

Newcastle Private Patient Information Directory



For further details, see our website:

newcastleprivatehospital.com.au



Newcastle

PRIVATE HOSPITAL
by Healthscope

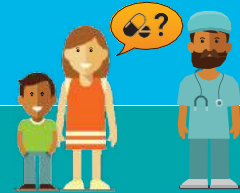
Top Tips for Safe Health Care



What you need to know for yourself, your family or someone you care for.

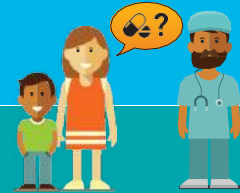
1 Ask questions

You have the right to ask questions about your care.



2 Find good information

Not all information is reliable. Ask your doctor for guidance.



3 Understand the risks and benefits

Find out about your tests and treatments before they happen.



4 List all your medicines

Ask your doctor or pharmacist if you need more information about the medicines you are taking.



5 Confirm details of your operation beforehand

Ask to be told who will be doing your procedure and what will happen to you.

6 Ask about your care after leaving hospital

Ask for a written outline of your treatment and what should happen after you get home.

7 Know your rights

You have a number of rights as a patient. Read our guide to find out what they are.

8 Understand privacy

Your medical information is confidential. You can ask to see your medical record.

9 Give feedback

Feedback helps health professionals spot when improvements can be made.

Download our free booklet at:
www.safetyandquality.gov.au/toptips



Healthscope acknowledges the Traditional Owners as the custodians of this land recognising their connection to land, waters and community. We pay our respects to Australia's First Peoples and their Elders, past, present and future.

This artwork titled "Coming Together" was developed by Stan Yarramunua, a Wathaurong man. The painting depicts elements of people coming together, a fundamental platform of Healthscope's reconciliation journey. For more information about the artwork, please visit: www.healthscope.com.au

Practise simple hygiene by washing hands regularly



1 Wet hands



2 Apply soap



3 Lather & scrub



4 Rinse hands



5 Turn off tap



6 Dry hands



Spend 20 seconds washing your hands.

Keep yourself and your loved ones safe



Stay 1.5 metres or two big steps away from other people



Follow NSW rules for gatherings and activities (individuals and businesses). Follow advice to avoid COVID-19 hotspots



Don't attend big family gatherings. Catch up with a small group instead



Stay safe when out and about. Take hand sanitiser with you. Clean your hands often



No shaking hands, hugging or kissing other people who don't live with you



Stay in if you feel unwell. Get tested if you have any symptoms. Avoid contact with others until you are well

COVID-19 symptoms



Fever



Cough



Sore throat



Shortness of breath



Loss of smell



Loss of taste

Stay Safe



Clean your hands thoroughly for at least 20 seconds with soap and water, or an alcohol-based hand sanitiser



Cover your nose and mouth when coughing and sneezing with a tissue or your elbow. Put the tissue in the bin and wash your hands

Patient Finder is a website which assists family and friends to track the status and location of a patient throughout their Healthscope hospital stay.

Patient Finder will provide all relevant patient location details including theatre status, ward, room number, phone extension, visiting hours and visiting status. If a patient changes wards or rooms, their location details are automatically updated.

How is patientfinder.com.au accessed?

There are two ways for a patient's family and friends to access Patient Finder:

1. Shortly after admission an SMS message with a secure link to the Patient Finder app will be sent to the mobile phone number listed on the patient admission form. By forwarding this message onto all relevant family and friends, they simply need to click on the link contained in the SMS, and Patient Finder will open displaying all the latest available details.
2. Alternatively, reception will provide the patient with a Patient Finder card (where appropriate) which includes the web address and a QR code for optional scanning. To retrieve patient details, please enter the state, the hospital and the patient's admission number.



www.patientfinder.com.au

Please note it is the responsibility of the patient to provide the Patient Finder link and patient admission number to their families and friends.

Healthscope Hospitals take no responsibility for the distribution of the Patient Finder link or patient admission number to anyone that is not the admitted patient.

Every effort is made to keep a patient's status up to date, however at times there may be delays to accommodate for a patients' movement throughout the hospital.

Patient Finder provides your family and friends with the comfort of easily knowing where you are in the hospital at any given time.

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Useful Phone Numbers

Main Hospital Phone Number (02) 4941 8400

Main Hospital Fax Number (02) 4952 5704

Making a local call dial '0'

Useful Internal Extension Numbers

Coffee Shop 8499

Executive Office 8712

Pharmacy 8498

Disclaimer

The hospital is grateful to the advertisers who have made this handbook possible.

Although an advertisement in this handbook does not imply an endorsement by the hospital, you are encouraged to support businesses that support the hospital.

Welcome

Newcastle Private Hospital is a provider of extensive private hospital services to the Hunter region and with 189 beds and ten operating theatres, a hybrid theatre and a standalone catheter lab, it is the largest private hospital in Newcastle, conveniently located on the campus of the John Hunter Hospital, New Lambton Heights.

Since the hospital opened under another name in the Croudace Building in 1994 the type of services offered has continued to expand in response to the needs of the community. Newcastle Private Hospital has been owned and operated by Healthscope since 1 June, 2007, providing the hospital with the support of an organisation that is a leading private health care provider within Australia, and one that operates in every state and territory.

Over 120 credentialed specialists have admitting privileges across a broad range of specialties, which include:

- Orthopaedics
- General Surgery
- Colorectal
- Gastroenterology
- Cardiology
- Cardiothoracic
- Neurosurgery
- Obstetrics and Gynaecology
- Vascular Surgery
- Urology
- Oncology
- Oral and Maxillofacial Surgery
- Otolaryngology
- Plastic Surgery
- Ear, Nose and Throat
- Thoracic Surgery
- Bariatric Surgery
- Rehabilitation
- IVF Services
- General Medicine

The hospital has a 15-bed Intensive Care Unit and a brand new 16-bed Coronary Care unit, ensuring patients are provided with a choice of where to receive their hospital treatment.

We hope the information contained in this handbook is useful during your stay with us. Of course, if you have any concerns, please feel free to ask any of the hospital staff.

Accommodation

Newcastle Private Hospital offers a range of private and shared, fully air-conditioned accommodation. All rooms have ensuite facilities for your comfort and privacy. We endeavour to provide patients with a private room when requested. However, there are times when this is not possible. If this happens, we will transfer you to a private room as soon as one becomes available.

Bedside Handover

At one nursing shift per day, a bedside handover takes place between nursing staff with the patient's involvement. If you have any concerns about your care, medication or anything at all, this can be discussed at bedside handover.

Coffee Shop

A coffee shop is located on the ground floor in the Kingston Building. Patients and visitors are welcome to use the coffee shop, which provides light meals and snacks, between the hours of:

Monday – Friday	7.00am–7.00pm
Saturday	9.00am–4.30pm
Sunday	9.00am–3.30pm

Community Agencies

We are happy to arrange all referrals to community agencies. These include the following:

- Community Health
- Meals on Wheels
- Cancer Support
- Palliative Care
- DVA
- Community Transport Services

Complaints and Compliments

We hope that your stay with us is relaxing and comfortable. We encourage you to discuss any concerns as they arise so that we may take appropriate measures to address the problem and make the remainder of your stay as comfortable as possible.

If you have identified an issue where you are dissatisfied, please discuss this with the Nursing Unit Manager in the first instance.

If the issue is not resolved to your satisfaction, or if the problem reoccurs, please ask to speak with the Director of Nursing or the General Manager. Complaints are taken very seriously and are viewed as an opportunity for us to improve our service, so please discuss your concerns early.

If you wish to refer the complaint to an independent external body, you may wish to consider contacting the Health Care Complaints Commission.

We welcome compliments and these are reviewed and staff informed of your positive feedback.

