



Tim Haas seen it all

45 years nursing
at LGH

Stav's simply the best

Professional is one word consistently used to describe Stav McDevitt; we can now add best graduate! **Page 4**



Taste of things to come

The UTAS School of Nursing and Midwifery and School of Human Life Sciences recently gave high school and college students a taste of potential study and career options. **Page 6**



No fluke Tassie flu so mild

It started with a flurry, quickly became scarily fluid and all the while fluctuated wildly ... welcome to Tasmania's flu season ride. **Page 15**



Tim Haas seen it all!

By Frank Noakes

Tim Haas admits that back in the 1960s he made a somewhat courageous career choice for a bloke ... he entered an arcane world of gowns, gloves and masks.

Blue gowns, that is, and non-accessorised surgical masks and gloves to boot.

But while clinical nursing may be short on glamour, Tim says he's had a ball at Launceston General Hospital for the past 45 years.

Reflecting on his long career, Tim says it was his love of biology that initially attracted him to nursing but it's his love of people – patients and staff – that has sustained him.

Tim has seen many radical changes in our hospitals since the 1960s; not the least a growth in the number of male nurses. In more recent times the introduction of university degrees has led to the recognition of nursing as a highly-skilled profession.

University training is a far cry from yesteryear, though.

"When I started studying to become a nurse it was something of a cross between entering a monastery and the army," Tim says.

However, it's the use of technology in surgery that most amazes him.

"There have been some wonderful advances," Tim says.

"We had great surgeons in earlier times but today computerisation of equipment allows us to do much more radical and yet less invasive surgery.

"Today we operate on people that you wouldn't have in the 1960s; they can be older and much sicker than before.

"Back in the 1960s we didn't do too many broken hips because of the age of the population, but now we do whole joint replacements on people of all ages. This keeps people mobile longer and living good lives," Tim says with pride.

However, he says the sheer pressure of work today is more than in the past because of an ageing population presenting to hospitals with many more health problems and co-morbidities.

"We are doing more complex operations on older and sicker people, which leads to a huge pressure for ICU beds," he says.

"When I started studying to become a nurse it was something of a cross between entering a monastery and the army."



LGH performed over 6000 operations last year and will do more again this year.

Tim says media preoccupation with elective surgery waiting lists is unfair and fails to acknowledge that 40 per cent of operations are medical emergencies.

"It is impossible to do 100 per cent elective surgery; the beds are full of emergencies."

Tim says he's worked with some amazing people over the years, real colourful souls, but while there are still some characters around they're not of the older mould.

There is more of a team spirit in the modern era.

"It used to be very much top down from the surgeon to everyone else," he says.

"There's a stronger esprit de corps, more mutuality and acknowledgement than before. This team support leads to better patient care as freer communication means team members are more likely to speak up."

Tim says the expanding role of nurses often legitimises what has happened in practice over a long time.

"Because the role of the nurse is broader than 20 or 30 years ago, it actually takes a lot of pressure off medical officers.

"Qualified nurses today can do so much once done only by doctors.

"In the 1970s W D Jackson, the founder of the Royal Australian

College of GPs, advocated having nurses in rooms doing all manner of work while he went from room to room targeting his role, making better use of his time," Tim recalls.

He points to the collegiality that exists in LGH's Renal Services between nurses, medical officers and oncologists as an example of progress.

"If people are prepared to leave egos at the door, we can look at what needs to be done and do it better," he says.

According to Tim, the camaraderie between nurses has not changed much over the years although nurses don't tend to socialise together as much anymore.

He bucked that trend by marrying nurse Julie.

Tim definitely recommends nursing as a career for both women and men. He says the job has so many varied aspects,

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the skills are transferable and the demand for nurses will only grow.

“Nursing is more interesting than ever before; it’s never boring! It’s an exciting and worthwhile career – I don’t want to stop work. Age is not an issue; you just have to be prepared for hard work,” he says.

“However, attitude is everything: if you don’t like people, have empathy with humanity, then don’t even think about it.”

Tim says patients have also changed since the 1960s.

“Back then, the attitude was much more ‘I’m in your hands, doctor’. Today patients are more active.”

Still, he wonders why with all the medical shows on TV that people have so little understanding about why they’re entering hospital.

He’s also astounded that “in this day and age so many people still refuse to take responsibility their own bodies” by continuing to smoke and grossly over-indulge themselves.

