



Epworth

EPWORTH  
HEALTHCARE  
ANNUAL REPORT  
2016

# excellence

EPWORTH



**RESPECT  
COMMUNITY  
COMPASSION  
INTEGRITY  
ACCOUNTABILITY  
COMMITMENT  
RESEARCH  
EDUCATION  
SUPPORT  
CARE**



**SUCCESS**

*Excellence lies in succeeding  
in an area of great passion.*

*Our passion lies in providing  
the very best care to our patients.  
It drives everything that we do.*

**ANNUAL  
REPORT  
2016**

# Contents

ABOUT US	5
PRESIDENT'S REPORT	6
GROUP CHIEF EXECUTIVE'S REPORT	8
YEAR AT A GLANCE	12
BOARD OF MANAGEMENT	14
GROUP EXECUTIVE	15



101

DELIVERING EXCELLENCE THROUGH INNOVATION



115

FOCUS ON EDUCATION



17

OUR PATIENTS



33

OUR PEOPLE



133

IMPROVING HEALTHCARE THROUGH RESEARCH



149

OUR COMMITMENT TO QUALITY AND RISK MANAGEMENT



51

OUR DOCTORS



63

BUILDING AND SERVICE DEVELOPMENT



159

CARING FOR OUR COMMUNITY



167

EPWORTH MEDICAL FOUNDATION



## About us

We continue to build on our reputation as a centre of excellence across the continuum of healthcare, education and research.

Epworth HealthCare has remained dedicated to providing outstanding patient care since its founding in 1920 as a 25-bed Methodist hospital. Epworth's evolution into Victoria's largest private not-for-profit healthcare provider, during its more than nine decades serving the Victorian community, has only strengthened its commitment to caring.

Epworth has driven development during this time to deliver the best of care to our patients, through improved facilities and services, comprehensive clinical education and world-leading research to improve patient outcomes.

Epworth has a proud history of innovation in technology and services, achieving many medical 'firsts' and introducing new technologies to Victorian and Australian healthcare. Since the establishment of the first specialist area in the mid-1960s, Epworth now has more than 40 clinical specialities that draw medical specialists with nationally, and often internationally, recognised reputations for excellence.

Significant building projects and investment in equipment and technology have been undertaken over the years, growing Epworth from a small facility on Richmond Hill to a multidisciplinary healthcare service spread across Victoria. This includes Epworth Richmond, Epworth Freemasons, Epworth Eastern, Epworth Camberwell, Epworth Brighton, Epworth Hawthorn and most recently, Epworth Geelong and the South West Regional Cancer Centre in Warrnambool. Epworth also now operates a range of specialty clinics, including the Women's and Men's Health Clinics, the Breast Clinic, Epworth HealthCheck and Epworth's Specialist Centres.

Epworth Pathology has collection centres at every Epworth site and Epworth Medical Imaging provides patients with access to advanced medical imaging

services at Epworth Freemasons, Epworth Camberwell and now at Epworth Richmond. Both of these services are delivered in partnership with Sonic Healthcare. Likewise, Epworth's growing mental health service, Epworth Clinic, provides comprehensive mental healthcare and rehabilitation from its base at Epworth Camberwell. Epworth Radiation Oncology continues to provide state-of-the-art cancer treatments to patients across the state.

Epworth provides for patients in Geelong and the growing South West region of Victoria with a hospital located at Waurn Ponds with construction completed in April 2016. Opened at the beginning of July 2016, and employing more than 400 staff, the site is Epworth's newest healthcare centre, indicative of Epworth's continued dedication to expanding our reach of care. Likewise, the completion of the South West Regional Cancer Centre demonstrates Epworth's commitment to providing critical cancer services for patients located in regional areas.

Since the establishment of its nursing school in 1921, Epworth has retained its focus on clinical education. Its history as a teaching hospital allows the organisation to attract and retain a team of dedicated, high-calibre staff and doctors. Epworth partners with key universities and TAFE colleges across Victoria as well as healthcare providers internationally, to offer unparalleled opportunities in clinical practice, research and education.

Epworth's commitment to research as a means to improve patient access to novel drugs and therapies to enhance patient outcomes is also undertaken in partnership with leading universities and research bodies within Victoria, Australia and worldwide. Research activity at Epworth is also supported by the Clinical Institutes, the Victor Smorgon Epworth Education and Research Institute, the Clinical Trials and Research Centre and Epworth's affiliation with the Cleveland Clinic in the United States. Likewise, Epworth Prostate Centre and the Radiation Oncology Research Centre remain at the forefront of Australian research.

For more than 95 years, patients, doctors and staff alike have chosen Epworth. Today Epworth is setting the standard for private healthcare in Australia – for the next 95 years and beyond.

# President's Report



**MR ROD FITZROY  
PRESIDENT**

At Epworth, we aim to improve the health, wellbeing and experience of every patient by integrating leading clinical practice with education and research. Embedded within the culture of our organisation at all levels is a commitment to deliver on our mantra of Excellence, Everywhere, Every day.

At every opportunity, Epworth has applied its innovative, patient-centred approach to healthcare to enhance the facilities, services, teaching and research we offer our patients. New partnerships with international health leaders such as Harvard Medical School in Boston and Northwell Health in New York complement our existing affiliation with the Cleveland Clinic in Ohio.

The Epworth Experience is about consistently delivering excellent patient-centred care with compassion and dignity. We are committed to our vision to be the leading patient-centred and academic healthcare organisation in the Australian private sector.

Our focus on all areas of the patient experience, including safe systems of care, the measuring of quality outcomes for patients, research achievements, education activity and clinical change through the translation of research and education into clinical practice, will see us achieve this goal.

The success of our endeavours in this regard was recognised with historically high Epworth patient satisfaction survey results, as reported by Press Ganey.

To help us honour our commitment to our patients, over this past year we have further expanded our service offering in a number of areas, including mental



**= INNOVATION**

health, ear, nose and throat, brain injury management, and 3D Printing technology. We also grew our medical imaging service to two new locations and invested in the latest medical innovations for our cardiac, cancer and rehabilitation patients.

This year, we completed a major program of capital investment with the opening of a state-of-the-art teaching hospital, Epworth Geelong, the completion of the first stage (Lee Wing) of our planned redevelopment of the entire Erin Street frontage at Epworth Richmond and the refurbishment of Epworth Freemasons on Clarendon Street. The successful on-time, on-budget completion of these projects is a testament to the dedication and capabilities of our entire management team.

The Board has also welcomed, and farewelled, members this year.

In December, Mr Alan Crosthwaite retired from his Board position as Chair of the Medical Advisory Council after four years of dedicated service. Alan also held the position of Chair of the Epworth Eastern Medical Advisory Committee since its inception and brought a unique perspective as a surgeon and a very balanced and mature approach to the role. We are fortunate to have Alan continue his association with Epworth through his urology

practice, based at Epworth Eastern. I would like to thank Alan for his support and wonderful contribution as a Board member.

In January, we welcomed Associate Professor Nerina Harley to the Epworth Board of Management as Chair of our Group Medical Advisory Council. As an ICU specialist physician with extensive medical expertise, Nerina is also a Director of the Intensive Care Council at Epworth HealthCare, the Director of the Epworth Freemasons Intensive Care Unit and the Deputy Chair of the DHHS Victorian Clinical Critical Care Network. I welcome Nerina to the Board.

As a not-for-profit organisation, we rely on the support of our donors, benefactors and ongoing fundraising efforts to ensure we are able to continue caring for our patients well into the future. The Epworth Medical Foundation has facilitated a tremendous level of support for the organisation in 2015/16 and I would like to thank and commend Executive Director, Scott Bulger and his staff for their tireless efforts.

Lastly, on behalf of the Board, I would like to thank Alan Kinkade, our Group Chief Executive, and the Executive team for their ongoing dedication and hard work, ensuring Epworth continues to fulfil its role as a centre for excellence in all aspects of patient care.

## From the Group Chief Executive



**MR ALAN R KINKADE**  
GROUP CHIEF EXECUTIVE

### This has been an incredible year of team work resulting in phenomenal achievements.

We have delivered an amazing \$500m capital works program ahead of time and under budget providing state-of-the-art facilities to enable our people and Epworth to be at the forefront of meeting patient expectations for the 21st Century. We have continued our remarkable investment in our people to ensure they have the capabilities to deliver excellence in patient care. Our quality of care is now second to none and Epworth has continued its strategic journey to be the best academic teaching organisation in the private sector in Australia.

Ten years ago, Epworth was under financial stress. Our facilities were aged and not entirely adequate to meet our patients and doctors' needs; our patient outcomes and patient satisfaction were average and we did not have a Human Resources Department or service. Early on we were able to turn our operational performance around and provide the platform for investment in our people, services, facilities and our teaching and research agenda. Together the Epworth team has successfully achieved a remarkable transformation of Epworth over the past decade.

Epworth Excellence has achieved sensational results in patient care particularly in our reduction of patient falls and pressure injuries, and our tremendous improvement in the patient experience and patient journey continues to grow from strength to strength.

We have successfully developed and deployed Patient Care Guides for all acute services across the Epworth Group. These guides assist our nurses to deliver consistent, evidence-based best practice nursing care. Proudly, our Patient Satisfaction is now ranked No. 1 in the country by Press Ganey. Our new innovative Point of Care system will deliver Epworth a major differentiator in the patient experience and ensure Epworth's hospitals and services continue to deliver exceptional quality care.

Our HR and Organisational Development Service is second to none and we are investing millions of dollars in our people through our leadership and talent programs, to give them an opportunity to be their best and give their best. We have achieved remarkable improvements in workplace safety and our staff engagement with our latest result being the best ever and showing that we are in a culture of ambition bordering on success. Best Practice Australia recognised Epworth's success in cultural improvements by publishing our story as an exemplar for the health industry. We are a true values based organisation and we have become an employer of

choice in health. With our growth in services across the Group we needed to, and have, attracted over 1900 new staff this year to Epworth. The calibre of these staff is excellent and it has been an outstanding effort from our Human Resources team and our Executive in delivering on our workforce plan.

In May this year, our second cohort of nursing leaders travelled to the world-renowned Cleveland Clinic to participate in our Nursing Development Program with our affiliate. The feedback from the nurse unit managers who took part in the program has been outstanding.

One of our great successes over the past 18 months has been to develop and successfully execute our Nurse Unit Managers (NUMS) program. We recognised 18 months ago that we would need to support our NUMs in line with our growth strategy, if we were to have the leaders we want, to provide excellent care in a compassionate way. All operational Executive Directors, together with our Human Resources service and Executive Director of Clinical Services were involved in the program. It has been hugely successful in developing our future leaders. The program clearly defined roles, enhanced competitiveness and provided better tools for NUMs to be successful. Best Practice Australia in its engagement survey found that NUMs are in a culture of success and 87 per cent of NUMs believe Epworth is a truly great place to work.

Over the past eight years, we have established the following endowed funds:

- The Victor Smorgon Institute at Epworth
- The Epworth Research Institute
- The Education Scholarship Fund within the Epworth Medical Foundation.
- The Centenary Fund

These funds are long term strategic investments for Epworth in education, teaching, research and innovation. We are very proud that over the last eight years we have raised through benefaction and invested over \$40m into their corpus and a further \$24m in endowments. We envisage growing the combined corpus to over \$100m by 2020, our Centenary year and to use this income to continue to develop our teaching and research agenda and to become the most innovative health provider in Australia. We are grateful for the tremendous support we have received from our benefactors in raising these funds.

From the Victor Smorgon Institute we fund a number of our professors and from the Education Scholarship Fund we awarded 82 scholarships this year to enable our people to do extraordinary things for their professional development.

From our Epworth Research Institute, we allocated this year a record \$650,000 to early career researchers to inspire them and provide much needed support to develop their research projects and capabilities. These grants are awarded during Research Week at our annual dinner and we have named these grants in honour of doctors who have made a significant contribution to Epworth in delivering excellent patient care. This year we honoured Mr Arthur Day, Mr Campbell Penfold and Associate Professor Jack Mackay. Also, one of our longstanding benefactors Audrey Voss has funded a Gynaecological Cancer Research Grant and this was also awarded at the ceremony.

Our Centenary Fund was established this year with the objective to raise \$50m by our Centenary in 2020. This fund will stimulate innovation and the development of our doctors, with the first awards to commence in 2020. I am proud that these perpetual funds are unique in the Australian healthcare system and will provide a lasting legacy for future generations and ensure Epworth continues to be a leader of innovation and quality care in the Australian healthcare system.

We have transformed Epworth into a true teaching hospital, training over 2500 students per annum and where our staff and doctors deploy the latest evidenced based medicine. Epworth is the only health care organisation in Victoria to be affiliated with the three university medical schools in Victoria. In 2016, Epworth became a Clinical School of the University of Melbourne. This year we also cemented our relationship with the Harvard Medical School, who have chosen Epworth to deliver its simulation program in Australia.

Our partnerships and alliances with like-minded organisations are critical to our ability to deliver on our strategic vision. This year, we were proud to have formed a strategic alliance with Northwell Health in the US, an innovative, cutting-edge healthcare provider. The strategic alliance covers a broad range of mutual goals in areas such as staff education, quality and safety, sharing best practice opportunities, commercialisation of health innovation, organisational development and translational research.

This year we appointed Professor Miles Prince as Professor/Director of Molecular Oncology and Cancer Immunology. Professor Prince's clinical research involves the development of new targeted treatments for blood cancers. His appointment results in access to world-leading cancer research and treatment for our patients; as we look to translate advances in personalised cancer research into better clinical outcomes for our patients.

Epworth has a proud tradition of clinical innovation. Strategically as an academic teaching hospital we

aim to be a learning organisation improving the health and experience of every patient by integrating clinical practice with education and research.

As a consequence of successfully executing our strategies we are witnessing an increasing pace of innovation. Epworth is undertaking groundbreaking research and we are offering our patients access to novel treatments and therapies that are generally not available to them in the broader Australian health care system. Some of the more notable innovations this year include:

- We continue to be a world leader in the use of 3D Printing. Last year we reported an Australian first in developing a bespoke printed jaw joint to correct a young man's congenital jaw deformity. This year we have extended this technology to benefit orthopaedic and neurosurgical patients, many of whom have suffered for decades with chronic conditions. This technology means patients receive a device tailored to their specific physical and medical requirements, for a more effective and longer-lasting solution.
- At Epworth Eastern, we performed the first procedure in Australia using a clip device to minimise the risk of stroke in atrial fibrillation patients, improving quality of life and providing reassurance to our patients.
- We expanded the use of the Varian System's Calypso targeted radiation treatment; minimising the harm caused by traditional radiotherapy treatment to surrounding organs and tissue. Hundreds of patients have benefited from this world-leading cancer treatment technology.
- For our cardiac patients, we have introduced and provided access to Australian-first ZOLL LifeVest, a wearable cardiac defibrillator used to monitor heart rhythms prior to fitting of a pacemaker. The device provides additional peace of mind to patients and their families in the lead up to cardiac surgery.
- In 2016 we installed in the Lee Wing at Epworth Richmond, a Siemens Artis Q hybrid biplane theatre, the first-of-its-kind in Australasia. The theatre and equipment provides cardiologists, cardiothoracic surgeons, vascular and neurosurgeons with unique capabilities during surgery with enhanced imaging, resulting in Epworth being able to manage the most complex cases more safely and with better outcomes.

During the year we delivered and commissioned multiple capital works projects ahead of time and under budget. These included the:

- Lee Wing at Epworth Richmond
- Epworth Geelong
- South West Regional Cancer Centre

- Major developments at Epworth Freemasons and Epworth Eastern including new theatres and day chemo expansion.

The new Lee Wing at Epworth Richmond, officially opened by Federal Minister for Health, the Hon. Sussan Ley, in June, represents eight years of planning, to prepare Epworth for the healthcare need of tomorrow's patients. The Lee Wing project embodies our patient-centred approach in the design and functionality of the new facility. The new single room patient accommodation, new emergency department and ICU, state-of-the-art theatre complex and new cardiac critical care area have been designed around delivering excellence in patient care. The amenity is first class and the design enables our doctors and nurses and other staff to deliver the best in patient care efficiently.

We are grateful for the benefactors who have contributed more than \$25m to the capital campaign for the Epworth Richmond redevelopment. The Lee Wing is named in honour of Mr and Mrs PS Lee, in recognition of their generosity.

Excitingly, we also completed construction and commissioning of Epworth Geelong, the largest greenfield hospital ever developed in Victoria, if not Australia. Epworth Geelong will deliver higher quality care and provide new services such as neurosurgery to a growing population in the greater Geelong and South West region. We are very proud of the design of Epworth Geelong which we believe is the best designed hospital in the country. Features include:

- All theatres face south to enable natural light into the theatres, improving the effectiveness and functionality for our doctors and nurses.
- Inpatient rooms are all single rooms, meeting patient expectations and improving infection control.
- Education facilities are on each floor in addition to the Simulation Centre and library on the ground floor.
- All staff amenities face north and include balconies, allowing staff to relax and have access to fresh air.
- Ward design is the ultimate in efficiency for nurses to ensure they can deliver the best patient care and spend maximum face-to-face time with patients.

Epworth Geelong is built adjacent to Deakin University, which we enjoy a special relationship with and are partnering with to deliver an extraordinary education program for future clinicians. From the beginning, we have worked together with the Geelong community, employing local suppliers and contractors throughout the build and now employing 96 per cent of our staff from the local community. Patients in this growth corridor now have access to world-class facilities,

including the best in specialist medical treatment, equipment and technology; and above all the exemplary level of care all Epworth staff provide on a daily basis.

The South West Regional Cancer Centre at Warrnambool was also completed this year and it will open in early July 2016. The SWRCC is an exciting initiative driven by the Warrnambool community in conjunction with local charity Peter's Project to bring radiotherapy services to the South West region of Victoria. The centre represents Epworth's ongoing commitment to improving access to leading healthcare services to regional patients across the state.

There has been a wonderful team effort across all parts of the Epworth HealthCare Group in delivering and commissioning these projects. I am tremendously proud of how so many teams across Epworth worked together, through many different stages, to reach completion of these landmark initiatives.

The opening of new theatre facilities, medical consulting suites and a number of site-wide infrastructure improvements at Epworth Freemasons this year marks the beginning of a long-term project of growth at the site. The proposed Grey Street Centre, a multistorey complex to be built on Clarendon Street, has reached town planning stage and we hope to receive approval in the coming months. The new development will expand the site's consulting capacity and increase clinical services and progress our vision for a fully integrated campus.

Similarly, the opening of a tenth operating theatre and new day oncology unit at Epworth Eastern is only the beginning of an ongoing project of improvements, to grow the site's already excellent patient offering.

We are planning to open a new renal dialysis service early next year and are now focused on the future expansion of Epworth Eastern and are looking forward to progressing a master development of this important facility in the coming year, along with the next stage of development of Epworth Richmond.

In 2015/16, we enjoyed considerable success in expanding the reach of our services, including:

- The development of a first rate comprehensive ear, nose and throat service at Epworth Richmond. This was achieved through the creation of a new group practice known as Pinnacle Surgery.
- In February, we opened a new neurosciences service providing early intervention for patients suffering a suspected stroke. The rapid response service is the first private hospital TIA service in Victoria and has facilitated a welcome treatment channel for patients.
- We developed a new ward for paediatric services at Epworth Richmond. As part of this initiative

we also enhanced our Emergency Services Department to enable it to receive emergency paediatric patients. The new service has received very positive feedback from parents wanting prompt and first rate care for their children.

- In September, Epworth Medical Imaging expanded to Epworth Richmond and in June opened a branch at Epworth Geelong. Our imaging service boasts world-renowned specialists and has grown significantly since first opening at Epworth Freemasons in 2014.
- The Epworth Clinic, our mental health service which was established in 2014, continued its strong trajectory. During 2015/16, we expanded our service offerings significantly, in particular with a new service for older Australians.

Epworth is committed to making readily available to consumers and patients, transparent data on the quality of care Epworth offers. In May, Epworth launched its most comprehensive and up-to-date collection of hospital and clinical performance data. This details the organisation's performance against each of the ten National Safety and Quality Health Services Standards and key quality measures from each of the clinical areas. We have received very positive feedback from consumers, patients and doctors about this initiative.

I would like to acknowledge and thank the doctors who practice at Epworth and who support us in serving on many of our governance and advisory committees. Their contribution to Epworth's success is significant.

I sincerely thank our very generous benefactors and wish to particularly acknowledge Mr John and Mrs Margaret Schneider, who have left the largest ever multi-million dollar bequest to Epworth.

I appreciate the wise counsel, guidance and support given to me by the Board during the year.

I am very fortunate to have what I believe to be the best Executive team in the health industry. They provide great leadership and commitment and have put in a Herculean effort to deliver on the wide-ranging initiatives that have been introduced this year. I am very proud of them and their staff for their outstanding achievements this year. The team work and devotion has been phenomenal.

Through the effort of our people, we continue to deliver excellent care compassionately. We strive to be simply the best in all that we do. Together, and with the support of our benefactors, we have laid very strong foundations for the future.

I thank everyone for their continued dedication to Epworth.

# Year at a glance

*Epworth aims to improve the health, wellbeing and experience of every patient by integrating clinical practice with education and research.*

In 2015/16 we proudly continued to offer quality healthcare to our community. These graphs provide an overview of the care we have delivered.

## STAFF

2015/16	6,326
2014/15	5,013
2013/14	5,145
2012/13	4,818
2011/12	3,996

## OVERNIGHT OCCUPANCY

2015/16	82.67%
2014/15	90.49%
2013/14	85%
2012/13	89.28%
2011/12	88.9%

## BIRTHS

2015/16	3,187
2014/15	3,020
2013/14	3,418
2012/13	3,425
2011/12	3,425

## TOTAL BED DAYS

2015/16	440,822
2014/15	424,390
2013/14	415,590
2012/13	394,518
2011/12	383,436

## TOTAL PATIENT ADMISSIONS

2015/16	148,170
2014/15	141,176
2013/14	132,969
2012/13	122,268
2011/12	115,097

## OPERATIONS

2015/16	96,553
2014/15	90,210
2013/14	85,207
2012/13	78,196
2011/12	72,558

## SAME DAY SURGERY ATTENDANCES

2015/16	48,408
2014/15	40,610
2013/14	37,050
2012/13	33,977
2011/12	31,937

## EMERGENCY DEPARTMENT ATTENDANCES

2015/16	25,759
2014/15	25,691
2013/14	26,606
2012/13	27,388
2011/12	28,137

## INTENSIVE CARE AND CORONARY CARE BED DAYS

2015/16	13,361
2014/15	13,616
2013/14	13,662
2012/13	13,730
2011/12	16,241

## RADIATION ONCOLOGY — total treatments

2015/16	(Total patients — 1,500)	25,885
2014/15		24,168
2013/14		23,346
2012/13		21,704

Service commenced 2012

## RADIOLOGY — treatments administered

2015/16	94,399
2014/15	33,446
2013/14	10,230

Service commenced 2013

## Board of Management



**MR ROD FITZROY**  
President



**MS LAURA ANDERSON**



**PROF PETER BROOKS AM**



**MS MARYJANE CRABTREE**  
Deputy President



**MR ALAN CROSTHWAITE**  
(retired Dec 2015)



**PROF PAUL DOUGAS**



**ASSOC PROF NERINA HARLEY**  
(commenced Jan 2016)



**MR ALAN R. KINKADE**



**MR ROBERT MACMILLAN**



**MS JANET MATTON**



**PROF CHRISTIAAN MOSTERT**



**DR JOHN ZELCER**

## Group Executive



**MR ALAN R. KINKADE**  
Group Chief Executive



**MR DAMIAN ARMOUR**  
CEO  
Epworth Geelong



**MR VINCENT BORG**  
Executive Director  
Rehabilitation &  
Mental Health



**MR SCOTT BULGER**  
Executive Director  
Epworth Medical Foundation



**MS LIZ CAMILLERI**  
Executive Director  
Finance



**PROF JOHN CATFORD**  
Executive Director  
Academic & Medical



**ADJ. PROF. SHARON DONOVAN**  
Executive Director  
Clinical Services



**MS RACHEL DROY**  
Executive Director  
Health Contracts &  
Revenue (to May 2016)



**MS MAREE FEERY**  
Executive Director  
Human Resources



**MS TESS LYE**  
General Counsel &  
Company Secretary



**MR DAVID NOWELL**  
Executive Director  
Epworth Freemasons



**MS LOUISE O'CONNOR**  
Executive Director  
Epworth Eastern



**MR JAMES PIPLIOS**  
Executive Director  
Procurement & Facilities



**MRS NICOLE WALDRON**  
Executive Director  
Epworth Richmond



**MS SUSAN WARDLE**  
Executive Director  
Strategy, Marketing &  
Business Development



**MR MALCOLM WELLS**  
Executive Director  
Operational Projects



## OUR PATIENTS

Our patients are at the centre of all that we do

The one goal that drives everything we do is to improve patients' quality of life. We aim to be the leading provider of quality healthcare and are committed to offering the best in patient diagnosis, treatment and care.

