



Traumatic Brain Injury

**GLOBAL
RESEARCH
EFFORT**



**YOUNGEST
TRANSPLANT
RECIPIENT
THRIVING**

**ASTHMA
TREATMENT
BREAKTHROUGH**

**ABI: A LOOK
AT THE FIRST
SIX MONTHS**

**SANDRINGHAM
HOSPITAL 50TH
ANNIVERSARY**

Growing ideas together

Alfred Health recently participated in the global social movement, *Change Day*.

This simple campaign – which is now recognised in four continents – encourages individuals who work in hospitals, aged care or community services to consider what they would

each change in their day-to-day work to improve health outcomes.

We asked our staff to make a public pledge – a promise on what they want to shift to benefit the health and



Andrew Way, Chief Executive, Alfred Health

wellbeing of others. The response was overwhelmingly positive, with many across medicine, nursing, and allied health adopting the campaign to share pledges via photos and video across social media.

Great ideas are born every day – and the more we nurture opportunities for sharing, and the more we listen to one another, the more we are likely to catch the ideas that promise real and positive change for our patients.

We can all make improvements to the way our patients are cared for and treated. While *Change Day* has come and gone, we welcome ideas all year round – both from our staff and our patients.

Growing ideas: 'Change Day' encouraged staff to share ideas about improving patient care. Some attached hand-written notes to our pledge trees, while others highlighted their ideas online. More than 40,000 pledges were made across Australia.



International award for Alfred specialist

A prestigious international award has been given to The Alfred's head of Women's Specialist Health Clinic.

Dr Susan Davis is one of just 14 awardees worldwide to be named an Endocrine Society 2015 Laureate Award winner. Dr Davis, the only

Australian recipient, has been recognised as an endocrinologist who has made exceptional contributions to endocrinology.

Dr Davis is internationally known for advancing the understanding of the role of androgens and estrogens in women, with research encompassing numerous aspects of women's health including breast cancer, cardiovascular function,

obesity, cognitive function, mood, sexual function and musculoskeletal health.

Her groundbreaking research has had a significant impact globally on women's health. She co-established the Jean Hailes Foundation, Australia's leading women's health educational organisation, and has been recognised for her work with the Australian Aboriginal community.

Founded in 1916, the Endocrine Society is the world's oldest, largest and most active organisation devoted to research on hormones and the clinical practice of endocrinology.

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For more on Alfred Health visit www.alfredhealth.org.au

GLOBAL EFFORT IN BRAIN INJURY RESEARCH

The Alfred is part of a major global collaboration seeking to improve the health and quality-of-life of people who are severely brain injured.

The Alfred is the lead Australian hospital involved in this large research project, initiated in 2011 by the European Commission, the Canadian Institutes of Health Research and the National Institutes of Health to advance clinical traumatic brain injury (TBI) research, treatment and care. The long term aim is to lessen the global burden of TBI.

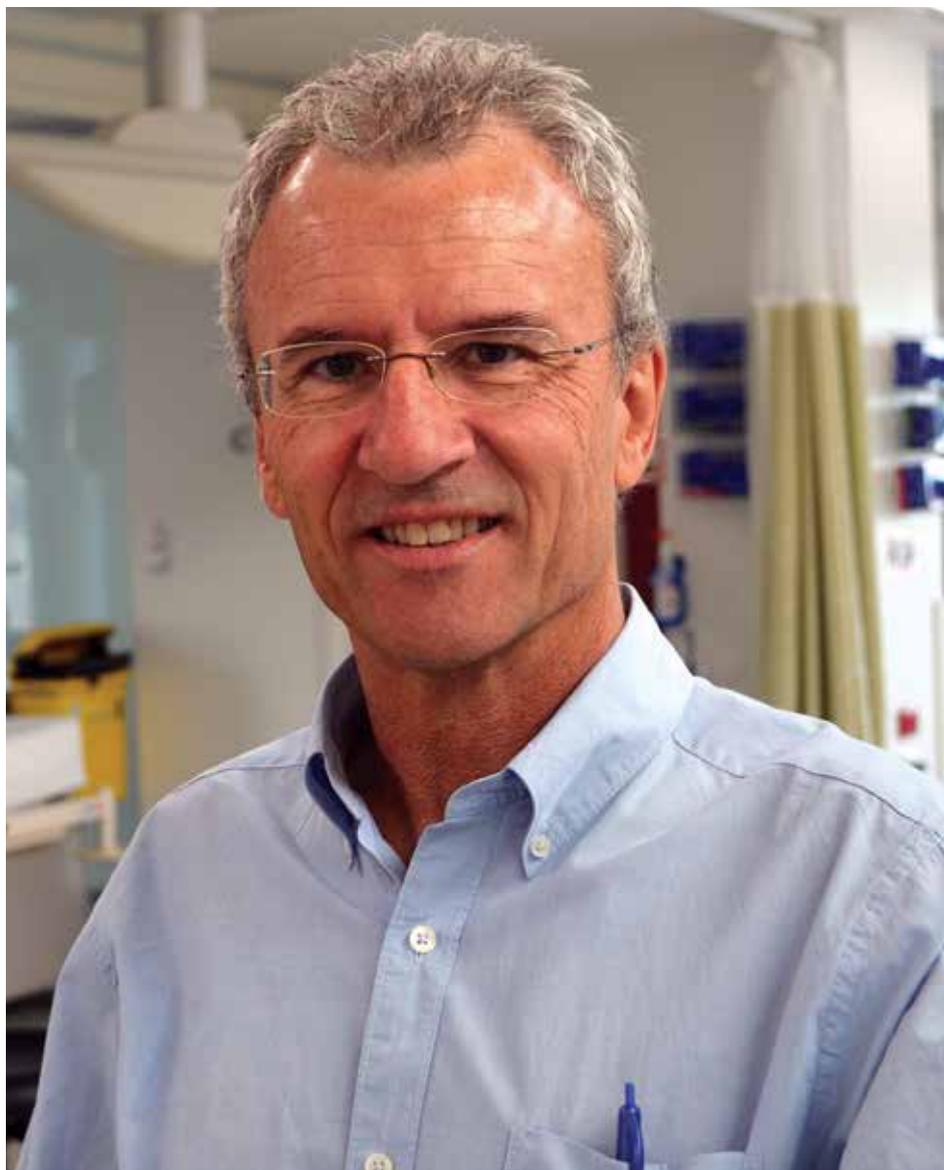
The World Health Organisation predicts that TBI and road traffic accidents will rise to the third leading cause of global mortality and disability by 2020.

