

THE 19TH ANNUAL
NSW Health
Awards **2017**



AWARDING TODAY /
FOR TOMORROW

26 October 2017

Exhibition Hall 5 / Sydney Showground
Sydney Olympic Park



AWARDING TODAY /
FOR TOMORROW

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ORDER OF PROCEEDINGS

Aperitifs NSW Ambulance Quartet

Welcome Jean Kittson, Master of Ceremonies

Opening remarks

The Hon Brad Hazzard MP, Minister for Health and
Minister for Medical Research

Entrée served

Individual Award presentation

Volunteer of the Year

Team Award presentation

Patients as Partners

Delivering Integrated Care

Main course served

Entertainment provided by The Westmead Quartet

Individual Award presentation

Staff Member of the Year

Team Award presentation

Patient Safety First

Keeping People Healthy

Supporting our People

Dessert served

Individual Award presentation

Collaborative Leader of the Year

Team Award presentation

A Safe and Healthy Workplace

Health Research and Innovation

Excellence in the Provision of Mental Health Services

Closing remarks

THANK YOU TO OUR SILVER SPONSORS

DELIVERING INTEGRATED CARE

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KEEPING PEOPLE HEALTHY

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SUPPORTING OUR PEOPLE and A SAFE AND HEALTHY WORKPLACE

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HEALTH RESEARCH AND INNOVATION

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Message from the MINISTER FOR HEALTH

I am delighted to welcome you to the 19th annual NSW Health Awards.

Each year, our clinicians, managers, support staff, volunteers and others inspire us with their commitment to providing outstanding patient care and making a difference in people's lives.

The NSW Health Awards offer an important opportunity to thank our staff in the Local Health Districts, Networks and Pillars for their service and achievements in health care, and to recognise the local innovations that provide benefits for the broader health system and the people of NSW.

To all 166 entrants this year, I thank you for your dedication and contributions to improving the effectiveness, efficiency and accountability of the NSW public health system.

In 2017, new categories have been introduced to the Awards to better align them with the strategic priorities and core values of NSW Health.

All of the award submissions demonstrate your ongoing commitment to delivering health care focused on the needs of patients, carers and communities. This is, rightly, at the heart of everything we do.

Finally, congratulations to all finalists and winners. I am proud of your achievements and excited by what NSW Health has accomplished this year. I look forward to working with all of you as we continue to deliver world-class care now and into the future.

The Hon Brad Hazzard MP
Minister for Health
Minister for Medical Research



Message from the MINISTER FOR MENTAL HEALTH

The annual NSW Health Awards celebrate innovation, excellence and leadership across the health system.

I am delighted to see the number and range of projects submitted this year.

It is encouraging to see so many excellent projects showcasing innovation while providing high quality, safe mental health care programs.

The quality of nominations in the Excellence in the Provision of Mental Health Award is particularly outstanding and I congratulate all of our finalists and winner. The number of nominations for this Award grows each year.

The calibre of projects submitted by the Local Health Districts, Networks and Pillars highlights the commitment NSW Health has to placing consumers at the centre of the care we deliver across the state.

I congratulate all of the Award entrants, finalists and winners for their creativity, innovation and commitment to improving care for consumers. The work you do every day makes a meaningful difference to the lives of our most vulnerable. Tonight is a time to celebrate that work and dedication.

The Hon Tanya Davies MP
Minister for Mental Health
Minister for Women
Minister for Ageing



Message from the SECRETARY NSW HEALTH

It is with great pride we gather to celebrate the 19th NSW Health Awards.

The awards acknowledge the innovators in our health system achieving so much to make a difference to the care we deliver and enhance the patient experience.

It is wonderful to see so many inspiring people and projects put forward for recognition.

As we celebrate their excellence, it is good to be reminded of the work of previous award recipients. It is this continuing dedication to health innovation and collaboration that enables us to deliver high quality health care for the people of NSW, every day.

The Awards continue to grow, with a yearly increase in nomination numbers of six per cent from 2016, with 166 entries overall and 14 NSW Health organisations represented as finalists.