Our commitment to our patients is evident in our focus on delivering outstanding clinical services, enabling staff and doctors to be their best and give their best, the integration of clinical practice with education and research and pursuing growth through reach and service development.

**Improving mental health in an ageing population**

Epworth Clinic’s new aged psychiatry service is dedicated to the care of people aged over 65 with mental health issues. The aim of the service is to provide clients with comprehensive and compassionate care in the management of their mental illness, and to optimise functioning and quality of life.

“Epworth Clinic has launched its inaugural aged psychiatry service, timed with the opening of the second inpatient unit,” says Director of the service Dr Lyn-May Lim. “This brings the opportunity to provide a specialised multidisciplinary service to cater to the mental health needs of older people in our ageing population.

“The team of psychiatrists is strongly supported by nursing and allied health staff as well as having the capacity for geriatric specialist input to holistically address issues of both mind and body. The unit provides both inpatient and outpatient care.”

The mental health team comprises nurses, psychologists, social workers, occupational therapists and psychiatrists specialising in the mental health conditions of old age. The team can draw from a range of other disciplines as clinically required, including neuropsychologists, geriatricians and other specialists.

The newly refurbished aged psychiatry 17-bed inpatient unit comprises single rooms with private ensuite facilities in a safe and caring environment for acutely unwell older people. Clients are regularly reviewed by the treating team in conjunction with discussion at multidisciplinary team meetings. From this, an individualised treatment plan is developed for each person. Diagnostic tests and other relevant assessments are conducted at Epworth Camberwell, and treatment options such as electroconvulsive therapy and transcranial magnetic stimulation are available onsite should they be recommended.

**Holmium laser offers improved treatment for patients with prostate conditions**

Patients suffering from enlarged prostates now have access to an advanced new treatment option available at Epworth Freemasons. The new Lumenis Pulse 120H holmium laser allows a minimally invasive treatment for benign prostatic hyperplasia (BHP), called HoLEP — holmium laser enucleation of the prostate. Epworth Freemasons was the first private hospital in Australia to purchase the holmium laser and is now one of only two hospitals in Victoria to offer this technology. Urological surgeon Mr Conrad Bishop used a holmium laser while practising at Guy’s Hospital in London, England.

Mr Bishop says patients with super-enlarged prostates benefit most from this treatment. “Patients with prostates weighing more than 100g would previously have required open surgery, which is a much more invasive treatment and requires a longer hospital stay and increased recovery period. Using the laser, recovery is drastically reduced. I just operated on a man with a 200g prostate and he was discharged the next day with minimal pain.”

During the HoLEP procedure, the laser is used to enucleate (remove without cutting into) the abnormal prostate gland tissue, which is then pushed into the bladder and ground up and removed using a morcellation device. HoLEP results in reduced bleeding and a lower complication rate than open surgery and lasts for about ten years before repeated treatment may be required, as the prostate tissue will grow back eventually. Though an enlarged prostate does not necessarily lead to cancer, it can present with complications including kidney and bladder infection from not being able to empty the bladder, and secondary complications that can be serious, such as bleeding from the kidneys and kidney failure.

“In the past, this would have been something from which patients could die, from secondary complications,” says Mr Bishop. Now, he says, treatment options are excellent and the laser is providing relief for patients that is safe and minimally disruptive.

The new laser is also extremely efficient in removing large kidney and bladder stones, even those “the size of golf balls”, says Mr Bishop. The high power settings allow for ‘stone dusting’, in which large stones can be disintegrated rapidly without fracturing.

**Celebrating Partnering with our Patients Week**

Epworth hosted the inaugural Partnering with our Patients Week on 24–28 August. During this special week, staff reflected on the journey shared with patients and celebrated the commitment to creating positive patient experiences, with activities held throughout the week across the organisation.

Partnering with our Patients Week provides a focused time to celebrate Epworth’s accomplishments, reenergise efforts and honour the people who impact on the patient experience every day, from nurses and physicians to support staff and the executive team, patients, families and the community Epworth serves.

**Epworth – A leader in patient satisfaction**

It is essential to measure patient satisfaction and to use this feedback to continually improve the patient experience and, as a consequence, patient satisfaction. Epworth utilises the world-wide market leader in measuring patient satisfaction. This enables Epworth’s results to be benchmarked against Australian and international best practice. Epworth has been surveying patients with Press Ganey since 2009.

Patients rate their experience in areas such as admission, meals, doctor care, tests and therapies, nursing care, visitors and family care, discharge, personal issues, quality, patient room and overall assessment. The ratings obtained from patient responses provide a mean score. Press Ganey ranks the scores with the scores from other organisations. Pleasingly, Epworth has been trending upwards, seeing improving results of patient perception of care in every survey undertaken.

Epworth Excellence was developed in 2008, to improve organisational culture and responsiveness to patient needs and ensure all staff are competent and compassionate in the care Epworth delivers. Epworth is proud that this program is being embedded across the organisation and as a consequence is achieving outstanding results. Patients see nurses at least every hour and as a result, pain management, patient falls and call bell response times have been substantially improved to meet Australian best practice benchmarks. The Point of Care bedside system further enhances the Epworth Excellence program.

Pleasingly, in the April – July 2016 survey, Epworth has been assessed by Press Ganey as recording the highest patient satisfaction results in Australia, across these key benchmarks.

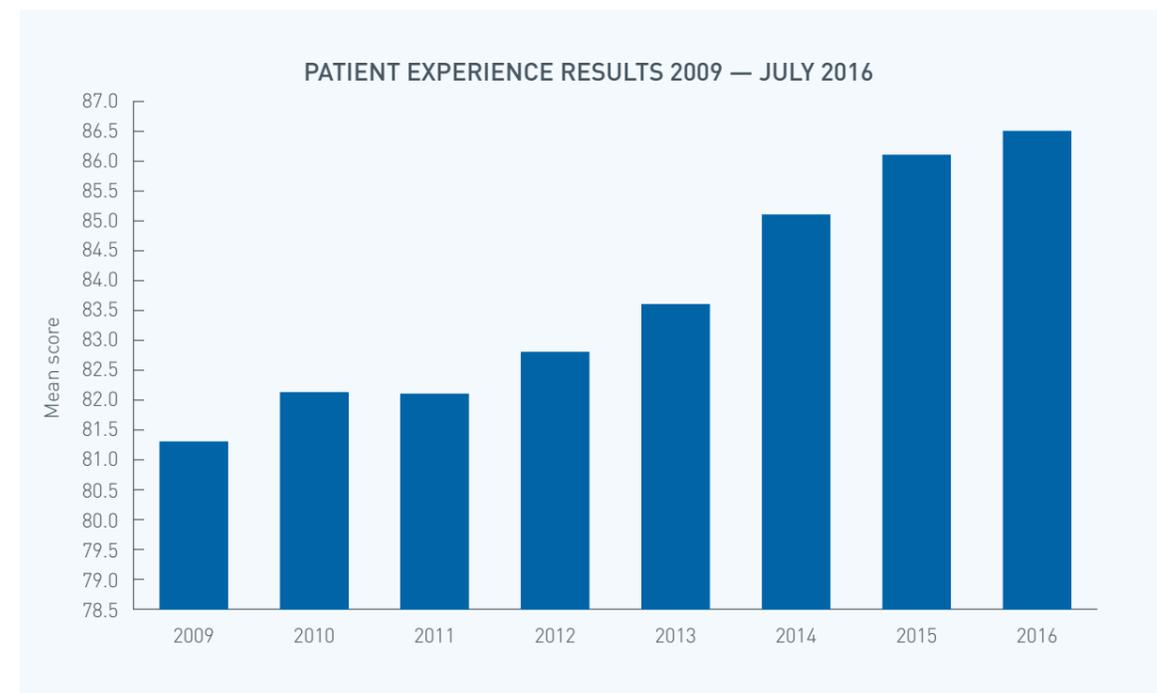
**Epworth helps relieve Tasmanian elective surgery lists**

The Tasmanian Government has committed \$25 million to alleviating their elective surgery waiting lists — selecting Epworth as the only interstate hospital among the five private hospitals chosen to provide the services in 2015, with patients to be treated throughout 2016 and beyond.

Public hospitals in Tasmania will also be given extra funding, provided by the Commonwealth Government, to perform more surgery. In 2015/16 Epworth treated patients from the waiting lists of Royal Hobart Hospital and Launceston General Hospital.

**A lasting first impression for Epworth Richmond patients**

Patients entering Epworth Richmond via the newly refurbished Bridge Road entrance also benefit from the services of a dedicated concierge. The role, which provides patients with guidance and assistance on first entering the site, was created a part of the ongoing redevelopment. The role has been praised by patients – many of whom arrive at hospital anxious or uncertain about what lies ahead.



# Tailoring treatment for a changing population



Louise and Patrick went to their GP for a referral and within two hours Patrick had been admitted to the aged psychiatry service at Epworth Clinic, where care is structured specifically for people aged 65 and over.

“Aged psychiatry is definitely a growing field; we have an ageing population in Australia, certainly in Melbourne. I think the recognition of mental health needs overall has increased over the years but particularly in the older population,” says Director of the Aged Psychiatry Service, Dr Lyn-May Lim.

“There has sometimes been a bit of a misconception that if older people become frailer, less independent, and have greater physical needs, then that somehow explains any mental health issues that come from that, but in fact I see it quite differently.

“Clients should receive treatment, particularly if it can reduce a degree of suffering and the degree of vicarious burdens on significant others, and improve their functioning.”

“A big family event was coming up and he was very depressed and there was a question of whether he would even make it. So with the family, our children, myself and Dr Lim, we decided to try ECT [electroconvulsive therapy]. They did the therapy and he was able to attend the event,” Louise says.

“I came back to the clinic after my family gathering was over. I got to the stage where I would look forward to the ECT, as it would give me a bit of a boost,” Patrick says.

“I enjoy life again now. I’m not 10 out of 10 yet, sometimes I still get a slight bit of the depression but it soon lifts again.”

“Patrick got along really well with Lyn-May,” Louise says.

“I make her laugh at my jokes, which is an amazing thing to do,” Patrick says.

\*Names have been changed.

Pictured: Director, Aged Psychiatry Service, Dr Lyn-May Lim

Patrick’s\* depression came on gradually and unexpectedly. He had only ever experienced a mild case of depression 20 years earlier.

“It came on slowly but I waited too long to get it seen to and I thought at first that it would never lift. I’m not a person who can verbalise my feelings very easily,” Patrick says.

“Patrick was reluctant to seek treatment initially. I knew he needed treatment but I didn’t want to push him either and in the end he realised it himself. He was nearly rock bottom at that stage. Probably if we had sought treatment earlier it wouldn’t have gotten to that stage but that’s hindsight,” Patrick’s wife Louise\* says.

Louise acknowledges a number of life events fuelled Patrick’s depression. “He had injured his back and a family member was very ill overseas so we had flown home,” she says.

“They couldn’t tell us when we could get back to Australia because of my back,” says Patrick. “That was just another hit. The weather was quite bad as well and it was all these things combined that contributed to my depression,” Patrick says.

A second concierge position was also launched at the site’s new Emergency Department, to support the transition into the new space — providing patients with a friendly face to help to ease the pathway to emergency treatment.

## Patients supported in journey to rehabilitation

Providing a conduit for patients on their journey from acute treatment to rehabilitation, the Epworth internal assessment team, established in July 2015, is improving access to rehabilitation services.

Jane O’Connell, manager of the team, alongside rehabilitation assessors Fleur Wilson, Sam Cameron and Penny Shears, says having dedicated staff based within Epworth acute areas allows for direct communication and transparency between departments.

“It provides an opportunity to start the education process with patients, ensuring a more seamless transition which, in turn, should improve the patient’s experience. Having a team based in acute areas allows us to work with those sites to improve bed flow management, ensuring timely referrals and access to rehabilitation for those patients that require this service,” she says.

Ms O’Connell says the service has been well received since its launch.

“Everyone has been very welcoming of the team and excited by the change. Acute staff have commented on the improved assessment service which has facilitated timeliness of assessments, resulting in same-day transfers, if required.

“Rehabilitation bed coordinators are finding this additional communication has enhanced the admission process.”

## Chinese speakers benefit from new concierge service at Epworth Eastern

In the City of Whitehorse, where Epworth Eastern is located, about 7.5 per cent of the population — more than 11,000 people — speak Mandarin at home. Amy Lau has joined Epworth Eastern as the new Cantonese and Mandarin-speaking concierge, offering personal support and helping Chinese-speaking patients with their queries regarding admission, paperwork and health funds.

Epworth Eastern has Mandarin-speaking doctors and specialists in the following areas to provide patients with language and cultural specific services: cardiology, cardiothoracic surgery, gastroenterology, general surgery, orthopaedic surgery, plastic surgery, urology and vascular surgery.

## Heartbeat — supporting cardiac patients

Epworth Eastern established a committee to run Heartbeat Epworth Eastern in early April 2016. Heartbeat is an organisation run by volunteers who are past cardiac patients, or family members of past cardiac patients. The group provides information, support and reassurance to cardiac patients and their families in an effort to alleviate the doubts and fears they may have before and after treatment.

“Already in place at Epworth Richmond, Heartbeat has provided fantastic support to cardiac patients since 1984,” says Heartbeat Vice President Bill Preston. “The Heartbeat Epworth Eastern committee was established to extend this support to cardiac patients at Epworth Eastern.”

“Committee members are particularly aware of patients’ needs and are available if patients and their families wish to speak with them,” says Mr Preston.

Encouragement and reassurance from committee members can help patients and their families a great deal during what can be a very difficult period in their lives. “The committee will organise social and fundraising events for past cardiac patients, with all funds raised supporting cardiac care at Epworth Eastern,” Mr Preston says.

*Heartbeat has provided fantastic support to cardiac patients since 1984*

## Pet therapy provides comfort at Epworth Camberwell

A new service at Epworth Camberwell is bringing smiles to the faces of patients and staff alike. Not-for-profit organisation Delta Society, which promotes positive interaction between people and companion animals, provides weekly visits with handler Fiona and Labrador cross golden retriever, Mandy.

Patients undergoing various treatments at the site are able to spend time with Mandy every Wednesday. Research shows pet therapy, where animals are introduced to a clinical environment to assist with the healing process, has a variety of benefits for patients experiencing a difficult or protracted illness and recovery period. Pet therapy has been shown to reduce blood pressure, lower anxiety, improve cardiovascular health, reduce pain levels and improve recovery time.

The program has also expanded to Epworth Brighton.

## A different pathway to healing — the benefits of pet therapy

As Mandy makes her way through the wards followed closely by her dedicated carer Fiona Smith, people can't help but stop what they are doing and reach down to pat her glossy black coat. Mandy, a friendly Labrador cross golden retriever, is only too happy to oblige.

Mandy and Fiona work with the Delta Society, a not-for-profit organisation promoting positive interaction between people and companion animals. The pair visit patients at Epworth Camberwell as part of the pet therapy program established in February 2016, alternating between rehabilitation patients and mental health patients each week. Fiona has had Mandy for four-and-a-half years, and decided she would make an excellent pet therapy dog, as she'd already been through guide dog training.

"Mandy completed half her training through Guide Dogs Australia but was removed from the program due to needing cruciate ligament surgery," Fiona explains.

Indeed, as Mandy interacts with patients it's clear to see she displays the perfect balance of playfulness and calm, knowing when to reach out and when to sit back.

Patient Noel, who has been at Epworth Camberwell for about three weeks, is excited to catch up with Mandy after meeting her for the first time two weeks ago. Noel misses his own dog, Lily, a playful Bichon Frise who has been his constant companion for years, so time with Mandy provides some much-appreciated contact with an animal friend.

Registered nurse Loren Crook accompanies Mandy, Noel and Fiona out to a small courtyard at Epworth Camberwell, where everyone can enjoy Mandy's visit in the sunshine. The scent of basil and tomatoes fills the air, from the small garden patch that Noel tends to, as part of his therapy at the hospital. Loren says Noel loves his time with Mandy, as do many of the other patients who have had the chance to meet her.

"We mostly arrange for TAC [Transport Accident Commission] and acquired brain injury patients to visit with Mandy," says Loren. "It's particularly beneficial for those patients."

Maya Zerman, Program Manager of Mental Health at Epworth Camberwell, says pet therapy promises a different kind of treatment for patients outside of their usual programs.

"The opportunity for therapy dogs to visit patients who are away from their usual surroundings is a great way to reconnect people back to their home life. For patients who spend long periods away from their loved ones, including their pets, this type of playful interaction offers an added dimension of care."

# = HEALING





Wig salon client and volunteer

**Wig Salon offers oncology patients that special finishing touch**

Epworth Freemasons launched a wig salon for oncology patients in April 2016. One of the first patients to use the service, Heather Pym, was referred via day oncology and spent time with the wig salon's coordinator of volunteers, Anne Roso, before she even started chemotherapy.

"I had chosen a wig and it sat in a show bag full of goodies in the corner at home. I didn't even look at it until my hair started to fall out. But I was well prepared for it and my daughter, Kate, helped to shave my head on the back step of the house," says Heather. "Since then I've used the wig when I wanted to blend into the crowd."

"I found staff members were always happy to discuss my treatment and I felt comfortable to ask questions and make suggestions," she says.

The wig salon's launch included a ceremony featuring volunteers and patients, along with Group Chief Executive Alan Kinkade and Epworth Board President Rod Fitzroy. Donors were represented by Rebecca David and suppliers included Paul Shiff and Diane Haynes from Celebrity Wigs.

The service, which has now seen more than 120 patients since its inception, offers personal support for women and men undergoing chemotherapy to reduce their anxiety about hair loss.

Epworth Freemasons Executive Director David Nowell says, "It is so important that, as a not-for-profit healthcare organisation, we involve ourselves in broader supportive elements of cancer care to the benefit of our patients and their families."

Epworth Freemasons thanks oncology nurses Wendy Dawson and Marisa Stevens for seeing this project from concept to fruition, and the dedicated team of volunteers, personal service assistants and cleaners who manage the smooth running of the service. The Wig Salon has been made possible through the generosity of donors to the Epworth Medical Foundation.

**Quilts providing end-of-life support**

Handmade quilts are being made for palliative care patients to help personalise their room and offer a keepsake for families.

The foot quilt project, at Epworth Freemasons, is a collaboration between pastoral care and volunteer services.



The quilts are offered as a gift to be laid at the foot of a patient's bed. The colour, texture and beauty of each quilt is intended to transform the patient's room, making it more personal, and to assist the family through the final stages. The reverse side of the quilt also provides loved ones with the opportunity to write a personal message or poem. At the time of death the quilt is given to the family as a keepsake for future generations.

The project has been supported by staff fundraising initiatives.

**New equipment helps families breathe easier**

Epworth Freemasons commenced the provision of continuous positive airway pressure (CPAP) within its maternity unit in May 2016. CPAP helps to keep the lungs open between breaths, allowing babies requiring additional respiratory support a faster recovery. Having the new equipment means fewer babies will require transfers out to a tertiary-level hospital, thereby reducing the incidence of mother/baby separation within the maternity unit.

Baby Myles, who was born on 18 May, was admitted to the special care nursery after birth with respiratory issues and commenced on high flow oxygen therapy. As he did not improve as expected, he was moved onto CPAP, and was the first baby to use the new equipment. Myles is now home with mum and dad and doing well.

Both patients and staff of Epworth Freemasons are grateful for the support of the Epworth Medical Foundation, which enabled the allocation of funds from generous benefactors towards the purchase of the equipment. Epworth also acknowledges the contribution of Nurse Unit Manager, Special Care Nursery, Kirsty Newnham, for her diligence and commitment to the CPAP project.

**Interactive game improving outcomes for rehabilitation patients**

A new table-top computer game is helping acquired brain injury (ABI) and stroke patients at Epworth Richmond to inject some fun into rehabilitation.

Patients are challenging themselves on this new technology designed by The Australian Catholic University (ACU) and RMIT University, as part of the 'Resonance' research project led by Dr Jonathan Duckworth (RMIT) and Professor Peter Wilson, (ACU), with Epworth patients participating in testing the new technology in association with Dr Gavin Williams. Early results are promising, indicating patients who use this technology regularly show improvements in hand /eye coordination and concentration once they return home.

Early data from patient use of the system indicates improvement trends in overall arm function, and in certain areas of cognitive functioning such as attention and memory. The research into how this system will benefit ABI and stroke patients is ongoing.

Patients interact with the system by touching the screen and/or moving basic coloured objects, such as a blue cylinder approximately the size of a soup can, to interact with virtual environments or games. These games encourage patients to engage in physical activity by moving their arms and hands, and also challenge them to improve cognitive ability associated with movement, such as motor-planning.

Resonance was funded by an ARC Linkage grant, with the Australia Council for the Arts as an industry partner. The project was conducted in collaboration with Professor David Shum and Professor Pat Thomas from Griffith University, Dr Nick Mumford, Ms Hannah Richards and Dr Karen Caeyenberghs from the ACU and Mr Ross Eldridge from RMIT.



## A second chance at life

“In 2010, I started to get some numbness in my left hand. I wasn’t really sure what that was.

“I started to lose hot and cold sensation on the left-hand side of my body. I had an MRI and found I had a tumour in my spinal cord at C5-C6. I continued to have MRIs for about two years and had seen three surgeons who said they wouldn’t touch it because it was in a dangerous spot.

“As time went by, I was starting to lose more function on my left-hand side. I finally found a surgeon who said, ‘It’s a tumour, you’re in your 30s, we need to get this out’.

“When I came out of the surgery I pretty much wasn’t able to move anything at all from my neck down but I was lucky to be alive. My surgeon was able to remove the tumour and it wasn’t cancerous but it meant that it was going to be a long road with rehabilitation.”

Lyn came to Epworth Brighton as an inpatient in 2014.

“When I first got to Epworth I couldn’t walk, couldn’t go to the toilet on my own, couldn’t dress or feed myself. Once I started physiotherapy I became pretty determined to work as hard as I could to get moving again,” Lyn says.

“Four weeks later, I started to get these functions back again. After a couple of weeks I was walking around with a frame and could get to a few places around the hospital. Then by the fifth week I was able to walk ten metres; a pretty huge achievement. I went home with just a walker to start with. The people

here were pretty awesome, they knew I wanted just to do what I had to do and get out of there.

“Since I left I now come in twice a week for rehab, I can drive now during the day whereas I couldn’t drive at all for the first 12 months. I just had my MRI and I’m still tumour free.”

Lyn now volunteers at Epworth Brighton, as part of a transition to a new career.

“These guys have helped me so much, and it’s such a friendly environment to be in that I’d like to give something back. Before the surgery I was a music teacher, a pianist, but I gradually lost the ability to play because of the loss of function in my left hand. Since the surgery I haven’t been able to go back because I’m not able to sit or stand for long periods of time.

“I know a lot about rehab now and I feel like this might be something I could continue with in the future, now that I can’t teach. I’m pretty determined to see if there is something new I could go into.

“It’s been a hard road but I’m lucky to be alive and I’m lucky to not be stuck in a bed paralysed from the neck down. I have a daughter, Amelia, who is 12 and my son, Nicholas, who is 9. They really had to grow up. It was hard for them to see me working full time, buzzing around and driving them places, then all of a sudden everything stopped. They had to become a bit more independent. They’ve been really good, they’re great kids.

“I’ve been given a second chance to do things with my kids and my husband, to continue on with my life. I’m not even 40 yet; there are still lots of things for me to do.”

Pictured: Physiotherapist Emily Garson with Lyn Luca

### Epworth Clinic introduces outpatient depression service

People with depression may need to explore a few treatment pathways before they find the right one for them. Epworth Clinic has developed a range of treatment options for people with depression that are individually tailored to their needs.

Epworth Clinic has initiated an outpatient Transcranial Magnetic Stimulation (TMS) service, previously only available to inpatients — providing an additional treatment option for clients with depression.

A multidisciplinary team at Epworth Clinic first assess the client’s psychiatric and medical history to establish their suitability to receive TMS. Treatment involves the application of a pulsed magnetic field which alters the excitability and blood flow through the neurons in the brain. The client sits in a recliner chair with the TMS magnetic coil resting on their scalp. TMS treatment is well-tolerated, takes 30 minutes to complete, and the client is monitored by TMS-qualified nursing staff.

### Connecting with the Geelong digital community

To coincide with the opening of the new Epworth Geelong hospital, a dedicated Epworth Geelong website was launched for patients and doctors. Locally designed and developed, the website showcases the hospital’s new facilities and services, highlighting the access to quality healthcare Epworth Geelong now provides for the Greater Geelong region.

Within the first month of its launch in June 2016, the new website had over 9800 hits/visits.

### Guiding nursing care at Epworth

Nursing care guides, which provide organisation-wide guidelines for patient care, assessment and documentation, are now available across all acute specialties, with guides for nurses in maternity, head and neck, paediatric medical and pre-admission services rolled out during 2015/16.

The project to develop comprehensive patient care guides for nurses was launched in FY 2012/2013 by then Executive Director, Clinical Services, Louise O’Connor, following an audit demonstrating a need for consistent care documentation across all Epworth sites. The project was then brought to completion by Clinical Services Project Manager, Melanie Gordon and Clinical Services staff member, Nicola Timms, overseen by Epworth’s current Executive Director, Clinical Services, Sharon Donovan.