Alfred intensivist Professor Jamie Cooper, head of intensive care research at The Alfred, has been invited to join this collaborative - called the OzENTER-TBI (Australia-Europe Neuro Trauma Effectiveness Research – Traumatic Brain Injury Collaboration).

“This is the first time there has been an international research collaboration on this scale in traumatic brain injury. All results will be in high demand by clinicians and researchers. Hopefully our results will inform daily practice,” Prof Cooper said.

The study’s first component aims to better characterise traumatic brain injury as a disease and identify the most effective clinical interventions for managing patients.

Another component will look at finding the ‘holy grail’ for doctors looking after TBI patients – a precise early outcome prognosis for families.



Professor Jamie Cooper

“At present it’s rarely possible to tell families if the patient will have severe disability at an early stage. We think this may be possible using advance MR imaging, which would be an extremely useful guide in early clinical decision making,” Prof Cooper added.

“Around the world, TBI is a major cause of death and disability for people under 45 years and the incidence is increasing due to the increased numbers of motor vehicle accidents in low and middle income countries.

So improving treatments and reducing disability in TBI is imperative.

“By working together the potential is huge: more effective research; better patient outcomes and reduced socio-economic burden from these injuries,” Prof Cooper said.

A large registry of observational data of up to 30,000 patients will be collected to allow researchers to identify both effective and cost-effective medical care on an unprecedented scale. Data will also be collected on promising emerging techniques that are being utilised internationally.

Recognising the project’s global value, the NHMRC has funded over \$350,000 supporting the Australian participation.



Winding

**BACK THE
CLOCK FOR
ZOE**

Alfred surgeons have performed life-saving surgery on a five-year-old girl, making her the youngest and smallest patient in Australia to undergo a heart and double lung transplant.

Zoe Brookes weighed just 12 kilograms when she was wheeled into an operating theatre at The Alfred late last year. She was desperately ill – a reality all too clear to her family and to the teams of doctors, nurses and allied health specialists that watched as her health rapidly declined. But what took place in the sterile surrounds of the operating room, and during the critical hours that followed, seemed to wind back the clock for the little girl from the south-eastern suburbs of Melbourne, Victoria.

The Brookes' were soon to learn that their darkest thoughts were no longer the most likely outcomes. Suddenly, a future was again possible for Zoe; challenging her siblings in the playground became thinkable; and starting primary school, like all children her age do, was something wonderful to strive for.

Respiratory physician Dr Glenn Westall is head of the National Paediatric Lung Transplant Program at The Alfred. Dr Westall said the team was calm as they prepared for the transplant, with theatre nurses sewing a special bright gown and surgical cap for his youngest patient.

"The positive feeling of teamwork – and the way the hospital came together for this ambitious procedure – was impressive," Dr Westall said.

Zoe had pulmonary arterial hypertension. It's a devastating illness that increases pressure in the arteries and lungs and eventually leads to heart failure if not controlled.

Cardiothoracic surgeon, A/Prof Silvana Marasco said while the illness can sometimes be controlled with medication, this is not always the case.

"The heart's right ventricle eventually becomes thick and dilated and it can no longer do its job properly. This eventually



Pictured - just some of the many staff involved in Zoe's care, including nursing, surgical, anaesthesia, allied health and medical personnel.

affects the blood vessels in the lungs and, by this stage, survival is poor," A/Prof Marasco said. The Alfred is home to the Nationally Funded Centre (NFC) for Paediatric

Lung and Heart-Lung Transplantation and, since becoming Australia's only dedicated paediatric lung transplant service, has given a second chance to 27 children, like Zoe, from all corners of the country.

"To offer an operation and lifelong care to a five-year-old who is about four times smaller than our average transplant patient is always going to represent a challenge, but it's an opportunity we embrace," Dr Westall said.

"Zoe is an absolute delight; she's grabbing life with both hands and we couldn't be happier for the Brookes family."

Zoe's illness had damaged her own heart and lungs and she urgently needed a transplant.

In the eleventh hour, a chance at life arose.

Some tiny donor organs, elsewhere in Australia, became Zoe's only hope.