Tim concedes this may be in part due to life being less straightforward and more stressful, which plays a very big role in disease.

“We’ve got smarter over the years,” Tim says, “but we still need to get a whole lot wiser.”



Tim Haas says nursing has followed many of the broader sociological changes in society.

Safe food’s on the drop–down menu

By Dale Anderson

Launceston General Hospital, PFD Foodservices and Eqals have cooked up an interactive CD-ROM entitled *A Guide to Safe Food Handling*.

The CD-ROM provides guidelines and principles on what to do from the time stock is received from PFD Foodservices until it is served to the patient.

Each process is comprehensively covered and supported with forms and guides easily downloaded for use in the workplace.

A flow chart describes all kitchen processes up to the time of serving, with drop down menus for each process step, work instructions and pictures showing the dos and the don’ts of safe food handling.

Designed by Eqals, a division of Learning Partners, *A Guide to Safe Food Handling* is easy to use and lets employees work at their own pace and in areas relevant to them.

A quiz lets users test their knowledge and review areas where they need more work.



Food Services Launceston General Hospital manager Dale Anderson (L) with PFD Foodservices’ Kerry Smith and Tom McGuinn.



Stav McDevitt (R) with Tasmanian HESTA Super Fund manager Alison Dixon.

Stav's simply the best

By Pene Snashall

Professional is one word consistently used to describe Stav McDevitt; we can now add best graduate!

Recently Stav, a Royal Hobart Hospital ICU registered nurse, was named Australia's best nursing graduate of the year in the HESTA Super Fund annual awards.

Stav, who spent her graduate year on the RHH General Surgical (GSU) and Day Surgery Units, is described by her colleagues as having an enquiring mind and being proactive in achieving her goals.

It is this enthusiasm that remains in the minds of all who have worked with her. Stav is a very humble person and will feel uncomfortable with more attention, but her outstanding achievement deserves recognition.

Stav was joined by two of her colleagues, GSU nurse manager Di Coombes and nurse educator Chris Andrews, at the award ceremony in Melbourne. Both colleagues endorse the aptness of Stav's award.

"Right through her graduate year Stav demonstrated a clear understanding of the roles and responsibilities required as a nurse and she was truly remarkable for her ability to accept constructive advice and be accountable for the care she provided," Di says.

Chris describes Stav as conscientious, someone who just loves to learn and to be there for her patients.

"To Stav, the ultimate goal is to give the best, effective and efficient patient care she can that encompasses the physical, psychological and emotional aspects of nursing care," Chris says.

"Anyone would want Stav to look after you. She always has a smiley face and is so happy to be at work, so keen to learn and care."

There are many positive patient stories involving Stav, including one where she was caring for a patient who deteriorated suddenly and unexpectedly.

Stav struck up a rapport with her patient and got to know the patient's favourite hobbies; she came to know that the patient's garden was most important. Stav then used this understanding to create a positive state of mind that ultimately led to this patient's recovery.

Although Stav was a learner herself, she always supported others and was happy to help out. An example was her willingness to work with and support the new enrolled nurses on the ward.

Di Coombes says Stav was always thoughtful of others, whether colleagues, patients or family members.

"At the end of her rotation she wrote a letter expressing her thanks for all the support she had received and highlighted the positive experiences she had gained while on the ward," Di says.

"This was so well received and appreciated by the team and is another great example of how Stav improved team relationships in the workplace."

Well done Stav, we have no doubt you will continue to make your professional mark.



One employer, many great opportunities

By Lynn Pitt

Today school students have more career choices than ever so it is important to engage them and highlight the great range of health and human services job options.

We also know that our careers need to meet the future needs of Generation Y and Z who will seek diversity, flexibility, development and environmental responsibility as well as careers that make a difference.

Earlier this year the Royal Hobart Hospital and the Tasmanian Ambulance Service sponsored DHHS to participate in the National Careers and Employment Expo at the Derwent Entertainment Centre near Hobart.

DHHS featured an ambulance in its display, which proved a fantastic drawcard for attendees who looked through the vehicle and asked ambulance officers lots of questions about career options.

The efforts of our DHHS volunteers were vital and we thank them for their help at this event.

To strengthen its participation in this event and with other career initiatives, DHHS developed new web pages to highlight its range of career choices (www.dhhs.tas.gov.au/careers/career_choices). This site will continue to grow and develop.

