



Tuesday 2 December 2008

Launching Aboriginal Health Action Plan



Launching the SWAHS's Aboriginal Health Action Plan 2008-2011 was celebrated by Frank

Vincent, Aboriginal Medical Service Chief Executive Officer; Aboriginal elder Uncle Greg Simms, John Patton, Lithgow Hospital advisory board member; Allan Shearan, Londonderry MP and up to 60 SWAHS staff including Chief Executive Professor Steven Boyages; Dr Glenn Close, Executive Director Strategic Direction and Population Health, and Tim Agius, Director Aboriginal Health.

Wednesday, November 19 saw Blacktown Council's

Bowman Hall was abuzz with excitement as Aboriginal performers started off the days events followed by Uncle Greg Simms 'Welcome to Country'.

SWAHS Director of Aboriginal Health, Tim Agius, said the plan was based on cultural equity and sensitivity and aimed to help close the existing health gap for Aboriginal people.

"This is an action plan - it gives us a clear view of what needs to be done, how we get those things done, and a framework for how we can measure how much has been achieved in 12 months time," Mr Agius said.

"Aboriginal Australians bear a greater burden of ill health than the rest of the population.

SWAHS has a large Aboriginal community, with an estimated total of 17,826 indigenous people living in the area in 2006.

[Continued Page 2](#)

SWAHS men show a united front for eliminating violence against women

White Ribbon Day is the first of 16 days of Activism Against Gender Violence. The international campaign will end on World Human Rights Day on December 10, to highlight the connection between women, violence and human rights.

On November 25, more than 120 men wearing white ribbons across SWAHS gathered outside the main entrance on their respective health facility.



[Full Story Page 3](#)

This week



Launch of Aboriginal Action Plan

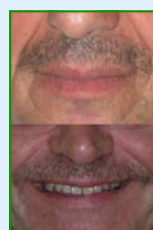


World COPD Day



Women's Health at work

Next week



The November verdict is in



Headspace Officially opened



Presentation and Awards

Aboriginal Action Plan (continued)

This accounted for 31% of the urban NSW Indigenous population and 12% of the total Indigenous population in NSW.

"This includes lower life expectancy (by approximately 17 years); higher rates of chronic disease risk factors and death; and higher rates of hospitalisations with conditions that are potentially avoidable through prevention, care and early disease management.

"The purpose of the SWAHS Aboriginal Health Action Plan 2008-2011 is to guide the implementation of a range of initiatives across the Area to improve the health status of Aboriginals residing in Sydney West."

Professor Steven Boyages, Chief Executive said: "SWAHS is committed to bridging the gap in Aboriginal health and we look forward to working in partnership with the Aboriginal community and across government and non-government sectors to implement this important plan."

New programs that will be introduced include:

- ◆ 'The Watershed' – a new outreach screening service for Aboriginal people over 16 years of age is to be introduced March/April, 2009.

- ◆ A tobacco awareness raising campaign, quit smoking information and smoking intervention services at Blacktown, Doonside, Mt Druitt, Blue Mountains and Lithgow hospitals.
- ◆ The Mootang Tarmi (Living Longer) Program. This program incorporates several components for improving the health journey for Aboriginal people with chronic disease

Front Cover: Aboriginal performers NYARDI (left to right): Brad Pittman (young boy), Mark Pittman (Father of young Brad Pittman), Brad Pittman (on mic/didgeredoo). At the back Allan Shearan, Tim Aguis and Professor Steven Boyages. Below: The unveiling of the report



The 'Big Day Off' - a Women's Health at Work Initiative



Participants learning the finer points of self defence

The 'Big Day Off' was held on 8 November at Parramatta Town Hall provided an opportunity for the Women's Health at Work Program (WHAW - Sydney West Area Health) to bring together fifty (50) women of Sudanese, Sierra Leone, Liberian and Ethiopian backgrounds. This action packed day included two workshops, which focussed on women's health and chronic disease prevention through eating a healthy diet, a self defence demonstration with women practising the techniques, lunch, door prizes and music. The women and staff thoroughly enjoyed the day and new information, flyers and ideas were gathered by the women at the end of the day.

Taking a well earned lunch break after all that physical activity

The WHAW African Women's project is primarily working with employed women who previously came to Australia as refugees. While most people arrive in Australia in good health the 'healthy migrant effect' generally wanes as their length of time in Australia increases. This effect is mainly due to a change in lifestyle and socioeconomic status. Events such as "The Big Day Off" provide opportunities for working women to learn through fun and interactive learning strategies gaining new knowledge on health issues that impact upon them and their families.