Sponsorship support is also growing. To our ongoing Silver Sponsors, Baxter Healthcare and Cerner, thank you for your continued support. I also acknowledge and thank First State Super and Microsoft, who have joined us this year as new Silver Sponsors.

I would like to congratulate all the finalists who have supported the work we are recognising tonight. I also extend my appreciation to all entrants in the 2017 Awards. Together, we will continue to generate ideas and innovation to improve the health and wellbeing of everyone in our communities.

You can view all of our finalists here: www.health.nsw.gov.au/2017symposium

Elizabeth Koff
Secretary, NSW Health

Award finalists



PATIENTS AS PARTNERS

Bridging cultures

Mid North Coast Local Health District

Based on the principles of partnering and collaboration, this clinical practice improvement project was established to address issues related to the high readmission rates of Aboriginal patients with Acute Coronary Syndrome. Presently, 61.5 per cent of Aboriginal patients with Acute Coronary Syndrome were re-admitted to hospital within 28 days of discharge, more than double the rate for non-Aboriginal patients.

To address this disparity, the project incorporated strategies that empowered clients in their own health care, such as education, lifestyle modifications, treatment and self-management.

The results of the initiative showed a 4.5 per cent reduction in readmission rates and an increase in patients reporting an improvement in satisfaction in their treatment and confidence in how their condition was being managed.



The Patients' Voice

Nepean Blue Mountains Local Health District

In a statewide first, The Patients' Voice project recognises the importance of safety of, and communication with, inpatients. Patients, families and carers were provided with a letter of introduction to the afternoon nurses' handover, which outlines what patient information needs to be captured and shared with the incoming nursing shift.

Post-implementation surveys and audits showed a 30 per cent decrease in clinical incidents due to patient information shared in the new protocol. Also, all patients that participated in the pilot of this initiative gave feedback that was 100 per cent positive.

The initiative is considered potentially applicable in broader health settings, both nationally and internationally.



V-DOTS - Unique client care for protracted TB regimens

Murrumbidgee Local Health District

Directly observed treatment supervision (DOTS) is currently considered world-wide best practice in the treatment of tuberculosis where patients are monitored in person self-administering their medications. While effective, this process is considered inefficient, inconvenient and potentially risky for exposure to the disease.

With V-DOTS, electronic media are used to monitor the observation process, where 'virtual clinics' replace the direct face-to-face interaction between client and clinician. This new process has several benefits including privacy and convenience for the patient, elimination of travel time and expense, as well as the eradication of cross-infection risk. Clients can negotiate appointment times wherever they are in the world and at a time to suit them and case managers.

Client and staff satisfaction in the initiative has been one-hundred per cent positive and the program is planned to be rolled out to nine other local health districts.

Award finalists



DELIVERING INTEGRATED CARE

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Community Eye Care in Western Sydney

Western Sydney Local Health District

Glaucoma and diabetic retinopathy (DR) are major causes of visual impairment in Australia. Glaucoma affects four per cent of people over 40, half are undiagnosed. DR affects 35 per cent of people with diabetes. In addition only 20-50 per cent of the population have regular eye examinations.

Community Eye Care is an innovative care model in Westmead Eye Clinic. Low risk glaucoma and diabetes patients undergo standardised assessments at community-based optometrists, and files are electronically transferred to Westmead for ophthalmologist review.

The initiative resulted in better outcomes by improving access to ophthalmic services through streamlined referral and assessment, improving communication between providers, and improving access to eye clinic services. 47 per cent of patients do not require a hospital appointment, resulting in improved capacity and more timely access for patients requiring eye clinic appointments.



Making Hospital In The Home Easier to Swallow

Mid North Coast Local Health District

In 2015, there was a limited access to speech pathology services for residential aged care facility (RACF) residents in the Coffs Harbour region. This resulted in increased hospital admissions, including swallowing-related conditions. The aim of the project was to reduce the number of RACF residents admitted to hospital with a swallow-related diagnosis by 65 per cent over seven months.

The project initiated a dedicated, intensive swallowing service which gave timely access to appropriate intervention for RACF residents.

The initiative resulted in a 79 per cent decrease in acute admissions from 3.6 to 0.9 per month, improved patient satisfaction, reduced average bed/days and cost savings.



