Celebrating our Nurses & Midwives

MURRUMBIDGEE MATTERS
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THIS ISSUE:
COVID-19 UPDATE

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

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

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

Our services are provided through:
• 1 Rural Referral Hospital
• 1 Base Hospital
• 8 District Health Services
• 5 Community Hospitals
• 16 Multipurpose Services
• 2 Mercy Care Public Hospitals
• 12 Community Health Posts
• 1 Brain Injury Rehabilitation Service

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

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OUR VISION
Wellness is our Goal
Excellence is our Passion
Our People are Our Future
The World Health Organisation has declared 2020 the International Year of the Nurse and the Midwife. This presents a unique opportunity to recognise and showcase the work and contributions of nurses and midwives to patients and to the health system more broadly.

Nurses and midwives are the cornerstone of health systems, providing skilled and compassionate care and leadership around the clock. Over 50,000 nurses and midwives work across New South Wales hospitals and health services, providing safe, quality care for the people of NSW.

The International Year of the Nurse and Midwife coincides with the 200th anniversary of the birth of Florence Nightingale. Florence Nightingale has been described as a caring and trailblazing British nurse, statistician, social reformer and leader of improved health care who is widely regarded as the founder of modern nursing.

**International Day of the Midwife**

International Day of the Midwife is an annual observance held on May 5 in more than 50 countries around the world. This is an occasion for midwives to celebrate their profession and for us all to recognise the work of midwives and their contribution to maternal and newborn health.

We thank every midwife working across Murrumbidgee Local Health District (MLHD) for their ongoing commitment to high quality care and the dedication, skill and compassionate support you provide to women and their families.

**International Nurses Day**

International Nurses Day is an international day observed around the world on 12 May each year, to mark the contributions that nurses make to society.

On International Nurses Day, MLHD acknowledged the compassion, professionalism, and round-the-clock commitment of nurses caring for patients in the public health system. We celebrate and appreciate nurses, and the important role of nursing across the world on this day, and every day.
Before he embarked on his nursing career, Jeff Hay spent decades working on the family farm near Blighty, a tiny town with a pub and a footy ground between Finley and Deniliquin.

Every day – rain, hail or shine - Jeff, his brother and his parents were up at 5am, ready to encourage their 400 cows in for milking. He says it was mostly good fun, but then an aunt visited and got him thinking. She was a social worker and it occurred to Jeff that he’d also like to have a positive impact on people’s lives.

At the age of 35, having not studied since high school, he left Maral Dairy on a bold new mission to become a nurse, studying at TAFE and then university, gaining experience in small country hospitals, regional medical wards and city intensive care units.

Now 50 and a registered nurse at Tocumwal Hospital, Jeff says farming proved to be a surprisingly good background for nursing.

“You’re very self-reliant on the farm – if you don’t do the work no one else is going to do it,” he says.

“And farming is good for teaching you time management and being flexible too. In hospitals, your day can change from one minute to the next and it’s the same on farms; sick cows, equipment braking down, fences needing to be fixed. You need to change your plans in a moment and you never know what could happen.”

In four years at Tocumwal’s 22-bed hospital, Jeff has worked across its six acute beds, 24-hour Emergency Department and 16-residential bed aged care facility.

After 5pm, he’s often the registered nurse in charge, working with the support of an enrolled nurse but without the luxury of a doctors on site. The town of 2,000 people has one GP who visits during the week to do ward rounds, and shares a weekend on-call roster with doctors in Finley, Berrigan and Jerrilderie. The nearest referral hospital is a 50-minute drive away, in Shepparton.

“Over the weekend we can have 48 hours with no access to a GP on site and anything can walk in the door,” Jeff says.

“You need a lot of experience to work in these places. It’s the same as a big emergency department but in miniature.”

He says the Emergency Department is often very busy, partly because Tocumwal is a popular tourist destination. Patients typically have chest or abdominal pain, blood pressure issues, need wound care or intravenous antibiotics. There is occasionally a car accident or a patient with sepsis. More rarely there is a patient with major trauma who needs to be stabilised before being flown out.

“I enjoy the ED stuff. You see people who come in sick and leave well. Sometimes people die well too, and that is an important contribution and part of my job.”

One of Jeff’s worst memories stems from a music festival which bought thousands of people to town. He’d only been working at the hospital for a few months and was on night duty with an enrolled nurse, who was very skilled having worked in country hospitals with minimal assistance.

“We had three unconscious patients brought in within two hours,” he says.
ABOUT NURSES
Nurses are men and women who are responsible (along with other health care professionals) for the treatment, safety and recovery of acutely or chronically ill or injured people, health maintenance of the healthy, and treatment of life-threatening emergencies in a wide range of health care settings.

HOW IMPORTANT ARE NURSES?
Nurses are directly involved in the decision-making process for the treatment of patients. They need to be able to think critically when assessing patient signs and identifying potential problems so that they can make the appropriate recommendations and actions.

A CAREER IN NURSING

"It was a nightmare – it was just shocking. I will never forget that night. We just dealt each patient on a case by case, and knew that if they deteriorated we’d have to get them airlifted out."

Jeff says one of the biggest highlights of the job is working with high-calibre nursing staff who are also good company.

“I think we are probably very lucky here in terms of the comradery among the staff. We have people who have been here 35 or 40 years and I always say that when people have been at a site for a long time it shows a good working environment.”

He is also grateful to have found a rewarding career that hasn’t forced him to move from the country.

“Tocumwal is a nice country town. You can look outside at night and see the stars. And you get to know a lot of people. I lived in the city as a young fella, but living in the country is much better, I think.”

SAM ALEXANDER
ENROLLED NURSE
BOOROWA MULTIPURPOSE SERVICE

As a young girl, Sam Alexander adored her grandmother. She loved listening to her stories, particularly about her time as an enrolled nurse.

