

Bright magazine
Where health shines

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Health



WINTER 26

Cover image: Esther Bentley from our Trauma Team pictured on the helipad.

Wunya!



Acknowledgement of country

We acknowledge the Traditional Owners of the land, the Kabi Kabi (pronounced Gubbi Gubbi) and Jinibara (Yinie-Bara) peoples, on whose land we provide our services. We pay our respects to all Aboriginal and Torres Strait Islander people, Elders, past, present and emerging.

Welcome to our fourth edition of Bright magazine. In this edition we've really let you in behind the scenes of our health service with features on robotic-assisted surgeries, plastic surgery being offered at Caloundra Health Service, what happens when a rescue helicopter lands at SCUH, our nursing and midwifery awards, and elective surgery waitlists explained.

Bright is a chance for us to showcase the good work we do in our health service, but also to share how the system works and explain some of the complexities of health care.

The *'your journey through elective surgery'* article in this edition shares helpful information about how the waitlist works and what each of the steps mean. In the first quarter of 2026 (January to March) we performed 3,755 planned surgeries, which is more than 1,000 each month! 1,700 of those planned surgeries were category one (or our most clinically urgent) patients.

We have around 20,000 people arrive at our emergency departments each month with the majority of those patients in categories 1 to 3 (the most urgent categories). As a team we work hard to balance making sure we can support planned surgeries with the unplanned emergency surgeries we might need to be able to care for.

If you're reading this in a waiting room at one of our hospitals, I want to say thank you for your understanding. At times we have to urgently care for other people's loved ones, and your patience is really appreciated by our hard-working teams.

We hope you enjoy reading this edition and as always if you have any feedback feel free to send it through to sc-communications@health.qld.gov.au

Dr Peter Gillies
Chief Executive





When every minute counts: Meet the team on the ground

When you hear a rescue chopper coming to land on Sunshine Coast University Hospital's helipad, you know care is urgently needed and every second counts.

Before the aircraft touches down, a highly coordinated response is already underway, bringing together teams from across the hospital to give critically ill patients the best possible chance of recovery.

When a 'trauma respond' notification is activated for an aeromedical patient, Clinical Nurse Consultant Esther Bentley knows time is ticking. She helps coordinate the rapid response that brings specialist teams together before a critically injured patient arrives.

"Communication and team dynamics are everything in these responses, so the sooner the team assembles ahead of the patient's arrival the better," Esther explained.



The response begins with a multidisciplinary scrum involving Trauma Service and Emergency Department nurses and doctors, alongside surgical, orthopaedic, anaesthetic and ICU teams, who review information from first responders and retrieval crews to prepare for the patient's arrival.

That early warning gives teams valuable time to prepare scans, tests, surgeries and treatments in advance, so care can begin immediately once the helicopter lands.

For the most critical cases, a surgeon, Emergency Department doctor, trauma nurse and operational services officer meet the patient on the helipad the moment the aircraft touches down.

Esther said the trip to the level seven helipad is often the last brief moment to mentally prepare for the intense response ahead.

"Time permitting, this is the moment to ensure I hydrate and throw down a quick snack," she said.

"We have an emergency lift that moves between the emergency department, theatres, ICU and the helipad. Once I step into that lift, my mind is focused on the case ahead."

Once the patient arrives, the helipad team quickly decides if the patient needs medical imaging, surgery or emergency resuscitation.

"It is incredibly satisfying to be part of a highly skilled, dynamic team caring for a critically unwell person," Esther said. "Especially when you later meet that patient in ICU or on the wards, knowing the timely care they received has helped them recover and hopefully return home to their families."

Meet some of the other key roles in the response



Kirby
Resuscitation Team Leader

"If we are pre-notified, I am able to activate trauma respond and have the appropriate team members/medications/ equipment and staffing on hand ready to go as well as ensuring the rest of the resuscitation area continues to work well and step-down patients to other areas."



Hayley
Anaesthetist

"We provide specialist airway management and can assist with initial resuscitation and stabilisation of unwell patients. For those requiring urgent surgical management we plan and help facilitate transfer to the operating theatre, where we take over patient management for surgery."

"The anaesthetic team aim to facilitate rapid transfer to theatre, if required, by allocating theatre space, equipment, and staff. This often involves warming the operating theatre, preparing relevant drugs and ensuring availability of blood products prior to transfer to theatre."



Darren
ED Staff Specialist

"As ED doctors we would go up to the helipad to provide ongoing care and resuscitation, as the patient is transferred from the care of the retrieval team."

