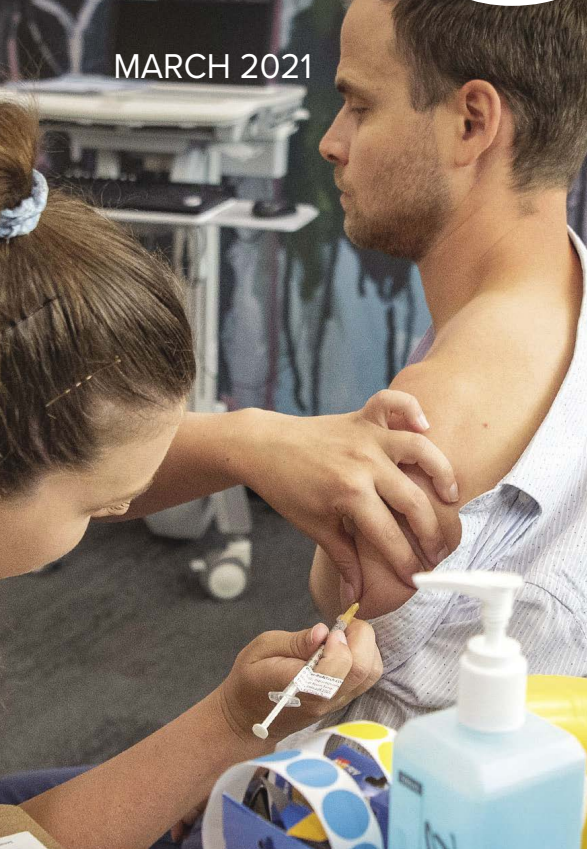




southern health news

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PAGES

8-9

SALHN rolls up



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The Southern Adelaide Local Health Network (SALHN) provides care for approximately 370,000 people living in the southern metropolitan area of Adelaide, as well as providing a number of statewide services, and services to those in regional areas. More than 7,000 skilled staff provide high quality patient care, education, research and health promoting services.

Health services which form the Southern Adelaide Local Health Network include:

- > Flinders Medical Centre; Noarlunga Hospital and the Repat Health Precinct.
- > Intermediate Care Services provided at GP Plus Super Clinic Noarlunga and GP Plus Health Care Centres at Marion and Aldinga/Seaford, in addition to Aboriginal health services and Aboriginal family clinics, health services in people's homes and the Aged Care Assessment Team (ACAT).
- > Southern Mental Health inpatient services at Flinders Medical Centre, Noarlunga Hospital and Jamie Larcombe Centre, including specialised services for eating disorders, veterans' mental health and problem gambling. Community based mental health services include the Adaire Community Mental Health Centre at Noarlunga, the Inner South Community Mental Health Centre (collocated with GP Plus Marion), and the Southern Intermediate Care Centre and Trevor Parry Centre, which are both located at Noarlunga.

For more information about our services visit www.sahealth.sa.gov.au/SALHN

Southern Health News is generously supported by The Volunteer Service for Flinders Medical Centre Inc.

COVER: SALHN staff roll up for their COVID-19 vaccinations.

From the Chief Executive Officer

Life is always busy at SALHN, but the last few weeks have been incredibly fast paced for our staff.

In recent weeks, we have established the COVID-19 vaccination clinic (see story pages 8-9), opened the Repat Neuro-Behavioural Unit (see story page 5) and relocated Repat RA to the new Bangka Strait ward at the Repat Health Precinct (see story page 6).

Work has also begun on the \$8.5 million expansion of the Flinders Medical Centre's (FMC) Emergency Department - transforming it into the biggest and busiest in South Australia (see story page 3). The expansion is part of the \$86 million Southern Health Expansion Plan, which aims to deliver better healthcare, closer to home, for the residents of southern Adelaide.

Notwithstanding all of this, FMC has also successfully activated Stage 1 of Sunrise EMR. Moving from a paper-based medical record system to the Sunrise electronic medical system will deliver many benefits to our staff, patients and their families and you can read more about this on page 10.

Vaccinating against COVID-19 is our best defence against this life-threatening virus, and it has been heartening to see SALHN staff place their trust in the science behind the vaccine and roll up their sleeves for their vaccination.

FMC is one of nine key vaccination hubs across South Australia being used to vaccinate key front-line health care workers, quarantine and airport workers and residential aged care and disability staff in the initial implementation of the program.