“We were very, very close,” says Sam, who as an adult working in retail, became her grandmother’s carer for as long as she could manage it at home.

“When my grandma went into care, it relieved a lot of the burden we were experiencing at home and I was so grateful to the nurses for what they did,” she says.

“We would watch the nurses and grandma would say to me, ‘You could do what they’re doing, you know’. After she popped away I wanted to do something that mattered, and so I studied to become a nurse.”

It was a decision that proved a brilliant career move for Sam, 30, who recently qualified as an Enrolled Nurse and works for the Boorowa Multipurpose Service (MPS), north of Yass in the Murrumbidgee Local Health District.

Sam says the MPS, which serves a population of about 2,500 people, has a 12-bed residential aged care facility, a hospital with six acute and two emergency beds and an outreach community nursing service. She often works evening shifts, showering elderly people and getting them to bed, giving acute patients medication or helping out in an emergency.

“Most of my work is in residential aged care and I love that,” she says.

“I wanted to work with older people; they’re my favourite. I always have understood them and found them easy to talk to. And they always have stories to tell you and they can be really, really funny. You can have a really good laugh with them.”

Sam received a NSW Health Excellence Award early in her career, which kept her enthusiasm high.

“It was lovely because I hadn’t been a nurse very long and I was trying really hard and wanted to do a good job, so it was validating to have people notice.

“And now, at the end of a shift, when other nurses say, ‘Thanks for your help tonight, you made a big difference’ – that makes it all worth it.”

She says the biggest challenge she faced initially was the death of residents she became close to, but she found her own way of rationalising their loss.

“As they get sicker and sicker, you can see they don’t want to be like that, and eventually passing away becomes a way of moving on. I always imagine heaven being somewhere where you can be what you want to be – you can run around and be young again.”

Samsays she’s proud to work in a small facility that provides an invaluable service to local people, who would otherwise need to travel 90 minutes to Canberra. She says local people enjoy the continuity of care, provided by an exceptional team, who are very dedicated.

“I don’t know what the town would do without the nurses here,” she says.

“We get to know the people in the community and they’re very supportive.”

2020 YEAR OF THE NURSE
When Lyle Brew talks about work, the word ‘rapport’ comes up frequently. It’s clear that the endorsed enrolled nurse from Young District Hospital enjoys getting to know his patients, and that whenever possible, he manages to have a good time with them.

“Every day is pretty good and you meet some nice people. I like to joke with my patients a bit, but if you joke with people you’ve got to be able to take it as well,” he says.

“I’ve been here a while so I get to see the ones who keep coming back. If they’re here for a blood transfusion, I’ll get them a coffee and say hello.”

It’s important to Lyle, 51, that his patients find him approachable, so they are quick to tell him when they are in pain or if they need anything. It also gives him the opportunity to learn from patients’ wisdom, knowledge and experiences, but that doesn’t always pay off.

“I do some metal detecting occasionally so the oldies would always tell me to go and where to look. I went all the way to Urana once because a bloke said there were some old Chinese gardens. I found a hammer.”

Lyle has spent most of his 20-year nursing career as an assistant in nursing in aged care, with a short break working in a hardware shop. Achieving a NSW Health scholarship while working in Lockhart enabled him to study further – enjoying placements at Holbrook, Crookwell and Young – and become an endorsed enrolled nurse.

As a student at Young District Hospital, he enjoyed every opportunity to contribute. He remembers being thrown into the role of scribe during his first emergency, documenting the timing of every action, drug administered and treatment as a man had a heart attack.

Now, he works on the hospital’s 14-bed medical ward, where he likes to get in early and plan when each of his patients’ observations are due. He supports registered nurses with medication rounds or paperwork like referrals, helps patients with showers and makes fresh beds. He inserts cannulas, runs bloods to pathology, supports patients receiving blood transfusions, and assists the midwife as required. If there’s an emergency, he heads with his colleagues to the emergency department.

“What’s great is that every day is something different. I like to keep my finger on the pulse and know what is happening, because once a patient comes onto our ward they are our responsibility,” Lyle says.

“I like to get into work early to be able to catch up with my colleagues, and that way if they’re busy I’m an extra set of hands. They reciprocate and help me out too. The staff here are really wonderful.”

Lyle has no desire to climb further up the career ladder. He enjoys having time to build rapport with his patients and feels hugely rewarded when they appreciate the quality of his care.

“Sometimes you get emails from the bosses saying which nurses have been acknowledged by people on the ward; that’s great – I love that,” he says.

“One nurse here calls me the golden boy, so there’s a bit of friendly competition.”
Fiona works both clinically and is the team leader of the unit. She is available to attend rapid response calls when needed and is the Advanced Life Support team lead and instructor and support and mentor for new and junior staff.

She is also the team lead on National Standard 6 Communicating for Safety, collaborating with a multidisciplinary team as well as being the Chair of the Staff Advisory Committee.

Fiona has been in this role for 20 years and has been in health for 24. She spent some time working in Darwin where she was exposed to many amazing clinical situations working in various areas including medical and surgical wards, rural, emergency, neurosurgical high dependency and acute C-spine through to intensive care.

“These roles were so valuable clinically but also gave me the opportunity to connect with such a variety of people. These experiences enabled me to have a broad scope of practice which I am forever grateful for,” Fiona said.

“Working here in Griffith, in a mixed unit, it’s of tremendous value. Working in an ‘in charge’ role, outside of clinical skills, the skill of working, dealing and connecting with people is the most valuable.”

Fiona says that being able to drive staff wellness, communication, empathy/kindness and collegiality through the Staff Advisory Committee, is something she is very passionate about.

“Putting value in these things, is not only positive for ourselves as clinicians and for our career longevity, but improves the patient experience and care.

“Our first Griffith Base Hospital Staff Week was very positive and something I am extremely proud of, and excited that it will now be an annual event,” Fiona said.