That hope later became joy.

Reducing surgeries and doubt with new melanoma equipment

Alfred doctors are now able to diagnose melanoma prior to biopsy, with the help of a high-tech instrument that can screen previously inaccessible areas.

Head, Victorian Melanoma Service (VMS) at The Alfred, Dr John Kelly says while the older confocal microscope could only screen flat areas of skin, this new equipment can sit on curved skin and scan hard to reach areas, such as around ears and eyes.

“Using confocal microscopy we can diagnose melanoma, prior to biopsy and assess the extent of ill defined melanomas before to surgery also,” Dr Kelly said.

“It’s frequently difficult to assess the margins of large lesions with the naked eye. By scanning larger areas with this device we’ll be able to make accurate assessments of lesion margins to prevent second and third surgeries for incompletely removed melanomas.”

Confocal microscopy is particularly useful for assessing the most common types of melanoma - superficial spreading and lentigo maligna. These melanomas, which account for about 85 per cent of cases, see the melanoma grow along the top layer for skin for some time before penetrating more deeply.

The new equipment will also allow the Victorian Melanoma Service to take part, as one of two centres, in a national multi-centre study of improved treatments for lentigo maligna melanoma, with the outcomes monitored by hand held confocal microscopy.

Australia has the highest incidence of melanoma in the world and in the past five years The Alfred’s VMS has seen more than 2000 patients with these melanomas.

The hand held confocal microscope, worth almost \$100,000, has been purchased following donations by i ski for tommy and the Bonnie Roberts Melanoma Fundraiser.



Dr Raquel Ruiz Araujo uses the new device to scan once unreachable areas.

Australia has the highest incidence of melanoma in the world (more than 12 times the average world rate). Early detection of melanoma before it has spread can significantly improve a patient’s prognosis and survival rate.

“The microscope uses laser light to generate images of the cells in the surface of the skin in a level of detail that has previously only been possible with a biopsy after surgically removing tissue,” Dr Kelly explained.

“The new hand held device can scan large areas quickly and can study convex and concave areas with a much smaller area of contact with the skin.

“With more than 12,000 Australians diagnosed with melanoma in 2012, it’s essential we continue to advance the ways we diagnose and treat melanoma,” Dr Kelly added.

ASTHMA BREAKTHROUGH: *treating the right airways*

Emerging research may hold the answer for sufferers of severe asthma who have little relief from current medications.

Professor Bruce Thompson, Head Physiology Service in Allergy, Immunology and Respiratory medicine (AIRMED) at The Alfred is excited about his latest ground-breaking research, which is in its early stages.

“We think that current medications for severe asthma have not been particularly effective because they are treating the wrong airways,” Prof Thompson explained.

“Inhaled steroids only reach the medium to large central airways. However, in severe asthma we have shown the main problem occurs in the peripheral small airways, which are not reached by current medications. The mainstay of therapy – inhaled corticosteroids (the common inhaler) – often doesn’t work for those at the severe end of asthma.

“Our new study will treat patients with very fine particle inhaled steroids that will travel much further in the lungs.”

“If this research shows that improving outcomes for patients with asthma is as simple as inhaling a smaller particle drug, this will fundamentally alter current investigational and therapeutic approaches to patients with asthma; not only those with severe and unstable asthma but also those with milder forms of the disease,” Prof Thompson said.

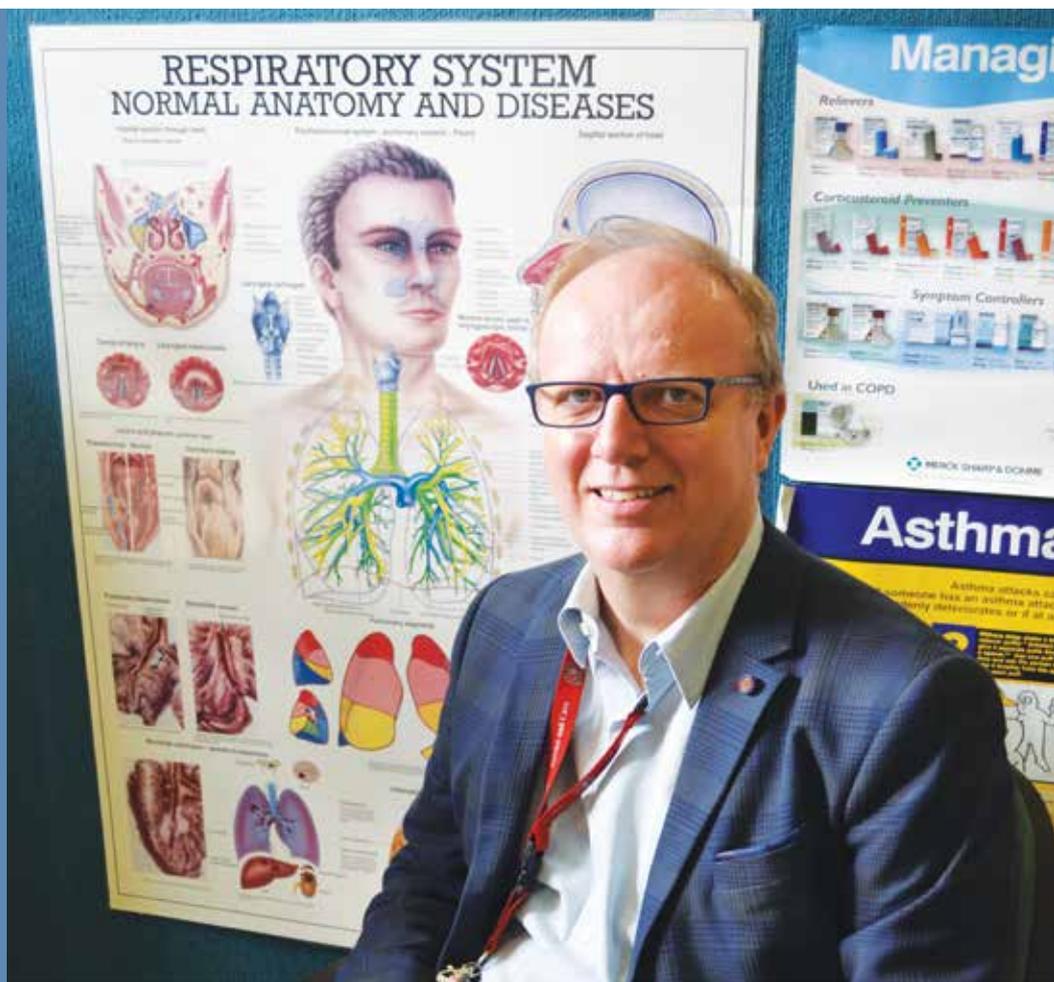
Prof Thompson and fellow Alfred chief investigator Prof Robyn O’Hehir, Director, AIRMED have compelling preliminary data from pilot studies that show the small airways are the predominant site of disease activity for asthma patients.