WHITE RIBBON DAY NOV 25

International Day for the Elimination of
Violence Against Women
25 November



White Ribbon Day (continued)

Male staff from across Sydney West Area Health Service's (SWAHS) major hospitals stood with solidarity to show their respect and support of women this White Ribbon Day.

Professor Steven Boyages, Chief Executive said that by wearing a white ribbon, men could make a personal statement that they "will not commit, condone or remain silent about violence against women".

"One in three Australian women will experience physical or sexual violence in her lifetime."

"I agree with Andrew O'Keefe, White Ribbon Foundation Chairman, when he says that this is one of the most widespread and serious human rights abuses in Australia."

"SWAHS is committed to responding in a supportive and empowering way to women and children affected by domestic and family violence and to creating an environment of 'no tolerance' of this form of human rights violation."

Professor Boyages said White Ribbon Day 2008 called on Australian dads to speak out to prevent violence against women.

More than half of Australians surveyed by the White Ribbon Foundation said their father had rarely or never spoken to them about avoiding violence in their personal relationships when they were growing up.

"The research show that fathers need to take the lead and start speaking to their children about the importance of not accepting violence in relationships," Professor Boyages said.

"As men, we are brothers, fathers, sons and husbands. As fathers particularly, we play a vital role in helping our sons in becoming men.

"By supporting White Ribbon Day, we can

show our sons – and sons everywhere – our respect and support of all women and our absolute condemnation of violence within our community."

Kate Lamb, SWAHS Women's Health Co-ordinator said the prevalence of domestic violence needed a broad-based and supportive approach from staff who worked with women.

"As violence against women is so common, SWAHS clinicians in antenatal, mental health, family and child, alcohol and other drug services ask all women if they have been hit or hurt in other ways by their partner, Ms Lamb said.

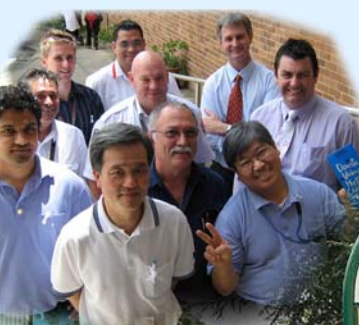
"Every year SWAHS Primary and Community Health staff join their colleagues from local government and non-government services to help raise awareness about the health impacts of family and domestic violence on women and children in the community."

"In 2004, of the top 10 metropolitan Local Government Areas with the largest number of domestic assaults, four were in SWAHS."

"Every month at least 100 women disclose recent experience of domestic violence to SWAHS clinicians, and many of these women have children who are witnessing the violence."

"The shocking fact is that for women under 45 years, gender-based violence is responsible for more ill health and premature death than either high blood pressure, obesity or smoking."

Cover: Westmead.
Clockwise from top: St Joseph's, Auburn, Blue Mountains and Nepean.



Everyone breathed easier on World COPD Day, November 19

Chronic Obstructive Pulmonary Disease (COPD) is a devastating lung disease that progressively robs sufferers of breath. This World COPD Day people were encouraged to learn about the devastating lung disease that is literally taking the breath away of more than one million Australians each year.

COPD is a long-term lung disease that includes emphysema and chronic bronchitis and mostly affects people aged 45 or over. COPD is Australia's fifth biggest killer and the second leading cause of avoidable hospital admissions.

COPD is characterised by shortness of breath on minimal exertion, a constant cough with phlegm and a history of cigarette smoking.

"While there is no cure, there are things people can do to breathe easier and improve their quality of life, particularly if it is identified and managed early," Mary Roberts Clinical Nurse Consultant .

"However the Australian Lung Foundation has found that awareness of COPD is low, particularly among smokers, who are the most likely to develop the chronic disease."

"It is estimated that three in four Australians with COPD are unaware that they have the condition and are therefore not taking steps to manage the disease and its slow progression."

Ms Roberts said to help raise awareness of the disease, patients of the Western Sydney Respiratory Ambulatory Care Service (RAC) and carers would be taking part in two **Catch Your Breath – Walk for COPD** events at Westmead and Mt Druitt Hospitals.