Responding to after-hours domestic violence presentations at Shoalhaven District Memorial Hospital Emergency Department (SDMH ED)

Illawarra Shoalhaven Local Health District

With a significantly high reported domestic violence (DV) rate, the Shoalhaven does not have an afterhours psychosocial service for DV presentations. Analysis of one month of SDMH ED data indicated nine per cent of women presented with clinical indicators for domestic violence. Of these, 46 per cent received no psychosocial service.

A combined domestic violence and sexual assault (DVSA) on-call service was trialled to improve consultations by 70 per cent for DV after-hours presentations. Strategies included building the confidence levels of on-call and SDMH ED staff responding to DVSA after-hours.

Results showed significant increases in oncall staff confidence, and a 74 per cent increase in SDMH ED staff confidence to recognise and respond to these presentations. All after-hours DV presentations received appropriate psychosocial support within 24 hours of triage.

Award finalists



PATIENT SAFETY FIRST

Not another DVT in the ED

Western Sydney Local Health District

The Westmead Hospital emergency department team identified a significant variation in how Deep Vein Thrombosis (DVT) presentations were treated. The team initiated processes for standardising and optimising management of acute DVT, including a web-based clinical decision support tool. Also, a streamlined model of care for assessment, treatment and follow-up was implemented with ongoing monitoring and evaluation enabling continuous improvement.

Results showed a significant increase in the number of patients receiving appropriate investigation, treatment and referral from 12.82 per cent to 84.21 per cent. Other beneficial outcomes included a shortened time between ED assessment and clinic follow up with 92 per cent of patients seen in three days or less and a reported reduction in stress experienced due to 'anti-clot' treatment and high rates of satisfaction. Fewer patients also experienced complications of treatment prior to follow up.



On Time, Every Time for People with Parkinson's

Mid North Coast Local Health District

Sixty-six per cent of patients with Parkinson's Disease (PD) visit hospital each year with 75 per cent not receiving medications on time. Delaying medications for greater than 15 minutes can worsen tremors, rigidity, confusion, agitation, and anxiety. The MNC LHD team developed a multidisciplinary team to improve safety in this vulnerable patient group to address medication management and enhancement of clinical knowledge.

The interventions focused on bridging departmental and professional barriers with exact medication routines, identifying and avoiding certain medications harmful to PD patients and identifying alternatives for when a person cannot take medication orally.

Results showed a reduction in average length of hospital stay for PD as a secondary diagnosis, from 9 to 6.2 days, more rapid access to correct medications and improved teamwork.



PICU Risk Matrix: Making Patients Safer in PICU

Sydney Children's Hospitals Network

Earlier identification of patient risks enables nurses to anticipate better and avoid some adverse events. The unit's sickest patients consistently receive a high level of care, but patients identified as 'stable' can still experience serious yet preventable adverse events, including falls, ventilator disconnection, and inadvertent tube and line removals.

A multidisciplinary team devised the PICU Risk Matrix, which is based on six patient risk factor categories identified by Incident Information Management System (IIMS) data. The tool targeted assessments of risk, matching of nursing skill with patient requirements and the handover of risks during the shift. A formalised system was devised, with the goal of improving the culture of patient safety in PICU and risk mitigation.

A demonstrated change in handover practices and organisation of meal reliefs has occurred. The team collected data relating to patient acuity and nursing workload which has ongoing implications for planning of safe staffing levels.

Award finalists



KEEPING PEOPLE HEALTHY

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Elimination of Hepatitis C in a Prison Setting

Justice Health & Forensic Mental Health Network

Hepatitis C virus (HCV) prevalence in NSW prisons is 20-30 times higher than in the community. In 2016, the availability of new medications created an innovative opportunity for Justice Health & Forensic Mental Health Network (JH&FMHN) to potentially cure all patients with HCV in one of its prisons - the Compulsory Drug Treatment Program (CDTP).