On a personal note Fiona is a self-declared ‘podcast junkie’ with a keen ear for anything around critical care, human factors and compassion. She loves anything handmade and her favourite animal is the wombat.

Fiona’s personal motto: Press on regardless. Never give up and stay positive. Be kind always.

Feeling unwell?
GET TESTED!

call 1800 831 099
It’s International Day of the Midwife and we’d like to introduce you some of our wonderful midwives.

**BEC STIMPSON**

Bec’s role is providing antenatal, birthing and postnatal care to women at Temora Health Service.

Bec moved back to Temora in 2012 after working at the Wagga Wagga Base Hospital where she was based after graduating in 2007.

“One of my career highlights has been to have the opportunity to travel around Australia and work across many facilities for two years prior to returning to home town and settling down here.”

“We are very lucky to have such a wonderful and supportive community here in Temora. We love providing care to the families we have the pleasure of meeting along their pregnancy journey.”

“When I am not at work I love spending time with my family going away in our caravan.”

Bec’s favourite quote is ‘Live well, love much and laugh often’.

**STEPHANIE MCMASTER**

Stephanie loves babies so much she decided she wanted to work with them.

Stephanie started as a student midwife at Young Health Service three months ago, having spent three years working in a medical ward and theatre. She now needs to attend 30 births and pass all of her university assignments in order to become fully qualified.

Stephanie says her midwife training will help her to adapt to any situation and handle stress well.

So far, so good, as Stephanie has worked confidently alongside midwives to provide antenatal and postnatal care, and assisted during labour and birth.

She’s pleased to have made the career transition to working exclusively with mums and bubs, describing the first birth she attended as being “so exciting” and is keen for the community to know “midwives are the best”.

When she’s not at work, Stephanie enjoys snowboarding and doing puzzles.

She and her husband have two well-loved dogs and Stephanie also has a green thumb, particularly when it comes to indoor plants.

Her favourite saying is fitting for a midwife, who needs to be ready for any number of challenges at a moment’s notice. It’s something Forrest Gump’s mother told him often: “Life is like a box of chocolates. You never know what you’re gonna get.”

**VICKY CODDINGTON**

Vicky is a registered nurse and midwife who laughs that she’s been in the industry since “last century”.

That’s not entirely true, as Vicky started nursing in 1977 and in midwifery in 1983, gaining experience at Sydney Hospital before starting with Young Health Service in 1986.

While Vicky’s extensive career has offered many great rewards and interesting challenges, she’s never forgotten helping to save the life of a new mother who had a seven-litre postpartum haemorrhage.

Vicky spends most of her time at work giving antenatal classes, providing prenatal and postnatal care, and supporting women during labour and birth. She is also a Nurse Immuniser and trained lactation consultant.

Given her ability to think clearly under pressure, it seems fitting that Vicky wears a few other hats at work, including that of Fire Safety Officer. Outside of work, her impressively broad skills set extends to being a professional, qualified wool classer, and helping out with other farm activities.

Vicky and her husband have two adult sons. Her dogs enjoy vigorous walks which double as her best thinking time, but she’s not one to dwell or worry unnecessarily. She is a firm believer in not worrying about things until they happen.
There is a significant date in Marilyn Wales’s history that will forever be etched into her mind – 19 January 1970. That is the day she turned up for her first nursing shift at the hospital in Temora. Both immaculate and a tiny bit uncomfortable, she was a glowing picture of pride, polish and starch.

“I had my four layers of starched uniform on – your nursing uniform, belt and apron and another belt all had to be starched - and I had my brown Halls nursing shoes,” she says, recalling that the sisters’ veils made them look a bit like the flying nun.

Marilyn, 66, who grew up in Harden and Temora, was 15 when she realised she wanted to help people, setting herself on a career trajectory advancing over more than 50 years through the private and public health systems and general practice.

Now the highly skilled grandmother of eight works in Harden as a Clinical Nurse Educator for the Murrumburrah-Harden Health Service, serving a population of about 2,500 from local villages. As an RN and first-line emergency care nurse, she works in both the general ward and emergency department, providing training as well as clinical care.

Ironically, much of Marilyn’s ambition was lit 20 years ago by an important nursing role outside of the hospital, sadly sent by fate. Her husband was diagnosed with non-hodgkins lymphoma; one of the most aggressive cancers, but also among the most treatable.

It was a terrible time for the couple – their youngest son was only 10 years old – and Marilyn remembers the treatment as being “pretty horrific”, but the experience boosted her confidence. From home, she managed his medications and maintained care of a central line; skills and knowledge that were beyond her scope of practice as an enrolled nurse.

Marilyn was inspired to head to university and study a Bachelor of Nursing.

“I had started with hospital-based training, where it was about learning on the job, and then through the uni degree I got the underlying knowledge about the science of nursing,” she says.

“To take that into the educator role, I felt I had the best of both worlds, and there was a lot I could bring from my past experiences.”

She enjoys “educating on the run”, using the hospital’s everyday presentations to educate by example. The facility has 13 acute beds and two in the Emergency Department, and is attached to a 20-bed aged care facility.

“We see everything from children through to maternity emergencies to a cardiac arrest or COPD (chronic obstructive pulmonary disease), to motor vehicle accidents, farm accidents that involve burns or chemicals, or anaphylaxis,” she says.

Marilyn is excited about local nurses developing their competency – as she has – in first-line emergency care, so they will be able to initiate some treatments without a general practitioner on site. Marilyn, and other nurses at Harden who have done the First Line Emergency Care Course, work within guidelines to provide care for a range of patients, including those with acute coronary syndrome, anaphylaxis trauma, sepsis and stroke.

It’s a valuable contribution to a community that has just three general practitioners with visiting medical officer rights to the hospital.

Fortunately Marilyn’s husband recovered from his cancer and 20 years later remains in good health. Nursing in a small town, however, means Marilyn and her colleagues are often the first to grieve the loss of a local life.

