



# Clinician Connect

- 01 Feature Editorial
- 02 Comment by Chief Executive
- 03 Blood and Marrow Transplant
- 04 Cardiac
- 04 Gastroenterology
- 05 Endocrine
- 05 Radiology
- 05 Respiratory
- 06 Renal
- 07 Stroke
- 08 Spinal Cord Injury
- 09 Aged Health
- 09 Brain Injury
- 10 Intellectual Disability
- 10 Anaesthesia Perioperative Care
- 11 Musculoskeletal
- 11 Nutrition
- 12 Pain Management
- 13 Palliative Care
- 13 Rehabilitation
- 14 Burn Injury
- 15 Gynaecological Oncology
- 15 Neurosurgery
- 15 Ophthalmology
- 16 Urology
- 16 Emergency Care Institute
- 17 Critical Care Taskforce
- 17 Surgical Services Taskforce
- 17 Intensive Care Coordination and Monitoring Unit (ICCMU)
- 18 Institute of Trauma and Injury Management (ITIM)
- 18 Clinical Program Design and Implementation
- 19 ARCHI
- 19 'Grass Roots' Rural Health
- 20 Community Engagement
- 20 Acute Care Taskforce
- 20 Contact Us/Feedback



Pictured: John Worthington and members of the ACI Stroke Coordinating Committee. For more see page 8.



Pictured: John Worthington

## GUEST EDITORIAL

### JOHN WORTHINGTON

Chair of ACI Stroke Network (Stroke Services NSW)  
Conjoint Associate Professor, Faculty of Medicine, University of NSW  
Senior Staff Specialist, Liverpool Hospital, South Western Sydney LHD

I am fortunate to be a co-chair of the ACI Stroke Network at an exciting time.

After years of careful preparation the ACI implementation team and the managers and clinicians of ACI, Ambulance Service NSW (ASNSW), the Local Health Districts (LHD) and stroke network have combined to deliver the NSW Statewide Stroke Reperfusion Program. Just days old, the program represents a major overhaul of how stroke is managed in NSW.

Ambulance crews now identify stroke patients eligible for intravenous thrombolysis and pre-notify hospitals to put Emergency, radiology and stroke teams at the ready. Where possible the ambulance crews will directly transfer eligible stroke patients to one of twenty 24/7 stroke thrombolysis centres in metropolitan and rural NSW. This is a far cry from the no sirens, low triage priority and limited access to specialized stroke beds which faced stroke patients in years gone by.

The program is expected to increase stroke 'clot-busting' rates from an estimated 3% to more than 10% and is the biggest advance

in NSW stroke care since the roll-out of the original network of 22 metropolitan stroke units in 2003. The impact of the program should be comparable to the wide-spread availability of the NSW Statewide Cardiac Reperfusion Program.

The manner in which the Stroke Reperfusion model of care was developed and implemented is important for all the networks. Although the idea came from stroke clinicians, the delivery of this innovation to stroke patients across a large health service required management commitment at the LHD level, a major effort from the ASNSW to change practice and train personnel, support from the Health Minister through the Ministry and the resources and governance of ACI. For their part the 20 thrombolysis teams have worked to successfully improve 24/7 stroke thrombolysis access.

My involvement in stroke dates back two decades and in the first of those decades pioneers of evidence-based stroke care improved bed-side care at their own facilities.

Several stroke units were established independently with local support and passion, all running on the smell of an oily rag. Despite those local efforts most stroke patients were unlikely to reach a specialized stroke bed with multidisciplinary care. By comparison our cardiology colleagues had been managing acute coronary syndromes in Coronary Care Units for decades and many heart attack patients were receiving intravenous clot-busting in rural as well as metropolitan settings.

The original network that became today's ACI Stroke Network was founded on evidence-based practice and clinician leadership, with the stated goal of providing NSW stroke patients with equitable access to quality care. Creation of the network has greatly extended access to multidisciplinary stroke care. New units have been shown to reduce mortality and improve patient discharge destination, in line with evidence. The original 22 stroke units has expanded to 37 stroke services, including the 12 making up the Rural Stroke Network. Through the Greater Metropolitan Transition Taskforce and now ACI, clinicians, policy makers and government have been bridging the evidence practice gap that existed in stroke care, improving outcomes.

Despite progress acute and post-acute stroke services still need to reach out to more communities in NSW. This is a major challenge for the network due to the relative remoteness of many parts of NSW and a recognized shortage of stroke clinicians of all disciplines. It is my view and the view of others in the stroke community that we need to explore telemedicine, or what we may call Telestroke, to make the best use of our existing clinicians and extend the reach of quality stroke services. To develop Telestroke stroke clinicians will need to engage the skills and commitment of the wider ACI organization, the Ministry, Health Services Support and the LHDs and stakeholders on the ground.

With the increase in network activity we need good quality data to assess our processes and the outcomes of our efforts and innovations. We must also identify any variations in stroke outcomes across our health service, so these may be addressed.

Simply assuming that our existing services or new innovations are delivering on their promise is bad medicine. The best way to gather and analyse outcome and process data is an issue for every network and

the solutions may require a combination of routinely collected administrative data, locally applied audit tools, independent academic research and participation in clinical registries. Once we have robust data I personally believe it should be open to scrutiny. Such scrutiny seems ethically appropriate and creates the tension needed to drive continual improvement and the maintenance of our services.

I end as I began, these are exciting times.

**John Worthington**

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The Agency for Clinical Innovation (ACI) was established by the NSW Government as a board-governed statutory health corporation in January 2010, in direct response to the Special Commission of Inquiry into Acute Care Services in NSW Public Hospitals.

The ACI drives innovation across the system by using the expertise of its Clinical Networks to develop and implement evidence-based standards for the treatment and care of patients.

## COMMENT DR NIGEL LYONS



Pictured: Dr Nigel Lyons

**We have started the year at ACI with renewed energy and purpose. Now that our structure is bedded down, our focus is clear.**

Our three year Strategic Plan provides direction for our staff, clinical networks, consumers and key partners in health. We now need to deliver on our commitments

and excel in the support we provide.

We will know we have succeeded when our contribution to LHDs and other partners in health, is seen as critical in helping to meet the challenges faced; and when our leadership in identifying and delivering improved outcomes for patients, is recognised locally and nationally by clinicians, consumers and managers.

One of our immediate priorities is to strengthen involvement and communication and understand in partnership with LHDs, how best to work with them. In order to support improvements in health care, we need to engage the Executive team, managers and planners who can help make change happen on the ground. This engagement has to happen in a way that works for LHDs who are essential to the delivery of efficient and effective care.

As our public interface, the ACI website plays a critical role in supporting our clinical networks and is an immediate priority for review and enhancement. Understanding our audience is an important first step in this review process. We will be inviting user feedback and identifying high priority requirements for implementation. We'd value your input to this process.

Our website review will include integration of the Australian Resource Centre for Healthcare Innovation (ARCHI) website, which transitions to ACI this month. As many of you will know, ARCHI is a unique national information and networking service for health professionals. ARCHI finds a natural home at ACI, and provides an excellent opportunity for us to consolidate and share clinical innovation knowledge across the system.

Our value to the system was celebrated in January with the formal launch of stroke reperfusion services across NSW. With the welcome support of the Minister for Health, key contributors who helped make this remarkable program possible, gathered to celebrate the go-live.

Morgan Noon, a patient who had a stroke and was treated at St Vincent's Hospital reflected on his patient journey that had included early

## BOARD

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Brian McCaughan

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To find out more about the NSW Agency of Clinical Innovation and its Clinical Networks visit our website online at: [www.aci.health.nsw.gov.au](http://www.aci.health.nsw.gov.au)

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## COMMENT CONT'D

### DR NIGEL LYONS

assessment and thrombolysis to dissolve a clot that had been blocking blood flow to his brain. This simple early intervention helped save Morgan from lifelong disability. He left hospital in a matter of days, and returned to work and normal life. As Morgan explained, he was lucky. In 2007, stroke reperfusion services were only available at a couple of hospitals. Now thanks to ACI's support in implementation and close collaboration between the Ambulance Service of

NSW, Ministry of Health and LHDs, a state wide service has been identified offering 20 Acute Stroke Thrombolysis Centres, including 4 in rural locations.

Our work is not done. The Stroke Network will continue to work with clinicians, managers and consumers, to foster collaboration and support LHDs in delivering best practice stroke care.

This brings me back to where I started. In order to be valued as the leader in the health system

for designing, evaluating and supporting the implementation of innovative models of patient care – we must continue to prove our worth.

That is our challenge – and we want you to be our biggest advocates.

**Dr Nigel Lyons**

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## WELCOME TO THE FIRST E-NEWSLETTER CLINICIAN CONNECT

This month ACI is releasing two versions of Clinician Connect, one as a traditional pdf and the other an e-newsletter. I'd encourage you to let us know the format you prefer. Visit our website to cast your vote: [www.aci.health.nsw.gov.au](http://www.aci.health.nsw.gov.au)

Clinical Network Report

## BLOOD AND MARROW TRANSPLANT

Co-Chairs: Chris Arthur and Louisa Brown

### QUALITY MANAGEMENT

Congratulations to the Prince of Wales Blood and Marrow Transplant (BMT) Laboratory, Prince of Wales Apheresis Unit and the Sydney Children's Hospital Apheresis Unit, who all passed their National Association of Testing Authorities (NATA) assessments in November 2012. The BMT Network Quality Management Team assisted the sites with their preparations to help ensure that standards were once again at the appropriate level. Thank you particularly to Annette Trickett, who provided high level quality management advice, support and mentoring to the candidates.