Computers and Internet

Personal computers may be used within the hospital. The hospital has a Wi-Fi service that is available for all patients. Please note that the hospital cannot accept responsibility for any of your personal equipment left unattended in your absence from the ward.

Discharge

If you believe you may have difficulty with transport or managing once you get home, please inform the nursing staff or the ward clerk, who may be able to arrange services in your home.

Your recovery will be enhanced if you plan for your after-discharge care, which may include:

- Transport arrangements to get home;
- Your capacity to care for your personal needs; and
- Your capacity to do your normal housework.

Staff are available to assist you with your post-acute hospital care, so if you have any concerns about any of these aspects of your discharge, please discuss them with your Nursing Unit Manager.

Discharge Procedures

Your discharge from hospital will be authorised by your doctor. The nursing staff will assist you to make the necessary travel arrangements to get home and instigate or resume any services that you require in the community. On discharge, you will be supplied with all the information necessary for any follow-up care or appointments and a Nursing Discharge Report.

The discharge time is 10.00am. If you have difficulty leaving by this time, please speak with the Nursing Unit Manager in advance.

Before leaving the hospital, please go to the reception desk to finalise any outstanding accounts.

Drink Vending Machines

Drink and snack vending machines are located on the ground floor of both the Kingston and Croudace Buildings.

DVA Veterans' Liaison Officer

A Veterans' Liaison Officer is available to provide information and support to eligible Department of Veterans' Affairs patients. The officer is onsite one day a week. Your Nursing Unit Manager can arrange a confidential appointment for you.

Electrical Equipment

All personal electrical equipment brought into the hospital with you must undergo an electrical safety check.

Please advise staff that you require a safety check prior to using electrical equipment.

Emergency and Safety Procedures

This hospital is fitted with a fire and smoke detection system.

In the unlikely event of an emergency occurring, DO NOT PANIC.

Return to your room and remain in or near your bed until you are instructed to leave by a Fire Officer or member of staff – all of whom are appropriately trained to handle emergency situations.

Financial Matters and Health Insurance

On admission to Newcastle Private Hospital you will be given written information of any fees and charges that you will be liable for during your stay. Radiology, pathology, physiotherapy, and pharmacy services ordered for patients by their doctors will be billed independently of the hospital by the providers of that service. You may be able to claim these expenses back from your health fund or Medicare, depending on your cover. If you have any questions on financial matters, please speak with our helpful reception staff.

Most major credit cards are accepted by the hospital.

Ultimately, the liability for debt incurred for hospitalisation lies with the patient or guardian. However, the hospital will cooperate fully in claiming any benefits payable by your insurance fund.

Our administration staff will be happy to assist you with any of your concerns relating to private health cover or insurance.

Housekeeping

Your room will be cleaned each day, or more frequently if required. Please notify nursing staff if you have a concern with any aspect of the housekeeping service. While every effort is made to ensure that the room is well maintained, if you identify any maintenance issues please advise a staff member.

Interpreter Services

Should you require the assistance of an interpreter, please advise the reception staff before coming into the hospital so that this can be arranged to coincide with your arrival.

Lifting Policy

The hospital embraces a minimal lift 'Safer Manual Handling Policy' as part of its commitment to provide a safe and healthy workplace. This policy not only aims to reduce the risk of injury to our staff, but also to promote your independence. If you do require assistance, the staff may use equipment such as wheelchairs, slide sheets or mechanical lifters, making it more comfortable and safer for you. We will encourage you to assist in your transfers and weight-bearing to maintain/develop strength and mobility.

Lounge Facilities

There are patient lounge areas available throughout the hospital with relaxing views. Please feel free to use these rooms at any time (restrictions may apply). Tea and coffee making facilities are available.

Mail

Mail is delivered to the wards daily and distributed by the ward clerk. Outgoing mail may be given to nursing staff or left at the ward reception. The cost of postage is your responsibility.

Meal Services

We pride ourselves on our attractive and appetising choice of meals from the menu provided. All meals are freshly prepared in the hospital kitchen, where we focus on presentation and meeting the patients' nutritional needs. Our menu is prepared in consultation with a dietician. If you have any special dietary requirements or food allergies, please advise the nursing staff on admission.

Meal Service Times

Meal times are approximately:

Breakfast	7.30am–8.00am
Morning Tea	10.00am
Lunch	12.00noon–1.00pm
Afternoon Tea	3.00pm
Dinner	5.00pm–5.30pm

Medical Imaging (X-Ray)

Medical imaging services are provided by Hunter Imaging Group, an independent Radiology service that is located on the ground floor of the Kingston Building.

If medical imaging services are provided, you will be billed directly by Hunter Imaging Group and not by the hospital. This account may be rebateable against your private health insurance, depending on your cover.

Medical Staff

All of our Visiting Medical Officers (VMO) undertake a rigorous credentialing process to ensure you receive quality care. The doctor who admits you is responsible for your medical care whilst you are in Newcastle Private Hospital. Any questions that you have about your medical treatment or tests should be directed to your VMO.

Onsite medical cover is provided by the hospital Career Medical Officer (CMO), and is available 24 hours a day.

These experienced doctors provide immediate emergency assistance and can also provide medical assistance by arrangement with your specialist or at the discretion of your Nursing Unit Manager.

Medications

If you are taking medications at home, please bring them all into hospital with you. These should be drawn to the attention of the nursing staff, who will lock these medications away and administer them during your stay.

National Safety and Quality Health Service (NSQHS) Standards

The Australian Commission on Safety and Quality in Health Care developed eight (8) standards to drive the implementation and use of safety and quality systems and improve the quality of health service provision in Australia.

Nurse Call Button

Your nurse call bell is located in the television control handset at your bedside.

A member of the hospital staff or a hospital volunteer will show you how to use this during your initial orientation to the room. Nurse call buttons are also located in bathrooms and toilets.

A nurse will answer your call as soon as possible.

Nursing Staff

A Nursing Unit Manager (NUM) is in charge of each of the clinical units. They are responsible for coordinating care and ensuring that high clinical standards are maintained.

We carefully select our nursing, allied health, catering, housekeeping and administrative staff to ensure that we deliver quality patient care and a high standard of customer service. After hours, there is an After Hours Supervisor in the hospital at all times.

Occupational Therapist

Should you require the services of an occupational therapist to assist you with your transition to recovery, your Nursing Unit Manager in consultation with your specialist will make the necessary arrangements on your behalf.

Parking for Patients and Visitors

Parking is provided at Newcastle Private Hospital.

After entering the John Hunter Hospital site, follow the signs toward Newcastle Private Hospital.

Hourly Fees apply to all parking areas. Ask our staff if you require any assistance.

Pastoral Care Services

Pastoral care and religious visits can be arranged on request. Otherwise, feel free to have your own pastoral carer visit. Please ask a nurse if you would like a visit.

Pathology

Independent pathology companies provide pathology services. Clinical Labs is located on the ground floor of the Kingston Building.

Patient Feedback

Your comments are important to us. Please feel free to use the Feedback Box located in the foyer of the Kingston Building.

Patient Satisfaction Survey

The hospital welcomes your input through our Patient Satisfaction Survey. These are available in all wards/units, and if you provide an email address, a copy can also be sent to you electronically.

Patient/Visitor Assist Button

A Yellow Assist Button is located behind all bed areas. This can be pushed by patients/relatives/visitors if there are any serious concerns with regards to the patient's condition.

Personal Laundry

We are unable to do personal laundry at the hospital. External laundry arrangements need to be organised by patients or family.

The hospital does not accept responsibility for lost clothing.

Pharmacy

Newcastle Private Hospital Pharmacy is an independent retail pharmacy service located on the ground floor in the Kingston Building. The pharmacy also provides a range of gifts, confectionery, toiletries and other personal items for sale, and is open from 8.00am–5.00pm Monday to Friday.