"For some people suffering from a Chronic Obstructive Pulmonary Disease, (COPD) walking even a short distance is a struggle," Ms Roberts said

"The Catch your Breath – Walk for COPD will reiterate the importance of taking part in an exercise program, even if patients are breathless."

The Western Sydney Respiratory Ambulatory Care Service (RAC) is an area-wide service with staff at Blacktown, Mt Druitt and Westmead hospitals. RAC cares for patients with COPD living in the areas of Auburn, Parramatta, Holyrold, Baulkham Hills, Blacktown, and Mt Druitt.

RAC provides a range of services:

Multidisciplinary assessment clinics at Blacktown Hospital for all patients referred to the service. Assessment includes medical, nursing, physiotherapy, nutritional, lung function, oxygen needs, occupational therapy screening, speech pathology screening, medication and quality of life/mental health.

Comprehensive pulmonary rehabilitation – intensive exercise training 3 x 1 hour sessions per week, plus one education session per week for eight weeks minimum, at Mt Druitt and Westmead hospitals.

24-hour single point of contact (Respiratory Hotline), which offers telephone support for patients and carers to aid in self management of acute exacerbations of COPD and,

Community outreach for patients identified as high risk of re-admission

Cigarette smoking is the single largest cause of developing COPD. However despite being the highest risk group for COPD, regular smokers are less likely than the rest of the population to consider themselves at risk of developing COPD.

Other known risk factors are passive smoking, exposure to environmental agents, including indoor and outdoor air pollutants and occupational dusts and chemicals.

For more information, call RAC on 9881 7480.



A sea of green could be seen walking around Westmead Hospital

Kate and Otis the quiet achievers

Sydney West Area Health Services is always working towards being an employer of choice and this includes employing people with a disability. With Don't DISmyABILITY day just around the corner we would like to introduce one of our staff members who has a vision impairment and has agreed to share her perspective on working with us.

Kate Murdoch, 21, has worked as a central records officer and receptionist in SWAHS' executive offices based at Nepean Hospital for nearly a year. Kate helps collect and distribute the corporate mail, ensures correspondence is kept up to date and on track, and generally helps to make sure the offices are running smoothly.

In her receptionist duties, Kate sits at the front desk, with her guide dog of three years, Otis, lying quietly behind her. She greets visitors to the executive offices while attending the internal and external phone calls. Kate uses a special piece of office equipment that magnifies documents to make reading easier and allows her to take the necessary action as required.

Like most new staff to SWAHS, Kate says she found the sheer size of the organisation slightly daunting and that there was "a lot to learn in a short amount of time". Yet, she says SWAHS, as an organisation, was very supportive of her needs as a sight impaired person "right from the word go".

"Vision Australia provided me with my equipment and Elaina Burgin, Executive Assistant to Chief Executive asked me to come to the office and make sure everything was in the right spot, to test things out before I started," Kate says.

"Elaina introduced me to the people there and I got to know the layout of the desk, where everything was, just to make sure my first day wouldn't be as overwhelming."

"It was quite comforting, I was very happy with that support. I wasn't necessarily expecting it all – I was a bit surprised."

This kind of support, Kate says, made her feel immediately more at ease in her new work environment.

"Because I was getting such positive feedback, I felt a lot more comfortable telling people when I needed help, because I felt this (sight impairment) is something I don't need to hide or be ashamed of," she says.

"I can say – 'I can't see this – can you help me?', which was very different to what I had done before. Since I have had Otis it is more obvious to others that my vision loss is

significant' previously people weren't always aware of my vision limitations. Coming in here, and having that initial support, and particularly being in such a prominent area, I thought that these people actually do want me to work here, they want me to do as well as I can to be an asset to them."

Kate is currently studying business human resources at Nepean TAFE and is considering embarking on a diploma next year or attending university to study industrial relations or business psychology.

Kate, like many SWAHS staff, says she does not necessarily want to "stay stationary" in her current role. "I would like to be able to grow within SWAHS," she says.

"Yet I would suggest that perhaps SWAHS could offer just that little extra support for someone with a disability if they want to take up the opportunity to move on."

"It can be a very scary thing... and particularly for someone with a disability, it's all about having the confidence."

Bernard Deady, Executive Director Clinical Operations said "Kate's message is important in many ways, she has shown us that we can support people to use their many abilities in our workplaces and have appropriate supports to deal with special needs they might have."