### BMT Network Quality Manager

Recruitment for a new BMT Network Quality Manager is underway and interviews will be held in late January 2013. For more information, please contact the Network Manager.

### Malignant Haematology

A Model of Care for malignant haematology with an initial focus on Acute Myeloid Leukaemia (AML) is now well underway.

Consultation with clinicians from metropolitan and rural centres that see patients with AML and interviews with patients having undergone treatment for AML has been valuable in informing the development of this model. The Malignant Haematology Working Group continues to meet regularly to progress development of the guidelines and address some of the challenges that were raised during the consultation process. The Working Group aims to have a report from the consultation process available by the end of February, with a draft Model of Care for AML available for consultation by April.

For more information, contact Tracy Clarke, Project Officer – Malignant Haematology on +61 2 9464 4612, M. 0409 204 346 or Email: [Tracy.Clarke@aci.health.nsw.gov.au](mailto:Tracy.Clarke@aci.health.nsw.gov.au).

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### BMT Chronic Care

The BMT Long Term Follow Up (LTFU) Working Group is progressing well with the development of a model of care for transplant survivors. A Psychology Review has now been added to the minimum standards for Allogeneic BMT patients, with adults to be assessed annually using Functional Assessment of Cancer Therapy and paediatric cases using PedsQL (up to age 18yo).

A draft document entitled *Progress towards BMT Chronic Care MoC* was circulated at the Working Group meeting on Monday, 17 December 2012. The purpose of this report is to demonstrate progress and achievements to date within the BMT LTFU Project, with members of the group working with the ACI to reinforce the business case for change.

Gemma Dyer, BMT Project Officer, is currently on her Churchill Fellowship in the United States. Visits have been completed in New York (Columbia Children's Hospital), Philadelphia (Children's Hospital of Philadelphia and the Living Well After Cancer Program, Abramson Cancer Centre) and she is currently at MD Anderson in Houston. Hosting centres have been very welcoming to Gemma and have been keen to share their information and resources, taking interest in what is happening in NSW.

Gemma has four weeks left in the United States and hopes the remaining visits are just as fruitful.

For more information, contact Gemma Dyer, ACI Project Officer (LTFU) on M. 0459 805 603 or Email: [gemma.dyer@stvincents.com.au](mailto:gemma.dyer@stvincents.com.au).

## NSW EDUCATION COLLABORATIVE FOR SPECIALTY SERVICES SEMINAR

A two day seminar on the *Care of the Critically Ill Patient* will be held jointly by several ACI Networks and the NSW Education Collaborative for Specialty Services (NECSS) at Coffs Harbour on Thursday 14 and Friday, 15 March 2013. The Seminar will focus on the acute assessment and management principles in the initial presentation of critically ill, deteriorating and/or trauma patients who present to rural hospitals, including preparation for retrieval and transfer.

The program incorporates information on trauma, paediatrics, spinal cord injury, burns and time-critical conditions such as cardiac,

stroke, respiratory failure and sepsis. The Seminar is aimed at a broad range of clinicians working in regional and rural areas with low to moderate experience in the care of the critically ill patient. The content has been developed for a multi-professional, multi-disciplinary audience including medical, nursing, allied health and paramedical staff.

Early-bird registration is \$310 and ends Friday, 15 February. The registration form can be downloaded at [www.necss.org.au](http://www.necss.org.au). For further information on this seminar, please contact East Coast Conferencing on +61 2 6650 9800 or [Jayne@eastcoastconferences.com.au](mailto:Jayne@eastcoastconferences.com.au).

## NURSES EDUCATION PROGRAM

The Cardiac Network is pleased to confirm that the Nurses Education Program will continue in 2013.

The Program is primarily aimed at post graduate nurses in rural and regional centres, however anyone is welcome to participate and there is no cost. The Program is delivered using a combination of webex for the slide presentation and teleconference for the audio component.

Julie Chalmers, Clinical Nurse Educator from Liverpool Hospital will provide the first presentation on Opportunities for Education and Development in Cardiac Nursing on 27 February 2013. Please contact the Network Manager if you would like details on how to link into the educational sessions or for a copy of the Program for 2013.

Network Manager

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SAVE THE DATE



NSW Education Collaborative for Specialty Services

## 7<sup>TH</sup> CARE OF THE Critically Ill Patient SEMINAR



14th & 15th March 2013  
Novotel Pacific Bay Resort, Coffs Harbour, NSW  
[www.necss.org.au](http://www.necss.org.au)

This two-day seminar focuses on acute assessment and principles of management in the initial presentation of the critically ill patient, the deteriorating patient and the trauma patient in the rural hospital setting, including preparation for retrieval and transfer. The content is suitable for clinicians from any discipline. Topics include trauma, the paediatric patient, spinal cord injury and burns, with an emphasis on time-critical conditions such as cardiac, stroke, respiratory failure and sepsis.

For further information, please contact the Seminar Organisers East Coast Conferences by phoning 02 6650 9800 or emailing [Jayne@eastcoastconferences.com.au](mailto:Jayne@eastcoastconferences.com.au).

## ENDOSCOPY INFORMATION SYSTEM

The Endoscopy Information System (EIS) continues to rollout successfully across NSW. The EIS has recently been implemented in the Northern NSW Local Health District (LHD), with both Lismore and Grafton successfully going live in December 2012.

Feedback from clinicians has been extremely positive with reports that the system is easy to use, has good design of the generated reports and the link back to the Electronic Medical Record is useful.

The EIS project team is now working with the Western Sydney, Nepean Blue Mountains, South Eastern Sydney, Illawarra Shoalhaven and Northern Sydney LHDs to achieve implementation in these areas in early 2013.

## SAVE THE DATE: Gastroenterology Network Forum

The Gastroenterology Network is holding a Gastroenterology Network Forum from 9.00am – 1.00pm on Saturday, 23 February 2013 at the Stamford Plaza Sydney Airport Hotel.

The aim of the Forum is to provide an overview of the achievements of the Network in recent years and to discuss new initiatives of the Network and changes in clinical practice.

The success of the Network to date has been strongly influenced by clinicians identifying issues and working collaboratively to develop solutions. As a result, there will be the opportunity during the forum for attendees to raise issues and discuss ways in which these could be addressed. These issues will then help form the basis of the development of a Gastroenterology Network Work Plan for the coming years.

The Network is keen to encourage attendance by both existing Network members and non-members who are involved in gastroenterology and hepatitis services. As the ACI highly values the input of our stakeholders in rural locations, assistance will be provided for those rurally based to attend. For more information contact the Network Manager.

To register for the Forum please access the following link:

[www.aci.health.nsw.gov.au/networks/gastroenterology/forum-registration](http://www.aci.health.nsw.gov.au/networks/gastroenterology/forum-registration).

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## SAVE THE DATE: Endocrine Network Planning Workshop

The ACI Endocrine Network will hold a one day workshop on Friday, 22 March 2013. The aim of the workshop is to identify and assess priorities for a Network Work Plan for the next two to three years.

The program for the workshop will be finalised at the Endocrine Executive meeting in February and will include presentations from several Network working groups.

Details of the venue, program and how to register will be distributed to all Network members closer to the date. For further information please contact the Network Manager.

A/Network Manager

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## Medical Imaging Redesign

The NSW Ministry of Health and the ACI have now agreed to continue the review of Medical Imaging practices through a series of existing working groups / projects covering:

- Business model
- Equipment procurement
- Workforce availability for workload demand in Radiology
- Radiology Indicators
- Standardised outsourcing contract.

For more information, please contact the Network Manager.

## Workforce and Workload Project

At the request of the Director-General, a Taskforce Chaired by Clifford Hughes, Chief Executive, Clinical Excellence Commission, was convened to address unreported images in some NSW hospitals. To assist with the goal of reducing times for diagnostic imaging reports, the Taskforce requested an analysis of the current radiology workforce to determine whether it is being best utilised, given the skills and training of team members.

The Workforce Planning & Development Branch (WPD) of the NSW Ministry of Health, in collaboration with the ACI Radiology Network is undertaking a series of site visits to provide a high level analysis of current drivers that impact radiology staffing levels and mix across a number of health facilities in the context of workload and workflow.

## SIGNIFICANT RESULT 'FLAGS'

The Clinical Excellence Commission (CEC) conducted a workshop in December 2012 with Gordy Schiff, international Visiting Professor, to discuss the effective management of diagnostic test results. The CEC considered this workshop of such value that it has decided to continue meeting as a Working Group to investigate options in this area of clinical importance. Steven Blome, Director of Radiology at Royal North Shore Hospital has agreed to represent the ACI Radiology Network on this Working Group.