“More detailed research is needed, though we are hopeful small particle treatments will be effective,” Prof Thompson added.

The Alfred team is hopeful the study, funded to date by a National Health and Medical Research Council (NHMRC) project grant, will be a cost effective way to substantially reduce morbidity and healthcare costs associated with complications of severe and unstable asthma. The study, to be jointly performed with the Royal North Shore Hospital, will recruit 120 patients, aged 18-55 years, with severe asthma. This type of asthma occurs in almost half of the asthma population. Recruitment will begin in 2016, with results to be analysed in 2019.

Professor Bruce Thompson in The Alfred’s lung function lab, excited about new treatment for asthma.

- Asthma mortality in Australia is the highest in the world.
- The Alfred has one of the largest respiratory laboratories in Australia, which performs tests on approx 9500 patients per annum.
- In Australia, about 1 in 10 adults and about 1 in 9 or 10 children have asthma.



Six months on and an extraordinary success



Our new Acquired Brain Injury (ABI) Unit has had an “extraordinary” first six months, discharging patients who previously had no hope of reintegrating into the community in the short-term.

Caulfield Hospital’s ABI Rehabilitation Centre opened in September 2014 and is a statewide service for moderate to severe brain injury.

Opening in stages, there are currently 33 patients in the unit. Demand for the service is strong and its 42 beds are expected to be filled by the middle of the year.

Associate Professor Peter Hunter, Director Rehabilitation, Aged & Community Care - Alfred Health, says the service has achieved a series of ‘firsts’.

“We have a new group of patients, a new approach on how to care for people with ABI early on and we’re providing higher level clinical care – some still have a tracheostomy tube to help them breathe,” A/Prof Hunter said.

Clinical lead, ABI Rehabilitation Service Dr Mithu Palit says 40 patients have been discharged so far, with the intensive rehabilitation making a remarkable difference to patients’ ability to do daily tasks.

“We’ve developed a ward up from scratch and we’re doing what’s never been done before,” Dr Palit said.

“There have been a range of patients go through the unit, a mix of male and female, aged between 16 and 78.

“Our patients typically have difficult behaviours due to their conditions, which sets challenging scenarios both clinically and behaviourally.

“One patient who we just discharged home after five months had spent two years in the hospital system, unable to be discharged. He would have required care from two people around the clock. Our task was to reduce his erratic behaviour to a manageable level so he could live in the community. We achieved that. Now I call that a success.”

Commonly, patients have acquired a brain injury through car accidents, drug overdoses and some have a dual diagnosis of psychiatric illness along with brain injury.

Nurse manager ABI inpatient unit Katrina Neave leads a large team.

“We now have 50 plus EFT for nursing and 50 plus for Allied Health plus five medical staff. To deliver fantastic outcomes so early is brilliant,” she said.

“We have a psychiatric team and all our staff are involved in behavioural management plans. Plus there is a concentration on achieving functional and cognitive goals. Sometimes therapeutic care involves reading to the patient. This can calm patients before we move on to traditional therapy or personal care.

“It is patient and family directed – they lead the care.”

A/Prof Hunter adds: “Our service is all about active rehabilitation.

“We toured the world to learn about the best aspects of ABI care and we’ve implemented that here. It’s a unique service for Australia, not just the state.

“Added to that, we’re collecting data as we go along, in line with a multitude of research projects. That data will be a valuable resource for the whole of Victoria.”

The Centre's Transitional Living Service is due to open in the next few months. Situated across the road from the hospital, the four bedroom residence is designed to help patients become more independent before returning home.