“Any death impacts heavily when you’re working in a small town. You experience the best and the worst of it.”
As a clinical nurse specialist in the Emergency Department (ED) at Griffith Base Hospital, Sherin George enjoys the unpredictable nature of his work. At a moment’s notice, he may go from setting a broken limb in plaster or suturing a wound, to intubating someone who would die without advanced life support.

“The most enjoyable thing about the role is that every minute is different,” he says. On some shifts he might treat several people who have had a stroke or heart attack, or maybe been injured in motor vehicle accidents. He also works with patients experiencing acute mental health issues, farmers injured in accidents, and elderly people who have broken bones due to a fall.

“We have had some bad situations, like two cardiac arrests presenting at the same time,” says Sherin, who has worked in the ED at Griffith for nine years and has a Masters degree in Emergency Nursing.

“We’ve also had a mass casualty event with many serious burns, where each patient needed pain relief, intubation and stabilising before being airlifted to tertiary care. That’s not something we see every day, but the staff here all did an amazing job working together and the outcome was really good.”

Sherin, 33, says patients who have bad outcomes will stay in his mind forever. As a father of three young children, he is particularly affected by paediatric patients who have been badly injured or have drowned.

“That is very stressful, but we have good support management, so every time we have a difficulty we sit and debrief. It is important to talk about those difficult situations.”

Working at a small hospital comes with its own specific challenges, particularly given that the first few hours of a patient’s treatment can affect their likelihood of survival, even after they’re transferred to a major tertiary hospital.

Sherin is responsible for coordinating the flow of patients through the ED and is passionate about achieving that without compromising quality of care. Without the luxury of having a laboratory open all night, or instant access to specialists or sophisticated scanning equipment, advanced clinical skills and the ability to prioritise are paramount.

“It’s all about staying strong, making sure your staff are looked after, and making sure the patient and their family all know what is going on.”

One thing Sherin prides himself on is his ability to keep calm in a crisis and to ensure the ED is a pleasant environment to work in despite the natural stressors.

“If somebody starts to panic it only makes the situation worse and you lose control of the situation,” he says.

“I always want things done in a proper calm, ordered way, with good communication between nurses, doctors and team leaders.”

About 25,000 present to the local ED every year and Sherin says the demand is growing. In the future, he is keen to use his knowledge and experience to upskill and train other staff and students.

“Given that you need to have such a big skills set, when a new graduate nurse comes to the department we start building on their knowledge, step by step. We are keen to help them move up the ladder,” he says.
At the age of 16, Emma Evans left school to care for her mother, who had terminal breast cancer, and keep domestic life as normal as possible for their large family.

She says she never questioned taking on such a demanding role; it was just what she had to do. Her father was the family breadwinner, her two older brothers had just started trades and her two younger sisters were still at school.

Emma’s support enabled her mum to stay living at home with their family until just a week before she died. While Emma knows her mum felt guilty, having to rely on her, she also found great comfort in Emma being her constant companion and carer. For both mother and daughter, it was precious shared time.

“Our conversations had real depth and meaning, and my mum said so much of value; I know it meant a lot to her to know she was being heard and understood,” says Emma, who grew up on a farm at Gocup, near Tumut.

Now, a nurse working in palliative care, with two young daughters of her own, Emma, 38, remembers that sad time with fondness and gratitude, as she reflects on the impact it had on her life and career. After her mother died, she was torn about returning to school, until the manager of the local nursing home learned of her predicament and offered her a job.

While there, she studied to become an Assistant in Nursing. Supportive mentors encouraged her to study Enrolled Nursing and then she went to university to become qualified as a Registered Nurse. “There was no point I said I’m going to be a nurse, it all just sort of happened,” she says.

But once she found nursing, she was drawn to palliative care, given that breast cancer took her mum at the age of 42 and her mother’s three sisters all before the age of 50.

“That familial history drives me to make sure people are given a good opportunity for a good death,” she says.

“There is such a thing as a good death and it looks like what the patient wants it to be. “They have everything in order. They have their family by their side in their place of choice, whether home or hospital – where ever they want to be.

“Their symptoms are well managed. They are pain free, at peace, and not afraid. The family are well informed and of course they are well supported by a palliative care team that helps them navigate such a trying time.”

Such is Emma’s passion that she is studying a Masters degree in order to become a Nurse Practitioner specialising in palliative care, which – among other things – will enable her to work autonomously and prescribe and administer important pain relief that’s normally the remit of doctors.

As a Transitional Nurse Practitioner, Palliative Care, at Tumut Community Health, Emma works with inpatients and community patients across Adelong, Batlow and Tumbarumba and nearby villages.

“Most of my work is out in the community supporting patients to remain in their own homes for end-of-life care,” she says.

“I also go into hospitals in those small towns to support staff there with symptom management; a patient might arrive in a pain crisis and we can sort that out while they’re an inpatient and then organise a discharge plan to get that patient back to where they want to be.”

Emma is very happy to be living back in her home town with her husband and their daughters, and within an hour of her Dad and four siblings.

She will always miss her Mum, who has continued to have a positive impact on her life.

“In the last few days of her life, my Mum said ‘One day I’ll repay you for this’,” Emma says.

“In some ways it feels like she has done that, just by guiding me towards this career.

“She has allowed me to understand that what I do is something really unique and important. It is so much more than just a paying job.”

WAGGA WAGGA: PJ DAY

No, the team from our Aged and Extended Care team in Wagga Wagga haven’t forgotten to set a collective alarm. They are carrying on their recent tradition of themed days to keep their workplace colourful during COVID-19.

Recently they decided it was pyjama day and simply came in to the office as if they have stepped out of the right side of the bed.