Following treatment patients reported improved wellbeing and the longer term benefits include significantly decreasing the risk of hepatocellular carcinoma and death. Concurrent treatment was viewed as an important measure to reducing re-infection in conjunction with harm minimisation education. A partnership between JH&FMHN, Corrective Services NSW and Hepatitis NSW facilitated this process. Broad screening, concurrent treatment and ongoing reviews of new admissions in the CDTP are considered an innovative and novel approach for HCV elimination in a prison.



healthy food@school

Hunter New England Local Health District

Healthy food@school is an implementation program aiming to improve child nutrition by supporting school canteens to provide healthy food according to NSW guidelines. The program involves a number of rigorous scientific methods such as the conduct of serial controlled trials, objective measurement of child nutrient intake and school guideline adherence, a cost effectiveness analysis and the evaluation of implementation.

Initial results showed 63 per cent guideline adherence and significantly reduced fat intake by children. Child fat intake reduced by 132 kilojoules with trends toward improvement in sodium and energy intake.

The program was delivered as routine service delivery to 170 primary schools, achieving 35 per cent guideline adherence across all schools.



Proactive prevention beats reactive control

Western NSW Local Health District

Evidence showed that there was a low (ten per cent) compliance with antibiotic guidelines and urinary catheters were left in-situ for greater than 24 hours for 60 per cent of patients at Orange Health Service.

The aim of the initiative was to completely remove un-removed urinary catheters within 24 hours and for 90 per cent compliance with the therapeutic guidelines for choice of antibiotic, dose, timing and duration within six months.

Using a continual audit and feedback, clinicians introduced flowcharts and restrictions protocols across clinical disciplines to improve outcomes.

The results saw compliance for removal of catheters within 24 hours increase to 96 per cent, and antimicrobial compliance increased from ten to 86 per cent. The outcomes of these achievements resulted in halving the costs of antibiotics, a decrease in catheter associated UTIs, a 15 per cent decrease in hospital stay and a 25 per cent decrease in hospital-acquired infections.

Award finalists



SUPPORTING OUR PEOPLE

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CORE Chat – Our Values in Action

Health Education and Training Institute (HETI)

CORE Chat – Our Values in Action is designed to develop workplace culture change for NSW Health staff. *CORE Chat* empowers staff to take responsibility for identifying practical solutions for workplace challenges.

Delivered via face-to-face training, *CORE Chat* fosters a culture where staff are able to understand and put into practice the NSW Health CORE values. The course is designed to support long term behaviour change that delivers positive workplace culture, strengthen staff empowerment and improve patient outcomes by providing a framework for respectful patient and family conversations.

CORE Chat is one of the largest culture change initiatives within NSW Health. More than 2,600 NSW Health staff have taken part. Data shows participants learn skills to empower them as change agents and transfer knowledge from the courses to their workplaces. Around 99 per cent of participants to date have reported 'high' to 'moderate' confidence in their ability to contribute to a positive and healthy workplace culture.



Culturally responsive pain management approach

South Western Sydney Local Health District

South Western Sydney identified that most pain management research excluded culturally and linguistically diverse (CALD) communities and, in the minimal studies published, those communities had poorer outcomes for pain, quality of life and function compared to patients from dominant cultures.

As a result a rigorous research approach to improve pain management for CALD patients was implemented. It included a review of pain management interventions and their efficacy and a qualitative enquiry with adults with chronic pain was carried out across Mandaean, Vietnamese and Assyrian groups. The findings lead to three key improvements: development of a physiotherapy-led culturally-adapted treatment, the validation of a pictorial tool to evaluate pain-related suffering and a study to evaluate the effectiveness of a culturally-adapted assessment and treatment approach. The study highlighted significantly higher levels of patient engagement and reduced pain-related suffering compared to those who attended standard physiotherapy.



Employ-my-ability

Sydney Local Health District

Royal Prince Alfred Hospital (RPA Hospital) recognises that people with significant disability face many barriers to participating in the workforce. In 2008 it aspired to reduce health inequities by overcoming barriers to open employment, while increasing diversity and its associated benefits in the workplace.

RPA Hospital trialled an innovative partnership with a local disability training and employment agency, Jobsupport and became the first workplace in Australia to implement an immersion program for people with significant intellectual disability (IQ less than 60). The Employ-my-ability program aims to achieve paid, unsubsidised employment.