"She has particularly highlighted what it felt like for her as a new staff member with special needs to feel welcomed at the start of her employment. Kate has also reminded us that the task of 'getting it right' is an ongoing one about which we need to focus attention as an organisation."

"Part of our ongoing work as we implement the SWAHS Disability Action Plan will be to work on strategies to support staff with disabilities to have ongoing support and opportunities to develop skills to take on other roles within the organisation."

Kate and Otis will be attending the *Don't DIS my Ability* promotion of good practice for SWAHS at Westmead on 3 December where many examples of how we have promoted peoples' abilities, as patients, clients and staff will be highlighted as part of the celebration of International Day for People with a Disability.

Kate Murcoch and Otis at work. Kate's special piece of office equipment is featured behind her



3 DECEMBER
Don't DISmyABILITY
Don'tDISmyABILITY.com.au

3 December, 11.00am, Westmead Hospital, Seminar Room 4



EQuIP Corporate Survey

- Chief Executive Professor Steven Boyages

Sydney West Area Health Service recently underwent the Evaluation and Quality Improvement Program (EQuIP) Corporate Survey of the Australian Council on Healthcare Standards (ACHS). The Survey was from 27 – 31 October 2008 and focused on SWAHS's:

- ◆ overall performance
- ◆ leadership and management structure
- ◆ a continuous quality improvement structure
- ◆ customers/clients/consumers
- ◆ outcomes of the processes in place.

Six surveyors, from a range of professional backgrounds and a diversity of experience, surveyed the Corporate Office of SWAHS.

During the Survey week, the Surveyors were based at Nepean, and travelled to different SWAHS facilities where they interviewed staff to gain an in-depth understanding of SWAHS's structure and processes. Following the first three days of interviews, the Surveyors conducted site visits at Westmead, Cumberland and Blacktown Hospitals on the fourth day, where they validated that these Area policies and systems are working in the field.

The Surveyors closed the Survey with a Summation Session on **31st October**; at this session the Surveyors presented their findings on SWAHS.

Minimum requirements for a full four year EQuIP accreditation are:

- ◆ A Moderate Achievement rating level or higher in all EQuIP Corporate mandatory criteria
- ◆ All previous recommendations are addressed. (As SWAHS is a new Area Health Service, this does not apply)
- ◆ Receive no high priority recommendations
- ◆ Have no significant risks
- ◆ Have a maximum of three Some Achievement ratings

SWAHS performed exceptionally well at this Survey and (subject to ACHS ratification), achieved 2 Outstanding Achievement ratings (Information Management and Population Health), 20 Extensive Achievement ratings and 8 Moderate Achievement ratings. The Surveyors identified no high priority recommendations.

This was an exceptional result; one that surprised even the Surveyors who reported SWAHS surpassed any other organisation they had previously surveyed.

The Surveyors commended us on our 'FIRSTS,' noting that these frameworks are an innovative way to identify and address priorities.

In addition, the Surveyors were especially impressed by our governance, planning and structural processes; and congratulated us on performing at an exceptional level.

The Surveyors also commended us on the way we manage data and information, which not only includes tools such as DashBoard and BedBoard, but also extends to other virtual systems such as E-Learning and On-Line Recruitment.

Our exceptional result at this accreditation Survey is indeed a testimony to our achievements and how far we have come since the amalgamation in 2005.

Memberships of the EQuIP Corporate Expert Reference Group Everyone Went That Extra Mile

This Group coordinated and facilitated SWAHS's response for EQuIP accreditation. Outlined below are the details of what Standards each member was responsible for. It is to be noted that each member was assisted by a team of people from across SWAHS to assist in the preparation of response for their Standard(s). All staff put in an extraordinary effort in preparing for accreditation and their efforts were recognised in the surveyor's comment: "We had not seen an organisation before that was so well prepared and organised."

