

Northern Adelaide Local Health Network [NALHN]

Patient & Visitor
Information Guide



Government
of South Australia

Contents

Introduction	4
Aboriginal Health Services.....	4
Admission procedures	5
– Preparing for your stay	5
– On arrival	5
Advance Care Directives.....	5
Aggression and abusive behaviour, drugs and weapons	6
Bedside computers and patient entertainment	6
Car Parking	6
Confidentiality, privacy and access to personal information	7
Consent.....	8
Discharge planning	8
Your discharge planning checklist	9
Emergency management	9
Falls	9
What can I do?	9
Hospital accommodation accounts	10
Interpreter services.....	12
Involvement in your care	12
Medicines	12
Organ and tissue donation.....	14
Pain Management	15
Patient Assistance Transport Scheme (PATS).....	16
Patient property	16
Patient rights and responsibilities	16
Patient experience and feedback.....	17
Preventing pressure injuries	17
Preventing and managing infections	18
Safe food storage in patient areas	19
Security	19
Smoke-free policy	20
Teaching	20
Visiting hours	20
Volunteer service	20
What patients should and must not bring to hospital	20
Your care is our priority	22

Throughout the SA Health Hospital Admission Pack, we refer to Aboriginal Health Services and Aboriginal people. In this context, the word 'Aboriginal' is inclusive of Aboriginal and Torres Strait Islander people.

Introduction

Northern Adelaide Local Health Network (NALHN) has two major admitting hospitals, these are Modbury Hospital and Lyell McEwin Hospital. Depending on your clinical needs you may be required to be transferred across campuses and into other Local Health Networks, to the right location with the right care team.

Going to hospital can be a difficult time for patients, their families and their friends. This Information Guide has been developed to make your stay more comfortable by giving you a general explanation of the admissions process and practical advice about:

- > what you can expect during your hospital stay
- > what you should bring with you
- > what you should leave at home

To make it easier for you to find specific information, topics in this information guide are in alphabetical order.

We are committed to achieving and delivering the highest possible standards of quality care to all our patients. We are an accredited EQiP National Program that includes 10 National Safety and Quality Health Services Standards. Accreditation is your reassurance that our hospitals and health services are committed to delivering quality patient care.

We are committed to patient and consumer centred care, which is health care that is respectful of and responsive to the choices, needs and values of patients and consumers. Key principles of patient centred approaches include:

- > treating patients, consumers, carers and families with dignity and respect
- > encouraging and supporting patients, consumers, carers and families to be part of decision-making
- > communicating and sharing information with patients, consumers, carers and families
- > working with patients, consumers, carers, families and health professionals to develop programs and policies, and in health service design, delivery and evaluation
- > we are mindful of factors that can influence how consumers and patients experience health services

Aboriginal Health Services

NALHN's Aboriginal Health Services work together with local communities to offer a range of support for Aboriginal people. NALHN's Aboriginal Health Services include:

- > Aboriginal Hospital Liaison Officers for patients at the Lyell McEwin Hospital and the Modbury Hospital
- > Aboriginal Maternal Infant Care Workers for birthing women and their families.
- > Aboriginal and Torres Strait Islander Cultural Advisor, Transition Care Program, Northern Area Geriatric Service.

NALHN provides pathways to the Watto Purrinna (Branch of Life) Aboriginal Primary Health Care Service, Watto Purrinna has four sites:

- > Muna Paiendi – *Elizabeth*
- > Maringga Turtpandi – *Hillcrest*
- > Kanggawodli – *Dudley Park*
- > Wongganga Turtpandi – *Port Adelaide*

Watto Purrinna Aboriginal Primary Health Care provides Clinical, Well Being and Allied Health Services for Aboriginal Clients. Watto Purrinna Allied Health Services includes Podiatry and Diabetes Education.

Kanggawodli provides a step up and step down service for Aboriginal people from rural and remote locations.

Watto Purrinna does not provide transport services to hospitals.

For more information about the Aboriginal Health Services available to you, please talk to the nursing staff involved in your care.

Admission procedures

Preparing for your stay

Before you come to hospital:

- > read any information you are given
- > ask your GP if you have any questions
- > check if you have to fast (not eat or drink)
- > tell the doctor if you smoke

At the hospital:

- > ask questions if you are not sure of anything

On arrival

For planned admissions we ask that you go to the Admissions Desk or Day Surgery Unit, where the staff will check your personal details, complete your admission paperwork and issue you with a plastic identification wrist band with your personal details printed on it. Please make sure these details are accurate and that you wear your wrist band at all times during your stay in hospital. Staff will check your identification wrist band several times each day when providing treatment or giving you medication. You may then be escorted to your ward by a staff member and either shown to your room or given directions to the Day Surgery waiting area.