In the next stage of the vaccination program adults over 70 years, all other health care workers, Aboriginal and Torres Strait Islander people, adults with an underlying medical condition (including those with a disability) and critical and high risk workers (including defence, police, fire, emergency services and meat processing) will receive their vaccinations.



“Vaccinating against COVID-19 is our best defence against this life-threatening virus, and it has been heartening to see SALHN staff place their trust in the science behind the vaccine and ‘roll up’ for their vaccination.

I urge you all to get vaccinated when it is your turn. We can all play our part in protecting ourselves, our loved ones and our community. Visit www.covidvaccine.sa.gov.au for useful resources including more information about COVID-19 vaccines.

I do hope you enjoy reading this edition of Southern Health News.

Until next time,

PROFESSOR SUSAN O'NEILL

*Chief Executive Officer
Southern Adelaide Local Health Network*

Flinders Medical Centre’s Emergency Department has long been the busiest in the State. Now it’s set to be the biggest.

Construction has begun on an \$8.5 million expansion of the Flinders Medical Centre (FMC) Emergency Department (ED) - transforming it into the biggest and busiest in South Australia.

The expansion is part of the \$86 million Southern Health Expansion Plan (SHEP), which aims to deliver better healthcare, closer to home, for the residents of southern Adelaide.

“An overarching aim of SHEP is to ease pressure on emergency departments throughout Adelaide, and the FMC ED expansion is a key component of this aim,” said SALHN Chief Executive Officer, Professor Susan O’Neill.

She said the FMC ED had seen an increase in presentations over the past five years.

“The FMC ED is the busiest ED in the state and demand has steadily grown in recent years, with high acuity presentations more common. This has great impact on our staff and their ability to provide the excellent care they provide to our patients.”

“The upgrades will turn the FMC ED into the biggest ED in the state and will create more capacity and see improvements in flow for the hospital, so staff can continue to deliver timely emergency care to those in need,” Professor O’Neill said.

The expanded ED includes:

- > up to an additional 30 treatment spaces
- > additional negative pressure resuscitation bays
- > an expansion of the FMC Short Stay Unit
- > A complete refurbishment of the paediatric Emergency Department, to better separate it from adult treatment areas.

In October last year, an additional nine emergency doctors were recruited to FMC, allowing 12 beds in the Emergency Extended Care Unit (EECU) to come online - doubling its previous capacity.

SALHN Emergency Departments Clinical Director, Associate Professor Andrew Blyth, said the SHEP plan would significantly increase SALHN’s ED footprint. “It will improve access to treatment spaces for all patients presenting to the ED and is part of ongoing work to minimise the wait time and improve care for patients attending the department.”

“Phase one of works has now begun on the southern side of the ED, with construction expected to be completed by April and phase two on the northern side to begin shortly after,” A/Prof Blyth said.

“This is an exciting time for health in the south and we appreciate the understanding of both staff and patients during this time as we work extremely hard to continue the delivery of high-quality care in a more modern environment, despite the minor disruptions throughout the construction period.”

The Flinders Medical Centre ED will remain operational while work is underway, with plans to minimise interruptions to service delivery in place.

Works are expected to be completed by July.

“It will improve access to treatment spaces for all patients presenting to ED and is part of ongoing work to minimise the wait time and improve care for patients.

A/PROF ANDREW BLYTH
CLINICAL DIRECTOR OF
SALHN EMERGENCY DEPARTMENTS



90,080

That was the number of presentations to FMC Emergency Department in 2019/2020.

The potholes towards recovery a poignant reminder for Louis

As a family, the Clutterbucks know that the journey out of an eating disorder can be long and challenging – and full of ‘potholes.’

15-year-old Louis Clutterbuck has been treading the path towards recovery from anorexia nervosa since 2019 and, last year, spent nearly six months in the FMC Paediatric Ward battling the illness.

With him every step of the way has been the dedicated FMC Paediatric Ward staff and Louis’ family, including mum Kris and dad Gus.

Gus – a mid-career artist who expresses his creative vision through drawing, ceramics and photography – says the ongoing care and understanding provided by FMC staff has been incredibly important.

As part of Louis’ journey – and as a way of thanking staff – Gus and Louis created a painting in 2020 that depicts Louis’ journey with anorexia nervosa.

Gus and Louis have donated the piece, entitled Potholes, to the FMC Paediatric Ward.

“At the heart of the painting are sticks, modelled on the ordinary sticks that are Louis’ constant companions, and I see as symbolic of his struggle. The figure (drawn by Louis) looks towards the stick forest and contemplates crossing the rough and inhospitable landscape, full of pitfalls and obstacles, in his journey to recovery from anorexia nervosa,” explained Gus.