SPECIAL DESIGN FEATURES EFFECTIVE

The centre has a homely atmosphere. A great deal of time was spent ensuring the design was just right. Each room has a window seat, ensuites and are designed to not look clinical, so the oxygen and medical paraphernalia is tucked away. The centre has courtyard areas that include a barbecue, basketball hoop, ping pong table and garden therapy area where patients are tending tomatoes, cucumber, parsley and chillies.

“Our goal is for patients to do tasks that are real life specific – we want them to spend an extended time standing and that’s what you naturally do when you’re by the bbq. That way you reach the therapy goals but it’s contextualised in an enriched environment,” Dr Palit added.

A low stimulation area with low lighting, darker films on the windows and more sound-proofing has proved effective for highly agitated patients.

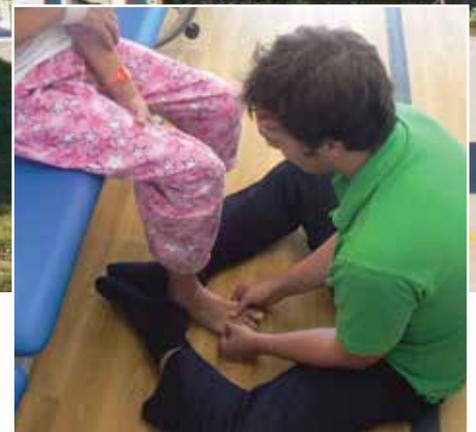
“They often come to us from an acute setting in four bed wards and highly stimulated area. They come into this area with a vast reduction of stimulus and they settle within hours,” Ms Neave said.

The other focus has been on family,

making family members a key part of the rehabilitation process. An emphasis is also put on families to look after themselves, with a family lounge that is a patient and staff free zone. Here families can prepare a snack, watch TV, let the kids play with toys or take time out while visiting. Special features are a highlight of the centre. The basketball hoop can be wound down to suit those in wheelchairs and the kitchen cupboards in the therapy kitchen can be lowered to match the height of home cupboards. Group participation is encouraged, with communal dining all part of the plan to work towards normal, daily life.

When patients are almost ready to be discharged, they move into a corner of the building that has its own kitchen and laundry. Family carers come with them and do a ‘trial of care work’.

“They help the patient out as required – it’s like a practice run before they go, in a supported way. We had some families who perhaps didn’t fully understand the level of dependency and care their relative required. After a weekend trial, they were able to take the patient home successfully. Nowhere else has this kind of facility; it’s amazing,” Ms Neave added.



The Unit has its own gym for physiotherapy.



Nurses Felicity and Joanne part of a large team.



The basketball hoop in one of the internal courtyards is popular with patients and their visitors.

MONITORING HEALTHY RECOVERY AFTER SURGERY

Doctors may soon be able to predict which patients are likely to experience poorer outcomes after surgery by drawing on data from a world-first study into post-operative disability.

Anaesthetists at The Alfred have applied an internationally recognised disability measure – previously reserved for arthritis, stroke and other patient groups – to track the wellbeing of patients up to one year after undergoing surgery.

The tool - a questionnaire developed by the World Health Organisation - has not previously been applied to the measure of outcomes after surgery.

Alfred anaesthetist and lead author on the study, Dr Mark Shulman said the results confirm the tool is able to accurately and reliably measure the impact of surgery in a way that is meaningful to both doctors and patients.

“We followed more than 500 patients for up to one year following their operation, measuring their physical, cognitive and social function at key intervals,” Dr Shulman said.

“We wanted to know whether they had chronic pain, whether they had returned to work and resumed their usual social activities, whether they were still in rehab or, in some cases, had passed away.

Director of Anaesthesia and Perioperative Medicine, Prof Paul Myles said data from this study, and follow-on studies, will eventually help to predict which patients may not benefit from certain surgeries, or will need closer monitoring during and after their time in the operating theatre.

“Patients want to recover well, and return to their families and work with full-function,” Professor Myles said.

“By identifying which patients are at risk of disability we may sometimes choose to avoid surgery or, at least, modify the surgical approach.

“Most importantly, we will be better placed to help our patients make more informed decisions about surgery by comparing the benefits with the expected risks for that individual.”



Dr Mark Shulman.

Groundbreaking new Alzheimer's trial

A Victorian patient with Alzheimer's disease has become the first in the world to be given a new drug that experts hope will further treatment for the most common form of dementia.

The renowned reputation of Caulfield Hospital's clinical trials team led to the approach by the US-based developer of the drug. The team was then selected to lead a trial evaluating the novel drug – giving Victorians exclusive access ahead of other research centres.

Unlike current medications, Anavex is unique because it is designed to both relieve sufferers' symptoms and slow the progression of the disease.

Director of Aged Psychiatry at Caulfield Hospital and study lead, Associate Professor Steve Macfarlane said there is need to find better treatments for Alzheimer's disease.

“Existing drug treatments for Alzheimer's target a patient's symptoms, but don't halt or cure the disease. New trials are focusing on being able to modify the disease's progression,” A/Prof Macfarlane said.

“This trial – Anavex 2-73 – is exciting because data from pre-clinical studies has indicated potential to both improve memory and slow the disease.”

Patients are currently being recruited for the trial. To be eligible for the study, patients should have early-stage Alzheimer's and be on the cognitive enhancer, Aricept.

Results of the trial could be known within a year and, if positive, will pave the way for a larger clinical trial.