DHHS also worked alongside UTAS to support a new program that provides tasters of the work environment through simulation or activities that demand some critical thinking (see story opposite).

The program provides a good chance to promote the health environment and make it more exciting to students. It also encourages them to choose to study courses with a real job at the end.

visit :

www.dhhs.tas.gov.au/careers/career_choices

Taste of things to come

By Gaye Clark

The UTAS School of Nursing and Midwifery and School of Human Life Sciences recently gave high school and college students a taste of potential study and career options.

Grade 9 and 10 students from across Tasmania were invited to apply for a place in the Nursing Taster Days in July while grade 10, 11 and 12 students were asked to apply for a place in the Health Science Taster Day in August.

Taster days offer seven interactive workshops around the six undergraduate degree courses that the two schools offer.

Run by academic staff, the workshops cover areas such as biomedical science, health/nutrition, exercise science, medical imaging, cell biology, environmental health and nursing.

Each workshop has a unique and interesting approach from which the students enjoy and learn.

The Nursing Taster Days always get an overwhelming response: this year they attracted 143 applicants for the 80 positions.

Held in the simulation centre in Launceston, the sessions provide hands-on experience with manikins providing a realistic insight into the role of nursing.

The students are also taught how to take a patient's vital signs, a skill every nurse uses.

Students were very positive and said the experience had confirmed their desire to undertake a nursing degree.

The Environmental Health workshop explored questions such as "Why can't I bury Grandpa in the backyard"? This relates to environmental issues studied in the new Bachelor of Health Science (Environmental Health) degree offered by the school through the Partners in Health initiative between DHHS and UTAS.

An online application process helps students and career advisers apply no matter where they live in Tasmania, which led to a record 122 applications for the Human Life Science Taster Day.

The Faculty of Health Science plans to introduce taster days for pharmacy and medicine soon.



Taster sessions provide hands-on experience for students.

right job right person!



An innovative new approach to recruitment and selection!

Right Job, Right Person! is a new, more effective and streamlined way to recruit and select staff.

As a recruiting manager it is sometimes hard to sort recruitment fact from fiction and there are many entrenched urban myths. Some of the most common myths include:

- there must be an interview
- all interviewees must be asked exactly the same questions
- you can only advertise in the Gazette or newspapers
- you cannot invite people to apply for vacancies
- selection panels must have an appropriate gender mix.

Developed by DHHS as part of People Directions, Right Job, Right Person! dispels these myths and gives you back confidence in your recruitment decisions.

Attracting and retaining the right people is crucial to our agency's success. Right Job, Right Person! is a contemporary recruitment framework that allows flexibility and innovation to ensure recruiting managers get the right people in the right job at the right time.

The framework takes a project management approach to recruitment and selection, with a focus on defining the role and attracting and selecting the right applicants.

All managers involved in trialling Right Job, Right Person! agree it will mean more effective and efficient recruitment and selection and will help grow and develop our workforce.

If you have any questions please contact your recruitment liaison officer or visit Right Job, Right Person! at www.people.tas.gov.au/rjrp

define

Know what you're looking for



attract

Know where to look



select

Know how to use the selection process



Like many organisations around the world, the Tasmanian state service faces the challenges of financial constraints, demographic changes and an ageing population. This makes it essential to develop a strategic approach to workforce issues.

To meet these challenges the Department of Premier and Cabinet has developed a people focused framework, People Directions.

People Directions has five key themes that: build an identity for the state service; look at ways to attract and retain people; improve workforce capability and innovation; foster managers and leaders who are actively involved in workforce management; and plan for the future challenges facing the workforce, managing for consistent high performance, and health and wellbeing of employees.

Department of Health and Human Services

Working in Health Promoting Ways

By Suzanne Crowley

National, state and local governments are all looking for ways to promote, build and maintain healthy communities.

Tasmania's Health Plan identifies health promotion as a key means to reduce the impact of disease and ill health in Tasmania, and DHHS is looking to have each contact with the health system support people make healthier choices that protect and improve their health.

DHHS will also work with communities to ensure that healthier choices are easiest.

In line with this, Population Health Priorities is coordinating the development of *Working in Health Promoting Ways: a Strategic Framework for DHHS*. This framework focuses on prevention of ill health, health promotion and early intervention to reduce health inequalities and achieve effective and sustainable action.