Advance Care Directives

An Advance Care Directive (ACD) is a legally binding document that expresses your future wishes or directions for health care and personal matters. The ACD applies if you are unable to make your own decisions in the future and it can appoint one or more substitute decision-makers to make decisions for you.

You can write an ACD at any stage of life. To write an ACD, you must be 18 years or older, it must be your choice and you must know what an ACD is, know what it will be used for, and know when it will be used.

The *Advance Care Directives Act 2013* came into effect from 1 July 2014. If you have already completed an Enduring Power of Guardianship, a Medical Power of Attorney or an Anticipatory Direction, these documents will continue to be legally effective after 1 July 2014. If you have any of these documents please provide a certified copy to staff to be stored with your medical record.

Aggression and abusive behaviour, drugs and weapons

Patients, carers, volunteers and staff all want health services to be delivered and received without personal threat or risk. Violence or abusive behaviour is not tolerated at any NALHN site. Any incidents of aggression, abuse or violence should immediately be reported to a staff member for further action.

Public hospitals will take action to protect staff, patients and visitors against such behaviour, and measures taken may include eviction or detention for prosecution under the [Health Care Act 2008](#).

Similarly, possessing, using, providing or dealing in prohibited substances and weapons is not tolerated at any SA Health site, including public hospitals, and will be dealt with under applicable laws.

Bedside computers and patient entertainment

SA Health has partnered with Telstra to install and support more than 3,500 bedside computers at the majority of public hospital bedsides in South Australia. These are in use across the wards at both Lyell McEwin and Modbury Hospitals. Bedside computers also provide entertainment services and packages for patients.

Entertainment packages can include digital television and radio channels, movies on demand and telephone packages. To watch an entertainment package, you will need a credit or debit card to pay for the service. For any concerns contact Telstra on 1800 028 680.

NALHN Car Parking Services

NALHN Car Parking Services are responsible for the management of car parking access for employees and the general public and associated equipment and consumables across both Modbury and Lyell McEwin Hospitals.

Hours of operation for Car Parking Services:

Modbury Hospital	8.00am to 4.00pm, Monday to Friday
Lyell McEwin Hospital	9.30am to 4.30pm, Monday to Friday

Two hour free car park limit for open air car parks. Auto pay stations (APS) accept cash and credit card. Loose change is advisable. An after-hours 24/7 service is available via the car parking intercom system for assistance with transactions at the auto pay stations and for difficulties with entry and exiting the car parks.

Car Parking Officer / Fleet Coordinator
Modbury Hospital
Northern Adelaide Local Health Network
Email melissa.hirschausen@health.sa.gov.au
Phone 8161 2448 (Mon-Fri)

Car Parking Officer / ID Badges
Lyell McEwin Hospital
Northern Adelaide Local Health Network
Email rebecca.king@health.sa.gov.au
Phone 8282 0218 (Mon-Fri)

Confidentiality, privacy and access to personal information

Public hospitals collect, use and store confidential information about patients and their illnesses for administrative purposes and so they can be provided with appropriate care and treatment.

SA Health has adopted a [Code of Fair Information Practice](#) to ensure that all public hospitals and health units comply with a set of privacy principles. The principles regulate the way personal health information is collected, used, disclosed, stored and transferred.

Your information may be shared with members of your health care team, including your general practitioner, and service providers including pathologists, radiologists, allied health professionals and pharmacists.

To identify ways we can improve the care we give, sometimes hospital staff, health or medical researchers, and committees review medical records. You are assured that all staff are bound by strict confidentiality and no information to identify you or your treatment is kept for any purpose other than your health care.

You have the right to access information kept about you by SA Health, either personally or through another person you nominate. If you wish to access your personal health records, please ask to speak with a Freedom of Information Officer at the hospital.

More information about confidentiality is in the booklet [Your Rights and Responsibilities](#), which is available in 16 languages.

Consent

'Consent' means agreeing to a proposed specific procedure after you have been given proper and sufficient explanation of the nature and likely consequences and risks of the procedure.