Questions about trial participation can be directed to Michael Kornhauser, Caulfield

Hospital Aged Psychiatry clinical trials coordinator, on (03) 9076 6110 or via email adclinicaltrials@cgmc.org.au.



The Anavex trial attracted significant media interest. A/Prof. Stephen Macfarlane discusses Anavex with SBS.

INTENSIVE LINKS: *global connections*

As a teaching institution, Alfred Health is renowned for passing on knowledge and expertise. In recent years, education and training has extended far beyond Melbourne.

Since 2011, The Alfred has forged a relationship with the Chinese region of Shenzhen. In December 2014, a team from The Alfred's ICU again visited to share their knowledge in critical care, in a region where our trauma system is alien.

This followed the signing in 2012 of a Memorandum of Understanding between The Alfred and the 2600-bed Longgang Central Hospital (LCH), with the agreement promising to enhance clinical practice at the Chinese hospital, while providing research opportunities for The Alfred.



In 2009 Alfred ICU staff began teaching a two day intensive care course to junior medical staff in Cambodia. In following years Alfred staff also taught in Bali, New Zealand and Fiji.

An Alfred team was invited to provide keynote presentations at the hospital's critical care conference. This team comprised intensivists, emergency physicians, ICU and ED nurses, and surgeons.

"All the critical care doctors and nurses from the region came to the conference," Dr Ihle explained.

"The Chinese government has decided to adopt a western approach to the Shenzhen region, which 30 years ago was countryside. In 30 years the population has gone from 20,000 to 17 million."

Chinese medicos are particularly interested in Alfred Health's systems approach, where teamwork is key.

"In China they work in silos, so the trauma surgeon will care for the patient until they are dischargeable from those trauma injuries," Dr Ihle explained.

"They then might hand the patient over to the orthopaedic surgeon up to two months down the track, after he's been in traction all that time.

"We talked to them about our MET calls where multiple people take care of a patient and our trauma teams which include an anaesthetist, intensivist, trauma doctors and nurses all working together.

"It's all very foreign to them – they do things quite differently. The thinking is you don't ask for help until you get to a roadblock and then you hand the patient over to the next specialist.

"But they are now talking about adopting a MET call system similar to ours."

The Alfred ICU wins top HR award

The Alfred's Intensive Care Unit won a prestigious Human Resources award for organisational change and development.

The Wayne Casico award, presented by the Australian Human Resources Institute, recognises outstanding people management initiatives. It acknowledges significant efforts made in recent years to improve teamwork within ICU, and between the unit and the health service.

Professor Scheinkestel, Director, Intensive Care & Hyperbaric Medicine accepted the award on behalf of the unit.

"Alfred Health is a great place to work with a culture of high quality patient-centred care. I am proud of the ICU team, who always strive for better outcomes," Professor Scheinkestel said.

Brain imaging, bipolar and family

In a unique new study, patients with mental illness and their relatives will be studied to better understand the mechanisms of the brain in bipolar disorder.

The brain imaging study being run through the Monash Alfred Psychiatry research centre (MAPrc) and Swinburne University will examine social and emotional processing, using neuroimaging techniques.

Lead investigator and post-doctoral researcher Dr Tamsyn Van Rheenen says there is evidence that people with bipolar disorder have difficulty identifying other people's emotions when looking at their faces.

"We think bipolar disorder impacts the ability to pinpoint others' emotions. There may be activity in the brain that leads to abnormal emotional responses," Dr Van Rheenen said.

"Evidence shows that people with bipolar disorder tend to process their emotions in accordance with what they are feeling. Even when they are not experiencing a mood episode, they tend to misinterpret people's expressions. We will be looking at the underlying brain mechanism involved in that."

It is thought that these emotional and social problems may represent biomarkers, so those with bipolar and their relatives will give blood samples, allowing researchers to study the biological components of these brain impairments.

MAPrc director Professor Jayashri Kulkarni added: "bipolar disorder is a severe mental illness that can prevent people from maintaining meaningful relationships.

"This research will help to improve the quality of life of people with bipolar disorder".

The study, which will run for several years, will involve 40 people with bipolar disorder, 40 of their relatives and a control group of 40. To participate, email tamsyn.van-rheenen@monash.edu

Honour for distinguished service

Alfred intensivist Professor Steve Bernard received an Australia Day honour for his distinguished service to the Ambulance Service.

As well as being an intensive care physician at The Alfred, Prof Bernard is the medical advisor to Ambulance Victoria

The Governor-General awards the Ambulance Service Medal on recommendation from the appropriate Commonwealth, state and territory ministers.



Guiding

An innovative approach to promoting healthy eating has been recognised by VicHealth.

Alfred Health has won a prestigious Victorian Health Promotion Foundation Award which recognises the organisation's efforts in making healthy eating the norm.

Alfred Health's Healthy Choices program introduced a green, amber and red food and drink classification system into its three hospitals in 2010.

Since then the organisation has worked to promote cultural change. The organisation developed its own mandatory guidelines for catering and partnered with food retail outlets and suppliers to deliver nutritious food choices to over 1.8 million employees and visitors each year.

VicHealth CEO Jerril Rechter said Alfred Health's Healthy Choices program was a great example of a culture change

New space to broaden care

A belief in holistic care has resulted in a new outdoor garden being constructed for patients being treated for cancer.