Network Manager

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## DOMICILIARY NON-INVASIVE VENTILATION IN ADULTS PATIENTS - A CONSENSUS STATEMENT



The *Domiciliary Non-Invasive Ventilation (NIV) in Adults Patients - A Consensus Statement* is a comprehensive resource which offers clinicians current best practice information and consensus recommendations for the assessment, management and

ongoing care of adult patients requiring non-invasive ventilation in the home.

The recommendations are divided into three sections: general NIV commencement, monitoring and equipment requirements; disorder specific

including neuromuscular disorders, spinal cord injury, obesity hypoventilation syndrome, chronic obstructive pulmonary disease, cystic fibrosis and sleep apnoea; and overall management of patients on domiciliary ventilation including secretion management, anaesthesia and sedation, nocturnal to continuous NIV use, transition from paediatric to adult care and palliative care and end of life issues.

Printed copies will be distributed to each Local Health District via Respiratory Medicine Departments; however other services can request a printed copy by contacting the Network Manager. To access an online copy of the *Domiciliary Non-Invasive Ventilation (NIV) in Adults Patients - A Consensus Statement* guidelines, visit the ACI website at [www.aci.health.nsw.gov.au/resources/clinician-resources#respiratory](http://www.aci.health.nsw.gov.au/resources/clinician-resources#respiratory).

## Activity Based Funding for Non-Admitted Respiratory Services

The NSW Activity Based Funding (ABF) Taskforce has recently commenced mapping non-admitted patient services in NSW in preparation for establishing appropriate pricing. A meeting with the ABF team and ACI Respiratory Network Executive members has been scheduled in mid February 2013 to update clinicians regarding the planned ABF approach to these services and to enable clinicians to provide advice regarding respiratory services which may require specific consideration. Other Network Members and interested respiratory clinicians are also welcome to join this meeting via teleconference. For more information or teleconference dial in details, please contact the Network Manager.

## REGIONAL NSW RESPIRATORY VIDEOCONFERENCE EDUCATION DAY

The ACI Respiratory Network is hosting a free one day regional respiratory education event via videoconference on Friday, 22 February 2013.

There has been an excellent response to date from the seven non metropolitan Local Health Districts who were invited to establish one to two local hub sites to participate in this NSW regional event. The Network has secured clinical experts to present topics related to the management of community acquired pneumonia in the acute, sub acute and community setting, including:

- Community Acquired Pneumonia (CAP) – risk assessment and evidence based pathways
- Managing CAP in the community
- Essentials for managing hypoxia/hypocapnia in the acute setting

- Sputum clearance techniques
- Establishing and maintaining patients on home oxygen
- Managing end stage respiratory symptoms

The interdisciplinary program targets General Practitioner Visiting Medical Officers, junior and senior medical officers, Emergency Department staff, subacute, specialist respiratory and generalist ward staff, and community service providers.

The full program is available on the event page of the ACI website at [www.aci.health.nsw.gov.au](http://www.aci.health.nsw.gov.au). Local Health Districts are responsible for distributing the program and local registrations requirements. Any regional and rural clinicians interested in participating who experience difficulty accessing local information can contact the Network Manager for contact details of the local event coordinators.

## INFLUENZA IN 2013

Influenza monitoring from Northern America in the first few weeks of 2013 have shown significantly increased widespread geographic influenza activity across 47 states in comparison to nil during the same period in 2012.

The percentage of all deaths attributed to influenza and pneumonia has now crossed the 7.2% epidemic threshold.

Clinical teams are encouraged to review the vaccination status of both their patients and clinicians and to consider strategies to maximise influenza vaccination rates in preparation for the 2013 influenza season in Australia.

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## Renal Purchasing Strategy – Update

Over the last six years the NSW health system has moved to a coordinated strategy for purchasing haemodialysis consumables under price-per-treatment (PPT) contracts.

Nearly all dialysis units in NSW now purchase their haemodialysis consumables and equipment under PPT contracts. Clinicians and managers agree that the new PPT contracts are more efficient and provide better service with no loss of quality. Four separate contract tenders have been completed over a five-year cycle. Each has been lead by major groupings of dialysis units in metropolitan and some rural locations. Remaining rural units will arrange to join with PPT contracts of related metropolitan units.

The strategy development has been lead by the NSW Renal Purchasing Strategy Steering Committee, facilitated by the ACI. This committee has undergone some changes following the restructure of the NSW Ministry of Health and is now chaired by James Brown from HealthShare NSW. Membership of the committee is largely unchanged from previous years and has clinician representation from each Tender group.

The 921 Contract, for peritoneal dialysis consumables, is currently under review and all peritoneal dialysis units are represented on the working group that is guiding the development of the next contract. The current 921 Contract has been extended until October 2013.

The new State Government has made deliberate effort to promote improvement and reform of procurement across NSW Government agencies. Within Health, procurement reforms are being pursued to bring about a greater alignment with the needs of the health system, particularly in clinical areas. They are directed at realising greater value (not only cost savings) and are mindful of achieving other benefits such as time savings, quality improvement, safety enhancement and certainty of supply.

For more information, please contact the ACI Renal Network Manager.

## Renal Network Work Plan 2013-2015

The draft Work Plan 2013-2015 for the ACI Renal Network is currently undergoing review by members of the Network.

The list of issues is comprehensive and will require considerable prioritisation to develop an achievable schedule. Thank you to everyone who has provided comment so far. Responses are due by Monday, 11 February 2013. If you would like more information on the Renal Network's draft Work Plan 2013-2015, please contact the Network Manager.

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## NSW STROKE REPERFUSION SERVICES LAUNCH

The Hon. Jillian Skinner, NSW Minister for Health and Minister for Medical Research, launched the NSW Stroke Reperfusion Services at St Vincent's Hospital on Tuesday, 22 January 2013.

The launch culminated more than two years of collaboration by clinicians, the NSW Ministry of Health, Local Health Districts, Ambulance Service NSW (ASNSW), the ACI implementation team and the ACI Stroke Network.

Key speakers at the event included Romesh Markus, St Vincent's Hospital, who gave an overview of the NSW Stroke Reperfusion

Services, Morgan Noon, who relayed his experience of having a stroke and the positive impact of receiving thrombolysis as a definitive treatment, Dr Nigel Lyons, Chief Executive of the ACI, and Mike Willis, Acting Chief Executive and Commissioner of the ASNSW.

Following the formal proceedings of the launch, Romesh guided the Minister through the journey an acute stroke patient would follow at St Vincent's Hospital including visiting the Emergency and Imaging Departments and the Acute Stroke Unit. Reflecting on all parts of the journey, the Minister applauded the ASNSW to Emergency Department prehospital notification system and acknowledged the early intervention of rehabilitation services to support the acute

phase of care in reducing disability and the early return of stroke patients to their community.

Stroke is the greatest cause of adult disability in NSW. This program, which has been implemented in 20 Acute Stroke Thrombolysis Centre hospitals across NSW, will have a significant impact on reducing the rate of death and disability as a result of ischaemic stroke.

For a full list of the hospitals in NSW that now have Acute Thrombolytic Centres (ATC), or for more information on the NSW Stroke Reperfusion Program, visit the ACI website at [www.aci.health.nsw.gov.au/networks/stroke/priorities/stroke-reperfusion](http://www.aci.health.nsw.gov.au/networks/stroke/priorities/stroke-reperfusion).



Pictured: Romesh Markus, St Vincent's Hospital, provides an overview of Stroke Reperfusion Services. Photo: A Langton



Pictured: Morgan Noon shares his personal experiences of stroke and thrombolysis. Photo: A Langton



Pictured: The Hon. Jillian Skinner, NSW Minister for Health and Minister for Medical Research, formally launches the NSW Stroke Reperfusion Services. Photo: A Langton



Pictured: Melissa Tinsley, Implementation Project Officer, ACI, Mark Longworth, Network Manager, ACI Stroke Network and James Dunne, Program Manager, Clinical Redesign, ACI. Photo: A Langton

## NEW CO-CHAIR

Congratulations to John Worthington, who has accepted the position of medical Co-Chair of the ACI Stroke Network for the 2013-2014 year.

John is a Senior Staff Specialist in neurology at Liverpool Hospital and a Conjoint Associate Professor at the University of New South Wales. He is a chief investigator on National Health and Medical Research Council projects and four other stroke-related studies based at the new Ingham Institute. He has also been involved in the ACI Stroke Network since it was established, founding the Northern Beaches Stroke Service. Over the past decade John has been actively involved in the committees and working parties of the former Greater Metropolitan Taskforces, the ACI and the CEC post-graduate stroke



Pictured: John Worthington. Photo: M Longworth.



Pictured: Michael Pollack, J Worthington and members of the stroke network coordinating committee. Photo: C Ferry.

education and peak clinical bodies, providing advice, educational support and materials for stroke units, the National Stroke Foundation and the National Prescribing Service.

Through the Stroke Network's Strategic Working Party John is looking to further

develop and evaluate the *Early Access to Stroke Thrombolysis* programme, support development of robust local, statewide, and national stroke databases, and continue the process of improving our pathways to post-acute stroke care.