Expert Reference Group member	EQuIP Standard
Bernard Deady, Executive Director, Clinical Operations	Chair, overseeing the whole coordination and facilitation of the EQuIP process
Shelly Dhaliwal, Quality Improvement Officer, Clinical Governance	Secretariat – EQuIP Corporate Expert Reference Group Secretariat – Leadership and Management Standard Working Group Providing support to the Chair and the Groups
Rhonda Loftus, Assistant Director, Clinical Operations	1.6 - Consumer Focus 3.1 - Leadership and Management
Mark Dado, Network Operations Manager, Research	2.5 - Research
Dr Charles Pain, Executive Director, Clinical Governance	3.1 - Leadership and Management 2.1 - Quality Improvement and Risk Management
Rosio Cordova, Associate Director, Clinical Governance	3.1 - Leadership and Management 2.1 - Quality Improvement and Risk Management
Bill Morfis, Executive Director, Corporate and Financial Services	3.1 - Leadership and Management 2.1 - Quality Improvement and Risk Management
Susan Shaw, Manager of Corporate Systems Review and Redesign, Corporate and Financial Services	3.1 - Leadership and Management 3.2 - Safe Practice and Environment 3.3 - Service Delivery
Roger Duve, Quality Improvement Lead, Clinical Governance	3.1 - Leadership and Management 2.1 - Quality Improvement and Risk Management
Susan Whitby, Executive Director, Nursing and Midwifery	3.1 - Leadership and Management
Elaine Buggy, Nurse Manager, Area Nursing and Midwifery, Nursing and Midwifery	3.1 - Leadership and Management
Dr Glenn Close, Executive Director, Population Health and Strategic Direction	3.1 - Leadership and Management
Lynne Paine, Director, Information Management	2.3 - Information Management
Kym Scanlon, Director, Strategy and Planning	1.6 - Consumer Focus 3.1 - Leadership and Management
Christine Newman, Population Health	2.4 - Population Health
Elizabeth Kristensen, Workforce Planning and Performance Monitoring	2.2 - Human Resources Management
Kevin Gillies, Area Manager, Human Resource Services and Policy	2.2 - Human Resources Management
Richard Griffith, Human Resources Manager	2.2 - Human Resources Management

Tzatziki Dip

Tzatziki is a Greek yoghurt-based dip, also used as a sauce or salad dressing.

10 minutes preparation
3 serves of vegies in this recipe

2 Lebanese cucumbers, peeled and finely diced
2 cups low-fat natural yoghurt
2 cloves garlic, crushed
2 tablespoons chopped mint, or 1 tablespoon dried mint
Gently squeeze excess moisture from cucumber in paper towels. Combine yoghurt, garlic and mint in a small bowl. Stir cucumber into yoghurt mixture.
Serves 6-8.

Hint

Can be stored in the refrigerator for 2 days.

Variation

To serve as a raita dip with curry, remove garlic.

Serving suggestion

Serve as an accompaniment to a Greek salad with pita bread.

Tzatziki is featured on the top left of the photograph.



Go for 2 & 5[®]
FRUIT VEG



SCAMwatch

We are often reminded of various scams that are doing the rounds but the sheer volume and creativity of the scams means we should constantly update our knowledge to protect ourselves and alert others.

The Australian Competition & Consumer Commission runs a website @

<http://www.scamwatch.gov.au/content/index.phtml/itemId/693900> called Scam Watch which provides information on the various scams.

These are some of the types of scams doing the rounds at any given time:

- ✦ Lottery & Sweepstakes prizes & Unexpected wins
- ✦ Chain Letters & Pyramid schemes
- ✦ Investments scams including, cold calling, stock picking software & hot tips
- ✦ Money transfer scams including the Nigerian 419 scam & requests to transfer money for someone else
- ✦ Banking scams, particularly online banking & "phishing" for account details
- ✦ Health and medical scams including miracle cures, fake online pharmacies & fake drugs for sale

- ✦ Psychic and astrology scams, and
- ✦ Home maintenance scams

The list is endless and as soon as you think you know them all another pops up.

Please be alert and check out the ACCC's scamwatch website to keep yourself informed and on guard against these types of attacks.

The Australian Securities & Investment Commission also offers advice on financial matters and protecting yourself against credit fraud. You can even find out how to order a copy of the information held by credit agencies on your personal credit history and how to challenge that information if it is wrong.

See: <http://www.fido.gov.au/fido/fido.nsf> for information or order a copy of your personal credit report at <http://www.fido.gov.au/fido/fido.nsf/byheadline/Your+credit+report?openDocument>

This safety / security message was brought to you by the Security Business Review Group, Sydney West Area Health Service.



Our staff in the spotlight

Graduate Health Management Program pays dividends

Two trainees from the Graduate Health Management Program (GHMP) are making their mark in SWAHS. They are Michelle Bernardo and Barbara Jones who have both chosen careers in Workforce Development.

