

Diversity Health Newsletter

July - September 2023



Why do we celebrate Multicultural Health Week?

Multicultural Health Week is a state-wide event held every September in New South Wales (NSW) since 2009 to highlight the importance of language and culture in health services. It also provides an opportunity to raise awareness of health issues facing multicultural communities.

Multicultural Health Week 2023

The theme for Multicultural Health Week 2023 was 'Celebrate Culture Through Movement: Every Move Counts'. To celebrate Multicultural Health Week at our hospital, Yael Rottanburg, the Diversity Health Coordinator, 'moved' through the hospital with a trolley full of prizes and a short quiz for clinical staff to participate in a short Multicultural Health Week-themed quiz and to win a prize.

A total of 91 staff answered the quiz questions!

If you did not have an opportunity to participate in the quiz and would like to give it a go, click on the photograph to visit the SSEH Diversity Health page! The quiz is under 'What's New'.

**L-R: Yael Rottanburg,
Diversity Health
Coordinator and Tian Tran,
Registered Nurse, 2 East.**



Staff were also asked to name the top five languages of inpatients who are treated in their ward. These are the results.

2 West	Emergency Department	DPU/HVSS	2 East
Mandarin: 14%	Greek: 19%	Mandarin: 19%	Greek: 25%
Arabic: 13%	Arabic: 12%	Cantonese: 13%	Cantonese: 23%
Greek: 11%	Cantonese: 12%	Arabic: 10%	Arabic: 7%
Cantonese: 9%	Spanish: 11%	Spanish: 9%	Russian: 7%
Spanish: 6%	Mandarin: 9%	Greek: 9%	Mandarin: 4%

Resources to help care for patients from Culturally and Linguistically Diverse (CALD) backgrounds at SSEH

Caring for patients from CALD is an integral part of our work. To ensure that we provide patient-centred care for those who cannot speak English, it is vital that we communicate with them effectively. Below are a few tools that can assist in our work when caring for patients who do not speak or have limited English.

CALD Assist App

The CALD Assist App is a simple and dynamic way for clinicians to communicate with patients from CALD backgrounds. The App features translated phrases commonly used during basic care interactions and screening assessments to support patient care. A dedicated CALD Assist App iPad is available on 2 West, 2 East, DPU/HVSS and the Emergency Department. For further information about the CALD Assist App, click on the image or scan the QR code below.



Appointment translation tool

To make sure that your CALD patient knows when their next appointment is, you can input the appointment details into an online appointment tool into the selected language. Once you have done this, you can print out the information, or send it to them via email.

Click on the image below to access this tool or scan the QR code.



Translated patient resources

Translated information for patients on a variety of topics is available online. Recently added resources includes information on long COVID in plain English, Arabic, Vietnamese, and Simplified Chinese. Click on the images or scan the QR codes below to access translated resources. SSEH-specific translated resources can be found on the [SSEH Intranet](#) under 'quick links'.



Using a Healthcare Interpreter

To contact a professional NAATI accredited Healthcare Interpreter, contact:

Sydney Health Care Interpreter Service:	1800477 233 (Free service)
TIS National (fees apply):	1300 655 030 (Fee for service)



Urban Insight Walk

During Homelessness Week, Lucy McWilliams, the SESLHD Homelessness Health Program Manager, organised the Urban Insight Walk to give staff from across the district a chance to listen to a person with lived experience of homelessness. I had the privilege of joining this walk.

Paul's story

Paul, a SESHLD community member who experienced homelessness for three years and lived in a homeless shelter, was our guide on the walk and shared some powerful insights into his personal experiences with us. Paul shared that he has suffered from severe mental health issues and has received medication since he was a teenager.

Paul's story started with a single traumatic event when he was four years old: his father left the family. His mother did not have enough money to support her five children, so she placed Paul into foster care. Paul feels the move into foster care only exacerbated his feelings of abandonment, which contributed to episodes of bedwetting into adolescence, feelings of anger, and poor performance at school. At age 15, Paul reunited with his mother and would visit on the weekends. During these visits, however, he was exposed to and started using alcohol and other substances. By age 16, he was spending time in Kings Cross with friends, engaging in injecting drug use, and soon formed a substance use disorder, which lasted 30 years.