Results show 89 per cent of clients achieved employment. By comparison, the average transition-to-work across Sydney is 30 per cent. Sydney Local Health District now has 15 participating departments and is directly employing more clients.

Award finalists



A SAFE AND HEALTHY WORKPLACE

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Rethink Your Drink @ Westmead Hospital

Western Sydney Local Health District

Sugar Sweetened Beverages (SSB) are a major source of added sugar with no nutritional value. Excessive consumption increases the risk of diabetes and obesity. In Western Sydney more than 50 per cent of the population is overweight and at risk of developing type 2 diabetes. Westmead Hospital decided to remove SSB from its food outlets and vending machines to increase awareness of the consequences of excessive SSB consumption and encourage healthier choices. Reducing SSB consumption can deliver health benefits to both individuals and the population as a whole.

Sales figures after the removal of SSB showed a strong increase in the number of healthier drinks sold in non-vending outlets, especially an increase in the amount of water bought. This supports the key health message of making water the preferred drink of choice. Consumer feedback showed that attitudes and perceptions about reducing SSBs availability in the hospital was positive.



Working Together to STOP VIOLENCE

Mid North Coast Local Health District

The Mid North Coast Local Health District (MNCLHD) recognises that staff and visitors have the right to be safe at work. Domestic and family violence (D&FV) in the workplace can create distress as well as pose a risk to employees and the public. It can also impact work performance and productivity. As a team MNCLHD wanted to create both a safer workplace and a workforce that understands how to prevent violence.

To deliver a solution the MNCLHD worked to become an accredited White Ribbon Workplace. This whole-of-organisational approach to violence prevention engaged and enabled staff to lead the change. Interactive D&FV workshops were made available to more than 4,000 staff. Post training feedback revealed significant improvements across a range of areas. MNCLHD is proud to be the first NSW Local Health District to achieve White Ribbon Workplace Accreditation.



Workplace Safety through Inventory Management

South Western Sydney Local Health District

Staff and Equip National surveyors had expressed the need for improved design of storerooms in order to deliver greater staff and patient safety needs.

Their approach was to standardise inventory management across Camden and Campbelltown Hospitals to enhance the systems in place and the workplace practices. Standardisation included just-in-time ordering, customising the imprest list to each department's requirements, improved shelving, storage processes and signage. The reduction in time to approve orders has allowed staff involved in the ordering process to become more efficient.

Although cost savings were not part of the project's initial aim, executing this standardised approach for one year in a Special Care Nursery department resulted in a saving of \$116,000 (approximately 80 per cent). When this project is extended across the whole facility there is a strong potential for significant cost savings while also fostering a culture of ownership from staff regarding their personal safety.

Award finalists



HEALTH RESEARCH AND INNOVATION

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CriSTAL to improve advance care planning

South Western Sydney Local Health District

A research project to develop an assessment tool for early identification of frail older people presenting at emergency departments at five Sydney hospitals.

The screening tool CriSTAL (Criteria for Screening and Triaging to Appropriate aLternative care) estimates the risk of death occurring within a few months of assessment. Anticipated benefits include opportunities for patient consultation on their values and preferences before they become unable to speak for themselves, less conflict during decision-making in a crisis, and a reduction in repeat hospital admissions and emergency department visits by people who could experience a better death in a less hectic environment. The user friendly nature of CriSTAL encourages its uptake and findings on the accuracy of the prediction are promising, demonstrating it is feasible to screen in a few minutes as part of routine care. It is anticipated CriSTAL will contribute to increase in the uptake of advance care plans by frail older people.



Development After Infant Surgery (DAISy) study

Sydney Children's Hospitals Network

A research project investigating post-surgery developmental delays of infants.

Parents of newborns who require major surgery want to know how their baby's long-term neurodevelopment will be affected. The Development After Infant Surgery (DAISy) study recruited 784 infants from across NSW who had undergone major cardiac or non-cardiac surgery and compared their developmental outcomes to a cohort of healthy control infants, to provide answers for families – and ultimately better outcomes for the children.