## CEREBRAL WARRIORS-SURVIVORS OF STROKE SHARE STORIES FROM THEIR LIVED EXPERIENCES

In 2012, the Hunter New England Local Health District Community Stroke Team conducted a new group program for stroke survivors living in the community.

Named *Bird in the Hand*, the 10 week program used storytelling and collective biography to allow participants to explore their journey of stroke and recovery.

The Program was facilitated by Phoenix de Carteret, an expert in the use of storytelling with community groups. Eleven participants attended the weekly group, with the time

since stroke varied from as little as a few months to over 10 years. Participants wrote individual pieces about their lives after stroke, followed by the creation of collective writings and poems through group discussion and brainstorming activities.

The Program was reported as a powerful experience for all participants, who reported that they were able to share common experiences, learn from each other and find their inner strength. One participant commented that "we discovered so much each day, no one wanted to miss any days. We ended as friends, all wanting more".

The culmination of the work of the group was the production of a book titled *Cerebral*

*Warriors, survivors of stroke share stories from their lived experiences.*

The book was launched in Newcastle during Stroke Week 2012. It is hoped that the book will be available on *Stroke Connect*, the National Stroke Foundation website and for a limited time on the Hunter New England Local Health District website shortly. Alternatively, electronic copies of the book are available from [anne.sweetapple@hnehealth.nsw.gov.au](mailto:anne.sweetapple@hnehealth.nsw.gov.au).

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Clinical Network Report

## SPINAL CORD INJURY

Director and Chair, SSCIS: A/Prof James Middleton  
 Deputy Chair SSCIS: Louise Kelly

## INVITATION TO COMMENT ON DRAFT MODEL OF CARE

The draft Model of Care for *Pressure Injury Prevention and Management in Children and Adults with Spinal Cord Injury and Spina Bifida* has now been completed.

The draft guidelines were widely distributed to all Local Health District Chief Executives and other stakeholders for comment and feedback regarding the recommendations and feasibility of their implementation, taking into account any resource and other implications. All comments are due by Friday, 15 February 2013. For further information about the Model of Care and the consultation process please contact Frances Monypenny, contact details on the right.

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## NETWORK PROJECTS

In 2013, the ACI Aged Health Network will undertake the following new and continuing projects.

### Integrated healthcare for the complex older person framework

Older people and health professionals often have difficulty identifying and accessing the appropriate services to suit their needs. The framework aims to integrate the healthcare of the complex older person and their carers to ensure older persons and their carers receive high quality healthcare, in the right setting and at the right time.

### Care of the confused hospitalised older person program

Hospitals will need to provide care for an increasing number of older people with confusion, given the aging population and the increasing incidence of dementia. The Care of the Confused Hospitalised Older Person Program aims to develop a systematic training, education and support program to enhance care and minimise harm to the confused hospitalised older person. Further implementation is planned in 2013.

### Patient Specials

Work has begun on developing guiding documents on the clinically appropriate use, education and training of patient specials to care for confused patients in NSW public healthcare facilities.

### Orthogeriatric Care

Every day, more than 40 Australians break their hip. The aim of the project is to improve the outcomes for older persons who suffer a hip fracture in NSW.

The care of these often frail older people is more complex and they are more likely to develop serious complications from their hip fracture which influences their recovery and survival, where and how they live afterwards

For further information on these projects, please contact the Network Manager.

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## GOAL TRAINING PROJECT

Client centred goal planning is an essential part of rehabilitation but is typically neglected in undergraduate training.

The purpose of this project is to improve clinician and funder understanding of a client-centred goal based approach to rehabilitation, to improve skills in goal writing and to reduce the current variability in the understanding and use of goal setting.

The Goal Training Project has been jointly funded by WorkCover NSW, the Motor Accidents Authority and the Lifetime Care and

Support Authority of the NSW Government's Safety, Return to Work and Support Division. The Project is being driven and implemented by the ACI Brain Injury Rehabilitation Directorate and will provide up to ten (10) six-hour workshops to teach practical strategies for how and why to write effective SMART rehabilitation goals to support client centred practice. The workshops will be held in metropolitan and regional locations. The workshops are provided free of charge but early registration is essential as each workshop is strictly limited to 25 participants.

The pilot training workshops are aimed at public and private clinicians working to

rehabilitate clients with traumatic injuries, including brain injuries, as well as individuals who work for the funding bodies and consider funding requests for rehabilitation services when these injuries are sustained on a NSW road or at work.

For further information and to complete the online registration form visit

[www.aci.health.nsw.gov.au/networks/brain-injury-rehabilitation/workshop-registration](http://www.aci.health.nsw.gov.au/networks/brain-injury-rehabilitation/workshop-registration).

## STAFF CHANGES

Welcome to Mi Weekes who will be co-presenting the training sessions and working to complete the objectives of the Brain Injury Rehabilitation Directorate Goal Training Project.

## Meetings for 2013

Meetings for the Network for the 2013 year can be found on the ACI events calendar on the ACI website at [www.aci.health.nsw.gov.au](http://www.aci.health.nsw.gov.au).

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#### Network Manager

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## Professional Association of Nurses in Developmental Disability Australia

The 23rd Professional Association of Nurses in Developmental Disability Australia (PANDDA) Conference was held in Sydney in late November 2012. The ACI Intellectual Disability Network was a sponsor of the event, which was held over two days.

The Conference brought together Nurses and other professionals working in the field of Intellectual Disability (ID) under the theme of *Great Expectations*. ACI ID Network Co-Chair Les White gave a keynote address, on the *NSW Health Service Framework: to improve the health care of people with intellectual disability*, with other guest speakers including David Dossetor and Robert Leitner, Co-Chairs of the Network Models of Care Subcommittee and Julian Troller, Network Research and Development Subcommittee Co-Chair. Topics included the mental health of people with intellectual disability and a snapshot of the

Tier 4 Metro Regional Multidisciplinary Pilot Clinic (MRID.net) based at St George Hospital.

Jim Simpson, Senior Advocate, NSW Council for Intellectual Disability and member of the Network's Executive Group, also spoke about the important role of Medicare Locals and how clinicians, carers and people with ID can connect with them. Gail Tomsic, member of the Network's Models of Care Subcommittee, gave a firsthand account of her experiences as a Clinical Nurse Consultant with the Specialist Disability Health Team, run by the Children's Hospital at Westmead another one of the Tier 4 Multidisciplinary Pilot Clinics established under the Health Service Framework.

PANDDA draws its membership from across the state and is well represented within the Intellectual Disability Network to ensure the wealth of experience of nurses over several decades is heard.

## HOSPITAL DISCHARGE WORKING PARTY

A small working party from the Models of Care Subcommittee has recently formed to look at how we might improve the hospital discharge process for patients with an ID. For more information, contact the Network Manager.

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## THE NSW INTELLECTUAL DISABILITY NETWORK FORUM

The ID Network hosted a half day Forum at Macquarie Hospital in North Ryde on Thursday, 15 November 2012.

The Forum provided an opportunity to inform its members and other interested parties on the Network's progress; hear about the work of the Tier 4 Multidisciplinary Specialist Pilot Clinics, and to make important connections with others in the field.

The Forum was chaired by Les White, Co-Chair of the ACI ID Network. Joanna Holt, newly appointed Chief Executive of NSW Kids and Families Authority, gave the welcoming address and Eric Emerson from the University of Sydney gave a fascinating overview of the sociology behind predicting and managing best outcomes for people with an intellectual disability using comparisons between the UK and Australia.

Feedback from the Forum has been overwhelming positive, with special mention



Pictured: Participants at the ID Forum in Nov 2012 at Macquarie Hospital. Photo: Rob Wilkins

made of the speech given by Robert Strike from the NSW Council for Intellectual Disabilities, who spoke as someone with ID and his experience of the Health system. The presentation from the Maria Heaton, Co-Chair of the ID Network and NSW Carer of the Year,

spoke as a parent of a son with ID and shared her insight into the health system was also well received. Special mention was also made of the interactive session on the *Hypothetical Case* of a person with intellectual disability.

## SAFE PROCEDURAL SEDATION PROJECT

The Anaesthesia Perioperative Care Network is now planning for site visits at the Local Health Districts (LHDs) to look at the current status of non-anaesthetist sedation practice across NSW public hospitals. Surveys will be undertaken at a number of hospitals across the LHDs to include perspectives from metropolitan, rural and remote hospitals.

The diagnostic phase will also include accessing and examining data, reviewing national and international literature, and interviews with clinicians, managers and patients. The results of the diagnostic will be used to inform development of appropriate minimum standards and a toolkit of resources for implementation. For more information on the project, please contact the Network Manager.

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## MUSCULOSKELETAL NETWORK CO-CHAIR HANDOVER

Thank you to John Eisman, who stepped down as Co-Chair of the Musculoskeletal Network at the Network meeting in December 2012.

