,” Ms Holden says.

“This new system will mean most patients won't need multiple appointments at the hospital before having their procedure and their results will be fast-tracked back to their GP,” she says.

“The new suite and direct referral system demonstrates our determination to put the patient first.

“Opening a state-of-the-art endoscopy suite is just one of many services we are committed to improving and streamlining so the community can get the best level of care without having to leave the North West.

“At the Mersey alone we have boosted oncology services by 50 per cent, increased eye surgery by 50 per cent and have opened a new medical sub-acute care unit.

“In line with Tasmania's Health Plan, we have also committed to involving the community in decision-making by establishing a North West Area Health Service Network Advisory Group.”

Ms Holden says relocating endoscopies to Mersey will also free up theatre space at the North West Regional Hospital in Burnie for additional major surgery and will help cut waiting lists in other areas. [👉](#)



## Diabetes TASMANIA

Diabetes TASMANIA has worked in partnership with and is funded by the Department of Health and Human Services under the Better Health Initiative: a joint Australian, State and Territory Government initiative to deliver a telephone-based health coaching service for Tasmanians diagnosed with type 2 diabetes, pre-diabetes or at high risk of developing the disease.

The program helps people to be proactive in managing their disease and provides much-needed support as participants work toward achieving their health goals with the aim of reducing their risk factors for developing the disease or developing complications of the disease.

The two organisations working in collaboration is evidence of Tasmania's Health Plan in action and how valuable this type of partnership can be in delivering better health outcomes to all Tasmanians.

**Caroline Wells**  
Chief Executive Officer  
Diabetes TASMANIA

# decisions on new initiatives to combat

**The State Government is tackling a surge in diabetes with a number of new initiatives to help bring the disease under control.**

Like most of the western world, Tasmania is experiencing a big increase in all types of diabetes, which is having a damaging impact on the community.

Worldwide, the incidence of type 2 diabetes alone has risen by a massive 72 per cent over the past decade and is expected to swell for the next 40 years as populations age.

It is estimated that as many as 40,000 Tasmanians are affected by type 2 diabetes.

But this may be the tip of the iceberg because as many as 65,000 Tasmanians have impaired glucose tolerance, or pre-diabetes, which itself can lead to chronic illnesses such as cardiovascular disease, stroke or full blown diabetes.

In light of these disturbing figures, the State Government has launched three new initiatives under Tasmania's Health Plan, which incorporates a specific action plan for diabetes.

The Tasmanian Diabetes Action Plan provides the framework for effectively and efficiently preventing type 2 diabetes and the management of all forms of diabetes.

As part of this plan the Department of Health and Human Services has funded Diabetes TASMANIA to run two statewide projects: the Diabetes Risk Reduction Program and Diabetes Assist.

Diabetes TASMANIA was contracted to implement the Diabetes Risk Reduction Program, which was completed in December.

# diabetes danger

## disturbing rise in diabetes

It reviewed national and international type 2 diabetes risk reduction programs and mapped the services available in Tasmania for people recently diagnosed with, or at risk of, developing type 2 diabetes. This will help in the development of a model of care targeted to the local population.

Diabetes TASMANIA has also received funding to run Diabetes Assist, a statewide phone-based coaching service for people with uncomplicated, recently diagnosed type 2 diabetes and those at high risk of developing the disease.

Diabetes Assist provides free-of-charge coaching sessions at times convenient to clients.

A coach works with clients – using GP recommendations on medication, nutrition and physical activity – to help them meet their personal targets and stick to their new lifestyle activities to best manage their condition.

Using these strategies, many people can control this type of diabetes, prevent it or at least reduce or delay complications. There are 50 people already participating in Diabetes Assist.

These projects are part of Tasmania's contribution to the Australian Better Health Initiative and provide three new dietitians for health coaching and additional nutrition advice across Tasmania, with a particular emphasis on the North West.

Management of diabetes is via primary services in the community or through the specialist care services and diabetes centres in the state's major hospitals.

The emphasis in population health and primary care is on prevention and early detection and intervention, as well as on improved care and self-management of type 2 diabetes.

Services in the hospitals will provide specialist care for people with type 1 (insulin dependent) diabetes and gestational diabetes, as well as for those with complications and complexities associated with type 2.

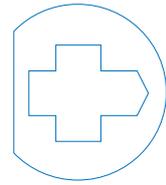
Specialist services and the diabetes centres will also provide support, training and mentoring for other health professionals providing diabetes care in the primary health system, including those in general practice and in community health centres.

This will increase the number of services and health professionals in the community available for people with, or at risk of developing, type 2 diabetes.

Credentialed diabetes nurse educators are working with GPs and practice nurses to provide services in medical practices for people with diabetes.

Meanwhile, DHHS has appointed a primary health diabetes adviser who works with primary health professionals to help people with diabetes and pre-diabetes in the state's North.

This will include working collaboratively with the recently launched Primary Health Chronic Disease Demonstration Service (see story on page 54), the Northern Regional Diabetes Centre and Diabetes Tasmania to add value and promote resources available for people with diabetes in the region. [▶](#)



A principle of Tasmania's Health Plan is that services should be client and family focused.

# Australian first: all our hospitals are baby friendly

**Tasmania is the first Australian state where all maternity facilities are internationally recognised with UNICEF/World Health Organization Baby Friendly accreditation.**

The recent accreditation of the North East Soldiers' Memorial Hospital at Scottsdale has enabled Tasmania to achieve this enviable status.

The Scottsdale hospital, Tasmania's smallest maternity facility, joined the seven others already accredited, and in four cases, reaccredited.

There are over 20,000 Baby Friendly facilities worldwide, including 63 around Australia, but very few regional areas achieve 100 per cent accreditation at the global standard.

All Tasmanian babies delivered in hospital are now born in breastfeeding-friendly facilities.

Baby Friendly accreditation is a quality improvement measure that encourages best practice and aims to improve the health of the new generation.

To achieve this standard, midwives and other carers obtain an increased knowledge of infant feeding, greater skills and commitment to make breastfeeding easier.

The Australian College of Midwives convenes the Baby Friendly Hospital Initiative in Australia. 





## Bruny lands purpose-built health centre

**Bruny Island will soon have a brand new, multi-million dollar health centre to replace its ageing facility that dates back more than 70 years.**

Completion of the \$3 million Bruny Island Community Health Centre at Alonnah is expected later this year.

The new health centre will cater for residents and the increasing number of visitors to the island and replaces the greatly degraded and substandard structure built in 1936.

Thirty-nine visiting and local staff deliver services from the existing community health centre, including nine part-time registered nurses with wide experience in emergency medicine, intensive care nursing and midwifery.

GPs visit the island twice a week and there is a monthly visit by a child health nurse.

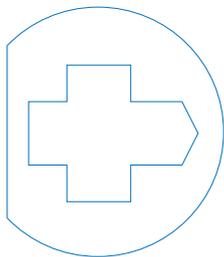
The new centre will have the latest telehealth communication technology, a private visiting GP practice, emergency treatment room, consulting/ treatment rooms and a day centre or activities room for respite clients.

The new facility will also host physiotherapy services, podiatry, family and child health, administration and nursing offices.

Funding for the health centre is from over \$50 million allocated in the last State Government budget for health infrastructure improvements around the state over the next four years. [➔](#)

# community care takes centre stage

## Central Highlands deal tackles health, housing and telecommunications



Community consultation leads to \$3 million package of health and community reforms.



**Tasmania's Health Plan has delivered a suite of health and community services and a \$3 million capital injection for the Central Highlands.**

Announced in March, the package ensures the community will get reliable, safe and sustainable services for years to come. It also provides the community with certainty about the area's health and community-based services into the future.

The new service model and infrastructure improvements will support additional healthy lifestyle programs, more community care, a day centre with respite services and several high and low aged care packages to support the elderly to live at home.

The capital investment program includes a \$1 million upgrade of the Central Highlands Community Health Centre at Ouse, \$1.2 million to design and build four new independent living units for the frail and aged, and \$600,000 towards more aged care placements at New Norfolk.

Given that the community relies heavily on its local GP, the capital program involves upgrading the GP consulting rooms with an improved waiting area and administrative office.

Central Highlands residents now have all-wheel drive community transport car based at Ouse to take them to medical appointments and for other health-related activities.

The Department of Health and Human Services will provide \$100,000 to upgrade and transfer five public housing units collocated at the health centre site to the local council.