Public hospitals in South Australia follow legislative and SA Health guidelines relating to consent. Your consent must be given in writing before all operations, blood transfusions, radiotherapy treatment, examinations under anaesthetic and non-operative procedures of a serious nature. Written consent must also be given for the administration of local, spinal or general anaesthetic procedures.

You may receive a consent form as part of your admission to hospital. Before you can make a decision and give your consent, it is important that you understand the procedure. A member of staff will explain it to you and, once you understand the procedure, please read all of the information on the consent form before you sign it. If there is any part of the procedure or the consent form you do not understand, please ask a member of staff for more information.

Information sheets about many surgeries and procedures are available for patients and provide explanations in plain language. They can be requested from members of staff.

Discharge planning

Discharge Planning is an important part of any hospital admission. It plays an important role in ensuring a smooth move from hospital to home. This is achieved by making sure that appropriate clinical and community based supports are in place if required.

Hospital Discharge time is before 10am. Planning to leave the hospital before 10am enables you to return home in a timely fashion and to enable the bed to be prepared for the next person.

There are a number of people that can help plan your discharge:

- > You and your family or carer(s) can alert us if your circumstances are such that you may feel that you need additional support when you leave hospital
- > Your treating Doctors and Nurses/Midwives can help identify services that you may require
- > Discharge Coordinators and Allied Health team can provide an assessment and arrange any services needed to support you at home immediately after discharge

Hospitals are responsible for making sure all issues that may affect your care after discharge are addressed before you leave the hospital.

It is vital that any special needs following discharge are identified early so that plans can be made. We encourage patients to discuss any issues with your health care team. Sometimes, these issues are present for people who:

- > Live alone
- > Are responsible for another person (eg. frail partner, young children)
- > Used community services prior to admission to hospital (eg Meals On Wheels, Community Nurses/Midwives)

Your discharge planning checklist

These are the major factors to be considered in discharge planning. It is important for you to discuss the following with the hospital staff during your stay in hospital:

- Your expected date of discharge –this will help you plan your return home
- Inform the hospital of your living arrangements (do you live alone, is there someone who can assist you when you go home, what services you currently receive, are you the carer for someone in your home)
- Expectations regarding your recovery and how long it will take to recover
- Any possible restrictions on your activities e.g. lifting, driving a car
- Your ability to cope at home either with or without a carer needs to be considered carefully – do you need to go to a nursing home or will you require community support services such as assistance with medication or cleaning
- Any equipment requirements to assist in your recovery and independence.

Emergency management

All hospital emergency responses comply with Australian Standards. In the event of a fire or emergency, please remain calm and you and your visitors should stay by your bed, staff will let you know what is happening. Your visitors should stay with you. Follow directions from staff, the hospital's Emergency Response Team or emergency services personnel if present.

Falls

Anyone who comes to hospital faces the challenge of a new environment whilst not feeling their best. Being unwell in an unfamiliar place can mean a higher risk of falling.

Staff are committed to keeping you safe and avoiding a fall.

There are things that you can do to prepare for coming to hospital, and then throughout your stay, to reduce your risk of falling.

What can I do?

Prepare

Bring these things to hospital:

- > Walking aid, glasses and hearing aid (include label with your details)
- > Comfortable clothing that is not too long or too loose
- > Comfortable well fitting, flat nonslip shoes or slippers

During the hospital stay

Take time to familiarise yourself with the surroundings. Get to know your bed controls and how to use the call bell. If you are unsure, ask staff for help. Keep the call bell, glasses and walking aid in easy reach.

Getting up and walking around

During a hospital stay it is common to need assistance or supervision when getting out of bed and walking. If staff have recommended this or you feel unsure, please ask and wait until staff come to help you. Some areas may require a physiotherapy assessment prior to you getting up.

When getting up or walking

- > Use walking aids for balance, rather than the furniture or walls
- > Wear comfortable well fitting, flat, non-slip shoes or slippers
- > Wear your distance glasses. If wearing bifocals or multifocals, take extra care
- > Watch for spills or objects in the way, and tell staff about them
- > Let staff know if you feel unsteady

Minimising dizziness

- > Drink plenty of fluid such as water (if allowed)
- > Take your time to slowly get up from lying to sitting, and then sitting to standing
- > Keep your feet moving while you are sitting (if allowed)
- > Stay sitting out of bed to let your body to get used to being upright (if allowed)
- > If you spend long periods of time in bed, raise the headrest to keep you in a more seated position rather than laying flat (if allowed). Contact your nurse/midwife if you require assistance.

