

Message from the Chief Executive

Welcome to the 6th edition of the Far West in Focus.

It is great to see that our strategies to attract staff to provide the much-needed relief to you is beginning to pay off with 29 agency staff being brought in over last month. The new State Budget will further assist us in being able to execute and develop a number of new strategies to attract and retain new staff, including additional staffing across key areas of the organisation. So, watch this space in the coming months.

I was proud to be a part of the launch of the Telestroke program, coming as it is on the tail of our successful launch of the VCU program. The staff involved have done an amazing job in implementing it without any major issues. Often, we witness the smooth running of the service but not the tireless hours of commitment from the staff involved in ensuring its success. Thank you to them and well done!

Our collective commitment to optimum patient care was recognised by the Ministry of Health in our most recent quarterly performance meeting where we achieved yet another high performance rating. This achievement is a testimony to your dedication to your patients, families, community, and the organisation.

I can also inform you that the Buronga

HealthOne facility will commence operations on 14 July with a community open day on 8 July. If you are around, please make sure to drop in and say hello and take pride in the fantastic facility that will benefit our community and provide a contemporary working environment for our staff.

It is with great sadness that I close this month's edition with the announcement of my resignation.

This has been the best job I ever had. I loved the community I served and all of you with whom I shared the journey. Thank you for helping me to grow and for allowing me to lead you over the past 2-3 years.

I leave Far West knowing that the organisation is well placed to embrace future challenges with its characteristic compassion and commitment to excellence in care.

Mr Brad Astill will act as the interim CE as of 18 July until a permanent appointment is made.

— **Umit Agis, Chief Executive.**



Mr Umit Agis



Executive and Staff celebrated the successful launch of the Telestroke program including (from left) Julie Manoel, Director of Nursing Midwifery & Manager BHHS, Anthony Farquhar, Telesstroke Project Officer, Kahlia Liston, Clinical Nurse Educator, Jodie Miller, A/Director Clinical Operations, Skye Russell, Telesstroke Implementation Officer, ACI and Umit Agis, Chief Executive.

Turn to page 2 for more details.

Far West LHD Telestroke Service goes live!

The Far West LHD celebrated the successful launch this month of its NSW Telestroke Service which now provides stroke patients in the LHD with 24/7 access to an innovative new virtual care service.

Minister for Regional Health Bonnie Taylor, announced the go live launch and said the life-saving service would directly link stroke patients and their doctors with specialist stroke physicians. This is part of a \$21.7 million initiative being rolled out across NSW.

Within 12 hours of the Telestroke Service going live here, it was called into action to help a stroke patient brought to the BH Hospital emergency department. The service worked brilliantly in ensuring treatment provided was smooth and quick.

"Telestroke ensures patients can be diagnosed and treated as quickly as possible, ensuring the best possible outcome and potentially saving lives," said the Minister.

"Doctors across the Far West LHD will be connected

with the state's leading clinicians via video consultation, where together they can determine the most appropriate treatment option for each patient."

Sixty stroke patients presented to Broken Hill Health Service between January to December 2021.

Since its launch in March 2020, 23 sites have joined the \$21.7 million NSW Telestroke Service, saving lives and reducing disability in more than 2,000 patients.

Implementation of the NSW Telestroke Service is a collaboration between the Prince of Wales Hospital, eHealth NSW, Agency for Clinical Innovation and the Ministry of Health. Footage of the NSW Telestroke Service is available at: <https://vimeo.com/295104771>

Congratulations to everyone involved in our Telestroke service!



Far West LHD staff pictured during simulation exercise prior to the Telestroke Service going live.



Corporate induction

During June the People and Culture directorate facilitated its bi-monthly corporate induction and welcomed 12 new employees.

The next corporate Induction will be held on 18 August 2022. You can enrol today via My Health Learning



Corporate Induction for June

(from left): John Harris – Philanthropy Coordinator, Melanie Chynoweth – Manager Consumer Experience & Community Engagement integration, Hira Farhat – Mental Health Clinician, Cherie Harvey – Mental Health Clinician, Richard Shoebridge - Clinical Nurse Specialist Dementia and Falls, Desley McKellar – Aboriginal Mental Health Clinical leader, Savannah Webeck - Speech Pathologist, Sandra Magro - Speech Pathologist, Charmaine Lowrie – Occupational Therapist, Minabeen Patel – Dietician, Marcus Wilson – District Disaster Manager, Georgia Cusack – Occupational Therapist.