Regular auditing is performed and improvements are incorporated where there is a new procedure introduced or a new condition treated. Likewise, the guides are consistently amended to reflect evidence-based best practice guidelines.

To date, there are over 300 existing care guides available for use. Epworth staff have embraced the guides and additional requests are consistently recorded via the Epworth intranet page.

The project team was successful in the submission to present on the guides at the PHAQ 12th Innovative Practice in the Private Sector Conference & Awards held in June 2016.

### A commitment to care with respect and compassion

Affirming Epworth’s commitment to excellence, everywhere, every day, executive and senior staff across Epworth Rehabilitation developed a video to promote the use of patient communication tool AIDET. The acronym directs staff to Acknowledge patients by name, Introduce themselves, Duration: letting patients know how long they may need to stay in hospital, Explain what they are doing, Thank them when they leave. AIDET creates a culture of respect for patients and demonstrates staff engagement in their care.

Epworth Excellence Coach Jeynelle Broatch worked on creating the video and says the project was about bringing these patient communication tools to the forefront of staff members’ minds. “When we focus on the comfort our patients we ensure that we open lines of communication and trust that ultimately serve their overall care.”

The video is available to view on Epworth’s YouTube channel.

### Pastoral care chaplain shares gift of music

Two afternoons per week, qualified pastoral care worker, Samantha Lo, plays the harp for patients in the oncology and general medical wards at Epworth Eastern. Sam began working with the pastoral care team as a volunteer denominational chaplain, and in late 2014 began bringing her harp to play for patients. This was so successful that a quality project to have Sam play for more patients was undertaken by the pastoral care team.

The response from patients, families and staff has been overwhelmingly positive. Sam’s approach is to engage in pastoral conversation with the patient (and family if appropriate), then to tailor the music to the person.

## Keeping mothers and babies close at Epworth Freemasons

An hour after Myles was born, he was admitted to the special care nursery with respiratory issues. He was started on high flow oxygen therapy, but when he didn't improve as expected, he became the first baby to use the continuous positive airway pressure (CPAP) equipment.

Epworth Freemasons announced the commencement of CPAP within the maternity unit in May. CPAP allows babies needing additional respiratory support a faster recovery and to stay close to their mothers in the maternity unit, reducing the incidence of mother/baby separation.

Myles' mum Justine was induced on the Tuesday night and Myles was born at midday the next day. He lay on his mother's chest for an hour, then it was new dad Todd's turn for a hold. Todd noticed his baby making strange noises.

"The nurses also noticed he was grunting and that he looked a little blue, so they had him checked out and determined something was going on," Justine says.

"Myles was in the incubator from the Wednesday to the Sunday, so the first few days were really hard because I couldn't hold or feed him. It was all a bit strange, having just had a baby but not being able to look after him.

"Once he had been put on the oxygen and I was a bit upset, the nurses let me touch him for a few minutes which made such a difference."

Justine was discharged on the Monday and Myles stayed at Epworth Freemasons until the Thursday.

Myles' grandmother is a retired midwife and was grateful that Myles could stay close to his parents. She commented that in her day the babies they cared for were often separated from their parents to be treated in tertiary hospitals.

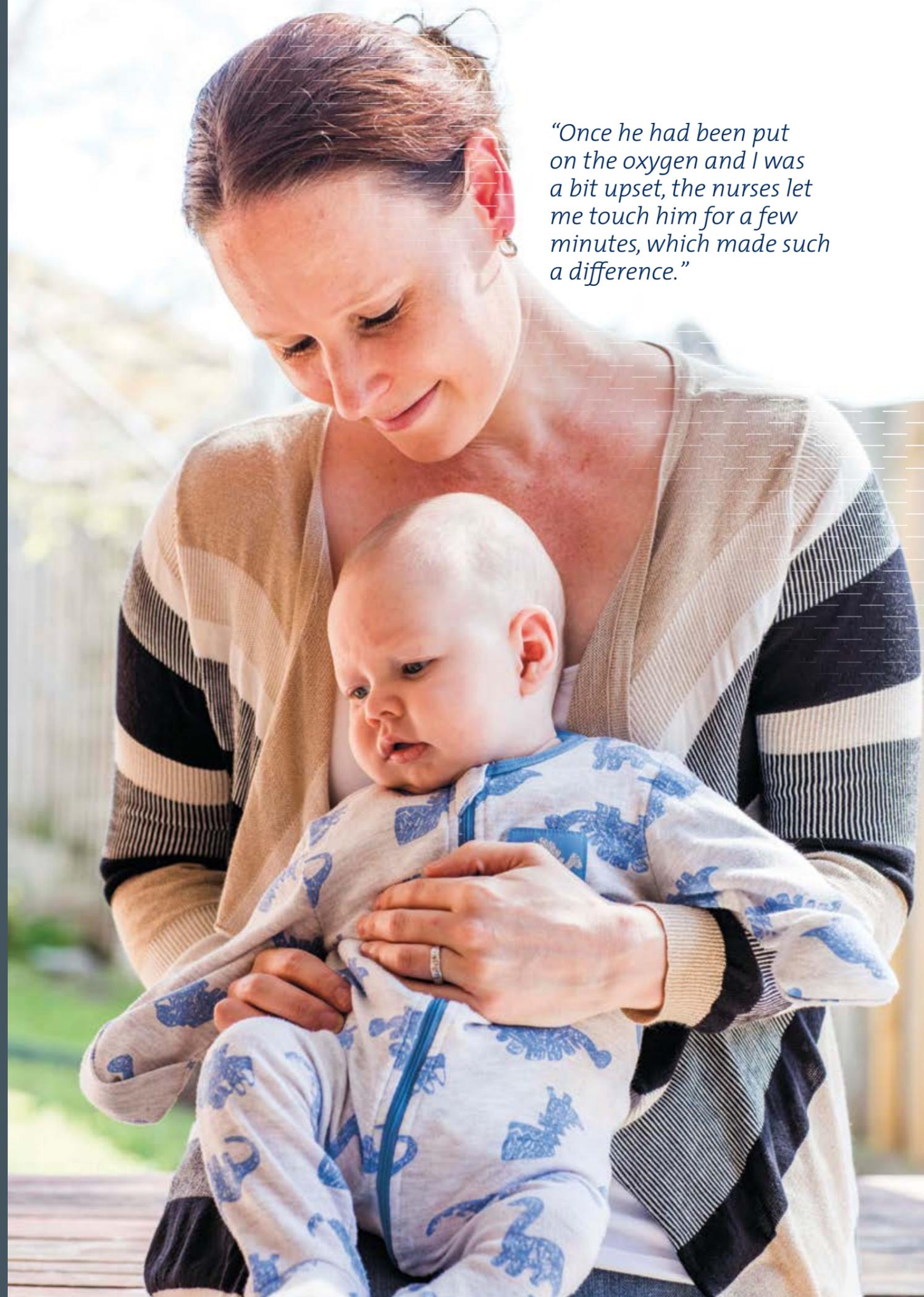
"I was expressing and because my room was literally across the hall from the nursery I got into the routine where I would express then take it into the nursery, and visit him for a few minutes. We did that through the whole day," Justine says.

Myles, now nearly 16 weeks, is doing well.

"Things were hard enough in the first few days, not being able to be with your baby all the time and if we had had to travel to go and see him it would have been that much harder. We are so grateful Myles was the first baby on this new system, so we could stay close by."

Pictured: Mum Justine and baby Myles

*"Once he had been put on the oxygen and I was a bit upset, the nurses let me touch him for a few minutes, which made such a difference."*



## A return to riding — rebuilding a passion through rehabilitation

Isabel, now in her early 20s, has been riding since she was a toddler. In March, while competing in the Wandin Horse Trials, Isabel fell, along with her horse Roderick.

"I didn't fall off when Roderick slipped," Isabel says. "I'm a good captain and I went down with my ship, Roderick is just a terrible ship!"

After a week in ICU and more than a month with post-traumatic amnesia (PTA), Isabel underwent an intensive rehabilitation program at Epworth Richmond, as she recovered from a traumatic brain injury (TBI).

"Roderick was coming second and we were clear up to fence eight. Then he slipped on the flat and fell over. I hit my head and I don't remember anything after that."

"Not long after the accident they shaved her head and put a pressure gauge in, and anyone who knows Issie knows her hair was one of her favourite things, it was right down to her waist," says mum Janet, a former point-to-point jockey and event rider, and a Board Chair with Eventing Victoria.

"The pressure gauge never indicated there was something wrong, so we just thought when she came out of the coma she would say, 'Hi Mum, hi Dad, here I am'."

"They moved her out of ICU and down to the ward, and there were times when she would say, 'I can't stand what's happening to me, I'm really frustrated'. She knew what she wanted to do and say but she couldn't say it."

"Once she was clear of PTA, she started embracing her physio and everything else; she was amazing. I think Issie liked the physio most, as it felt like a clear path back to riding," Janet says.

"I was still in the high care ward at Epworth when I started rehabilitation. I used to do neuropsychology three times a week, speech pathology about the same, occupational therapy and I had physiotherapy for two hours a day."

Part of Isabel's program included intensive muscle strengthening, as part of a world-first study, overseen by specialist neurological physiotherapist and research fellow, Associate Professor Gavin Williams, into how muscle strengthening can improve walking for patient with a TBI.

"I really enjoyed the rehab program because I could see how I was progressing and it all happened quite quickly, which I found very comforting," Isabel says.

Before the accident, Isabel regularly participated in eventing competitions around the state — a combination of dressage, cross country riding and show jumping. She has now returned to competitive riding and continues to look after the horses agisted on her family's property in the Yarra Valley, where the family also breed and sell horses.

"All of my four children ride but Issie was the one who was very passionate from the get-go. The other kids discovered motor bikes and snowboarding and other pastimes but Issie just never let go of horses," says Janet.

"We've always supported her. At school she didn't do a lot of partying, and she didn't do a lot of studying, she was just passionate about her riding."

"My hopes for the future are still the same as they used to be, I'd like to get to an Olympics," says Isabel. "Tokyo is not for another four years. I'll get back into my horse riding again soon and hopefully everything will be alright and I can get back into jumping."

"I'm not scared to ride because I don't remember the fall; I don't feel any differently about it. Horses are my life. People keep asking me if I won't ride now and I just don't think I'd have much of a life if I didn't."

Find out more about Isabel's story in a short video available on Epworth's YouTube channel.

*"I really enjoyed the rehab program because I could see how I was progressing and it all happened quite quickly, which I found very comforting."*





## OUR PEOPLE

Investing in Epworth's most valuable asset: our staff

Epworth is a dynamic workplace. We value and invest in our staff, ensuring we provide great opportunities for ongoing professional development and continue to invest in our leaders for future growth, as an important part of our workplace culture.

We are dedicated to ensuring Epworth is a safe and healthy workplace for our people and our patients.

## THE EPWORTH DIFFERENCE

Epworth cares about its patients and people, and places great emphasis on its strategic intent of enabling staff to be their best and give their best.

With access to 82 scholarships in 2015 worth up to \$10,000 each, progressive leadership development programs for frontline leaders right through to strategic leaders, and with separate customised programs for nurse unit managers and future NUMs, Epworth provides a unique opportunity for staff to grow, develop and provide exceptional patient care.

To tackle the large recruitment challenge resulting from the enormous growth across the group, Epworth developed its 'Epworth difference' employee value proposition. The Epworth value proposition makes clear the organisation's dedication to nurturing staff development. It states: 'At Epworth, we care. We care about our patients, and we care about our people. We care about career development and progression. About attracting the highest calibre professionals. About nurturing potential. We care about innovating; staying ahead of the field. And we care about giving all our people the support they need to thrive in our growing, fast-paced and ever-changing organisation.'

The look and feel of the careers website has been upgraded, and its functionality assisted Epworth to secure expressions of interest from over 12,000 people wanting to work at Epworth. The careers website was launched in August, a three-month long project managed by the Marketing team. Parallel to this, Epworth invests in recruiting the best talent in the industry, employing dedicated in-house recruiters to ensure Epworth goes to market early and sources staff from a variety of different channels. Importantly, Epworth staff are supported through safety and wellbeing initiatives including resilience and mental health training and the focus on fun at work, with various divisional year-round celebrations and recognition initiatives.

Epworth continues to have a consistent focus on staff engagement and to invest in building a unique culture based on Epworth values. Below is further detail on this work and other initiatives underway for staff at Epworth HealthCare:

### Recruiting the best and brightest for Epworth's new developments

In partnership with the marketing department, a new mobile-enabled Epworth Careers website and related marketing collateral were developed, to convey Epworth's value proposition. The website contains rich content and testimonials from employees and

facilitates potential candidates either applying for a position currently advertised or registering their expressions of interest for future employment opportunities. In the first instance the website and expressions of interest key focus was recruiting for the Lee Wing and Epworth Geelong. Epworth's EOI register management and e-Recruit talent pool were fully integrated when the candidate management system was implemented and went live.

A new centralised recruitment service centre was implemented across the business, including a dedicated Epworth Geelong recruitment service centre, which successfully managed the volume recruitment associated with commissioning the new hospital. The approach to workforce planning and talent attraction at the newly opened Epworth Geelong, which required approximately 400 team members, has been an integral component relating to operational readiness of this greenfield site.

In excess of 8000 expressions of interest to work at Epworth Geelong were received in the 12 months leading up to formal job advertising. During the volume recruitment phase of this project, in excess of 3400 formal job applications were received.

Ninety-six per cent of successful candidates came directly from Geelong and the Surf Coast, and over 40 team members have relocated from other divisions within the Epworth group. Approximately half of the Executive and management teams comprise existing Epworth employees who have relocated from other divisions. A focus on alignment of candidate values and behaviours as much as technical competencies has been key to ensuring the culture promoted at Epworth Geelong is consistent and positive.

## IN FY 2015/16 EPWORTH'S HUMAN RESOURCES TEAM FILLED 1900 POSITIONS, INCLUDING 400 NEW ROLES CREATED AT EPWORTH GEELONG.

### Epworth staff speak up in engagement survey

Providing a positive workplace culture and a safe work environment is fundamental to Epworth's vision of consistently delivering excellent patient-centred care with compassion and dignity.

In November 2015, Epworth staff were invited to have their say in the Best Practice Australia (BPA) Staff Engagement Survey. An incredible 76 per cent of staff responded and provided feedback.

As an organisation Epworth is sitting in a high-end culture of ambition bordering on success, meaning 59.3 per cent of staff are engaged and this benchmarks higher than the industry norm at 44 per cent. Strategies are well underway to continue to improve staff engagement and to position Epworth as an employer of choice.

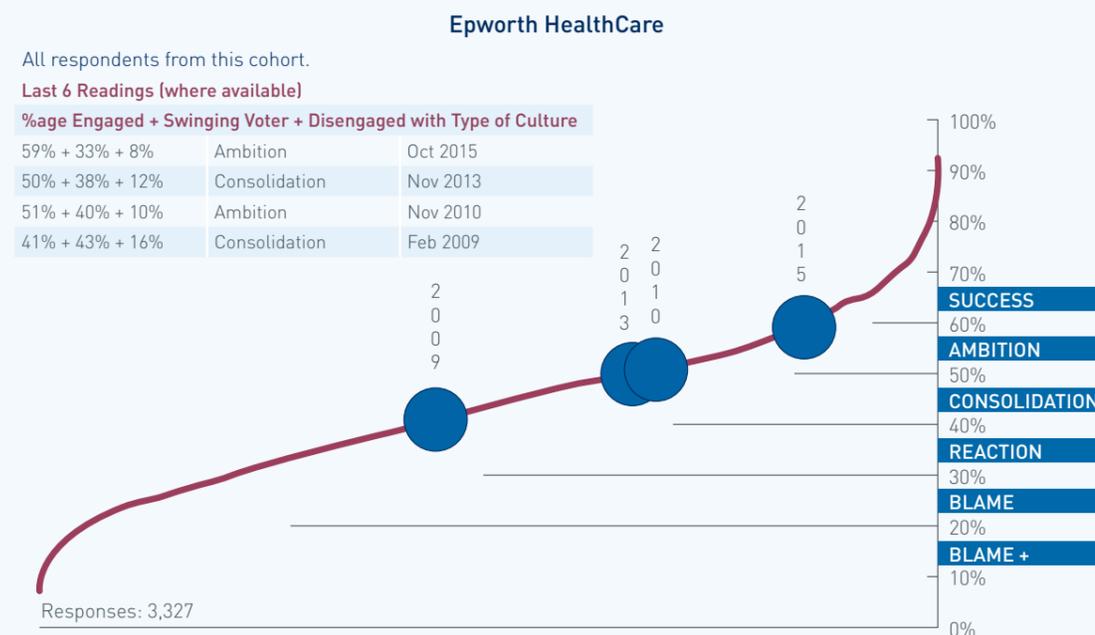
An indication of the strength of Epworth's staff culture was BPA's choice to use Epworth in a recent case study. The case study, distributed by BPA across the healthcare network, showcases Epworth's dramatic improvements in staff engagement as a benchmark for other organisations.

**73 %**  
OF RESPONDENTS SAY THAT, ON BALANCE, EPWORTH IS A 'TRULY GREAT PLACE TO WORK'

**75 %**  
OF RESPONDENTS SAY THAT THEY WOULD RECOMMEND EPWORTH TO THEIR FAMILY AND FRIENDS AS THE BEST CHOICE IF THEY REQUIRED THE HEALTHCARE WE PROVIDE.

### YOUR TYPE OF ENGAGEMENT CULTURE

Your Type of Engagement Culture is identified as the bubble on the chart below. The 'squiggly' line is a full series of dots — each dot is a separate organisation that Best Practice Australia has surveyed. The %age used on the chart is the %age of respondents who identified with the Engagement Cycle.



To determine the type of culture a work place has, Best Practice Australia calculates the percentage of respondents who are personally experiencing their working life in their organisation in either an: **Engagement Cycle** (positive, upbeat, optimistic, engaging) **Swinging Voters** (neither overtly positive nor overtly negative) **Disengagement Cycle** (negative, pessimistic, blaming).

## Recognising 30 years dedication to brain injury rehabilitation

Epworth honours staff commitment each year with the annual long service awards, held in October. This year's ceremony included a distinguished 30-year service award, presented to Professor John Olver AM, Medical Director of Rehabilitation.

John, an internationally-renowned expert in acquired brain injury (ABI) and traumatic brain injury (TBI) rehabilitation, says he chose the field because it has a holistic approach to patient care.

"I have always been interested in the neurological side of rehabilitation. In 30 years I've never seen the same patient presentation twice because the presentations are always quite different and quite complex," John says.

"Brain injury is very complex because the brain controls everything we do. Patients have physical problems, often combined with thinking problems, such as poor memory, concentration, and reduced speed of thinking, and emotional problems like mood swings and depression. You put all those together and then consider the patient in their own environment and the combination is different every time."

His longstanding commitment to Epworth is mirrored in his dedication to his patients. Along with his multidisciplinary team, he meets patients in the acute phase of their illness — within days of their stroke or brain injury — with care for these patients often spanning decades.

In 1989, John recognised the need for something different from a hospital setting for patients needing longer and more intensive rehabilitation. A Transitional Living Centre (TLC) was established, assisting young TBI/ABI patients towards independence and more satisfying participation in the community.

"When I started in rehabilitation, when you discharged patients into the community, and these were predominantly younger patients, there were very few support services. So the length of stay for an inpatient

was probably three times longer than it is now. We can now put in place far more support services for people with disabilities than we could previously."

More recently, John established the concussion clinic, based at Epworth Hawthorn and run in conjunction with Dr Jo Sherry, as an extension of Epworth Rehabilitation's renowned traumatic brain injury unit.

"Epworth is considered a leader in the field of brain injury. There are around 2500 patients on our database and we've done a long term follow-up study that is now following patients up to 20 years.

"That's not replicated in too many centres. We've got a good overview of how our patients are going in the long-term and that's enabled us to enrich the program to cater for what we know could be ongoing problems."

John is also the Victor Smorgon Chair of Rehabilitation Medicine, Victoria's only Chair in rehabilitation medicine. "Epworth provided the opportunity for a Chair of Rehabilitation to be developed, which enables us to do evidence based research and to keep pace with modern advances.

"Epworth always encourages ideas and allows you to develop them. We are well supported."

Pictured: Professor John Olver AM, Medical Director of Rehabilitation



## A fresh approach to emergency care

The revitalisation of the emergency department at Epworth Richmond has created an unexpected end result.

The new space is quiet and calming, not at all what you would expect from a bustling emergency department.

"No matter how busy we are it still feels calm and under control," Emergency Department Nurse Unit Manager, Felicity Black, says.

Deputy Director of Emergency Medicine, Associate Professor Bill Nimorakiotakis agrees, "Compared to the old space, it's a quiet environment to work in, which is better for our patients. It's something that we didn't anticipate, the quietness of it. Not only for the patient but for the nurses and doctors, it's more of a relaxed type of atmosphere."

The new department, opened as part of the Lee Wing in February, includes dedicated resuscitation areas and a fast track service. Negative pressure and isolation rooms are available for patients who are particularly unwell or infectious and all patient rooms are private, with solid walls between treatment spaces to reduce noise.

A specialist paediatric treatment area has complemented the opening of Epworth Richmond's new paediatric unit.

"The space is tailored to young patients, with all the equipment necessary to meet their needs. This is an important group for us to be able to manage. Currently there aren't a lot of facilities around locally to provide the type of service that parents are looking for and it is good that we can help to fill that gap," Director of Emergency Medicine, Dr Ron Sultana, says.

Dedicated CT scan and x-ray rooms and a seven-day-a-week pharmacy service are also now located within the department, reducing the need to move patients out of the area for tests and speeding up diagnosis and treatment.



"If the patients can see that they've got these great staff looking after them it really gives them confidence. We had a patient the other week actually say it was lovely to see us all getting along so well and working as a team. When the patients see that the staff are happy and communicating, that makes all the difference," Felicity says.

A focus on preventative medicine is also something not commonly associated with emergency departments, but the introduction of a physiotherapist has allowed patients to be assessed for their safety after discharge.

"Physios are about more than just soft tissue injury. They can assess a patient's ability to safely go home, so that they don't reinjure themselves. For patients who are at risk we have the ability to directly admit them to rehab via emergency, which is a fantastic service not many other emergency departments provide," Bill says.

"For the patient that's a big thing — potentially avoiding another, more serious injury."

Pictured: Dr Ron Sultana, Dr Bill Nimorakiotakis and Felicity Black.

### Bringing values to life through best practice recruitment

Epworth is committed to bringing its values to life every day and in every interaction with patients and colleagues. As such, and in line with best practice, in October 2015, Epworth commenced a pilot of a values and behaviours assessment as part of the recruitment process across a range of positions at Epworth Richmond, Epworth Geelong and corporate divisions. This assessment measures an individual's natural tendency to demonstrate Epworth values. This was introduced to support growth and ensure Epworth recruits the best candidates with technical expertise and who align with the organisation's values and behaviours.

### Ensuring our new staff feel at home

An extensive orientation program has been developed for both leaders and team members to ensure operational readiness and to build a solid foundation of patient-centred care and excellence.

To support the opening of Epworth Geelong, 400 new employees were oriented to Epworth's vision, culture and standards of excellence. In addition, a two-month program introduced 23 Geelong leaders to Epworth leadership practices, recruitment for excellence, performance development planning and Epworth Excellence. This support will continue over the coming 12 months with group coaching and ongoing formal development planned for key leaders.

The focus at Epworth Richmond in 2016 has been the preparation for and successful opening of the new Lee Wing. Twelve months prior to the opening, extensive workforce and succession planning was put into place to support the large workforce planning requirements for the existing hospital and the expansion of Lee Wing. This required the recruitment of approximately 400 new employees in a short period of time. The key challenge was having highly skilled and customer service-oriented staff recruited not only on time but as close to opening as possible.

### Acknowledging staff excellence

Epworth recognises the importance of providing positive feedback to staff for a job well done. Each quarter, a CEO Awards Dinner is hosted by Group CEO Alan Kinkade and the Executive team at a different Epworth site – each with a particular theme – to acknowledge the hard work and dedication of Epworth staff from across the organisation. Implemented in 2008, the awards night provides an opportunity for the organisation to say thank you to those staff who have made an outstanding contribution by living the Epworth values each day. In 2015/16, almost 200 staff received a CEO Award.

### Twilight Leadership Series inspiring Epworth leaders

Epworth held its 11th Twilight Leadership Series event during the 2015/16 financial year, with Colin Carter AM as host. Mr Carter has led a distinguished career in both the private and public sector and continues to make a significant contribution to the community in his role as the Chairman of Geelong Football club, non executive director of Seek and Lend Lease, director of World Vision and Ladder and adviser to the Boston Consulting Group.

More than 100 leaders attended the event, with Dr Peter Larkins acting as interviewer for the evening. Dr Larkins asked a range of engaging questions that allowed Epworth leaders to understand and be inspired by Colin's career journey, leadership wisdom and how a particular mentor impacted his career. Colin shared compelling arguments on the importance of an authentic values-based culture and organisation, the significance of developing future leaders, the need for work/life balance and for volunteering in the community to create a diverse and inclusive organisational culture.