The study found significant differences in development between children who had surgery and their peers. Infants with complex heart conditions had the highest risk. The research team translated the results into clinical practice swiftly: after only two years the team began to enroll infants into a development clinic and all at-risk children are now offered follow-up. Standardised developmental follow-up for complex surgical infants is becoming a standard of care in Australasia and an Australian and New Zealand neonatal surgical network is being established.



High-risk influenza screening test

Nepean Blue Mountains Local Health District

A project to develop a blood test to identify which influenza patients will need urgent, life-saving medical treatment

The High-risk Influenza Screen Test (HIST) is the world's first biomarker test to provide doctors with critically important information on a patient's immune system responses to flu virus. One out of five people suffers flu infection every year and it can quickly develop into pneumonia and death. The test needs a small drop of blood to read gene codes produced by immune system cells in response to the influenza virus, alerting doctors to individuals who are at risk of deterioration due to pneumonia and who need urgent medical treatment. It will play an important role in helping front-line doctors diagnose and treat high-risk individuals during flu epidemics or pandemics.



EXCELLENCE IN THE PROVISION OF MENTAL HEALTH SERVICES

Innovative Service Delivery Model

Western Sydney Local Health District

This project aims to support for people needing mental health care who dial triple-zero for an ambulance. Up to 15 per cent of clients who call triple zero require mental health care. In response to this, Cumberland Hospital in partnership with NSW Ambulance, implemented the Mental Health Acute Assessment Team (MHAAT), which promotes hospital avoidance and links patients with appropriate community mental health service. It maximises mainstream health resources such as emergency departments through reducing long stay mental health patients.

Since the introduction of MHAAT there has been a significant reduction in the number of mental health patients staying in emergency departments longer than 24 hours. This indicates patients are receiving appropriate care, such as referral and follow up in community or admission, more quickly. MHAAT diverted more than 500 patients from emergency departments in 2016.



Living Well Living Longer – Physical health & mental health

Sydney Local Health District

A project to deliver integrated care for patients living with serious mental illness, assessing their complex physical health needs.

People living with significant and enduring mental illness have a life expectancy up to 25 years less than the general population, mostly due to physical health conditions such as cardiovascular disease. They are also less likely to receive appropriate screening and treatment from clinical services such as general practitioners. Living Well, Living Longer addresses these inequities by improving access to quality and appropriate physical health care. Training has been delivered to all community-based teams across SLHD Mental Health Service and mental health consumers now have improved access to nominated GPs, comprehensive multidisciplinary physical health clinics (including cardiology, psychiatry, endocrinology, nursing, exercise physiology, oral health, sleep medicine, podiatry and dietetics), healthy lifestyle programs and support to reduce smoking rates.



Seclusion Reduction in Mental Health

South Eastern Sydney Local Health District

A project to reduce seclusion rates of mental health patients at the Kiloh Centre and Mental Health Intensive Care Unit.

Consumer feedback indicates seclusion can re-traumatise patients. Seclusion is also a resource intensive strategy. To reduce seclusion incidents, the project team tested local solutions focussed on leadership, cultural change, using data for improvement and building workforce capability. Strategies included the use of more person-first language, a trauma-informed focused of care, enhancement of the physical treatment environment, sensory modulation and the engagement of diversional therapists. As a result, Prince of Wales Mental Health reduced seclusions from as high as 34 episodes per month to an average of three seclusions per month since September 2016. This reduced the overall SESLHD seclusion rate from 11.7 to 2.9 per 1000 bed days, which has had a substantial impact on the safety and quality of mental health care, and the effective use of resources.

Volunteer of the Year



Belinda White

Murrumbidgee Local Health District

Belinda, affectionately referred to as Bil, has volunteered her time to facilitate a Creative Writing group for participants of the Mental Health Recovery Program. It involves group work and one to one support, covering subjects such as self-esteem, assertiveness, living skills and cognitive behavioural therapy. The program takes a holistic view of recovery promoting good diet, sleep, routine, exercise, relationships, and communication skills.

Bil uses her own experience of mental health and her teaching background to explore the natural talents of consumers. Bil is an inspiration to staff, consumers and the wider community. She has proven herself dependable as seen in the consistency of her work in the Recovery Unit. Bil is always professional in her interactions with staff and consumers and is held in high regard by consumers. The quality of Bil's work and the impact it has had on consumers within the program is indisputable.



