SEPTEMBER 2017 ISSUE 9
1 - 2 | New staff and farewell
2 - 4 | Eurobodalla and Bega Shire visit
5 - 6 | NeoPaed and ACM Conference feedback
6 | Sepsis Kills day

Bev Hall recently joined the team of Clinical Midwifery Consultants within PSN.

Bev began her professional career working in a variety of acute care settings within the New South Wales Health system. In recent years her attention has focused on research activities relevant to the health of women and their families at individual, community and population levels. Bev has worked as a midwifery research officer with the Royal Hospital for Women Midwifery and Women’s Health Nursing Research Unit (University of Sydney), The University of New South Wales National Perinatal Statistics Unit and New South Wales Health Pathology (Virology Research). Bev has a Master’s of International Public Health and has worked in a voluntary and formal capacity with midwifery and nursing colleagues in Papua New Guinea, where she was employed by The Papua New Guinea Department of Health in conjunction with The World Health Organisation Collaborating Centre (University of Technology, Sydney). In this role, Bev was able to contribute to the development of midwifery educators’ skills in teaching and clinical practice, and assist in building the capacity building of the PNG Midwifery Society. Bev has recently submitted her PhD to the University of Sydney, exploring the topic of amniotic fluid lactate as a marker of labour dystocia. Other areas of academic and clinical interest include infectious disease, health policy and the cost of healthcare in Australia.

Bev is looking forward to the opportunity to contribute to the PAL team and PSN operational procedures.


Prior to her appointment at PSN, Jo worked at the Royal Hospital for Women (RHW), Randwick for the past 20 years. Her most recent position was Nurse Educator in the Newborn Care Unit. Jo has a strong interest in resuscitation including the use of simulation to increase learning and the care of surgical infants. She is passionate about placing families in the center of the care team with Family Integrated Care.

Jo has travelled yearly to the highlands of PNG with a team from RHW to teach and support staff with the care of newborns, resuscitation and infection control and prevention especially hand hygiene.

Jo has recently been appointment as Conjoint Associate Lecturer in the School of Women’s & Children’s Health, University of New South Wales.
Farewell from PSN to Morwenna Williams

The staff at PSN would like to thank Morwenna for her work during her period at PSN. Morwenna came from Western NSW to fill the spot left by Chris Marsh who had been seconded to the eMaternity position.

We really enjoyed working with you and wish you well with your new position in Western NSW as the Project Officer for Leading Better Value Care Project.

Visit to the Eurobodalla and Bega Shires

Dr Danny Challis and Alison Goodfellow from PSN were invited to Moruya and South East Regional Hospitals (Southern NSW LHD) in the beautiful far South Coast. We were accompanied by the LHD CMC Amanda Gear. Day 1, involved touring Moruya hospital, the maternity service and the Gadhu Family Health Service.

Moruya maternity is a level 3 maternity service and has a birth-rate of 278-300 (2015-2016). Claudia Stevenson is the MUM, the service has midwifery outreach clinics at Batemans Bay and Narooma as well at Moruya itself. They have midwifery in the home programme that supports women following the birth. The service is supported by 3 GP Obstetricians and a specialist Obstetrician, Dr Michael Holland.

In the afternoon we participated in their multidisciplinary M&M meeting which was well attended and had representatives from the tertiary referral centre - The Canberra Hospital. We presented local Perinatal Advice Line (PAL) data as well as a compilation of birthing statistics for the last 5 years comparing their service to other level 3 services in NSW.

D Challis and A Goodfellow, excited to see they have quantified FFN testing available
The Gadhu Family Health services are a collaboration of AMIHS, Building Strong Foundations (BSF) and New Directions (Allied Health) services they all operate out of the same building alongside Moruya Hospital. It is the Eurobodalla One Stop Shop for Antenatal, Postnatal and Early childhood care for Aboriginal children. Gadhu is “Saltwater” so the understanding is that it is the Saltwater Family health services for Aboriginal children. The health service walls are adorned with local artist’s work as well as plaster cast belly art from the women that have come through the service.

The picture on the sign on the door and the original inside the waiting area is by Wayne Williams and depicts the mother watching over her son over the years growing from baby to taking his first steps towards becoming a young insecure child to a young teenager learning to hunt and discovering his first love to reaching maturity as a young male after full initiations with a totem place before him by his elders.

**Oval Shapes:** Dreamtime symbols giving life to him and his life’s Journey

**Large Circle:** Represents the young man’s life coming full circle

**Smaller Circle:** Represents his stages of youth bonding with his full circle of life leading to full adulthood and the many different paths he chooses to take

**Smaller Brown/Turquoise/White Circle path:** Shows the various stages of his early life from babyhood to young adult standings.

D Challis, A Goodfellow, J Jackson (Manager Gadhu) S Rutten (AMIHS Team Leader), with Wayne Williams painting behind

Day 2, was a visit to South Eastern Regional Hospital (SERH formerly known as Bega). The hospital is a brand new build which involved relocation to just outside of the Bega Township.
SERH is also a level 3 maternity service and has a birth-rate of 248 - 256 (2015 - 2016). The service is supported by Obstetrician Dr Glen Davies and locums on weekends. They have midwifery pregnancy care clinics at Eden & Pambula and at SERH itself. They also have Midwifery in the Home that provides postnatal care and support to the women in their region. AMIHS services for the Bega region is provided by Katungal Medical Service.