The deal also includes a \$422,500 partnership between Telstra and DHHS Telehealth to improve telehealth facilities. The spin-off is that building new Next G facilities near Hamilton and Ouse will extend mobile coverage and broadband in the area.

This comprehensive package of services and investments was agreed after months of negotiations with the community through a local consultative committee and the Central Highlands Council. 

# community antenatal services and clinics born

## hospitals extend antenatal services into communities

**Royal Hobart Hospital antenatal services are reaching into the community with midwife-led community clinics now operating at Clarence, Glenorchy and Kingston.**

Focusing on women with low risk pregnancies, the clinics offer patients a practical alternative to hospital-based clinic appointments.

Since the clinics' inception in December, hundreds of Tasmanian women have accessed an antenatal service closer to home.

Pregnant women using the clinics benefit from shorter travel time, easier parking, easier access to other child health services and more time for questions about their pregnancy.

The clinics are receiving positive feedback from staff and patients alike.

RHH has also recently introduced a midwife-focused booking service to improve service to obstetric patients. The phone service – for those seeking their first antenatal contact with midwives – reduces waiting time and ensures patients are referred quickly to the most suitable antenatal program.

There is also greater demand for services to support families of children leaving hospital with complex needs and chronic medical conditions.

To tackle this, the Launceston General Hospital neonatal and paediatric units are evolving and changing so families spend less time in hospital.

LGH has a long history of implementing a more integrated family and child-friendly service structure, linking inpatient and outpatient care to cut the time children spend in hospital and to reduce stress on their families.

This has involved a number of strategies including extended home care programs, outpatient services and a paediatric nurse specialist. Again, these initiatives mean children and babies spend less time in hospital.

LGH paediatric ward 4K's outpatient service was set up 12 months ago to cope with the increasing number of children seen on the ward as outpatients.

The service sees a range of patients from those who need follow-up review after an admission to those with long-term complex illnesses.

Paediatric nurses work with registrars and paediatricians to provide a part-time service that speeds follow-up for discharged patients, improves transition care from neonatal discharge to paediatric follow-up and better integrates community services.

A recent review of the service shows overwhelming support from the patients and families. One parent says the service "gives great confidence and makes looking after a sick child that bit easier".

Ward 4K also developed a new clinical nurse specialist position 18 months ago. Nurse Karen Hawkins fosters accurate, effective communication with LGH paediatricians, allied health teams and community-based services such as St Giles.

She supports and educates parents of children with complex and specialist needs to encourage self-care and management at home so children can avoid going to hospital.

Parents say they like the independence of caring for their child at home while knowing an LGH support nurse and community services are there if needed.

According to one family: "It is so good having Karen; I don't know how I would ever have coped at home without her." 📍

# quitters are winners

## \$2.7 million over four years will help Tasmanian smokers kick the habit

**The state Department of Health and Human Services has hired smoking cessation staff and paid for extensive media advertising campaigns to help the one-in-four Tasmanians who smoke to quit.**

Following a review in 2007 of smoking cessation interventions in Tasmania, the State Government allocated \$2.7 million over four years to provide support systems to help Tasmanian smokers quit.

As part of its Smoking Cessation Project, the DHHS has set up a new smoking cessation delivery model and hired four staff to implement it around Tasmania.

The new Smoking Cessation Service promotes the delivery of a brief smoking cessation intervention to health professionals in Tasmania.

This service uses the ABC framework (Ask, Brief Intervention and Cessation) – developed and used in New Zealand – a simple aid for health professionals to remember and, therefore, more likely use.

New Zealand recently launched an ABC E-learning package for health professionals that Tasmania has permission to use. This package is being modified to suit a Tasmanian audience and will begin in mid-2009.

The Smoking Cessation Project builds on Tasmania's Health Plan by making quit advice a routine part of healthcare for health professionals in regular contact with smokers and by encouraging smokers to make regular quit attempts.

A key part of the project is the appointment of coordinators throughout the state.

A statewide cessation coordinator has been appointed and regional cessation coordinators, hospital-based nurses, have begun work in the state's North and South; another will start shortly in the North West.

The Smoking Cessation Project has provided Quit Tasmania with an additional \$160,000 for its anti-smoking media campaigns and to employ an extra full-time Quitline counsellor.

A consortium led by the Pharmaceutical Society, which includes the Pharmacy Guild and Quit Tasmania, has received \$100,000 to encourage smokers to visit their local pharmacist for quit advice and support. 📍





Tasmania's \$2.7 million, four-year Smoking Cessation Project has won high praise from the Public Health Association of Australia and the Australian Council on Smoking and Health.

## pharma army enlists for tobacco fight

### **A new army of recruits has enlisted to help fight tobacco addiction in Tasmania.**

March saw the start a new TV ad to promote community pharmacies as an option for advice and support for Tasmanians trying to give up smoking.

The involvement of pharmacies in promoting smoking cessation is an important step towards reducing the high smoking rates in Tasmania.

Community pharmacies are well respected and more than 90 per cent of Tasmanians have access to a community pharmacy within 20 kilometres of their home.

The Government is providing \$200,000 a year for social marketing campaigns to educate the public about the dangers of smoking and to promote the range of options for giving up.

Government funding has also led to an extensive promotion and training campaign, made possible through a partnership between the Pharmaceutical Society of Australia, the Pharmacy Guild and Quit Tasmania.

The campaign involves a pharmacy TV advertisement screened in conjunction with another campaign by Quit Tasmania.

Pharmaceutical Society of Australia Tasmanian branch director Paquita Sutherland says the pharmacy TV ad promotes community pharmacies as a resource for smoking cessation information.

"The advertisements were aired in March and are running again in May," Ms Sutherland says.

"Smokers who respond to the ad and enquire at their local pharmacy can have their details sent on a fax-referral form to Quit Tasmania for follow-up while being supported by the pharmacy.

"In addition to the TV ad, the community pharmacy campaign also provides training to pharmacists and pharmacy assistants across the state to ensure the advice they provide to smokers is accurate and consistent.

"To date, over 300 pharmacists and pharmacy assistants have been trained." 



# saved lives no stroke

## new LGH stroke clinic lifts effectiveness of patient care

**The new nurse-led Stroke Clinic at the Launceston General Hospital is helping improve patient care and save lives.**

LGH medical director Dr Alasdair MacDonald says the clinic, led by clinical nurse consultant Lorinda Upton-Greer, can significantly reduce the number of deaths and long term disability from strokes.

Strokes kill more than 200 Tasmanians each year:

“Outcomes can be improved because in a significant proportion of cases, strokes are preceded by warning signs, known as transient ischaemic attacks,” Dr MacDonald says.

“Patients who experience a TIA have an elevated risk of subsequent stroke, which can be reduced with early intervention,” he says.

“In the past this has been difficult because the waiting time for a new patient to see a specialist such as myself could be up to three months.



# of luck

"The introduction of the outpatient Stroke Clinic means we are now able to offer new patients an appointment within one to two weeks."

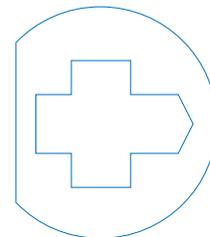
Dr MacDonald says the Stroke Clinic can initiate early investigation of new cases and review the management of recovering patients discharged from the LGH Stroke Unit.

"There is no question that the key is early intervention and the nurse-led Stroke Clinic has enabled LGH to meet goal times for best practice.

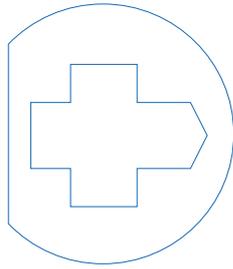
"That means more of our patients will recover and they will have higher quality of life because of the clinic."

Dr MacDonald says the LGH has provided high quality care to stroke patients since the opening of a dedicated Stroke Unit five years ago.

"The Stroke Unit and Stroke Clinic are working together to intervene as early as possible to reduce loss of life and improve the outcomes for stroke survivors," Dr MacDonald says. 🏥



Tasmania's Health Plan says there are many opportunities to improve health system performance by redesigning care systems.



In line with Tasmania's Health Plan, Mersey's expansion provides a range of services relevant to, and valued by the community.



# Mersey's on a mission

## can-do hospital sets hot pace with series of new

**Mersey Community Hospital services have expanded dramatically since the State and Australian Governments signed an agreement last year to secure the hospital's future.**

The agreement, which provides \$180 million over three years from the Commonwealth, handed control of the hospital back to the State.