Gus said creating the artwork with Louis together helped them “make something good out of a terrible situation.”

“As a practicing artist, making art has always been a way to process difficult times in life. This collaborative work was a way of helping me cope with the huge challenge of Louis’ health issues, but also a way to turn liability into an asset, negative to positive, and create an outcome appreciated by others that says something meaningful. Importantly, it also gives an honest insight into nature of the struggle of recovery from a serious illness.

“Louis’ illness is highly resistant to treatment but he has made really significant progress both mentally and physically of which we are deeply grateful for.”

Sandy Bridgland, Nurse Consultant – Paediatric Eating Disorders in the FMC Paediatric Unit, said anorexia nervosa was a life threatening illness and Gus and Louis’ artwork demonstrated the devastating impact it had not only on the young person suffering, but also their family.

“I find the artwork very powerful and feel emotional thinking about Louis and Gus’ struggle in the long journey they have had and how we can help them to continue the journey to recovery.”

Potholes was exhibited in 2020 as part of the series *Sticky Drawings* in the *Strange Days* exhibition at Newmarch Gallery Prospect and has now been accessioned into the Arts in Health at FMC Art Collection.

15-year-old Louis Clutterbuck is treading the path towards recovery from anorexia nervosa with the help from his family, including dad, Gus.



What is anorexia nervosa?

Anorexia nervosa is a type of eating disorder characterised by extreme food restriction, significant weight loss and an intense fear of gaining weight.

As the illness progresses, people with anorexia nervosa develop increasingly obsessive or rigid ways of thinking and behaving. They often become committed to extreme dieting, which may involve meticulous calorie counting, refusing food or fluids, and abiding by strict food rules.

It is also common for people with anorexia nervosa to exercise excessively and engage in other dangerous behaviours intended to lose weight.

People with anorexia nervosa experience a disturbance in the way they perceive their body, weight and shape.

Food restriction and weight loss result in malnutrition and starvation, which lead to a range of physical and psychological health complications, and can even result in death.

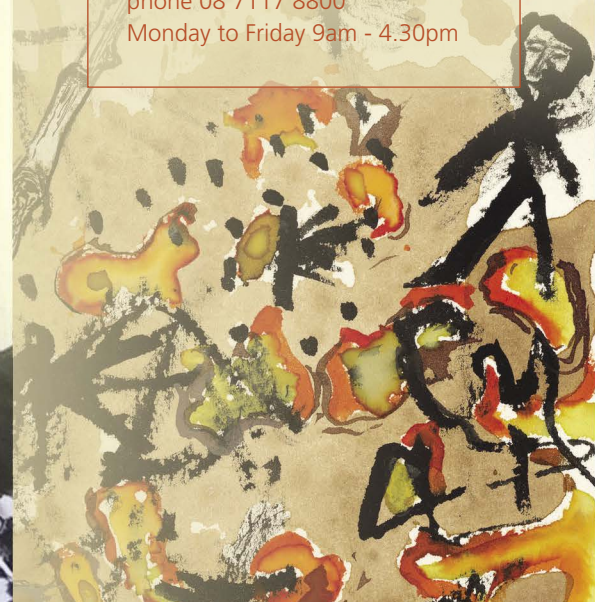
Anorexia nervosa has one of the highest death rates of any mental illness.

Source: InsideOut - What is Anorexia Nervosa? (insideoutinstitute.org.au)

Need help?

If you need help or support for an eating disorder or body image issue, call Butterfly's National Helpline on 1800 334 673 or e-mail support@butterfly.org.au.

The Statewide Eating Disorder Service (SEDS) is a specialised mental health service that provides assessment, care and information to people living with an eating disorder, their families and carers. Learn more at www.sahealth.gov.au/SEDS or phone 08 7117 8800 Monday to Friday 9am - 4.30pm





Home away from home for our most vulnerable consumers

A specialised unit designed to care for people experiencing the most severe behaviours and psychological symptoms of dementia has officially opened at the Repat Health Precinct.

The SALHN Neuro-Behavioural Unit (NBU) is co-located with SALHN's Specialised Advanced Dementia Unit (SADU) and HammondCare's future 78-bed Dementia Care Facility. The model of care and collaboration between the dementia services makes it a 'first of its kind' in Australia and enforces SALHN's leadership in delivering respectful care to consumers with extreme symptoms of dementia.

The development and design of the NBU has been a partnership between mental health professionals, consumers with lived experience, families of past Oakden residents and carers of people living with dementia.