GHiP breakfast with Broken Hill Maternity Unit staff

Breakfast with staff at the Broken Hill Maternity Unit was a terrific way to start the day!

There was a visit from Health Promotion and MoH staff for an informal catch up on the Get Healthy in Pregnancy program.



program. The room was abuzz with activity and conversation.

The midwives at Broken Hill Maternity Unit have exceeded the Far West KPI for women referred to the Get Healthy in Pregnancy Program for this financial year.

This a great result for the ladies and congratulations on doing such great work in this space!

Patient Reported Measures in Far West LHD

Patient Reported Measures (PRMs) has been implemented across Integrated Care services in Far West LHD.

This program relied on evidence that suggested clinical indicators did not always show the full picture of how a patient is feeling.

Patient Reported Measures supports patient centred healthcare by asking patients to complete surveys about their healthcare experiences and outcomes of care via a web-based portal known as Health Outcomes and Patient Experience, or HOPE. Clinicians can then read the results in real time, providing whole of health interventions with the intention of improving patient outcomes and experiences.

Far West LHD currently have 16 services collecting Patient Reported Measures. Clinicians and patients have welcomed the program, noting its ease to use and positive impact upon clinician/patient relationship.

If you are interested in the PRMs program, please contact Acting PRM Project Officer, Kara Leonard on 8080 1412 or kara.leonard1@health.nsw.gov.au for more details.

Chronic Care Clinician Kathryn Wallace helping patient Diane Ward complete Patient Reported Outcome Measure survey.



Extended nurse placement program winning over students

Marie Kelly has just completed a three month secondment into the temporary position of Project Officer for the Extended Nursing Placement Program (ENPP).

The ENPP went live in early February after two years of planning and collaboration between the University Department of Rural Health, Universities of Sydney and Notre Dame, FWLHD and other partner organisations.

The extended placement is for 20 weeks and to date has had a rural/remote Primary Health Care focus. The cohort of seven students commenced with a week of orientation in Broken Hill before moving into their primary placement of 14 weeks. They have now transitioned into a four week secondary placement. Host sites have been in FWLHD facilities, RFDS, Robinvale District Health Services, Murray Valley Aboriginal Co-Op, and Coomealla Health Aboriginal Corporation. Feedback from students and the host sites was highly positive and encouraging.

Students are supported both prior and post placement and intensively during placement by their Universities, host sites, UDRH and ENPP project officer. Regular formal and informal zoom sessions for critical reflection and supports along with sessions on primary health care, rural nursing,

career pathways, social events and much more have been well received by the students.

A second cohort of eight nursing students from Notre Dame University are commencing in late July.

Marie is excited for the potential such a program has for our future

workforce, having seen the success of such programs for medical, social work and speech students in our district over the years. Marie has returned to her substantive position in Rural Adversity Mental Health Program and will maintain some contact and involvement with the ENPP in that role.



The Coomealla Health Aboriginal Corporation Sorry Day event at Wentworth: CHAC employee Shiralee Hedges, ENPP students Rebekah Tevelen and Maya Svayelli who were on placement at CHAC and Marie Kelly, with the Walkabout Barber bus.

First Insulin Pump Start for Dareton Primary Health



Raelene Gibson, Credentialled Diabetes Educator for Dareton Primary Health Centre, has assisted her client Joshua Deiesi (31) with learning about the most recent insulin pump and Continuous glucose monitoring Systems.

The Medtronic MiniMed 780G Insulin pump in conjunction with the CGMS Guardian Link creates an automated basal insulin delivery system that matches to the persons individual insulin requirements.

This is effective in keeping the blood glucose levels in the normal range on average 80-95% of each day. This is known as 'Time In Range' and has been found to significantly reduce the risk of people

Raelene Gibson with client Joshua Deiesi, who has reported a successful introduction to automated insulin pump therapy.

with type 1 diabetes developing complications.

With the additional support from a Medtronic Clinical Specialist – Diabetes via a Zoom link, Josh was successfully started on his insulin pump and CGMS. This is the first Insulin Pump Start carried out at Dareton Primary Health.

Josh stated he is looking forward to achieving more stable glucose levels and particularly avoiding hypoglycaemia.

Our 3 day follow up demonstrated that Josh has been 85% Time In Range and has had only one minor hypo event after dinner on the first day. He thinks he may have over calculated the carbohydrate content of his dinner and this information he provided to the pump to deliver the meal time insulin bolus was slightly out. He reports no other issues and has become an excellent advocate for automated insulin pump therapy.