A reference group has brought staff together from across DHHS to help create a practical framework to support a more coordinated approach to health promotion across DHHS.

The framework will support health promotion by encouraging collaboration to address priorities, stimulate discussion and provide tools, resources and mechanisms that increase workforce health promotion capacity and skills.

The framework will promote physical activity and active communities; nutritious, safe and accessible food; mental health and wellbeing; and sexual health.

It will also prioritise preventing and managing chronic conditions, preventing injury and reducing and minimising harm from tobacco, alcohol and illicit drugs.

The framework outlines underlying principles of practice and is supported by health promotion action guides, a website and a background paper that provides more in-depth discussion of health promotion, priority areas and principles.

The development of this framework has highlighted the need for a strategic approach to workforce development as well as planning and reporting around health promotion.

DHHS will release the background paper shortly. If you would like more information, or notification when the background paper is released, please contact Suzanne Crowley at Population and Health Priorities: suzanne.crowley@dhhs.tas.gov.au or call 6222 7752.

DHHS will also work with communities to ensure that healthier choices are easiest.





BreastScreen clients volunteer praise

BreastScreen Tasmania is marking the success of its new volunteer support program that provides practical and personal support for women recalled for further breast cancer tests.

Cancer Screening & Control Services state manager Gail Raw says the BreastScreen Volunteer Program helps reduce the emotional impact of the process for women.

“Being recalled to BreastScreen for assessment of abnormalities detected on their screening mammograms, and further tests to determine whether or not they have breast cancer, can be a very worrying time for women,” Gail says.

“The new program provides lay support and makes the experience much easier.

“At BreastScreen, on assessment days, a dedicated group of volunteers now offer support by being there to have a chat and offer assistance, or perhaps even just a hot, calming drink.

“Many volunteers have been through the assessment process themselves, so they understand what other women may be going through.”

Gail says a recent letter from a grateful BreastScreen client sums up the volunteers’ supportive role:

“I just wanted to say how much I appreciated the care I received during my recent visit to BreastScreen. I was asked to come in for a recall appointment so I was a bit nervous, but all the staff were so welcoming, and then the volunteer arrived.

“At first I was uncertain about her role – I just wanted to bury myself in a magazine – but I was amazed to see how she set about creating such a comfortable, friendly atmosphere yet one in which the potentially serious and traumatic nature of the situation was acknowledged.

“She did such a great job, and of course she was able to speak from her own experience and inspire others with her story. Instead of having a room full of tense silent strangers

we ended up with something that felt more like a meeting of a group of friends.”

The BreastScreen client goes on to say: “And of course, on top of all of that, there was the wonderful medical care: to go from x-rays to ultrasound to consultation like that was amazing.

“We are so fortunate to have such a facility. I’m sure it’s taken a lot of lobbying and work over the years to get such a service in place; so thank you to all involved.”

Volunteers play a role in supporting the women’s companions too, as many travel from all over the state to the Hobart clinic.

“The program is all about people supporting each other, and the volunteers’ desire to care for people is what makes it so special,” Gail says.

For more information about the BreastScreen Volunteer Program please call 6216 4300.



Volunteers gather to celebrate the program’s success at an afternoon tea. It was a chance for BreastScreen staff to thank them for their support and service throughout the year.



Paul Williams (L), Allan Muir and David Williams on the move.

Men are on the mooove

By Paul Williams

The Department of Health and Human Services has launched Tasmania's first men's walking group at Glenorchy.

Men on the Move was developed in response to local men asking for a regular activity to help them with fitness.

DHHS Glenorchy Community Health Centre social worker Paul Williams says it is often difficult to link men into mixed gender groups.

"Men who join activity programs often feel overwhelmed when confronted with a group that is predominantly women," Paul says.

"They may attend once or twice and then give up; an all-male group can make men feel much more comfortable. It is important that we make programs as accessible as possible."

Paul says men join for a range of reasons including weight loss, rehabilitation from illness or injury, meeting other men and getting out of the house.

"This program is attractive to men as it is ongoing but involves no long-term commitment. Often men do not want to commit to a six or eight week program and they enjoy the flexibility of attending when they want.

"I am surprised that there are no other all-male walking groups in Tasmania, and only two in other states."