Douglas Park

South Eastern Sydney Local Health District

Doug has made a significant impact on the quality of patient care in the St George Hospital Aged Care Wards. He assists with patient feeding, falls prevention programs and regular patient visits. Doug checks in with senior nurses on arrival to the ward to determine the patients in most need of his services that day. He undertakes all of his roles in a respectful and empathetic way.

Doug has also initiated a music therapy program for patients - particularly those from non-English speaking and culturally diverse backgrounds. The music Doug plays is specific to each patient and can either provide a calming atmosphere or fun sing-a-long, its positive impact cannot be overstated. Music provides a return to fond memories and security for patients. It can also help re-orientate patients and distract from stress. These excellent outcomes are making a real positive difference for both patients and staff.



Glad Dent

Hunter New England Local Health District

99-year-old Glad Dent has been a member of the Calvary Mater Newcastle Auxiliary 'Cancer Carers' since July 1999 and is faultless in her dedication to this group. The Auxiliary is the main fundraising arm of Calvary Mater Newcastle. From 2000 to 2017 the

Auxiliary has raised \$3.8 million which is used to purchase oncology equipment and items of need for the care and comfort of patients at Calvary Mater Newcastle. Many of these items could not have been purchased if it wasn't for the Auxiliary's fundraising efforts.

Glad has selflessly dedicated many years to the Hunter and Newcastle community and is a great ambassador for the hospital. She joined the Auxiliary at the tender age of 80 and is a well-respected and very much valued Auxiliary member. Her wisdom, warm personality and friendship is very much admired and appreciated by all who come into contact with her.

Staff Member of the Year



Lisa-Jayne Ferguson

St Vincent's Health Network

Lisa has contributed significantly in shaping St Vincent's Drug and Alcohol service which provides services to more than 2,500 of St Vincent's most vulnerable patients every year. She embodies the true qualities of a health professional and is a great clinician and thinker, driven by commitment to her patients. Lisa encourages feedback from patients and staff to help provide better services.

Lisa has been integral delivering developments including establishing a new 20-bed acute inpatient detoxification unit, implementing and teaching the Clinical Institute Withdrawal Assessment of Alcohol Scale as well as the Development of Alcohol Withdrawal Policy, and representing D&A services at a Governance level to ensure quality processes are met.

In 2017 she was the winner of the Australasian Professional Society on Alcohol and other Drugs Clinician of the Year, and the St Vincent's Health Australia - Clinician of the year (public division).



Louise Brown

Western NSW Local Health District

Louise delivered outstanding service in support of Aboriginal patients, carers and families. She also provides support for Aboriginal and Non-Aboriginal staff at the Bourke facility and across other Northern sector sites within the local health district. Louise is a role model for promoting positive cultural change and inspiring staff by her consistent promotion of Aboriginal cultural awareness, respect and compassion.

Louise should be acknowledged for the new and innovative ways she engages staff, patients, carers and families. She has delivered excellent work including; the development and implementation of an Aboriginal Cultural Awareness program, and the Aboriginal Palliative Care Group for Northern sector sites.



Thomas Glanville

Murrumbidgee Local Health District

Thom consistently demonstrates a commitment and achievement to advancing information and technology based solutions for improved patient care that benefit Murrumbidgee Local health District (MLHD).

In 2017 Thom developed ED NOW, a real-time ED dashboard that tracks and enables clinicians to more easily manage patient flow and care. The dashboard is a major advancement in patient flow through Emergency Departments and is now being trailed in local health districts across NSW Health.

Thom has consistently demonstrated himself to be a leader within MLHD and is an excellent ambassador of both MLHD and NSW Health. Data analytics (big data, data mining and multifaceted data matching) is a relatively new field within the public health sector and Thom has established himself as a leader at both the Murrumbidgee LHD and NSW Health state level over the past two to three years.



Vicki Solomon

Mid North Coast Local Health District

Since 1991 Vicki has been instrumental in the development of the Mid North Coast Community Rehabilitation Clinician program. She is also an Occupational Therapist with the Mid North Coast Brain Injury Rehabilitation Service (MNCBIRS).

