



■ Sign up for Mater Shared Electronic Health Record

General practitioners and obstetricians can now express their interest to be part of the Mater Shared Electronic Health Record (EHR), with patient recruitment due to begin in May.

The Mater Shared EHR, funded by the Federal Government, is an electronic alternative to the existing paper-based Pregnancy Health Record and will allow women, general practitioners (GPs) and other external providers such as private obstetricians to exchange expectant mothers' obstetric information with Mater in a secure environment.

The record will provide quick and easy access to patient information such as discharge summaries, pathology and radiology results thus reducing the time practices spend retrieving, collating and duplicating patient health information.

As part of the project, Mater has extended the existing Mater Doctor Portal and will improve patient engagement with the addition of the new Mater Patient Portal.

Mater Patient Portal will:

- allow women to log in, view demographic data and report any inaccuracies
- improve access to antenatal information held within the Pregnancy Health Record
- enable women to view information created by Mater Mothers' Hospitals
- direct women to relevant health information including trusted external links and Mater brochures
- enable a woman to view the same clinical data and results viewable in her paper based Pregnancy Health Record.

Private obstetricians and GPs will be able to use Mater Doctor Portal to upload patient obstetric data into the Mater database and view their patients' information held electronically by Mater.

To enable optimal use of the Mater Shared EHR, the following information is important:

- The demographic information private practices and Mater hold on patients must be accurate.
- Practitioners will need to have their national healthcare identifier (HPI-Is - available now from AHPRA).
- Practices will need to have their national healthcare identifier (HPI-Os - available now from Medicare).
- Practitioners will need to have their Public Key Infrastructure (PKI) keys (available now from Medicare, check with your practice manager as you probably already have one, make sure you know your password).
- Practitioners will need to enter data into the correct field within their compliant practice system so that when the information is uploaded to Mater, the computer can correctly identify.



Having an electronic version of the Pregnancy Health Record will not be compulsory for women, GPs or obstetricians, and Mater will continue to provide a paper version of the Pregnancy Health Record for those who prefer it.

Mater Health Services Chief Information Officer Mal Thatcher said maternity patients may be introduced to a Mater Shared EHR by their GP or private obstetrician; or at an appointment at Mater Mothers' Hospitals.

"Alternatively, the patient may also request a Mater Shared EHR, after reading brochures or searching the internet, or she may be suggested to register for a Mater Shared EHR if she is already a Mater Patient Portal user," he said.

Once a woman chooses to have a Mater Shared EHR, further information will be provided to her and she will undertake a verification process to finalise her enrolment.

"Some of her Mater held maternity records will then be available for her to view," Mr Thatcher said.

Mater is also investigating ways GPs and obstetricians will be able to electronically transfer information from their compliant practice systems (e.g. Genie, Medical Director, Best Practice) directly into the Mater Shared EHR, thereby avoiding the need to duplicate a patient's information.

To find out more or to express an interest in participating in the Mater Shared EHR, please email Gerard Gallagher at gerard.gallagher@mater.org.au or contact your practice liaison officer at ehealth@gmsbml.org.au.



CEO's Message

Here we are in 2012 with plenty of plans and challenges ahead of us. I am in no doubt that 2012 will be another busy and successful year for Mater.

Our plans for the development of Mater clinical services once the new Queensland Children's Hospital opens in 2014 and Mater Children's Hospital closes are well underway. After consultation with many clinical groups we have targeted the areas of cancer services, women's health, and orthopaedics/neurosurgery and adolescent services as areas for service expansion. Work is still ongoing to complete a site Master Plan and details will be released as they are finalised.

In 2012 we also look forward to the rollout to GPs and patients of the Mater Doctor Portal and Mater Patient Portal as part of the national Patient Controlled Electronic Health Record programs.