If you do have a fall, keep calm and call for help.

Hospital Accommodation Accounts

When you arrive at hospital, you or your family will be asked to complete admission forms, including a patient information form. This form enables you to select whether to be treated as a public patient by a doctor allocated to you by the hospital or as a private patient by a doctor of your choice who either works at the hospital or who has visiting rights. In some cases, patients are given admission forms to complete before they arrive at hospital. If you have received your admission forms in advance, please make sure you bring them with you.

Public health care

As a public Medicare patient, you are entitled to treatment in the public health care system and you generally do not have to pay for your treatment or your stay in hospital.

Patients who remain in hospital for longer than 35 days without clinical need may be liable to pay a fee.

Long Stay Patients

What is a Long Stay Patient?

If you have been in any SA Hospital for more than 35 days in a row, you are considered a Long Stay Patient. Speak with your medical team about your length of stay and what this means for you.

Charges for Long Stay Patients

From day 36 onwards you may be charged a daily fee to contribute towards your living costs while in hospital. If you are assessed as needing to stay in hospital because of acute care needs by your doctor you will not be charged the daily fee.

If your care can be provided somewhere else you will be charged the daily fee.

An invoice will be provided on the day you are discharged. The current daily patient fee is \$56.90. The fee is adjusted twice a year in accordance with the Consumer Price Index (CPI) by the Australian Government in March and September every year.

Does it matter if I have private health insurance?

It does not matter whether you are a public or private patient. Your private health fund will not cover these costs.

Do you have any other questions?

If you have any questions relating to whether you are a Long Stay Patient, your health condition or treatment, talk to your medical team or hospital staff at your local hospital.

Private health care

Private patients can request to be treated by a particular doctor, provided that doctor has the clinical privilege to practice at the hospital. If you choose to be treated as a private patient, every effort is made by the hospital to organise for your nominated private health fund to be billed directly.

Please ask the staff to arrange a visit from the **Patient Liaison Officer** to discuss payment of your account while you are in hospital. Staff will provide you with further information, including any additional fees and charges. If you do not have private health insurance, you can still be admitted as a private patient and you will pay a competitive rate for your stay in hospital and other expenses. The account will be sent to you once you are discharged from the hospital. Single rooms are allocated on a clinical needs basis.

Compensation claims: worker's compensation, third-party or common law claims

If your hospital admission is the result of a compensation claim, it is important that you tell the admitting staff which insurance company or solicitor is handling your case so that accounts can be processed accordingly.

Residents from other countries (non-Medicare patients)

Residents of countries that share a [Reciprocal Health Care Agreement](#) with Australia are usually eligible for free emergency treatment under Australia's Medicare system. This arrangement does not entitle overseas patients to treatment as private patients or for elective admissions.

Residents of countries that do not have a reciprocal agreement with Australia are not eligible for free treatment. In these cases, patients will be responsible for paying all expenses associated with treatment, including medical, diagnostic, hospital stay, prosthetic, pharmaceutical and ambulance fees.

Holders of travel insurance may be able to lodge a claim for these costs through their travel insurance company.

Interpreter services

An external service provides interpreters for a range of languages, including sign language. If you need an interpreter to help you to understand what is being said so you can make an informed decision, please ask staff to arrange an interpreter for you.

More information about interpreter services is in the booklet [Your Rights and Responsibilities](#), which is available in 16 languages.

Involvement in your care

You are an important member of your health care team, along with your nurses/midwives, doctors and allied health professionals. It is vital that you share information about your health with the other members of your health care team, especially if you notice any changes in your condition. Make sure you tell your health care team if you have any questions or concerns, so everyone can help decide on a shared plan that is best for your wellbeing.

Medicines

SA Health encourages patients to bring their own medicines from home into hospital. Please bring the medicines you are currently taking and your medicine list with you when you come to hospital.

Why should I bring in my own medicines?

Bringing your own medicines into hospital will assist hospital staff to:

- > Have a complete and accurate picture of what medicines you are taking
- > Make sure you are provided the correct medicines in hospital
- > Ensure that medicines are available immediately when you need them
- > Identify any problems that you may be having with your current medicines
- > Enable you to take the brand of medicine you are familiar with (where appropriate)

What medicines should I bring to hospital?