Paul says the benefits of walking are well known and it is suitable for people of all levels of fitness.

"Walking is an activity that most people can get involved in. It requires no special equipment, no expensive fees and it is easy to walk and talk.

"Many men do not wish to join fitness clubs as they are concerned about their appearance; they like to dress how they want and enjoy a relaxed form of exercise," Paul says.

Men on the Move walk for an hour each week on a flat path or track and then meet for a cup of tea and plan the next walk. Everyone walks at their pace and the walks are held each week in all weather.

The group meets at 10am every Thursday at the Glenorchy Community Health Centre. Activities are free. Walkers should register with Paul Williams on 6233 8727.

Speech pathology team expertise is talk of town

By Pene Snashall

The clinical skills of the Royal Hobart Hospital speech pathology team are well-respected among the wider interstate health sector.

Senior speech pathologist Rosalind Burgess recently showcased the Videofluoroscopy Swallow Study Training DVD at St Vincent's Hospital, Melbourne, to the Speech Pathology Dysphagia Interest Group. This group supports professional education and speech pathologists working in the dysphagia area.

Funded through a RHH Education and Training Grant in 2006, the DVD was developed by Rosalind in collaboration with specialist radiologist Dr Robin Harle and senior speech pathologist Marjorie Conroy.

The DVD compiles examples of swallowing impairment from patients with a range of clinical disorders including neurological, head and neck, pharyngeal, oesophageal and respiratory.

Rosalind says the DVD is an effective training tool providing support to speech pathology students and graduate speech pathologists, and is used extensively for in-service training of nursing, medical and other allied health staff at RHH.

"In the past if we've wanted to use previous case histories for training purposes we had to wade through shelves of uncatalogued videos," Rosalind says.

"Now, the DVD can be quickly viewed via the computer and the particular swallowing impairment easily identified, ensuring more effective patient treatment."

Rosalind says the DVD is useful for clinicians seeing new or rarely seen clinical presentations because they can research and understand the patient's condition and the impact of the swallowing impairment by viewing examples on the DVD.

There is a high demand from local and interstate hospitals to buy copies.

DHHS congratulates the Speech Pathology Department on developing this important learning tool.



Speech pathologists Marjorie Conroy, Rosalind Burgess and acting manager Sue Alexander look over the DVD.

The DVD compiles examples of swallowing impairment from patients with a range of clinical disorders.

Mary Bent: gone but not forgotten

By David Roberts, Secretary



Mary Bent has left the Department of Health and Human Services after almost 20 years of service.

Many of you will know Mary personally or through her outstanding work.

Mary worked at a senior executive level in the department since 1991, first as a Manager of Health Planning and later as a Regional and State Manager of Aged Care and Disability.

Over the years, Mary led other business units including the large Community Population and Rural Health Division before going on to jointly develop Tasmania's Health Plan in 2006-2007.

Since then Mary was Deputy Secretary, Statewide System Development responsible for implementing Tasmania's Health Plan. She also had specific oversight of Mental Health, Alcohol and Drug and Correctional Health Services.

I am sure you will remember Mary – as I do – for her cool and wise counsel and as someone with great drive and passion.

Mary epitomised all the very best traits found in the public service: a deeply felt sense of commitment, dedication and community service.

Thank you, Mary. Your hard work is appreciated and you will be greatly missed!



Acting DHHS Secretary Simon Barnsley, Siobhan Harpur, Mary Bent, Dr Elizabeth Shannon and Sally Williams looking rather pleased with the Agency's success at the awards presentation.

Agency winners are grinners!

Cunning plan carries off awards

By Frank Noakes

Tasmania's Health Plan Stage I Program Management has snatched the 2009 Organisation/ Change Management Award and the overall Project Management Achievement Award in Tasmania.

This triumph means the program management submission qualifies for the national Australian Institute of Project Management's Project Management Achievement Awards.

Tasmania's Health Plan was developed to meet the challenges of delivering health services to a small, dispersed and ageing population with an ageing workforce. It demands at the same time a leaner structure and one that will improve services.

Comprising 134 projects in its first stage, the plan has a modest budget and works in a difficult environment. It has overcome administrative challenges to make a big contribution to Department of Health and Human Services organisational change.

Designing and carrying out the plan has involved many DHHS staff right across Tasmania over the past two years including staff and consultants as well as community and consumer representatives. Take a bow, one and all!

