

Thames goes digital

THAMES Hospital is leading the way by becoming the first Waikato District Health Board hospital to offer digital radiography.

Thanks to the campus redevelopment project, staff were able to look to future needs and be one step ahead of other Health Waikato facilities including Waikato Hospital in Hamilton.

"Because of the campus redevelopment project we knew we were going to have a new radiography department," said Radiology team leader Chris Hovell.

"There was no point in building a dark room when we knew we were going digital, so we fast-tracked a few steps.

"The other Waikato hospitals will get it as well as part of a new patient archiving communications system, but we're very happy to be the first to offer it to our patients."

For staff, the completely computerised system means more efficiency, less storage [of films], elimination of the chance x-rays can be lost and better accuracy.

For patients, digital radiography means they are in and out of the department in about one-third of the time, and because the system allows the technician to enhance the image on-screen, better accuracy in reading x-rays means better results for all.

"Digital radiography is the latest trend in the field and has really brought us into the 21st century here in Thames," said Mrs Hovell.

"Once the new patient archiving system is complete, we'll really be able to see the benefits of being digital."



SMARTER VIEWING: Thames Radiology team leader Chris Hovell looks at a patient's x-ray on the hospital's new digital radiography system.

Out with the old

WHAT is going to happen to the old main hospital block?

Not a lot because it is simply not fit for inpatient or respite care, says Thames Hospital manager Jacquie Mitchell.

"I am aware that many people in the community have ideas about how best these old buildings can be used, however the fact of the matter is that they can't be used at all for safety reasons.

"There are still many areas of the main building which we can put to good use, such as the theatre, day unit, primary birthing unit, various office spaces and equipment storage; the other areas of the building

are no longer fit for inpatient use. That means we cannot have patients using

them for functions such as respite care, which is what is being asked of us.

"But as is the way in Thames, we have found a use for two of the rooms, and are being used as a staff gym

in the meantime, which is fantastic.

"Supporting exercise and a healthy lifestyle are well known benefits for staff and they are really enjoying the benefits the facility is providing.

"While we cannot reopen the wards in this building for patient care, at least one part can be put to use in a positive way."



JACQUIE MITCHELL

Bridging the gap between hospital and home

WHEN Health Minister Tony Ryall called for better delivery of health care to patients, Thames-Coromandel/Hauraki district nursing service answered the call.

The team was investigating ways to work more effectively

with Thames Hospital in managing the care of complex patients, so when they received the Ministry of Health's 2009-10 letter of expectation; they put their plan into action.

Michelle Fill was the answer.

Mrs Fill, a district nurse for many years, took on the role of district nurse liaison, and now attends multi-disciplinary meetings at the hospital not just with medical staff, but the surgical team as well.

"What this means is that I meet with the charge nurse and multi-disciplinary team four days per week and we go through inpatients' medical notes," said Mrs Fill.

"The benefit of that is that I am able to provide some social history about certain patients to the rest of the team, as often they have been a patient of the district nursing service for a long time, and we know their post discharge requirements.

"The flip side to that is that I also become privy to the patient's medical and surgical situation and am able to relay that back to their district nurse so they know what the patient will need when they get back

home."

While she says there had always been a relationship between the service and hospital, various district nurses were responsible.

"There seems to be a lot more cohesion and consistency in the information

we're sharing now that we have designated Michelle solely to the role," said District Nursing Service clinical nurse manager Vanessa Witt.

She said the Ministry's letter of expectations contained a point more poignant to Thames-Coromandel-Hauraki communities, than many others in New Zealand; reducing the length of hospital stay for over 65-year-old general medicine patients.

"We have a very high population of residents aged over 65 in our communities, many of whom have varying socio-economic statuses – particularly on the peninsula," said Ms Witt.

Mrs Fill said the main benefits of the liaison position are coordinated care putting the patient first and individualised care plans by a whole team of well-informed professionals.

"We have already had great feedback from staff and patients alike about the smoother transition from hospital to home since the district nursing liaison position was established last month."

The position is in trial phase and is up for review later in the year.



MICHELLE FILL

Unit combines function and style

Many people attended Thames Hospital's opening ceremony in February, and got the guided tour; however many could not be there so here is an insider's look at the new and beautiful Inpatient Unit.

Rehabilitation courtyard

The rehabilitation courtyard is an attractive garden area with outside surfaces such as paving and concrete that patients can use to practice walking on before doing it for real back out in the community.

The courtyard also has steps, ramps and rails for practice, and coming soon is a vegetable garden for patients to care for and tender – great for regaining cognitive function.

Pohutukawa Room

This bright and cheerful room is a home away from home for patients and their families to prepare food, make hot drinks, watch television, or just escape the four walls of their room.

"The Pohutukawa Room is well used by occupational therapists, physiotherapists and their patients as practice for when they go home, and it's just a nice environment to do it in," said nurse Althea Loveday.

Rehabilitation facilities

The Inpatient Unit not only looks nice but has also been built with staff and patients in mind – particularly rehabilitation patients.

The unit has a rehab bathroom as well as a dedicated therapy room. The bathroom contains everything you would find in a home bathroom, and when it comes to practising the daily functions that many take for granted; it is the perfect place.

Meanwhile, the therapy room is a welcome addition, particularly for rehab patients who used to have to do their exercises in their rooms, often in front of other people.

"That just wasn't as conducive to successful therapy as often the patients are frustrated enough when doing their exercises, without having an audience," said nurse Sue Challis-Morrison.

Added extras

- All rooms from the central courtyard have views of the gardens.



POHUTUKAWA ROOM



PATIENT ROOMS



REHABILITATION COURTYARD

- Four interview rooms where staff can take patients and their families away from the bedside to discuss private medical matters.
- Two whanau rooms where patients and their families can have quiet time together,
- Two café bars with fridges and drink-making facilities.
- Two emergency buttons to ensure safety of staff and patients.
- Two negative pressure rooms for patients with respiratory illnesses.
- A high acuity unit is available for patients who require extensive monitoring.

The real beauty of working in here is not just the fact it's a much nicer environment, but that it's very functional," said Mrs Loveday.

"I think you really have to live in a place for a good six to 12 months to know what works and what doesn't, but it is fair to say that we're enjoying our new unit very much at this point."