Physiotherapy

Newcastle Private Hospital provides inpatient physiotherapy services for patients who require this as part of their treatment.

Security

In the interests of safety and security of patients, staff and visitors, Newcastle Private Hospital enforces a lockdown between the hours of 9.00pm and 6.00am.

Visitors entering the hospital during these times will be required to show identification to the After Hours Supervisor, as well as sign in and carry a visitors pass.

Smoking

Newcastle Private Hospital is A SMOKE-FREE CAMPUS. Patients can request medication assistance to manage nicotine withdrawal by discussing this with their Medical Officer.

Social Worker

Should you require the services of a social worker, please discuss this with your Nursing Unit Manager, who will make the necessary arrangements on your behalf.

Speech Therapy

Speech therapy services are available for patients who require this as part of their treatment.

Staff Identification

All staff wear name badges as a means of identification and internal security. The badges show the staff member's photo, name and position.

Stomal Therapist

Stomal therapy services are provided for patients who require this service. The costs associated with inpatient treatment is covered in the bed fee at no extra cost to you.

Students

Newcastle Private Hospital participates in clinical placements for undergraduate nursing and allied health students with many tertiary organisations. These students work under close supervision at all times and sign a confidentiality agreement to ensure privacy.

Telephones

Bedside telephones are available for your personal use. Local calls are free. To make a local call simply dial '0', listen for dial tone, then dial the number.

Incoming Calls

On admission, the nursing staff will provide you with the ward's telephone number for your incoming calls. If your family and friends wish to contact you, please advise them of the ward number.

Mobile Phones

Mobile phones may be used.

Television

Every patient has access to a remote-controlled, colour television with free-to-air programs. Each handset has a headphone jack.

There are also televisions in each of the patient lounge areas.

Valuables

We strongly recommend that you do not bring expensive jewellery or large amounts of money into hospital with you.

If this is unavoidable, the hospital can store your valuables in the safe on request. The hospital can only accept responsibility for your valuables if these are stored in the hospital safe and a receipt is issued.

Visiting Hours

Visiting hours are in place to ensure that patients receive a balanced amount of time with family and friends and time to rest and recuperate. These times at Newcastle Private Hospital are as follows:

Maternity	4.00pm–8.00pm
Other Areas	10.00am–12.00noon, and 4.00pm–8.00pm

Subject to change, any adjustments will be communicated accordingly.

Volunteers

Newcastle Private Hospital has a team of volunteers who assist patients and staff throughout the hospital. Volunteers wear a hospital identification badge. If you are interested in joining this team, please inform the nursing staff.

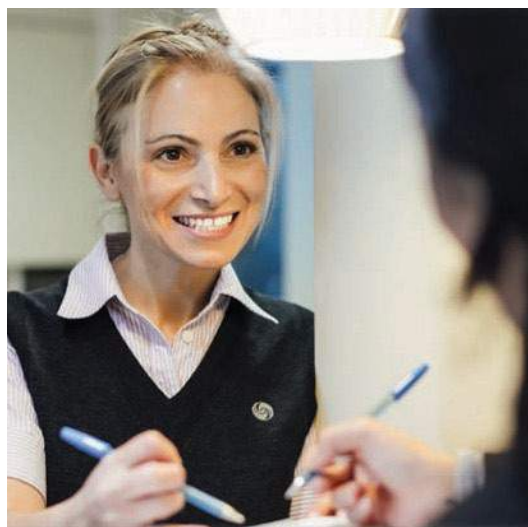


Confidentiality

The staff at Newcastle Private Hospital respects and upholds your rights to privacy protection under the Australian Privacy Principles contained in the Privacy Act 1988. The Australian Privacy Principles apply from their introduction on 12 March 2014.

What personal information about me does Newcastle Private Hospital hold?

Newcastle Private Hospital will record all of your personal and medical details required for your care for further information please refer to Healthscope Privacy Policy: <https://healthscopehospitals.com.au/>



Bringing Food

Whilst Newcastle Private respects your right to supply your own food from home or another external source, we do not encourage this. When food is brought into the hospital from external sources, we are unable to guarantee its safety. This may lead to illness for those who consume it. Should you wish to bring in food from any source outside the hospital, please note the following:

- All perishable food must be in a sealed container or manufacturers packaging
- All perishable food must be labelled with patient's name and placed in the fridge in the ward pantry
- All perishable foods must be dated at the time of preparation or opening and will be discarded 24 hours after the date indicated
- Any food with a manufacturer's expiry date and storage instructions will be strictly adhered to. Fruit and other non-perishable foods are allowed to be kept in your room.



Let's work together to prevent hospital falls.

When in hospital, all adults are at risk of falls. Please consider these suggestions to prevent falling.

Please use the call bell

You will be shown how to use your call bell. It is there for your safety, so please use it if you need assistance or supervision.

Walking, balancing and exercise

- If you have a walking stick, crutches or frame, keep within easy reach and use every time you walk.
- Don't rely on furniture for support.
- Take your time when turning or multi-tasking.
- Take special care with steps, stairs, slopes, ramps and uneven ground.
- Please use the handrail for support.
- Gently walk when advised by your clinician.
- If prescribed, do your rehabilitation exercises as shown by your therapist or nurse.

Bathroom and toilet

- Many falls occur in the bathroom, so use your call bell and wait for assistance, if needed.
- Don't rush.
- Be extra careful with slippery surfaces or if there is water on the floor.



Footwear

Do wear:

- ✓ Properly fitting shoes or slippers
- ✓ Shoes with laces or Velcro

Don't wear:

- ✗ Tight Shoes
- ✗ Worn Shoes
- ✗ Loose Shoes
- ✗ High heels
- ✗ Slippery soles
- ✗ Socks alone

Mental state

- If you experience confusion or impaired cognition, you may benefit from extra assistance. Please use your call bell and wait for help.
- Family and carers can assist staff by alerting them if they notice a change in their relative's mental state.

Who to talk to

Our aim is to help you to prevent falls. If you have any questions, please speak to a staff member.

Handy hints to prevent falls

- Take your time when getting up as you may feel dizzy.
- Let staff know if you feel unwell or unsteady on your feet.
- Some conditions or medications can make you feel light-headed, dizzy or unsteady. If so, please take special care.
- If you have glasses, please use them.
- Only do one task at a time.
- Please use your call bell if you require assistance.



Blood transfusion

Information for patients

BLOOD COMPONENTS AND PRODUCTS

Blood for transfusion is separated into different components and manufactured into a number of products. You might receive one or more of the following products.



Red blood cells deliver oxygen to your tissues and organs. You might need a red blood cell transfusion if you've lost blood due to an injury or surgery. You might also need them if you have severe Anaemia (not enough red blood cells).



Platelets are yellow in colour. You might need a platelet transfusion to help prevent or stop internal bleeding (bleeding you cannot see) or external bleeding.



Fresh frozen plasma and cryoprecipitate are also yellow in colour. They are thawed before they are given to you. These products contain clotting factors that work with platelets to help seal wounds.



You might also be given other types of **manufactured blood products**. These include concentrated blood proteins, such as:

- specific clotting factors to treat bleeding disorders
- immunoglobulins to help fight infections
- albumin to help maintain blood volume.

WHY DO I NEED A BLOOD TRANSFUSION?

Some common reasons for having a blood transfusion are:



- losing a lot of blood due to an accident, surgery or having a baby
- your body is not making enough blood, or your blood is not working properly due to illness
- anaemia that cannot be treated with iron alone.

Your doctor will talk to you about why you might need a blood transfusion.

IS A BLOOD TRANSFUSION SAFE?

Blood for transfusion in Australia is very safe. Blood is collected from healthy volunteer donors, but there can be some risks.