Announced in March, the latest in a series of initiatives expands Mersey's oncology services from three to five days a week, allowing more North West cancer patients to receive treatment locally.

Cancer patients receiving chemotherapy at the hospital will jump by around 50 per cent to more than 30 a week thanks to an increase in staff and Outpatient Clinic sessions.

Many local patients undergoing chemotherapy will now avoid regular and onerous round trips to Launceston or Burnie.

Another improvement is a 50 per cent increase in eye surgery through the addition of an ophthalmologist and a new ophthalmic microscope. This allows 48 patients a month to receive eye surgery, which is significantly reducing the waiting list.

Mersey has more nurses on the wards and more to come, too.

The emergency department has five new nurses and a significant amount of new equipment.

It now boasts four new specialised monitors for cardiac patients and a new infant resuscitator.

The High Dependency Unit has three additional specialised nurses thanks to a hospital-run post graduate course to overcome the difficulty attracting nurses to such a specialised area.

High dependency patients now also have access to a high-tech virtual rounds system that allows them to benefit from specialist bedside consultations without having to transfer to the North West Regional Hospital in Burnie (see story on page 22).



# possible

## patient-centred initiatives

The hospital's education department now has six clinical nurse educators, a professional development/graduate coordinator and a staff development/clinical education coordinator.

The increase in higher level education practitioners is boosting the skills of students and new staff for the benefit of patients.

In December, a new wound clinic was opened at the hospital to provide patients with specialised care and reduce the pressure on the emergency department.

The clinic also cuts the waiting time for these patients who no longer have to wait in the emergency department while others with more serious injuries or illnesses get seen first.

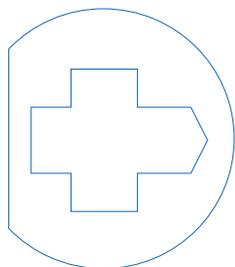
More recently, a specialised sub-acute unit was opened to help rehabilitate patients in a controlled and fun environment.

The unit will maximise the function and independence of about 50 patients a year using a multidisciplinary team of nurses and allied health staff.



North West Area Health Service CEO Jane Holden says residents can expect more news about improvements to their services across the region in the near future.

“We have strengthened our focus on putting the patient first and ensuring we provide services that best meet the needs of the North West community,” Ms Holden says. [+](#)



Tasmania's Health Plan recognises the valuable role the hospital plays in the local community and highlights opportunities for a wider range of services for families.

## shiny new hospital reflects well on George Town

**Before November 2007, George Town had an old weatherboard hospital building dating back 50 years and no longer suited to modern medical care.**

The hospital site, however, is perfect: nestled neatly between the Anne Street Medical Practice and the ambulance station.

So a new \$6.1 million hospital and health centre was carefully planned in consultation with key community players such as medical, dental, allied health and ambulance services and the Local Council.

Now the new George Town Hospital and Community Centre meets all contemporary quality, safety and building standards that the community, patients, staff and visiting specialists deserve.

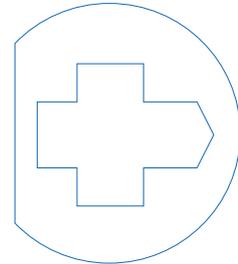
It retains 15 acute inpatient beds and all inpatient rooms have en suites. It has a patient lounge and a family room as well as an undercover walkway to the Anne Street Medical Practice.

In line with Tasmania's Health Plan, the upgrade ensures the local community can access a full range of health services in a one-stop shop that meets current and future needs.

This development brings together services from a number of other sites, including community health, child health, oral health and regional health services.

There are rooms for physiotherapy and other allied health services, accommodation for more visiting specialists, telehealth facilities, and flexible spaces for client consultation and community meetings.

Following discussions with George Town Council, three community and family support workers, funded by health department grants and managed by the Council, are also based in the new centre. ➦



Tasmania's Health Plan makes a clear commitment to working with rural and regional communities to improve their healthcare services.

# shot in the arm for primary health services

investment is a commitment to rural and regional health services

**A big funding injection for rural and regional health and community services has helped meet rising costs and demand as well as bolster staffing and clinical safety.**

The \$8.3 million increase ends carry-over debts and brings the primary health budget to a sustainable \$125+ million this financial year.

This funding infusion ensures service sustainability with \$5 million in salary indexation and the flexibility to cover additional costs from wage increases.

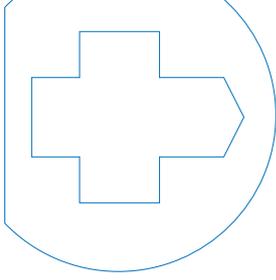
A further \$1.5 million meets the 2008-09 costs of implementing Tasmania's Health Plan initiatives like funding General Practice Workforce Tasmania to develop strategies to manage increasing patient demand and recruit doctors to rural and regional areas.

In addition, almost \$800,000 allows 10-hour night shifts for nurses in 24-hour facilities to enable better shift handovers. It also funds three new Level 3 nursing positions to enrich clinical safety.

An extra \$500,000 is available for equipment such as wheelchairs, bed hoists and incontinence aids, and to make home modifications. These help people live in their communities for longer and get home from hospital sooner.

The Rosebery Community Health Centre has an additional \$200,000 to meet shared costs of additional overnight emergency services.

While there are challenges in rural and regional health, such as staff shortages and rising chronic disease, Tasmania's Health Plan provides a framework to tackle them now and in the future. ➕



Tasmania's Health Plan commits the health department to funding demonstration sites for chronic disease, community and population health initiatives.

## North in chronic disease action timely allied health services to tackle type 2 diabetes

**Northern Tasmania is now home to a groundbreaking allied health service that provides chronic disease care right on the community's doorstep.**

The new one-stop service will initially cater for people with type 2 diabetes but may later expand to those living with other chronic diseases.

Health Minister Lara Giddings launched the integrated, multidisciplinary Primary Health Chronic Disease Demonstration Service in April.

The service is incorporated within General Practice North Allied Health Service and run by General Practice North.

"Tasmania's Health Plan says we should work more closely with GPs to provide streamlined and accessible services for people with a chronic disease and this service is a great example of how we are doing just that," Ms Giddings says.

The State Government has provided \$410,000 to establish the service and will contribute up to \$1.5 million in recurrent funding for the chronic disease service over the next three years.

The service is a response to the rising incidence of chronic disease in the community and the need to better integrate allied health services with services provided by general practice.

Patients referred to the service by their GPs are assisted by a multidisciplinary team of nursing and allied health staff who provide diabetic education, podiatry, and exercise physiology services.

Services are provided from Level 4 of the Queen Victoria Building in High Street, Launceston or by outreach to Scottsdale, George Town, Beaconsfield, Deloraine/Westbury, Campbell Town, Scottsdale, St Marys and St Helens.

General Practice North Chairperson Dr Beth Mulligan says the new allied health service heralds closer ties between the State Government and the general practice sector.

"I am pleased to see that the capacity of divisions as a provider of primary health services is increasingly recognised by all levels of government," Dr Mulligan says.

"As a community-based organisation we have the ability to work with a range of stakeholders and funders to provide integrated and streamlined service for patients.



*Left: Darrel Diprose learns new keep fit techniques from exercise physiologist Travis Davies as Health Minister Giddings and GP North Chairperson Dr Beth Mulligan look on. Picture courtesy the Examiner.*

“We hope that in addition to providing type 2 diabetes services we may also be able to provide services to other people across the northern region with chronic disease into the future,” she says.

Ms Giddings says the investment in a Division of General Practice service makes more money available for patient care than otherwise accessible through conventional State and Commonwealth funding options.

“This service puts Tasmania out in front – we are proving the concept that better service access for patients can be achieved by breaking down the boundaries between Australian and State Government funding arrangements,” Ms Giddings says.

DHHS has funded new information technology infrastructure, project management and business and clinical systems for the new service. Recurrent funding will provide diabetes education, nursing, podiatry, exercise physiology, dietetic and clinical management services.

The chronic disease service will be evaluated in three years to determine its success and to examine the potential to replicate elsewhere in Tasmania.

The Australian Government provides recurrent funding for General Practice North and gives additional money for psychological and mental health nurse services. ➔



Tasmania's Health Plan provides that community nursing will be redefined to provide more acute level care in the community.