Featuring three 'pods' of six beds each, the unit has been specifically designed to provide dignified and compassionate clinically-focussed care in a less restrictive, home-like setting. It features a safe, open plan environment where consumers can experience the everyday things they enjoyed at home, as well quiet areas for families to gather, interact and share meals. The unit also features a number of diversional activities that can be used to stimulate and moderate consumers' behaviour.

"Physical environment is extremely important for people living with dementia. The environment

in the NBU is warm, comfortable and homely and we've found this environment has a calming effect on consumers and brings out the best in them," said Dr Michael Page, Head of the NBU.

Dr Page said symptoms of advanced dementia could be distressing for both consumers and their carers, and focussing on the 'whole person' - and not just their symptoms of dementia - was a key focus for staff in the NBU.

"There are challenges in helping people at this level of dementia, including often quite severe behavioural and psychological symptoms. SALHN undertook a comprehensive values-based recruitment process in the lead up to the NBU opening to ensure the right staff were selected," explained Dr Page.

"Our main focus was to ensure that the people who work in the NBU are not only passionate about the care of older people and people living with dementia, but are also compassionate about proving care that recognises the 'whole' person - including their rich life experiences.

However, he said staff also recognised that in addition to positive life experiences some people may have had traumatic or negative life experiences, which in turn impacted on the way that their dementia was expressed.

"Understanding that gives us a key to help reduce the triggers for those behaviours to develop, and we can do that by embedding a person's life experiences into their care plan and engaging with carers to better understand their likes and dislikes. All of this goes towards providing consumers with the best dignified care."

The average length of a stay at the NBU will be around 6-18 months, allowing time for staff to develop and put in place a comprehensive care plan before transitioning them to suitable long-term care environment.

"Our aim is that when it is time for somebody to transition to a less specialised environment we can hand over a care plan that facilitates the ongoing dignified quality care of that consumer," said Dr Michael Nance, Clinical Director of SALHN Mental Health Services.

Associate Professor Craig Whitehead, Clinical Director - Rehabilitation, Aged Care and Palliative Care said the Repat NBU will be of great benefit of staff and patients.

"It will allow for patients with severe behaviours of dementia to be treated with dignity, and in a way that keeps their behaviours to a minimum and reduces risk to themselves and others. For staff, the NBU gives them a real set of 'tools' to care for their patients to the best of their ability."

The NBU is the cornerstone of Stage 3 of SALHN's Southern Health Expansion Plan, which is a series of service moves designed to boost health services in the south and increase emergency treatment spaces at Flinders Medical Centre.

Scan the QR code to watch a short video about the new Neuro-Behavioural Unit.



Supporting our patients after their hospital stay

A newly refurbished ward to support patients in Adelaide's south requiring services after their hospital stay before transitioning to the community has opened at the Repat Health Precinct.

The Bangka Strait ward, historically known as Wards 1 and 2 at the former Repatriation General Hospital, will provide care to patients who are awaiting services such as NDIS, equipment and housing or other rehabilitation services.

"The 26-bed Bangka Strait ward will provide high quality care in an environment that is less stimulating than hospital," said Associate Professor Craig Whitehead, Clinical Director – Rehabilitation, Aged Care and Palliative Care.

"We know for patients awaiting transitional care that the hospital environment is not the most appropriate environment for their treatment, which is why it is important to create a permanent home for this unit at the Repat," he said.

Bangka Strait is one of several revitalised home-like services to open at the Repat in recent months, including the Specialised Advanced Dementia Unit (SADU) and the Repat Neuro-Behavioural Unit (NBU).

Fifteen patients have now transitioned to the refurbished ward, which includes 26 new beds, new equipment, specially designed landscaped gardens and its own gym.

The name, Bangka Strait, was collaboratively chosen by SALHN and the Veterans Health Advisory Council to acknowledge the historical connections the ward has with the Veteran Community.

"We are looking forward to welcoming our patients, family and friends into this new space which will provide high quality care in the most modern and appropriate environment," said A/Prof Whitehead.

What is Bangka Strait?

The Bangka Island massacre was committed during World War II in the Pacific, on Bangka Island, east of Sumatra in the Indonesian archipelago.

On 16 February 1942, Imperial Japanese soldiers machine-gunned 22 Australian Army nurses and 60 Australian and British soldiers and crew members who had survived the sinking of Vyner Brooke by Japanese bombers. Only three people are known to have survived: South Australian nurse Sister Lt Vivian Bullwinkel, Eric Germann and Stoker Ernest Lloyd RN.