The Twilight Leadership Series provides a unique opportunity for Epworth leaders to hear and learn from high-performing leaders from sectors outside of healthcare.

### Epworth exemplifying healthcare staff engagement: a Best Practice Australia case study

Epworth's engagement strategy includes a commitment to ensuring high levels of employee engagement and a positive workplace culture. This assists the organisation to deliver excellence in patient care and patient experience and be an employer of choice. To deliver on this goal, Epworth has made many strategic investments and has had numerous clearly defined programs of work.

Building on the successful implementation of Epworth's Best Practice Australia (BPA) biennial employee engagement surveys, Jacqui Parle, BPA managing director, used Epworth's staff engagement results including the journey, key initiatives implemented and the impact on patient satisfaction in a recent case study.

*The Pursuit of a Culture of Success: The Epworth Journey* was made available on the BPA's website and shared with BPA clients.

### Emphasising health, safety and wellbeing

Epworth's health, safety and wellbeing activities have grown significantly in the past year, as Epworth focuses on continuous improvements to its safety and wellbeing culture, including a campaign to develop

a safety culture within the organisation. In 2015/16, the Epworth Emmys® competition was created and launched. This short film competition focused attention on health, safety and wellbeing, and their importance at work and at home. The entries were excellent and were used across the business to raise awareness around the importance of safety. The short-listed films were presented at a movie afternoon where the following winners were announced:

#### Overall winners (prizes donated by First State Super)

- **First place:** Psychological distress has become the elephant in the room – Epworth Clinic Therapy Team, Epworth Camberwell – **\$1000**
- **Second place:** A safetication – Education, Epworth Richmond – **\$800**
- **Third place:** Stress buster ICU – ICU, Epworth Richmond – **\$500**

#### Group Chief Executive awards

- **First place:** Imagine Epworth with no accidents – Support Services, Epworth Richmond – **\$500**
- **Second place:** SLAGIATT Wars – Clinical Services, Epworth Corporate – **\$500**
- **Third place:** Safety Horror Picture Show – 2 North, Epworth Eastern – **\$500**

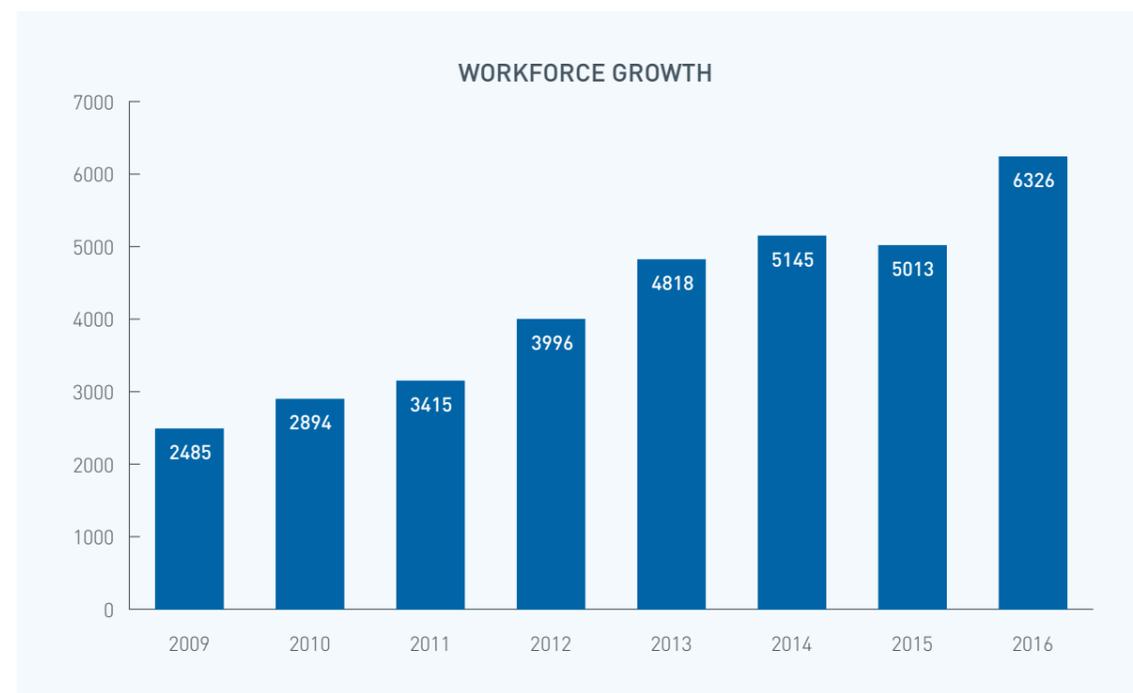
#### Special commendations

- **Can you manual handle this?** – Acute Physiotherapy, Epworth Richmond – **\$250**

- **Watch me ...** – Physiotherapy, Epworth Brighton – **\$250**
- **Wellness at work** – Marketing and Business Development, Epworth Corporate – **\$250**

Epworth's staff wellbeing program initiatives have continued to ensure there is support in place for staff and managers, including a 24/7 external confidential employee assistance program and manager assist program. In 2016, Epworth also initiated a new program building personal resilience, designed to provide staff with an understanding of resilience and how it relates to their performance and happiness at work. This session enables staff to explore their own personal resilience and gives them the tools to manage difficult and stressful situations at work.

Epworth has continued to focus on and improve safety performance with work health and safety scorecards and key performance indicators to sustain performance and accountability. In the last three years there has been a significant reduction in injuries and in lost time incident frequency rate: 2013/2014 – 28.4 per cent; 2014/2015 – 40.6 per cent; and in 2015/2016 – 31 per cent reduction. Claims costs have significantly reduced and Epworth also implemented an early intervention injury prevention program, available to all staff. The key objective is staff accountability, in particular the importance of staff advising leaders of concerns and leaders ensuring these are addressed.



### Expanding talent and leadership programs

To deliver great patient care, Epworth needs leaders who inspire quality, compassion and excellence.

In the past year, the Operational Leaders program was extended from a 12-month program to an 18-month program to enable a significant focus on emotional intelligence, a capability that has been highlighted as key in successful leaders.

During 2015/2016, 45 participants commenced the Operational Leaders program, which is aligned to a Diploma of Leadership and Management with Swinburne University. A group of 45 participants also commenced the Frontline Leaders program, which aligns to a Certificate IV in Leadership and Management with Swinburne University. The Frontline Leaders program was extended to enable a focus on continuous improvement and innovation.

In addition, Epworth continued the support of leaders identified as potential future executives, directors of clinical services and business managers.

### Developing Epworth Nurse Unit Managers to be and give their best

This financial year has seen a strong focus on developing future nurse unit managers. This included 33 leaders who went through a robust application and assessment phase and have participated in 12 months of rigorous formal development, mentoring and on-the-job application.

The nurse unit manager (NUM) program of work was developed and launched in 2015 and continued throughout 2015/2016. This program is seen as critical to ensure that Epworth continues to attract, recruit and retain top nursing talent and that key leaders are enabled to be and give their best.

Program highlights for the year include:

- **Clearly defined roles:** implementation of updated NUM, associate nurse unit manager (ANUM) and ward clerk position descriptions to ensure the roles are properly aligned and all structures are in place to support an optimum patient experience. This has been coupled with an investment into protected management time so NUMs have adequate time to meet their responsibilities.
- **Continued investment in NUM development:** all NUMs had the opportunity to complete a Diploma of Leadership and Management. A development offering to build NUMs' emotional intelligence has also been implemented which will be key in enhancing their resilience as they lead their teams in constantly evolving times. In addition, a comprehensive NUM orientation

to support new NUMs when they start in their role has been developed. Customised development to build NUMs' business acumen has also been designed.

- **Reward and recognition:** continued efforts to demonstrate to NUMs that they are valued through multiple forums such as attendance as guests of the Group CEO at the Friends of Epworth Race Day; invitation to senior leadership meetings as a professional development opportunity; and the continued availability of a NUM scholarship. In addition, a structured NUM remuneration framework was designed to ensure that NUMs are remunerated appropriately for the size and complexity of their role.

The Best Practice Australia (BPA) Engagement Survey results showed NUMs working in a culture of success and 87 per cent of NUMs thinking Epworth is a 'truly great place to work'. This is testimony to the effort being invested into the program of work, and indicates the issues most important to NUMs continue to be addressed.

### Supporting ward clerks

Ward clerks play a key role in the patient experience and ward operations. As such, a customised training and online support portal has been implemented for ward clerks in addition to increasing their resourcing.

### Integrating Epworth Excellence and customer service Epworth Excellence

There has been a strong focus during 2015/2016 on integrating the Epworth Excellence tools and frameworks into the leadership program offering, manager orientation and customer service programs. A three-day formal development program for our nurse unit managers and associate nurse unit managers has been developed along with an offering for support service leaders. This new program will ensure that there are formal development offerings for managers to learn the Epworth Excellence tools and to learn to coach and develop their staff. The program will also be part of manager orientation, to ensure promoting Epworth standards is a priority from the outset.

### Volunteer program: Supporting Epworth

More than 200 volunteers actively contribute as a valued part of the Epworth workforce to the smooth running of each site. In 2015/16, examples of volunteer patient support roles include supporting the running of the new Wig Salon at Epworth Freemasons; assisting nursing staff with caring for patients in the recovery lounge at the day procedure centre at Epworth Freemasons; assisting with the pet therapy program at Epworth Camberwell; and the volunteer music soiree program at Epworth Camberwell and Epworth Brighton.

# Redeveloping Epworth for tomorrow's patients

Epworth's purpose, to improve the health, wellbeing and experience of every patient by integrating clinical practice with education and research, includes an ongoing commitment to building and service development.

In 2007, the redevelopment of Epworth Richmond was recognised as integral to providing the best possible patient care for Victoria's growing population.

A masterplan was subsequently created, incorporating four interconnecting building 'pods' that will redevelop Epworth Richmond to provide a total of 42 operating theatres, four cardiac catheter laboratories and 777 inpatient beds, including 26 intensive care beds and a purpose-built education and research precinct.

Construction on the first of these 'pods' was completed this year and the Lee Wing became fully operational on 4 April.

As Project Director for the Epworth Richmond redevelopment, Alan Ward worked closely with the hospital executive to manage and coordinate a dedicated and professional redevelopment team, together with architects and consultants, to design and construct a clinically operational site.

"The number of people who have worked on the redevelopment since it first began in 2007 is countless. The biggest challenge is working in and around a busy operational hospital, however the intensive communication that has been provided to our staff, patients and residents has eventuated in few complaints and very positive feedback," Alan says.

"Some of the most rewarding moments of the project for me were the erection and eventual removal of the tower cranes, seeing the first prototype patient room complete for review, the first facade stone panel being erected and of course handover from Kane Construction on 19 January. Seeing what seemed like millions of staff coming through the doors to clean, stock and operate the Lee Wing in February was amazing.

"Ultimately, seeing a clinically operational site take shape, one that we can all be proud of, was a wonderful moment for all of us," Alan says.

For more than 30 years, patient Judith Moore has trusted Epworth to provide her with the best possible care for everything from lung and heart complications to a hip replacement and rehabilitation. In this time she has seen the many changes Epworth Richmond has gone through.

She also happens to be one of the first patients to experience the new Lee Wing, after being admitted to the new emergency department on opening day, 1 February, and transferred to the Lee Wing cardiac unit.

One of the first differences Judith noticed was a direct transfer in a patient-only lift.

"It was nice not having to travel down long corridors with lots of other staff and visitors walking by."

The most notable change, says Judith, is the new ward itself, which she found to be spacious, comfortable and quiet.

Judith says she has always received the best of care from Epworth staff and believes the new space will only enhance this in the future.

Project Director, Richmond Redevelopment, Alan Ward



This year, Epworth implemented a new look volunteer uniform to coincide with the opening of the Lee Wing and Epworth Geelong. The uniform provides volunteers with a sense of pride and inclusion as part of the hospital's workforce and also allows volunteers and their roles to be easily recognised.

#### Epworth Geelong corporate orientation ensuring standards of excellence

To support the opening of the new Epworth Geelong campus, the Human Resources department operated an orientation program to introduce its new team members to the vision, culture and standards of excellence that Epworth culture is built on. A two-month program that introduced 23 Epworth Geelong leaders to Epworth's leadership practices, recruitment for excellence, performance development planning and Epworth Excellence was implemented. This support will continue over the coming 12 months with group coaching and ongoing formal development planned for key leaders.

#### Brain injury research supported through NHMRC grant

Epworth's Associate Professor Gavin Williams, specialist neurological physiotherapist and research fellow, was awarded a National Health and Medical Research Council (NHMRC) Project Grant and an NHMRC Translating Research Into Practice (TRIP) Fellowship in the latest funding round. The \$661,430 NHMRC Project Grant provides for a four-year study, which will enable the expansion of Assoc Prof Williams' current randomised control trial to other brain injury rehabilitation units in Australia.

Traumatic brain injury (TBI) is the leading cause of disability among young adults, many of whom have difficulty walking. Muscle weakness is the main cause of these walking problems, but previous trials have failed to improve walking performance. Assoc Prof Williams' team has developed new strengthening exercises which focus on how quickly the muscles can contract, rather than just how strong they are. These exercises can increase muscle power by 60–74 per cent and are likely to improve a person's ability to walk.

This study will be a world-first application of these types of exercises to improve patients' walking. The NHMRC TRIP fellowship is a two-year program that aims to address an evidence-practice gap by facilitating better uptake of research findings into clinical practice.

Assoc Prof Williams' TRIP fellowship is one of 13 awarded in Australia. The project is the culmination of ten years of pilot research, and is third time lucky in the application process, after missing out on funding for the previous two years, says Assoc Prof Williams.

"Australia-wide the success rate was 13 per cent so this has been a highly competitive funding round," he explains. "For me, receiving the grant and fellowship brings the satisfaction of a lot of hard work paying off and now a lot more hard work lies ahead to bring this project to completion."

Five Epworth doctors also received grants in the NHMRC founding round: Associate Professor Chris Hovens, Dr Niall Corcoran, Professor Tony Costello, Dr Andrew Stephens and Dr Gershon Spitz.

#### Inspiring ideas shared at Cancer Survivorship Program

On 17 September, Margie Hjorth, nurse unit manager, Radiation Oncology, Catherine Carrarcher, pain and oncology services manager, and Jo-Anne Crowther, oncology liaison nurse consultant, attended the Victorian Cancer Survivorship Program Community of Practice, established by the Department of Health.

The day was facilitated by The Australian Cancer Survivorship Centre based at the Peter MacCallum Cancer Centre. The aim of the day was to share experience on change management, evaluation and sustainability in order to support improved care of cancer survivors. Guest speakers presented findings on cancer survivorship frameworks and toolkits developed to support the ongoing long-term side effects of cancer treatment.

#### MyRoster streamlining staff movement

MyRoster is an electronic rostering, time and attendance system that includes electronic finger vein scanning for employees to start and end their shifts, together with self-service functionality.

MyRoster has revolutionised the rostering, timesheet and labour hours processes. Key benefits include the elimination of manual timesheets; daily authorisation of electronic timesheets, the automation of labour hours data reporting; and 24/7, real time access to rosters and timesheets. Staff are also able to record availability/shift preferences, submit online leave requests for approval and view and print their rosters. The new system improves the efficiency and autonomy of staff, reducing the time spent on administrative tasks and increasing time spent caring for patients.

#### Staff performance shines following cleaning audit

On 10 November, Cogent visited Epworth Eastern to undertake an external audit of cleaning standards. After a thorough testing of standards across the hospital, Epworth Eastern was awarded an impressive score of 96.1 per cent. Achieving an incredible 100 per cent in some areas, including the ICU and CSSD departments, this high score is testament to the dedication and hard work of all the environmental services staff who

work tirelessly to ensure a clean and safe hospital for Epworth patients. Some of the feedback from the auditor included comments on the 'gorgeously maintained' hospital and 'amazing' auditing processes. A morning tea was held on 25 November to thank the environmental services team for a wonderful result.

#### Epworth talent recognised in Australia Day 2016 honours list

Epworth is proud that three of its people have received an honour in the Australia Day Awards, announced in late January.

Epworth Deakin Chair of Nursing Professor Mari Botti received an AM (Member in the General Division of the Order of Australia) for her significant service to nursing and to medical education, as an academic and author, as well as for her contribution and leadership in pain management research.

Epworth urology specialist and Chair of the Department of Urology, Monash Medical Centre, Professor Mark Frydenberg, received an AM (Member in the General Division of the Order of Australia) for his significant service to medicine as a clinician, educator and author in the specialty of urology and to professional medical organisations.

Epworth orthopaedic surgeon Mr John Cunningham received an OAM (Medal of the Order of Australia in the General Division) for service to medicine, and to the promotion of immunisation.

#### Asking the question — R U OK?

R U OK Day, held on 10 September, is dedicated to reminding people to ask family, friends and colleagues the question, 'R U OK?' in a meaningful way — because connecting regularly and meaningfully is one thing everyone can do to make a difference. Epworth marked the day with various activities across the sites, including holding barbecues and morning teas, giving out chocolate and more. All divisions were given a party pack containing posters, balloons and booklets and were encouraged to ask the question, R U OK?, to help promote a safe and healthy workplace.

#### Epworth remembers Chaplain John Patrick Flynn

Epworth Freemasons was sad to announce the death of Monsignor John Patrick Flynn, who died peacefully in June this year, aged 79. Father John was a missionary in Papua New Guinea for 33 years and, after returning to Melbourne, ensured that his retirement would continue to be busy and fulfilling by becoming hospital Catholic Chaplain to patients at Epworth Freemasons. Fr John had a particular fondness for Epworth Freemasons, where he also became a chaplain to staff, who very much appreciated his kindness and friendship.

#### Long service awards recognise dedicated staff

Each year, Epworth celebrates the dedication of its longest serving employees, with awards given to staff who have served the organisation for five, 10, 15, 20 years and more. Epworth recognised more than 500 staff members during this year's awards. This includes Executive Director Finance, Liz Camilleri, who celebrated an impressive 20 years with the organisation. Longest serving at Epworth Richmond is Miriam Tobias, a food services associate who has been with Epworth for 35 years.

Epworth Rehabilitation recognised Director of Rehabilitation Professor John Olver AM, for 30 years of service, while Epworth Eastern honoured Clinical Nurse Consultant Bronwyn McParland, for 25 years of service. At Epworth Freemasons three staff reached the 30, 35 and 40-year mark.

Taking home the title of longest-serving Epworth employee was Kamale Souki, at 40 years. Kamale works as an environmental services assistant at Epworth Freemasons and has been kept busy with a number of different roles during her time there, including working in the linen room, room presentation and upkeep, cleaning supervision — pretty much everywhere except the kitchen, she says.

Kamale came to Melbourne in 1963 from Lebanon when she was 18, accompanied by her uncle. Meeting her husband three years later, she has called Melbourne home ever since. "I love my job and I like the people I work with very much," she says. "I'm very happy to continue working with Epworth."

#### Epworth's valued volunteers recognised

During National Volunteer Week (9–15 May), Epworth acknowledged the incredible commitment volunteers make in providing their services across the organisation. Epworth has more than 200 volunteers giving their time across 25 different services, including hand massage, fundraising, working in the Wig Salon, driving oncology patients, administration, and providing musical services. Volunteers contribute more than 1000 hours per week in service, across all Epworth sites, and some have been volunteering with Epworth for more than 25 years.

On Monday 9 May Epworth volunteers were invited to an afternoon tea hosted by Epworth Executive members and Group Chief Executive Alan Kinkade. With presentations from Mr Kinkade and Epworth Medical Foundation Executive Director Scott Bulger, the event recognised the incredible work and commitment of all Epworth's volunteers, thanking them for their service.

Service awards were presented to volunteers who have given five, ten or 15 years of service to Epworth.

**Congratulations to the 2016 scholarship recipients**

Epworth is proud to invest in staff development through the Epworth Scholarship Program. This is a unique and highly sought-after opportunity enabling staff to expand their skills.

Scholarships are made possible thanks to the generous support of corporate sponsors and private donors to the Epworth Medical Foundation, with many scholarship donors having been previous patients at Epworth. The continued growth in the program is a reflection of the quality of care Epworth's patients and their families receive.

*Eighty-two Epworth Scholarship Program scholarships, valued at \$387,950, were awarded for use in 2016.*

The scholarship program supports development in staff's current and future roles at Epworth. An extensive range of projects are being supported in 2016, including completion of a musculoskeletal ultrasound course; attendance at speciality conferences in the areas of imaging, oncology and fundraising; completion of a Certificate IV in Training and Assessment; training in aquatic physiotherapy; along with return to study at a postgraduate and undergraduate level.

The Epworth scholarship program continues to grow and strengthen. In 2015/2016, an agreement was reached with Northwell Health in the US for five staff to have the opportunity to participate in a group study tour experience to learn from one of Northwell's areas of distinctive expertise. Northwell is one of the leading and largest healthcare providers in the US, with 61,000 staff employed across 21 hospitals.



Future NUM Talent Program Celebration Dinner — L-R: Yasmine Previdi, Alan Kinkade, Catrina Bacchetti, Alex Malley (Guest Speaker)

**Epworth nurses journey to Cleveland Clinic**

Epworth has an affiliation agreement with the renowned US teaching hospital, Cleveland Clinic. Under this affiliation, Epworth staff have an unparalleled opportunity to undertake clinical work, research and education at both Epworth and Cleveland Clinic over a two year period.

Following the success of the inaugural Cleveland Clinic Nursing Leadership Intern Program, a second cross-divisional group of eight nurses travelled to Cleveland, Ohio in May. The fully funded two-week study tour was made possible with thanks to donors and sponsors of the Epworth Medical Foundation.

The international affiliation agreement helps Epworth work toward its goal of becoming a leading research and teaching hospital. Study tour participants engaged in an observational experience specifically designed for Epworth, with each nurse spending time in the specific unit or area of their interest, as well as having the opportunity to attend the Cleveland Patient Experience Conference. On their return to Epworth, each participant was responsible for delivering a comprehensive quality improvement project focusing on learning from their experience.

Congratulations to the eight recipients for the 2016 intake: Pranitha Govender, deputy director of clinical services, Epworth Eastern; Nic Rush, nurse unit manager, Epworth Rehabilitation; Andrew Samson, hospital coordinator, Epworth Richmond; Colleen O'Hara, nurse unit manager, Epworth Freemasons; Ta Fearnside, nurse unit manager, Epworth Freemasons; Mirjana Bulatovic, nurse unit manager, Epworth Freemasons; Sibianne Mumford-Holmes, registered nurse, Epworth Freemasons; and Jamilla Simonsen, quality coordinator.

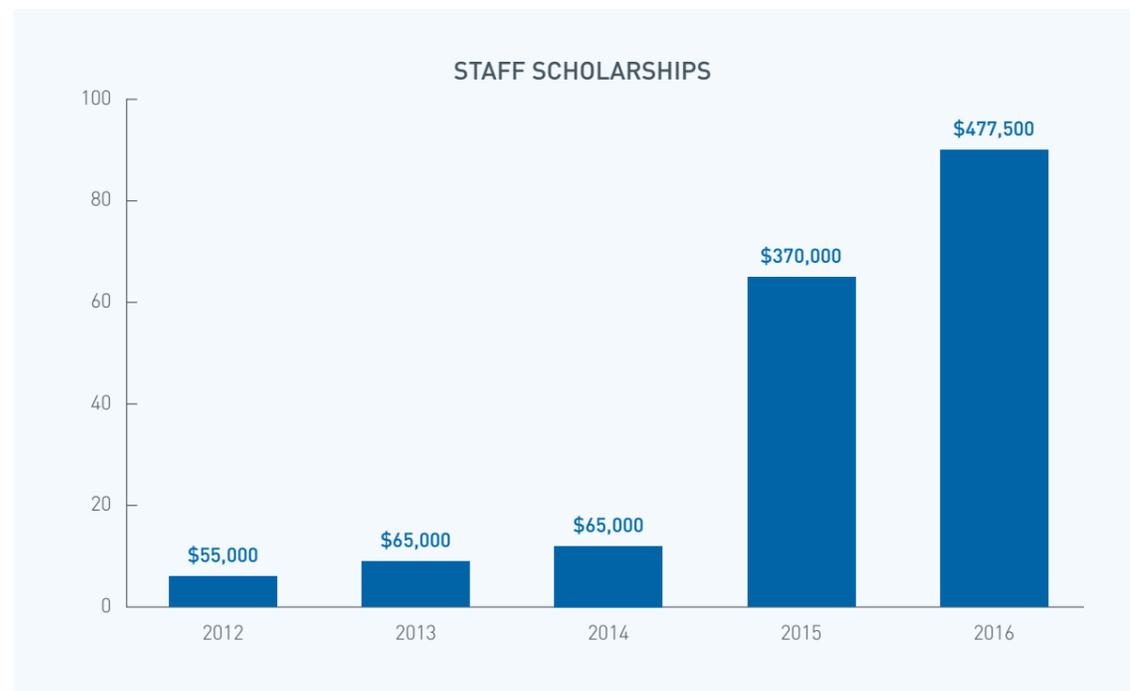


Susan Harris Foundation Nurse Scholarship — L-R: Susan Harris Donor to Epworth Medical Foundation, Education Manager Epworth Freemasons, Catherine McKellar and Group Chief Executive Alan Kinkade



Epworth Eastern scholarship recipients — L-R: Ricky Galileos, Imie Cervantes (Registered Nurse, recipient of Edwards Life Sciences Scholarship), Louise O' Connor (Executive Director Epworth Eastern), Andrea Katulla (Eplearn Manager, EN Graduate Coordinator, recipient of Dr Jack Mackay Scholarship), Krishna Subedi (Food Services Associate, recipient of Epworth Medical Foundation Scholarship), Di Allen (Nurse Unit Manager, recipient of Abbott Australasia Scholarship), Tracey Williams (Associated Nurse Unit Manager, recipient of Epworth Medical Foundation Scholarship), Kate Bennet (Instrument Technician, recipient of Medtronic Scholarship) and Michael Creavin (Theatre Technician, recipient of Friends of Epworth Scholarship).

