



QRC: 3430

Price

One Day : \$462 inc. GST

Two Days: \$590 inc. GST

Date

01 - 02 Nov 2018

Venue

Mercure Hotel Brisbane

85-87 North Quay , Brisbane, QL, 4003

CPD Hours

11 Hours | 15 Mins

Comprehensive Care of the Older Adult - Brisbane 2018

2 Day Conference

Need for Program

The recently released, 2nd edition of the NSQHS Standards (2018) includes the concept of comprehensive care. This concept of care has emerged in response to identified gaps and will likely drive health policies for the next several decades. Such patient centred care requires a holistic approach that goes beyond the disease process demanding health providers consider and respond to the complex needs of their patients / residents and the communities that are touched by them. As people are more likely to require comprehensive care as they age it is incumbent on all staff to be properly equipped to provide comprehensive care and ensure they comply with Standard 5 in order to achieve best patient/resident outcomes.

Purpose of Program

The purpose of this two-day conference is to refresh and realign knowledge so as to confidently provide comprehensive care to older adults so as to achieve desired health outcomes.

Learning Outcomes

At the conclusion of this program it is expected that the participants will be able to:

- Your documentation will include a full and detailed assessment of the psychosocial needs of your patient/resident
- Older people in your care will experience a comprehensive approach to their care needs
- Patients/residents who have cognitive impairment will be provided care that reduces the likelihood of falls
- Your understanding of the concept of comprehensive care will result in less untoward events occurring in aged care environments

Program Schedule

Day One

8:30AM Registration for Day One

9:00

Samantha Woodhouse

Setting the Scene - The New NSQHS Standards

The first edition of the NSQHS Standards was introduced to improve safety and quality outcomes. By identifying major sources of preventable harm, frameworks for improving patient safety were actioned. Success followed and the number of major adverse events within hospitals decreased. From January 2019, health service organisations will be assessed against the second edition of the NSQHS Standards. What's new in the second edition? This session will bring you up to speed on:

- What gaps were identified in the first edition?
- What's changed in the second edition of the NSQHS Standards?
- What is the second edition aiming to address?
- Why is there a focus on "high risk" individuals?

9:45

Samantha Woodhouse

Clinical Leadership and Comprehensive Care of the Older Adult

What would comprehensive care look like if it was working? This session describes what success looks like. It will consider the definition of comprehensive care within the context of caring for older adults. Your facilitator will support you to reflect on what exactly this standard means for your healthcare service. Finally, it will inspire you with innovation and help you to identify your priority areas for improvement. It includes how to begin your action plan and goal setting, as well as examples of innovative initiatives that have reduced harm. Explore:

- Comprehensive care of older adults - what is it?
- What are key indicators that will help measure comprehensive care?
- Your best sources of data - where are they?
- Where are your red flags?

10:45 Morning Tea

11:15

Denise Simmons

Comprehensive Care Starts with ... a Comprehensive Assessment

Comprehensive care requires a holistic approach that goes beyond the disease process. It demands that we, as health providers, consider and respond to the complex needs of people and the communities and families that are touched by them. As people are more likely to require comprehensive care as they age, it is incumbent on all staff to be properly equipped to undertake a comprehensive assessment. This session will provide you with an essential update on the following:

- What are the components of a CHA?
- How is a CHA performed?
- What are the common issues that are identified from a CHA?
- How can you ensure staff are able to recognise and respond to elder abuse, mobility, and cognitive risks?

12:15

Anne-Marie Parisi

Insulin in Older Adults - Creating Safe Systems

Increasingly, older people with type II diabetes may require insulin to manage their diabetes. Yet, their physiological changes mean that this medication must be very well understood for it to be given safely. This session will provide a comprehensive update on how to create safe systems to prevent hypoglycaemia if insulin administration is required. It includes:

- What makes older adults more at risk of hypoglycaemia?
- Is this a preventable harm?
- What should a safe insulin administration protocol include?
- How do you review and revise current insulin protocols?