Other key projects that will come to fruition for Mater this year are the planned opening of Mater Health Centres at Hope Island and Brookwater. Mater Pathology are now providing comprehensive pathology services for north side doctors and patients (see page 6) and shortly Mater will open a Mater Education Practice Improvement Centre (see page 7).

Mater's GP Education Program for 2012 will again showcase quality education on a range of topics to assist GPs in providing the best outcomes for patients. Events include an extensive program of GP education evenings, GP Shared Care Alignment Programs and weekend conferences (see page 8 for full program details). I hope you will find the time to be able to join us at one, or more, of our exceptional events.

Regards,
Dr John O'Donnell
CEO Mater Health Services

GreenLight Laser arrives at Mater

Mater Private Hospital Brisbane has become the first private hospital in Brisbane to offer patients a minimally-invasive laser therapy treatment for an enlarged prostate.

The treatment, known as GreenLight Laser Therapy, uses 180 watt laser energy from the green light band to vaporise enlarged prostate tissue that obstructs the outlet of the bladder without harming other healthy tissue.

Benign Prostatic Hyperplasia (BPH) is a non-cancerous enlargement of the prostate gland, affecting more than 50 per cent of men over the age of 60. As the prostate grows, it presses against and narrows the urethra, causing a urinary obstruction that makes it difficult to urinate.

Urologists Dr Roger Watson, Dr Stuart Philip and Dr Peter Swindle will be using the new treatment on patients at both Mater Private Hospital Brisbane and Mater Adult Hospital.

Dr Philip said many BPH patients reported changes to lifestyle such as avoiding travel, interruption of leisure activities and a disruption in sleep patterns.

"Currently, most patients with BPH are treated with either medication or via a transurethral resection of the prostate (TURP) surgical procedure and requires an average three day hospital stay and four to six week recovery," Dr Philip said.

The GreenLight Laser Therapy treatment enables patients to receive immediate and dramatic symptom relief without the side effects or expense of medication or the risks associated with fully invasive surgery.

"Due to the haemostatic effectiveness of the GreenLight Laser Therapy, patients typically go home the same day or after a night in hospital and return to normal duties within one to two weeks," Dr Philip said.

"This treatment is also useful in treating patients on anti-coagulant therapy who are unable to have their medication stopped, as well as presenting an alternative to open prostatectomy in patients with large prostates."

Since 2007, Mater has performed more than 1000 transurethral resection of the prostate surgeries.

Mater Private Hospital Brisbane Executive Director Don Murray said he was happy to be able to offer patients a new, minimally invasive treatment path.

"We are the only private hospital in Brisbane offering this service and I am pleased to say that all the cases done to date have had outstanding outcomes."

The GreenLight Laser therapy will also be used for public patients at Mater Adult Hospital.

Mater Foundation Executive Director Nigel Harris said generous community support enabled the Foundation to fund state-of-the art equipment, research projects and patient programs.

"We are proud to have been able to fund the GreenLight Laser which significantly reduces the time patients spend in hospital and the side effects of treatment," Mr Harris said.



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■ | Mater and Microsoft sign MOU

Mater Health Services (MHS) and Microsoft have signed an agreement to explore future areas for cooperation.

The Memorandum Of Understanding (MOU) outlines the collaborative intent of the two companies to develop a strategic alliance to improve health care outcomes through the adoption of information and communications technology.

Mater Health Services Chief Information Officer Mal Thatcher said that the MOU would help MHS in achieving key targets in relation to improving patient outcomes.

“Mater has a long track record and experience in delivering e-health projects as an enabler for changing healthcare processes and supporting new models of care,” Mr Thatcher said.

“We are excited to move towards closer collaboration with Microsoft with the aim of delivering improved health care outcomes.”

Key features of the MOU include providing Mater Health Services with access to Microsoft global resources specifically in the areas of portal technology and unified communication and electronic collaboration. The MOU will also provide Mater’s software developers with enhanced access to technical resources within Microsoft.