"If we are called up to the helipad, it usually means the patient is going straight to surgery."

The ED doctor's role may include supporting breathing, giving blood or even commencing procedures.



Meet Sunshine Coast Health's 2026 Nurse and Midwife of the Year

After years spent mentoring others behind the scenes, renal clinical nurse coach Melissa Roberts has stepped into the spotlight as Sunshine Coast Health's 2026 Nurse of the Year.

Recognised for her commitment to education and practice improvement, Melissa supports staff, students and graduate nurses across the renal service from Caloundra to Gympie.

"I was very shocked, I think I don't give myself a lot of credit, I have worked very hard over the last couple of years in this role but I am a believer that all nurses work very, very hard so I wish I could give a little piece of the award to everyone, but I'm very grateful and it is really nice to be recognised at such a high level," she said.

Melissa's role includes everything from onboarding and dialysis training to mentoring nurses as they develop their clinical skills.

She began her career as a graduate nurse in Nambour General Hospital's renal unit in 2018 and quickly discovered a passion for dialysis care and the close relationships formed with patients over many years.

"Some of these patients have been on dialysis 20 something years so over your lifetime as a nurse you get to know the patients really well and get to build a really great, professional relationship with them," she said.

For Melissa, the most rewarding part of the job is seeing others succeed.

"When I see staff members start to flourish, so if we've worked really hard on certain tasks or skills and you start to see it click, and then three months down the track they're just the most amazing nurse and you feel that little bit of pride that you were a part of their journey," she said.



Sunshine Coast Health's 2026 Midwife of the Year Emma Turner has spent almost 27 years supporting women and families, while also helping shape new services.

"I'm feeling very humble and very grateful I've been honoured in this way, I've been a midwife for almost 27 years so it's lovely to have this privilege of being midwife of the year for Sunshine Coast Health," she said.

Emma helped establish several key programs, including Sunshine Coast Health's childbirth education classes and the Queensland Virtual Early Medical Termination of Pregnancy Service.

"We developed the service from scratch, we had no other services in Australia to be able to benchmark off which is quite innovative in itself," she said.

"I worked with an amazing team of project managers and medical officers and other people within both Sunshine Coast Health and the Queensland Virtual Hospital to develop this program."

Emma was recognised as a highly regarded mentor and leader, who is deeply committed to supporting the next generation.

"I do see when people are given correct mentorship how it really empowers them, and you can see those effects lead on to how people provide clinical care," she said.

Held between International Day of the Midwife and International Nurses Day, the Sunshine Coast Health Nursing and Midwifery Awards celebrate the more than 4,600 nurses and midwives making a difference across the health service every day.

Full list of winners:

Nurse of the Year:
Clinical Nurse Coach Melissa Roberts

Midwife of the Year:
Clinical Midwife Consultant Emma Turner

Graduate Nurse of the Year:
Registered Nurse Opal Harrison

Graduate Midwife of the Year:
Registered Midwife Annaleise Smith

Assistant in Nursing of the Year:
Assistant in Nursing Vanessa Starky

Enrolled Nurse of the Year:
Enrolled Nurse Chantelle Lister

Nursing and Midwifery Leadership 2026:
Reflective Practice Coordinator
Chris Dawber

Cathy Styles Memorial Award for Emerging
Midwifery Leader 2026:
Registered Midwife Courtney Lawler





How Calm Fairy Stacey spreads her quiet magic for our youngest patients

Not all magic is loud, and for Calm Fairy Stacey, that's why her gift of stillness shines. A hospital is often filled with unfamiliar sounds and big feelings, especially for our youngest patients. Stacey's magic looks like a quiet voice, a slow breath, a small reminder they are safe and cared for. She shows our patients that no matter where you are, there is space for calm, comfort and of course a little bit of wonder.

As founder of Calm Fairies, Stacey has been visiting the Child & Adolescent ward since 2011, now based at Sunshine Coast University Hospital. Each visit is tailored, with time spent guiding children through relaxation techniques and simple activities that help them manage anxiety, pain or boredom. These are skills they can use long after they leave the ward.

“When I arrive, I talk with the team leader to get any necessary handover information and referrals to patients who may be experiencing procedural anxiety, pain, boredom or who simply need a little sparkle in their day,”

Stacey said.

“I visit those patients first, then visit anyone else I have time to see. I don't get to see every patient as I am not a roving entertainer, but instead, I spend quality time with each patient guiding them through regulation tools.”