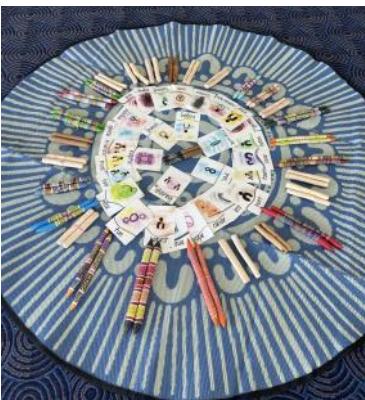
Social and Wellbeing Forum well received

In May 2022, Far West LHD Aboriginal MHDA Clinical Leader, Desley Mckellar and Aboriginal MHDA Trainees Claudia Martin-Files, Chloe Reeves and Tarminya Brown attended the Social and Emotional Wellbeing forum hosted by South Western Sydney LHD in Narooma.

The forum provided an opportunity to bring together Aboriginal MHDA workers in various NSW regions to create and engage in partnerships, building and sharing of knowledge and support each other in improving and improving mental health service delivery for aboriginal people.

The participation in the therapeutic sessions allowed for a cultural safe and sensitive focus that included breathing techniques while using the clap sticks. A sensory therapy which included feeling the sand that was from country and the releasing of sea shells back into the ocean and aroma therapy that allowed people to connect spiritually and included connection to country.

The forum theme this year was 'From Little Things, Big Things Grow', which was an acknowledgment and celebration of the expansion of the Aboriginal Mental Health workforce across NSW.



Claudia Martin-Files, Tarminya Brown and Chloe Reeves at the Social and Emotional Wellbeing Forum in Narooma.



Jack networking with SWAN colleagues



Jack Cocking (pictured), Senior Social Worker for the FWLHD, recently attended the quarterly Social Work Advisor Network (SWAN) meeting.

The meeting held this month, was at the Forensic Health Hospital in Malabar, where a tour was conducted.

The SWAN group was very interested in the updates on the Far West Local Health District, including work in the virtual care space.

There are plans for the final quarterly SWAN meeting to be scheduled for Broken Hill, where the themes will be on virtual care and social work student placements in rural and remote settings.

AgFair Broken Hill and GHIP



Pictured at the stall are Rebecca Crawford, Justine Salisbury and An Tran.

The Get Healthy Service team held a stall in May at this year's two day, bi-annual Agfair event in Broken Hill. The event was a wonderful opportunity for those who live in rural and remote areas to find out from Health Promotion and Ministry of Health (MoH) staff about the Get Healthy Programs. Over the two days there was a considerable number of local people opting to be referred to the Get Healthy Service. Agfair at Broken Hill has not been held for four years due to the impact of COVID-19. The event normally attracts between 7,000 and 8,000 people from the surrounding regions. At this year's event there were over 300 exhibitors and the Get Healthy stall was an incredibly positive representation of MoH programs.



Pictured are BH Contribution Fund President John Bacich checking out the new coffee machine with Kiosk volunteer Cheryl Meuret brewing up a cuppa!

Coffee brewing strong at BHHS Kiosk

Visitors and staff at the Broken Hill Health Service can still get their coffee fix at the Kiosk thanks to a generous donation by the Broken Hill Contribution Fund.

A brand new coffee machine valued at \$9,789.89 and paid for by the Contribution Fund was recently installed in the Kiosk.

Kiosk volunteers are very happy with its ease of use and extra functions.

The volunteers are very thankful to the Contribution Fund for the donation to buy the machine and it has been very well received by all our customers.

A big thanks also to BH Supplied for donating the freight cost to transport the new machine here.

The Kiosk Auxiliary and Broken Hill Health Service is greatly appreciative of the BH Contribution Fund for its generous donation and its assistance over the years in purchasing equipment for the hospital.

Have you ever said to yourself, "If they just changed this and did it this way, it would be much better"? Well, now you have a quick and easy way to suggest your ideas!

Scan the QR code or go to <https://www.surveymonkey.com/r/WBHNHZ> if you have ideas for change; for service improvement, better patient and staff experiences, or any burning project proposals you might have.



The Project Management Office (PMO), located at the CHC in Broken Hill, will receive your ideas through the portal and explore opportunities to convert these into projects.

Go dry in July

Dry July is a fundraiser campaign that encourages you to go alcohol-free in July, to raise funds for people affected by cancer. It challenges social drinkers to change their habits for a month and make some healthy lifestyle changes. It also encourages people to drink responsibly and stick to the recommended daily guidelines for the rest of the year.