You can find out more about the fabulous work they do both in their pjs and other attire at: www.mlhd.health.nsw.gov.au/our-services/aged-care-services
OUT OF ADVERSITY

I know it seems like 2020 has been the most horrific year many of us has ever experienced. Starting with bushfires, and now, communities in virtual lockdown because of an unseen virus that spreads among us. Invisible, attacking our communities. Potential to strike anywhere.

As the Chief Executive for Murrumbidgee Local Health District during a time that may seem to be a health catastrophe, I’m proud to say that I’ve witnessed the most commendable can-do attitude from staff bravely facing each day at work, and from our communities abiding by the restrictions to protect each other.

This most recent health crisis we face has seen our values and behaviours challenged and our work modified. And so this pandemic has born witness to an unprecedented exploration of new ways to communicate and connect with people. It has enabled our District to springboard into new models of health care, in a remote setting, using technology we would never have previously thought possible.

We have focused on maintaining a high quality delivery of services to our clients when and where they need them.

TECHNOLOGY

While this COVID-19 pandemic has prevented us from going about our daily business as usual and connecting socially, it has also given us the boost we needed to really, truly delve into using technology to connect.

We have introduced new cutting edge technology that enables us to monitor people in their own home. We have begun connecting with people via all manner of hand held devices, removing the need for them to travel, and facilitating consults in comfort when and where suits them best.

We have seen an abundance of creativity, compassion and care in the ways that staff have been keeping our aged care residents connected with their loved ones.

I was rapt to hear stories about residents in our aged care facilities being able to connect with their loved ones through technology such as Zoom, Skype and Facetime. Residents have been thrilled to be able to speak with and see their family members, some who live many kilometres away.

BEHIND THE SCENES

Behind the scenes there has been an enormous amount of work going on to ensure that we are able to maintain services to our patients, and people who need health services in communities, and prepare for what may lie ahead. The preparation and work that went into changing policies virtually overnight, to ensure systems were in place to protect the health of our valuable health workers on the front line, was admirable.

Ensuring a consistent and steady supply of Personal Protective Equipment (PPE) alone has been a huge body of work and we have a vigilant team working daily to ensure that our staff have the necessary PPE they need to go about their work safely. Not only is PPE required for working with people who have been positively identified with the virus, it is also needed in a wide range of settings where it had previously never been required. Sufficient ongoing supplies are imperative to ensure continuation of work from frontline testing, right through to surgical services.
Our workforce too has had the confidence to know that we are doing everything to ensure that they are protected and supported during this time.

NEW MODELS OF CARE

The COVID pandemic has also provided an opportunity to develop new models of care, which ensure safe access to healthcare in the comfort of the patient’s own home. Wearable devices have enabled health professionals to keep tabs on patient’s vital data while they recover at home, or forewarn of issues that need to be addressed.

The wearable technology was developed by a Swiss company and enables health professionals to remotely measure a patient’s vital signs including heart rate, blood oxygen, skin temperature and heart rate.

This use of innovative technology will help people in self-isolation stay connected, while we monitor their condition using smart phones and devices. It also keeps our staff safe as they can monitor people remotely.

Virtual Clinics, such as the virtual Pulmonary Rehabilitation Clinic have emerged, reducing travel time, and proving to be very popular with clients and staff alike. The program supports people with respiratory illness to maintain their current lung function and supports optimal health over the winter period. It provides them with the confidence, knowledge and skills to self-manage their condition, improve their quality of life and prevent hospitalisations.

VIRTUAL VISITS

While I have had to put many of my visits to our facilities on hold, I have had the great pleasure of a virtual tour of the Stage 3 Wagga Wagga Health Service Redevelopment. The tour offered a ‘walk through’ of the new facilities the Redevelopment will bring.

I have been able to connect with our Local Health Advisory Committees and Councils through our Skype and teleconferencing facilities, providing the opportunity for me to hear directly concerns in the community, and provide updates to these concerned representatives in our community.

We have also begun live streaming our press conferences through our social media platforms to enable everyone across the District to hook in and hear first hand and in real-time what’s happening. I thank my colleagues Superintendent Bob Noble, Steph Cook MP and Dr Joe McGirr MP for their unwavering support during this time.

I was also recently introduced to TikTok and for anyone who has been following our TikTok challenge- it just goes to show you CAN teach an ol’ dog new tricks!

THANK YOU

I want to take this opportunity to thank each and every one of our staff members, and everyone in the community who continues to follow the guidelines of practicing good hand hygiene, physical distancing, and getting tested if you fell unwell or have any of the symptoms.

Together we will beat this thing!

Jill Ludford
Chief Executive

“And once the storm is over, you won’t remember how you made it through, how you managed to survive. You won’t even be sure, whether the storm is really over. But one thing is certain. When you come out of the storm, you won’t be the same person who walked in. That’s what this storm’s all about.”

— haruki murakami
COVID-19 UPDATE
Murrumbidgee Local Health District (MLHD) applauds members of the public for doing their bit in helping to slow the spread of the COVID-19 virus.

While people in our communities are keeping safe by adhering to physical distancing guidelines and practicing good hand hygiene, health services across the region are playing their part to prepare for the next phase of community transmission.

Emergency Departments (ED), Intensive Care Units (ICU) and specialised treatment and isolation areas have undertaken scenario training and are well prepared to care for patients with COVID-19.

EDs are able to assess and test people who may have been exposed to COVID-19. Calling ahead ensures that appropriate procedures can be put in place in anticipation of your arrival.

Additional precautions are being undertaken with patients having procedures or presenting for outpatients and community care clinics.

Testing anyone who is unwell is now the main priority, to identify the virus early and prevent rapid community transmission.

MLHD encourages all members of the community to wash their hands with soap and water frequently and thoroughly (for 20 seconds) and stay away from crowds.

MENTAL HEALTH COMMUNITY SERVICES STILL OPEN
MLHD continues to provide Mental Health support to rural communities throughout the COVID-19 pandemic.