Infection

All blood is tested for disease. The risk of getting hepatitis C or HIV from a blood transfusion is less than one in a million.



Getting the wrong blood

This happens very rarely. This risk is reduced by staff confirming with you your name and date of birth when the blood test is done and before the transfusion. In addition, there are checking actions in the laboratory.



Having a reaction

Reactions are uncommon. A mild reaction may include a rash or fever. Severe reactions include difficulty breathing, high fever or a serious allergy.

BEFORE THE TRANSFUSION



The doctor will discuss the risks, benefits and any other options open for you.
You will be given some written information to take away and read.
You, or someone eligible to act for you, will be asked to sign a **consent form**.

BEFORE YOU HAVE A BLOOD TRANSFUSION YOU WILL NEED A BLOOD TEST



Blood test

The blood test will check and confirm your blood group.
This is to make sure the blood given to you matches your own blood.



Checking your identity

Before the blood test the collector will ask your name and date of birth. This is then checked against the test request form.
This is a critical step.

Speak up if they have any details incorrect.

GETTING READY FOR THE TRANSFUSION



Your comfort

If you need to, please ensure you have been to the toilet before the transfusion starts.



Vital signs

Your temperature, blood pressure, pulse and breathing will be checked before starting the transfusion.



Making sure you get the right blood

Two nurses will ask your name and date of birth. Your hospital number, will also be checked on your wristband, the blood bag and the blood prescription. If everything matches the blood transfusion can begin.

These checks are a critical step.
! SPEAK UP if they have any details incorrect.

DURING THE TRANSFUSION



Your temperature, blood pressure, pulse and breathing will be checked soon after the transfusion starts.

The nurse will keep a close watch on you. If you feel unwell in any way you must tell the nurse straight away. If you feel unwell during the transfusion a doctor may come to see you.

AFTER THE TRANSFUSION



Your temperature, blood pressure, pulse and breathing will be checked after the transfusion.

You might have a blood test taken after the blood transfusion to check that your blood count has improved.

To receive this publication in an accessible format,
email bloodmatters@redcrossblood.org.au

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Available on the Blood Matters website <https://www2.health.vic.gov.au/hospitals-and-health-services/patient-care/speciality-diagnostics-therapeutics/blood-matters>.

Consumer input provided by the Blood Matters Advisory Committee member health services consumer participants. (1912584)

PREVENTING BLOOD CLOTS

INFORMATION FOR PATIENTS & CARERS

Sometimes blood can pool and thicken inside normal, healthy veins and block the flow of blood through the body. This is known as a blood clot. Blood clots can be minor and have no signs or symptoms, but they can also cause significant health issues and, in some cases, lead to death.

Most blood clots occur in the deep veins of the legs or groin. Occasionally, clots break free from the area and move to other parts of the body, including the lungs. Blood clots that move to the lungs are particularly serious.

Blood clots are a leading cause of preventable death in Australia. Early detection and treatment of clots can help reduce the risk of harm. However, preventing clots is much easier, safer and more effective.

Causes of a blood clot

Being a patient in hospital increases your chance of getting a blood clot, particularly if you are having or have recently had surgery or a procedure, or if you are unable to move around as usual. A clot could occur during your stay in hospital or after you return home following treatment in hospital.

Your risk of developing a blood clot is increased if:

- You are over 60 years old
- You are overweight
- You have had a blood clot before
- Someone in your family has had a blood clot
- You are pregnant, or have recently given birth
- You have cancer or are undertaking cancer treatment
- You are on the contraceptive pill
- You take hormone-replacement therapy
- You have a chronic illness (like heart disease) or a blood disorder.

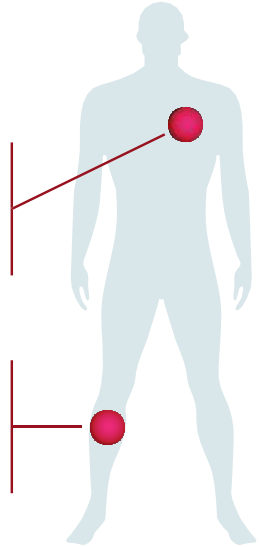
Speak to your doctor if you have any concerns.

Signs and symptoms of a possible blood clot

Tell your doctor or nurse if you experience any of the following:

Chest pain, sudden shortness of breath or coughing up blood-stained mucus

Pain and/or swelling in the legs. Skin may be red or warm to touch



Disclaimer

This fact sheet is for educational purposes only. It should not be used to guide and/or determine actual treatment choices or decisions. Any such decisions should be made in conjunction with advice from your treating doctor or other health professionals.

What you can do to help prevent a blood clot while in hospital



Drink water

Water helps blood flow. Check with your doctor how much water you should be drinking per day.



Stay active

Staying as active as you can will help to keep your blood flowing. Ask your doctor if it's ok to walk around.



Keep your stockings on

If you've been given compression stockings to wear, keep them on as directed.

What your doctor will do

To help prevent you from developing a blood clot, your doctor may need to prescribe an anti-clotting medicine and/or a mechanical device. If you think you are at risk, please discuss with your doctor.

Anti-clotting medicine

This is a medicine that slows down the formation of a clot, making it less likely to form. Your doctor will choose the best medicine suited to you. It may be an injection or tablet that you will be given each day while you are in hospital, or until you start moving around as usual. You may need to continue taking the medicine when you go home.

Mechanical devices

Mechanical devices apply pressure to your legs to help keep the blood moving around. There are many different types of mechanical devices.

The most common are compression stockings, intermittent pneumatic compression (IPC) devices and venous foot pumps.

If they become uncomfortable to wear, speak to your doctor or nurse before you remove or adjust them.

Acknowledgements

This information leaflet has been adapted from 'Blood Clots and You', developed by Southern Cross Hospitals, New Zealand.

Your "Going Home" Plan

<Place Patient Sticker Here>

Complete the following with your doctor or nurse to record what you have been given to help prevent a blood clot after leaving hospital:

Medicine: _____

Dose: _____

When to take: _____

For How Long: _____

Mechanical Device: _____

For How Long: _____

If you start to develop swelling or pain in either leg, shortness of breath or chest pain, contact your GP immediately or go directly to an emergency department.

Medical terms for blood clots

Deep Vein Thrombosis (DVT) is the medical term for a blood clot in the deep vein of the arms, legs or groin.

Pulmonary Embolism (PE) is the term for a blood clot that has travelled to the lungs.

DVTs and PEs are collectively known as venous thromboembolism (VTE).

About the VTE Prevention Program

The VTE Prevention Program is run by the Clinical Excellence Commission. It aims to help prevent patients in hospital from developing blood clots (VTE).

The program raises awareness, improves clinical practice, and promotes the risk assessment of all patients and prescription of appropriate treatment to reduce the risk of developing a VTE.

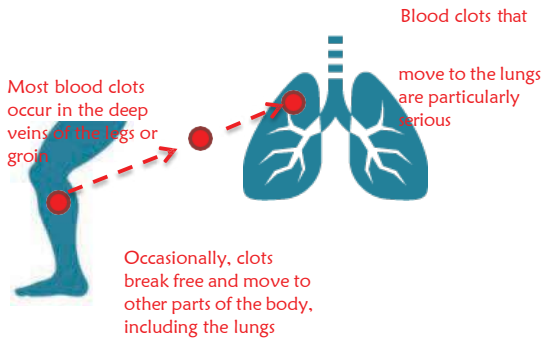
For further information, please visit <http://www.cec.health.nsw.gov.au/programs/vte-prevention>

Preventing Blood Clots: Information for Patients and Carers, Released September 2014, © Clinical Excellence Commission 2014. SHPN (CEC)140237

PREVENTING BLOOD CLOTS IN PREGNANCY AND AFTER BIRTH

INFORMATION FOR WOMEN & THEIR FAMILIES

A blood clot can sometimes occur if blood pools and thickens inside normal, healthy veins. They can then block blood flow through the body. Blood clots can be minor with no signs and symptoms, but some can cause significant health issues and, in some cases, lead to death.