**STAFF SCHOLARSHIP PROGRAMS FUNDED BY EMF INCREASED FROM 6 IN 2012 TO 90 IN 2016, VALUED AT ALMOST \$478,000**



# Scholarship recipients and projects

Recipient	Scholarship	Project / Activity Summary
<b>CORPORATE</b>		
Andy Fodor and Helen Delimitros	EMF Scholarship	Apply for membership to Health Informatics Society of Australia and complete the CHIA Certified Health Informatician Australasia (CHIA) qualification.
Bianca Mastroianni	Lorraine Topol Lung Cancer Scholarship	Complete a study tour of American hospitals and Royal North Shore (Sydney) to investigate how the Calypso® radiotherapy positioning system can be extended in the Epworth Radiation Oncology (ERO) department to treat other tumour sites including the pancreas.
Chris Perry	Alma Johnson Travel Scholarship	Travel to Chicago to attend the 2016 annual conference of the Radiological Society of North America (RSNA).
David Bayer	Malcolm Archer Travel Scholarship	Visit America to attend the American College of Healthcare Executives Program 'The Strategic Use of Healthcare Analytics', whilst also visiting local hospitals to gain insight into peers analytics processes.
Dean McKenzie	Malcolm Archer Travel Scholarship	Attend the American Statistical Association Conference on Statistical Practice, in San Diego, California.
Diane Oppawsky	Zimmer Scholarship	Participate in a 5-day Musculoskeletal Ultrasound course.
Ekta Jhala	Jo Curzon-Siggers Pancreatic Cancer Scholarship	Undertake a study tour of leading hospitals to investigate their treatment techniques for MR Guided SBRT and the emerging technology of MRI-Linac.
Julia Limbrey	Prof Geoffrey Metz & Dr Kaye Anderson Scholarship	Implement a Leadership Lab (a video simulation where leaders can practise their skills with a coach) at Epworth to build the capability of our leaders and attend the Coaching for Human Resource Professionals course at the Centre for Creative Leadership.
Jye Adams	Susan Harris Foundation Scholarship	Complete the Cisco Certified Network Associate (CCNA) Routing and Switching Certification Program.
Linda McGinn	EMF Scholarship	Travel to Arizona to attend the 2016 Multidisciplinary Head and Neck Cancer Symposium and participate in a study tour to The University of Arizona Cancer Centre and the Mayo Clinic in Scottsdale.
Lisa Van Haaster	EMF Scholarship	Undertake the Graduate Certificate in Clinical Education at Melbourne University.
Melanie van Werkum	Zimmer Scholarship	Participate in a 5-day Musculoskeletal Ultrasound course.
Mietta Dudley	Malcolm Archer Staff Scholarship	Study the Master in Nursing (Advanced Clinical Practice) with Deakin University.
Monique Blanchard	EMF Scholarship	Attend the 19th Annual Cancer Nurses Society of Australia Congress to be held in Cairns.
Phil Hynes	EMF Scholarship	Undertake the Certificate IV in Training and Assessment, via an online learning module with SEEK.
Rob Lumsden	Gwen Beazley Scholarship	Participate in a study tour of The University Hospital, Hamburg, and The Assuta Hospital in Tel Aviv, Israel, to investigate treatment of patients with multiple cerebral metastases using Brainlab Elements Automatic Brain Metastases planning software.
Rose Leak	Susan Harris Foundation Scholarship	Complete the Advanced Clinical Coding course offered by the Health Information Management of Australia Association.
Sandy Chamberlin	Baxter Healthcare Scholarship	Participate in a USA study tour to investigate the workflow and techniques surrounding breast density reporting and scanning.
Vanessa Dannock and Jayne Coates	St Jude Medical Scholarship	Travel to Amsterdam to attend the International Fundraising Conference, with 1,200 international delegates.
Veelyn Tan	John Hope Scholarship A	Attend and present at the International Human Factors Ergonomics conference in the UK whilst conducting a study tour in the Netherlands to look at best-practice Health and Safety initiatives.
Colleen Coghlan	John & Margaret Schneider Staff Scholarship	Investigate the viability of establishing an 'Epworth Newsroom', which would provide resources to journalists, via health information, patient stories, video content and updated commentary from expert physicians.
Maureen Eichorn	Alma Johnson Travel Scholarship	Visit the Beryl Institute in Texas to attend the Patient Experience Conference in April 2016, and following this, research information about health literacy.

Recipient	Scholarship	Project / Activity Summary
<b>EPWORTH EASTERN</b>		
Andrea Frost	Ken & Cathi Biddick Scholarship	Enrol in the Prostate Nursing Care Course, a 13-week short course run by LaTrobe University.
Andrea Kattula	Dr Jack Mackay Scholarship	Undertake online study of the Graduate Certificate in eLearning.
Catherine Glennie	Corrie Heath Nursing Scholarship	Study the Bachelor of Nursing, part time with Charles Darwin University, to transition from an Enrolled Nurse to a Registered Nurse.
Diana Allen	Abbott Australasia Scholarship	Attend and submit a paper to the 2016 Cardiovascular and Interventional Radiological Society of Europe (CISRE) Interventional Radiology Conference.
Samantha Bloomfield, Briony Lemmer, Jessica McAuliffe, Kirsten Black, Patty Harkiolakis, Krishna Subedi and Jasmine Goh	EMF Scholarship	Selected Menu Monitors will study the Certificate of Nutrition and Diet, an online course offered by Beck Health.
Imie Cervantes	Edwards Life Sciences Scholarship B	Attend the 96th American Association for Thoracic Surgery Annual Meeting at the Baltimore Convention Centre.
Kate Bennett	Medtronic Scholarship	Undertake the Certificate IV in Sterilisation Services (HLT43812) with Mayfield Education.
Michael Creavin	Friends of Epworth Scholarship	Complete the Certificate III in Health Service Assistance (Operating Theatre Technician) with Mayfield Education, leading to qualification as a Grade 2 Theatre Technician.
Sarah Morrison	Bruce & Rosalie Heymanson Oncology Nurse Scholarship	Study the Postgraduate Certificate in Breast Cancer Nursing, Royal College of Nursing, Australia.
Terri Irvine	Corrie Heath Nursing Scholarship	Study the Bachelor of Nursing part time with Charles Darwin University, to transition from an Enrolled Nurse to a Registered Nurse.
Tracey Williams	EMF Scholarship	Study a Masters in Clinical Leadership.
<b>EPWORTH FREEMASONS</b>		
Amanda Rhind	Freemasons Victoria Staff Scholarship A	Study the Bachelor of Nursing, with RMIT University, to transition from an Enrolled Nurse to a Registered Nurse.
Anna Bradley	Aya & Keith Thornton Scholarship	Complete the Graduate Certificate in Women's Health Medicine through The University of New South Wales.
Catherine McKellar	Susan Harris Foundation Nurse Scholarship	Participate in the Nursing Leaders Program at Wharton, partnered with the University of Pennsylvania.
Helen Marinakis	Epworth Special Events Committee	Complete the Master of Nursing (Graduate Certificate of Nursing Practice-Perioperative).
Jessica Cadman	Medtronic	Undertake the Bachelor of Nursing bridging course for Enrolled Nurses.
Kate Hetherington	Freemasons Victoria Staff Scholarship B	Study a Certificate IV in Training and Assessment.
Kristine Meredith	EMF Scholarship	Study in the area of continence promotion and management via the Continence Foundation of Australia.
Maria Scoles	EMF Scholarship	Study the Graduate Certificate in Orthopaedic Nursing at Australian Catholic University.
Nic Auger	Freemasons Hospital Association Scholarship B	Undertake the Graduate Certificate of Theology.
Rachel Waugh	Raphael Family Freemasons Nurse Scholarship	Complete the Postgraduate Diploma in Perioperative Nursing through Deakin University.
Suzanne Grounds	Glenda Buonopane Nursing Excellence Award	Attend the Advanced Life Support in Obstetric (ALSO) Course.
Wendy Dawson	Freemasons Hospital Association Scholarship A	Undertake the Master of Advanced Clinical Nursing (Minor Thesis).

Recipient	Scholarship	Project / Activity Summary
<b>EPWORTH REHABILITATION AND MENTAL HEALTH</b>		
Adam McKay, Bronwyn Coward and Tash Kourasanis	John Hope Scholarship B	Identify and trial the best methods for assessing agitated behaviours after Traumatic Brain Injury (TBI). A joint initiative between the ABI neuropsychology and nursing teams.
Brit Gordon	EMF Scholarship	Commence a Masters of Business Administration by distance learning with the Australian Institute of Business.
Candice Fieg	Tony & Virginia Browne Scholarship	Undertake a study tour to meet and collaborate with the leading researcher in this area, Dr. Michael Twohig of Utah State University, and present on the program. This scholarship follows the development of a group-based therapeutic program for individuals with Obsessive Compulsive Disorder (OCD).
Catherine Barber	Keith Irving Scholarship A	Complete the Aquatic Physiotherapy Level 3 course run by The APA Aquatic Physiotherapy Group.
Christina Cooper-Wallis	Keith Irving Scholarship B	Study the module that focuses on mental health nursing of the older aged person under the Masters in Mental Health Nursing.
Emma Caldwell	Jreissati Family Staff Scholarship	Launch a project that aims to explore best practice in respect to health and wellbeing, including diet, for patients with a mental health diagnosis.
Felicity Lorains, Annalle Aleiligay and Karen Schokman	James & Linda Wang Scholarship	Implement and evaluate the Memory Skills Group — which was developed at the University of Sydney — an evidence-based program for improving everyday memory functioning in individuals with an acquired brain injury.
Judy Dungey	Alma Johnson Community Scholarship	Record a history of the Epworth Rehabilitation ABI (acquired brain injury) Unit.
Kane Fitzpatrick	Alma Johnson Community Scholarship	Complete work around increasing staff knowledge about sexuality when working with clients with neurological conditions.
Kerryn Searle, Rosaura Miranda, Kinaz Naji and Julie Tamlin	EMF Scholarship	Develop the patient lounge area to create an environment that enhances the patients' experience at Epworth Brighton.
Laura Kagan and Jemma Keeves	Soroptimist International of Melbourne	Undergo further training in the assessment and prescription of customised wheelchairs for the lower-limb trauma amputee patients.
Micahel Ponsford	Ken & Cathi Biddick Scholarship	Under current study in the Graduate Diploma in Clinical Education undertake a module on Comparative Clinical Education, which aims to explore clinical teaching in select countries.
Rochelle Gannon	Alma Johnson Travel Scholarship	Undertake a one week study tour to Edith Cowan University in Western Australia to observe their exercise programs and look at research projects and outcomes for oncology patients.



Cleveland group — L-R: Sibaunne Mumford-Homes (RN Epworth Freemasons), Colleen O'Hara (Project Manager Cancer Service Advisory Committee), Nic Rush (NUM Rehabilitation), Jamilla Simonsen (Quality Coordinator Epworth Freemasons), Sharon Donovan (Executive Director Clinical Services), Mirjana Bulatovic (NUM Epworth Freemasons), Pranitha Govender (Deputy Director of Clinical Services Epworth Eastern), Ta Fearnside (NUM Epworth Freemasons), Andrew Samson (Hospital Coordinator & ANUM Epworth Richmond)

Recipient	Scholarship	Project / Activity Summary
<b>EPWORTH RICHMOND</b>		
Alice Whitbread	Sue MacLennan and Family Training Scholarship	Undertake the Graduate Certificate of Nursing Practice (Perioperative) specialising in PACU Anaesthetics offered through Deakin University.
Beth Tippett	Abbott Australasia Scholarship	Attend the Asian Interventional Cardiovascular Therapeutics (AICT) Congress meeting.
Catherine Huwanga	Hyden Family Oncology Nurse Scholarship	Study a Master of Palliative Care.
Catrina Grey	EMF Scholarship	Complete a Certificate in Paediatric Nutrition and Dietetics, through the Royal Children's Hospital.
Claire Coyne	Jenny Bentley Medal	Attend the Cleveland Clinic Patient Experience Summit, including the Communication Workshop, as well as attending local Melbourne ICU departments.
Ema Manoilova	Epworth Heartbeat Richmond Cardiac Nurse Scholarship B	Attend the prestigious EuroPCR conference in Paris.
Felicity Black and Meredith Elliot	GE Healthcare Scholarship	Attend 32nd Annual Paediatric Nursing Conference in Philadelphia USA.
Fiona Williams	Alma Johnson Travel Scholarship	Participate in the Studer Leadership Conference.
Hannah Lambert	Tom Wogan Nurse Scholarship	Complete the Graduate Diploma of Perioperative Nursing Practice.
Jennifer Straw	Epworth Heartbeat Richmond Cardiac Nurse Scholarship A	Commence the Master of Nursing Practice (Cardiac Care) at Deakin University.
Jonathan Downie	Dr Jennifer Johns Cardiology Scholarship	Complete the Graduate Diploma in Cardiac Ultrasound, an online course with the Queensland University of Technology (QUT).
Julia Trofimiuk	Zig and Helen Inge Nursing Scholarship	Undertake the Bachelor of Nursing via correspondence at Charles Darwin University, to transition from an Enrolled Nurse to a Registered Nurse.
Katreace Mckie	Benno Ihle Intensive Care Nursing Scholarship A	Complete the Master of Nursing Practice.
Lilian Grace Yangot	Edwards Life Sciences Scholarship A	Attend the 30th EACTS (European Association for CardioThoracic Surgery) Annual Meeting.
Madison McGenniken	Tom Wogan Stroke Nurse Scholarship	Undertake a Post Graduate Certificate in Clinical Nursing, specialising in the stream of Neuroscience.
Mark Clarke Wakeling	Benno Ihle Intensive Care Nursing Scholarship B	Complete a Master of Nursing Practice (Intensive Care Specialty) through Deakin University.
Michelle Newland	Dean Paton Emergency Department Nurse Scholarship	Attend the 2nd Global Conference on Emergency Nursing and Trauma Care held in Stiges, Spain.
Olivia Brown	2LP Scholarship	Undertake Postgraduate studies in Clinical Practice, majoring in Orthopaedics, at Australian Catholic University.
Olivia Leary and Zoe Jolly	Abbott Australasia	Attend the prestigious EuroPCR conference in Paris.
Pauline Fogarty	Matthew and Audrey Voss Scholarship	Participate in a course on Theatre Utilisation and Patient Flow at Franklin Dexter.
Sally Matthews	Advantage Salary Packaging Scholarship	Implement a face-to-face clinical pre-admission service for high risk surgical patients.
Ute Geiss	Malcolm Archer Scholarship	Complete a Certificate IV in Patisserie.
Vanessa Webb	Tom Wogan Nurse Scholarship	Study a post graduate course in perioperative nursing at Deakin University.
Ben De Zoete, Ron Sultana and Bill Nimorakiotakis	EMF Scholarship	Evaluate a novel and innovative pilot of weekend physiotherapy service in the Emergency Department at Richmond.



## OUR DOCTORS

Our doctors are recognised for their dedicated and patient-centred approach to care

Epworth specialists are dedicated to improving the health, wellbeing and experience of every patient. Our doctors pride themselves on creating an environment of trust, expertise and compassionate care for patients and their families. To enable our doctors to deliver this high standard of care, Epworth provides a supportive professional environment that sustains excellent and productive specialists who are committed to Epworth's values.

## MEDICAL SPECIALISTS

### Updated Epworth By-Laws

The Epworth By-Laws provide the governance structure for all medical and dental appointments at Epworth. In February 2015, the Epworth Board of Management approved revised Epworth By-Laws, which came into effect on 1 July 2015. These By-Laws represent a significant update on previous versions, strengthening the role of divisions and clinical institutes in the initial and subsequent appointment of specialists.

The revised Epworth By-Laws, along with the new Doctors Charter, were published online, with a combined printed version circulated to all appointed doctors in May 2016.

### Growing our specialist medical team

In 2015/16 Epworth appointed 793 specialists, a significant increase on the two preceding financial years. Included were 342 new specialist appointments compared, to 163 in 2014/15 and 134 in 2013/14. This reflects the growth in Epworth's clinical reach and services, including the new developments at Epworth Richmond and Epworth Geelong.

### Epworth specialists harness the power of 3D printing

Epworth has been a leading innovator in the application of 3D-printing technology, including 3D-printed jaws and pelvic replacements.

Epworth specialists have embraced this technology and the lifelong benefits for patients. In FY 2015/16, a number of successful operations were performed utilising this technology, to the benefit of each patient's quality of life.

In 2016, Professor Richard de Steiger harnessed a breakthrough solution for two patients with a lifetime of arthritic problems. The first patient had been confined to a wheelchair after suffering severe rheumatoid arthritis, having her first hip replacements at the age of 28 and undergoing multiple surgeries in later years. The second patient suffered from ankylosing spondylitis — a form of spinal arthritis — from age ten and had her first hip replacement at 27. She sought out Prof de Steiger's help because she had been reliant on crutches since April 2015 and her specialist wanted longer lasting results for someone with her condition. Both women presented with severe bone loss in the acetabular socket.

"The reconstructive devices usually involve a preoperative CT scan which acts as the template. Segmentation of the bony anatomy is relatively straightforward and this allows printable models to be generated," Professor de Steiger says.

The 3D-printed parts are made in Belgium by MobeLife. Using CT scans of the pelvis, 3D anatomical models are generated to mimic the implants in situ and parts are manufactured from titanium based on the models and using a 3D printer. Titanium has excellent biocompatibility, osseointegration and a relatively low elastic modulus which can mimic bone.

A 3D-printed part provides safer surgical solutions for very complex problems than other options available. Prior to this technique, surgery would have required the use of off-the-shelf screws and plates that had to be bent to conform to the patient's altered anatomy.

### ABC's Dr Norman Swan hosts Epworth Q&A at medical leaders' dinner

One hundred and twenty-five of Epworth's leading specialists attended the medical leaders' dinner in September for a Q&A-style evening. Following the theme of 'The Future of Medicine at Epworth and Beyond', two panels of Epworth doctors considered a wide range of topics, facilitated by ABC journalist Dr Norman Swan.

Questions raised covered the developing role of private not-for-profit hospitals, specialist fee-setting, medical education, research, super-specialisation, patient consent, clinical freedom, health financing, performance monitoring, future care models for multi-morbidities, women in medicine, and how doctors should look after themselves.

An internal podcast of the discussions was recorded and distributed to participants along with written comments — 'messages in the bottle' — made on the night. The overwhelming feedback received showcased the evening as one of engagement and enjoyment.

### Dr Ben Tran receives 2015 Peter J Dohrmann Medal

Dr Ben Tran, a medical oncologist from Epworth Freemasons, was awarded the 2015 Peter J Dohrmann Medal. Dr Tran will use the bursary to improve knowledge and outcomes for Epworth patients with bladder cancer. The Peter J Dohrmann Medal was inaugurated in 2013 to mark the outstanding contribution made by Mr Dohrmann as Epworth's medical director over ten years, prior to his retirement from Epworth in 2012.

Bladder Cancer Advocacy Network (BCAN) is a community of advocates, survivors and researchers focused on bladder cancer. The BCAN Scientific Advisory Board participates in an invitation-only, bladder cancer-focused symposium.

Dr Tran, whose win was announced at the medical leaders' dinner in September, will use the Peter J



Dohrmann grant to fund attendance at this prestigious symposium, at which he is the first oncologist outside of North America to be invited to participate. This will allow Dr Tran to bring back knowledge that can improve outcomes for Epworth patients, while also promoting Epworth as an excellent site for clinical research.

### Epworth specialists train local surgeons in Myanmar

In 2015, Epworth Freemasons urologists, Associate Professor David Webb and colleague Dr Yee Chan spent time performing live surgical procedures at a workshop in Myanmar. The medical profession in Myanmar faces the impact of a rising incidence of kidney disease, but nowhere near the facilities or trained surgeons available to treat it.

The Second Myanmar Nephro-Urology Conference helped local doctors and surgeons to benefit from the generosity of their peers from Australia, the UK and Scotland. The program's goal is to restructure the current surgical training system in Myanmar — where, for example, there are only 16 urology specialists and around 30 students in a population of approximately 50 million.

"There aren't nearly enough urology surgeons in Myanmar to cope with the burgeoning problems of kidney stones or kidney disease. Dialysis is rare to non-existent, lithotripsy does not exist and unfortunately kidney stones or kidney disease is usually diagnosed late, so there is a long transplant list," says Assoc Prof Webb.

This was Assoc Prof Webb's sixth pro bono trip to Asia (including Vietnam and Sri Lanka), and his second to Myanmar with a focus on training local urologists in the removal of painful kidney stones. After the establishment of Urology Victoria at Epworth Freemasons almost two decades ago, Assoc Prof Webb and Fellows at the practice instituted a pro bono service in Asia to share their expertise in nephro-urological conditions.

Dr Chan, who demonstrated a laparoscopic donor nephrectomy, acknowledges that kidney transplants from compatible live donors would be one way to decrease the death rate from kidney disease, but this would require a great deal of education.

Assoc Prof Webb performed the first keyhole surgery to remove kidney stones from a patient in the 1980s, and performed the first mini-perc stone removal on a six-month-old baby in 1990.

### A commitment to innovative cancer care

Epworth was delighted to announce the appointment of Professor Miles Prince as Professor/Director of Molecular Oncology and Cancer Immunology in early 2016. Professor Prince's five-year appointment launches a new area within the Cancer Services Clinical Institute and represents an important and innovative development in cancer care and personalised medicine at Epworth. The new position, based at Epworth Freemasons, will allow Epworth to bring the latest innovation in cancer treatment — individualised mapping of cancer cells to create targeted treatments — to patients.

In 2014, Professor Prince was awarded Membership of the Order of Australia (General Division) for significant services to blood cancer research, patient care and philanthropy leadership. His new role at Epworth will be held in conjunction with the School of Medicine, The University of Melbourne, and in partnership with the Victorian Comprehensive Cancer Centre. Professor Prince holds major Australian, American and European research grants and has published more than 350 journal articles. His clinical research in the last 15 years has involved the development of new targeted treatments for blood cancers including monoclonal antibodies, cell-based therapy, gene therapy and new epigenetic agents.

## From pain to progress using 3D printing

*“I say to people ‘I’ve been rebuilt — I’m a new person!’”*

“When I was little I used to do a lot of sport and I noticed I would get a lot of pain, particularly in my hips. When I was 10, I told my mum and we went to the doctor, who said it was just growing pain and put me on an anti-inflammatory. No one really knew much about it. As I went through high school I got a lot of pain in my back, in my spine mostly and down my legs. It felt like I had ants eating me from the inside. How do you explain that feeling to someone?” Diane says.

After more than a decade of not knowing what was causing her debilitating pain, Diane at age 23 was diagnosed with ankylosing spondylitis (AS), a form of spinal arthritis.

“When you get inflammation of a joint, you get swelling and redness and then your immune system thinks there’s an infection in there and begins to gobble up what it thinks is foreign tissue but in fact it’s eating up cartilage and good tissue, which is when you get bone rubbing on bone,” says Diane.

“My hips deteriorated very quickly. I was maybe 27 and had just been married the year before and I found I couldn’t walk. The surgeon was reluctant to operate, as he thought I was too young but I knew I didn’t have a choice, I couldn’t walk from the bedroom to the bathroom.”

Three months after another surgery, to replace the existing prosthesis in her left hip in July 2015, Diane had an x-ray to check her progress.

“The left side looked great. In the right one, however, the old prosthetic had broken through and the pelvis had broken. My right leg was actually shorter, as the bone had gone up into the pelvis. My whole pelvis was crooked.”

With a standard prosthesis no longer safe to use, Diane’s surgeon consulted with Orthopaedic Surgeon, Professor Richard de Steiger on possible alternatives. In response, Richard harnessed a breakthrough solution using 3D-printed parts made in Belgium by Mobelife, to ensure Diane had a safer and longer lasting replacement.