Director Mental Health Drug & Alcohol, Robyn Manzie says one of the key priorities during the COVID-19 pandemic is to keep patients and staff safe and supported, and therefore all community Mental Health and Drug and Alcohol Services will continue to operate during this period.

“Our key focus is to support people in the community and keep them out of EDs and hospitals as much as possible,” said Ms Manzie. “This reduces the risk of infection to them and reduce demand on EDs, Transport and the Mental Health Inpatient Units.”

People in our communities can access mental health support in a number of ways.

The Murrumbidgee AccessLine continues to operate 24/7 providing a telephone triage and intake service and the Mental Health Emergency Consultation Services (MHECS) continues to operate through EDs 24/7 with increased redeployed staff to cover all shifts and more staff on during the busier periods.

Ms Manzie said that Community Mental Health and Drug and Alcohol services would also continue to provide care into the community, although many of these services would now be delivered by telephone or video conference.

“Community teams will working with consumers to prioritise who receives a face to face service and who can be provided a service by the alternate means,” she said.

Anyone who needs to speak with a community mental health worker is asked to contact their support service through normal contact numbers.

HOW ARE YOU DOING?

If you are or someone you know is feeling mentally distressed and need to contact someone urgently, call our AccessLine on 1800 800 944.
TEMPERATURE CHECKS IN ALL HOSPITALS

As an added measure of security for our staff and patients, we introduced temperature checks for staff and visitors.

Infra-red thermometer checks take place at every one of our hospital sites.

The temperature monitoring is being conducted at access points to hospitals by staff using an approved temperature monitoring device to accurately measure the presence of fever.

In addition, there are screening questions including have you had contact with a COVID-19 positive case and do you have any flu-like symptoms?

If a visitor answers yes to any of these questions or has a temperature, they will be directed not to visit the hospital and to contact the MLHD COVID-19 Hotline on 1800 831 099.

If a staff member answers yes to any of these questions or has a temperature, the staff member will be placed on leave and asked to contact the MLHD COVID-19 Hotline 1800 831 099.

Additionally staff will be advised to stay home until the temperature resolves.

Staff are screened daily on entry to any facility and a different coloured sticker will be provided each day on their identification badge. This is in addition to daily staff wellness checks occurring at clinical handover, or the start of the day for non-clinical areas.


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We can:
• Give you the information you need about rural medical training pathways
• Help navigate a rural medical training pathway for your career
• Connect you to career advice from rural specialists

Contact Us
Ph: 02 8204 4607  Int Ph: 4607
Email: RRTHenquiries@nd.edu.au

An Australian Government Initiative

Rural Pathways to Post-Graduate Medical Training
WAGGA WAGGA
GRiffith
RIVERINA

TRAINING HUB'S NIMBLE RESPONSE

We held our breath, but it worked...from face to face to virtual workshop!

Like so many organisations during the pandemic the Riverina Regional Training Hub (RRTH) has significantly altered the way it has been providing support to medical students, junior doctors, their supervisors and mentors during the last couple of months.

The first weekend in May, Wagga Wagga and our region, was to have hosted medical students and junior doctors from across the state and interstate to provide information to them about rural medical training and careers in NSW. This was quickly switched to an on-line event. Over eighty students and junior doctors from around Australia registered to attend virtually. Medical students were welcomed from eight different universities and junior doctors from regional NSW hospitals. This seminar, held in collaboration with the NSW Rural Doctors Network and other organisations including NSW Health (HETI), GP Synergy and AdvanceMed, provided information on applying for training positions in hospitals around NSW, particularly regional Hospitals. Senior clinicians and staff from the Australian College and Rural and Remote Medicine, the Royal Australian College of GPs and Murrumbidgee Local Health District shared their experiences as rural doctors. In a first for the region an independent medical careers advisor provided advice on preparing applications for jobs in medicine and undertaking interviews. The full feedback from those who attended is being evaluated but initially the results indicate that it appears to have been most successful in helping these young doctors and students in understanding their future rural career options.

On a separate and important local initiative when every bit helps, a small local team has been involved in the development and printing of Personal Protective Equipment (PPE) for use by frontline health care workers (HCW). The RRTH 3D printer instead of producing anatomical models for teaching has been used temporarily to produce PPE. Dr Digby Allen, a junior doctor from Wagga Wagga Base Hospital and Ms Indianna Chant a year five medical student from the UNSW Rural Clinical School also here in Wagga Wagga have volunteered their time. Their persistence with problem solving has enabled a small but welcome contribution to ameliorating the local impact of COVID-19 on local health care workers.

Staff wearing face masks for long periods were finding them very uncomfortable. The solution has been to print a toggle (that suits all head sizes) to which the elastic earpieces can be attached and which sit across the back of the head. This has taken a bit of trial and error but to date just under 200 toggles have been produced and are in use locally. Production continues so that these can be shared further.

As well as producing toggles, work continues toward making headbands to hold face shields. This has been a more challenging project ensuring face foils fit to headbands and we continue to work on producing this PPE at a time when every bit helps!
Dear Staff,

The Murrumbidgee Local Health District Board thank you most sincerely for your care and compassion of our Murrumbidgee community in our journey through COVID 19.

You are better than all the rest because for you these extraordinary times follows disastrous bushfires and a continuing, soul breaking drought.

You continually step up to all that is put before you. Your determination to always do your best for your community is amazing.

As a Board we have often spoken of the importance of team work. What we are experiencing now takes team work to another level. Everyone has an essential role as we fight COVID-19.

With so much sadness and anxiety in our staff and communities it is hard to think anything good will come from this time. However we believe as a District we will emerge stronger and more confident in our abilities.

We will also learn from this experience which will led to better health care. “Back to normal” will look so different.

I am sure you will join with the Board in thanking all our Murrumbidgee Communities for their support in our journey. They have made sacrifices to give us the best chance to win this fight and to keep our staff safe.