Paul's experience with the NSW mental health system

Paul has often felt his complex mental health history has been misunderstood by medical and other healthcare professionals, leading to poor experiences in the NSW mental health system. For example, he was once admitted to a mental health ward, only to be told he did not need to be there, which he felt minimised his experience.

Paul's experience in the hospital Emergency Department

Paul remembers negative experiences when visiting the ED. He has felt stigmatised due to his substance use and potential Hepatitis C status. He also feels he has been undertreated at times, particularly concerning pain relief. Paul said that for people experiencing homelessness and to continue engaging with health services, staff need to treat people experiencing homelessness with dignity and respect; to ask how they are and what they need. He also wants staff to be aware that people experiencing homelessness have past trauma, including with the healthcare system, which can cause them to have a heightened response to seemingly simple events. It's essential to take a trauma-informed approach with every patient.

Paul highlighted that if even privileged people have bad experiences in the health system, imagine how much worse it can be for a person experiencing homelessness who is feeling stigmatised and excluded. These negative experiences impact people willing to access health care.

Paul gave us two simple take home messages:

To have empathy and compassion for people experiencing homelessness.

To be aware that, at first glance, nothing is what it appears to be.



October is Health Literacy Month!

Health literacy is the knowledge and skills needed to find, understand, and use information and services to make decisions about health and healthcare. Here is what you can do to help communication with your patients.

Follow these two useful tips to make sure your patient understands what you are saying to them!

Tip 1 - Use plain language: no acronyms or jargon, use simple language and keep your sentences short.

Tip 2 - Check that the patients understand what you are saying to them!

Use these resources to help you communicate with your patients - click on each image or scan the QR code to access the resource.

Dictionary: Helping you write medical terminology into plain English.

Plain Language Medical Dictionary



APP: A tool to determine what reading age your document is.

Hemingway
Editor



Carers are those who provide support to people who are frail, aged, living with lifelong disabilities, mental health conditions, alcohol or drug dependency, dementia, terminal illness, HIV, or a chronic illness. Carers who are accompanying their family member/friend to SSEH may be experiencing several issues such as lack of time for personal needs, lack of accessible information about support services, depression, anxiety, grief and loss and exclusion from clinical discussions. Whilst Carers are not the primary patient at SSEH, they provide crucial information and support in the care of our patients.

Resources for carers

Find out more about events for Carers Week through the Carers Week website by clicking on the image below or scanning the QR code.



Find out more about support for Carers through the Carer Gateway. Click on the image below or scan the QR code below for the link. This information is also available via the Intranet under [Diversity Health](#).



A TASTE OF HARMONY AT SSEH

After-hours Clinical Nurse Educator Debbie Ross submitted this recipe for the July-September newsletter. Originally from New Zealand, Debbie grew up with her grandmother's Anzac Biscuit recipe. Debbie's grandmother made these biscuits because they could travel long distances on ships to reach the soldiers in the bunkers without spoiling. Debbie explained that this recipe is special to her because four of her uncles fought in World War Two, and all four of them returned home to New Zealand. Her grandmother would send them packages of Anzac biscuits in the trenches. She also chose this recipe as it represents both countries she belongs to, Australia and New Zealand.

To access the recipe, click on the map below, or visit SSEH's Diversity Health page and navigate [to A Taste of Harmony – recipes from Sydney/Sydney Eye Hospital](#).



DO YOU NEED MORE INFORMATION, OR WOULD YOU LIKE TO MAKE A CONTRIBUTION TO THIS NEWSLETTER?

If you would like more information about any resources in this newsletter, or would like to book a training session, please contact Yael Rottanburg, the Diversity Health Coordinator via email at yael.rottanburg@health.nsw.gov.au or calling her on extension 27409.

If you would like to contribute to the next quarterly newsletter regarding Diversity Health information, related projects or achievements in your ward/department, please email the details to yael.rottanburg@health.nsw.gov.au by Friday 1 December 2023.