Ellen Louise Keats (L) and Elizabeth Merle Pyman served in the 2/10th Australian General Hospital. Ellen was executed by the Japanese in the Bangka Island Massacre and Elizabeth Merle Pyman was evacuated from Singapore in 1942 and returned to Australia. *Photo courtesy the Australian War Memorial.*



Terry's road to recovery

As a chef working seven days a week in a busy café, Terry Heggan fed his customers well – but ultimately neglected his own diet. His poor eating habits exacerbated his Type 2 diabetes and Terry had to have his right leg amputated at the knee in September last year. He has been in rehabilitation ever since, and says the facilities at the new Bangka Strait ward are "awesome". "It's so new, the staff are great and the facilities are excellent," he said. Terry is pictured in Bangka Strait's Coral Sea gymnasium, undertaking his rehabilitation exercises.





Delaying decline in people with mild cognitive impairment

*Can outcomes be improved
for people diagnosed with mild
cognitive impairment?*

That's the question researchers from Flinders University and SALHN's Memory Clinic hope to answer in a new pilot study.

The study – led by Associate Professor Kate Laver – will use an existing intervention program tested on stroke patients called 'Taking Charge' to determine whether patients experience increased quality of life, hope and independence after receiving the intervention program.

Mild Cognitive Impairment (MCI) is common in older people, affecting approximately nine per cent of people over the age of 60.

"People with MCI often describe being forgetful, losing their train of thought, feeling easily overwhelmed, or experiencing changes in their mood," said A/Prof Laver.

"Yet changes can be subtle, and they are usually able to manage their usual activities without problems. Being given a diagnosis of MCI can be reassuring for people as it helps understand their symptoms, but it can also lead to feeling anxious about the future."

The condition is often a precursor to a diagnosis of dementia, with approximately 10 per cent of people

diagnosed with MCI progressing to dementia in the year after diagnosis.

"The condition is of great interest to researchers and policy makers as it may represent an ideal time for early intervention," A/Prof Laver says.

"There are currently no effective pharmacological treatments for MCI but we are proposing to test an intervention which promotes hope, activity and participation, and differs vastly from current practice in which people receive only brief advice about lifestyle changes."

Health professionals delivering the program will carry out one-on-one consultations and interviews with patients, and aim to listen, connect, and help them think about their values and their priorities over the coming months and year, before checking back in with them after three and six months.

"With the cost of dementia estimated to be \$14 billion in Australia and expected to climb, treatments that keep people independent for as long as possible are highly desirable," A/Prof Laver says.

"Treatments offered to people with MCI may be most effective in delaying deterioration, functional decline and ultimately dependency and admission to residential care."

The study is being funded by a Flinders Foundation Health Seed Grant. To learn more, or to donate, go to www.flindersfoundation.org.au.

SALHN’s COVID-19 vaccination program on a roll

SALHN staff have been quick to ‘roll up’ and show their support for the initial phase of South Australia’s COVID-19 vaccination rollout.

Flinders Medical Centre (FMC) is one of nine key vaccination hubs across South Australia being used to vaccinate key front-line health care workers, quarantine and airport workers and residential aged care and disability staff in the initial implementation of the program.

In its first week alone, nearly 200 staff rolled up their sleeves and received their first dose of the vaccine at the FMC