Thank you for your part in our journey.

Gayle Murphy
Proud Board Chair
Murrumbidgee Local Health District

**BOARD CHAIR’S MESSAGE**

**MEET NARRANDERA’S NARELLE**

Narelle’s first interaction with the Public Health System was her birth at Narrandera District Hospital. She is a true “local”, having lived in Narrandera all her life. She is a retired Secondary School teacher who is still very active. Narelle is a town Councillor with Narrandera Shire Council, a committee member on several council committees as well as being on the Audit, Risk and Improvement Committee, a private tutor for students of all ages and an active member of two health committees (the Narrandera Local Health Advisory Committee and the Murrumbidgee Local Health District Board Sub-committee for Quality Care).

On top of this she is a supportive mother to her teenage daughter, Ruby.

Narelle has a positive and “can do” attitude, which she applies to activities throughout her life. At high school, she represented in athletics, hockey and softball to State level. Winning a Commonwealth Scholarship, she overcame the challenges of a working class environment and the tyranny of rural distance to achieve a Bachelor of Arts Degree from ANU. For 33 years she was an educator, as well as Teacher’s Union Representative and advocate for improvements for rural communities. During her early years of her career, she travelled extensively to places such as: South Africa, USA, Fiji and many European countries. (Visiting the Colosseum, climbing St Pauls Cathedral and kissing the Blarney Stone).

In the late 1980’s she was diagnosed with Multiple Sclerosis, but has never allowed this to dampen her enthusiasm. Soon after diagnosis she climbed Ayres Rock (Uluru) and turned her attention to community and committee work, rather than extreme pursuits.

Currently she enjoys gardening, reading extensively, adjudicating school debates, historical research and pursuing the many and varied issues raised by local citizens, committees and the Narrandera Shire Council with its differing responsibilities.

Narelle finds great satisfaction in her community endeavours, and the community has benefitted from her continuing pursuit of improvement and provision of equitable services and opportunities for all. Her spelling, punctuation and grammatical skills are renowned when editing printed material.
It was a glorious March day in Barham for the official opening of the new Multipurpose Service (MPS) by Justin Clancy MP.

The new facility has been operational since 2019 and the official opening was a chance to celebrate and formally acknowledge the hard work of the numerous people involved in the project.

Thank you everyone, including local artist and Elder Esther Kirby, whose delicate carved emu eggs and beautiful painting are on display at the MPS.

Murrumbidgee Local Health District provides acute health services, emergency department and community health services at the MPS.

MLHD partnered with experienced local provider of Residential Aged Care, Murray Haven Homes, to deliver aged care services for the community; 20 aged care beds were built including palliative care and respite, an increase in aged care beds in Barham by 10.

The Barham MPS includes:
- 24-hour care
- Inpatient service – six single inpatient rooms with ensuites, including palliative care
- Emergency department with telehealth facilities – two resuscitation/holding bays
- Triage room and Interview room
- Treatment/consult room
- X-ray facilities
- Flexible Community Health services – four consult rooms and one interview room
- Community programs – meeting/activity room
- Staff accommodation – three units
- NSW Ambulance - access for two vehicles

The project was delivered as part of the NSW Government’s $305 million MPS Program of works to upgrade existing or build new multipurpose facilities in rural and regional areas.
It started with a bit of fun, the team from the Emergency Department (ED) at Griffith Base Hospital showing off some dance moves on the social media craze Tik Tok and sharing it with the District.

Their performance brought smiles (and likes) to the faces of our viewers on the Murrumbidgee Local Health District Facebook page.

Our team at West Wyalong in the meanwhile had created a Tik Tok for a competition run by Bland Shire Council – for which they were well recognised winners of course. They decided to share it with us too thankfully.

Let the games begin.

We saw cool dance moves from our teams at Wagga Wagga Base Hospital’s ED and Emergency Medical Unit, from our District Office, from Deniliquin Hospital, Junee Multipurpose Service and Griffith’s Community Mental Health Unit to name but a few.

Added to this was the submission of entries of some groovy dance moves to celebrate Hand Hygiene Day the winner being our team at Narrandera Health Service.

Thanks for filming, posting and sharing everyone.

In 2018, the maternity team at Young, led by Clinical Midwifery Educator Jacqueline Cooper and Nursing Unit Manager Katrina Green, decided to run a six month Get Healthy in Pregnancy (GHiP) Project. The aim of the project was to improve referral statistics to the Get Healthy in Pregnancy Program and engage and educate the women seeking pregnancy care at Young Health Service, to improve their own and their baby’s wellness.

The Program offers participants access to an expert health coach who provides free telephone advice to build healthy eating and exercise habits, all from the comfort of their own home.

To ensure success of the project, all midwives working at Young were trained on how to deliver the program script to help increase the number of women agreeing to be referred to the service.

The team identified early that there needed to be a shift in the focus, from the woman to her unborn child - it was not about the woman and her weight but about laying the foundation for her unborn child – this was a light bulb moment for the team.

The team discussed the program with the expectant parents at the booking-in appointment, offering either the phone consultation package or the information package.

After three months the referral rate to the Program from Young was up to 64% and the team were feeling very proud of their achievements. At their program review session they identified two areas that needed to be addressed further. The first was to ensure women were phoned on the day and time that they had specified, to remind the woman of the call from the GHiP coaching service and to ensure the woman was available to take the call. The second was to give the woman the phone number that would be calling her from the coaching service. Many women do not answer calls from ‘unknown callers’ or accept calls from phone number they do not know.

The GHiP team also sent out a text message if a call was missed to identify who they were and left a number to call back on. The midwives also added a contact point at antenatal classes, where during the break in the sessions they would talk to the women about the Program and get their feedback, both negative and positive.

At the completion of the project there was a 55% referral rate which had improved by 51% - a great achievement. However the team from Young believed they still have a way to go. They identified other areas that could be improved such as pre-pregnancy education and encouraging women to follow through into the postnatal period.