Microsoft Australia Health Industry Solutions Manager Simon Kos said Microsoft was keen to work with Mater on innovations to focus on the quality and safety of patient care.



Microsoft Australia Managing Director Pip Marlow (left) with Mater’s Chief Information Officer Mal Thatcher.

“In a complex organisation, like Mater, managing information and effective communication are critical so this will be an area where we plan to pool our resources and knowledge to make significant progress,” Dr Kos said.

■ | New name for Bayside Business Park

Mater Health Services, as head lessor, has sought approval to change the name of the building at 16 Weippin Street Cleveland, currently known as ‘Mater Private Clinic’.

Henceforth the building will be known as Mater Health Centre Redland.

With the current development of Mater Health Centres at both Hope Island and Brookwater, Mater felt it was important to maintain a consistency in naming conventions.

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 If you have any queries relating to the building rename, please contact Lisa Dibbs, Director of Marketing via email lisa.dibbs@mater.org.au or phone **07 3163 1975**.

Mater
 HEALTH
 CENTRE
 REDLAND

The new contact details will be:
 Mater Health Centre Redland
 16 Weippin Street
 Cleveland Qld 4163

■ | New Multi-Disciplinary Paediatric Feeding Clinic

A multi-disciplinary paediatric feeding clinic will be introduced by Mater Health and Wellness on 1 March 2012. The clinic will provide assessment and intervention for babies and children who are experiencing feeding and swallowing difficulties.

The clinic will be staffed by highly qualified speech pathologists, dietitians and occupational therapists with extensive experience in the treatment of paediatric feeding and swallowing disorders.

Conditions addressed in this clinic include:

- delayed attainment/development of feeding skills
- swallowing disorders (private modified barium swallow assessments are available as required)
- infant feeding difficulties, including formula choice and nutrition for breastfeeding
- fussy eaters
- support for autism spectrum disorders (approved providers 'Helping Children with Autism' initiative)
- support for older children with disabilities.

The Paediatric Feeding Clinic will be located on Level 3, Mater Children's Hospital, 535 Stanley Street, South Brisbane. For further information or to make an appointment, please phone 07 3163 6000 or visit wellness.mater.org.au.

■ | New tool to monitor children's vital signs

Mater Children's Hospital (MCH) has recently implemented a new observation chart designed to highlight the deterioration of a patient.

The Children's Early Warning Tool (CEWT), an observational chart nursing staff can use to plot a patient's vital signs, was developed by a team led by Paediatric Intensivist, Dr Kevin McCaffery.

"The purpose of this tool is to make it easier to recognise the deterioration of a child in our care by highlighting observations that fall outside normal parameters," Dr McCaffery said.

"CEWT was implemented to meet best practice standards as well as to provide safer, more responsive care for children whose condition may deteriorate."

There are four different age-based CEWT charts—under one year old, one to four years old, five to 11 years old and over 12 years old.

"CEWT has been designed to assist bedside staff identify patients who may be deteriorating or critically unwell, enabling timely intervention which can lead to better patient outcomes," Dr McCaffery said.

Each chart consists of colour coding to alert the nurses to various degrees of abnormality in vital signs. Each colour corresponds to a number and the nurses then add up the score to get a total CEWT score.

Dr McCaffery said nursing staff are then guided in terms of management.

"For example, for a patient with a CEWT score of 4, the nurse must ring the resident who needs to respond within 30 minutes," he said.

"In terms of the range, a score of 0 means their vital signs are all within normal limits, whereas a score of 8+ means a medical emergency team call is made. These escalation triggers have been optimised following substantial retrospective and prospective validation."

The CEWT was successfully trialled in 10 tertiary, regional and rural Queensland hospitals in paediatric areas, and is currently being implemented in all paediatric facilities across the state.

It has already been rolled out in wards 7 East and 7 South at Mater Children's Hospital with plans to extend it into the remaining wards over coming months.