# coastal community clinics on crest of wave

community nursing clinics in North West give greater access

**North West residents have more options for accessing community nurse services following the opening of three community nursing clinics late last year.**

The clinics are based at Devonport, Burnie and Ulverstone (refurbished and reopened). A fourth clinic operates at Wynyard.

The clinics offer all the health services nurses provide in the community – such as wound care, medication management and health assessments – but give people the option of attending centre-based clinics.

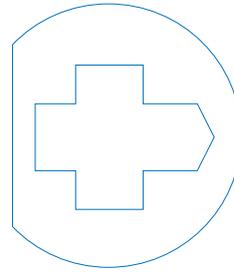
Similar developments in Hobart and Launceston also won wide community support.

Clients attending the clinics can access a range of other support services collocated on site.

The clinics provide health promotion and chronic disease monitoring and management to help keep people well and out of hospital.

Community nurses help elderly people remain in their homes and delay admission to aged care facilities, but they also allow people of all ages to leave hospital earlier and recover in their own homes.

The community nursing clinics are the result of a partnership between the State and the Commonwealth, made possible through Pathways Home funding under the Australian Health Care Agreement. 



Tasmania's Health Plan projects an increase in demand for rehabilitation services in the North of more than 10% a year over the next 15 years.

# health on mend in North

## \$4 million rehab expansion opens at LGH

**People trying to rebuild their lives after serious health problems will benefit from a \$4 million rehabilitation services expansion at the Launceston General Hospital.**

Opened in March by Premier David Bartlett and Health Minister Lara Giddings, the rehab expansion includes eight more beds and has created over 30 new jobs.

Tasmania's Health Plan projects an increase in demand for rehabilitation services in the North of more than 10% a year over the next 15 years. This expansion, which addresses these issues, will reduce pressure on the LGH.

The rehabilitation team has received a big boost with additional allied health positions including physiotherapy, occupational therapy, speech pathology, social work, nutrition and pharmacy.

The expansion includes 10 more nursing and ward staff; three more medical officers, including a full time rehabilitation specialist; eight more beds in the rehab ward, taking the total to 26; an enhanced cardiac rehab service; reintroduction of the pulmonary rehab service; and recruitment of 18 more allied health staff.

The State Government allocated an additional \$3 million in last year's budget rising to \$4 million in 2009-10 to expand allied health and rehabilitation services. ➤

### Real rehab benefits

- More cardiac rehab classes and the Lung Busters pulmonary service takes pressure off hospital beds occupied by patients forced to spend longer in acute beds for rehabilitation
- Cardiac rehabilitation programs that include education and exercise reduce the risk of dying from heart attack by up to 26%
- Pulmonary rehabilitation can make a big difference for people with chronic obstructive pulmonary disease caused by conditions like asthma and emphysema
- The new services will benefit stroke patients and people who have had hip replacements.

# community in consultation

## consumer engagement to improve health and human services

**The health Department of Health and Human Services is enlisting the Tasmanian community to help drive improvements in its health and wellbeing services.**

Systematic consumer and community involvement in decision-making gives health and human services policy makers a richer view of how the system performs in the real world.

It is recognised internationally that actively engaging consumers and the community in service planning and delivery promotes better individual and community outcomes.

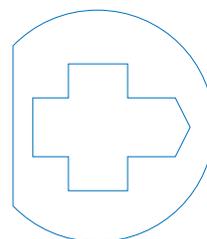
Department Statewide System Development Deputy Secretary Mary Bent says the more control individuals have over their circumstances the better their quality of life and sense of wellbeing.

"To achieve better outcomes it is important to hear the voices of people who use our hospital, disability or other health and human services," Ms Bent says.

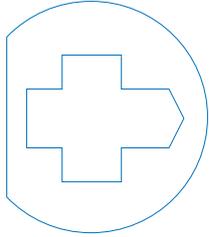
"Initially, the department is asking the public how they prefer to get involved in the ongoing consultation process so we get it right and make it meaningful from the outset," she says.

"Consumer and community engagement is not an end in itself but an important step towards creating more effective health and wellbeing services for all Tasmanians.

"Consumer and community engagement will not mean everyone will get everything they want all of the time, but it will mean people will hear the reasons behind decisions and have a real chance to shape their services," Ms Bent says. 🗳️



Tasmania's Health Plan commits to strengthening public participation in health through community and consumer engagement.



Tasmania's Health Plan commits the department to receiving and acting on feedback from client satisfaction surveys or complaints procedures.

# survey shows sickbay satisfaction

national surveys rate Tassie hospitals highly in patient satisfaction

**National surveys of hospital experiences released in 2008, rated Tasmanian public hospital inpatient services and emergency departments among Australia's best.**

The survey revealed a high level of patient satisfaction at all of the then three state public hospitals (Mersey was outside this system at the time).

The survey revealed that people admitted to Tasmanian public hospitals rated them in the top 20 per cent in comparison to other Australian hospitals.

Patients attending the state's emergency departments gave them a similarly high ranking.

The North West Regional Hospital in Burnie was ranked in the top one per cent of emergency departments compared to 27 hospitals of a similar size in Australia.

The Royal Hobart Hospital was placed fifth among 17 similar-sized public hospitals.

The Launceston General Hospital rated in the top seven per cent for emergency department care compared to services of a similar size.

The RHH cardiology, cardiothoracic and general surgery wards, and the LGH general surgery-urology, general surgery-orthopaedic and acute medical wards were singled out for compliments.

The survey identified some areas for improvement, which the hospitals have or are addressing. 🏥

# networks to prove

## new clinical networks connect healthy communities of interest

**Tasmania's Health Plan is committed to drawing together clinicians, consumers and other key stakeholders to help plan, deliver and evaluate the state's health services.**

This is progressing through the Tasmanian Clinical Advisory Committee, new clinical networks and a Chief Health Officer position.

The advisory committee is up and running, some clinical networks are in operation and Dr Craig White, former Royal Hobart Hospital head, is the CHO.

Clinical networks link health professionals working in the same clinical area – for example, cancer – in community health facilities, hospitals and specialist centres. They also include other service providers, consumers and health-related non-government organisations like Cancer Council Tasmania.

Tasmania's new networks will help bring about significant service improvements for clients and patients, including better coordination of services across the state.

The first clinical network to kick off under Tasmania's Health Plan was the Aged Care and Rehabilitation Clinical Network.

Southern Tasmanian geriatrician Dr David Dunbabin and Launceston General Hospital Rehabilitation Unit Nurse Manager Lee Wallace are clinical leaders of this new network.

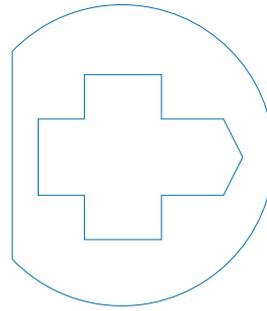
The network will play a key role in Tasmania's response to challenges like the ageing population and improve communication and cooperation between people working in different regions of the state.

The network will help develop and implement an aged care strategy and a state rehabilitation services plan.

Dr Dunbabin, who has previous experience with similar networks interstate, says the network will bring together clinicians working at the coalface of geriatrics to improve care for the state's older population.

"The network will build links in education, research, quality improvement and informal support between health professionals working in similar areas of healthcare," Dr Dunbabin says.

Ms Wallace, a practising nurse for more than 30 years, says the network will directly involve clinicians from the outset in policy decisions that improve care for people needing rehabilitation services in Tasmania.



Tasmania's Health Plan is committed to developing stronger mechanisms for clinical leadership across Tasmania.

# net worth

"We have a rapidly ageing population as well as a high incidence of chronic disease, so it is only logical that we work in a more collaborative and integrated way to improve services in these growing areas of need," Ms Wallace says.

Palliative care physician and new state Palliative Care Service Clinical Director Prof Michael Ashby is the newly appointed clinical leader of the Palliative Care Clinical Network.

The network will work to ensure specialist palliative care, advice and support are available to all Tasmanians. It will also help strengthen clinical standards.

An initial project on developing and implementing an advanced care planning arrangement is underway. This will allow all Tasmanian adults to develop and manage a plan for their end-of-life care if they are unable to make such decisions at the time.

Setting up the Tasmanian Cancer Clinical Network is underway. This network is emerging from the newly completed Cancer Services Networks National Demonstration Program Tasmania (CanNET) pilot project.