The funds you raise as part of your Dry July will provide invaluable services for cancer patients, their families and carers – whether it's a lift to a life-saving appointment, guidance from a specialist nurse, connection to an informative voice, access to therapy programs or a bed close to treatment.

Having a month off alcohol also has [great health benefits](#), such as sleeping better, having more energy and of course, no hangovers! So you're not only helping others, you're helping yourself. It's a win-win!

How does it work?



1 Visit the Dry July website
www.dryjuly.com and sign up to the challenge



2 Go alcohol-free in July



3 Ask family, friends and workmates to sponsor you



4 Help people affected by cancer.

Go on, give it a go!!!!

Preparing for your Dry July

This challenge shouldn't make you miserable. You may experience some urge to drink, however there are always ways around these urges, but first and foremost you must remember not to judge yourself for having them. It is completely normal and you are not the only one. Accept the urges for what they are, take a deep breath, and then put some measures in place to avoid giving in to them. You will reach the end of July as an accomplished, happy and healthier person.

1. Ensure you can't be tempted at home. You don't have to throw away every expensive bottle of alcohol, but make sure you can't get to it easily and that it's not visible. If simply having it in the household is too much temptation, maybe ask a trustworthy family member or friend to hold on to it for you (and hope the bottles don't come back empty).



2. Let people know what you're doing. If you tend to drink at family events, let them know that you won't be doing so for the month. Same thing goes with friends or colleagues. This also gives you a chance to explain the cause and ask for donations.

3. Plan around your regular "drink times". If you tend to drink on the weekend, find some weekend activities in your city, or plan a weekly sober date night with your significant other. If you like a drink at home after work, why not find a new hobby like reading? You could also have game nights with the family as an idea.

4. Do not sacrifice your social life because temptation scares you. Attend the same events as you would before, just have plans in place, such as leaving early, or calling ahead to see if the venue/restaurant has non-alcoholic options. If you nominate yourself to be a designated driver, then you have an extra responsibility to help you resist the urge, as well as a chance to accept donations.

5. There are always Golden Tickets! If you really need a night off the challenge, you or someone else can buy you a Golden Ticket for \$25, which will allow you one night off.

6. Positive thoughts. Rather than think about all the things you're missing out on, why not shift your focus on the positives of this challenge, such as:

- Money saved
- Weight lost
- Clearer skin
- No hangovers
- More free time
- Healthier body
- Better sleep
- Supporting a good cause



Adapted from the Dry July website

Far West Local Health District's Project Management Office

FWLHD PMO News Corner

Welcome back to the FWLHD PMO News Corner! Here is an update on all things project management for the FWLHD:

Project Management Mentoring and Support - Drop-In Virtual Huddles

Commencing from Monday 27 June 2022, the Project Management Office will be conducting 'Drop-in v-Huddles' for any staff members delivering projects. The huddles will be held on the last Monday of every month from 2-3pm and delivered via PEXIP.

These huddles offer staff a chance to discuss challenges with projects or implementing change, troubleshoot solutions, network with people in similar roles and gain assisting with scoping and developing your work and ideas.

If you need additional support, the Project Management Office can also arrange mentoring.

No need to RSVP, just drop in whenever you need support for your project.

Scan the QR and dial PEXIP VR Room 4514945 (or go to <https://conference.meet.health.nsw.gov.au/webapp/home> and enter the room number)

Project Management Mentoring & Support

Drop-In v-Huddles *Launching 27-6-22*

Last Monday of every month from 2-3pm via PEXIP

Unpack project-based challenges; troubleshoot solutions, network with people in similar roles and validate your work
Also have an opportunity to set up mentoring sessions

No need to RSVP Drop-in when you need support

VC Room Number 4514945

SCAN ME

FWLHD Ideas Portal

The 'FWLHD Ideas Portal' is a great avenue for staff to raise their ideas for change; service improvements, or project proposals. The Ideas Portal provides staff with a platform to raise and scope their ideas/innovations and gain assistance to navigate the next steps towards implementation.

The Ideas Portal is an easy, online survey designed for all staff to pitch their ideas for change. Once you submit your idea, someone from the PMO will give you a call to discuss the next steps.

Use this QR to tell us your great ideas!