With a wealth of experience providing inpatient, outpatient, community based and vocational intervention services, Vicki is always seeking innovative ways to engage clients and their families. She is a passionate advocate for people with traumatic brain injury and is known for her remarkable patience, good humour and a deep respect for others.

Vicki is a trusted staff mentor who uses the extensive knowledge she has developed over three decades to inspire and empower others. She has been responsible for delivering exceptionally high quality outcomes for clients.

Collaborative Leader of the Year



Alison Loudon

Western NSW Local Health District

Alison is the District Manager of Midwifery and Paediatric Strategies, Integrated Primary Care and Partnerships and her successful leadership style is demonstrated in her ability to work collaboratively with not only WNSWLHD employees, but also people from all types of professions across the Government and non-Government sector.

Alison is innovative in developing solutions that arise within the Midwifery and Paediatric space. This ability leads to development of new and exciting programs and service provisions. She is able to provide clear strategic direction in an inclusive and constructive manner that encourages staff to achieve the best outcomes for WNSWLHD and the community. Alison is motivated and driven to achieve sustainable health outcomes for all mothers, women and children across WNSWLHD.



Claire Phelan

South Eastern Sydney Local Health District

Since her appointment as Director of the SESLHD Oral Health Service in 2014, Claire has transformed the service into a client-focused team with clear strategic direction and a culture of innovation and excellence. Claire is committed to the ongoing development of her team, supporting staff to study and creating Aboriginal traineeships in administration and dental assisting.

Significant achievements include strengthening ties with local Aboriginal communities, a new two-chair dental clinic at the La Perouse Aboriginal Community Health Centre and redeveloping the Mission Australia dental clinic for homeless people. The commissioning of a mobile dental clinic, on display at this Symposium, has improved access to dental care for priority populations such as residents of aged care facilities.



Franca Facci

Illawarra Shoalhaven Local Health District

For 30 years Franca has worked tirelessly for the Health Service and is highly respected by her peers and work colleagues for her discipline, camaraderie and her no-nonsense leadership style. Franca has lead a number of significant health programs driven by her commitment and passion to the community and in particular those who are most vulnerable. One of Franca's noteworthy achievements is the successful introduction of Health Pathways and her work on e-referrals that has cemented the strong collaboration Local Health District now enjoys with COORDINARE, the South Eastern NSW Primary Health Network.

All the work Franca undertakes requires high level interpersonal skills, strong and authentic communication and genuine engagement. Franca has delivered impressive benefit for the residents of the Illawarra Shoalhaven, to her community and ultimately the wider population of NSW.



Friedbert Kohler

South Western Sydney Local Health District

Associate Professor Kohler is the leader of the Age and Ageing Clinical Academic Clinical Stream, of the Sydney Partnership for Health, Education, Research and Enterprise. His leadership has been instrumental in establishing, developing and embedding new models of care for rehabilitation and aged care services in SWSLHD. A/Professor Kohler has brought together clinical and research expertise and built partnerships across industry and residential aged care providers.

His exceptional collaborative skills have resulted in improved delivery of safe, high quality and coordinated clinical services. Associate Professor Kohler has assisted in engaging many clinicians in reviewing clinical variation and activity based funding. He continues to engage new clinicians to improve the evaluation of service and research. A/Professor Kohler is devoted to building capacity within the health system, for example connecting together aged care projects, resulting in better resource utilisation.

2017 NSW HEALTH AWARD JUDGES

Thank you to...

Mr Raj Verma

Director, Clinical
Program Design and
Implementation
Agency of Clinical
Innovation

Ms Kim Sutherland

A/Chief Executive
Bureau of Health
Information

Professor David Currow

Chief Executive
Cancer Institute NSW

Mr Graeme Liston

A/Executive Director,
Strategy and Innovation
Central Coast Local
Health District

Mr Iain Crawford

HAI Project Officer
Clinical Excellence
Commission

Ms Carrie Marr

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NSW Health continues to improve
health outcomes for the NSW
community and deliver on high
quality care for patients.

These improvements are only possible
because of the commitment and
dedication of all NSW Health staff,
volunteers and partners.

THE 19TH ANNUAL
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