

Newsfeed No. 47

May 2023



A special birthday for our Emergency Department's last patient



In what was history in the making for Prince of Wales Hospital, the Emergency Department (ED) in the Dickinson building closed its doors for the first time in 25 years, and successfully reopened in the new Acute Services Building (ASB).

After months of planning, the big move took place on the morning of Wednesday 3 May and was an enormous team effort, with staff caring for patients in both EDs simultaneously until the last patient was discharged from the former ED.

Centenarian, Gaye Coetsee was the final patient cared for in the old ED and coincidentally, was celebrating her 103rd birthday.

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Following a CT scan and treatment for some minor injuries sustained during a fall, the staff sang Gaye happy birthday and shared some chocolate cake as they packed up the department for good.

"On such a historic day, Prince of Wales Hospital's ED team closed the Emergency Department in the Dickinson Building and opened the new department in the ASB. It was amazing to see SESLHD's CORE values in action and the sharing of personal strengths and wisdom on the day by many," said Nurse Manager, Brett Clarke.

"Staff across Prince of Wales Hospital did a fantastic job to support this momentous move, while continuing to provide high quality family-centred care to the most vulnerable in our community, to which the ED team is most grateful."

The new and expanded ED features state-of-the-art infrastructure, new technology and an abundance of natural light. The new drop-off zone for ED can be accessed off Magill Street, via Botany Street.

Pictured: The ED team with last patient, 103 year-old Gaye Coetsee

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More services open in the new Acute Services Building

In early May, the Community Assessment Unit (CAU) opened for the first time on level 3 South, the Psychiatric Emergency Care Centre (PECC) moved to level B2, and Medical Imaging went live, providing an x-ray and CT scanner for ED patients.

The ICU team are now busy getting ready to move to level 3 of the ASB. An additional CT scanner and MRI is also set to go live on level B1, servicing all ASB inpatients. This marks the final move for phase one of the opening of the ASB.

Meanwhile, the Renal, Rehab and Specialty Surgical Wards will relocate to vacated spaces in the Dickinson and Parkes buildings.



Pictured: CAU, ED, PECC and Medical Imaging celebrate moving into the ASB

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Patients help 'name the cranes' for the Sydney Children's Hospital redevelopment

A 'Name the Cranes' competition has been launched by the Sydney Children's Hospital Stage 1 and Minderoo Children's Comprehensive Cancer Centre (SCH1/MCCCC) team to engage children and young people with the project.

Patients, siblings, and children of staff were encouraged to come up with a creative name to be displayed on the project site, with entrants in the running for great prizes including iPads and Lego kits.

The installation of the second tower crane was celebrated in May with a superhero-themed event hosted by the principal contractor, John Holland Group.

One of the patients who attended was 13-year-old Senri, who travelled from Solomon Islands for specialised treatment, after an accident in 2021 left him with severely burnt hands.

"It's a distraction and a highlight for the children. It was enlightening for him that there are people out there that do care," said Senri's guardian Ros.

The event included superhero characters, face painting and balloon art stalls, and is part of an overall plan to involve patients and their families in each stage of the hospital redevelopment.

"Events like these are a fantastic way to entertain and educate patients and their siblings, some of whom may have spent extended periods at our hospital," said SCH1/MCCCC redevelopment project director Cathy Lovell.

'Name the Cranes' entries have now closed with winners to be announced soon!



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A sneak peek at future Sydney Children's Hospital rooms



New prototype rooms to give staff a concept of the size, layout and functionality of clinical spaces have been launched as part of the Sydney Children's Hospital Stage 1 and Minderoo Children's Comprehensive Cancer Centre (SCH1/MCCCC) redevelopment project.

The rooms have been developed with the support of project partners, John Holland Group, PricewaterhouseCoopers (PwC) and South Eastern Sydney Local Health District, in the former Ambulance Station on Barker Street, Randwick.

The rooms are to-scale and include fixtures and equipment that will be featured in the new hospital building.

The following spaces have been developed:

- ✓ Emergency Department acute bed space
- ✓ Children's Intensive Care Unit bed space
- ✓ Standard medication room
- ✓ Standard overnight bedroom

The aim of the project is to work with staff to refine and evaluate clinical and operational processes, and to prepare for change and new ways of working in the new hospital building.

"The development of the prototype spaces marks an important and exciting milestone for the SCH1/MCCCC redevelopment," said SCH1/MCCCC Redevelopment Change and Transition Lead Kellie Wilson.

"We are thrilled to give staff, families and potential donors the opportunity to view the development of these spaces to date, with plans to test and refine models of care as we prepare for the next chapter of the project."

The redevelopment team has started showing clinical and operational staff the prototype rooms through booked sessions, and will continue to take staff, project stakeholders and relevant community members through.

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UNSW spaces to align with Acute Services Building and maximise collaboration

In an integrated extension of the Prince of Wales Hospital Acute Services Building (ASB), UNSW Sydney will house state-of-the-art research, clinical innovation, biomedical and teaching facilities across 10 floors.

Fit out of the UNSW teaching and research space began in May and is expected to open in 2024.