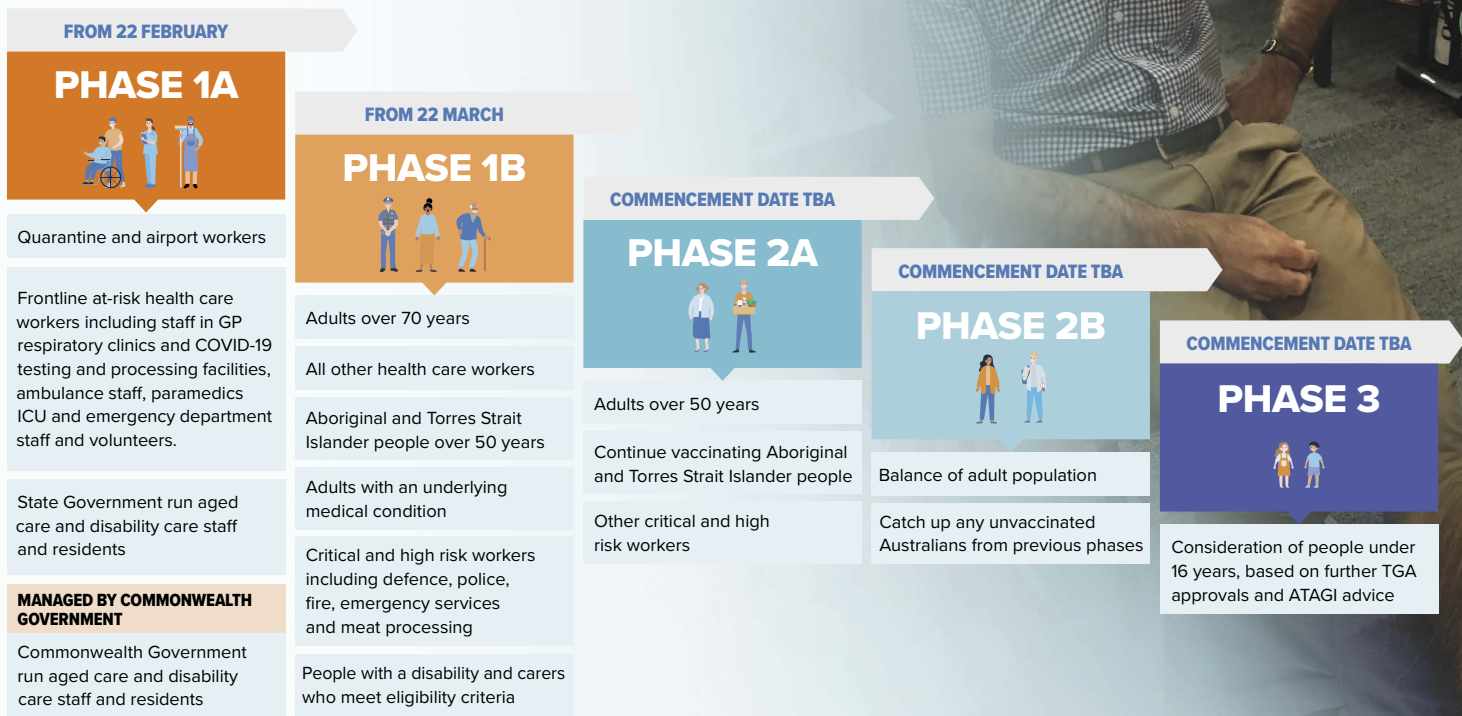
COVID-19 Vaccination Clinic located in the Cancer Wellness Centre at the Flinders Centre for Innovation in Cancer.

The vaccination provided in the first phase of the roll out is prioritising those who are most vulnerable to the effects of COVID-19, or who have the highest risk of being exposed to, or spreading, the virus.

“Planning is also well underway for the roll out of the vaccine to the wider community, and we will continue to work with the Commonwealth, Department for Health and Wellbeing and other Local Health Networks to finalise those details,” said Professor Susan O’Neill, Chief Executive Officer of SALHN.

The rollout – when can you expect your vaccination?

If you are pregnant or think you may be pregnant, ask your doctor for advice before you receive this vaccine.





How do the COVID-19 vaccines protect me?

The goal of vaccination is to stop you from getting sick.

I join millions of healthcare workers and ordinary people around the world in placing my trust in the science behind vaccination rather than taking my chances against a virus which has already killed millions and decimated economies.

Santhosh Daniel INFECTIOUS DISEASES CONSULTANT, FLINDERS MEDICAL CENTRE

It is always better to prevent a disease than to treat it after it occurs. Immunisation is one of the best ways you can protect yourself, your children and future generations from infectious diseases. In other words, if you vaccinate, you help wipe out disease that could spread now and into the future. The more people who are vaccinated, the fewer people will be infected, and the less widely can a disease spread.

Rachael Thompson AFTER HOURS NURSE LEAD, NURSING AND PATIENT SERVICES, DIVISION REHABILITATION, AGED CARE AND PALLIATIVE CARE

The vaccine provides me with a high degree of protection should I be exposed to SARS-CoV-2 and likely reduces the chance I could transmit the virus to the vulnerable patients I see. In addition it is very important for people in the infectious diseases field to demonstrate their confidence in the safety and effectiveness of the vaccine to staff whom we are recommending be vaccinated. **Professor David Gordon** HEAD OF MICROBIOLOGY AND INFECTIOUS DISEASES, SALHN.