1:15PM Lunch and Networking

2:15

Bronwyn Jest

More than Just Going Through The “Motions” - Improving Bowel Health

The impact of bowel disorders, including chronic constipation, can be troublesome and distressing for an older adult. However, there are basic principles that can assist to improve overall bowel (and bladder) health. This practical session reinforces why promoting bowel health is a cornerstone of comprehensive care in the older adult. It will provide a functional approach to managing bowel dysfunction. Topics include:

- What are the types and causes of bowel dysfunction?
- How common is chronic constipation?
- What practical advice can we provide to patients to improve bowel health?

3:15 Afternoon Tea

3:45

Fred Graham

Cognitive Impairment - Managing Clinical Risk

Comprehensive care insists that harm arising from cognitive impairment, such as for (but not limited to) delirium and dementia, be prevented, recognised, and responded to. Clearer frameworks now exist to understand and implement best-available evidenced care to do so. However, it is also essential we address the following:

- What are the misconceptions around cognitive impairment?
- How do our attitudes affect the care people with cognitive impairment receive in acute care settings?

- What does comprehensive care of the older adult with cognitive impairment look like?
 - Implementing models of care
 - Assessment tools
 - Preparing staff

4:30 Close of Day One of Conference

Day Two

9:00AM Commencement of Day Two

9:00

Peta Trenoweth

Gait, Balance, and Mobility Assessment Made Easy

Assessing gait, balance, and mobility form a crucial foundation for preventing falls. Understanding how injury relates to disorders of gait, balance, and mobility provides a comprehensive approach to preventing falls. Come away with an enhanced appreciation for:

- How do you assess an individual's gait, balance, and mobility?
- Which risk factors are modifiable?
- How can you critically appraise your findings to prevent falls?

10:00

Dr Treasure McGuire

Partners in Prevention? Medication Safety and Comprehensive Care

Medication Safety and Comprehensive Care are two closely integrated NSQHS Standards. Unless a holistic approach is applied to improving medication safety, patients may still be exposed to preventable harm. This highly engaging session will challenge you to consider:

- Why do medication incidents occur in your facility?
- How safe is your staff communication and documentation?
- How can you get the most out of incident reports?
- What does a well-crafted approach to medication safety look like?

11:00 Morning Tea

11:30

Louise Webber

Preventing Harm - Pressure Injury

From January 2019 "Preventing and Managing Pressure Injuries" will no longer be considered a standalone NSQHS Standard. The prevalence, cost, and harm associated with pressure injuries and the ability to prevent them demand that we remain ever-vigilant. This session will provide the relevant knowledge and identify resources to assist you to continue to meet this key standard of care. Topics include:

- What strategies can be used to prevent pressure injury?

- How do you know it's a pressure injury? Assessment, including staging
- Managing pressure injuries – What are the appropriate interventions?
- How do you link prevention strategies to clinical outcomes?

12:30

TBA

Comprehensive Care at the End of Life

How people die matters. At the heart of the Comprehensive Care NSQHS Standard is an expectation that compassion underpins end-of-life care. Ensuring that the dying person's wishes are respected and that comprehensive care is provided is now more than ever a priority of the health and aged care systems. As such, this session considers:

- What does comprehensive end-of-life care involve?
- How can we remove obstacles to ensure every person receives this?
- What sort of feedback can you collect to monitor if these outcomes are being achieved?

1:30PM Lunch and Networking

2:30

Renee McMillan

Comprehensive Care - Transitioning from Hospital to Home

Comprehensive care does not end at the hospital door. It is essential that it extends beyond a ward, unit, or facility and into a person's home. How can we balance the pressures of throughput while ensuring that an older adult is appropriately transitioned back into the community? This session will look at a range of multidisciplinary approaches, including rehabilitation, to enable the best outcomes for people.