Developed in partnership with the health department, CanNET Tasmania is directed by co-clinical leaders Prof Ray Lowenthal and Dr Stan Gauden.

Prof Lowenthal is Director of Medical Oncology and consultant physician in haematology and oncology at the Royal Hobart Hospital as well as Professor of Oncology at the University of Tasmania.

Dr Stan Gauden is a radiation oncologist and Director of the WP Holman Clinic (cancer treatment) at Launceston General Hospital.

CanNET Tasmania, an Australian Government initiative funded through Cancer Australia, has acted to improve coordination, continuity of care, quality and equity of service access as well as to promote multidisciplinary care teams.

It has also sponsored a Tasmanian cancer plan and undertaken consumer-focused projects including an information website and directory of cancer services.

The Cancer Clinical Network will build collaboration between consumers, cancer services and health-care providers to improve services and outcomes for Tasmanians.

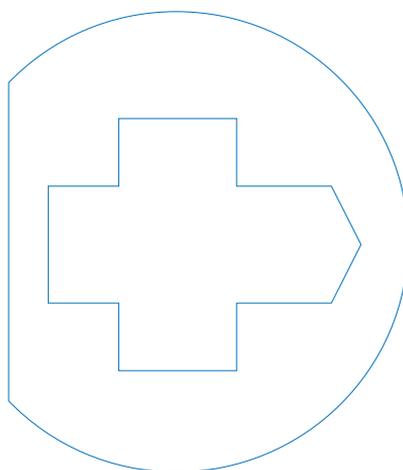
The appointment of the clinical leader and steering committee for the cancer network is nearly complete. ➡

# funding foremost for

new staff and new start for Flinders Island MPC



# Flinders



Tasmania's Health Plan identifies that the Flinders Island MPC will continue to provide inpatient, primary and community-based care.

## **A \$400,000 upgrade of the Flinders Island Multi Purpose Centre has attracted a full contingent of staff to work on the remote Bass Strait island for the first time in many years.**

Improved professional facilities and more comfortable staff accommodation have made the island more attractive for full-time staff and for visiting health and medical professionals, and educators.

Until recently, visiting health staff had to use old and unsuitable accommodation attached to the doctors' surgery waiting room.

Flinders Island MPC is a University of Tasmania rural health teaching site providing facilities for students to stay and undertake clinical placements.

Now the State Government has earmarked a further \$6 million to thoroughly redevelop the island's MPC, which is staffed by around 40 health professionals.

This is the first significant upgrade for 15 years and is badly needed.

Problems include poor accident and emergency entry, a dysfunctional building layout and poor access to community health and meeting areas.

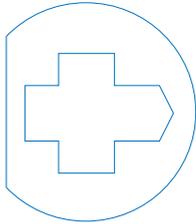
The MPC is home to four inpatient and nine residential aged care beds as well as a range of community services including community nursing, allied health, oral health, child health, home help, maintenance and regular visiting services.

The redevelopment will deliver a contemporary clinical environment for inpatient and emergency care and new residential aged care facilities.

The redevelopment will also provide information communication technologies such as Telehealth to improve integration with major hospital and community services as envisaged in Tasmania's Health Plan.

Because of its isolation, Flinders will retain its capacity to provide an emergency response, including medical retrieval from the island if necessary.

The major makeover will begin in 2009-10 and take two years to complete. ➔



Tasmania's Health Plan is targeting chronic disease in order to improve Tasmanians' health outcomes and quality of life.



# time to tackle chronic disease

new strategy will lead to better health and fewer hospital visits

**The Department of Health and Human Services is finalising a groundbreaking strategy to deal with the explosion of chronic illness in Tasmania.**

Given that many chronic diseases are preventable, Tasmania needs a coordinated and strategic approach to help people stay healthy, detect chronic disease early and ease the burden for those with chronic disease.

Chronic Disease Strategy: A Framework for Action for Tasmania 2009-2013 is a guide to improve prevention, detection and management of chronic disease.

It identifies a vision, goals and principles that can guide all work to improve the health and wellbeing of Tasmanians.

The Strategy outlines improvements to existing services and details new and innovative ways to deliver services.

New approaches include a chronic disease self-management framework, clinical networks, and service standards and clinical guidelines. It also promotes changes to lifestyle and addresses other risk factors.

The Strategy is built on the input and advice from a network of stakeholders, a review of chronic disease policy and models of care, stakeholder workshops and various calls for written submissions.

The Strategy puts people using the health system at the centre of all planning and service delivery activities. 



# digital highway takes coastal shortcut

processing speed of mammograms from remote areas revolutionised

**Smithton has joined other Tasmanian remote areas in accessing a new telehealth service that transforms the way screening mammograms are processed.**

The BreastScreen Tasmania Connectivity project cuts the time for mobile screening unit mammograms to reach Hobart from up to five days to just four minutes.

The faster images are read the sooner women know if they need further testing for breast cancer.

In partnership with the new VirtualCare@Tas telehealth program and Telstra Countrywide, BreastScreen Connectivity sends digital mammography images in real-time from its mobile screening unit to the Hobart radiology reading facility.

The service gives women in rural and regional areas access to a level of healthcare service comparable to women in major Tasmanian centres.

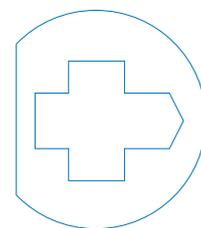
Sending digital breast X-rays and files from the mobile unit to Hobart is also more secure than couriering images by road.

In 2007, the Australian Government's Clever Networks program made funds available to deliver innovative broadband services in regional, rural and remote areas.

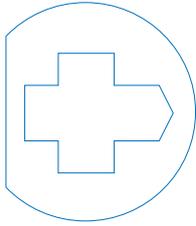
In Tasmania, the VirtualCare@Tas project team is implementing these projects, with the BreastScreen Tasmania Connectivity project the first to reach fruition.

Since February 2008, the mobile screening unit has successfully transmitted images from Wynyard, King Island, Queenstown and Rosebery.

Now Smithton has joined the digital fold. ➔



The improvement of e-health infrastructure in Tasmania is envisaged through Tasmania's Health Plan.



Tasmania's Health Plan says RHH is the major tertiary referral hospital for the state and should continue to provide most single site and statewide services.

# building a better Royal

five-year investment will improve and expand key services

**A \$100 million investment in the Royal Hobart Hospital will deliver major service improvements and ensure the hospital remains safe and reliable until a new one is built.**

A number of high priority works will focus on efficiency and increasing space and capacity.

An upgrade and expansion of the intensive care and high dependency units will help increase levels of surgery in the main theatres, especially neurosurgery and cardiothoracic surgery. The departments will get eight more beds, bringing the total to 25.

The funding will also create space for the installation of the \$3.5 million public PET/CT scanner for the benefit of all Tasmanians.

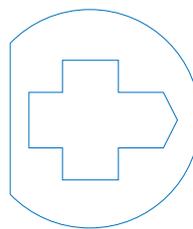
Over the next five years high priority works will include:

- the creation of a combined clinic area where outpatient functions are consolidated in one location to improve efficiency and free up space elsewhere

- the expansion and relocation of ambulatory care and oncology units
- expansion of the recovery area in the Day Procedures Unit, including a 23-hour recovery unit to improve elective surgery scheduling
- upgrading general wards to optimise bed capacity and improve educational and bathroom facilities
- upgrading and improving storage rooms, the loading dock and kitchen
- upgrading information and communication services, electrical services, mechanical plant, lift services, plumbing and fire safety.

These works will ensure the Royal remains up to standard while the global financial crisis takes its course and a new Royal becomes affordable.

Once the economy improves, a new approach will see the current RHH site redeveloped over an extended period and possibly supplemented by a new building nearby. ➔



Tasmania's Health Plan called for the introduction of a combined PET/CT scanner at RHH to augment the delivery of multidisciplinary cancer care in Tasmania.

# public gets Royal PET scanner

## \$3.5 million scanner accessible to all

**Public patients will have access to a PET/CT scanner at the Royal Hobart Hospital making comprehensive imaging services available for all Tasmanians.**

The private PET scanner installed last year has not met the needs of all public patients because of its limited operating hours and cost, which has forced many patients to travel to the mainland for scans.

Since the beginning of November, 96 patients from RHH have had to travel to Melbourne for a PET scan.

The private scanner is not free for all public patients so the Government has met the cost, which for the first six months of the private machine's operation has cost totalled \$51,850.