We were shown around the new hospital by the maternity service MUM Simone Shaw. They have a beautiful new maternity unit which includes facilities for water births. At present they are unable to utilise this wonderful labour support strategy to its full capacity as the service is still in negotiations around guidelines for birth in water for their region. They even had a PPH emergency (definitely not planned!) which was managed expertly whilst we were there.

We met with other members of the team including Dr Greg Davis and delivered a presentation on a local PAL case and presented the birthing statistics for the last 5 years. Our day ended at Merimbula airport where we flew back to Sydney and enjoyed the sights of the south coast from the air at sunset.
The 4th Annual NeoPaed Conference

The 2017 NeoPaed conference was held on Friday the 1st September at the new International Conference Centre at Darling Harbour.

247 delegates registered to attend the conference and from the feedback the day was deemed a great success. There were 11 speakers from Australia and New Zealand and the conference was supported by 11 sponsors. Some of the topics covered included the Golden Hour, Dextrose Gel and feeds – the story so far, Epigenetics, as well as an ethics panel discussion.

Two lucky delegates were the winners of the raffle sponsored by Havenhall. The winners were a RN from St John of God, Hawkesbury District Health Service and Fiona Colquhoun from Sydney Adventist Hospital.

Australian College of Midwives (ACM) Conference

The 2017 two day ACM NSW state conference was held in Tamworth. There were a total of 145 delegates of which 30 scholarships from NaMO that enabled student midwives to attend. The conference venue alternates between Sydney and a regional venue to help promote sharing our experiences.

The theme of the conference was Birthing in the Bush. The Keynote address from Dr Sue Kildea set the scene as she demonstrated the inequalities for women who live outside the city areas. Dr Caroline Homer sent a very powerful message addressing the disparities for women birthing at PNG compared to here in Australia with her first slide.

Local issues that were presented included challenges of maintaining midwifery group practice (MGP) in regional and rural Australia. An inspirational story presented by Alison Isaacs and Danielle Toigo described how they overcame the hurdles to continue their MGP at Broken Hill, with 5 midwives on maternity leave and their visionary MUM leaving the service. We also heard from consumers about the heart ache of loosing their MGP model when these hurdles became insurmountable and their service had to close.

Emma Hill gave an insightful presentation when she shared her personal journey relating to mental health and maternity care. Ann Kinnear – Chief Executive Officer of National ACM highlighted what’s happening within the college. One that was helpful for all members included free access to ACM webinars.

Jane Raymond from NSW Health gave an overview of the new look ministry which has gone through many changes.

Practice initiatives that were showcased included:

- Carmel Kelly - developed a resource for women relating to breastfeeding. The pamphlet is called “is my baby getting enough” and a presentation regarding the use of dextrose gel for the treatment of neonatal hypoglycemia rather than comp feeding
- Lyndall Mollar and Bernadette Leiser - Increasing vaginal birth with acupressure which had audience participation
- Sarah Winter shared her Royal North Shore Birth unit practice development project, helping midwives understand the full potential of their fantastic new birthing environment
On the second day Lyn Woodhart, from RHW presented her research examining women’s experiences of being transferred from other hospitals to RHW. Lyn Passant from PSN then discussed her research called the “WANTe Study” which aims to examine experiences of antenatal transfers for TPL to a perinatal centre from a state-wide perspective.

Dr Michael Nicholl – “Do we have a problem” led a thought provoking discussion about Maternity services in NSW

There were many more presentations and stories shared during the two day conference. It was a great atmosphere and when midwives get an opportunity to get together there is always great energy and enthusiasm.

Well done to everyone who got to attend and thanks to the organising committee who managed a great conference.

World Sepsis Day (WSD): How can YOU make a difference?

- WSD (13 September) was an initiative of the Global Sepsis Alliance to promote sepsis awareness internationally. We invite you to raise the profile of sepsis by participating in the sepsis photo campaign available on the CEC webpage.

- Participation in a free online World Sepsis Congress on maternal and neonatal sepsis was facilitated by GSA and World Health Organisation (WHO) on 12 September 2017.

- PSN participated in promoting the SEPSIS KILLS photo Campaign and the GSA and WHO online congress.

Quick simple treatment can save lives

Early recognition and rapid initiation of simple treatment can significantly reduce sepsis mortality rates. Three key actions are required to manage sepsis as a medical emergency:

- **RECOGNISE** the risk factors, signs and symptoms of sepsis

- **RESUSCITATE** with rapid intravenous fluids and administration of antibiotics within the first hour of diagnosis

- **REFER** to appropriate senior clinicians and teams with retrieval if appropriate

The SEPSIS KILLS pathways (Adult, Paediatric, Maternal and Newborn) are used throughout NSW public hospitals and have greatly improved the process of care and clinical outcomes for more than 36,400 patients. A recent publication in the Medical Journal of Australia shows patient outcomes have been improved when treatment begins promptly.

For further information contact: CEC-Sepsis@health.nsw.gov.au