Barbara completed the two year GHMP, including the Master of Health Service Management from Charles Sturt University, in 2007. Michelle will complete the Program at the end of this year and will take up her new position in January. They have chosen to pursue careers in SWAHS and have been successful in being appointed to positions as Workforce Research Facilitators, Workforce and Organisational Development Division.

Michelle and Barbara are excited about the opportunities in Workforce Development, a fairly recent career path in Health Services. Michelle is currently in a placement in the GHMP with Liz Kristensen, Manager, Workforce Planning and Performance Monitoring while Barbara had a placement in the Education and Training Network with Brenda Bradbery and Jane Street which no doubt provided a good grounding for their next career move.



From Left: Our two new graduates Michelle Bernardo and Barbara Jones

The GHMP is a major component of the Area's Workforce Development Plan in addressing our needs for future Health Service Managers. Other trainees have gone on to fill positions such as Finance and Information Resource Managers in SWAHS and other positions in the NSW Health system.

If you would like further information on the GHMP, contact Warren Westcott, Coordinator of the SWAHS Program on warren.westcott@swahs.health.nsw.gov.au or go to the Learning and Development website at <http://mscu-web10/LDS-ACHSE-Graduate-Health-Management-Program/default.aspx>

BICMAT, BICMAIL & IDAlert - Are they contagious?

At the final Chief Executive's Innovation Forum for 2008 held on Wednesday 19th November, Dr John Gallagher, Supervisor of Training, Intensive Care Unit, Westmead Hospital spoke on the topic of *BICMAT, BICMAIL & IDAlert*

Dr Gallagher has long been dedicated to improving infection control practices in clinical environments. His concept for improving practices in hospital environments has evolved into an automated system that may be used as a tool for teaching 'best practices' in infection control to health care workers.

BICMAT (Bedside Infection Control Monitoring and Training Tool) is a device designed to reduce the number of hospital-acquired infections. It was developed to allow the monitoring, training and improvement of infection control practice of Health Care Workers in the intensive care unit and other clinical settings. It allows for computerised real-time assessment of good and bad hygiene practice, by monitoring sequence of events prior to patient contact.



In the past 12 months, new essential features have been added to BICMAT from which a new technology named BICMAIL has emerged. Although BICMAT performed accurately with good correlation in the simulator, the system was bulky and cumbersome and as a result the light weight BICMAIL system was developed that is more adaptable in a clinical setting. BICMAIL retained BICMAT's objective to measure and document Infection Control practices, albeit in a modified and downsized form.

IDAlert is another device that displays (graphical or otherwise) of real-time (or near realtime) infection control and microbiological data at the user interface with added interactivity that allows on-screen display and printing of lists for clinical or managerial use. Data is displayed as prevalence, index or percentage of patients contaminated with a particular organism. The device could be instrumental in the provision of knowledge to ward staff about the infection control risks that lurk in the immediate environment.

Dr Gallagher provided a live demonstration showing a real time SWAHS Infection Control online report.

Lithgow Health Service

IN MEMORY OF JESSIE SCHLEIBS

On 2nd November 2008 the staff, patients, volunteers and visitors of Lithgow Hospital were saddened to hear of the sudden death of Jessie, a highly respected member of the United Hospital Auxiliary Branch., and tireless worker for the Hospital Coffee Shop.

For more than 17 years Jessie had been an integral part of the Auxiliary holding down positions as Secretary, President, Coffee Shop / Kiosk Buyer and tireless fundraiser. Jessie endeared herself to all who knew her for always being cheerful, helpful and compassionate.



During a recent hospitalisation in Nepean, the staff of Lithgow sent flowers to Jessie, delivered by a member of SWAHS staff. Jessie had such an impact on this staff member that she described Jessie as 'one of the loveliest ladies you could ever wish to meet'. This truly summed up Jessie in every way.

Staff and patients of Lithgow Hospital are extremely grateful for having known Jessie who will be long remembered for her invaluable service to the Hospital.

Heartfelt sympathy is extended to Jessie's family.

Your most memorable moment this year

What's your most memorable moment of 2008?

The Sydney West Weekly invites all SWAHS teams and services to make the first 2009 edition of the newsletter their own.

Simply submit your photographs and/or short articles which, for you, captures the essence of working in SWAHS in 2008.

Articles can be serious, funny or quirky—you choose the mood!