Locating the scanner in Hobart is necessary so it is close to the statewide oncology service at the Royal and the Menzies Research Centre as well as keeping the service clinically safe.

Better access to a public scanner will let the Menzies increase its cutting edge cancer research for the benefit of all Tasmanians.

The speed and efficiency of PET/CT scanners have greatly improved in the past 18 months allowing the Royal to also use the scanner for standard CT scans.

The Commonwealth funded the \$3.5 million scanner in its 2009-10 budget. [🔗](#)

# cancer carers calming

## better care for Tasmanians with lung and bowel cancers

**Tasmanian lung and bowel cancer patients are receiving more support and getting better results following the hiring of cancer coordinators for these cancers.**

The coordinators act as central contact points for patients with newly diagnosed lung and bowel (colorectal) cancers – the deadliest cancers in Tasmania – and ensure they see the most suitable medical professionals.

The two cancer care coordinators support patients and their families from diagnosis through their treatment, relaying care needs quickly to the patient's cancer team, including their GP.

They also supply patients with information about their cancer, treatment and symptom management as well as support and healthcare services.

The new service enhances the state's existing cancer services and helps build a system of coordinated care.

The cancer coordinators, who came on board in December, say that after just a few months the new system's success is already obvious for patients, their families, clinicians and other health professionals.

Royal Hobart Hospital cancer care coordinator Renae Grundy says it is vital to improve the care and treatment process for patients and their families at a time when they are most vulnerable.

"A diagnosis of cancer can be a very traumatic, frightening, overwhelming and stressful time for patients and their loved ones," Ms Grundy says.

"At the same time, there is plenty for patients to think about and questions that need answering," she says.

"There are tests to schedule, treatments to consider, the concerns of family members to think about and uncertainty about how the medical system works.

"At the same time, cancer diagnosis has a major impact on psychological and emotional wellbeing. The psychosocial support provided by these new positions is an integral part of ensuring that people with cancer have positive outcomes.

"With all of this, patients need someone to help them and guide them through their care."

Ms Grundy says the level of help varies according to individual needs.

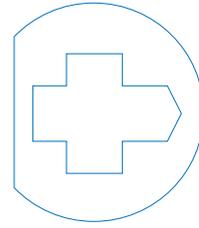
"They may need to contact us regularly or may only need a helping hand when first diagnosed and starting their plan of care.

"Either way, the message is that we, as coordinators, can be a one-stop shop for all their care and treatment concerns, so that patients and their families need not worry and can concentrate solely on their health and wellbeing."

Launceston General Hospital cancer care coordinator Kim Fotheringham says using a multidisciplinary team approach is central to coordinated care and treatment.

"Diagnosis and treatment of cancer can be very complex," Ms Fotheringham says.

"There may be many different specialists and other health professionals involved in diagnosing, treating, caring for and supporting cancer patients and their families," she says.



Establishing the Tasmanian Cancer Clinical Network is a key recommendation of Tasmania's Health Plan.

# concerns

"For example, these could include a GP, hospital specialist doctors, surgeons, pathologists, radiologists, radiation oncologists, medical oncologists, radiation therapists, nurses and palliative care specialists.

"And then there is a whole range of allied health professionals, such as social workers, dietitians, occupational therapists, physiotherapists, pharmacists and speech pathologists.

"It's easy to see how confusing this could be for newly diagnosed patients and how important a central contact point is to guide them through the medical maze."

Ms Fotheringham says the new cancer team's approach helps break down this complexity and also supports rural and regional cancer services.

"These teams are now meeting regularly and have met with a positive reaction from those involved," she says.

"Members discuss evidence-based treatments best suited for a particular type of cancer and all patients newly diagnosed with, or with a recurrence of, lung or bowel cancers are being discussed at these meetings.

"Patients must give their consent to the clinician to have their case discussed.

"This is leading to significant benefits for patients including better care and treatment planning, care coordination, access to supportive care and clinical results." Ms Fotheringham says.

According to Ms Grundy, cancer care coordinators are also working on clearer referral pathways for GPs, clinicians and other health professionals involved in cancer care.

"This means GPs and other medical professionals will have a clear pathway, or flow chart, to follow to ensure that patients' tests are timely and follow a more orderly predetermined sequence," she says.

"This is certainly more advantageous for patients, all involved in their care and treatment, and the wider health system."

Cancer care coordination for lung and bowel cancer patients forms part of the newly completed Cancer Services Networks National Demonstration Program Tasmania (CanNET) project.

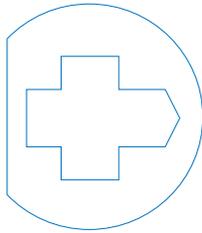
Developed in partnership with the health department, CanNET Tasmania has sponsored the development of the Tasmanian Cancer Plan that will help shape the future of cancer services over the next five to 10 years.

CanNET Tasmania has linked health professionals and facilities providing cancer care in regional and rural areas with cancer services in metropolitan areas.

The links and agreed care pathways ensure people affected by cancer in Tasmania have access to the most appropriate, evidence-based cancer care.

The Tasmanian Cancer Clinical Network has emerged from CanNET, which the Australian Government funded through Cancer Australia.

Tasmania's Cancer Clinical Network – a key recommendation of Tasmania's Health Plan – will build on CanNET's achievements. [🔗](#)



Tasmania's Health Plan provides a blueprint for improved oncology services across the state.



# cancer treatment accelerates at Royal

## new linear accelerator helps Tasmanians battling cancer

**Treatment options for Tasmanian cancer patients have greatly improved since the introduction of Royal Hobart Hospital's new linear accelerator in July.**

The new \$3.2 million Varian iX dual modality linear accelerator allows more advanced forms of image-guided radiation therapy.

The Royal's second linear accelerator delivers modern radiation treatment techniques to improve the accuracy and control of treatment and, ultimately, patient safety.

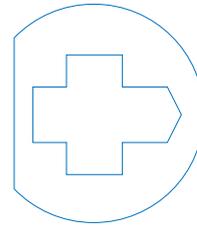
The machine produces images of tumours and organs at risk to help deliver precise radiation treatment, which can improve outcomes and reduce exposure of healthy tissue.

The new technology is beneficial in treating tumours in organs that move with breathing, including tumours of the lungs, liver and pancreas. The machine also allows the treatment of smaller volumes of tumour, which minimises the dose to normal tissue and the side effects of treatment.

Tasmania's Health Plan provides a blueprint for improved oncology services across the state to meet the cancer challenge.

Cancer services at the RHH Holman Clinic have increased at six per cent each year, with an average of 85 patients now visiting the clinic for treatment every day.

The RHH Holman Clinic is the statewide provider of superficial radiotherapy – for patients with some forms of skin cancer – and intensity modulated radiation therapy. 



Tasmania's Health Plan calls for better e-health infrastructure and support to complement assessment and health coaching for chronic conditions.

# house calls a phone call away

new technology set to remove healthcare barriers for rural patients

**Tasmania is leading the way with new mobile phone technology that will help break down the barriers of distance for patients living in rural and regional Tasmania.**

The Department of Health and Human Services recently showcased two new technologies at Agfest that it is trialling in partnership with Telstra.

The groundbreaking technology uses mobile phones for video-conferencing during home visits by community nurses and will initially trial in the Central Highlands and Derwent Valley.

These telehealth technologies – the Mobile Phone Telehealth Solution and the In the home Telecare Solution – connect patients with health professionals many kilometres away reducing travel for people living outside of Tasmania's main cities.

Nurses use Next G technology to visually link up with as many as six other members of the client's healthcare team from anywhere around the state.

Everyone can see and speak with each other as if the whole team is actually in the client's home.

The home consultation is bolstered by a DHHS vehicle fitted out with additional Next G and WiFi aerials as well as a Next G router.

The other exciting development is a unit that is installed in a client's home to collect and transmit important health data.

The information collected ranges from weight and temperature to blood glucose levels and is transmitted to a GP or nurse. If vital signs deteriorate an alert is triggered and health professionals contact the patient.

Meanwhile, the recent expansion and upgrade of the Tasmanian TeleHealth Outreach Network from 40 video-conference points to 120 will also boost health services to rural and isolated areas.

The TeleHealth links are located in the major public hospitals, rural hospitals and community health centres around Tasmania.