Working in the Emergency Department, we each have a duty of care to our patients, our families and the community. This is one way we can work together to beat COVID-19 as soon as possible. **Dr Eleanor Wilson** GP CONSULTANT EMERGENCY DEPARTMENT, NOARLUNGA HOSPITAL

For me, receiving the COVID-19 vaccine was a must. We all need to play our part if we are to achieve herd immunity and get through this pandemic. **Michael Burns** SENIOR PHARMACIST - RESPIRATORY, FLINDERS MEDICAL CENTRE

Above from top: Santhosh Daniel, Rachael Thompson, Professor David Gordon, Dr Eleanor Wilson, and Michael Burns.

Patient records set to go digital @FMC

Patient records are set to go digital at Flinders Medical Centre (FMC) with the rolling out of the Sunrise patient electronic medical record system.

From late April, patients attending FMC's Outpatient Clinics will automatically receive an electronic medical record, while FMC inpatients will receive an electronic medical record from June.

The single most important benefit of the Sunrise electronic medical record system is that it enables healthcare professionals to access real-time information about their patients and make better informed decision with a more 'complete' picture of a patient – linking history for diagnosis, treatment and care planning.

"Using the one electronic medical record system across our organisation will improve service delivery and more importantly, benefits our patients whose electronic medical record can be accessed at other Sunrise-connect hospitals and healthcare facilities in South Australia, if and when it's needed," said Ashley Leahy, Digital Health

Lead, Southern Adelaide Local Health Network.

"Sunrise will become the primary patient and clinical documentation system to manage patient care. This is an exciting step forward for FMC, as it will now link seamlessly with Noarlunga Hospital and other select services across FMC who are already successfully using Sunrise."

With built-in security features, patient medical information in Sunrise will be completely confidential and only accessible by authorised healthcare workers.

Sunrise EMR is a component of the SALHN Digital Health Strategy, which will form the framework to meet the evolving digital health care needs of our community and staff.

To find out more about the Sunrise patient electronic medical record and what it means for you, please visit www.sahealth.sa.gov.au/sunrise.

Improving patient care

There are many benefits to having one electronic medical record:

- > With the same system in use at more public healthcare facilities in South Australia, patients may experience improved consistencies in administrative and clinical processes along the patient journey.
- > Safer care as a result of healthcare workers having immediate access to your medical records and history as you move between healthcare sites.
- > A link between Sunrise and the Federal Government's My Health Record allows your GP to receive your hospital discharge summaries to provide you with follow-up care. You will need to have a My Health Record and give consent to your GP for this to happen. At the same time, clinical staff at the public hospitals will be able to access your My Health Record and have visibility of your medical history.
- > Improved security and confidentiality. Unlike paper documentation, Sunrise EMR makes a record every time a patient's medical information is accessed or viewed including any changes made and by whom.
- > More efficient care from healthcare workers who can immediately access your medical record at the time and place of treatment from any Sunrise-networked facility.

FMC is set to go paperless: Registrar Daniele Cataldi at work at FMC.



Research successes: Associate Professor Mihir Wechalekar

Rheumatology Consultant Associate Professor Mihir Wechalekar heads the synovial tissue biobank at Flinders Medical Centre - the only such facility in Australia.

Dr Wechalekar's area of expertise is in rheumatoid arthritis, a debilitating, potentially destructive disease that affects around 1-2 percent of the Australian population. Unfortunately, drugs commonly used to treat the debilitating pain - and prevent the irreversible joint destruction of rheumatoid arthritis - can have variable efficacy.

Last year, Dr Wechalekar was successful in being awarded two grants to further his research: a prestigious 2020 NHMRC Ideas Grant and the Barbara Cameron Australian Rheumatology Association Research Establishment Fellowship.

Dr Wechalekar and his team will use the grants to target better treatments and a possible biomarker to manage the chronic disease.

"We hope to develop improved understanding of why some patients respond and some don't to the highly specific 'biologic' and other conventional medications for rheumatoid arthritis," explained Associate Professor Wechalekar. "We will do this by analysing the joint lining known as the synovial tissue - which is the target organ involved in RA - and then correlate it with patient outcomes."

By potentially providing new insights into this area, Dr Wechalekar hopes to further research into a "personalised" precision-medicine approach to rheumatoid arthritis.

Associate Professor Mihir Wechalekar and his team are targeting better treatments and a possible biomarker to manage rheumatoid arthritis.



The SALHN Research Office team. L-R Gianfranco Carosi, Research Governance Support Officer; Dominic How, Executive Officer SAC HREC; Dani Eley, Administration Officer; Simon Windsor, Manager Research Governance and Ethics, Karen Saxty Research Governance Officer; Petrina Kasperski / Ethics Officer

Every step on the research ladder opens the door for something new

Research helps us discover the unknown, find answers to our questions, fill gaps in our knowledge and expand our capabilities.