Members at the meeting celebrated his efforts over the past three and a half years as he led the Network to put 'Musculoskeletal' on the minds of managers and administrators. John has been an inaugural Co-Chair of the Network since its inception in May 2009. His passion for gaining appropriate treatment for people with or at risk of osteoporosis has helped the Network to change how the health system views this chronic disease. John remains a member of the Network and will continue to help us gain system wide implementation of the Model of Care for Osteoporotic Refracture Prevention. Congratulations to Matthew Jennings, who has taken on the role of Co-Chair of the Network. Matt is a physiotherapist working in senior roles at Liverpool Hospital and across the

South Western Sydney Local Health District. He has been a member of the Network since its inception in 2009 and has been integral to bodies of work including the development, implementation and evaluation of the Osteoarthritis Chronic Care Program. Matt was nominated by his peers across NSW for this role and his appointment was endorsed by the ACI Executive. Matt will work alongside Lyn March in leading the Musculoskeletal Network activities over the next couple of years.



Pictured: John Eisman



Pictured: Matt Jennings

## MUSCULOSKELETAL NURSING GRADUATE CERTIFICATE

The Musculoskeletal Network is working collaboratively with the Australian College of Nursing and the NSW Office of the Chief Nurse to develop and implement a graduate certificate in Musculoskeletal Nursing.

ACI Musculoskeletal Network members have been working tirelessly with the College to gain endorsement of the College Academic Committee for the four subjects. As this process is now complete, the work has been submitted to the Tertiary Education Quality and Standards Agency (TEQSA) for review to be accredited as a graduate certificate.

Registered nurses from NSW and Western Australia have commenced studying the first two subjects. Nurses who successfully complete these subjects will be automatically credited towards the graduate certificate once TEQSA has granted accreditation.

Musculoskeletal Network members have been involved in tutoring roles with this first group of students. It has been hard work for the writers and tutors as they embarked on this new and previously unavailable qualification. The effort everyone has put in is proving worthwhile as student feedback tells us that they found the going hard but so enlightening, that they have learnt more than they thought they would and have already started including their new knowledge in their nursing practice.

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### Save the date!

**3rd Annual Musculoskeletal Network Forum**

**Friday 3<sup>rd</sup> May 2013-01-17 9am – 4.30pm**

**Venue: Liverpool Hospital**

#### Launch of:

**Model of Care for the NSW Paediatric Rheumatology Network**

#### Topics of interest:

- Supporting sustained behaviour change
- Safe yet effective exercise prescription
- Musculoskeletal physical assessment

## Expressions of interest: HEN Forum

Linda Warriner, Enteral Nutrition Nurse Specialist from County Durham and Darlington NHS Foundation Trust in England, will be visiting Australia in April 2013 to investigate and compare enteral feeding service provision and guideline development in Australia and the United Kingdom.

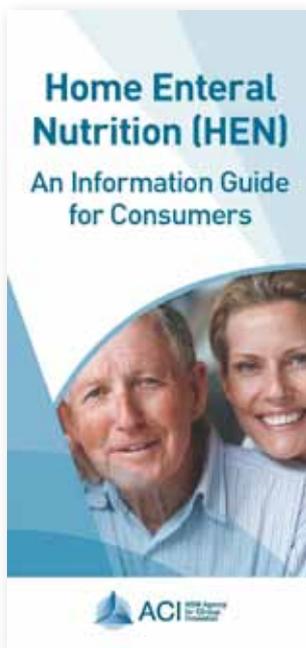
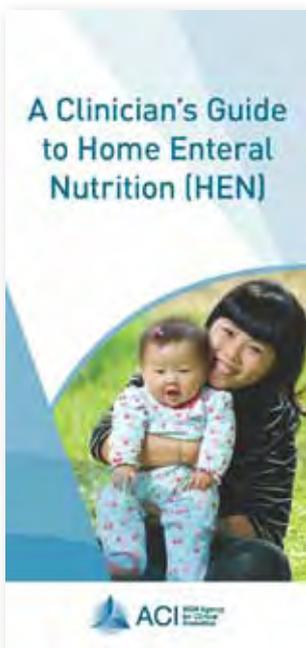
The ACI HEN Network plan to hold a HEN Forum that coincides with Linda's visit to allow her the opportunity to meet HEN clinicians from NSW and hear about their services. Linda will also share her experience of enteral nutrition in the UK.

If you are interested in presenting at this forum, please contact the Network Manager. More details will become available soon.

## Patient Menu Selection Process

At the request of the NSW Health Nutrition and Food Committee, members of the ACI Nutrition in Hospitals (NIH) group are currently working on a project to outline the key principles and tasks associated with the process of patient menu selection in hospitals. This work is underpinned by the NSW Health *Nutrition Care Policy* and follows on from the *Patient Nutrition Care Journey* resources developed by the NIH group in 2012. For more information, please contact the Network Manager.

## NEW AND IMPROVED HEN RESOURCES NOW AVAILABLE



Members of the Home Enteral Nutrition (HEN) Network have collaborated with EnableNSW and Ageing, Disability and Home Care (ADHC) to develop two new HEN factsheets – one for individuals and their carers, the other for health care workers, disability support staff and health professionals.

The factsheets outline what HEN is, why people may need HEN, who is involved in the care of people needing HEN, how to access HEN products and services and where to find more information on HEN.

The two existing HEN information guides, developed in 2007 by the GMCT, have also been revised by members of the HEN Network. The updated brochures include information about HEN, consumer and clinician rights and responsibilities, and guidelines on using the *My Health Record* resource.

The HEN factsheets and information guides are now available on the ACI website and will soon be translated into a number of different languages.

Thank you to Grace Lin, Karen Alexanderson, Karen Rankin, Kim Gibson, Shannon Meiklejohn and Shaun Deery for their work on these resources.

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## PAIN MANAGEMENT

Co-Chairs: Damien Finness and Chris Hayes

### NEW MEMBERS OF THE TEAM



Pictured: Fiona Hodson

In late December 2012 the ACI Pain Management Network welcomed Fiona Hodson to ACI. Fiona has taken on the role of Pain Management Project Officer and will be responsible for coordinating the development of the Chronic Pain Toolkit, a suite of on line tools which will be freely available for consumers and primary care clinicians. Fiona joins the ACI

on secondment from the Hunter Integrated Pain Service. She has extensive clinical experience in pain management, but also has worked with the primary care sector.

Through a process of prioritisation undertaken by the ACI Working Group in late 2012, three areas of focus have been identified- the need for material to be developed for children with chronic pain, the need for user friendly self management support material to be available for consumers, and the need for decision support tools to be readily available for general practitioners and other primary health care professionals. For more information, contact the Network Manager.

### SUPPORT FROM THE LIFETIME CARE AND SUPPORT AUTHORITY

The ACI Spinal Cord Injury and Pain Management Networks have recently received approval and funding from the Lifetime Care and Support Authority (LTCSA) to conduct a collaborative project which will develop service models and resources for people with chronic pain and spinal cord injury.

Chronic pain is a significant problem for the many people with permanent damage to the spinal cord and will often limit a person's participation in work and community life. Clinical services, resources and skills to provide appropriate care are scarce. This Project will assist in providing more accessible management options and aims to promote greater participation in community and work for individuals affected.

### CONSUMER RESOURCES

The Pain Management Network has formed partnerships with Chronic Pain Australia and The University of Queensland to undertake consumer focus groups as a first step in developing consumer resources. These groups were held in January 2013 in Lismore, Armidale, Sydney, Dubbo and Newcastle. The analysis and reporting will be completed by late February by the University of Queensland and will inform the development, content and format of the support material. Thank you to Chronic Pain Australia for its extensive in kind support and assistance during the development of these resources.

### Paediatric Resources

Clinicians from the Pain Service at the Sydney Children's Hospital are providing leadership in developing a series of online learning modules for children with chronic pain. The content, with a focus on self management, is currently being developed with oversight from Angela Smith, an educational consultant. The resources will include input from The Children's Hospital Westmead and The John Hunter Children's Hospital.

## General practitioner and primary care professional resources

It has been identified that General Practitioners and other health professionals require readily accessible, practical decision support tools for pain management within their practice. A series of focus groups will be conducted in the primary care sector to ascertain and endorse practical tools to assist this process. These focus groups will commence in March.

For more information regarding this project, or if you would like to have input into the ongoing activity of the working group and the project, please contact Fiona Hodson on email: [Fiona.hodson@aci.health.nsw.gov.au](mailto:Fiona.hodson@aci.health.nsw.gov.au).

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## PALLIATIVE CARE

Co-Chairs: Sue Hanson and Ghauri Aggarwal

### DEVELOPING A MODEL FOR PALLIATIVE CARE

Congratulations to the inaugural Palliative Care Network Executive members. A full list of the new Network Executive can be found on the Palliative Care page of the ACI website.

The appointments to the Executive are for a period of two years and we look forward to working with these members to achieve the goals of the Network.

The first meeting of the Palliative Care Network Executive took place on Tuesday, 22 January 2013. The Network Executive members bring to the table a broad range of experience and expertise around the care of people approaching the end of life and this meeting was a fantastic opportunity to meet as a group and share and

examine the unique and shared experience and knowledge of the group.

The development of a Model of Care for Palliative Care is now a priority for the Network, with the first task for the Executive to determine the scope of the proposed Model of Care and the process for its development. Establishing a Model of Care for Palliative Care will help us improve patient outcomes, delivery and improve collaboration across the health system.