You should bring in all medicines that you have been taking prior to hospital admission as well as your Medicines List (if available). This includes:

- > Medicines prescribed by your doctor
- > Medicines you have purchased from a pharmacy or supermarket (e.g. pain relief medicines, cold and flu medicines, creams and lotions etc.)
- > Complementary and alternative medicines (e.g. medicinal products containing herbs, vitamins, minerals and nutritional supplements, homeopathic medicines, traditional Chinese medicines, Ayurvedic medicines and Australian indigenous medicines)

Where possible, please bring in medicines in their original packs.

What is a Medicines List?

A Medicines List is a useful way to manage your medicines. It is a list of the current medicines you are taking along with other information about your medicines such as what the medicine is used for, how much to use and when to use it.

If you take medicines regularly SA Health recommends that you keep an up-to-date Medicines List and have it with you in case of emergency. You should bring this list whenever you go to hospital or visit a healthcare professional. If any changes are made to your regular medicines while you are in hospital or when you visit your doctors, you will need to make sure you update your Medicines List.

What will happen to my medicines?

When you come into hospital, staff will collect your medicines and a hospital staff member (pharmacist, doctor or nurse/midwife) will go through your medicines with you to determine what medicines you have been taking and if you have had any problems with these medicines. Your medicines will be stored safely and securely at all times or returned home with a carer, where appropriate.

What if I forget to bring in all my medicines?

They will be supplied by the hospital during your stay in hospital. Your carer may be asked to bring in your medicines if your doctor needs them to work out what medicines you have been taking.

Will my medicines be used while I'm in hospital?

Your medicines may be used while you're in hospital, depending on hospital policy and the suitability of your medicines for hospital use. Some medicines that you bring in may not be suitable for hospital use (e.g. medicines in dosettes, expired medicines).

Your medicines will only be used with your consent. If you wish to use your own medicines while in hospital, please inform hospital staff.

Staff will check your medicines to make sure they are suitable to use during your hospital stay. If your medicines are suitable for use during your admission they will be stored securely and a nurse/midwife will give them to you at the correct time each day.

Your own medicines will only be used while you're in hospital with your approval and will never be used for any other patient.

What if I need new medicines or there are changes to my usual medicines?

Any medicine started during your hospital stay will be supplied by the hospital. If your dose changes but the medicine remains the same, your medicines may be re-labelled with the new instructions.

What if I run out of my own medicines while in hospital?

If you require more of your current medicines during your hospital stay or on discharge, the hospital doctor and pharmacy will organise a supply for you.

You will need to bring your Medicare card and any pension/concession cards (including your Safety Net card) into hospital with you. Hospital prescribers will be able to write Pharmaceutical Benefits Scheme (PBS) prescriptions for when, you are discharged from hospital, and when you attend an outpatient clinic, including for a range of chemotherapy medicines.

What will happen when I go home?

Hospital staff will review the medicines that you have been taking while in hospital and tell you which medicines you should take when you return home.

Your own medicines will be returned to you when you leave hospital, along with any additional medicines provided by the hospital. If your medicines are no longer suitable for use, hospital staff may dispose of your unwanted medicines, with your consent.

On discharge

Please make sure you update your Medicines List with any changes to your medicines when you leave hospital.

What happens to medicines I no longer need?

If you do not require a medicine when you leave hospital, the hospital can safely dispose of it for you.

Organ and tissue donation

SA Health supports organ and tissue donation. In South Australia, organ and tissue programs are coordinated by Donate Life. For more information about Donate Life, visit our website at www.sahealth.sa.gov.au/goingtohospital or speak with your nurse caring for you or your relative.

Pain management

Good pain control is important and can help you feel more comfortable and maybe even get well faster.

How can I be involved in my pain control?

Be involved in reporting your pain. It is important for your comfort and recovery that you tell the doctors and nurses/midwives about your pain. It helps us to:

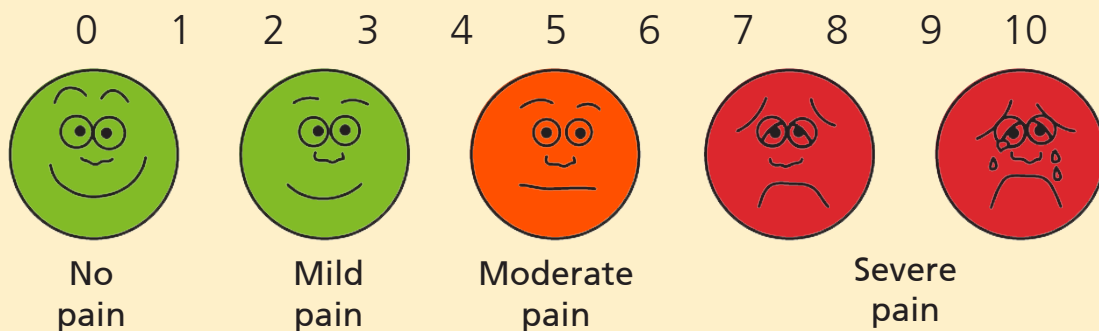
- > know how well your treatment is working
- > choose the best form of pain relief for you

Report your pain ...