Richard says orthopaedic surgery has benefitted enormously over the last few years from the rapid advances in 3D printing applications.

“The use of 3D-printed custom parts provides safer surgical solutions for very complex problems. Prior to this technique, surgery would require the use of off-the-shelf screws and plates that have to be bent to conform to the patient’s altered anatomy. With 3D printing the implant is manufactured to suit the existing anatomy which makes surgery safer, quicker and less complicated.”

Following her surgery in November, Diane is delighted that both legs are the same length.

“Christmas last year was so happy. I was off the crutches and could really celebrate. It’s like I got my life back again. It’s so hard not being mobile. Even now just to go shopping or go for a walk, it gives me a new lease on life. I’ve got a smile on my face all the time now. I say to people ‘I’ve been rebuilt — I’m a new person!’”

Find out more about Diane’s story in a short video available on Epworth’s YouTube channel.

Pictured: Diane Grech



**= PROGRESS**



## Mapping your tumour's fingerprint — a personalised approach to cancer care

Cancers are usually grouped anatomically for treatment: by bowel, breast or lung for instance, as the most relevant expertise historically was surgical. Surgery remains the most important treatment for localised cancer but when the intention is to treat or prevent widespread cancer the biology of the tumour becomes more important.

"Now, what the cancers have in common often crosses those old anatomical boundaries. It may well be if the importance in treatment is the drug and not the surgery, this may impact the current division of labour within cancer streams," Dr Stephen Vaughan, Epworth's Cancer Services Clinical Institute Director, says.

While the idea of a personalised approach to medicine is nothing new, it has risen to popularity in recent times due to advances in molecular research. More specifically, there has been a focus on genomics and bioinformatics; the understanding of how a disease responds differently in each individual — potentially allowing doctors to tailor their treatments.

Epworth's new Professor/Director of Molecular Oncology and Cancer Immunology, Professor Miles Prince, is working on 'tumour profiling', a new way of diagnosing and treating cancer. Miles' five-year appointment launches a new area within the Cancer Services Clinical Institute and represents an important and innovative development in cancer care and personalised medicine at Epworth.

The new position, based at Epworth Freemasons and held in conjunction with the School of Medicine, The University of Melbourne and in partnership with the Victorian Comprehensive Cancer Centre (VCCC), will allow Epworth to bring the latest innovation in cancer treatment — individualised mapping of cancer cells to create targeted treatments — to Epworth patients.

"Our vision is that patients will be able to walk through the door here at Epworth to have their tumour barcoded, to give them the ultimate cancer diagnosis," Miles says.

"This new personalised approach to cancer allows us to translate the latest in science and technology into Epworth's patient-centred clinical setting," Stephen says. "We're not going to forget about patients and concentrate on the molecular biology of their tumour. We are going to treat them holistically."

"What has been the game changer has been our ability to sequence the genome, where we now know every amino acid, every component across all of the 20,000 genes of the body. So we can now compare people's genes to this template of normality. To sequence the genome took almost 10 years. We can now do that for people in three days," Miles says.

"The challenge is that all this new science, like every new advance in medical treatment and technology, needs to be introduced into our current cancer treatment frame work," Stephen says.

"Epworth is doing something brave, committing resources to the future of cancer treatment. It is out there to be harnessed but it relies on resources and commitment. Epworth will become the place to go for personalised medicine. If you want to know the most about your cancer, this is the place to come." Miles says.

### Epworth's dedication to specialist education

Epworth's Clinical Institute education program has seen an expansion of its symposia offerings. In excess of 600 attendees benefited from symposia hosted by clinical institutes in the areas of obstetrics and gynaecology, cardiac, endoscopy, perioperative medicine, rehabilitation and musculoskeletal. An impressive array of speakers sourced from Epworth's pool of experts were joined by national and international experts.

### 200th core valve a milestone in cardiac care

In March, Epworth Richmond completed its 200th TAVI (transcatheter aortic valve replacement) procedure using the Medtronic CoreValve device.

This milestone event took place in the hospital's new hybrid biplane theatre, attended by the cath lab TAVI team, cardiologist Dr Tony Walton, and Laurie Hindom and Toni Higgins from Medtronic. The CoreValve system enables the replacement of a diseased aortic valve without open-heart surgery or surgical removal of the native valve. This minimally invasive surgical option reduces operating time and allows for a shortened recovery period for patients.

Dr Walton performed the first CoreValve procedure at Epworth Richmond in March 2010, and the program has grown steadily since to be the largest private hospital program in the country.

All of this has been achieved with excellent patient outcomes and very low mortality and stroke rates. Dr Walton attributes this incredible success rate to a highly-skilled team and access to top-of-the-line facilities.

"This could not have been achieved without a fantastic team including medical and nursing staff, NICU and Epworth radiology. The hybrid lab has been a great step forward to doing this more complex work," Dr Walton says.

### Epworth Medical Imaging builds its radiology team

In September 2015, Associate Professor Pramit Phal was appointed as clinical director of Epworth Medical Imaging (EMI), to lead a dedicated team of radiologists. Assoc Prof Phal joined Epworth from his previous posting as deputy director of radiology at The University of Melbourne, and consultant radiologist and director of MRI at The Royal Melbourne Hospital.

In addition to comprehensive general diagnostic and procedural radiology skills, Assoc Prof Phal's specific area of expertise is in neuroradiology, in particular magnetic resonance imaging of the brain, spine and ear, nose and throat. He also has a strong focus and track record in education and research.

In August 2016, Assoc Prof Phal was appointed to the Epworth Neurosciences Clinical Institute Executive, furthering his clinical leadership skills.

Dr Alain Lavoipierre joined the EMI team in May 2016 as consultant radiologist in the field of urology. Dr Lavoipierre's career is highly distinguished and he is regarded as a pioneer in prostate MRI, transrectal ultrasound and biopsy in Australia. A keen researcher, he has won several awards and has been the recipient of a number of research grants. Dr Lavoipierre has chaired scientific sessions at local and international meetings and is a member of 12 professional societies. He has a particular expertise in prostate MRI, renal biopsies and contrast enhanced ultrasound of renal lesions, as well as CT urography and urinary tract sonography.

### Epworth Medical Imaging launches website

In partnership with Sonic Healthcare, Epworth Medical Imaging created a highly functional website for its patients and doctors. Features include online bookings, service offerings and team profiling. The website also provides access for GPs to Epworth Medical Imaging's app and online reports, referral pad ordering and more. Visitation to the website has been growing monthly, with more than 9500 visitors since September 2015. Epworth developed its own medical imaging service, in partnership with Sonic HealthCare, in 2014. The new service offering enables Epworth to provide a more coordinated service and greater continuity of patient care across all hospital services.

### New leadership guides Clinical Institutes into the future

Six years since the establishment of Epworth Clinical Institutes, expressions of interest were sought for six new director positions. This has occurred in cardiac sciences, critical care, internal medicine, neurosciences, rehabilitation, mental health and chronic pain as well as musculoskeletal. A mix of incumbents and new staff sets up for a fruitful period.

All 11 clinical institute directors are now supported by clinical institute executive committees with representation from sites, specialties and management. These committees are charged with supporting and advising directors with a focus on leadership; audit, quality and patient experience; research; education and strategic development. These committees also have a key role in selecting Epworth's medical specialists via scope of practice assessment of applicants in line with foundation by-laws.



## Stopping Alzheimer's in its tracks

There is currently no cure for Alzheimer's disease, a form of dementia affecting parts of the brain managing thought, memory and language. More than 350,000 Australians currently live with dementia, with this figure expected to rise to almost 900,000 by 2050 without advances in medical research.\*

The affect of the disease on sufferers and their loved ones is devastating. Friends and family often need to take on the role of carer, and witness significant changes in independence and personality as the disease progresses.

Epworth Camberwell is currently a site for two large international studies into possible preventative treatments for Alzheimer's disease, testing the same class of drug on different patient groups.

"Alzheimer's is something that starts years before the overt dementia actually begins, with a very slow build up of amyloid protein in the brain," says lead researcher, Dr Peter Farnbach, Director, TMS Program, at Epworth Camberwell.

"There have been medications that might compensate for a while and there are things that are known to be helpful like exercise and eating well but

essentially it's regarded as an untreatable condition leading to progressive dementia and death."

The trials are currently testing two drugs, known as beta amyloid cleaving enzyme inhibitors or BACE inhibitors. The drugs prevent the accumulation of beta amyloid in the brain, a protein thought to be the first step in a cascade of events leading to dementia.

"This is really the first medication showing promise in preventing the accumulation of beta amyloid in the brain," Peter says.

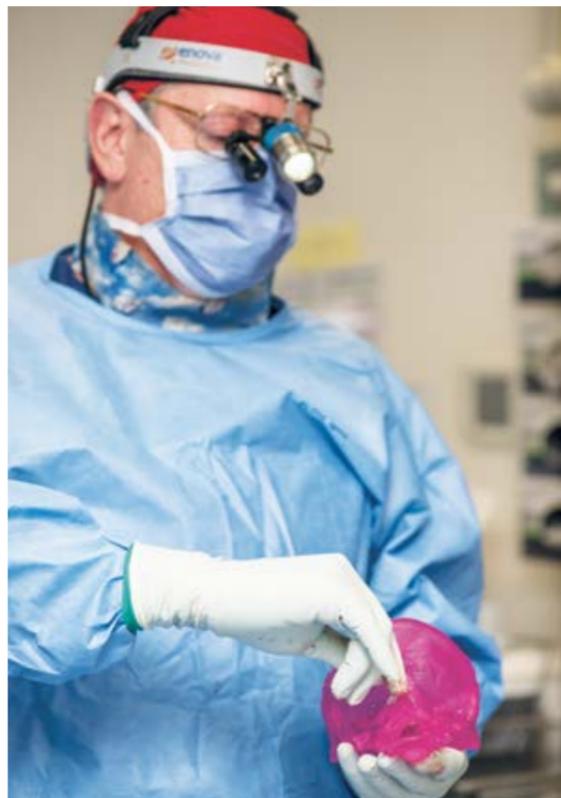
"The hope is if these drugs work, people who are at risk can have what is called a SPECT scan, which will show amyloid accumulating. They go on one of these medications and are able to avoid dementia altogether. It really has the potential to be a game changing approach to Alzheimer's."

Clinical Study Coordinator, Bodil Hook says, "One of the patients, involved in the study for about six months, has recently gone back to his geriatrician and scored better on the standard assessment the geriatrician administers — that never happens in Alzheimer's patients. His family and friends have also noticed a difference in his memory. It is possible that there may be a cure for Alzheimer's in the next five to 10 years, it's all very exciting."

"As the population gets older we need to find some way of getting control of this illness, of getting on top of it," Peter says.

"You only have one brain and this medication is potentially something that's going to protect it."

\*[www.fightdementia.com.au](http://www.fightdementia.com.au)



### Strengthening medical audits for better patient outcomes

In a further reinforcement of Epworth's medical audit capacity, new audit programs were implemented in vascular surgery, urology, orthopaedics and gynaecology. These audit programs will follow the same principles of models used in other specialties capitalising on efficiencies and expertise developed in those other areas. The audit program identifies patient episodes for review where a flag is triggered.

In a separate but aligned development, general surgery is now receiving more comprehensive audit support through implementation of a custom-built system that has been tailored to more accurately reflect surgical terminology regarding diagnoses, procedures and complications. This system automatically captures pre-existing data from hospital systems as well as clinical input via the Point of Care through a web interface. Lessons gathered through all regular audit reviews are disseminated to the broader institute membership to enhance patient care.

### A pioneering win for corporate responsibility

Dr Bronwyn King, radiation oncologist at Epworth, was in Geneva in May to celebrate an announcement by French insurer AXA that it will stop investing in the tobacco industry. Citing the impact of smoking on public health, AXA said it would divest its €200 million

equity holdings in tobacco companies immediately to support the public health efforts of governments around the world.

As a young doctor, Dr King was deeply affected by the devastating impact of tobacco on her patients. Years later, she discovered she had been an unwitting investor in tobacco companies through her superannuation fund and felt obliged to try to bridge the gap between the health and finance sectors.

Dr King founded Tobacco Free Portfolios in 2010, contributing to more than 36 Australian super annuation funds divesting tobacco stocks worth almost \$2 billion. Tobacco Free Portfolios now engages globally across the banking, finance and insurance sectors with particular focus on the largest pension funds and sovereign wealth funds.

In 2015, Dr King was awarded the VicHealth Award for Preventing Tobacco Use. AXA is believed to be the first global insurer to announce the introduction of a tobacco-free investment mandate across all of its financial products. AXA Chief Executive Thomas Buberl quoted the World Health Organisation's figures that tobacco kills six million people a year and that this figure is expected to rise to eight million by 2030, mostly in developing countries.

The announcement was made at an event during the World Health Assembly, hosted by HRH Princess Dina Mired of Jordan and the Union for International Cancer Control in May.

### Partnering with the AFL Doctors Association

Epworth entered into a partnership in February 2016 with the AFL Doctors Association for a period of three years. Epworth is a leader in sports and musculoskeletal medicine and many former and current AFL doctors provide their services at Epworth Richmond. This partnership was seen as providing great benefits for both organisations. In addition to providing public recognition of Epworth's role in sports medicine through the branding on AFL doctors' vests during AFL matches, the partnership allows for cross-training opportunities and provision of speakers and development of specialised services, such as HealthCheck for AFL coaches.

### Epworth's golden girl makes her mark

Epworth can lay claim to a world record holder, after Epworth HealthCheck and breast care physician Dr Bridie O'Donnell broke the women's cycling's world hour distance record in January.

Dr O'Donnell produced a cycling masterclass to ride 46.882km at the Adelaide Super-Drome, eclipsing the

46.273km that American Molly Shaffer Van Houweling set last September.

"I can't believe I broke a world record," Dr O'Donnell said. "I really feel like this is the greatest thing I've ever done."

### Establishment of a senior registrar role at Epworth Clinic at Epworth Clinic

A senior registrar role has been established at the Epworth Clinic, through Austin Health and The University of Melbourne. The registrar role is for six to 12 months, to support the medical, nursing and allied health staff on the clinic wards. There is scope for the registrar to pursue interests in psychotherapy, seeing selected clients in the consulting suites with input from their college supervisor. The role also allows the registrar to enhance their teaching and educational skills by delivering education sessions to allied health and psycho-education groups, as well as to inpatients.

The Epworth clinical trials unit may also be accessed by registrars wishing to complete the scholarly project component of their training requirements.

### Rapid response service improves access to psychiatric assessment

Epworth Clinic has launched a 'rapid response' service, providing GPs in the area access to timely psychiatric assessment by the registrar — usually within 48 to 72 hours. The registrar then has the option of referring the patient on to Epworth Clinic for more formal outpatient treatment by a psychiatrist, or after discussion with their supervisor, referring back to the GP with a management plan.

The service was developed in response to GPs in the area finding it difficult to access psychiatric services for their patients. Patients in this group were often reluctant to access the public system via an emergency department. The service now enables GPs to create pathways for people not suitable for a crisis assessment treatment team but also in need of timely care, and has been received positively by local practitioners.

### Vale Associate Professor Gish New

Epworth remembers Associate Professor Gish New, who passed away in June.

Assoc Prof New was well known to Epworth Eastern staff and doctors — she was an inaugural doctor at Epworth Eastern working frequently in the cath lab and caring for many patients in the cardiac care unit and 2North through the years. As director of cardiology at Eastern Health and with her Epworth Eastern work, Assoc Prof New was a major contributor to cardiology in Australia. She will be missed by all.

### Remembering the life of Mr Ian Torode

Epworth honours Mr Ian Torode, who passed away in August 2015 after a brief period of illness. Ian was a valued member of the Epworth community for more than 30 years, commencing his private practice at Epworth Richmond in 1983. As an orthopaedic surgeon he provided great care to many children, both at Epworth Richmond and at the Royal Children's Hospital. He will be fondly remembered and greatly missed by all the children he treated and their families, all Epworth staff and his many colleagues.

### Helping patients manage chronic spinal pain

In 2015/16, Epworth initiated a five-year project to measure the outcomes and safety of neuromodulation devices, used for management of chronic pain. This audit project will include all patients undergoing insertion of neuromodulation devices at any Epworth site.

Neuromodulation systems deliver electrical pulses to the spinal cord or peripheral nerves, modulating the transmission of pain signals to the brain. Care of these patients is undertaken by spinal surgeons and/or pain specialists. The audit project will monitor in-hospital procedural success and complications and then involve follow-up of patients to monitor patient-reported outcome measures.

Funding of the project (\$500,000) has been achieved with Epworth neurosurgeon, Mr Paul D'Urso and Dr Nick Christelis, an Epworth pain specialist, in partnership with Boston Scientific and St Jude Medical. Mr D'Urso and Dr Christelis will lead the project to help understand the effectiveness of neuromodulation devices in the management of chronic pain.

### Boost to ENT services at Epworth Richmond

Epworth was able to enhance the ear, nose and throat (ENT) surgical services at Epworth Richmond with the purchase of a KTP laser, enabling increased ability to treat laryngeal conditions. Epworth is the only private hospital in Melbourne to provide this technology. The KTP laser features Starpulse technology, allowing precise delivery of laser treatment to the laryngeal and associated areas, resulting in superior patient outcomes.

Epworth has also recently commenced transoral robotic surgery (TORS) at Epworth Richmond. TORS offers patients with throat cancer a far less intrusive surgical treatment and precise removal of cancerous tissue. Purchase of a specialised navigation system and instrumentation has enabled Epworth surgeons to also provide endoscopic skull base surgery. This type of surgery requires both ENT and neurosurgeons working collaboratively on conditions affecting the complex brain and facial structures.



## BUILDING AND SERVICE DEVELOPMENT

Investing in excellence:  
expanding our reach of  
care through new and  
improved facilities

The major projects Epworth invests in are designed to enhance our patient services, ensuring we meet the needs of today's patients while anticipating their needs for tomorrow.

We redevelop and introduce new services within existing hospitals and expand to new locations, to ensure quality healthcare is always available and Epworth consistently remains a private healthcare provider of choice across Victoria.



Upgraded theatres at Epworth Freemasons

**Theatre upgrade complete at Epworth Freemasons**

Epworth Freemasons celebrated the completion of the Level 3 theatre suite redevelopment at the 166 Clarendon Street campus which, at the same time, included a significant amount of site-wide service improvements to the 87-year-old building.

Epworth Freemasons staff, patients and visitors persevered during significant construction works for almost two years. The amazing outcomes could not have been achieved without the support of everyone on site.

This project has provided:

- two new theatres, growing the number of theatres from six to eight
- new Level 3 staff areas including kitchen, and male and female change rooms



The new DOSA patient waiting area at Epworth Freemasons

- a new central sterile services department (CSSD) with increased instrument processing equipment
- a new DOSA (day of surgery admissions) area with six full consulting rooms and patient wait areas with city views
- a new plant including Levels 4 and 5 plant rooms, future proofing the hospital for further growth and service demands
- a new building management system which is remotely visible for engineering and facilities staff, allowing immediate monitoring
- five refurbished theatres with increased floor space of 2.3m<sup>2</sup>, new pendants, lights and air handling units to all theatres on Level 3
- complete fire services upgrade including fire hoses
- replacement of medical gas systems and medical gas risers, future proofing for further works
- a complete electrical infrastructure upgrade, with switchboards, distribution boards, mains cabling, a generator and new substation
- thermal plant replacement which includes boilers and chillers.

Much of this work has enabled the installation of advanced equipment such as the hospital's new holmium laser, and has helped provide services to support the work of the medical staff in ensuring the best possible patient experience.



Epworth Eastern's new Day Medical Unit

**Epworth Freemasons Grey Street Centre goes to town planning**

A town planning application has been submitted to the City of Melbourne for a multi-storey complex to be built behind Epworth Freemasons on Clarendon Street.

The proposed building will span the length of the block between Albert Street and Grey Street and will house four additional theatres and procedure rooms, additional private inpatient rooms, a new day oncology unit adjacent to the oncology ward, new education and training facilities and multiple levels of consulting suites.

The plans will also include six levels of underground parking to provide more than 300 car parking spaces on site, with provision for future development.

Linked to the Clarendon Street campus, it is proposed the new building will also provide for a new Albert Street ground floor entrance to the hospital, all to fulfil the vision of a fully-integrated campus.

**New Epworth Freemasons medical consulting suites open**

Epworth Freemasons has taken the lease on approximately 300m<sup>2</sup> of premium consulting space at 150 Clarendon Street, directly across the road from the Fitzroy Gardens and adjacent to the hospital.

Consulting suites opened on 14 March. Tenants include Precision Haematology, with Professor H. Miles Prince AM; Dr Annabel Tuckfield; Russ Orthopaedics with

Mr Matthias Russ; and MURAC Health with Dr Justin Chee and Dr Ajay Chauhan.

**A new operating theatre and day medical unit at Epworth Eastern**

Plan Group was awarded the building contract at Epworth Eastern to construct a tenth operating theatre on Level 3, and build an expanded day medical unit on Level 4 that would see the hospital's day oncology capacity double to 18 chairs.

To provide continuity of care for patients, the day oncology unit was temporarily relocated to Level 6 while the new unit was built. As part of these works, the plant room on Level 6 was also expanded to accommodate the larger facilities.

The new Theatre 10 opened for its first surgery on 15 March 2016, receiving glowing reviews from the Department of Health on its final inspection. The new day oncology unit reopened on 24 May, treating more patients undergoing chemotherapy and haematology treatment at the same time in a larger environment full of natural light. All 18 chairs are equipped with Point of Care terminals that offer patients a range of education and entertainment options as well as internet use while having their treatment.



**Warrnambool receives first integrated cancer centre**

On 4 July 2016, a month earlier than scheduled, Epworth received complete handover of Warrnambool's very own integrated cancer treatment facility — the South West Regional Cancer Centre (SWRCC).

Construction commenced in February 2015 after Epworth was awarded the contract to manage the design and construction process.

The South West Regional Cancer Centre provides radiotherapy and chemotherapy treatment; oncology and allied health consulting; and a support centre offering services and resources to support the wellbeing of cancer patients and their carers.

Epworth operates the radiotherapy services and manages the public cancer centre on behalf of the Victorian Government. South West Healthcare operates the eight-chair chemotherapy unit in a large open space that provides an abundance of natural light and views of the Warrnambool seaside.

Colocating a full range of cancer treatment and support services under the same roof encourages a coordinated and collaborative approach to treatment among medical and radiation oncologists, allied health professionals, nurses and educators, leading to improved outcomes and experiences for patients and their families.

Epworth Radiation Oncology operates the radiotherapy service as a public service at no cost to patients. Both CT planning and radiotherapy treatment

is now available in the region for the first time. Two radiotherapy bunkers, one equipped with a Varian True Beam Linear Accelerator, will provide radiotherapy for up to 500 patients per year. The first radiotherapy treatment was delivered on 18 July 2016.

An experienced team of oncology specialists are located on site, including Associate Professor Ian Collins, Dr Terri Hayes and Dr Oliver Klein from South West Oncology, haematologist Dr John Hounsell, and radiation oncologists Dr Tracie Gleisner and Dr Kevin So; all offering a truly integrated model of cancer care for the South West region.

The Peter's Project Foundation lobbied State and Federal governments to fund \$25 million to make this centre possible, and received \$5 million in donations from the community to contribute to the total cost.

The cancer centre operates a community support centre named in honour of Peter's Project, in recognition of the committee members and community that raised the funds. Patients and their family members can retreat to this non-clinical space, make a cup of tea, access information through brochures or the dedicated internet booths, or simply relax and read the local paper.

In addition to the cancer centre, a new three-level car park was also developed as part of this project — opened in February 2016 — to provide additional parking for both the SWRCC and Warrnambool Base Hospital located across the road.



## A comfort to patients during a difficult journey

More chemotherapy and haematology patients can now be treated at the same time in Epworth Eastern's new day medical unit, which opened in May.

The original nine-chair unit has doubled in size to 18 chairs, all with Point of Care terminals that offer patients a range of entertainment options and internet use while they are having their treatment.

Nurse Unit Manager Allwyn Isaac says the additional floor space increases patient privacy, with dividers surrounding the treatment chairs.

"The extra space means patients don't need to wait too long for their treatment and there is better privacy now for each patient. Each one of our patients has a positive attitude towards our new unit, and that encourages staff all the time.

"The Point of Care system is also a very useful way to show the treatment education video."

The \$2.5m redevelopment took approximately five months, with minimum disruption to patients and great cooperation from all staff whose offices were temporarily relocated while the building works took place.

"Our patients often become friends and we get to know their families and the little things they like, as well," Allwyn says.

"The unit now has two scalp-cooling machines for patients whose cancers may be suitable for them to try and keep their hair. Because these can be chilly, we also have bear huggers — suits to warm them up while they have that treatment. And, we provide complimentary services like massages, facials, manicures and pedicures for all patients who attend our department."

Patient Jenni Swan says, "I travel from Leongatha so it's a long way to come here. It's a beautiful facility and I couldn't hope for anything more. The staff are absolutely lovely and to have your own seat and your own space is just beautiful. I've had a lot of visitors since I've been here and it's so good for people to come and visit.