In a health care setting, research plays a critical role in discovering new treatments – and using existing treatments in the best way possible.

SALHN has a strong focus on research and is striving to be the destination for world-class treatment, research and training.

In line with this, research is one of the key strategic direction pillars that form the backbone of SALHN's Strategic Direction Map 2019-24.

"Research is continuous and that is what makes it so exciting. Across SALHN everyone can contribute to research which can open the door to new opportunities and something better for our community. There is always more to learn," said Simon Windsor, Manager Research Governance and Ethics, SALHN Research Office.

The SALHN Office for Research was established in 2015 and is responsible for the ethical review and governance of research activities carried out across SALHN. The research team supports staff with Continuous Improvement, Health Services Research, Clinical Trials and Discovery Science. It also provides a wide variety of professional services to staff and partners, including Flinders University.

Key to the Office for Research's success is an open-door approach that promotes easily accessible advice and produces a culture of collaboration.

A number of innovative initiatives have been introduced within the SALHN Office for Research. These include:

- > A student placement program in the office throughout 2021. Twenty-six Higher degree and Medicine students have been accepted into the Work Integrated Learning program to explore the origins and importance of research ethics and the basics of research governance; and learn about the National Statement and how it's used for ethical review and to support researchers interacting with consumers.
- > SA Health has introduced a new research management system called GEMS. The online system supports researchers and research office staff to submit, manage, review and track ethics and governance submissions.
- > A streamlined submission, assessment and review process has been introduced with an emphasis on face to face discussion and solutions. This has resulted in clearer processes for researchers and office staff, employing visual management, which has reduced review and handling time of applications.

"Our goal within the SALHN Office for Research is to provide high quality, accountable and efficient research services. Initiatives such as these are another stepping stone towards that ambition," said Simon.



Timely care a priority for Priority Care Centre

It was just after 2am on a Tuesday night when Reginald presented at the Noarlunga Hospital Emergency Department with a lacerated foot.

Reginald was in pain, and feeling low but the Emergency Department was busy and he wasn't prepared to wait. Against the wishes of medical staff, Reginald left without being treated.

In the morning Reginald's foot was still bleeding, so he contacted the Aboriginal Family Clinic at Noarlunga and staff paid him a home visit. They convinced him to visit the SALHN Priority Care Centre (PCC) at Marion, where Registered Nurse Ally dressed his foot and arranged for him to have surgery on his foot at Flinders Medical Centre.

Reginald is now back at home and on the road to recovery.

The Marion Priority Care Centre is one of four such centres established across metropolitan Adelaide by SA Health and Wellbeing SA in partnership with the Adelaide Primary Health Network and general practices.

"The Marion Priority Care Centre provides community-based healthcare and treatment for eligible patients who would otherwise be seeking a service from our SALHN Emergency Departments," said Sarah Woon, Executive Director of SALHN Allied Health, Intermediate Care & Aboriginal Health Services.

"The Centre is led by general practitioners with additional support from SA Health hospital staff specially trained in acute assessment and care."

The Marion Priority Care Centre also offers a range of other services that can support care and treatment, including access to:

- > diagnostic tools such as imaging and pathology
- > pharmacy services
- > community-based health services for follow-up care.

Eligible patients can be identified by an SA Health Emergency Department or SA Ambulance Service clinician, a General Practitioner or through SA Health Local Health Network related community based services.

Des Wilson, Aboriginal Health Worker at the Aboriginal Family Clinic, Noarlunga, said he was impressed with the priority given to Reginald and the manner he was welcomed and treated at the Marion Priority Care Centre.

"Ally really looked after Reginald well, and the setting of the Priority Care Centre was warm and welcoming," he said.

**The patient's name has been changed to protect his identity.*

Did you know?

The Priority Care Centre manages up to 15 patients a day who would otherwise be seen in the Emergency Department.

So far in 2021, more than 500 patients have had their care provided at the Priority Care Centre.

Samantha Tansell of Christie Downs is fitted with crutches by Priority Care Centre Nurse Consultant Michelle Kosonen. Samantha rolled her ankle while carrying a bucket of water and was later diagnosed with a broken ankle. "I initially went to Noarlunga Hospital Emergency Department and they transported me to the Marion Priority Care Centre, where I had x-rays and discovered my foot was actually broken!" Samantha said.