You will be regularly asked to score your pain on a scale. There is no right or wrong answer, everyone is different. We use your pain scores to guide pain treatment.

Call your nurse/midwife ...

- > when you first start to feel uncomfortable
- > if the pain medicine does not seem to be working



Call your nurse!

It is harder to ease pain once it has become severe.

Patient Assistance Transport Scheme (PATS)

The Patient Assistance Transport Scheme (PATS) provides some financial reimbursement to eligible country patients and approved escorts for the cost of travel and accommodation. PATS may be available if you need to travel more than 100 kilometres each way to receive specialist medical treatment that is not available at your nearest hospital or health service.

For more information about PATS and to discuss eligibility and how the scheme works, contact your local hospital or health service. Or you can visit the website: <http://www.countryhealthsa.sa.gov.au/Services/PatientAssistanceTransportSchemePATS.aspx> Telephone 8226 7215 Adelaide Central Office.

Patient Property (See also Page 21 and Page 22)

If you have found or lost property whilst in hospital, please approach the Security Office and discuss with the staff who will assist you in completing the necessary documentation.

To organise return of your stored patient property placed in our safekeeping during yours or your relatives stay, please bring your receipt and photo ID with you to the Security Office.

Patient rights and responsibilities

Information about your rights and responsibilities as a patient is outlined in the booklet, [Your Rights and Responsibilities](#). Copies of the booklet are available at admission and outpatient desks.

[Your Rights and Responsibilities](#) gives you information about a range of issues, including deciding on the type of care or treatment you receive, accessing your personal health record, fees and financial assistance. It also outlines what you can do to help your health service give you better care and how you can provide feedback to your health service.

In addition, the Health and Community Services Complaints Commissioner (HCSCC) has developed a [Charter of Health and Community Services Rights](#). The HCSCC Charter sets out the rights of all people who use health and community services in South Australia, including services in the public, private and non-government sectors. For more information about the HCSCC Charter, visit the SA Health website at www.sahealth.sa.gov.au/goingtohospital

Know your rights when receiving a health or community service in South Australia:

1. Access – right to access health and community services
2. Safety – right to be safe from abuse
3. Quality – right to high quality services
4. Respect – right to be treated with respect
5. Information – right to be informed
6. Participation – right to actively participate
7. Privacy – right to privacy and confidentiality
8. Comment – right to comment and/or complain

Statements of rights for mental health consumers

There are statements of rights for mental health consumers on Community Treatment Orders and Inpatient Treatment Orders. These statements provide information about mental health treatment orders, mental health care and summarises the rights and responsibilities of consumers of mental health services. Visit the SA Health website at www.sahealth.sa.gov.au/goingtohospital for more information and copies of each statement in 16 different languages.

Patient experience and feedback

The Northern Adelaide Local Health Network (NALHN) is committed to partnering with consumers and the community to improve the services that we provide. There are already many successful partnerships and we strive to build on and strengthen these to help us deliver responsive, safe services that contribute to the health needs of our population. The NALHN Consumer Advisory Council brings the voices of the community and consumers into our decision making processes. This helps to develop services that are responsive to the needs of our diverse catchment population. Patients, clients, families and carers who are interested in providing consumer input to NALHN can contact 8133 2064 to enquire about joining the Consumer Register.

NALHN actively seeks feedback from those who use our services, including compliments, complaints and suggestions. Feedback about consumer and carer experiences provides us with valuable information about what we are doing well and how we can do better.

If you are unhappy with the care you are receiving, you have the right to provide feedback and feel confident to do so.

If you feel that something is not right, please let our staff know in the first instance. You can do this by asking to speak to a senior staff member directly, or by arranging for a family member or friend to voice your concerns. If we know about your concerns early we are more able to address the problem.

If you do not feel that your complaint has been resolved you may wish to contact our Consumer Advisor. This person is a senior member of our team who is trained to help you with any concerns that cannot be resolved with the staff who are providing your care.