Over the holiday period, the Palliative Care Network Executive reviewed a range of evidence, reflecting on their own professional experiences and responding to a series of questions that will help us to better understand the issues and challenges that currently confront clinicians and services when providing care to people approaching and reaching the end of life, their families and carers. Developing a comprehensive and coherent picture of

these current and future challenges will assist us to build a strong and clearly articulated case for action. Our case can describe gaps, short-comings, unwarranted clinical variation and unsustainable approaches to service delivery while building on the strengths of our current system. The ACI Health Economics and Evaluation Team as well as the ACI Implementation Team will guide and support our work in this area.

Network members will have the opportunity to provide input and to participate and contribute to the development of the model of care project over the coming months. For more information, contact the Network Manager.

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## REHABILITATION

Co-Chairs: Linda Glanfield and Jennifer Mann

### ACI Rehabilitation Network

The ACI Rehabilitation Network held its first Executive Committee meeting on Monday, 3 December 2012.

The meeting provided the first opportunity for the Executive members to come together to discuss the background and history of the Rehabilitation Model of Care and to explore future opportunities for the Network. The meeting saw members brainstorm ideas around priorities for the Network, with this discussion to continue at the next meeting in February 2013. Terms of reference for the Network and Executive were approved and will be posted on the website for Network members to view. For further information or feedback, contact the Network Manager.

### REHABILITATION MODEL OF CARE UPDATE

The Rehabilitation Model of Care is now in implementation phase. As a first step in this process, an external consultant will be engaged to undertake an evaluation of the recent care setting innovations to demonstrate the benefits of implementing the different elements of the model of care to the patient and the hospital system.

An implementation toolkit will also be developed consisting of the resources and information needed to both inform service planning and assist services to meet the Model of Care. A Rehabilitation Implementation and Evaluation Committee will be established with representatives from each Local Health District to ensure that rehabilitation services are informed, aware, and involved in the implementation process.

## NORTHERN NEW SOUTH WALES LOCAL HEALTH DISTRICT REHABILITATION WORKSHOP

In late November 2012, a group of interested and dedicated rehabilitation providers from acute, subacute and community settings met in Ballina to discuss the future of rehabilitation services for the Northern NSW Local Health District (NNSWLHD).

Rehabilitation services have grown significantly in northern NSW with the expansion of sub-acute beds at Ballina, the opening of ten rehabilitation beds at Maclean, the appointment of two rehabilitation specialists for Ballina and Murwillumbah Rehabilitation Units, and the establishment of a community based

rehabilitation service for the Richmond Network. Presentations at the workshop included an overview of existing services, an update on the NSW Redesign Project, the role of the ACI and an update on the Model of Care. A range of issues and strategies were developed on the day that will help shape the way forward for

Rehabilitation services in NNSWLHD. For more information please contact the Network Manager.

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Pictured: NNSWLHD Rehabilitation Forum participants. Photo: C O'Connor



Pictured: Ulla Gerich-McGregor, Lisa Diett, Lisa Beasley, Vicki Rose and Athol Webb. Photo: C O'Connor

Clinical Network Report

## BURN INJURY SERVICE

Co-Chairs: Diane Elfleet and Peter Maitz

### DOMESTIC TREADMILL FRICTION BURN ALERT

The ACI Statewide Burn Injury Service (SBIS) is working closely with the NSW Office of Fair Trading (OFT) and the Australian Competition and Consumer Commission (ACCC) using the SBIS burn injury data to highlight and identify burn injury hazards.

Friction burns from domestic treadmills has been identified as a particular emerging trend, with injuries predominantly in toddlers. In 2009, state legislative changes mandating the display of warning labels on domestic treadmills and signage at point of sale were made to inform consumers of this risk. The ACCC also produced a pamphlet covering the dangers and safety tips for the use of these treadmills. A number of journal articles and letters have also been published in the Medical Journal of Australia and the Journal of Paediatric Surgery using the ACI SBIS data.

Friction burn as a result of treadmill use continues to occur, with more than 34 friction burns from

domestic treadmills being treated at the SBIS Burn Units during 2012. Public awareness of this potential hazard needs continuing promotion, with a spike of injuries occurring late in 2012. A media release was issued by the NSW Office of Fair Trading on Wednesday, 9 January 2013 which has created a great response and pick up by the media including coverage in print media, online and radio.

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### Treadmills and kids don't mix!



More than 100 Australian children have been injured by treadmills at home.  
**Severe injuries** occur when hands and feet touch the rotating belt or get caught in it.  
**Friction burns** that result can be so bad that skin grafts are required leaving scars for life.  
 Treadmills are great for fitness but can be dangerous to young children.

#### Child safety tips:

1. If you can, use your treadmill in a room away from young children.
2. If this is not possible:
  - use safety barriers to protect children from getting hurt
  - do not use your treadmill when young children are around.
3. When not in use always keep your treadmill unplugged.



## Residential retreat for women with Gynaecological Cancers

More than 200 women diagnosed with a gynaecological cancer have attended a residential retreat organised and conducted by the NSW Psychosocial Support Project. Participation from both rural and metropolitan areas was excellent, with more than 40% of participants have lived outside Sydney, with some women travelling huge distances from across the State to attend.

Based on the results from a survey of women who have attended a retreat, approximately 80%

stayed in touch with other retreat participants and reported that the opportunity to share experiences with other women who had been diagnosed with a gynaecological cancer was the thing they valued most. The women's common cancer experience appears to bridge any demographic difference in the women, who come from every socio-economic, age and geographic groups.

Residential retreats are a unique way of providing supportive care that enhances a variety of health

services and reassures women that they do not need to manage alone. The retreats provide a safe, caring and nurturing environment in which women can express and explore the emotional impact that cancer has had on their lives, as well as introducing new strategies that often result in an increase in quality of life.

Retreats are free for participants. For more information, contact Jane Mills on 0413 984 082 or [jane\\_mills@wsahs.nsw.gov.au](mailto:jane_mills@wsahs.nsw.gov.au).

## Variations in Cancer Outcomes Working Group

The ACI Gynaecological Oncology Network is working with the Cancer Institute NSW (CINSW) on reducing clinical variation in cancer outcomes in NSW. A Working Group is currently being established for this project. If you are interested in contributing to this group, please contact the Network Manager. Expressions of interest close in mid February 2013.

## SAVE THE DATE: 17 MAY 2013 GYNAECOLOGICAL ONCOLOGY NURSING GROUP SEMINAR DAY

*Current issues in Gynaecological Cancer,*  
Venue: Kerry Packer Education Centre,  
(KPEC) Royal Prince Alfred Hospital,  
Camperdown. Registration will be available  
in the coming weeks. For more information,  
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## NETWORK SITE VISITS

To enhance the Network's future work success, site visits to each of the 13 neurosurgery units have been proposed for the first quarter of 2013. The ACI Neurosurgery Network Manager and the Program Manager, Surgery, Anaesthetics and Critical Care (SACC) plan to meet with unit medical and nursing directors and managers in the coming months to discuss different projects. For more information, contact the Network Manager.

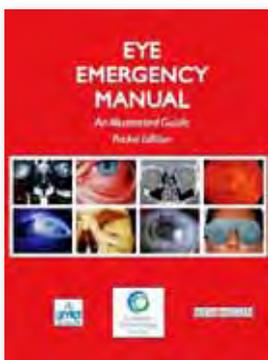
2013 marks 10 years since the establishment of the annual Neurosurgery Nurse's

Professional Development Scholarship (NNPDS) Conference. This is a significant milestone and the Nursing Committee must be congratulated for their continued enthusiasm and leadership in establishing and maintaining the integrity of this event.

The organising committee is celebrating this success by convening the conference in conjunction with the Australasian Neuroscience Nurse's Association (ANNA) conference. The ANNA conference will be held on Thursday, 20 June 2013, and the NNPDS conference will be

held on the following day, Friday, 21 June 2013. Details will be available on the event page of the ACI website in the near future.

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## EYE EMERGENCY CLINICIAN EDUCATION WORKSHOPS – JANUARY TO JUNE 2013

The schedule for the Eye Emergency Clinician Education Workshops for both metropolitan and rural areas in 2013 can now be found on the ACI website at [www.aci.health.nsw.gov.au/events/eye-emergency-education-workshops--2013](http://www.aci.health.nsw.gov.au/events/eye-emergency-education-workshops--2013), where it is now possible to register online.

The first workshop in 2013 is scheduled for Friday, 22 February 2013 in the training rooms of the Learning and Development Centre at the Long Bay Correctional Centre in Sydney. For more information, contact the Network Manager.

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## Farewell Janette

The ACI Urology Network would like to farewell and thank Janette Williams, who has stepped down from her role as nurse Co-Chair. Janette has a long and distinguished career in urology, undertaking a variety of specialised roles including the Educator with the Sydney Home Nursing Service, with a special interest in continence management. She is the founder of the Association of Nurses Continence Advisor of NSW, and has devoted her time to leading the development of the Network since its inception in 2006. The Network would like to thank Janette for her significant contribution to the Network and wish her well with her future endeavours.