Your chance of getting a blood clot may be increased if you are pregnant or after the birth of your baby.

Contributing factors

Your risk of developing a blood clot is increased if:

- You are over 40 years of age
- You are overweight
- You have had a blood clot before
- Someone in your family has had a blood clot
- You have a chronic illness (like heart disease) or a blood disorder (like thrombophilia)
- You have severe varicose veins

During Pregnancy

- You are admitted to hospital
- You are pregnant with more than one baby
- You become dehydrated or less mobile e.g. due to vomiting early in your pregnancy
- You are immobile for long periods of time e.g. after an operation or when travelling for > 4 hours
- You have pre-eclampsia



After the Birth of Your Baby

- You had a very long labour (> 24 hours)
- You had a caesarean section
- You lost a lot of blood after you had your baby or received a blood transfusion



Speak to your doctor or midwife if you have any concerns.

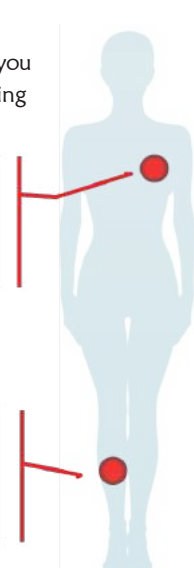


Signs and symptoms of a possible blood clot

Tell your doctor or midwife if you experience any of the following symptoms:

Chest pain, sudden shortness of breath or coughing up blood-stained mucus

Pain and/or swelling in the legs. Skin may be red or warm to touch



What you can do to help prevent a blood clot



Drink water

Water helps blood flow. Check with your doctor or midwife how much water you should be drinking per day.



Stay active

Staying as active as you can will help to keep your blood flowing. Ask your doctor or midwife if it's ok to walk around.



Keep your stockings on

If you've been given compression stockings to wear, keep them on as directed.

What your doctor will do

To help prevent you from developing a blood clot, your doctor may need to prescribe an anti-clotting medicine and/or a mechanical device. If you think you are at risk, please discuss with your doctor or midwife.

Anti-clotting medicine

This is a medicine that slows down the formation of a clot, making it less likely to form. Your doctor will choose the best medicine suited to you. You will most likely be given an injection that you have each day for a specific period of time. If you have been in hospital during your pregnancy, or you've already had your baby, you may need to continue taking the medicine when you go home.

Mechanical devices

Mechanical devices apply pressure to your legs to help keep the blood moving around. There are many different types of mechanical devices, with the most common being compression stockings.

If they become uncomfortable to wear, speak to your doctor or midwife before you remove or adjust them.

Disclaimer

This fact sheet is for educational purposes only. It should not be used to guide and/or determine actual treatment choices or decisions. Any such decisions should be made in conjunction with advice from your treating doctor or other health professionals.

Your Blood Clot Prevention Plan

<Place Patient Sticker Here>

Complete the following with your doctor or midwife to record what you have been given to help prevent a blood clot:

Medicine:

Dose:

When to take:

For How Long:

Mechanical Device:

For How Long:

If you start to develop swelling or pain in either leg, shortness of breath or chest pain, contact your GP immediately or go directly to an emergency department.

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For further information, please visit

<http://www.cec.health.nsw.gov.au/programs/vte-prevention>

Preventing Blood Clots: Information for Patients and Carers.

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Advance Care Planning

Making your wishes known

What is Advance Care Planning?

Advance Care Planning is an important process that helps you plan for future care, for a time when you are not able to make your health care wishes known.

The process involves thinking about your values, beliefs and wishes about the health care you would like to have if you could not make your own decisions.

It is best if Advance Care Planning happens earlier in life, when you are still well.

Why do I need to think about Advance Care Planning?

Medical technology advances mean that there are treatments which may prolong your life, and that can keep you alive when you are seriously ill or injured.

Some people have firm ideas about how they want to live the rest of their life, including conditions that they might find unacceptable.

Advance Care Planning can include one or more of the following:

- Conversations between you and your family, carer and/or health professional
- Developing an Advance Care Plan on your own or with help from another person. An Advance Care Plan is the documented outcome of advanced care planning. It records your preferences about health and treatment goals
- Appointing an Enduring Guardian. An Enduring Guardian can legally make decisions on your behalf about medical and dental care, if you lose the capacity to make the decision
- Making an Advance Care Directive.

Choosing who should make decisions for you if you do not have capacity is an important part of Advance Care Planning.

Capacity means that you can understand the information and choices presented; weigh up the information to determine what the decision will mean for you and communicate your decision.



In NSW, there is no set form to record your wishes

What is an Advance Care Directive?

An Advance Care Directive records your specific wishes and preferences for future care. This includes treatments you would accept or refuse if you had a life-threatening illness or injury.

An Advance Care Directive will only be used when you do not have capacity to decide for yourself or to communicate your wishes.

It is recommended your Advance Care Directive be written and signed by you and a witness.

An Advance Care Directive is valid and legally binding if:

- You had decision-making capacity when you made it
- You were not influenced or pressured by anyone else to make it
- It has clear and specific details about treatment that you would accept or refuse
- You have not revoked it
- It extends to the situation at hand.

Advance care directives made in other states and territories are enforceable in NSW

When would my Advance Care Directive be used?

- Only when you are unable to express your health care wishes
- To assist the 'person responsible' with consenting on your behalf.

Can I change my directive?

Yes, it is recommended that you review your directive regularly and following a change in your health.

What cannot be included?

An Advance Care Directive cannot contain instructions for illegal activities, such as euthanasia, assisted suicide or assisted dying.

Who is the 'Person responsible'?

In NSW, if you are unable to consent to a medical and/or dental treatment, the health practitioner should seek consent from your 'person responsible'.

The 'person responsible' is:

1. An appointed Guardian, including an Enduring Guardian; if none, then
2. A spouse, de facto spouse or partner where there is a close continuing relationship; if none, then
3. An unpaid carer; if none, then
4. A relative or friend with a close and continuing relationship.

A Power of Attorney cannot make medical or dental decisions for you

Where can I get more information?

- You may also discuss your wishes with your GP. Your GP or other health care professional can provide information related to your health and ageing. You may wish to include your family in this discussion.
- The NSW Trustee & Guardian has information about appointing an Enduring Guardian. They can be contacted on 1300 364 103 or you could visit their website www.tag.nsw.gov.au for more information.
- The NSW Ministry of Health's Making an Advance Care Directive package <http://www.health.nsw.gov.au/patients/acp/Pages/acd-form-info-book.aspx>

What do I do now?

- Learn about any health and ageing issues you may have.
- Think about your values and wishes for treatment.
- Identify your 'person responsible'? Consider legally appointing an Enduring Guardian/s.
- Talk to friends, family, GP about your values and wishes.

For more information and resources:
planningaheadtools.com.au
or visit
www.health.nsw.gov.au/patients/acp



Patients' Rights & Responsibilities

Our hospital is committed to providing you with the very best care.

This brochure gives an outline of your rights and responsibilities as a patient in our hospital ensuring that you receive the very best care possible from appropriately qualified and experienced staff.

If during your stay, you or your family have any concerns, please direct them to the Nursing Unit Manager or the Director of Nursing.

Our hospital commits to the rights listed in the Australian Charter of Healthcare Rights. These are; access, safety, respect, communication, participation, privacy and consent.