Health professionals in rural and remote communities can now use this network to consult with specialist and emergency staff in major hospitals when faced with situations that need additional expertise.

They can also use the network to continue their professional development and keep up-to-date with latest treatment practices.

The network is also available for not-for-profit organisations. ➡

# Rosebery centre responds to residents' needs

new model makes major advances to area's health services

**Following talks with Rosebery residents, the health department and OZ Minerals are each spending \$500,000 over two years to improve the town's health services.**

In addition, the State Government is spending over \$300,000 on further capital improvements to the Rosebery Community Health Centre, bringing its capital investment to almost \$700,000.

The agreement with the community and miner OZ Minerals includes an extra 70 hours a week of on-duty after-hours nursing cover at the health centre as well as an observation bed and a four-bed disaster response capacity.

Two staff, including a registered nurse, are on duty every night with back-up from an on-call GP providing residents with 24-hour clinical response at the emergency centre every day.

The health department and OZ Minerals are also working to improve local ambulance cover with the company promoting volunteer ambulance service within its mine workforce.

The department is providing a new four-wheel-drive community car to improve access to health and social services for Rosebery and Tullah residents, particularly in bad weather.

The OZ Minerals agreement offers the mine several benefits. These benefits include an on-site occupational health technician, access to a nurse, access to the health centre's 24-hour emergency service, more emergency support as well as better rapid response and ambulance paramedic response.

Gemini Medical Services, which delivers GP services across the West Coast, provides the after-hours clinical and on-site mine health services.

The department has also invested \$350,000 at Rosebery to improve GP facilities, nursing clinic rooms and building security.

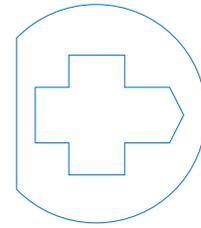
A new day centre improves facilities for visiting allied health and clinical services. These include video-conferencing for remote access to clinical consultations with specialist services. A tender process for a new digital X-ray service is underway.

The OZ Minerals agreement will trial for two years with an evaluation after 12 months. ➔

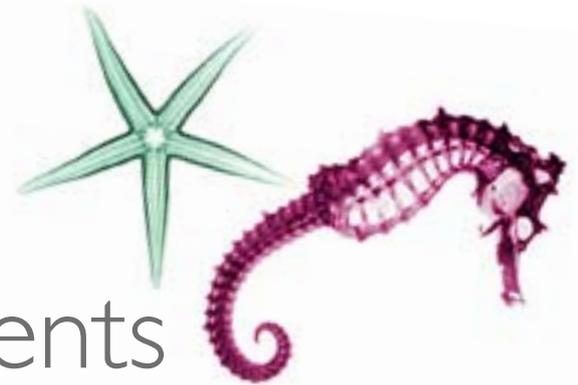
## Rosebery model of care

Compared to the old acute hospital model, the new Rosebery services offer:

- a strong emphasis on health promotion and management of chronic disease
- better access to community nursing, including nursing in the home
- flexible arrangements for post-operative, post-acute or early discharge care through community nursing at home or clinics at the health centre
- specialist on-site wound clinics
- video-conferencing for remote clinical consultations with specialist services such as wound care, dietetics and mental health services
- midwifery clinics for antenatal and post-natal care
- better access to non-medical respite, either in the health centre or in the community
- more access to visiting services such as allied health
- more home-based palliative care with support from the North West Palliative Care Service.



X-ray services are part of Tasmania's Health Plan's aims to provide services close to where people live where safe and sustainable to do so.



# two coasts' residents now transparent

digital imaging and internet modernise X-ray services

**Queenstown residents can now access a state-of-the-art \$100,000 X-ray machine and linked digital processing equipment at their district hospital.**

The new X-ray equipment at Queenstown represents a major advance over the old system and brings real benefits for patients and staff.

A higher-powered generator allows better X-ray penetration of larger patients, which produces clearer images and leads to better clinical assessment.

The equipment also has a vertical lift table that makes examinations much easier and safer for patients and staff.

The Queenstown installation is part of a \$400,000 boost to X-ray services in other areas on the West and North West Coasts.

The Smithton Hospital has taken delivery of a new X-ray machine to link in with its existing digital capability. At Rosebery Community Health Centre, nurses are now trained to take simple X-rays in preparation for the installation of digital X-ray equipment.

Similar services and equipment are now available on King Island.

These machines are particularly beneficial for remote areas because they reduce the need for patients to travel to major centres.

The new systems improve clinical assessment with online support from radiographers and can access specialist medical advice and assistance remotely.

Computerised radiography has many other advantages over the old "wet" X-ray system including:

- quick image display for patient management
- no need to leave a patient to process films
- a much wider exposure latitude, so less repeats
- can immediately move images electronically to other health sites rather than at the end of the day
- better image storage and long-term archiving. 

# pointing the way for easier care access

**Home and Community Care services in southern Tasmania are now available from a single entry point that simplifies access to information about care and support.**

Known as TasCarepoint, this service will expand to the rest of Tasmania in future stages.

TasCarepoint makes it easier for potential clients, carers, family members and health professionals to access services and information. Client screening for service referral is done over the phone in most cases.

Clients and their carers can phone, fax or email TasCarepoint to find out what services are close to them and the services to which they are eligible.

TasCarepoint includes community nursing, nursing clinics, home care, personal care and home maintenance, and may expand to embrace other community care services and programs in future.

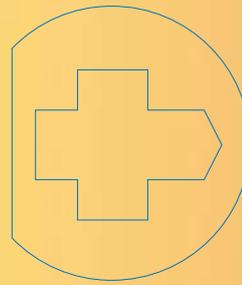
A consistent eligibility and assessment process reduces the need for clients to keep repeating information.

Streamlined management of client information reduces duplication of data collection and entry, which helps service providers better coordinate care across services.

TasCarepoint does not preclude people contacting existing service providers for information or services.

Home and Community Care Services, jointly funded by the Australian and Tasmanian Governments, help frail aged or younger people with a functional disability and their carers to remain in their home. ➔

Contact TasCarepoint on 1300 769 699.



Streamlined management means clients do not need to provide repeat information.



DHHS will work with UTAS and other education providers to provide sustainable health workforce training and development.

# building health workforce by degrees

partnership promotes better environmental health

**The University of Tasmania and the health department have joined forces to introduce a new environmental health course at the Launceston UTAS campus.**

Introduced by the School of Human Life Sciences, the bachelor of health science degree was organised through the Partners in Health initiative as part of Tasmania's Health Plan.

Department of Health and Human Services Director of Public Health Dr Roscoe Taylor has welcomed the new course. He says it is recognised across Australia that improved qualifications are needed to help meet the increasing demands of environmental health jobs.

A degree in environmental health is generally regarded nowadays as the minimum qualification for an environmental health officer.

"The establishment of the degree course by the University of Tasmania will bring us into line with other states and territories," Dr Taylor says.

"It will also increase the number and capacity of qualified people to meet future workforce demands and environmental health challenges."

Graduates will work in positions that implement public health legislation and monitor many environmental health standards.

Dr Taylor says that, among many other things, graduates will deal with issues like food safety, air and water quality, solid waste management, communicable diseases prevention, noise pollution and hazardous substances use.

Only the first two years of the three and a half year course are on campus. This allows students to work as trainee environmental health officers before they are fully qualified and gain practical experience as they study.

The project has involved extensive work by UTAS, DHHS's Public and Environmental Health Service and Environmental Health Australia. UTAS has a well-established relationship with the public healthcare system.

The project operates under the Partners in Health program, which is unique in Australia.

Partners in Health was formed because DHHS and the UTAS Faculty of Health Science saw the importance of a strong alliance to collaborate around health workforce, and health research and education.

The first graduates are expected by 2011. 



# we're on a bold journey realising a visionary new healthcare system

**Along with most western countries, Australia faces major challenges in meeting increasing health demands from citizens.**

The costs of healthcare – in particular hospital care – are rising steeply, critical workforce shortages persist and there is a mismatch between services and community needs.

Department of Health and Human Services Secretary David Roberts says facing these circumstances, healthcare systems around the world are shifting to better integrated services that recognise that multi-skilled team-based workplaces are essential and that technology is vital to success.

“In Australia we're on a bold journey, but thanks to Tasmania's Health Plan we know where we're going and are getting better all the time in measuring the progress we are making,” Mr Roberts says.