Community of Practice Project and Change Makers

The Project and Change Makers community of practice is intended to establish and maintain project and change management expertise, resources and networks throughout the FWLHD by:

- Providing staff a regular opportunity to build strong connections and networks between staff
- Providing staff a regular and intentional opportunity to share ideas, experiences and resources relevant to change and project management.
- Provide staff an avenue to share challenges in order to make an improvement such as improve practice, resolve conflict, work towards a solution with the support and knowledge of the group
- Provide staff a safe, shared space where each person's knowledge, experience and input is equal to, and as valued, as each other person in the group

This Community of Practice is for anyone in a role who manages projects or change initiatives, even if you're not in a designated Project Coordinator/Officer role. If you would like to join the Community of Practice, contact the PMO on the details below.

Phone: 08 8080 1549 or 08 8080 2294

FWLHD-ProjectManagementOffice@health.nsw.gov.au

Paediatric Anaphylaxis education

The Allergy & Anaphylaxis team from The Sydney Children's Network recently visited the Broken Hill Health Service & provided an extensive education session on Paediatric Anaphylaxis.

The session was offered virtually to the District and our partners at the NSW Ambulance Service.

We saw a great turn-out across the Far West, with the team being thoroughly impressed with the districts commitment to evidence-based education!

The session was recorded and will soon be made available on the Intranet. If you would like a copy of the presentation, please contact Kahlia Liston, CNE Critical Care Kahlia.Liston@health.nsw.gov.au



2021 NSW Public Sector Employee Survey

More information about the PMES report and Action Plan can be found at [People & Culture PMES intranet page](#).

PMES Focused Update on Recruitment

You said: You don't agree that your organisation generally selects capable people to do the job.

What we did: Researched and implanted effective recruitment, marketing and retention strategies. For example, job advertisements are contemporary and reflective of our district. We advertise in a wide variety of online platforms such as LinkedIn, Facebook, I Work for NSW, and SEEK. We also utilise external recruitment agencies for high-level positions.

What we did: Utilised State funding to resource additional Agency staff to support with managing vacancies and providing much needed relief for staff who have not had leave over the pandemic.

PMES Focused Update on Action on Results

You said: You are not confident that your organisation will act on the results of the PMES survey.

What we did: Communicate PMES updates via the following avenues:

- A brief update on the PMES actions is provided in the monthly In Focus staff newsletter.

- A quarterly update report is provided to the Executive Leadership Team and the Board.

- A PMES update presentation is provided quarterly at the Staff Forum.

More information about the PMES report and Action Plan can be found at [People & Culture PMES intranet page](#).

COLLABORATION | OPENNESS

BRILLIANCE

Nominations

RESPECT | EMPOWERMENT



CONGRATULATIONS

Congratulations to the following staff for receiving a Brilliance Nomination in June 2022

Adrian Winter
Adult Community MHDA Team
Ashley Bennett
Belinda Latham
BHHS Maintenance Team
Briana Bartley
Brynn Kaye
Charmaine Lowry
Chelsea Anderson
Chris McLoughlin
Clive Roxby
Deb Fobister
Elaine Fotheringham
Elise Callaghan
Fiona Lucas
Fleur Scown

Grace Matthews
Hannah Everuss
Hymne Truter
James Pollack
Jazmin Tindale
Jim Richards
Kahlia Liston
Kate William
Keira Boxsell
Kristy Kelly
Krystle Capper
Leah Gillbee
Lilly Ryan
Liz Mackie
Margaret Tate
Mary Blair

Michelle Cherry
Morgan Walsh
Pam Stuchberry
Pamela Illingworth
Racheal Murphy
Rebecca Hatch
Sara Maciejewski
Sophie Knight
Surgical PSA Staff
Tahlia Kerin
Vicki McCormack
Vilas Nair
Violetta Mucerino
Wayne Milne
Kaye Newey
Carrie Barlow

The Brilliance Nominations are a great way to share positive feedback with your peers for the great work they are doing. All Brilliance Nominations are logged in a register for the Annual FWLHD Health Staff Awards and then forwarded to the nominated staff member via email.

Scan the QR Code to nominate or go to www.surveymonkey.com/r/JNQK8D5

Do you have an idea for change, for a service improvement, better patient and staff experiences, or any burning project proposals?

Let us know — Scan the QR code or go to <https://www.surveymonkey.com/r/WBHNHZ>



Continence Awareness

Aged Care Corner...

World Continence Awareness Week takes place from the 21–27 June and during the week the World Federation for Incontinence and Pelvic Problems (WFIPP) highlights the impact urinary incontinence can have on our life and encourages those living with it to seek help so they no longer have to suffer in silence.