On average, she'll see around six patients in a shift, with sessions ranging from 15 minutes to an hour depending on what each child needs. Sometimes, that support will help a patient through a cannula insertion or staying beside them during a procedure, guiding their breathing and focus.

The calm fairy method

A gentle rhythm for every child

1. Connect

A calm introduction to help each child feel safe and seen.

2. Engage

Age-appropriate play or conversation to build trust and ease.

3. Breathe

Simple breathing techniques to reduce anxiety and refocus.

4. Relax

Guided relaxation to support calm and comfort.

Tailored for every age:

Babies – Bubbles, rainbow wheel, soft sensory moments

Young children – Playdough, puppets, talking through big feelings

Older children & teens – Mindful craft like stress balls, bracelets, rock art

Every session is different - but always centred on calm, comfort and care.



Calm Fairy Stacey



“I often teach my ‘Save your Brave’ framework too which teaches children to find safety in the present moment and to save up their courage for the moment they really need it. This helps to de-escalate procedural anxiety,” Stacey said.

Stacey's passion for this work is deeply personal. Living with an autoimmune condition for two decades, yoga and mindfulness help her cope with her symptoms, the blood tests and doctors' visits, and the anxiety that comes with the unknown.

“I wanted to share all of what I have learnt through as a yoga therapist combined with my personal experiences to help young people's medical experience feel safer and a little easier to cope with,” Stacey said.

As for how she replies when children ask if she's real?

“I say I am only dressed up as a fairy, but I am friends with the REAL fairies and I can send one to visit you tonight when you sleep to sprinkle some magic dust on you,” Stacey said.

Calm Fairy Stacey's role at Sunshine Coast Health is proudly funded by Wishlist.



Robotic-assisted surgery halving recovery times

“I’m just amazed, like I really expected more pain, more recovery, more time off.”

When Kerri Hewitt found out she needed surgery to manage an ongoing health issue, she immediately felt nervous about the process and recovery.

But in the lead up to her operation, she was invited to be one of the first patients at Sunshine Coast University Hospital to undergo general surgery with the aid of a Da Vinci surgical robot.

This minimally invasive technique would mean less pain and a much quicker recovery.

“It was explained to me it will be less operating time, so there would be less likelihood of bleeding and complications of being put under for less time, and the healing process will be much quicker as well – and that’s exactly what I found,” Kerri said.

In robotic-assisted surgery, the surgeon is still in the driver’s seat, controlling the robot, but the robot’s tiny instruments can achieve more precision and get to more difficult to access parts of the body, all through only small incisions.

The results were game changing for Kerri. The four to six week recovery period she originally expected turned into just two weeks.

She was back on her feet so quickly she was even able to enjoy the time with her daughters, who’d travelled from interstate to look after her in recovery.

“I didn’t expect to have such a turn around, that my body’s working really well.”



Robotics being used in more types of surgeries

SCUH’s robotic-assisted surgery program has recently expanded to include more types of surgeries.

Patients needing gynaecological and general surgery can now also benefit from the technique.

For hysterectomy patients, it reduces a ten-day hospital stay to just one night, while significantly reducing the amount of scarring. Prior to the expansion, the robot was mostly used in urology surgeries, since it arrived at SCUH in early 2025.

“For patients undergoing urology surgery, robotics has cut down their hospital stay from five nights to one night, while also helping them return to normal activities up to two months faster,”

Robotic Surgery Clinical Nurse Consultant Phil Hall said.

How does it work?

The surgeon sits at a console next to the patient and guides the robot’s arms and instruments with their hands and feet.

The robot mimics their hand movements with its miniature instruments and greater range of motion.

The robot’s arms have tiny cameras on the end, giving the surgeon a crystal-clear 3D view of the surgical site, that’s magnifies 10 times more than what the human eye can see.

“It’s a great tool to use when you’re performing difficult surgery in narrow smaller spaces, where there’s not much room – it enhances your view and you can do amazing things,” Sunshine Coast Health General Surgeon Dr Josefin Petersson said.

Watch the Da Vinci surgical robot in action here:



Your journey through elective surgery

So you've been told you need surgery, and then you hear the words "you'll be placed on a waiting list." Does elective mean optional? How long will you wait? What happens next?

Elective surgery simply means your procedure is planned, not performed in an emergency. It may not be urgent, but it's still important to your health. Here's what to expect from your first GP visit through to surgery and recovery.