Articles can be:

- ◆ emailed to weeklynews@wahs.nsw.gov.au
- ◆ faxed to (02)4734 4201
- ◆ sent by internal mail to Staff Newsletter, Public Relations, Nepean Hospital.



Please send no later than Wednesday 31 December 2008.

THE GERALDINE FUND

Dear Colleagues & Friends of Westmead Cancer Care Centre,



“A Special Idea for your Christmas Gifts”

Some people have the most extraordinary bad luck.

Imagine being 26 years old, having two children under the age of 18 months, having had your partner walk out on you for someone else, being made redundant from your job because the business goes bankrupt and then, on top of it all, being diagnosed with cancer.

If this sounds like an invention, it isn't. It is an accurate description of just one of more than 20 families that the Geraldine Fund has helped to rescue during 2008.

The Geraldine Fund was set up because our staff recognised that some of our patient's needed urgent financial support for their young families when they were diagnosed with cancer. We also recognised that there is a loop hole in the system and one for which there really is no substitute charity or welfare organisation that can respond with the necessary speed in these tragic cases.

In the year 2001, the Geraldine Fund had a significant infusion of funds from Our Lady of Lebanon Church in Parramatta as a result of a youth charity drive during Lent. However, these funds are rapidly dwindling and, unless we replenish them, we may well not be able to help families after 2009.

We are writing to you to consider a very special gesture this Christmas. Instead of gifts to fellow staff members, friends and even family, why not consider diverting those funds to the Geraldine Fund, and indicating that in your Christmas card? It is hard to imagine how a gift could be more highly valued.

We very much appreciate your consideration of this special request and trust that you and your families have a very joyful festive season.

Yours sincerely

Richard Kefford
**Professor of Medicine
Trustee**

A/Prof Paul Harnett,
**Network Director, Sydney West Cancer Network
Trustee**

The Geraldine Fund is a trust fund of: **The Millennium Foundation** ACN 050 329 925, PO Box 74, Westmead NSW 2145
CFN: 16180, TEL: (02) 9845-6289 FAX: (02) 9687-0956 EMAIL: foundation@wmi.usyd.edu.au

(Please print)

NAME: Dr/Mr/Mrs/Miss/Ms/Other _____

ADDRESS _____ POSTCODE _____

PHONE: _____ EMAIL: _____

I enclose \$ _____ as below (please circle payment option): cheque money order cash
(payable to the Millennium Foundation)

or Please charge the above amount to my credit card as follows:-

Visa MasterCard Bankcard Amex Diners (please tick one)

Credit Card No.

Card expiry date ____/____/____ Signature _____

Donations to The Millennium Foundation are allowable deductions and a receipt will be forwarded to you if donation is over \$2.00

I do not wish to receive information from The Millennium Foundation.

Celebrating Carers:
"Living Well" this holiday season

Tues 9th Dec 08



- Take some time for yourself and join other locals who also care for a loved one with a life threatening illness.
- Enjoy morning tea and light lunch in the relaxed and beautiful atmosphere of the Penrith Regional Gallery & The Lewers Bequest. The event will include a guest speaker and opportunity to access information about support services in your area.

DATE: Tuesday 9th December
TIME: 10:30am – 2pm
VENUE: Penrith Regional Gallery & The Lewers Bequest.
86 River Road, Emu Plains

This is a FREE event. Please contact us if you need assistance with transport.

RSVP is essential by 25th November to Melinda Blundell on 93542062 or melindab@nswcc.org.au



NOTICE TO CONTRIBUTORS

Contributions to Sydney West Weekly are welcome on current and new initiatives, policy information, staff development, research, safety, quality, clinical and administrative news.

CONDITIONS:

- Articles should be approved at the **highest appropriate level** before being submitted.
- Publication of any item is at the discretion of the Editor and Chief Executive.
- Items may be edited for length, style, content and/or quality.

SUBMISSIONS:

A checklist for submissions is available via the Intranet under

Public Affairs.

Please send your items by email to:

- weeklynews@wahs.nsw.gov.au

OR by internal mail to:

- Sydney West Weekly, c/- Public Affairs Department

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Thank you from the community

Professionalism was outstanding

Dear Dr England

Sorry for the delay in sending you these documents.

Thank you for your help in making R's last days trouble free. Without your professional help and advice I would have been found wanting on how to have cared for R.