"It's not really a ward, it's an open space where everyone can be comfortable. It's a dream come true."



*“...the hospital’s inpatient capacity is expected to increase to 777 beds on completion of the hospital redevelopment.”*

#### **Lee Wing wins Master Builders Excellence Award**

Kane Constructions, the construction firm responsible for Epworth Richmond’s recently completed Lee Wing redevelopment, has received the 2016 award for Excellence in Construction of Commercial Buildings over \$80M, for the Lee Wing project, in the Victorian Master Builders Excellence in Construction Awards. The Lee Wing is a significant development and this award recognises the incredible work of Kane, Epworth’s architect, Silver Thomas Hanley, and the project team.

#### **Kitchen upgrade paves the way for first-class dining experience**

Epworth Richmond’s kitchen is undergoing a complete rebuild and expansion that will ensure the hospital is equipped to provide for the growing number of staff, visitors and patients, with the hospital’s inpatient capacity expected to increase to 777 beds on completion of the total hospital redevelopment.

The kitchen works include a total overhaul of the layout to facilitate the provision of a new room service inpatient meal-delivery model.

When the room service model comes into effect, the menu will move from a rotating, fixed menu to an a la carte style offering greater choice for patients. Patients will be able to order meals at a time convenient to them.

Food services staff are excited by the opportunities that await them, with the staffing model set to also change on completion of the kitchen upgrade, to allow for greater variety in each role and more opportunities for personal development and training.

To minimise the impact on staff and patients, these works are being undertaken in stages so the kitchen and bistro can continue to operate business-as-usual as much as possible. Works commenced in February 2016 and are due for completion in 2017.

#### **Wing renaming links to Epworth’s history and supporters**

The 2015/16 financial year saw a number of improvements to wayfinding at Epworth Richmond, all with one goal: to improve the patient, visitor and staff experience when navigating through the hospital.

Following a period of planning, February 2016 saw the commencement of the installation of a site-wide wayfinding and wing renaming project, which moves away from identifying areas by their street location to wing names which recognise an important person, a part of Epworth’s history, or a donor who has made a significant contribution towards the hospital.

All but one building has now been renamed with new colour-coded wayfinding signage installed as each name change takes place.

Danks Wing has replaced Bridge Road tower; Cato Wing has replaced Leigh Place building; Thomas Wing has replaced the eastern side of the Erin Street building; Gray Wing has replaced the western side of the Erin Street building; and in late 2016, Bethesda Wing will replace the Normanby building.

Part of this project also involved renumbering all inpatient rooms across the site in preparation for the Lee Wing opening and further Erin Street developments, ensuring no two numbers were identical while at the same time aligning the same series of end digits to the same location on each floor of the building.

The new numbers follow a four-digit sequence where the first number references the level with three digits to follow, starting from Cato Wing and wrapping around the hospital.

In February 2016, three levels of the hospital were also renumbered to Ground, Lower Ground and B1 to align with the future development along the Erin Street side of the building.

Digital wayfinding kiosks were also installed at five main entry points of the hospital, to provide directional support to assist patients with finding their way around the hospital.

#### **A change of scenery for Epworth HealthCheck**

Epworth HealthCheck moved from its city premises in January 2016 to be colocated with Epworth Richmond, within the Epworth Consulting Suites at 173 Lennox Street, Richmond.

The move has provided an opportunity to progress value-add services, such as the inclusion of an Epworth Richmond dietitian and body composition analysis, which optimises a patient’s health assessment and provides an opportunity to remain connected to Epworth HealthCheck patients during the two to five year gap between repeat visits.

The new proximity to Epworth Richmond has also seen an increase in engagement with Epworth’s medical specialists, while the employment of an additional doctor and a new full-day program for regional clientele has also seen an increase in bookings to Epworth HealthCheck.

HONOURING EPWORTH'S SUPPORTERS



**DANKS WING (former Bridge Road building)**

Sir Aaron Danks was the founding benefactor of Epworth, donating £6000 to purchase the property 'Yalcowinna' to establish the original Epworth Hospital in 1920. Sir Aaron Danks was an active philanthropist through his family's business in hardware manufacturing — John Danks and Sons Pty Ltd — which eventually became Australia's third-largest hardware chain, and included the chains Home Hardware, Plants Plus and Thriftylink. The Danks family has continued its association with Epworth over several generations.



**CATO WING (former Leigh Place building)**

The Cato Wing commemorates the involvement of founding board member and philanthropist Fred Cato, who contributed to the establishment of the hospital on the current site. Fred Cato owned a successful grocery business, Moran and Cato, and was an active Epworth Board member during the founding years.



**GRAY WING (western side of Erin Street building)**

Matron Ethel Gray was the matron of Epworth from 1 June 1920 until she retired on 30 September 1939, after which she was appointed trustee of Epworth. During her time at Epworth, Matron Gray saw the hospital grow from 24 to 200 beds, and led the development of the nursing education programs.

Matron Gray dreamed of Epworth having its own chapel, and made a donation towards the chapel's construction during a hospital stay in her later years. The chapel window was dedicated in her memory and in memory of the nurses who served in World Wars I and II.



**LEE WING**

The Epworth Medical Foundation received a generous donation from Mr and Mrs PS Lee, who are also the major sponsors of Epworth HealthCare's Corporate Golf Day.

Mr and Mrs PS Lee have been generous supporters of the hospital since they moved to Australia in 1983, from Singapore. Their business interests are in building development, investment and finance, and Mr Lee is currently Chairman of the Leesville Group of Companies.

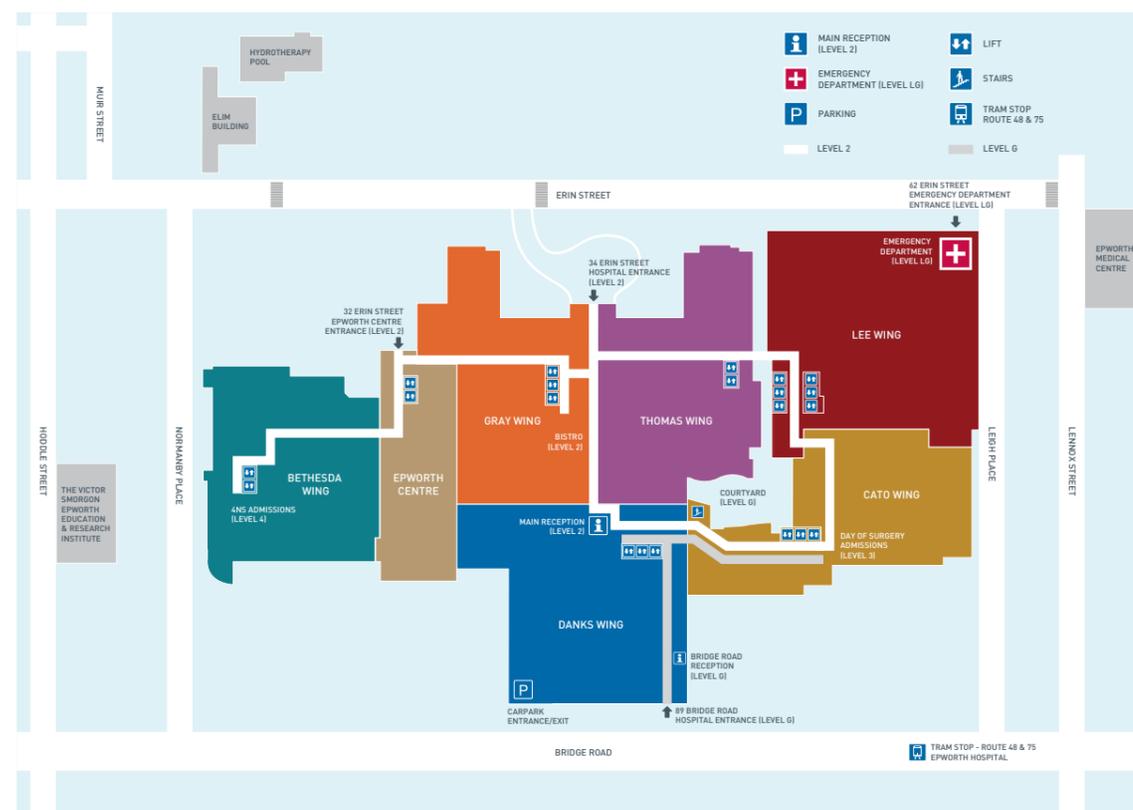
**THOMAS WING (Eastern side of Erin Street building)**

Dr Douglas Thomas was the inaugural honorary lecturer at Epworth in 1921 and was a member of the hospital committee from 1923 until his death in 1954. He offered free medical services to nursing staff and provided x-ray and pathology services at Epworth Richmond and Bethesda hospitals from 1924 to 1952. He was appointed house medical officer to Epworth Richmond in 1936 and later became Epworth's first medical superintendent.

**BETHESDA WING (Normanby building)**

Bethesda Hospital, located on the corner of Erin Street and Normanby Place, was established by the Salvation Army as a 50-bed hospital on 29 May 1906. Bethesda was the first 'intermediate' hospital established in Australia, to provide care to patients who had limited funds to pay for their care.

Bethesda Hospital developed an outstanding reputation for provision of spinal surgery, head injury care and rehabilitation services and Epworth sought to preserve and build upon this legacy when it acquired the hospital, including the Elim building and hydrotherapy pool, from the Salvation Army in 1998.



## Getting back on board

Shayla's first serious knee injury happened in August last year.

"Every time I've dislocated my knees I was surfing. I snapped the medial ligament twice, once in both knees, just from doing a turn. I pushed out and hyper-extended my knees."

Shayla first came to Epworth Richmond in September 2015 at age 14, to treat a torn medial ligament, under the care of orthopaedic surgeon, Professor Julian Feller. Shayla's mum Julie says they knew a second injury was inevitable because Shayla's knees are vulnerable to this type of injury, made worse by her love of surfing.

"Julian said at our follow-up for the first knee, to ring him straight away when the second knee goes. He knew we would have to come back at some point," Julie says.

"The first time it dislocated the knee cap was on the side of the knee, she had to put it back in herself," dad Travis says.

"That was pretty horrific. We got her on the beach and I got her to try and straighten her leg and after about three or four minutes it just clicked back around and went back in. We carried her up on the surfboard then took her to the hospital. The second time wasn't nearly as bad as the first."

In May this year, Shayla returned for a second medial patella reconstruction, staying in Epworth Richmond's recently-remodelled paediatric unit for two days.

"I went back out for a surf and I did a cutback and pushed my leg out as hard as I could, I straightened and my knee popped out but went straight back in," Shayla says.

Shayla, who was out of the water for six months following the second surgery, is now in training for the Australian Junior Surfing Titles in November.

"After her first accident she was out of the water for nine months, three-quarters of the way through the season, but she ended up coming back and training really hard and winning the Under 18 State Championships," Travis says.

"I was nervous about surfing again after the first injury, it took a lot to get my confidence back. Even now after the second surgery, it's still stressful. I try not to surf differently but it's hard not to. I definitely hold back on some things but they'll come back in time.

"When I was still in the knee brace my friend Sophie would take me out paddle boarding. She would put me on the front of her paddle board, even with my leg brace on. She's really good. We would just sit out there because I was going a bit mad not being on the water."

Julie says, "We had to get her there any way we could. She has to be in the water or she's not happy. I never got soul surfing, but water fixes everything for her; it's her healer, it washes everything away. Good day, bad day, she loves it."



*"After her first accident she was out of the water for nine months, three-quarters of the way through the season, but she ended up coming back and training really hard and winning the Under 18 State Championships."*



**Epworth Hawthorn opens first-of-its-kind Olfactory Impairment Clinic**

Established in July 2015, the olfactory impairment (OI) clinic, located primarily at Epworth Hawthorn, provides a service to patients who have changes in their sense of smell. Mel Drummond and Chloe Douglas, both speech pathologists, staff the clinic – the first of its kind in Australia.

The OI clinic offers patients the opportunity to have their sense of smell assessed and, once the severity of their impairment is determined, they are provided with informational counselling, management strategies and equipment recommendations. Since its establishment, the OI clinic has received over 80 referrals, with most patients experiencing an olfactory impairment as the consequence of a traumatic brain injury or Parkinson’s disease.

**Epworth Medical Imaging expands to Epworth Richmond**

Epworth Medical Imaging opened at Epworth Richmond in September 2015, with the imaging space transformed overnight following handover from its previous operator. Most of the new equipment, technology, signage, furnishings and infrastructure was installed from midnight Thursday 24 September, ready for an 8am opening on Friday 25 September.

The months preceding saw construction of additional imaging rooms within existing hospital shell space, to provide new treatment spaces for nuclear medicine and x-ray in preparation for the opening.

Epworth’s commitment to progressing the MRI licence for Epworth Medical Imaging saw the service successfully secure its licence from the Federal Government, allowing the service to offer bulk-billing for eligible MRI patients.

**Epworth Richmond Pinnacle Surgery partnership – comprehensive ENT cancer services for Epworth patients**

A new partnership with head and neck cancer specialists, Pinnacle Surgery, is facilitating access to comprehensive and minimally invasive ENT-related cancer services for Epworth patients. The practice encompasses a team of highly-trained specialists, including ENT surgeons Dr Ben Dixon, Dr Matthew Magarey, Dr Amanda Richards and plastic surgeon Dr Ajay Chauhan. The practice has continued to grow since its inception, with further specialists joining in early 2016.

Pinnacle, located on site at Epworth Richmond since July, is Australia’s most comprehensive private head and neck cancer service. The service provides

particular expertise in areas such as skin malignancy including advanced and metastatic, head and neck reconstructive surgery, parotid tumours, thyroid surgery, oral cavity/ tongue tumours, laryngeal/ vocal cord tumours, sinus and nasal tumours, skull base surgery including endoscopic approaches, head and neck sarcoma and melanoma, parapharyngeal Tumours, open and TORS approach and Trans-Oral Robotic Surgery (TORS) for throat cancer.

Throat cancer, still considered uncommon but presenting more frequently due to a number of factors including the rise of the human papilloma virus (HPV), can now be treated using robotic surgery. TORS offers patients with throat cancer a far less intrusive surgical treatment and precise removal of cancerous tissue. The recovery process is also significantly improved using this technique.

“With throat cancer, people can end up with long-term problems eating and drinking. With the robotic surgery we’ve had patients come back four weeks later eating and drinking a completely normal diet. They’re feeling good, the cancer’s out and they haven’t needed any additional treatment,” says Dr Dixon.

Using Epworth Richmond’s onsite services, including the recently opened Epworth Medical Imaging, the Pinnacle team liaises with other medical professionals to best decide on a treatment plan for a patient. The Head and Neck Multidisciplinary Cancer Meeting, the first of its kind for private hospitals, is coordinated and chaired by Epworth’s ENT surgeons fortnightly to review patient cases.



Pinnacle Surgery’s Dr Ajay Chauhan, Dr Ben Dixon, Dr Amanda Richards and Dr Matthew Magarey

**Targeting acute pain**

Patients who need extra attention due to severe pain issues now have access to a tailored service. The Acute Pain Service (APS), which commenced operations in September at Epworth Richmond, is run by acute pain nurse Caroline McLoughlin.



Ms McLoughlin works as a conduit between patients, ward nurses and medical staff to enable a smooth communication path and offer timely pain solutions to those in need. It is a service that will be particularly beneficial to Epworth Richmond’s growing patient base.

“Addressing the needs of patients with acute pain in a coordinated way means potential issues can be identified and managed earlier, so patients can return home sooner,” explains Ms McLoughlin.

Patients are referred to the service to have their pain treatment assessed and monitored, which can then be adjusted as needed throughout their stay at Epworth. Postoperative patients who have had procedures including epidurals, intrathecal anaesthetic techniques, ketamine infusions or complex spinal surgery benefit most from the service. The service is also designed for patients who have spent more than two hours in a post-anaesthesia care unit for pain-related issues, as well as those already experiencing chronic pain.

Epworth visiting medical officers are also referring patients who they believe would benefit from involvement of the APS to the service. Dr Simon Reilly, an anaesthetist at Epworth Richmond and Chairman of the Anaesthetics Advisory Committee, established the APS after reviewing a study published by Professor Mari Botti, which found a disconnect between pain patients and effective treatment. The APS now addresses those issues.

**Changing behaviour for the better**

A bariatric rehabilitation program, New Dimensions, has been developed at Epworth Camberwell, designed for patients following bariatric surgery or procedures. Patients attend a 12-week program, and are supported in understanding their condition and in acquiring skills and confidence to sustain long-term lifestyle changes. The group is not necessarily focussed on weight loss but on changing eating and exercise behaviours which may contribute to weight loss.

Patient outcomes have been very positive to date with clinically significant weight loss and improvements in the depression anxiety stress scale (DASS) and quality of life as assessed by the IWQOL (Impact of Weight on Quality of Life). Lower limb strength and cardiovascular endurance also improved.

At the completion of the program, assessment and reflection on goals revealed a significant shift in thinking, with a re-focus on eating and exercise behaviour rather than weight or weight loss. This shift in thinking with regards to health and weight is a significant positive outcome. Preliminary results are encouraging for bariatric patients who have commonly suffered lifelong with these issues.

### Concussion clinic targets head injury danger

Epworth Hawthorn opened its new concussion clinic in 2016, a multidisciplinary screening and assessment clinic developed to assess and manage individuals who display ongoing post-concussion symptoms. The initial assessment is conducted to identify, educate and refer individuals for appropriate intervention as required.

An extension of Epworth's renowned traumatic brain injury unit, the clinic is run by Professor John Olver AM and Dr Rose Acher. Other members of the team include Dr Jo Sherry, clinical neuropsychologist, and Megan Hamilton, vestibular physiotherapist (addressing problems including dizziness and vertigo). Return to work, driving and sport assessments are also included as needed.

### Epworth Clinic day programs expand to meet patient needs

In 2015, Epworth Clinic recognised three areas of need in its day program service division. As a result, three new day programs and initiatives were introduced, in a move to strengthen the clinic's service offerings and ensure mental health clients were offered a more tailored service.

The first program introduced was the inaugural after-hours service, allowing patients working full time or with daytime commitments to attend programs. Clients are now able to come straight from work and attend a therapeutic program at night, so they can continue to work on their wellbeing. The after-hours service has increased the diversity of people attending Epworth Clinic programs and has met the needs of people who wanted to attend programs but could not take time off work for a 12-week period.

The second major initiative has been the establishment of Epworth Clinic's first 'open group', 'Transitions'. When reviewing current service offerings, it was acknowledged clients may have to wait up to 12 weeks to begin a program, as groups close membership once they commence.

It was evident clients require the flexibility to engage with clinic services in different ways, depending on personal circumstances. Some require support within the community while waiting for a program to commence, while inpatients need additional support as a step-down process when returning home, and thus are now able to leave the inpatient unit and attend an outpatient group in the same week.

The Transitions program also reaches out to those who have never experienced a group program setting or who feel committing to 12 weeks is too overwhelming. Clients are now able to attend single sessions or a

sequence of sessions to get a feel for group activities, while walking away with skills from each session. This also allows the treating psychiatrists to utilise clinicians' expertise to offer recommendations for community management and facilitate follow-on referrals to further day program offerings.

The third initiative was to offer greater support to Epworth-accredited psychiatrists in private consulting rooms. With the establishment of a weekly 'drop in' session, outpatients from private consulting suites can meet with senior intake clinicians for a short face-to-face day program introduction. This has allowed clients who are hesitant about the 'unknown' of day programs and unlikely to agree to their doctor's referral to have the chance to meet a friendly Epworth face.

### Victoria Heart offers streamlined cardiology service at Epworth Freemasons

Victoria Heart comprehensive cardiology service has commenced practice at Epworth Freemasons within consulting suites at 132 Grey St, East Melbourne. Cardiologists Dr Andris Ellims, Dr Monique Watts, Dr Jonathon Habersberger, Dr Arthur Nasis and Dr James Sapontis provide specialised cardiology consulting and cardiac diagnostic testing, including echocardiography and Holter/blood pressure monitoring.

Dr Ellims says patients at Epworth Freemasons will benefit from a dedicated cardiology service as Victoria Heart cardiologists are on-site and provide an invested level of support throughout a patient's journey. "We provide a continuity of care, and can follow-up on a patient's progress both during their hospitalisation and later as an outpatient. We can also support higher risk surgeries at Epworth Freemasons by providing better access to cardiology services and can manage cases better if there are any cardiac complications," he says.

Victoria Heart provides streamlined clinical pathways for the direct admission of patients to Epworth Freemasons' cardiac care unit (CCU) from the community.

"These pathways enable patients with chest pain, arrhythmia or heart failure to be admitted directly into hospital for rapid streamlined assessment and treatment without passing through the emergency department," says Dr Ellims. "The cardiac pathways are probably the cornerstone of what makes our new service particularly valuable. They enable GPs and specialists to call our cardiologists directly about outpatients that they are concerned about. We can then arrange for direct admission into the cardiac care unit at Epworth Freemasons. Problems that could previously take several days or weeks to be identified and treated can now be addressed within a matter of days."



= COMMUNITY

# THE BEST IN PATIENT CARE FROM A STATE-OF-THE-ART FACILITY — LEE WING OPENS



## Providing the best to patients at Epworth

The Lee Wing redevelopment, which is the first component of the hospital expansion and development along Erin Street, commenced in early 2012 and was completed in early 2016.

The \$172 million development amalgamated our critical care services and expanded inpatient capacity providing:

- 176 inpatient beds comprising:
  - 111 new private inpatient rooms with ensuites
  - 26 new intensive care unit beds
  - 39 new cardiac care unit beds, including a 10 bed coronary care unit.
- 35 new emergency department treatment spaces
- six additional operating theatres (including 1 hybrid bi-plane theatre)
- 240 car park spaces
- one floor of consulting suites with eight rooms.

In opening the Lee Wing, Epworth Richmond has been able to employ an additional 600 staff (360 full time equivalent).

Over the coming years, Epworth Richmond will continue to undergo a major expansion; upgrading facilities to respond to patient, doctor and staff expectations; expanding services to meet the needs of a growing population and developing a hospital which facilitates teaching, research and collaboration.

Once all planned works are completed, Epworth Richmond will provide a total of 777 inpatient beds and 42 theatres, including four catheter labs, making Epworth Richmond the largest private hospital in Australia and the largest surgical hospital, public or private, in the country.

Details of the development are as follows:

	Prior to development	On completion of redevelopment
Inpatient beds	449	777
Operating theatres	21	38
Catheter labs	4	4
Consulting suites	71	96
Day chemotherapy chairs	9	24
Renal dialysis chairs	8	16
Sleep unit beds	-	6
Car parks	779	1321

Once completed, the fully redeveloped hospital is estimated to cost over \$720 million and will provide

additional employment for over 1280 staff — 770 full time equivalent — including Epworth Medical Imaging.

Undertaken over a number of stages to minimise disruption to patients and staff, the first stage was completed in 2013. This stage incorporated construction of the Bridge Road Tower — five floors of consulting suites, a new day oncology and renal dialysis unit and an expansion to the theatre precinct — as well as the development of a dedicated Simulation and Education Centre.



## A rejuvenated emergency department

Epworth Richmond's emergency department operates 24 hours a day, 7 days a week. The move to the Lee Wing has ensured the emergency department is better-equipped to provide the best possible care when patients need it the most, including a dedicated space for paediatric patients.

Inside the new emergency department:

- 35 treatment spaces that offer privacy, noise reduction and comfort for patients
- 2 resuscitation bays
- cardiac monitoring within all cubicles
- two isolation rooms for airborne infectious illness
- acute injury/fast track area
- CT and x-ray located within the department for fast diagnoses
- direct access to theatres via staff lifts
- undercover ambulance bay
- a dedicated drop-off zone in front of the department on Erin Street.

### A first-of-its-kind theatre complex

Epworth Richmond's hybrid theatre is the largest of the six new Lee Wing theatres, at 95m<sup>2</sup>. It houses the Siemens Artis Q Biplane, the first equipment of its kind in a hybrid theatre in Australia and New Zealand.

This theatre is designed for the treatment of heart, vascular and neurological disorders, combining advanced and high-precision imaging technology with a fully equipped surgical suite.

The Artis Q enables surgeons to perform minimally invasive procedures and, with precise imaging technology, surgeons are able to make safer and faster treatment decisions with the ability to immediately convert to open surgery if needed, without relocating the patient. Epworth Richmond is the first private hospital in Victoria to offer open and endovascular capabilities for the acute treatment of cardiac and cerebrovascular disease, including stroke, aneurysms and ruptured arterio venous malformation (AVM).

The Artis Q is a great addition to the surgical technologies already on offer within the hospital, including the dual console da Vinci surgical robot and advanced digital imaging capabilities.



### A dedicated care space just for kids

Thanks to the generosity of the Susan Harris Foundation, a new paediatric ward has been established in the Lee Wing at Epworth Richmond. Opened in April 2016, the new ward enables Epworth to care for young patients in a dedicated environment, with tailored admission criteria, models of care, and age-appropriate equipment. The benefits of a dedicated paediatrics ward include the ability to recruit, develop and retain experienced and skilled paediatric staff.