3:30 Afternoon Tea

3:45

Denise Simmons

Your Comprehensive Action Plan

This final session will provide an opportunity to synthesise the content covered over these two days. It's time to revisit the action plan you created on day one to ensure that you are well positioned to translate this knowledge into practice. Consider:

- What does comprehensive care of the older adult mean to you?
- What are your priority areas to address?
- What is your action plan?

4:30 Close of Conference and Evaluations

Presenters

Denise Simmons

Denise Simmons works on the Sunshine Coast as a Nurse Practitioner: chronic disease. The object of her service is to prevent re-admission to hospital, by providing advanced clinical service and monitoring symptoms while in the home. Denise celebrated 50 years of nursing in 2017. Her past experiences are extensive and include rural and remote, juvenile justice, ICU, accident and emergency, and palliative care. Denise has lectured at a number of universities and TAFEs throughout QLD and has worked as a hospital executive for many years.

Anne-Marie Parisi

Anne-Marie Parisi is a credentialled diabetes educator and accredited pharmacist, combining medication review services with diabetes education. Anne-Marie specialises in services to the aged and visits many aged care facilities and retirement villages.

Bronwyn Jest

Bronwyn Jest is a physiotherapist with a special interest in women's, men's, and pelvic health. She is passionate about getting the message out that continence issues can be treated effectively and people should not have to suffer in silence. Bronwyn works in private practice in Chermside, Brisbane.

Peta Trenoweth

Peta Trenoweth is the acting clinical nurse consultant of the 52-bed orthopaedic unit at the Princess Alexandra Hospital in Brisbane. Since graduating with a Bachelor of Nursing from the Queensland University of Technology, Peta has worked clinically in the areas of orthopaedic and trauma nursing for 13 years. During her time at the PA Hospital, Peta has worked in many capacities including the Neck of Femur liaison nurse, orthopaedic clinical facilitator, and trauma case manager. Peta is dedicated to improving the care of the orthopaedic patient cohort and has a particular interest in complex trauma and spinal injury management. Outside of work, Peta is a mother to a six-year-old son and two badly behaved Labradors. Her interests include travel, cooking, and skiing.

Treasure McGuire

Dr Treasure McGuire is a medicines information pharmacist, pharmacologist, educator, and researcher. As assistant director of pharmacy, Mater Health Services, she manages their academic practice unit. She is also a senior conjoint lecturer in the School of Pharmacy, University of Queensland and associate professor of pharmacology, Faculty of Health Sciences & Medicine, Bond University, where she lectures on complementary medicines, reproductive health, medication safety, and communicable diseases. In recognition of her services to medicines information, she received the Lilly International Fellowship in Hospital Pharmacy and the Bowl of Hygieia of the Pharmaceutical Society of Australia.

Louise Webber

Louise Webber is a Nurse Practitioner: skin integrity and wound management. She is the owner of Wound Therapies – a private Nurse Practitioner practice. She previously held an honorary clinical fellowship at ACU. She is currently a member of the Venous Leg Ulcer Guidelines Working Party (Implementation group) and Wounds Australia. She is a regular presenter at conferences at the international, national, and state levels and has several publications in her field. Based on the Sunshine Coast and metropolitan North Brisbane, she provides a skin integrity and wound management services and provides interactive workshops on all aspects of skin and wound management to clinicians.

Renee McMillan

Renee McMillan has worked in the area rehabilitation since 2007. Most recently, she is an acting clinical nurse consultant at Caboolture Hospital. She has a masters in clinical rehabilitation, which she completed in 2011, and has participated in several research projects leading to improvements in clinical outcomes. This includes research on the incidence of UTIs in rehabilitation and pressure injury prevention. Renee's objective is to build advanced knowledge and clinical skills in nurses caring for patients and their families in rehabilitation.

Samantha Woodhouse

Samantha Woodhouse is a nurse educator at West Moreton Hospital and Health Service, Queensland.

To Be Determined

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