For more information email: NALHNConsumerAdvisors@health.sa.gov.au

OR: Consumer Liaison Officer – Northern Mental Health – Phone 7425 6217

Consumer Advisor – Lyell McEwin Hospital – Phone 8182 9568

Consumer Advisor – Modbury Hospital – Phone 8161 2551

Preventing pressure injuries

Pressure injuries are also called bed sores and pressure ulcers. They can happen very quickly if you are unwell or not able to move easily. Any form of pressure or friction (even rubbing) can cause skin damage, particularly if your skin is moist or you suffer from poor circulation or poor sensation in your skin.

What you can do to protect your skin

- > Tell a nurse/midwife or doctor if you have any skin pain or burning feeling
- > Change position, even a little, every half hour or so
- > Keep active if you can – just moving around in bed can help
- > Eat and drink well
- > Avoid smoking – this reduces blood flow to the skin. Ask your nurse/midwife about how you can get help to quit
- > Avoid firm massage, especially over bony areas

Caring for your skin

- > Use a mild cleanser and dry your skin gently
- > Use moisturisers if your skin is dry or flaky or cracks easily
- > Use barrier creams between skin folds
- > Use warm but not hot water in baths and showers

When you are in bed

- > Change position every half an hour
- > Lie on your side to relieve the pressure on your bottom and heels
- > Avoid wrinkled, damp clothes and bedding
- > Sliding down the bed can put pressure on heels, bottoms or elbows. To avoid this, bend your knees or raise the foot of the bed. Only have the head of the bed up high for mealtimes.

Why is it important to prevent pressure injuries?

- > They are painful and can take a long time to heal
- > They can become infected making you very sick
- > They can leave scars on your skin

Preventing and managing infections

Hand hygiene is one of the most important ways you and staff can prevent the spread of germs that can cause serious infections. To stop germs spreading, all staff responsible for your care should wash their hands before and after caring for you.

If you don't see staff washing their hands before and after treating you, please speak up. You and your family should not be afraid or embarrassed to ask staff to wash their hands.

We also encourage you to help with reducing the spread of infection. You, your family and friends should wash hands or use the alcohol skin disinfectants provided throughout the hospital.

When to perform hand hygiene

Staff – everyone caring for you should wash their hands before and after touching or administering care to you.

Patients – should wash their hands after going to the toilet and before meals (if you require assistance with hand hygiene please ask nursing staff).

Visitors – should perform hand hygiene on entering/exiting the ward (hand hygiene stations are located at the entrance of each ward and common corridors).

Hand hygiene is everyone's business and is the single most important thing that can be done to prevent the spread of infection whether you are in hospital, at work or at home. Be an active member in your care – if you do not see the doctor, nurse/midwife or other healthcare professional clean their hands before/after administering care remember – **it's ok to ask!**

More information about hand hygiene is available on the SA Health website.

Safe food storage in patient areas

For patients and visitors

During storage, the safety and suitability of food needs to be maintained by ensuring it is stored in an appropriate environment and protected from contamination. Potentially hazardous food must be stored at a temperature that minimises the opportunity for pathogenic bacteria to grow (Standard 3.2.2 Australia New Zealand Food Authority, Safe Food Australia).

Please be advised not to bring in the following high risk food items:

- > Undercooked meat, fish and especially poultry
- > Cold meats and delicatessen goods (e.g. ham, salami, cabana)
- > Pate and liverwurst
- > Soft cheese (e.g. camembert, brie) or cheese with mould (e.g. blue, stilton)
- > Raw fish and shellfish
- > Salads including raw mushrooms or fruits from salad bars
- > Non-pasturised dairy products
- > Unpackaged/unwrapped breads, cakes and donuts etc. from a bakery

All food being stored in a clinical area fridge needs to be:

1. Labelled with the patient's name, date and time
2. Fully covered/wrapped in an appropriate container/packaging

Discarding food

Food that is not labelled with patient's name, date and time is to be discarded daily. Food is **NOT** to be re-heated within the healthcare facility.

Please discuss with your nurse should you have any questions on matters relating to food.

Security

The Security Officers at the Hospital provide security 24 hours per day for patients, visitors, staff and hospital infrastructure. You can contact them through the ward staff or via the switchboard.

Smoke-free policy

All SA Health sites are smoke-free environments and there are no designated areas for smoking at any of the state's public hospitals. This also includes electronic cigarettes.