"Improving the safety of hospitalised children is clearly important, and the successful implementation of this project was only possible thanks to the enthusiasm and hard work of staff from both clinical areas—including Hanne Williams, Katie Howard and Elise Burn—and the Patient Safety and Quality Improvement Centre, Queensland Health," Dr McCaffery said.





Which Doctor?

Dr Ben Hunt
Specialty: Cardiology

Dr Ben Hunt has returned from a two-year fellowship in pacing and cardiac electrophysiology at Foothills Hospital in Calgary, Canada where he trained in both cardiac device implantation and ablation of cardiac arrhythmias including atrial fibrillation.

He considers Brisbane his hometown having moved here in 1995 to attend The University of Queensland where he completed a BSc in 1997 and subsequently his MBBS in 2002.

He worked at the Princess Alexandra Hospital where he started advanced training in cardiology in 2007 before completing his cardiology training at the Prince Charles Hospital in 2009.

Dr Hunt is a member of Heart Care Partners and consults from their rooms at Mater Private Clinic and undertakes procedures

at Mater's CardioVascular Unit.

He brings with him strong interests in heart rhythm disorders, cardiac device implantation and arrhythmia ablation.

Referrals for insured patients can be made to Dr Hunt at:

**Heart Care Partners, Suit 5.11
Level 5, Mater Private Clinic
550 Stanley St, South Brisbane QLD 4101
Phone: 07 3360 7100 Fax: 07 3217 2550**



Which Doctor?

Dr Geoff Eather
Specialty: Respiratory and Sleep Medicine

Dr Geoff Eather completed his MBBS, with first class honours, at The University of Queensland in 1995.

He trained initially at the Royal Brisbane Hospital, before conducting further training in general medicine and medical oncology in London at Mt Vernon Hospital and The Royal Marsden Hospital. Dr Eather returned to Australia and carried out his specialist training at the Princess Alexandra and Prince Charles Hospitals, receiving his FRACP in 2005 with specialist qualifications in respiratory and sleep medicine before going on to undertake further post-fellowship training in the management of advanced lung diseases and mycobacterial diseases. Dr Eather commenced work as a staff physician in the Department of Respiratory and Sleep Medicine at the Princess Alexandra Hospital, and accepted a position as a VMO with the Queensland Tuberculosis Control Centre. He continues to work in a busy general respiratory and sleep unit and has gained particular expertise in the management of the full spectrum of sleep disorders, from sleep apnoea to complex sleep

disordered breathing, respiratory failure and non-respiratory sleep disorders. Dr Eather is also involved in active clinical research with the department of Respiratory and Sleep Medicine along with the Queensland Tuberculosis Control Centre and also holds the position of Senior Lecturer with The University of Queensland.

Dr Eather commenced work with the Queensland Sleep Disorders Unit in 2008, and has been actively involved since this time, contributing to the development of new and innovative methods of physician analysis and reporting. He will be providing a weekly clinical service at Mater Private Hospital Redland from February 2012.

Referrals for insured patients can be made to Dr Eather at:
**Queensland Sleep Disorders Unit, Mater Private Hospital Redland
Weipin Street, Cleveland QLD 4163
Phone: 07 3846 7955 Fax: 07 3217 2523 Website www.qsdu.com.au**



■ | Mater Pathology acquires Northside Pathology

Mater Pathology has taken over the management of Northside Pathology and will provide a pathology laboratory testing and collection service from within Holy Spirit Northside private hospital.

In addition to the hospital service, the five pathology collection centres currently located at Deagon, Eatons Hill, Kallangur, Kedron and Keperra will be operated by Mater Pathology.

The benefits for GPs will be an improved laboratory service and a more timely pathology reporting service.

Mater Pathology's preference is to electronically transmit pathology reports to GP practices via Healthlink or Medical Objects.