National winners will be announced at the Australian Institute of Project Management conference on October 13.

Tasmanians pick up plaque for dental paper

By Jenny Kitchener

A paper by three Tasmanian oral health specialists has received a prestigious *Australian Dental Journal* national excellence award.

Oral Health Services Tasmania Clinical Director Dr David Butler, UTAS Rural Health researcher Dr Rosemary Cane and Launceston General Hospital Senior Staff Specialist-Anaesthetics Dr Colin Chilvers co-wrote the incisive paper.

The implications and management of acute odontogenic infection in association with Down and Eisenmenger syndromes and schizophrenia in a rural setting (case report) highlights the potential seriousness of dental infection, particularly for people with complex medical conditions living in rural areas.

It says a successful long term clinical collaboration between the medical and dental professions providing care for a special needs dental patient is essential for regional and rural public dental services.

The award's senior reviewer described the paper as "at the core of special needs dentistry, namely a relatively common dental complaint in a medically complex patient".

Although technical, the paper highlights the benefits of continuity of care across services as an effective way of integrating oral health with general health in rural settings.

It says successful management shows that good communication and referral pathways between local dental and medical practitioners within their respective institutions are an essential aspect of rural health practice.

The honour is all the more significant because most awards for articles come from states with dental school research infrastructure.

Dr Butler and Dr Chilvers hold conjoint positions as clinical senior lecturers at UTAS while Dr Cane holds a National Health and Medical Research Council postgraduate scholarship.

The *Australian Dental Journal* publishes peer reviewed papers on research, clinical developments and treatments in Australian dental practice. It goes to more than 10,000 dentists around Australia and has many international subscribers.

The award, one of only two, was presented at the Australian Dental Association's National Congress in Perth earlier this year.



Oral Health Services Tasmania Clinical Director Dr David Butler (L) and UDRH – UTAS Junior Research Fellow Dr Rosemary Cane show off their Award of Excellence with Australian Dental Association president Dr Neil Hewson.