If you are a smoker, it is a good idea to discuss your options for nicotine replacement therapy with your doctor and make sure your anaesthetist is aware. Support is also available at all public hospitals in South Australia to help you manage nicotine withdrawal while you are in hospital, including nicotine replacement therapy.

SA Health's smoke-free policy protects staff, patients and visitors from second-hand smoke. Information, assistance and counselling to help you to quit smoking are available. Please speak with a member of staff or call the Quitline on 13 78 48.

Teaching

The training of future health professionals is a task that the staff of NALHN takes very seriously. We ask that you consider helping us by accepting students as part of your health care team. However, should you prefer not to participate in such teachings at any time we shall respect your wishes.

Visiting Hours

If your relative is unsure of visiting times or whether you are ready for visitors, please ask them to ring the hospital switchboard to check with the ward prior to coming in.

Phone 8182 9000 for Lyell McEwin Hospital or 8161 2000 for Modbury Hospital.

Volunteers

NALHN is supported by volunteers at many sites. Areas in which volunteers provide services include the Kiosk, Florist and Gift Shop, Patient Information Services, Transport, Playroom, Emergency Department, ward based library trolley, TV Hire Service and patient areas.

What patients should and must not bring to hospital

There is a one bag limit for patients being admitted to public hospitals in South Australia. Please ensure your packed bag weighs less than eight kilograms and is no larger than an overnight sized bag. There is limited space available for baggage at our hospitals and luggage that exceeds the size and weight guidelines may not be able to be stored. Exceptions may be made for people without family or carers and for those from rural and remote locations.

Although all care is taken, SA Health cannot accept responsibility for the personal belongings of patients.

What patients should bring

Please bring only what you need with you, such as:



Advance Care Directives, other applicable legal documents



A credit or debit card for bedside computer entertainment packages



Medicare care, health benefit fund details, Department of Veterans' Affairs (DVA) cards and other concession cards



Medicines, including herbal remedies, that you are taking in their original packaging (along with dosages and times)



Name and contact details of your Contact Person or carer



Name and contact details of your general practitioner (local doctor)



Nightwear and a dressing gown or robe



One change of clothes (or several if planned stay is longer than 48 hours)



One pair of non-slip footwear



Relevant scans, x-rays, pathology results and doctors letters



Required aids, such as glasses, hearing aids, wheelchairs and walking frames. Be sure to include batteries and cases (if appropriate)



Small amounts of cash, if required



Toiletries – toothbrush and paste, soap, comb, shaving gear

Remember, you will need to leave room in your bag for the clothes you wear to hospital. Please ensure you label personal items, including personal wheelchairs and walking frames, with your name, address and a contact telephone number.

If your child is the patient, please bring their Child and Youth Health Book and a favourite toy or security blanket.

Ensure you take all your belongings home with you, including phone chargers (see notes below for "Plug-in electronic equipment" and x-rays).

What patients must not bring



Bedding, electric blankets, wheat bags, hot water bottles or heat packs of any kind



Heavy or bulky items



Large quantities of food or drinks (Do not bring high risk food items. See Safe Food Storage P17.)



Pets, excluding service or assistance animals specifically trained to help people with visual or hearing impairments



Plug-in electronic equipment, including televisions. Small personal electrical appliances may be used in the hospital, subject to prior approval

Electrical testing may need to be done before the appliance is used in the hospital and there may be a cost to have equipment tested for electrical safety. For more information speak with a member of staff.



Talcum powder, large bottles of shampoos, conditioners, perfumes or other liquids



Weapons or prohibited substances



Valuables, including jewellery or large amounts of cash

Your care is our priority

Help us to help you in playing an active role in your care. At NALHN we are working towards being recognised as a Best Practice Spotlight Organisation (BPSO), delivering the best possible care.

Care that supports and values client centred care, which means:

- > Everyone having equal access to care
- > Respecting and making sure your wishes, concerns, values, priorities, point of view and strengths are known
- > You know yourself best and have the right to play an active part in working with nurses, midwives and the health care team to set out your health care goals and how to achieve them
- > Caring for you as a person and not a problem
- > Valuing your family/carers views and involvement in your care
- > Receiving timely education, information and support to ensure you and your family/carers are well informed and skilled in any ongoing care that may be needed.

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*The South Australian Safety and Quality in Health Care Consumer and Community Advisory Committee

www.ausgoal.gov.au/creative-commons

For more information

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This document has been reviewed and endorsed by CACAC* for consumers and the community.