1. General Practitioner (GP) visit

Your GP will assess symptoms, discuss treatment options and refer you to a specialist if appropriate.



2. Specialist assessment

The specialist reviews the information and condition. If the referral is accepted, they will assign you a category depending on the urgency of your condition.



Category 1: Required within 30 days (condition could worsen significantly).

Category 2: Required within 90 days (condition causes significant pain or affects daily functioning).

Category 3: Required within 365 days (condition is stable and manageable in the short term).

3. Added to specialist appointment waiting list

You and your GP will receive a letter confirming your category and the date you were added to the waiting list. Waiting periods vary based on clinical urgency. If your condition changes, notify your GP. Your priority may be reviewed.

You can call the number on your letter to check on your status.



4. Appointment with specialist

You will be assessed by a specialist who will discuss a treatment plan. You may be required to have further tests and follow up appointments. If surgery is required, you will be assigned a category for surgery.



5. Added to surgery waiting list

You and your GP will receive another letter confirming your category and the date you were added to the waiting list. Waiting times vary based on clinical urgency. If your condition changes, arrange an appointment with your GP who can then contact the hospital. Your priority may be reviewed.

You can call the number on your letter to check on your status.



We're here to support you, every step of the way!

6. Surgery preparation

Before your procedure, a nurse will call to ask questions about your health, and you'll receive a date for your surgery via text.

To reduce the risk of complications, ensure you stop smoking, maintain a healthy weight and talk to your surgeon about medications.



7. Surgery and recovery

On the day of your surgery, your care team will guide you through the procedure. Your team will provide you with a recovery plan and follow up care details before discharge.





Plastic surgery now offered at Caloundra Health Service

In November last year, Roslyn was diagnosed with three basal-cell carcinoma (BCC) skin cancers – two on her face and one on her scalp.

BCCs are the most common form of skin cancer. They often grow slowly and rarely spread to other parts of the body, but it's important to get them removed, so Roslyn was referred to plastics and reconstructive team at Sunshine Coast Health.

"When I was on the waiting list and accepted and they said they could do it...it was the biggest relief because it's so upsetting when you have these things happen to you and you have to spend exorbitant amounts of money to get yourself fixed," Roslyn said.

In a move designed to improve access and reduce wait times, plastic and reconstructive surgery expanded from its base at Sunshine Coast University Hospital to Caloundra Health Service in March. Roslyn was booked in on one of the first days.

"I just feel so thankful for everyone here - they've just been so amazing, so lovely and I just feel so looked after here and cared for, and it's just a wonderful service they're offering," she said.

Medical Co-Director of Plastics Dr Ryan Livingston said the expansion has always been part of the long-term vision.



"The flow of Caloundra is great because it's been set up for a rapid turnover day surgery, it means that everything is very efficient while still providing optimal care," he said.

The surgery list is currently being run one to two days a week in Caloundra, and suits less complex patients who only require day surgery.



"Somebody that's going to need an overnight stay or maybe has a very complicated medical history and is very unwell, they may not be the appropriate patient for Caloundra, but somebody that has a small day case - like procedure where they can walk in and have the procedure and go home - which can still be under an anaesthetic - they are perfect for that sort of environment," Dr Livingston said.

The model draws on a rotating team of highly skilled consultants.

"We're very fortunate that we have some of the best surgeons in the world working in the hospital and in our unit, and every one of them is highly skilled," Dr Livingston said.