General practitioners who currently do not use Healthlink or Medical Objects as their preferred means for receiving online diagnostic results can arrange for Mater Pathology to install one of these programs into current surgery network systems. For GPs who do not use electronic reporting systems, alternate delivery arrangements can be established by telephoning Mater Pathology on **07 3163 8500**.

If you have any enquiries, issues with report delivery, requests for telephone results or report copies, please telephone Mater Pathology 07 3163 8500.

■ | Work underway on midwifery simulation unit

Work has commenced on a state-of-the-art simulation centre at Mater.

The Mater Education Practice Improvement Centre (MEPIC), in collaboration with The University of Queensland (UQ), will incorporate low, medium and high fidelity clinical simulation into curriculum of undergraduate midwifery students and health care professionals involved in maternity and neonatal services.

Mater Health Services Director Learning and Development, Donna Bonney, said both fields were areas where simulation could add much value to real life clinical practice, through enhanced knowledge and skill development for clinicians, optimised woman/patient centred care as well as better health outcomes for women and their families.

The centre will include two immersive simulation suites, multidisciplinary and multipurpose clinical learning areas, as well as a communication/consultation room.

Each immersive simulation suite consists of a flexible high fidelity simulation room, a low fidelity simulation area, and the centre can broadcast to two additional lecture rooms, which hold up to 45 observers.

"The immersive simulation suites will be fitted with video and audio equipment allowing for the filming of scenarios using volunteers or actors as standardised patients as well as computer-controlled mannequins as patients," Ms Bonney said.

"There will also be adjoining control rooms with one way glass from which the clinical scenarios and high fidelity equipment are controlled, and the entire learning experience is enhanced through quality, contemporary debriefing practices.

More than 1700 health professional students undertake clinical training each year across Mater, utilising Mater's teaching hospitals to gain clinical experience in a broad range of undergraduate and postgraduate health programs.

MEPIC has received funding from Health Workforce Australia for this project and is expected to open in the first quarter of 2012. This funding is an Australian Government initiative.



Mater is using simulation units to further develop the clinical skills of staff

MEPIC will achieve a number of key improvements to clinical training including:

- increased access to clinical education by offering students access to simulated, as well as real, patient care experiences
- enhanced clinical learning experiences through the use of a range of targeted simulation scenarios, including clinical situations that are otherwise rare and/or difficult for students to gain experience in, such as difficult deliveries
- enhanced consistency and quality of clinical training through use of simulations in a safe learning environment
- improved competence and confidence of students as clinicians.



Mater Pathology unveils new website

A new refreshed and revitalised website—designed specifically with the user in mind—has been unveiled for Mater Pathology.

New features include audience specific information with easy to navigate menus for patients and doctors, quick links to help visitors to the site find what they need, increased functionality and access to information about Mater Pathology services.

Mater Pathology has a long history of excellence in diagnostic and consultative services and the new user-friendly site confirms its overall commitment to quality with everything you need to know available at the click of a button.

For further information visit pathology.mater.org.au



Grant wins for Mater Medical Research Institute

Mater Medical Research Institute (MMRI) was announced as the recipient of two grants in December 2011 enabling further research to take place into stillbirths.

The two National Health and Medical Research Council (NHMRC) grants were announced by Minister for Health Tanya Plibersek along with 158 other grants in health and medical research.

One of the grants—a three year NHMRC scholarship— will allow Ibinabo Ibiebele to undertake her PhD in stillbirth and the other—an NHMRC project grant for \$547 634 over three years—which will be used to undertake research to develop a better understanding of stillbirth risk during pregnancy and improve the quality of data for classification of stillbirths.

MMRI's Program Head, within the Mothers and Babies theme, Associated Professor Vicki Flenady said the overall aim of the research program was to reduce the number of stillbirths.

"The death of a baby before birth is a devastating event for parents and families. Without data on the risk of stillbirth during pregnancy and improved data quality around investigation and classification of stillbirths, it is difficult to develop effective preventative strategies," A/Prof Flenady said.