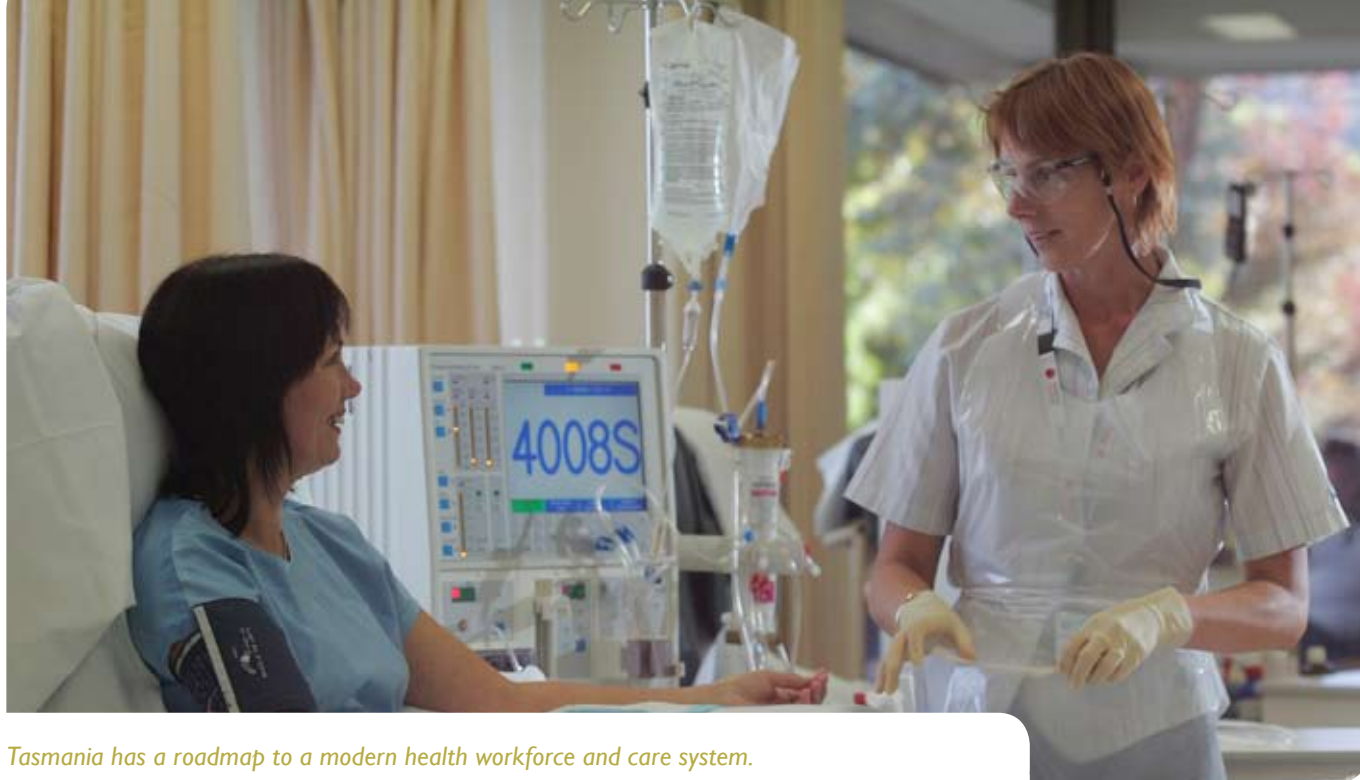
People on the move



Dominic Morgan is the new Chief Executive Officer of the recently integrated ambulance, medical retrieval and patient transport service now known as the Tasmanian Ambulance and Health Transport Service. Dominic was previously senior manager in the Ambulance Service of New South based in Sydney.



Susan Rasmussen is the new Partners in Health (UTAS/DHHS) project officer. Susan has been a registered nurse for over 30 years and has worked in many clinical situations ranging from acute surgical and medical to rural health aged care and palliative care. Most recently Susan worked in primary health as graduate nurse coordinator, nurse educator and quality improvement nurse.



Tasmania has a roadmap to a modern health workforce and care system.

Reforming the way we work

We recently launched *Leading the Way: Tasmania's Health Professionals Shaping Future Care*, a roadmap to a modern health workforce and care system.

Leading the Way will help ensure we keep pace with international health workforce developments.

However, in some areas we're already on the front foot.

Staff at the Royal Hobart Hospital are in the early stages of an innovation program that empowers them to drive and manage changes to their working environment.

Consistent Ward is an innovation and redesign process for improving patient and staff experiences and outcomes.

The beauty of the system, which will migrate to other Tasmanian hospitals shortly, is that it's staff driven.

Consistent Ward has started in the wards because it is here we can readily make many important changes – to get some runs on the board.

The Consistent Ward approach recognises that cultural change is grown organically from the bottom up with management providing training and support.

In every industry, it's those on the ground who know best where the inefficiencies lay. On our hospital wards it's the nurses who know of poorly situated and inefficient stores ... and medicine trolleys parked half a mile away.

Consistent Ward grants staff permission to make changes that save time and reduce frustrations. It's often small, inexpensive and easy things – things staff can fix themselves.

These improvements leave staff with more time to care for their patients and to communicate with other health professionals – to ensure patients are really at the centre of everything we do.

Consistent Ward gives staff the skills and confidence to make these changes; portable skills they can take with them if they move from one job, area or location to another.

The process is encouraging staff to go out and try things and let others know if they work. It's about people taking ownership of their own work environment: making it workable, more efficient and much more pleasant.

It's the sum of these small changes that leads to genuine, lasting cultural change.

Staff have also developed an evidence-based assessment system that speeds patient access to multidisciplinary services.

And this is just the beginning. Once the busy winter season is finally over, the focus will expand to look at systems, at ways of working.

This is an exciting development and we congratulate the Innovation and Redesign team, hospital managers and especially the enthusiastic nurses leading cultural change at the Royal.

David Roberts
Secretary and

Fiona Stoker
Chief Nursing Officer



Dr David Boadle reflects on a winter of professional contentment as he prepares for a return to clinical practice.

No fluke Tassie flu so mild

By Baden Phillips

It started with a flurry, quickly became scarily fluid and all the while fluctuated wildly ... welcome to Tasmania's flu season ride.

It's been a long fluey winter season for many at DHHS – most of us have had it, treated those with it or worked long hours to minimise it.

One of latter is Dr David Boadle, a member of the leadership triad that spearheaded Tasmania's H1N1 pandemic 2009 response.