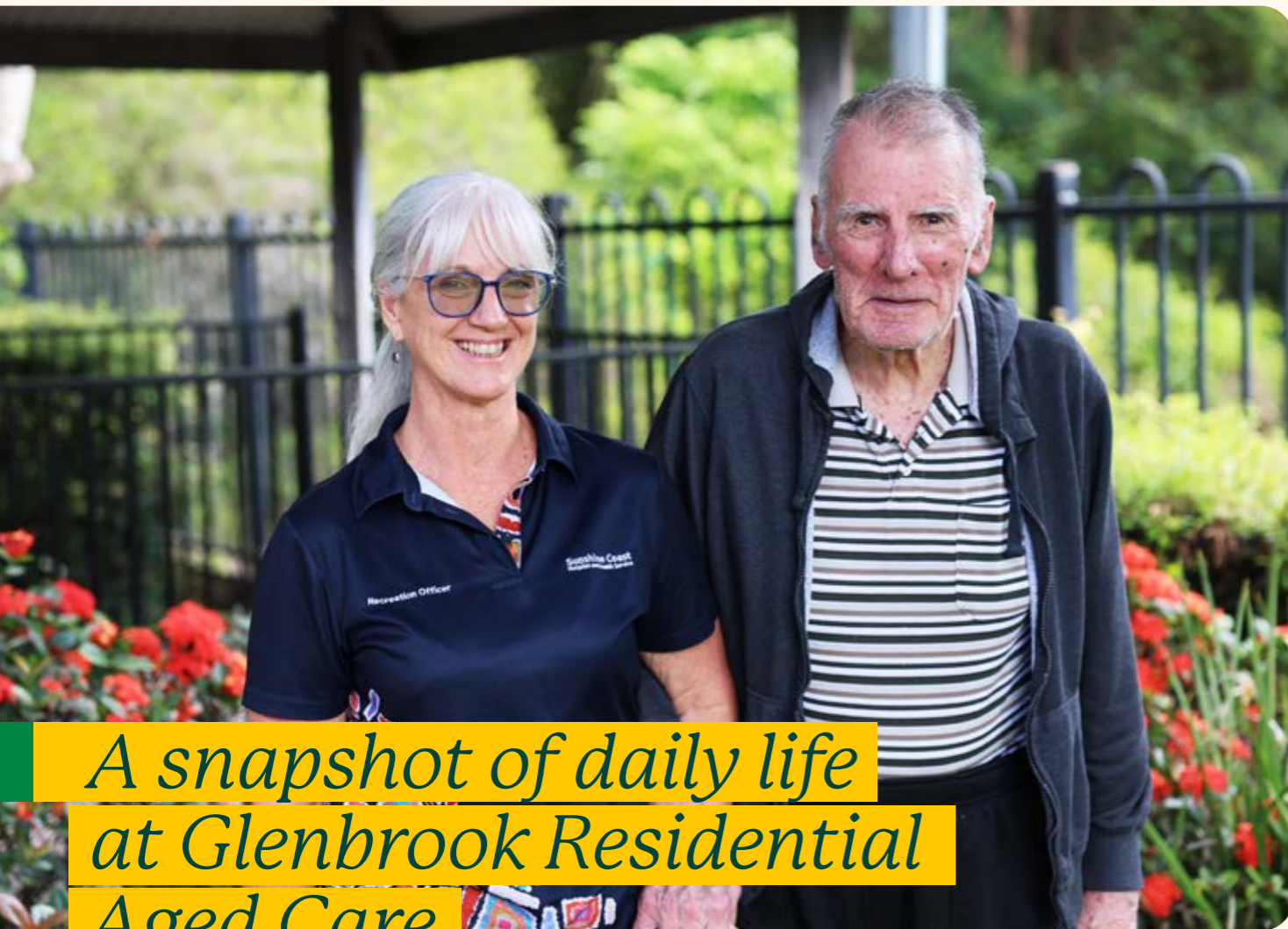
The majority of patients that have been seen so far, like Roslyn, have been for the removal of skin lesions, and Dr Livingston said the feedback has been really positive.

"Because it's so efficient and it's quite homely, people seem to be a little bit more at ease coming through the service, and often people get a bit nervous with operations, so I think that can only be a good thing," he said.

Did you know?

Basal-cell carcinoma (BCC) is the most common form of skin cancer in Australia.

- BCCs often grow slowly and rarely spread to other parts of the body
- They most commonly appear on sun-exposed areas like the face, scalp and neck
- Early treatment is important to prevent local damage and more complex surgery
- Many BCCs can be treated with simple procedures, often as day surgery
- Australia has one of the highest rates of skin cancer in the world



A snapshot of daily life at Glenbrook Residential Aged Care

Watching the machinery at work at a nearby development site is a familiar and comforting view for Glenbrook Residential Aged Care resident Walter Bengtsen. As a former owner of a construction company, Walter spent many years supervising and operating large machinery. Recreation Officer Julie West says she often finds him sitting in the garden, watching the construction over the fence.

“I’ll bring him a cup of tea and join him, and we will talk about his time owning a construction company, and his working life. It’s a lovely way for us to connect, and for him to keep his memory active,” Julie said.

Before coming to Glenbrook, Walter lived in the Wide Bay area, where he ran his construction company and in his spare time, he piloted planes. He keeps a model A-36 Beech Bonanza aircraft in his room, along with pictures of loved ones and handmade cards and keepsakes.