“Modern healthcare is about joining up services into a seamless whole for the benefit of our patients and clients, even though behind the scenes their journey may involve many health professionals across several services.”

Work under Tasmania's Health Plan has improved and expanded many services and this work continues. A major focus now is to

integrate acute hospitals, community hospitals and primary healthcare services under local area management.

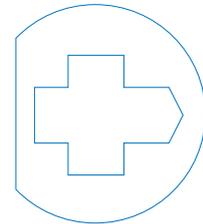
“This is not about going back to regional hospital boards as it is vital that our statewide approach to healthcare remains.

“Integration is about getting doctors, nurses and health professionals to work together towards a common goal. It will overcome overlaps and close gaps in services by improving communication and cooperation.

“We must break down the artificial barriers that exist between primary and secondary care to deliver a more streamlined service that will make life easier for patients, clients and staff alike.”

Mr Roberts says the process is also about moving services closer to patients and clients, whenever it is safe and sustainable to do so – which for rural Tasmania presents some challenges.

“In Tasmania our journey begins with integration of primary and secondary health services through a move to area health services, which is in line with the area-based management approach common to health and human services, education and police – a vital part of the plan for a more cohesive approach to government and public services,” he says.



“The bottom line is we will make sure our patients and clients are at the centre of everything we do ...”

These are the North West Area Health Service, Northern Area Health Service and Southern Area Health Service.

The North West Area Health Service is well advanced along the integration pathway that will shift control of day-to-day health services to those who deliver them.

Moving to area health services management will also give the community greater involvement in decision-making through community networks.

These networks will include patients and GPs as well as community, hospital, primary health and non-government organisation representatives. The networks will identify what is working at the local level and what is not, and will help work out a way forward.

On a broader level, Tasmania’s Health Plan is now one of several strategies that is helping shape DHHS’s reform agenda – an agenda for a sustainable, accessible, efficient and innovative health and human services system.

These strategies are now consolidated into one concise directions statement: Strategic Directions 2009–2012.

Mr Roberts says this strategy sets out his department’s vision, mission and key strategic objectives.

“Strategic Directions 2009–2012 explains how we aim to achieve these objectives and, more importantly, the benefits Tasmanians can expect to experience as a result.



“In this increasingly difficult financial climate, it is critical that we in DHHS are clear about where we’re heading and how we’re going to get there.

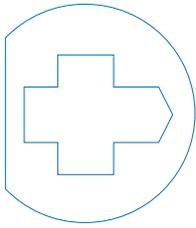
“We need to concentrate our efforts to the greatest effect in order deliver sustainable results within the available resources,” he says.

“In future, we will increasingly be focusing much more on health and wellbeing in addition to care and support. This is an approach I am encouraging my staff across all areas of the Agency to embrace and foster.

“This builds on the Premier’s Physical Activity Council agenda.

“In essence it is all our roles to ensure our patients and clients are at the centre of everything we do and that we will build a health system for which we can all be proud,” Mr Roberts says.

*Strategic Directions 2009–2012* is online at [www.dhhs.tas.gov.au](http://www.dhhs.tas.gov.au) in the “About us” section.



One of the key principles of Tasmania's Health Plan is the integration of acute services with community based services.

# Scottsdale hospital enjoys serious makeover

**Since late 2007, Scottsdale district residents have enjoyed a greatly extended range of health services through a \$3.9 million modernisation of their North East Soldiers Memorial Hospital.**

Tasmania's Health Plan recognised that Scottsdale was ripe for expanded chronic disease services and could usefully bring general practice and community health together with local government and non-government organisations.

Now services once spread around Scottsdale, including child health and other regional health services, are newly centralised at the hospital.

The James Scott Wing now boasts 13 new bedrooms with ensuites and upgrades that meet future expectations, while the Acute Wing meets contemporary standards with refurbished bedrooms and ensuites.

The James Scott Wing has a beautiful residential living space with large, light-filled sitting and dining areas. It has views of the surrounding countryside that create a homely feel for residents and a high quality work environment for staff.

There are also new work rooms, additional treatment rooms and a new accident and emergency facility with connecting ambulance bay close to the ward, which creates more efficient and effective work practices.

The hospital has a new nursing station and physiotherapy room as well as a treatment area close to other allied health services, visiting specialists and X-ray facilities.

Telehealth facilities are also available along with flexible spaces for client consultation and community meetings.

Patients and staff enjoy upgraded office spaces and facilities, waiting areas and public toilets near the main entrance.

The hospital meets all the contemporary quality, safety and building standards for the benefit of residents, patients, staff, visiting specialists and the community.

An additional \$100,000 from the Australian Government, through Dorset Council, has expanded consulting rooms. ➔

# Index

## North:

First MRI scanner for LGH	7
New ambulance station in North	9
Funding for ambulance training	11
Nurse practitioner in North	12
Nurse numbers increase	12-13
LGH perioperative practice starts	14
Care comes closer to communities	16-18
Electronic cancer records at LGH	23
LGH elective surgery scrubs up	24-25
Cataract surgery surge	26
More GPs call Tasmania home	29
Major capital works revitalise LGH	32-33
Funding for Longford, Westbury	34-35
Our hospitals are baby friendly	42
LGH neonatal and paediatric units	45
Regional cessation coordinator	46
LGH stroke clinic improves care	48-49
New hospital at George Town	52
Health services tackle type 2 diabetes	54-55
\$4 million rehab at LGH	57
Surveys rate Tassie hospitals highly	59
Bowel and lung cancer coordinator	68-69
Primary health diabetes adviser	41
Scottsdale hospital gets makeover	78

## North West:

More ambulance staff in NW	8-11
Funding for ambo training in NW	11
Nurse numbers increase	12-13
GP Super Clinics	16
Infection prevention and control	19
IT improves medical services	20-21
CSIRO IT links NW with RHH	22
Broadband bridge to King Island	23
Elective surgery scrubs up	24-25
Cataract surgery surge	26
Mersey elects for short-stay model	27
Burnie boosts surgery	27
More GPs now call Tasmania home	29
Smithton hospital back in good health	30
Endoscopy suite for NW community	38-39
Our hospitals are baby friendly	42
Regional cessation coordinator	46
Mersey services expanding	50-51
Better NW nurse clinics access	56
Tassie hospitals rate highly	59
Funds for Flinders Island	62-63
Quicker rural mammograms	65
Rosebery's care model advances	72
Coastal residents get modern X-ray	73

## South:

More ambulance staff in South	8
Funding for ambo training in South	11
Nurse practitioner in South	12

Nurse numbers increase	12-13
RHH appoints Prof Nursing	14
Care comes closer to communities	16-18
Infection prevention and control	19
Elective surgery scrubs up	24-25
RHH lifts elective surgery	24-25
Cataract surgery surge	26
More GPs now call Tasmania home	29
Royal treatment for children	31
Fight Cancer Foundation House	37
Our hospitals are baby friendly	42
Bruny Island health centre	43
Central Highlands health, telecoms	44
RHH antenatal services in community	45
Regional cessation coordinator	46
National surveys rate hospitals highly	59
Building a better Royal	66
Public PET scanner for RHH	67
Coordinator for bowel, lung cancers	68-69
New linear accelerator at Royal	70
Phone tech brings house calls closer	71
Single entry point for care/support	74

## Services

MRI scanner boosts LGH diagnostics	7
Tas Ambulance new bases, services	8-10
Care closer to communities	16-17
IT improves medical services	20-21
CSIRO IT links NW with RHH	22
Electronic cancer records at LGH	23
Broadband bridge to King Island	23
Elective surgery scrubs up	24-25
Cataract surgery surge	26
Fight Cancer Foundation House	37
Patient transport coordination	37
Diabetes reduction programs in place	40-41
Bruny Island community health centre	43
RHH antenatal services in community	45
Smoking cessation boost	46-47
Smoking cessation coordinators	46
Pharmacists enlist in quit army	47
LGH stroke clinic improves care	48-49
Mersey services expanding	50-51
Funding boost for primary health	53
Allied health tackles type 2 diabetes	54-55
NW community nursing clinics open	56
\$4 million rehab expansion at LGH	57
Quicker rural mammograms results	65
Building a better Royal	66
Public PET scanner for RHH	67
Bowel, lung cancers coordinators	68-69
New linear accelerator at Royal	70
Phone tech brings house calls closer	71
Rosebery's care model advances	72
Coastal residents get modern X-ray	73
Single entry point for care/support	74



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