Funds were raised for the redesigned courtyard through The Alfred's first ever participation in Dry July last year. Knowing the good cause, staff swore off alcohol for a month, attracting many sponsors to support their abstinence, with \$120,000 raised. The remainder of funds was donated by key supporters. Radiation oncologist specialist Dr Sasha Senthil, a Dry July participant, says the aim was to provide a tranquil outdoor space that patients could utilise during their treatment.

"We know that emotional wellbeing has a significant impact on the outcomes of cancer patients," Dr Senthil said.

"The Alfred has invested heavily in various technologies to ensure we deliver state-of-the-art cancer treatment. However, we lacked a dedicated space where patients can have all their emotional and spiritual needs addressed. We hope the money raised will let us develop a focal point for our patients to rest comfortably, process the information we bombard them with and allow them to engage in complementary therapies.

"We need to treat the whole person and open multiple avenues from which they may derive benefit. The psychological burden



Alfred participants of 2014 Dry July – William Buckland Radiotherapy Centre nurse manager Gael Wilder, medical receptionist Lisa Garretto and radiation oncologist specialist Dr Sasha Senthil.

of cancer is understated and any way we can help patients deal with this is important."

The courtyard, which will sit outside the hospital's William Buckland Radiotherapy Centre, is expected to be completed prior to this year's Dry July event. Alfred staff will again participate, with proceeds to again benefit cancer patients.

You can find out more about Dry July at www.dryjuly.com.au

all to eat right

program that has a small budget, but big impact.

"This is a vital health promotion project. Alfred Health is leading the way in making healthy food options the norm," Ms Rechter said.

Lead for Population Health and Health Promotion Kirstan Corben says the award is a testament to all the hard work that's been done with retailers, vending and catering.

"We're proud of our outcomes around healthy eating, especially proving that it's feasible and financially sustainable to implement healthy choices," Ms Corben said.

The annual awards acknowledge some of Victoria's most outstanding projects and campaigns involved in improving the health and wellbeing of Victorians. Other organisations nominated in this category included Darebin Community Health, the Obesity Policy Coalition and YMCA Victoria.

Eli Dannaoui from The Alfred Café, VicHealth CEO Jerril Rechter with Alfred Health staff Kirstan Corben – Lead for Population Health and Health Promotion, dietitian Kathryn Collins and Strategic Procurement Manager Steve McBride.



New era in residential aged care

A new, sustainable era for quality residential care at Caulfield Hospital has begun, with new provider HammondCare now on site and taking responsibility for 150 residential aged care places.

As part of a landmark agreement, HammondCare will also build a new \$30 million residential aged care village at Caulfield Hospital, replacing ageing facilities.

Alfred Health's Chief Executive, Associate Professor Andrew Way, says the new arrangement will benefit residents and their families.

"We're confident that HammondCare can continue the legacy we've created – one of outstanding care with a focus on quality and safety" said A/Prof. Way.

"Thank you to staff who have dedicated themselves so admirably during the transition and we welcome HammondCare as our new neighbours."



HammondCare

An independent Christian charity

David Martin, General Manager, Victoria, HammondCare said that his team is excited for the future.

"We're very excited to take on this responsibility and really acknowledge and thank the team at Alfred Health, who have maintained a high standard of care for us to follow. It's a real privilege to have this opportunity to keep a continuity of care and to build on this unique partnership with the hospital," Mr Martin said.

A NURSE PRAC FIRST



Peter Tregaskis is the first nurse practitioner in Australia to be endorsed in peritoneal dialysis.

No stranger to The Alfred's busy dialysis unit, Mr Tregaskis has worked as a peritoneal dialysis coordinator since 2010.

It is the autonomy and relationships built overtime with his patients, many chronically unwell, that inspired Mr Tregaskis to take his career to the next level.

After discussing service gaps in his team, Deputy Director of Renal Dialysis, Dr Solomon Menahem agreed to support him as medical mentor and in 2013 Mr Tregaskis enrolled in the nurse practitioner program. He looks back at the two years it took to complete his nurse practitioner candidacy with wonder.

"It is difficult to put into words just how busy I was back then," he said.

"It was a craziest of times, combining all my NP work plus completing my master's degree as well as organising our wedding. What was I thinking?"

The future of the renal dialysis unit at The Alfred is exciting. Mr Tregaskis is involved in a pilot telehealth program and other unit based projects that support the care of people on peritoneal dialysis. He also visits patients needing assistance closer to home.

In addition to patient care, a nurse practitioner's expanded responsibilities include limited prescribing of medications, admitting and discharging patients, ordering diagnostic and laboratory testing and referring patients to specialists.

NICHE SPECIALIST SERVICE KEEPING BUSY

While some of The Alfred's statewide services – like trauma care, burns and heart and lung transplantation – are high profile, others are small, niche but important services that help a small group of people with sometimes rare disorders.

One of these is the hospital's Victorian Neuromuscular Laboratory Service (VNLS), a highly specialised pathology service which looks after patients from throughout Victoria, Tasmania and southern NSW. The service provides diagnostic testing for a range of conditions that affect the peripheral nerves and muscles.

Under the directorship of Professor Catriona McLean, the laboratory is staffed by two full time scientists. Each year the laboratory will examine up to 450 muscle and approximately 70 nerve biopsies. Nerve and muscle biopsies are handled in a different way to all other tissues and are done by a very limited number of neuropathologists, due to the highly specialised nature of the work.