"While infant mortality rates have declined over the past two decades, there has been no reduction in the rate of stillbirth. Furthermore, the stillbirth rate among Indigenous Australian women is nearly twice that of non-

Indigenous women. A thorough understanding of the risk of stillbirth throughout pregnancy is necessary to mount effective interventions."

The specific aims of the research are:

- to investigate the risk of stillbirth according to the number of ongoing pregnancies by gestational age taking into account the influence of maternal characteristics and maternal and pregnancy morbidity, in order to gain a clear understanding of influencing factors for particular groups of women (e.g. Indigenous women, women with a low socioeconomic background, women born overseas)
- to examine trends in stillbirth by the Perinatal Society of Australia and New Zealand (PSANZ) PSANZ-PDC category in Queensland, by maternal characteristics, maternal and pregnancy morbidities
- to determine the level of agreement between hospital review committees and expert panel review, in classification of stillbirths according to PSANZ-PDC
- to obtain baseline information on the needs of parents regarding autopsy consent; in order to improve procedures and the rate of adverse psychosocial outcomes for parents in relation to grief and decision making.

"At present in Australia, the approaches to investigation and data on causes of stillbirth are inadequate to inform such interventions. This research program aims to address this issue by adding to the body of knowledge relating to the risk of stillbirth, and examining trends in stillbirth causes of death especially within groups of women who may be at higher risk of stillbirth," A/Prof Flenady said.



Mater Health Services invites you to join your colleagues for dinner and drinks at the following two dynamic education evenings delivered by Mater's leading specialists.

PAEDIATRICS, ORTHOPAEDICS AND OBSTETRICS

DATE AND TIME	VENUE	PARKING	ACCREDITATION
Tuesday 6 March 2012 6.30 pm to 9 pm	Conference room, Level 1 Mater Medical Centre 293 Vulture Street South Brisbane	Close parking is available in the Mater Medical Centre car park located at 293 Vulture Street South Brisbane. Parking can be validated for this car park only.	RACGP Quality Improvement and Continuing Education program for the 2011-2013 triennium (4 Category 2 points).

PROGRAM TIME	SESSION
6.30 pm–7 pm	Registration and dinner.
7 pm–7.20 pm	Dr Richard Brown – Paediatrician: The assessment and management of infants with unsettled behaviour. Question and answer session.
7.20 pm–7.40 pm	Dr Anita Cohn – Paediatrician: An approach to infants and young children who present with a febrile illness.
7.40 pm–8.20 pm	Dr John Radovanovic – Orthopaedic Surgeon: Sports knee injuries.
8.20 pm–9 pm	Dr Melissa Luckensmeyer – Obstetrician and Gynaecologist: Topic TBC.

DIABETES, ORTHOPAEDICS AND REHABILITATION

DATE AND TIME	VENUE	PARKING	ACCREDITATION
Monday 16 April 6.30 pm to 9 pm	Conference room, Level 1 Mater Health Centre Redland 16 Weippin Street Cleveland	Complimentary parking is available in the Mater Health Centre Redland car park.	RACGP Quality Improvement and Continuing Education program for the 2011-2013 triennium (4 Category 2 points).

PROGRAM TIME	SESSION
6.30 pm–7 pm	Registration and dinner.
7 pm–7.40 pm	Dr Talib Aljumaily – Physician: Topic TBC
7.40 pm–8.20 pm	Dr Sanjay Joshi – Orthopaedic Surgeon: Topic TBC
8.20 pm–9 pm	Dr Victor Voerman – Rehabilitation and Pain Management Specialist: Topic TBC

FOR FURTHER INFORMATION

Please contact Sara McDonald on 07 3163 1036 or email sara.mcdonald@mater.org.au. You can also visit materonline.org.au for Mater's full 2012 GP Education Program.

TO REGISTER

Please visit materonline.org.au and click on 'events'. There is no charge to attend Mater's evening education events.

Leading the way in GP education



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