## NEW CO-CHAIR

Congratulations to Virginia Ip, the incoming nurse Co-Chair for the Urology Network. Virginia is currently the Clinical Nurse Consultant - Urology at Royal Prince Alfred Hospital and is an Endorsed Nurse Practitioner in Urology. Virginia has been working in Urology and continence management for 13 years and has a special interest in health promotion, male incontinence, erectile dysfunction and prostate cancer support.

Virginia is also the previous President of NSW Urological Nurses Society and has received multiple awards (travel fellowship, continence nurse champion, innovative awards) and project

grants (Commonwealth Dept of Health and Ageing) to produce continence Audio Cassette tapes in Cantonese and Mandarin. She is also the resource person for the NSW Cancer Council Helpline, Prostate Cancer Foundation of Australia. The Network looks forward to working with Virginia.

### Network Manager

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## EMERGENCY CARE INSTITUTE

### RESEARCH AND PROJECT PROPOSALS DUE

The ACI Emergency Care Institute (ECI) is still considering research and project proposals for the 2013 year. If you wish to make an application for funding, please complete all required documentation available on the ECI website.

All applications to be considered at the Research Advisory Committee on Tuesday, 5 March 2013 must be submitted by no later than Friday, 15 February 2013. For more information click here, or contact the Network Manager.

### ED LEADERSHIP FORUMS

ED Leadership Forums for ED Leadership Teams continue to be popular networking events providing an opportunity to discuss important emergency care issues.

In December 2012, the group discussed the Psychiatric Emergency Care Centre (PECC) review and workforce issues. Future 2013 forums are scheduled for:

- Friday, 22 February 2013
- Friday, 31 May 2013

For more information on these events and to register click here, or visit the ECI website at [www.ecinsw.com.au](http://www.ecinsw.com.au).

### IN THE SPOTLIGHT – STAKEHOLDER SURVEY RESULTS 2012

Thank you to everyone who completed the ECI *Stakeholder Survey 2012*. The survey results have been collated and are now available on the ECI website.

Feedback provided through the survey gave a key insight to challenges, priorities and experiences working in EDs across the state. The top three challenges identified in the survey were:

- Access Block
- Lack of staff
- Increased demand for services

Click here for the full 2012 stakeholder report, or visit the EDCI website.

### ECI NEWSLETTER

The first edition of the ECI Newsletter is now live! We hope this bumper Christmas edition will bring you up to date with the latest in emergency care and inform you of what the ECI and NSW Emergency Departments (EDs) are currently doing.

The ECI welcomes information and initiatives from all EDs, in particular resources, guidelines and toolkits that you feel could be useful to others. If you have a resource you would like listed on the ECI website or highlighted in the ECI newsletter, please send them to the Network Manager. All resources will be credited to the original author.

To view the first edition of the ECI e-newsletter click here or visit the ECI website.

### COMMITTEE UPDATES

To view the latest ECI Committee one page meeting summary click on the links below, or visit the ECI website at [www.ecinsw.com.au](http://www.ecinsw.com.au).

- Clinical Advisory Committee
- Incident Advisory Committee
- Research Advisory Committee
- Executive Committee



**Emergency  
Care Institute**  
NEW SOUTH WALES

### Network Manager

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## CRITICAL CARE TASKFORCE

Co-Chairs: Rob Herkes and Kelly Cridland

### SAVE THE DATE: ACI Critical Care Forum - Friday, 8 March 2013

Rob Herkes and Kelly Cridland, Co-Chairs of the ACI Critical Care Taskforce (CCT), are delighted to extend an invitation to the ACI Critical Care Forum.

This Forum is an opportunity for metropolitan and rural critical care clinicians to come together and help shape the work of the ACI CCT for 2013-14.

Attendees will have the opportunity to participate in facilitated workshops, with topics including:

- Structure and Governance
- Quality Indicators
- Workforce and Models of Care

Keynote speakers include Nigel Lyons, Chief Executive ACI, Heather Gray, Chief Executive Health Education and Training Institute, Clifford Hughes, Chief Executive Clinical Excellence Commission, Susan Pearce, Chief Nurse NSW Ministry of Health, and Sean Kelly, Clinical Director ACI Intensive Care Coordination and Monitoring Unit.

The ACI Critical Care Forum is recommended for Medical and Clinical Directors, Nurse

Managers, Clinical Nurse Consultant's and Clinical Nurse Educator's with experience or interest in critical care. For more information or to register for this event, please contact the Network Manager.

An event flyer with more information can be found on the ACI website at [www.aci.health.nsw.gov.au/events/critical-care-forum](http://www.aci.health.nsw.gov.au/events/critical-care-forum).

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## SURGICAL SERVICES TASKFORCE

Chair: Michael McGlynn

### First Case on Time Starts

A priority project for the Surgical Services Taskforce (SST) in 2013 is *First Case on Time Starts*.

It is well recognised that the on-time start rate for the first elective surgical case of the day is an important measure of peri-operative efficiency. The goal of the First Case on Time

Starts project is to improve operating theatre efficiency and ensure that patients receive timely peri-operative care as a result.

To assist in achieving first case on time starts, a checklist has been developed by the NSW Ministry of Health, which can be accessed on the ARCHI website at [www.archi.net.au/documents/resources/hsd/surgery/first-](http://www.archi.net.au/documents/resources/hsd/surgery/first-case/FCOT-Checklist.pdf)

[case/FCOT-Checklist.pdf](http://www.archi.net.au/documents/resources/hsd/surgery/first-case/FCOT-Checklist.pdf). This checklist aims to assist Local Health Districts to achieve the surgical dashboard KPI.

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## INTENSIVE CARE COORDINATION AND MONITORING UNIT

### BEST PRACTICE PROJECT

In 2011, the Intensive Care Coordination and Monitoring Unit (ICCMU), in partnership with the NSW Nursing and Midwifery Office, commenced the Best Practice Project with the aim of developing a comprehensive suite of online guidelines which could be used by all intensive care units across the state. This ambitious project involves more than 130 senior nursing and allied health clinicians working together to update six guidelines and develop an additional five guidelines. The *Eye Care Guideline* was completed in May 2012 in collaboration with the ACI Ophthalmology Network. In November and December 2012 four guideline groups formulated practice recommendations at their Consensus Development Conferences (CDC), which was a significant achievement.

These groups were:

1. *Central Venous Access Device – Post Insertion Care* led by Marghie Murgo (CNC ICU RPA)

2. *Temperature measurement in the Critically Ill* led by Kaye Rolls (ICCMU)

3. *Care of the Patient with Non-invasive Positive Pressure Ventilation* led by David Sanchez (CNC ICU Campbelltown) in collaboration with the ACI Respiratory Network

4. *Suction of a tracheal tube* led by Wendy Chaseling (Senior Physiotherapist St George)

The Pressure Injury (led by Leila Kuzmiuk NE JHH) and Mobility (led by Dr Angela Berry, CNC ICU Westmead) groups will be holding their CDCs in February/March 2013. Once the draft guidelines are completed, the validation stage, consisting of two rounds of consensus development will be undertaken before each guideline is sent for hospital wide consultation. Consumers will also be consulted for feedback and input on the guidelines in January and February 2013. For further information contact the Janet Masters, Project Officer, on [janet.masters@aci.health.nsw.gov.au](mailto:janet.masters@aci.health.nsw.gov.au)

### Education – Beyond the books

On Friday 23 and Saturday 24 November 2012 ICCMU and the Australian College of Critical Care Nurses (ACCCN) NSW held the second *Beyond the Books Seminar* at the Rydges Parramatta. Themes of the seminar included:

- Sepsis, renal failure and haemodynamic monitoring
- Ethical decision making in Paediatric ICU
- Changing the culture
- Optimising recovery from Critical illness, patient comfort, mobilisation and nutrition
- Using quality improvement

Once again the innovative format, which included a lively panel discussion and small group work, was evaluated highly by all participants. Planning is underway for the 2013 Seminar to be held in mid November at the same location. For updates please visit the ACCCN website.

## SAVE THE DATE: Care of the Critically Ill Seminar

After a two year hiatus, the Care of the Critically Ill Seminar will be held in Coffs Harbour on Thursday, 14 and Friday, 15 March 2013. This seminar is a collaborative project by NSW Education Collaborative for Specialty Services (NECSS), which includes several ACI Clinical Networks, including Burn Injury, ITIM, ECI, Cardiology, Spinal Cord Injury and ICCMU. Registrations are now open at the NECSS website at [www.necss.org.au](http://www.necss.org.au).

## ICUCONNECT

ICUConnect is a virtual community established in 2003 by ICCMU to facilitate networking for ICU clinicians across NSW.

In November 2012 membership topped 1700, with members from across Australasia and a variety of healthcare groups who contribute to the care of critically ill patients. This virtual community provides clinicians with the opportunity to have a diverse range of questions answered by an equally diverse range

of healthcare professionals. To join ICUConnect contact Kaye Rolls, Knowledge Management, on [kaye.rolls@aci.health.nsw.gov.au](mailto:kaye.rolls@aci.health.nsw.gov.au).