"Patient's muscle and nerve biopsies are referred to us after an exhaustive clinical work up including movement or strength tests, MRI, blood and urine analysis," senior scientist Paul Kennedy explained.



Senior scientist Paul Kennedy, scientist Fatima Tajbhai and Prof Catriona McLean, Head Anatomical Pathology, in the lab.

The spectrum of neuromuscular diseases is diverse and the age of patients biopsied extends from babies to the elderly. For an idea on how rare some of the diseases the neuropathologists are diagnosing - Duchenne muscular

- Professor McLean is a chief investigator on an NHMRC Nationwide Centre for Research Excellence in neuromuscular disorders.
- VNLS staff closely collaborate and discuss individual rare disorders within the Australasian Neuromuscular Network.

dystrophy is seen in one in 3,500 male births with other much less common diseases also being diagnosed. Many of these diseases remain incurable.

The service has been operating for 44 years at various sites, including stints at the Royal Children's Hospital and more recently the University of Melbourne's Pathology Department before moving back into the hospital system three years ago, with The Alfred winning the tender.

"Knowledge in this field is evolving extremely fast with the advent of next generation sequencing," Prof McLean said.

"With a better understanding of the diseases improved therapies will become available."

Vale Dr James Guest AM, OBE, VRD

Long-time Alfred surgeon, Dr James Guest has passed away – age 98.

Dr Guest was a significant contributor to The Alfred's surgery program for more than 60 years and remained active in the hospital community until 1981.

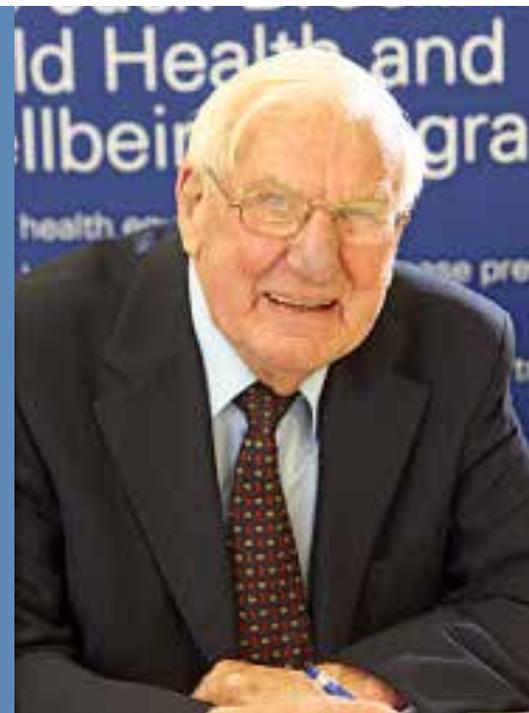
While he had a particular interest in colorectal surgery, Dr Guest became known for his approach to consulting on patients with multi-organ failure – a skill he shared with many fellow surgeons and medical students.

Throughout his distinguished career Dr Guest served in many roles away from

the operating theatre. These included Dean of the Alfred Clinical School, Chairman of the Medical Staff, and hospital Board member.

Dr Guest was a highly regarded naval officer (awarded an OBE for services during WWII) and was recognised for his extensive service to medicine and the community with a Member of the Order of Australia (AM) at the conclusion of his career.

Dr Guest will be remembered by his colleagues and friends at The Alfred as an excellent mentor, a skilled educator and surgeon.



OUR COMMUNITY

Alfred Health is fortunate to have the support of many community groups. Recently this has included a number of events.



Sandringham
HOSPITAL

Celebrating 50 with flair

As the 50th anniversary year for Sandringham Hospital wraps up after 13 events and more than \$275,000 raised, the community was thanked for its support.

Judy Reeves, Sandringham's Director of Nursing said the anniversary had been a great opportunity to reconnect with the local community.

“We’ve been able to extend the normal reach of Sandringham Hospital and broaden community awareness, thanks to the support of our community and staff,” Mrs Reeves said.

“It really is a significant milestone for a community hospital to reach 50 years and we’ve shown no signs of slowing down with the opening of a new emergency department, a new ophthalmology service and the opening of the Urgent Care Centre, while continuing to deliver high quality community care to our patients.



From L–R, nurses Jess Heale and Emily Smyth, associate nurse unit manager Robyn Powell and emergency department doctor Emma Foster.

The anniversary was supported by notable members of the community including the Victorian Minister for Health, the Hon. David Davis; 3AW's Dr Sally Cockburn; Bayside Mayor Felicity Frederico; The Women's CEO Sue Matthews and Board Chair Margaret Fitzherbert, Alfred Health's Chief Executive Andrew Way and Board Chair Helen Shardey and former Mayor of the City of Kingston, Paul Peulich.

Key events held included the opening of the newly renovated Emergency Department, the staff anniversary ball at Sandringham Yacht Club, an art

competition with local primary schools, a past staff lunch at the Brighton Savoy, a stakeholder cocktail function and many fundraising events including the Mad Paddle, Oaks Day lunches held at Sandringham Yacht Club and Royal Brighton Yacht Club and two golf days held at Royal Melbourne Golf Club, hosted by the Black Rock Sports Auxiliary and the Lions Club of Moorabbin.

Sandringham Hospital produced a 50th anniversary video which can be viewed at: http://www.youtube.com/watch?v=Ux_rFnXA96g

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