Incontinence is the name given to the condition in which a person experiences any accidental or involuntary loss of urine from the bladder (urinary incontinence) or faeces from the bowel (faecal incontinence).

There are different types of incontinence and each has a number of possible causes. Most common are stress incontinence, urge incontinence and functional incontinence.

Anyone at any age can develop some form of incontinence. Incontinence is a widespread condition that ranges in severity from 'just a small leak' to complete loss of bladder or bowel control. In fact, over 5 million Australians have bladder or bowel control problems for a variety of reasons. Incontinence can be treated and managed, in many cases it can also be cured.

Safe and effective continence assessment and care is an essential part of helping people maintain their dignity, independence and wellbeing. Management strategies will differ depending on the type and cause of incontinence.

The first step is to talk to your doctor or contact the **National Continence Helpline on 1800 33 00 66 (8am to 8pm)**. The National Continence Helpline is staffed by a team of continence nurse advisors who offer free information, advice and support and provide you with a wide range of information resources and referrals to local services.

Common topics covered by the **National Continence Helpline** include:

- Prevention of bladder and or bowel problems
- Women: pregnancy, prolapse, menopause
- Men: prostate, after dribble
- Children: toilet training, bedwetting, day wetting, soiling
- Chronic conditions such as diabetes, MS, Parkinson's disease
- Funding schemes and continence product advice.



Further information: <https://www.continence.org.au/>

1 IN 4
AUSTRALIANS
ARE
INCONTINENT



Living with incontinence can be both challenging and exhausting. Many people feel embarrassed or ashamed to talk about these problems.

"If you experience incontinence, it is important to remember that you are not alone."

Further Learning:

My Health Learning – 10 minute education modules

Normal Bladder Function: Course No. 327983628

Stress Incontinence: Course No. 327983693

Functional Incontinence: Course No. 327983978

Urgency Urinary Incontinence: Course No. 327983935

Nocturia: Course No. 327983562

Neurogenic Incontinence: Course No. 327983437



**MY HEALTH
LEARNING**

Nominations are open for the Far West 12th Annual Health Innovations and Staff Recognition Awards for 2022.

You can nominate a staff member by scanning the QR code or visiting www.surveymonkey.com/r/PNMMGNJ



Far West LHD 12th Annual Health Staff Recognition Awards 2022

If you would like to nominate any staff or teams for special recognition please scan the QR Code



Staff Recognition

Health
Far West
Local Heal

NSW GOVERNMENT | Health
Far West
Local Health District



Far West LHD 12th Annual Health Innovation Awards 2022

If you would like to nominate a project for recognition please scan the QR Code



Projects

Health
Far West
Local Heal

NSW GOVERNMENT | Health
Far West
Local Health District

If you would like to put forward a project for this year's awards, please register using the QR code in the below picture or visiting <https://www.surveymonkey.com/r/82CBR33>



Policy Watch — PDs available on MOH internet

The following documents have been published on the NSW Ministry of Health internet site <http://www.health.nsw.gov.au/policies>. These documents are official NSW Health policy. Compliance with Policy Directives is **mandatory**.

Title	Document Number	Date Issued
Executive Performance Management	PD2022_019	20/06/2022
Subsidy to Delegates Attending the United Hospital Auxiliaries of NSW Annual General Conference	IB2022_018	16/06/2022
NSW Health Procurement	PD2022_020	21/06/2022
Schedule Of Fees for Oral Health Fee for Service Scheme	IB2022_017	15/06/2022
Private Midwifery Practice	PD2022_018	15/06/2022
Authorised Nurse Immuniser and Authorised Midwife Immunisers	PD2022_016	07/06/2022
Pharmaceutical and Safety Net Arrangements for Outpatients and Patients on Discharge	PD2022_017	08/06/2022

Ground-breaking alcohol and drug program now available

The NSW Health Award winning Alcohol and Drug Cognitive Enhancement (ACE) program is a new way for clinicians to support people in NSW seeking treatment for their alcohol and drug use.

The program provides a set of tools and resources that allows clinicians to screen for and help improve a client's brain function. This will enable clients to better engage with alcohol and drug treatment.

Program trials showed a large increase in the number of people completing drug and alcohol treatment and a reduction in brain function impairment.

Learn more on the [Agency for Clinical Innovation website](#).



 Kindness Matters

BRILLIANCE
Nominations

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