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## INSTITUTE OF TRAUMA AND INJURY MANAGEMENT

### ITIM REVIEWS FOR 2013

Feedback from a workshop held by the Institute of Trauma and Injury Management (ITIM) in September 2012 determined that an ITIM Education Review was required to allow ITIM to further develop its strategic plans.

The ITIM Education Review is now ready to commence and will be completed by late April 2013.

The NSW *Trauma Plan* was released in 2009 and ITIM is preparing plans to undertake a statewide trauma system review in conjunction with the NSW Ministry of Health. It is expected that the review will commence mid 2013.

### Positions Vacant

ITIM currently has a number of staff vacancies that will be advertised in the near future.

Included in this recruitment will be a Data Officer to replace the position vacated by David Martens. David has been with ITIM for more than five years and has been instrumental in developing trauma data analysis for the many reports ITIM produces, as well as looking after the IT aspects of the database. ACI and ITIM would like to thank David for his contribution to ITIM and wish David all the best in his future endeavours.

### ITIM Committees

The new ITIM Committees have or will shortly be holding the first meetings for 2013. These meetings will be conducted at the ACI offices in Chatswood and be face-to-face whenever possible. The ITIM Executive Committee has met twice since their inception and will continue to meet monthly in to the future.



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## CLINICAL PROGRAM DESIGN AND IMPLEMENTATION

### INTRODUCTION TO THE ACI RESEARCH MANAGER

Welcome to Sonia Wutzke, who recently joined the ACI as part of the Clinical Program Design and Implementation team as the Research Manager.

Relevant, high quality and evidence-based health and medical research creates new knowledge to help develop better models of care, improve health services delivery and improve clinical and population health outcomes.

The ACI is committed to supporting large scale, scientifically excellent, translational research,

where the research discoveries will be applied to support system-wide improvements in patient experiences and outcomes.

With advice from the ACI Research Committee, the initial focus for Sonia is to establish a Research Framework for the ACI. This framework will identify consistent and transparent approaches for the governance, management and conduct of research at the ACI to ensure it meets the highest ethical, scientific, regulatory and professional standards.

Through more than 30 projects, the research currently being undertaken by, on behalf of or in partnership with ACI, our staff and Clinical Network members is addressing a variety of areas of significance to the NSW Health system. A list of current research projects can be found on the ACI website at [www.aci.health.nsw.gov.au](http://www.aci.health.nsw.gov.au).

For further information on the research activity of ACI, please contact Sonia at [sonia.wutzke@aci.health.nsw.gov.au](mailto:sonia.wutzke@aci.health.nsw.gov.au).

# ARCHI TRANSITIONS TO THE ACI

The Australian Resource Centre for Healthcare Innovations (ARCHI) website transitioned to the ACI from HealthShare NSW on Friday, 1 February 2013.

ARCHI is a unique information and networking service for health professionals and has been instrumental in supporting and sharing quality innovations in clinical care in Australian healthcare settings at the interface of hospitals and other healthcare providers since 1998.

The transition of the ARCHI website provides the opportunity to consolidate clinical

information and innovative knowledge resources for sharing across the NSW health system and beyond - aligning with the ACI's strategic goal as the 'go to' place for clinician and consumer led reform.

The ACI is currently reviewing the content and structure of ARCHI and examining ways to enhance and improve the way knowledge and information is shared across the health system.

We are keen to work with key stakeholders across NSW health services and the community to facilitate a smooth transition and provide an innovative resource that meets the needs of users and promotes knowledge sharing and networking across the healthcare sector.

If you have any comments or feedback on the way ARCHI currently exists, how we can improve the way we share knowledge and information across the health system or if you simply want to let us know what your information and knowledge needs are, please contact Anna Nicholes, A/Knowledge Manager at email: [anna.nicholes@aci.health.nsw.gov.au](mailto:anna.nicholes@aci.health.nsw.gov.au).



Clinical Network Report

## 'GRASS ROOTS' RURAL HEALTH

# RURAL HEALTH NETWORK GATHERS PACE



In October 2012, the establishment of a new statewide Rural Health Network within the ACI was announced.

The new Rural Health Network is a collaborative body, working with Local Health Districts (LHDs), rural health service providers and consumers and carers to support the implementation of models of care across rural and remote health care settings in NSW, including access through technology, in alignment with organisational priorities as determined by LHDs and their Boards, the NSW Ministry of Health and the ACI.

Membership of the ACI Rural Health Network will comprise broad representation from rural clinical and non-clinical consumer members with strategic guidance from an Executive Committee, who will provide diverse expertise from rural LHDs, their clinical councils and executives, Non-Government Organisations (NGOs), consumers and carers to co-ordinate the activities of the Network. In addition, the Executive Committee will work collaboratively with LHDs in supporting the new Rural Health Unit being established within the NSW Ministry of Health.

Expressions of Interest for membership on the ACI Rural Health Network Executive Committee closed in January 2013, with more than 260

nominations received. It is anticipated that the Executive Committee will be finalised shortly.

Two Co-Chairs who will work with the Executive Committee to ratify the draft terms of reference for the functions of the Network and establish an initial two year Work Plan will also be appointed. Expressions of Interest are now being sought for the clinical and consumer Co-Chair positions, and for consumer representation on the Executive Committee. If you would like to consider nominating for one of the Co-Chair positions or for Executive Committee membership as a consumer member, please contact the Rural Health Network Manager directly.

Preliminary consultation will begin soon for Rural Health Network members, as a virtual network, to also be involved in convening three rural forums per year. These forums will be conducted by the Clinical Networks and hosted by rural LHDs to raise the profile of clinical redesign, to promote the work around models of care and innovation collectively being undertaken by LHDs, the NSW Ministry of Health and the ACI, and to maximise rural clinician and consumer engagement.

Interested parties can apply for membership to the ACI Rural Health Network at [www.aci.health.nsw.gov.au/networks/rural-health](http://www.aci.health.nsw.gov.au/networks/rural-health).

For further information please contact the Network Manager.

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## COMMUNITY ENGAGEMENT

The ACI's Consumer Council will meet quarterly in 2013, with a first meeting on 14 February 2013.

Key priorities in 2013 include:

- Strengthening communication with consumers participating in ACI networks, taskforces and committees.
- Carrying out an audit that will help to identify gaps and areas where staff need support in the design, delivery and evaluation

of consumer and community engagement activities

- Inviting direct feedback from consumers contributing to ACI networks, taskforces and committee to assess current levels of involvement, critical gaps in participation and areas where additional support for consumers is needed.
- Reviewing and revising the CERP literature review to identify any practical application or lessons learned within the context of the NSW Health system.

- Contributing to the ACI Consumer Forum which is open to consumers contributing to ACI networks, taskforces and committees.

For further details contact Maeve Eikli, Director Engagement, Executive Support and Communications on (02) 9464 4607.

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## ACUTE CARE TASKFORCE

Co-Chairs: Vicki Manning and Jeremy Wilson

### CONSUMERS NEEDED

The ACI Acute Care Taskforce (ACT) is currently seeking consumer members to provide a patient centred perspective, with a focus on improving the patient journey for people requiring hospital care.

Potential members would be required to attend at least four half day meetings in person per year. The quarterly face to face meetings will take place at various locations across Sydney, North Sydney and Chatswood. Travel and parking expenses will be covered for all meetings attended.

More about the ACT:

The ACT was established in June 2005 with a key focus on improving the acute medical patient journey. The ACT transferred to the ACI in late 2012 as a result of the Governance Review of NSW Health.

The ACT is led by Co-Chairs Vicki Manning and Jeremy Wilson and is comprised of representatives from a range of Local Health Districts and Specialty Networks, the NSW Ministry of Health, Primary Care, the Clinical Excellence Commission and the Health Education and Training Institute.

In recent years the ACT has led the establishment of 29 Medical Assessment Units (MAUs) and delivered several Safe Clinical Handover projects. Most recently, the ACT has developed a resource for *Safe Clinical Handover: Transferring Care Between Primary and Acute Care Settings*. In 2013 the Taskforce

will be undertaking a broad piece of work bringing together clinicians and consumers to improve the journey for medical inpatients.

If you would like more information about the ACT, please contact the ACT Manager. For a consumer application pack, please contact the ACI Engagement, Executive Support and Communications Team on [info@aci.health.nsw.gov.au](mailto:info@aci.health.nsw.gov.au).

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## CONTACT US/ FEEDBACK



**ACI** NSW Agency  
for Clinical  
Innovation

We appreciate hearing from you - please contact:

### Newsletter

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The ACI Newsletter *Clinician Connect* is available at:  
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## LETTERS TO THE EDITOR

Readers of *Clinician Connect* are invited to submit letters for publication. These can relate to topics of current clinical interest or items published in the ACI newsletter. All Letters to the Editor must have a name, address and telephone number to be used for verification purposes only. The submitter's name, title and organisation will be used in print. No anonymous letters will be printed. The ACI reserves the right to edit all letters and to reject any and all letters.

Letters should be addressed to:

**Dr Nigel Lyons, Chief Executive, ACI**

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