Your Rights

You have the right to:

- Considerate and respectful care, regardless of your beliefs and ethnic, cultural and religious practices.
- Know the name of the doctor who has primary responsibility for coordinating your care, and the identity and functions of others who are involved in providing care.
- Seek a second opinion and to refuse the presence of any health care workers who are not directly involved in the provision of your care.
- Receive information from your doctor in non-technical language, regarding your illness, its likely course, the expected treatment, the plans for discharge from the hospital and for follow-up care.
- Receive from your doctor a description of any proposed treatment, the risks, the various acceptable alternative methods of treatment, including the risks and advantages of each, and the consequences of receiving no treatment, before giving consent to treatment. Also, unless the law prohibits, you may refuse a recommended treatment, test or procedure, and you may leave the hospital against the advice of your doctor at your own risk after completion of hospital discharge forms.

- Participate in decisions affecting your healthcare.
- Be informed of the estimated costs charged by the hospital.
- Refuse participation in any medical study or treatment considered experimental in nature.

You will not be involved in such a study without your understanding and permission.

- Refuse participation in student teaching activities.
- Confidentiality and privacy. Details concerning your medical care, including examination, consultations and treatment are confidential.

No information or records pertaining to your care will be released without your permission, or the permission of your representative, unless such a release is required or authorised by law or necessary to enable another health care worker to assist with your care.

- Know, before your discharge from the hospital, about the continuing health care you may require, including the time and location for appointments and the name of the doctor who will be providing the follow-up care. You also have the right to assistance with discharge planning by qualified hospital staff to ensure appropriate post-hospital placement
- Not be restrained, except as authorised by your doctor or in an emergency when necessary to protect you or others from injury.
- Retain and use your personal clothing and possessions as space permits, unless to do so would infringe on the rights of other patients or unless medically contra-indicated.
- Expect safety where practices and environment are concerned.
- Privacy for visits during established patient visiting hours.
- Make a comment or complaint about the treatment or the quality of the health services or care without fear that you will be discriminated against.
- Have your dietary and other special needs considered.

Your Responsibilities

You have the responsibility to:

- Respect the privacy and confidentiality of other patients. It is illegal to disclose any information about another patient's presence in the hospital or their treatment.

This includes verbal and digital communication as well as the use of photographs, videos, etc. and information published online and/or via any social media platform. Violations will be taken seriously and may lead to the discharge of the offending patient and their exclusion from Healthscope hospitals in the future. Civil and/or criminal proceedings may also result.

- Provide accurate and complete information about present complaints, past illnesses, hospitalisations, medications and other matters relating to your health.
- Report unexpected changes in your condition to the responsible practitioner.
- Report if you do not comprehend a contemplated course of action or what is expected of you.
- Follow the treatment plan recommended by the practitioner primarily responsible for your care. This may include following instructions of nurses and allied health personnel as they carry out the coordinated plan of care and implement the responsible practitioner's orders.
- Keep appointments and, when unable to do so for any reason, to notify the responsible practitioner or the health care facility.
- Provide information concerning your ability to pay for services.
- Accept the consequences of your actions if you refuse treatment or do not follow the practitioner's instructions.
- Be considerate of the rights of other patients and health care facility personnel and for assistance in the control of noise, smoking and numbers of visitors.
- Be respectful of the property of other persons and of the health care facility.
- Behave in a lawful manner and contribute to a safe and comfortable environment.

Comments & Complaints

You may make a complaint either verbally or in writing if you have an issue about your care or the service provided. We encourage you to raise this immediately with a staff member.

If after discussions with this staff member you are dissatisfied, you may ask to speak to the nurse in charge. If still dissatisfied, we ask that you put the issue in writing and address it to our hospital General Manager.

Our hospital General Manager will ensure that the issue is dealt with as discreetly as possible and will take reasonable steps to ensure that you are not adversely affected. If you wish to raise an issue anonymously, a report on the outcome may not be possible.

All correspondence will be followed up within seven working days.

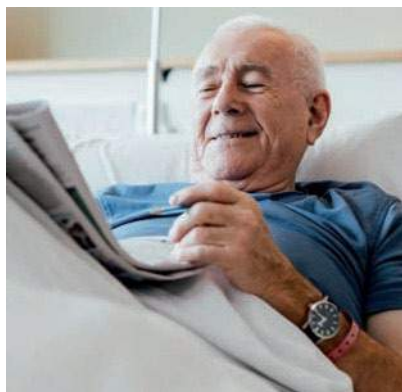
Alternatively, all Healthscope hospitals have Consumer Consultants who attend meetings where complaints or issues may be raised. If you are still dissatisfied, you can contact the Healthscope Corporate Office on 03 9926 7500, or you can contact your state health complaints authority.

Private Health Insurance Ombudsman

(for complaints about private health insurance)

Toll Free: 1800 640 695

Lodge via web: <http://www.phio.org.au/lodgecomplaint.php>



Move, Move, Move

This brochure is being made available to you because you have been identified as having an increased risk of developing a pressure injury or otherwise commonly referred to as bed sore or pressure sore.

The information provided will explain what pressure injuries are and what you can do to help avoid them.

How Does a Pressure Injury Occur?

A pressure injury is an area of damaged skin and surrounding tissue. It is usually caused by sitting or lying in one position for too long, without moving to relieve the pressure.

A pressure injury can develop in only a few hours. It usually starts with the skin changing colour - it may appear slightly red or darker than usual.

If the pressure is not relieved, it can progress in a few days into an open blister and over a long period into a deep hole in the tissue.

Am I at Risk of Getting a Pressure Injury?

You are at risk of getting a pressure injury if your body is very sensitive (e.g. you have had a stroke), or you:

- Are confined to bed.
- Are in a wheelchair.
- Have difficulty moving about.
- Spend long periods in an armchair.
- Have a serious illness.
- Are elderly and frail.
- Are incontinent.
- Have poor circulation.
- Are not eating a balanced diet or having enough to drink.

Prevention

Look after your skin

Our skin grows thinner and less elastic with advancing age. This means the blood circulation is less protected, and as a result the skin is easier to damage as we age.

- Try and keep your skin clean and dry at all times. Let nursing staff know as soon as possible if clothes or bedding is damp.
- Check your skin regularly for any reddened or painful areas. Use a mirror if unable to see hard to reach spots. Your nurse will inspect your skin as part of your pressure injury prevention assessment on admission.
- Use a moisturizing lotion to prevent skin drying out and cracking and protect skin from dry or cold air.
- Bathe or shower in warm water using a mild cleanser or soap. Dry your skin gently afterwards.
- Avoid massaging.

How Can I Avoid Pressure Injuries?

If you are in bed:

- If possible change position every two to three hours, alternating between your back and sides more frequently if you are able. If you find this difficult inform the nurses and they can assist you.
- If you sit up in bed, make sure you do not slide down because this can drag and place friction on your heels and bottom.
- Remove any creases in your sheets, and try to avoid crumbs in the bed. If you are laying on any drains, tubes, or foreign objects please ask the nursing staff to help move these safely out of the way.

If you are in a chair:

- Lift your bottom off the chair every hour if able, to ensure circulation is adequate.
- Walking is a great way to relieve pressure, ask your nurse or physiotherapist to assist you if you are unable to walk independently.
- If you have your feet on a stool, aim to move them every hour. Take them off and move your legs around in a circular motion.

Risk Management

Decreasing your risk

Nursing staff will examine your skin and ask general questions about your health and mobility. This is called a risk assessment and it is reviewed daily.

The nurse may also take a photo of your pressure injury to file in your medical record for future reference or proof of healing etc. A special air mattress may be put on your bed to alleviate pressure for a short period of time until you are fully mobile again.

Diet

Good nutrition plays a vital role in pressure injury prevention / treatment. Your nurse may refer you to a Dietitian if you have a medium to high risk of developing a Pressure injury, to assess your diet/fluid intake and ascertain if you would benefit from dietary supplements.