And while the project period is completed, the team at Young are still referring at high rates to the Program and are continually looking at areas where they can keep building their referral rates.

The success of this project was due to a good understanding and knowledge of the program and of the Young community. They focused on engaging all of their team to proactively participate and moved the focus of the program from the woman to the unborn child. This is now embedded in the daily work activities.
MLHD's Multipurpose Services have many activities going on to keep the residents active and engaged, from craft and cooking, to dance and games. They are also using technology to connect with their families.

Murrumbidgee Local Health District (MLHD) is calling for support from the community with understanding the restrictions around visitors to the District’s Residential Aged Care facilities.

MLHD is asking families to work with us to keep visiting to a minimum for the protection of the aged care residents, patients, staff and families.

MLHD’s General Manager Aged Care Rosemary Garthwaite says the restrictions are in place to help protect elderly residents in aged care homes who are most vulnerable to the virus.

“We understand this is a difficult time and many people want to visit their loved ones, but we’re asking for the safety of our aged care residents, please think twice.”

Ms Garthwaite said the District’s Multipurpose Services have many activities going on to keep the residents active and engaged. They are also using technology to connect residents with their families.

“It’s really important that our residents stay active and connected, so our activities coordinators have been working with the staff in each facility to ensure there are lots of stimulating activities for residents, and we have also been quick to adopt technology to connect residents to their families through Facetime, Skype and Snapchat.”

MLHD is making exceptions for some patients and families based on their personal circumstances.

“Some of our residents are palliative or may need some additional support or connection with a special family member, so we are working with each family on an individual basis,” said Ms Garthwaite.

Anyone wishing to enter the facility to visit a loved one can contact their local facility manager to discuss their situation.
General practitioners, pharmacists and other health care providers across the Murrumbidgee region are calling for people to continue maintaining their routine health checks.

While people are encouraged to stay at home to stop the spread of COVID-19, some people are cancelling routine check ups and appointments which may put them at greater risk.

Wagga Wagga General Practitioner Dr Tracey Purnell said providers around the region are seeing a decline in patient numbers and this is a very real concern for people's health.

"We all know how important it is to practice physical distancing and to stay at home to reduce the transmission of coronavirus, but accessing health care and receiving ongoing medical support for existing medical conditions are acceptable reasons for you to leave home," Dr Purnell said.

"If you have a chronic health condition requiring regular management, it is important you continue to receive the care you need and maintain scheduled appointments with the various health professionals involved in your care.

"Equally important is consulting your GP if you notice something change or you have a health concern.

"Ultimately, maintaining regular health checks, during this time will help keep you well and out of hospital.

Vice President and Chair of the Royal Australian College of General Practitioners – Rural, and Glenrock Country Practice GP Associate Professor Ayman Shenouda said health care providers were safe to visit.

"All healthcare providers are practicing excellent infection control measures to ensure patients are in a safe environment, and some appointments can even be done over the phone," Dr Shenouda said.

"With both individuals and healthcare providers both following the national recommendations of good hygiene, social distancing and personal protection procedures, the risk of catching the virus while you're visiting your health providers is minimal.

"I would encourage people to call their local practice or healthcare provider to see if your appointment can be done over the phone or if you need to come in person," he said.

Murrumbidgee Primary Health Network's (MPHN) CEO Melissa Neal said a campaign highlighting this important health message launches across the region today.

"Several of the region's health professionals from a range of disciplines like general practice, pharmacy, pathology, allied health, mental health and ambulance are meeting with us regularly to collaborate around COVID-19 measures, and it was through these meetings we were alerted to a decline in people attending their scheduled medical appointments," Ms Neal said.

"Together we have developed a community campaign to encourage people to keep their medical appointments and regular health checks just as you would under normal circumstances.

"It’s an important health message. We want to ensure people can maintain their wellness and alleviate any unnecessary pressures on the hospital system," she said.

The campaign’s television commercial is available on MPHN’s YouTube channel here: https://www.youtube.com/watch?v=pZ5813jts-k.

"Doctors and health care providers urging people to keep appointments"
FaceTime brings great joy to great grandmother

Kath Alexander, 85, remembers when she used to pick up the phone and ask a switch operator to connect her call, back when she was living on the family farm near Urana. So sparky is the great grandmother that she even remembers the name of the lady whose job it was to pull the plugs in and out of the switchboard, and her old phone number – 47D.

Technology has come a long way, and being able to see loved ones while speaking to them has recently brought great joy and relief to Kath, who lives in a residential aged care facility was worried about any impact the coronavirus might be having on her family’s health.

The mother of seven children – three girls and four boys – lives at Urana Multipurpose Service, where activity officer Lorraine Bourke, has been using FaceTime to keep her in touch with family.

Lorraine says when she connected Kath to her family using Facetime “there was just the biggest smile on her face, ever”.

“She was getting a bit stressed about knowing how they were going, and you could see the relief on her face and she was just so happy. She was relieved to know they were all safe and well.”

Recently, Lorraine facilitated Kath meeting the most recent arrival to her clan – her fourth great grandson, Joseph David Alexander.

“Kath got to see bub in the crib over FaceTime the day before he went home from hospital,” says Lorraine, who was showered with texts of thanks from family afterwards.

Adding to the Kath’s joy, Lorraine also organized a photo of the baby, which she presented neatly framed.

“She got teary eyed, and then I nearly did,” Lorraine says.

Thank you!

Thank you to everyone who continues to provide support to our health care workers during this time. Your many notes and gestures of appreciation help to make our day!
Feeling unwell?
GET TESTED

call the COVID-19 hotline
1800 831 099

COVID-19 SYMPTOMS
Most common symptoms include fever and dry cough. Some people also experience sore throat, shortness of breath, or runny or stuffy nose.

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