Walter has been a resident at Glenbrook for three years now and says it feels like home to him. Days have a natural rhythm to them, breakfast at 7:30am, while reading the newspaper. Then there’s usually some morning exercise, (seated if necessary) or a visit from the therapy dog before morning tea. Residential staff make sure there’s always biscuits and slices on hand.

Wednesday

- 7:30am Breakfast porridge with banana and sugar, side of raisin toast with a cup of tea
- 10:45am Seated exercise and games
- 12:00pm Lunch – sausages with mash potatoes and gravy and fruit and custard
- 3:00pm Happy hour bingo and board games
- 5:00pm TV or reading time
- 6:30pm Dinner - pea and ham soup followed by sweet and sour pork dessert – chocolate and vanilla cheesecake with cream

“There’s always something to do, and people to catch up with. If you feel like socialising you can head to the lounge area or one of the common rooms, but you can always find a quiet spot to read or do a puzzle,” Walter said.

Recreation Officers like Julie West run a busy and fulfilling activity schedule for residents, the days are filled with indoor bowling games, music quizzes, bingo, lawn bocce and balloon tennis – which can get pretty competitive! Walter enjoys the gardening activities and likes to turn his hand at balloon tennis and the bean bag toss.

Tucked away in a leafy area of Nambour, Glenbrook is a 45-bed purpose built high care residential and aged care facility providing high quality resident-focussed care in a home-like environment.

It includes small wings, single rooms with ensuites, couples’ accommodation, 24/7 registered nursing care, a secure garden and a hairdressing salon.

Glenbrook offers residential aged care, secure dementia beds, booked respite beds and transitional care beds.

Staff know sending a loved one into an aged care facility can be a difficult process for anyone, but it’s made slightly easier when they’re getting the best care.

“We are all just one big family here at Glenbrook, we always make sure to celebrate birthdays and special events, and we get to know each other on a personal level, which is one of the most rewarding parts of the job,”

Julie said.

Walter recently blew out the candles on a cake to celebrate 91 years, surrounded by friends and staff who are like family, a milestone worth celebrating.

**Watch Julie’s
day in the life
video here**





Butterfly Suite Gympie

A quiet refuge has been built within Gympie Hospital, to provide comfort and privacy for parents facing the profound loss of miscarriage or stillbirth.

Overlooking the rolling hills of the hinterland, the Butterfly Suite is a private space for parents to say goodbye while also recovering physically and emotionally.

Gympie Hospital Maternity/Women's Health and Paediatrics Nurse Unit Manager Shaneen Osborne said the design was carefully thought out.

"The space has been designed to feel less clinical and has acoustic upgrades to reduce surrounding noise," she said.

"The family can spend time together and access counselling and bereavement support in a warm, dignified setting."

"New lighting, ceiling tiles and bed heads further softened the space, and tinted windows enhance privacy and create a calm, sheltered environment."

Parents will also have access to the cuddle cot at Gympie Hospital, which has a cooling system that allows babies who have passed away to remain in the room with the family.

The Butterfly Suite was made possible thanks to the generous support from Wishlist.

Red Nose Australia provides 24/7 grief and loss support for miscarriage, stillbirth and newborn death. If you or a loved one needs assistance, please phone 1300 308 307.



Dr Grace Neely

Senior Medical Officer Rural Generalist



Why did you choose a career in rural generalism?

I was fortunate enough in my first year of medical school to spend my elective in a country town in NSW following around a couple of incredible Rural Generalist obstetrician/anaesthetists. They could do everything!

It's an absolute privilege to be involved in one of the most important and life-changing days we ever experience as a human - becoming a parent! I genuinely adore my job, and my poor junior doctors have to endure listening to me harp on about how wonderful it is most days.

I often still shed a little happy tear while I'm suturing a patient - particularly if grandma or dad are crying!

Meet some of the maternity team



Jess Osborne

Graduate Midwife

What is one thing the public might not know about your role?

"I always get asked if I witnessed a birth on my shift and a lot of the time the answer is no. I think people don't realise that there is a lot more to the job. We see women from around 15 weeks pregnant and then care for them until they leave the hospital after the birth, which can be five nights depending on the type of birth they had. There is so much focus put on the birth, but it is only one day out of a huge journey of becoming a mother.



Emma Annetts

Nurse Practitioner Women's Health

What drew you to your career?

I love being able to support women through some of the biggest and sometimes most challenging times in their lives. I've always been interested in providing holistic, patient-centred care, and this role gives me the chance to combine clinical skills with education and support, especially in a rural setting where it can make a real difference.



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