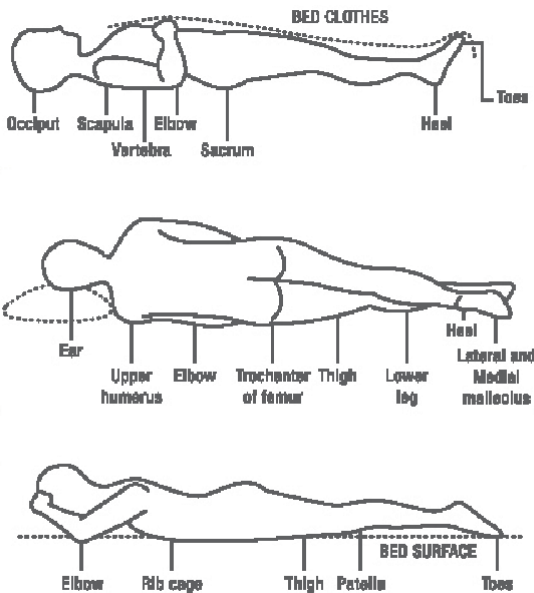
Together we can work out the best plan to prevent or reduce the risk of you getting a pressure injury.

If you have any questions regarding this information or any queries relating to your management, please do not hesitate to ask one of the nursing staff.

Where Do They Occur?

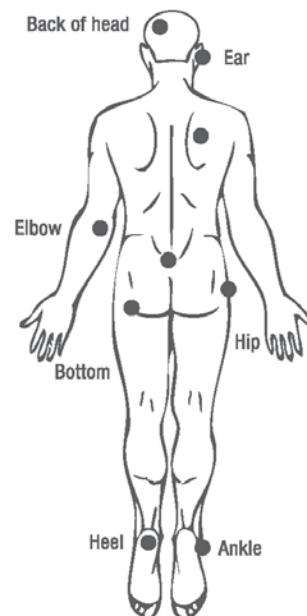
Pressure injuries can occur on most parts of your body.

The most common sites for pressure injuries are over the tail bone (lower back), the heels, hips and the buttocks.



Remember...

- Move, move, move
- Look after your skin
- Eat a balanced diet



This picture shows the areas most at risk



Cognitive impairment is a collective term that refers to people having difficulties with memory, thinking or communicating. It can be temporary or long term. For many people in hospital, delirium and dementia are common causes of cognitive impairment.

Delirium

Delirium is an acute medical condition that occurs suddenly and may only last a short time. A person may feel confused and disorientated, and may be unable to pay attention. Carers and families will usually report that the person is not their normal self.

Delirium may be caused by many different things, including a severe infection, lack of fluids and/or reactions to medicines.

Delirium can have serious consequences if not identified early. Long term effects can be minimised if the causes are found and treated early.

Dementia

Dementia is a collective term for a number of disorders that cause decline in a person's memory, judgment or language that affects every day functioning. Dementia is different from delirium because the decline is gradual, progressive and irreversible. The most common type of dementia is Alzheimer's disease.

A person living with dementia is more likely to develop delirium during their hospital stay than someone without dementia.

Role of Family & Carers

Family members/carers can provide valuable information to the staff caring for the person with delirium.

It is important to notify staff of any sudden change in a person's mental or physical condition.

Who is at Risk of Developing Delirium?

People who:

- Are very sick.
- Have dementia or cognitive impairment.
- Are 65 years or older.
- Suffer from depression.
- Have poor eyesight or other sensory deficits.
- Take many medications.
- Are having a surgical procedure, e.g. orthopaedic or heart surgery.
- Have an acute fracture.

How Does Delirium Start?

Up to a third of hospitalised patients can experience delirium at some stage of their care.

Symptoms develop quickly, over hours or days. A person's behaviour can also fluctuate during the course of a single day.

Delirium is sometimes mistaken for dementia or depression, so it is important for family/friends to notify medical staff of any sudden change in a person's mental state.

What Causes Delirium?

Common causes of delirium in older people include:

- Infection.
- Multiple physical illnesses.
- Constipation.
- Dehydration/malnutrition.
- Severe pain.
- Taking many medications or stopping some medications.
- Regular nicotine or alcohol consumption or withdrawal.

What Are the Symptoms of Delirium?

People with delirium may:

- Appear confused and forgetful.
- Be unable to maintain attention.
- Be different from their normal selves.
- Be either very agitated or quiet and withdrawn or sleepy.
- Be unsure of the time of day or where they are.
- Have changes to their sleeping habits, such as staying awake at night and being drowsy during the day time.
- Feel fearful, anxious, upset, irritable, angry or sad
- See or hear things that are not there, but may seem very real to them.
- Lose control of their bladder or bowels
- Have disorganised thinking, rambling or irrelevant conversations.

How is Delirium Treated?

Delirium is generally associated with an underlying physical illness, however, it is not always possible to identify the cause. Staff will do a thorough medical assessment to look for and treat the underlying cause of the delirium.

How Long Does Delirium Last?

Delirium can last for a few days but sometimes it will continue for weeks or even months.

Delirium is associated with an increased risk of:

- Falls.
- Pressure injuries.
- Longer length of stay in hospital.
- Incomplete recovery.
- Requiring residential placement.
- Dying.

Will Delirium Reoccur?

People who have experienced delirium do have a higher chance of developing delirium again.

How Can You Help Care for Someone with Delirium?

You can:

- Have familiar family or friends visit them.
- Assist them to use hearing aids or glasses if they are needed.
- Face them and speak slowly, in a clear voice.
- Identify yourself and them by name.
- Avoid confrontation or arguing. Remain calm.
- If agitated or aggressive, do not try to restrain them. Notify staff immediately.
- If unsettled, try distracting them by talking about pleasant topics or light-hearted stories they enjoy.
- Open curtains during the day for natural light.
- Keep room tidy and clear from hazards.
- When walking, use aids if needed. Bring in personal items such as clothing, photos, favourite music etc.
- Let staff know any special personal information that may help calm or orientate them; such as names of close family, friends or pets, hobbies, significant life events etc.

Advanced Care Planning

Advanced care planning is a process to help people plan medical care in advance so if they become too unwell to make decisions for themselves, their wishes can still be respected by health care teams, family and carers. It includes appointing a power of attorney if this has not already been done.

If you would like more information, brochures are available or talk to your specialist or GP.

Helpful Contacts

Alzheimer's Australia

www.fightdementia.org.au

Phone: 1800 100 500

Australasian Delirium Association

www.delirium.org.au

My Aged Care

www.myagedcare.gov.au

Phone: 1800 200 422

If you have any questions or concerns about delirium, talk to your doctor.

References:

Australian Commission on Safety and Quality in Healthcare.

- Delirium Clinical Care Standard. Sydney: ACSQHC, 2016. Australian Government. Department of Health and Ageing.
- Delirium Care Pathways 2010.

People with cognitive impairment have the right to be safe and be supported when receiving healthcare, as outlined in the Australian Charter of Healthcare Rights. Additional information can be obtained from <https://www.safetyandquality.gov.au/publications-and-resources/resource-library/my-healthcare-rights-guide-people-cognitive-impairment>

R.E.A.C.H Escalation of Care

Are you worried about a recent change in your condition or of the person you care for?

What is R.E.A.C.H?

You know yourself or the person you care for best.

R.E.A.C.H will help with serious concerns that you feel have not yet been addressed or acted on by staff.

You know yourself or the person you care for best. The R.E.A.C.H process is designed to help you escalate serious concerns about clinical care and safety.

Use the steps of the REACH communication process if you are worried or notice a change in condition.

What does R.E.A.C.H stand for?

R.E.A.C.H has been designed to make each stage of the process as clear as possible. If you would like further information at any time, please ask the team looking after you.