Shoulder-to-shoulder with Acting Director of Public Health Dr Chrissie Pickin and Chief Health Officer Dr Craig White, David has led the response from outbreak to vaccinate.

"In the early weeks we had a very concerning picture of this new virus," David says.

"A significant number of people were dying in Mexico and it had spread rapidly into the US and Canada. It was real and it was coming.

"Earlier work by Public Health and what is now the Office of the Chief Health Officer provided us with a pandemic strategy, but we really needed 12-18 months to advance operational planning.

"This was the challenge that faced us when the virus hit. We had just one chance to keep it out, and one chance to contain it if it got in."

David says the team had five or six weeks before infections in Victoria exploded and another wave of uncertainty hit.

"It was the week before school holidays when the Victorian situation really came into sharp focus, and we knew our schools were breaking for holidays," he says.

"We had to develop plausible and practical advice quickly at a time when there was no national policy because their school holidays were still weeks away.

"It was a bit of a risk, but we felt we had to take a precautionary approach."

The community reaction to the school holiday travel advice was taken seriously.

Calls to the 1800 FLU DOC service spiked at 900 calls a day and the media buzzed. People were concerned.

However, as the weeks passed, the public and the media began to question international and local influenza efforts, asking whether this wasn't just another flu.

"Here we were in the centre of a storm, with many people redeployed to help out in a novel, very stressful situation, working long hours, with some media and community members saying: 'Oh come on, what is there to worry about, this is mild?'" David says.

"Being in the epicentre as it were, it was hard to distinguish negativity from other community opinion because for so many of us all normal social interaction had stopped.

No fluke Tassie flu so mild

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We hardly saw our families let alone our friends, so it was hard to get a sense of what the community was thinking.

“But this wasn’t a situation for ‘she’ll be right’ – we had an obligation to our community to err on the side of caution.

“My perception is the public messaging was effective, and that took significant effort on part of Chrissie Pickin and myself to keep that tempo up,” David says.

And the community did listen. Thousands of people across Tasmania phoned the hotline, attended flu clinics or visited the website for information and updates.

Encouragingly, today you see people being more conscious when sneezing or coughing in public and more people are staying at home when sick.

The important messages (5 steps to flu safety) did sink in, and this knowledge and behaviour will stand Tasmania in good stead in future.

“It’s beyond reasonable doubt that Public Health actions led by Chrissie Pickin contributed to the moderate behaviour of the virus we’ve seen in Tasmania,” David says.

“The confidence Chrissie was able to instil and maintain in a season of contradictions and rapid change – that there was someone in charge, someone who cared about your health – that was one of my biggest learnings and one I will carry forever.

“When I’m back in clinical practice I won’t be looking back at my days with the department thinking that ‘all the real work is done in clinics’ – I will look back and know that we all make a contribution at various levels towards community health.”

As the H1N1 immunisation program unfolds, Tasmanians can make a choice about vaccination, but whatever their choice, David says the basic steps to staying flu safe remain critical.

“We must remain vigilant,” he says.

“Influenza viruses are notoriously unpredictable. That is the single most important feature of the flu; it’s the chameleon of viruses, and it keeps coming back. Protect yourself and others by washing your hands, covering coughs and sneezes, keep your distance in public, know the signs of flu and stay at home if you’re sick.”

David returns to clinical practice in September and thanks all those he has worked with in his seven years with DHHS.

Royal neonatal intensive care training toddlers to 20

By Pene Snashall



This year marks 20 years since the first neonatal intensive care hospital-based postgraduate course was provided to Royal Hobart Hospital nurses.

While models of care may have changed over the last two decades, what has remained the same for the RHH NICU nurses is the special care and love they have for their patients.

Before 1988, nursing staff had to travel to other states to undertake this specialised training but in 2002 the course was transferred to the University of Tasmania to maintain academic vigour, and now it is offered online.

NPICU medical director Dr Peter Dargaville (pictured) has witnessed firsthand the ongoing commitment to up-skill from colleagues over the years.

“Every year many nurses working in the unit undertake this course, which is outstanding given the demands of working shifts and juggling family and home commitments,” Peter says.

“This year eight of our nursing staff started their post graduate studies, consistent with previous years.

“Over the last two decades 65 RHH nurses have completed this highly specialised training to support the care of neonatal patients.”

DHHS congratulates these nurses for their dedication and commitment to their patients and their families.



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