UNSW Director Strategy and Precincts, Dr Zoe Terpening believes the value of co-location and collaboration across the Precinct is central to advancing excellence and innovation in healthcare and research.

“The UNSW education and research space within the ASB will bring together education and medical researchers, clinicians, industry partners and public health experts to foster rapid translation of research, innovation and education,” she said.

“We’ll work alongside our health colleagues to help address our community’s needs. Embedding a world leading University within a leading tertiary hospital fosters a culture of exploration, collaboration, and discovery, amplifying the potential for transformative outcomes. Together, we can create a tapestry where patient-centric care, ground-breaking research and education intertwine, propelling society forward and shaping a brighter future of health for all.”

The UNSW extension will include dedicated research, teaching, innovation and collaboration spaces, in addition to laboratories for clinical and translational research linked to the ASB.

The spaces will align with work happening at the hospital, maximising the benefits of co-location to improve health outcomes for our community.

Across from the hospital’s first floor operating theatres will be medical technology ideation, bio-printing, rapid prototyping and testing laboratories. In these spaces we will see UNSW Engineering prototyping new devices for health care in real time.



On the second floor, UNSW will have space for clinical prototyping: co-design for implants, prosthetics, orthotics, devices, surgical robotics and computational modelling. It will also include a sample preparation facility for specimen reception and distribution, molecular processing and short-term cryostorage.

The Intensive Care Unit and Community Assessment Unit on level three will link to UNSW’s data visualisation spaces, co-working zones for data interfacing with the hospital.

To maximise links with the hospital’s Haematology, Oncology and Aged Care units on level four, a laboratory is planned. It will have shared services for clinical research as well as a haematology translational research space and a high-end analytics lab for cell therapy.

On levels five through seven, UNSW will have dedicated clinical education and translational research zones to encourage collaboration and learning. These spaces correspond to the hospital’s Aged Care and Orthopaedics, Surgery, Respiratory and Spinal units.

Across from the Neurosciences unit on level eight, UNSW’s space will include a second research laboratory, stroke research and education space.

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Faces of the Precinct: Five minutes with Carolyn Sue

Q: What is your role in the Randwick Health & Innovation Precinct Team?

A: I have just joined the Randwick Health & Innovation Precinct (RHIP) as the Kinghorn Chair, Neurodegeneration at [Neuroscience Research Australia](#) (NeuRA) and have the privilege of co-chairing RHIP's Translational Research Working Group with Professor Adam Jaffe.

Q: What attracted you to this type of work?

A: As a clinician scientist, I enjoy translating research outcomes into clinical care so we can improve the health outcomes of the patients we see both within and beyond the Precinct.

Being able to discover or adopt new technologies to improve patients' lives is exciting, always challenging, and is a real honour - especially when you can see it making a tangible difference in the community.

Q: What excites you most about the Precinct?

A: I am returning to the Precinct where I first studied medicine and was inspired to become a neurologist and clinician researcher.

It is very exciting for me to come back to where I started, especially at a time when there is a clear vision and drive to innovate.

Having key stakeholders invest in the campus and transform the way in which we collaborate is wonderful to see and realise.

The opportunities to work collaboratively across the Precinct are extensive and we have fantastic resources to utilise, as we implement the latest research findings into healthcare.



Q: What do the next six months look like for you?

A: I am looking forward to establishing my new research laboratory and clinical service at NeuRA.

I will be focused on building up our clinical service with my clinical team and will also be busy establishing our Neuroscience Research Program with my laboratory team.

Pictured: Carolyn Sue, Kinghorn Chair, Neurodegeneration

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Randwick Precinct recognised for outstanding progress

The Randwick Health & Innovation Precinct (RHIP) has been invited by the [Global Institute on Innovation Districts](#) to join the prestigious [Global Network of Innovation Districts](#), in recognition of the Precinct's outstanding progress to date.

Through collaboration, this sophisticated community of practice seeks to advance all participating innovation districts, providing critical insights for navigating existing and emerging global challenges.

RHIP joins counterparts from across Australia, Asia, Europe, North America, Latin America, and the Middle East, drawing on each other's knowledge and experiences to achieve excellence in contemporary practice.

The Precinct's Executive Director, [Brooke Griffin](#), said that the invitation to this exclusive Network is testament to the unwavering support from RHIP's partners and their people.

"It's a great honour for the Precinct to be invited to join the Global Network of Innovation Districts, an acknowledgement of the hard work and significant investment from our Founding Partners since inception in 2016."

"All innovation precincts are unique and are at different stages of maturity. Together, we can leverage our knowledge and experiences to maximise productivity and our impact on healthcare.

"I wholeheartedly thank the RHIP community for all their efforts – making the Precinct what it is today," said Brooke.

[Click here](#) for more information on the Network.

If you haven't already, you can follow RHIP on [LinkedIn](#), [Twitter](#), and [YouTube](#) to keep up to date with what's happening across the Precinct.

"Actively engaging with a global community like this is critical for ensuring that RHIP stays ahead of the curve, learning from, and providing advice to our local and international counterparts on precinct-related issues."



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