R	Recognise
E	Engage
A	Act
C	Call
H	Help is on its way

Recognise Engage Act Call Help is on its way R.E.A.C.H. is a program developed by the Clinical Excellence Commission, Australia. Adapted with permission.

R.E.A.C.H in practice

R

You may RECOGNISE a change in your condition or of the person you care for.

E

ENGAGE with the nurse or doctor that is looking after you or the person you care for and tell them your concerns.

A

ACT if your concern is not responded to, ask to speak to a nurse in charge and request a "R.E.A.C.H review".

C

If you are still concerned, you can CALL for an independent review by a member of the R.E.A.C.H team.

H

HELP will be on its way.

How do I call for a R.E.A.C.H review?

At Newcastle Private Hospital you can call for urgent assistance by pressing the Staff Assist button on the patient call system

Will I offend staff if I R.E.A.C.H out?

No.

Staff at Newcastle Private Hospital support patient and carer involvement. You know how you feel or how the person you care for usually behaves. We also encourage you to raise your concerns with us during handover between staff shifts when staff are at your bedside discussing your care. We want to work with you to create the best experience for yourself or the person you care for.

Local community services for your information



The following pages contain information on a curated range of local community services chosen to help you and your visitors during and after your stay.

Though a service's feature in the publication doesn't imply an endorsement on behalf of the hospital, we want to thank these service providers for their support, without which this publication would not be possible.

Please take the time to look through their services and consider their usefulness to you.



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335 Hillsborough Rd, Warners Bay
343 New England Hwy, Rutherford





WELCOME TO OUR HOLISTIC CARE

A unique experience of choice, lifestyle and belonging for all people as they age.

We offer support that suits your stage of life, whether you need help in the comfort of your own home, want to enjoy a maintenance-free lifestyle in one of our vibrant retirement communities, or require 24-hour care in one of our Aged Care Centres across Australia.

To enquire or book a tour, contact us on **1300 111 227** or visit our website at agedcare.salvos.org.au

Residential Aged Care | Retirement Living
Community Care | Respite Care



Aged Care

The United Protestant Association of NSW Ltd Hunter Region Aged Care Services



Compassion Respect Integrity Kindness Inclusiveness

UPA Hunter Region has been providing aged care services for more than 60 years. We're a locally governed organisation where decisions about the region are made in the region. Services available through UPA Hunter include;

Home Care:

- * Free, no obligation consultation to discuss your care options and assist with referrals
- * Home Care Packages
- * Private services – to suit your needs
- * UPA is a preferred provider of Department of Veteran Affairs (DVA) services
- * Short Term Restorative Care (STRC) – for eligible clients to improve strength and wellbeing
- * In home respite – allowing carers to take much needed time out

Retirement Villages offering independent living with the comfort of emergency call units fitted to each unit at the following locations:

- * Woodlands Grove (Wallsend) – 24 units featuring 2 bedrooms and a modern open plan living space.
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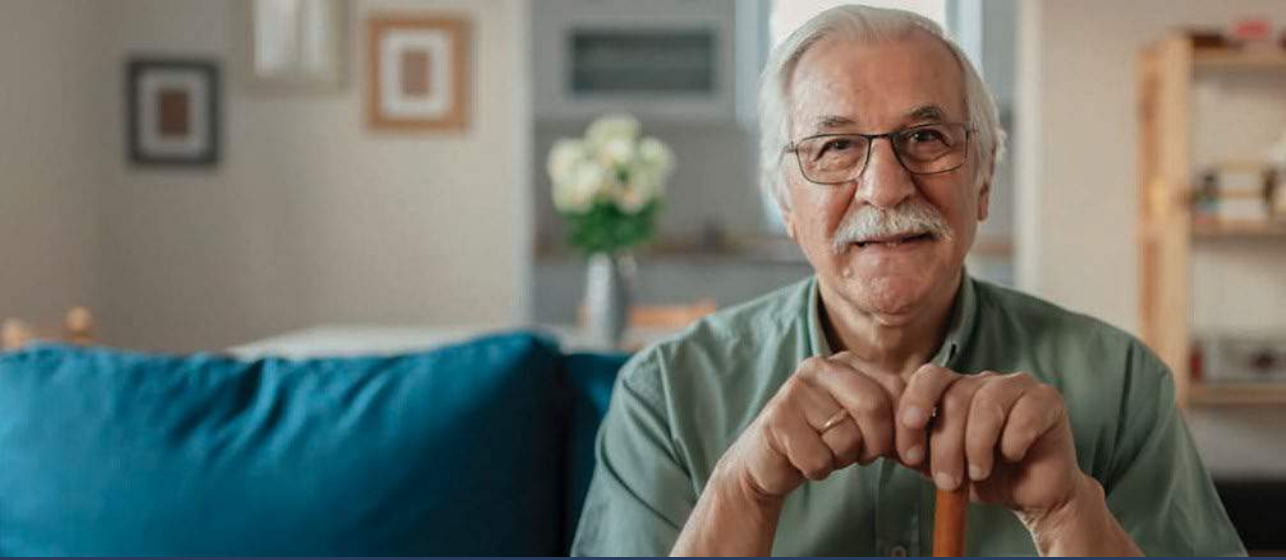
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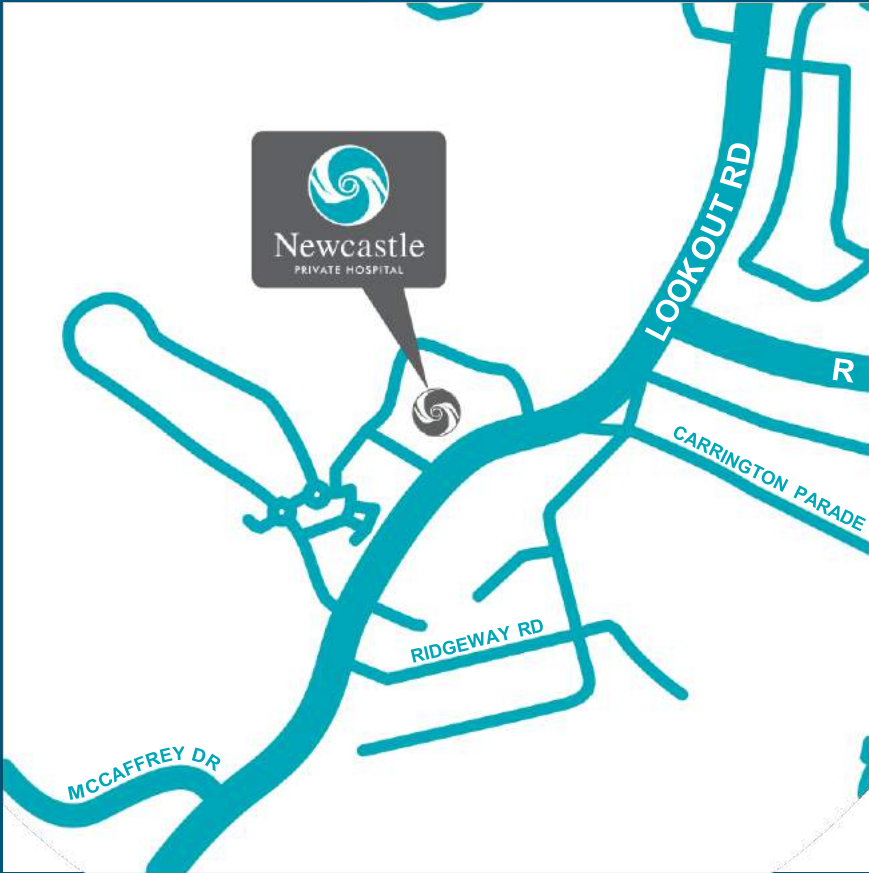
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