Also the professionalism of the staff at Katoomba Hospital was outstanding.

Yours faithfully,
MW

(sent to Blue Mountains Hospital)

So lucky to have such gifted, experienced people

To all the wonderful ladies at nurses and medical staff, who worked tirelessly throughout the night to save our baby daughter, Lorena, we are eternally grateful.

Your abilities not only to reassure and calm us, the parents; look after our daughter's medical needs and coordinate the NETS retrieval was exemplary.

We could not have entrusted the health and well being of our daughter in better hands.

We are so lucky to have such gifted, experienced and caring people at Blue Mountains Hospital.

With heartfelt gratitude.
P & JDC

(sent to Blue Mountains Hospital)

Sent to Auburn Hospital Staff

“Thank you for caring for our Mother”

We would like to thank the Doctors, Nurses and staff for their care of our Mother at Auburn Hospital during October and to thank Leonie (Social Worker) for her help in finding respite accommodation for her recovery.

She is coming on fine.

Yours Sincerely

GR & AO

We will never forget you

Dear Karen

God bless you

Thank you for all your kindness.
We will never forget you.

Love.

JK

(sent to Blue Mountains Hospital)

Thank you from the community (cont'd)

Wonderful qualities showed by you as a wonderful team

To the wonderful people in Nepean NICU,

We cannot thank you enough for all the care you have given Amy in her 83 days here at Nepean NICU.

We are so grateful to you all that we can finally take Amy home as a healthy baby.

Your kindness, enthusiasm, dedication, professionalism are all wonderful qualities showed by you as a wonderful team.

We couldn't have asked for better care for Amy and we

are so thankful to each and every one of you who has not only cared for Amy but also cared for and supported us as her family.

Thank you again from the bottom of our hearts.

We looking forward to bringing Amy back to visit regularly so you can see how well she is progressing. We are so excited to finally be going home but we will miss you as well.

Love from.
D, T, J & AJ

(sent to Nepean Hospital)



I shall forever be in their debt

Dear Sir/Madam

Re: Patient Mrs LK

My wife was a patient at your hospital in your Breast Cancer and Dialysis area.

L passed away on 2 November 2008.

I and my family, B & L, would like to say thank you for the care and attention your staff gave to her during her time there.

They are a credit to your hospital and would you please forward my thankyou's to them at your earliest convenience.

I shall forever be in their debt.

Yours faithfully.
KJK

(sent to Westmead Hospital)

We in Springwood are truly blessed

To the Director of Nursing

I wish to convey my most sincere thanks to you and your wonderful staff.

The care and attention I received from every one of the staff was amazing. I simply cannot praise their work highly enough.

We in Springwood are truly blessed having such a beautiful hospital in our town.

Thank you all so very much.
DVH

(sent to Springwood Hospital)

Thank you from the community (cont'd)

Parramatta Advertiser
26 November 2008, page 16

Hospital gives a great service

I have recently returned home for a short stay in Westmead Hospital and I felt I had to mention what wonderful service I received.

One hears so much negativity these days about hospitals but little praise.

Personally I cannot speak highly enough of my experience, right from the two ambulance people, to the people in the

emergency and then to the ward where I spent three days.

I have been a patient at Westmead on other occasions and always have had great care, so I decided it was time to show my appreciation, via our local paper.

**Mollie Burns
Granville**



Praise for the care provided by staff at Westmead Hospital.

Sent to Mrs Betty Starkey, Pink Ladies Coordinator,
Blacktown Hospital

Outstanding Assistance

Dear Betty,

I would like to take this opportunity to thank yourself and your group of volunteers for their outstanding assistance to the Blacktown/Mt.Druitt Clinical School for the student OSCE exams on 30/10/2008 at Blacktown Hospital.

The School very much appreciated the volunteers for their time and the professional manner in which they displayed. We would also like to acknowledge the extra effort taken to supply the lovely morning tea which was enjoyed by all of the organisers and Examiners in both of our exam venues.

We look forward to continuing this wonderful relationship with the very valued members of the local community.

With much appreciation
Associate Professor Lukas Kairaitis
Sub Dean
Blacktown/Mt Druitt Clinical School

Thanks from the family of tiny Tobias

Dear Elizabeth, Morgan, Lyndal,
Jennifer and the other staff who
looked after our tiny Tobias,

Love and best wishes.

P, S, C & TB

(sent to Nepean Hospital)