

Community Health Services at the Prince of Wales Hospital

Prince of Wales ACAT Team

Prince of Wales Community Health Services is located on the Randwick Hospitals Campus and is part of the Population Health and Clinical Support Program of Prince of Wales Hospital.

Service is provided to all residents of the Randwick and Botany local government areas (LGAs) as well as a part of City Of Sydney LGA. Additionally, a number of our services are active in the wider community that encompasses also Waverley, Woollahra and another part of the City of Sydney LGAs.

We provide services for adults, older people and population groups with special needs. All referrals to the Service are to Ph 93690400

Our organisation works closely with other services and units within the hospital and also has strong and important working relationships with large numbers of other community based organisations in the local area.

Randwick / Botany Aged Care Assessment and Community Rehabilitation Team (ACART) provides specialist community based assessment, therapy and support services to older people, people with memory loss, family and carers and younger people with disabilities.

The team consists of:

- Rehabilitation / Aged Care Nurses
- Dementia Nurses
- Occupational Therapists
- Physiotherapists
- Speech Pathologist
- Social Workers
- Community geriatrician

ACART assists clients and their carers with:

- comprehensive assessment
- Advice regarding activities of daily living
- Dementia assessment and support
- Planning for home modifications
- Information and referral about welfare, guardianship and financial matters
- Mobility
- Speech and swallowing evaluation
- Support in accessing health care
- For respite or long-term nursing home and hostel placement and application for community Aged Care Packages (CACP s) and Extended Aged Care at Home (EACH) packages under the Aged Care Assessment Program. We can also refer to community support services as an alternative to residential placement

Transitional Aged Care Program

The Transitional Aged Care Program provides up to 12 weeks home based slow stream therapy for older people discharged from an inpatient stay. The Team includes physiotherapy, occupational therapy and registered nurses.

Primary Care Team

The Primary Care Team provides Community Nursing Services 7 days a week 8am - 9.30pm. Members of the team initially call clients within 24 hrs of receiving a referral. The Primary Care team's role includes:

- General health screening and assessment
- Education regarding health and community services available
- Referral to other health community services
- Assessment and assistance with health care equipment needs
- Wound management
- Medication administration, assistance and education
- Care after hospital discharge
- Management of urinary catheters
- Assisting with personal hygiene matters on a short-term basis
- Management, assistance and monitoring for people with Diabetes
- Care of the dying

Pharmacist

The community liaison pharmacist liaises with the general practitioners when patients are identified as high risk for medication mismanagement and can either visit for urgent follow up and/or organise Home Medicine Reviews.

Joint Care Planning (JCP)

JCP can facilitate planning forums for those already receiving care services and service providers, where either the client or service provider perceives a need for mediation, or to review an existing service plan.

Health Promotion Activities

Community Health Services at POWH are committed to providing a variety of health promotion activities for people over 65 years old. These programs comprise: A.I.M for Fitness (Active, Involved, Mature) 9382 8131 and W.A.V.E.S (Water Activities for Vitality in the Eastern suburbs) 9382 8080. Classes are held in local, accessible centres and cater for a range of abilities. ■