Newly-appointed Paediatric Nurse Unit Manager, Meredith Elliot, was thrilled to be involved with the project. "It's challenging but it's exciting," she says. "Being able to design a new ward and create something really special for our younger patients; working with marketing, assisting the architects with infrastructure and overseeing recruitment were all fantastic processes to be a part of," she says.

A large amount of planning and careful consideration went into opening the space, keeping in mind the particular needs of a younger patient base.

"In designing the unit we needed to create an environment that caters for younger children as well as adolescents," explains Meredith.

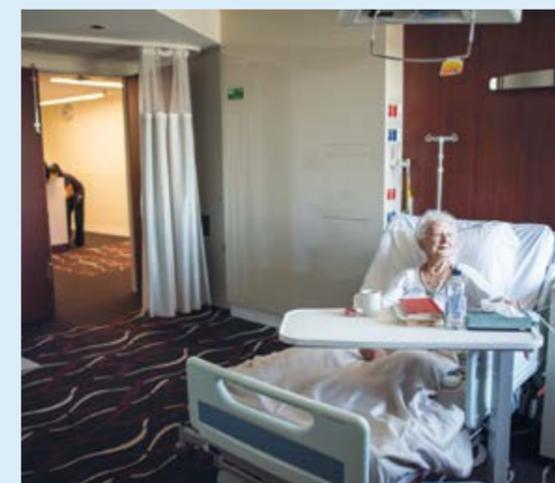
In addition to bright colours and creative decor, the new space will offer fun distractions including a playroom, Xbox, and other child-friendly activities. The design was also completed with consideration of the needs of parents and other family members, through the provision of kitchen and sleeping facilities. These facilities are particularly helpful for longer patient stays.



Ensuring a safe environment was another important consideration, and as such, the unit is secured with swipe access only.

"In designing and selecting the equipment for the unit, we have made use of a range of best practice guidelines," says Meredith. Starting from the ground up meant brand new facilities and technology to match, supplied with the support of the Epworth Medical Foundation.

"We are really excited to be developing this new service to cater for the specific needs of our young patients and further support our community. Importantly for our paediatrics patients, this will mean coming to an age-appropriate environment, where we can accommodate parents as well, including facilities for one parent staying overnight," says Nicole Waldron, Executive Director Epworth Richmond.



"This gift from Susan and her family makes them one of the most significant philanthropic supporters in the 96-year history of our great institution and we are indebted to them for their generosity and support." The Epworth Medical Foundation organised a CEO Cycling Challenge in Thailand in February 2016 to raise funds for the unit. Leading the challenge was Epworth Board President Rod Fitzroy and Group Chief Executive Alan Kinkade.



Epworth treats paediatric patients — those between the ages of 12 months and 16 years — across several sites for elective surgery including orthopaedics; ear, nose and throat (ENT); maxillofacial and dental surgeries. Epworth Richmond also provides care to children and adolescents through the onsite allergy clinic.

**A team working hard behind the scenes**

Staff from across the organisation worked hard over many months and years, to ensure this complex project was ready for patients on day one.

**Supporting Epworth's building works**

Key initiatives that benefited both the developments at Epworth Richmond and Epworth Geelong as well as broader growth across the group included:

- extensive work undertaken with Korn Ferry/ Futurestep to develop and clearly define an employee value proposition which would underpin the recruitment marketing campaign
- detailed work to revamp and update the Epworth recruitment careers website, ensuring Epworth is attractive to prospective candidates, and enabling the registration of thousands of expressions of interest from the general public
- work with stakeholders to develop new marketing collateral and execute on a targeted recruitment marketing strategy involving a new presence on social media, as well as in traditional press, at tram stops and other outlets
- appointing an internal talent consultant (recruiter) to headhunt staff and develop strong candidate pipelines, as well as support managers with their recruitment in the lead-up to commissioning.



**A makeover for the Bridge Road entrance**

The Bridge Road entrance to Epworth Richmond received a makeover, reopening in November 2015 to offer a welcoming first impression for patients and visitors coming to the hospital via Bridge Road.

While first-class finishes and fixtures were incorporated into the design, the most important addition for patients and visitors was a new reception desk to work alongside main reception on the second floor, supporting patients and visitors entering and leaving the hospital from Bridge Road.

The donor recognition wall — which celebrates Epworth's supporters — is located within the Bridge Road entrance, and is also undergoing a redesign. It will be unveiled in late 2016.

**Facilitating a world-class hospital**

Epworth Richmond's Facilities Department played a critical role in ensuring Lee Wing was ready and operational for patients on day one.

The team coordinated the refurbishment of level 5 Cato building, level 4 BRT Dialysis & Oncology, through stage 1, 2, 3, 4, followed by stage 8 theatres. Support from the team entailed attending the redevelopment interface



Epworth also invested wisely in the development of its own talent with large increases in graduate and post graduate positions, an introductory to specialist practice, and a perioperative introductory program as well as a number of other training and development initiatives. In addition, Nurse Unit Managers (NUMs) and Associate Nurse Unit Managers (ANUMs) participated in separate leadership development programs to ensure a pipeline of internal talent in the lead up to commissioning and to support the organisation to take key managers off-line in preparation for commissioning.



meetings, where the impact of the construction works were discussed — including risk mitigation to reduce a possible impact on daily operations.

The facilities team was involved in planning, demolition, construction, commissioning, witness testing and defect mitigation — all completed successfully due to the team's in-depth understanding of how these new systems would need to operate and their intimate knowledge of each of the locations around the site.

All members of the facilities staff were thoroughly committed to completion of the new building and enjoyed being a part of the team. Each member was able to broaden their skills base significantly, as a result of exposure to the latest technologies and techniques, working alongside the redevelopment team and Kane Constructions to bring the hospital to life.

**Communicating project milestones with the organisation**

The extensive nature of building works across multiple sites during FY 2015/16 required effective communication with staff and patients, to ensure



minimum disruption to day-to-day activities. The Marketing and Communications team recognised this need, and identified a number of channels through which key messages could flow to stakeholders, in particular relating to the Epworth Lee Wing redevelopment and the construction of Epworth Geelong.

Regular newsletters and other internal communications channels were established and managed within the team and permanent and temporary signage needs identified — including assistance establishing a digital wayfinding system at Epworth Richmond. The team also helped to engage the community, organising the Community Open Day at Epworth Geelong and a number of official launch events with members of parliament at key stages of each project.

Likewise, as each stage of the works progressed, communications team members ensured these milestones were celebrated — and the hard work of the redevelopment team was acknowledged within, and outside the organisation.



**EPWORTH RICHMOND LEE WING REDEVELOPMENT — project planning and completion milestones**

FEB 2009	JAN 2010	2011	NOV 2012	2012	2012	2012	MAY 2013
Development applications lodged with City of Yarra Council	VCAT Planning Permit issued for stages 1 & 2	Bridge Rd Tower completed	VCAT planning approval received	First design concepts completed	Clinical Education and Simulation Centre / Library	Day Medical Unit	Council approval for major works received

2013	2015	2015	FEB 2016	2016	APR 2016	2016 AND BEYOND
DOSA & Endo OR15 & 16	Cardiac Diagnostics	Bridge Road Main Entry works	Lee Wing B5 to Level 3, including Emergency Department	Stage 8 Theatre handover	Lee Wing Levels 4-7	Kitchen Upgrade Pods 2 & 3

**Equipped to provide the best**

Epworth Richmond celebrated the completion and opening of the latest stage in its redevelopment, receiving handover of the Lee Wing from Kane Constructions over two stages.

The hospital received handover of the five-level underground car park and Levels LG – 3 in mid-January with a new emergency department, intensive care unit, and cardiac and coronary care inpatient unit as well as six additional theatres opening successfully on 1 and 2 February.

Levels 4-7 followed soon after with a neuroscience ward, two orthopaedic wards and consulting suites opening on 4 April. More than 60 patients were transferred to the new wards throughout the morning.

Only two weeks separated handover to opening on both occasions, which required an immeasurable amount of support, dedication and teamwork from all corners of Epworth Richmond, corporate services and the entire organisation, to ensure its success.



The Lee Wing has been designed to bring critical care departments within easy reach of each other and is the first of three development stages set to take place along Erin Street.

*“This facility optimises the relationship between emergency, ICU, cardiac care unit, theatres and diagnostics...”*

The Lee Wing provides:

- a new and expanded emergency department with 35 treatment spaces and a dedicated fast-track area
- a 26-bed intensive care unit
- a 39-bed acute cardiac unit and cardiac intensive care unit
- six new operating theatres including a hybrid biplane operating theatre
- three levels of inpatient accommodation with 111 private rooms
- new consulting suites for medical specialists
- a five-level underground car park with over 250 spaces.

**Federal Health Minister opens the Lee Wing**

The Federal Minister for Health, The Hon. Sussan Ley, officially opened Epworth Richmond’s new Mr and Mrs PS Lee Wing on 9 June, before touring the new private emergency department, patient rooms and intensive care unit.



From left: Group Chief Executive Alan Kinkade, Epworth Board Deputy President Maryjane Crabtree, The Hon. Sussan Ley, Executive Director Epworth Richmond Nicole Waldron

Minister Ley said Epworth’s commitment to delivering excellence in patient care by integrating clinical practice with teaching and research is a win-win for patients in delivering the best outcomes.

“I am delighted to be in Melbourne today and to officially open the new Mr and Mrs PS Lee Wing at Epworth Richmond. This \$172m investment makes Epworth Richmond one of the largest private hospitals in the country and builds on the Australian government’s commitment to improving the delivery of health services in Australia.

“The Australian government capital contribution of \$7.3 million towards the Clinical Education and Simulation Centre as part of the redevelopment of Epworth Richmond has contributed to an important resource for training doctors, nurses and students,” Minister Ley said.



Staff on day one of an operational Lee Wing

Epworth Group Chief Executive, Alan Kinkade, said he was immensely proud of the Lee Wing, including its new state-of-the-art Siemens Artis Q Biplane theatre which is the first such installation in Australia and will enable high-precision neurological, cardiac and vascular procedures.

“Today’s milestone is an exciting one. This facility optimises the relationship between emergency, ICU, cardiac care unit, theatres and diagnostics, which will significantly improve patient outcomes through timely access to services.

At Epworth, patients are at the forefront of everything we do and we remain committed to investing in the best facilities to ensure our doctors and staff have the facilities to continue to deliver excellence in patient care,” Mr Kinkade said.

## Changes over 30 years: a patient's perspective

*"She needed a grandmother figure to get her through a tough time, and I enjoyed the company."*

For more than 30 years, Judith Moore has entrusted Epworth to provide her with the best possible care for everything from lung and heart complications to a hip replacement and rehabilitation. In this time she has seen the many changes Epworth Richmond has gone through.

She also happens to be one of the first patients to experience the new Lee Wing, after being admitted to the new emergency department on opening day, 1 February and transferred to the 2 Lee Wing cardiac unit.

One of the first differences Judith noticed was a direct transfer in a patient-only lift. "It was nice not having to travel down long corridors with lots of other staff and visitors walking by."

The most notable change, says Judith, is the new ward itself, which she found to be spacious, comfortable and quiet.

The private room is lovely, says Judith, but adds that the company of others in a shared room can be a bonus when confined to a hospital bed. In fact, she recalls a time at Epworth Richmond when she shared a room with another patient who initially was unhappy to have a roommate.

But after regular chats during their time together, the two grew close and still keep in contact to this day. "She needed a grandmother figure to get her through a tough time, and I enjoyed the company," explains Judith. "I have been very lucky in my experiences as an inpatient at Epworth Richmond."

Judith speaks warmly of Epworth staff and says she has always received the best care and believes the new space will only enhance this.



Pictured: Judith Moore

## Dream team behind the scenes



What does it take to open a brand new wing in an already busy, operational hospital? An incredible team effort.

Ensuring a smooth transition from newly built, empty spaces to fully-functional patient-ready services required more than six months of planning and preparation, led by the Lee Wing transition steering committee.

To transition to the new wing, the commissioning team worked behind the scenes to develop a clinical move plan, compile orientation resources and coordinate staff and services moving into, or supplying, the new space.

Led by Maree Pane, Clinical Operations Manager, Operational Transitioning, the team united staff from multiple departments across Epworth to plan for this massive project.

"One of the highlights over these past few months has been developing relationships with staff across the organisation, which has played a pivotal role in the success of the project," says Maree.

"Personally, it has been a pleasure to watch a group of staff from different departments such

as procurement, environmental services, clinical services, OH&S, marketing and communications come together and work collaboratively to achieve this great result. We still managed to have a laugh and enjoy ourselves along the way," she says.

The emergency department and 6ES cardiac unit moved to their new Lee Wing locations on 1 February, with Lee Wing theatres commencing the first cases from 8am. ICU followed on Tuesday 2 February, with just two weeks to ensure the hospital was ready for opening after receiving handover of the Lee Wing from builder Kane Constructions on 19 January.

"The ongoing support, commitment and enthusiasm of Epworth Richmond staff as well as many others from corporate services and across Epworth has been pivotal to the successful delivery of the Lee Wing," says Executive Director Epworth Richmond, Nicole Waldron. Stage two of the opening saw a similar effort from staff to open three new inpatient units housing neurosciences and orthopaedics on the upper floors on 4 April.

Pictured: The Lee Wing commissioning team

# EPWORTH GEELONG: A DREAM BECOMES A REALITY AND A BUILDING BECOMES A HOSPITAL



Epworth Geelong opened its doors to patients in mid-2016; exactly 799 days after a shovel first hit the soil on the land along Pigdons Road. A multitude of staff across Epworth HealthCare contributed to turning this decade-long dream into a reality and helped create what is truly an outstanding healthcare facility.

Brookfield Multiplex gave Epworth the keys to the building on Friday 15 April 2016. At its peak, there were more than 600 construction workers onsite in a day, with 2780 people inducted over the construction period (50 per cent of whom were local to the region).

Eleven of the 21 Brookfield staff appointed to site lived in the Greater Geelong area and 12 local companies were awarded contracts to supply the construction phase. In addition to this were a number of local subcontractors supplying construction of the hospital.



The Hon Tanya Plibersek MP, Federal Minister for Health and Medical Research visits Epworth Geelong in 2013, after the announcement of a \$12 million funding boost for the specialised Complex Care Unit.

Interest in recruitment to the hospital was immense, with more than 8000 people having expressed an interest in employment at Epworth Geelong since registrations began, in late 2014. By the end of June 2016, a total of 383 Epworth Geelong staff were appointed to the hospital, with 96 per cent living in the Greater Geelong region.

The site also received great interest from the local medical community. So much so that most of the shell spaces within the hospital, built in preparation to increase clinical services in future, were utilised for additional consulting spaces in the interim.

Prior to opening, the new hospital received an excellent interim accreditation report with zero recommendations from the ACHS Accreditation team, who were full of praise for the way Epworth HealthCare has embedded

its existing culture, policies, processes, governance and systems in Epworth Geelong. They remarked on the state-of-the-art "beautiful" facility and the warmth and knowledge of the staff at Epworth Geelong.

On opening day, July 4, the first emergency department patient arrived at 7:58am and the emergency department saw eight patients in total. Three surgeries were performed, nine renal dialysis patients were treated and eight patients were admitted to the wards. Things have certainly grown significantly since then.

Epworth Geelong has been built for the future, offering enough capacity to supply today, with room to grow tomorrow.

## A shared vision for excellence: A teaching hospital takes shape

For many years, Epworth HealthCare and Deakin University shared a vision to develop a private teaching hospital in Geelong; combining their experiences and skills has delivered a forward-thinking approach to health care, teaching and research.

This joint initiative, a first for regional Victoria, is informed by international models used by the Cleveland Clinic and Mayo Clinic, two leading US not-for-profit hospitals that have demonstrated that improved patient outcomes are achieved in a teaching hospital setting.

The Epworth-Deakin partnership enables the provision of education for nursing, medical and allied health students; attracts medical professionals into the region to work; fosters research collaboration between our health professionals; and provides additional health choices for the community.

The \$262 million development along Pigdons Road, Waurnd Ponds, comprises a complete healthcare precinct that opened on 4 July with plenty of room to grow in the future.





The hospital opened to:

- 172 overnight inpatient beds (with room to increase to 262 in future) including:
  - 12 intensive care unit beds
  - eight special care nursery cots
  - eight complex care unit beds
- an emergency department with 20 treatment spaces open 8am to midnight, seven days a week
- 11 operating theatres (including 1 hybrid)
- six birthing suites
- two catheter laboratories
- two endoscopy rooms
- a six-chair renal dialysis unit
- a ten-chair day oncology unit
- inpatient and outpatient rehabilitation therapies including hydrotherapy pool, gym and facilities to enable activities of daily living
- the provision of a clinical education and simulation precinct
- private consulting suites and sessional consulting rooms
- onsite diagnostic and medical services supplied by Epworth Medical Imaging, Epworth Pathology and Slade Pharmacy
- more than 380 car spaces easily accessible for patients, staff and specialists.

Further stages possible for the site comprise three separate buildings to house additional consulting suites and expand on and collocate the hospitals, existing rehabilitation and oncology services.

**Fitting out the future of patient care**

With nearly two years of procurement planning for both the Epworth Richmond Lee Wing and Epworth Geelong projects, the supply team undertook a mammoth task in fitting out the entire redevelopment.

Across both projects, there were nearly 30,000 different pieces of equipment that needed to be trailed, approved, negotiated, procured, delivered and installed. The logistical effort to complete these projects on time and under budget was significant.

- Working capital equipment (FF&E) budget for the Lee Wing Project was \$30 million. The team was able to deliver a \$6 million saving for the organisation.
- Working capital equipment (FF&E) budget for the Epworth Geelong project was \$31.5 million. The team was able to deliver a \$3 million saving for the organisation.

For the team to be able to deliver both major projects on time and well under budget is a testament to the team's dedication, hard work and countless hours spent ensuring the best possible product was sourced for the best possible price.

Epworth now has state-of-the-art facilities utilising the best equipment the market has to offer. Procurement's main goal was to ensure the end users not only received the latest and greatest technology available, but also to ensure patients were being treated with equipment and technology at the forefront of what is currently available in healthcare. The hospital's design is akin to that of a hotel, deliberately so, to create an environment that helps healing — where a patient doesn't feel like they are in a clinical hospital stress and anxiety can be reduced, thus ensuring the ultimate healing setting.



**Creating a technology framework supporting Epworth's growing infrastructure**

On the days of opening Epworth's redeveloped Lee Wing and the new site at Epworth Geelong, there were 970 new data point connections for Lee Wing and over 2000 for Epworth Geelong. These included medical IT systems, building management, lighting, communications, Point of Care and IT system connections.





**ENSURING PRIVACY FOR OUR PATIENTS**  
 All inpatient rooms throughout the hospital are single rooms, with large windows providing plenty of natural light and great views of the surrounding landscape.

**A TOUCH OF LUXURY**  
 Epworth Geelong is the first of Epworth's hospitals to introduce an a la carte room service meal delivery model for patients, made to order by expert chefs onsite.

**A PRIME LOCATION**  
 Epworth Geelong is situated in a prime location, with major roadways next to the hospital, including the M1 Ring Road and A10 Princes Highway, connecting the hospital to Greater Geelong, the urban growth areas of Armstrong Creek and Wyndham Vale, Central Victoria, the Surf Coast and South West Victoria.



cabling errors, redundant power and automatic server workload migration in the event of a systems failure. Communications rooms were all designed to maximise availability and accommodate future growth, as Epworth consumes data at an ever-increasing rate.

Throughout the process, IT security was a core component of the work to ensure systems are secured appropriately.

**Ensuring a safe and functional service for Geelong patients**

After many months of planning and effort to develop and build Epworth Geelong, it was important to put the hospital, staff, patient flows and various systems through their paces prior to taking the first patients on 4 July. A range of clinical scenarios were developed by the Commissioning team to test the key areas and likely patient presentations, to simulate real life situations and to learn and adapt for anything that may not go as planned. The team included Director of Commissioning, Paul Fenton, Project Manager, Hannah Teasdale and Director of Clinical Services, Leonie Lloyd.



To facilitate the increased IT connectivity and reliance on these systems, new communications rooms were designed to fit current and future needs along with a data centre at both sites to host all of the communications and systems. This includes a managed fibre and copper cabling system to reduce

The team conducted simulations covering such scenarios as ambulance presentation to the emergency department; a medical emergency in the hydro pool; a dinner service for the meals on demand kitchen service; and even a half-day theatre



Pictured: A still from the video 'The Epworth Geelong team at work'

list with 50 medical students volunteering to be 'patients'. The simulations were a key part of testing staff, systems and the hospital itself. The team grew their knowledge significantly with each scenario undertaken, and ensured a successful and safe opening for patients at Epworth Geelong.

**Introducing Epworth Geelong to the community**

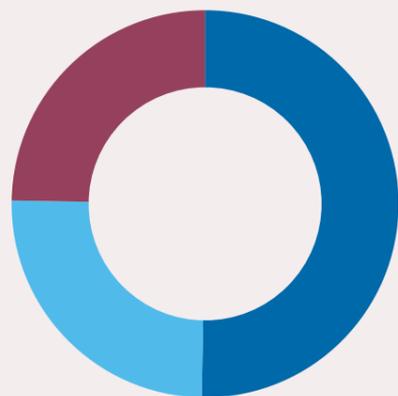
As the new facility in Geelong began to take shape, the Marketing and Communications team looked to identify the best possible way to communicate the project's milestones with the wider community. As a picture is worth a thousand words, the team thought it best to create a variety of videos revealing time lapse construction footage; introducing the staff; showing inside the state-of-the-art facilities as they began to take shape; and explaining how the new services would benefit the local community.

One video in particular, 'The Epworth Geelong team at work' provides a quick and quirky overview of not only the new site but the team providing care across every area of the new hospital. Produced in conjunction with marketing agency, Mustard Creative, staff are shown across the site, enacting various roles while whistling the theme song for the AFL team, the Geelong Cats. The concept for the short film centred on the idea that Epworth Geelong is another local team, working together and 'kicking goals'. All videos relating to Epworth Geelong can be found on the Epworth HealthCare YouTube channel.

**Local media engage with Epworth Geelong**

Epworth received significant interest from the community in the lead up to opening in July. This was reflected in the increasing coverage Epworth Geelong received in local media within the greater Geelong and South West region during 2016.

**MEDIA COVERAGE RELATING TO EPWORTH GEELONG, 2016**



■ Epworth HealthCare print media coverage (338 items)
 ■ Epworth HealthCare radio coverage (168 items)
 ■ Epworth Geelong media coverage



Community members tour the new facilities

**Epworth Geelong community open day a great success**

More than 4000 people from the Greater Geelong community, together with existing Epworth staff, took the opportunity to have a sneak peek inside Epworth Geelong at the community open day on 19 June. From 11am – 3pm there was a line out the door and into the car park while people waited patiently to join a tour of the emergency department, theatre precinct and Level 5 inpatient unit.

Tour leaders guided tours every couple of minutes from the auditorium in what was a mammoth task to get so many people through the hospital. Entertainment was provided in the foyer with local radio station Bay FM onsite for the day, crossing live to the broadcasters and providing giveaways to those in attendance. Geelong Football Club mascot Half Cat was in the foyer entertaining visitors, while Geelong Cats players George Horlin-Smith and Corey Enright signed autographs and posed for pictures.



Zouki Cafe worked around the clock in the weeks leading to the open day to get their space ready in time, and were certainly kept busy providing refreshments to those who came along. Epworth Geelong staff were thrilled with the turnout and pleased with the amount of support and positive feedback received throughout the tours. A photo competition was also held for visitors, who were encouraged to post an image from the day to Facebook. The top three most imaginative, fun or creative images won an iTunes voucher.

It was a busy week of events for Epworth Geelong, which also hosted a series of tours in the week prior to the open day for the region's practice managers, GPs and medical specialists, the Geelong Chamber of Commerce and the Australian Institute of Company Directors.



Thousands turned out to get a sneak peek at Epworth Geelong

**EPWORTH GEELONG — A plan becomes a reality**

2010	2010	APR 2011	FEB 2012	SEP 2012	OCT 2012	8 MAR 2013
Epworth begins partnership discussions with Deakin University	Board approves purchase of land in Waurin Ponds	10 hectares of land purchased from Marcus Oldham College	Construction permit for early earthworks issued	Epworth Board approves project to progress to design stage	Epworth Place officially named	Town planning approval received

APR 2014	APR 2015	FEB 2016	15 APR 2016	19 JUN 2016	4 JUL 2016
Brookfield Multiplex awarded build contract, ceremonial first sod is turned and works commence onsite	Epworth Geelong 'tops out' to level 7. The Federal Minister for Health, the Hon. Sussan Ley attends	Expressions of interest for employment reach 7000	Brookfield Multiplex hand over keys to Epworth Geelong	Epworth Geelong holds community open day, more than 4000 attend	A building becomes a hospital when Epworth Geelong officially opens its doors

**Supporting local artists at Epworth Geelong**

The opening of Epworth Geelong has provided Epworth with the unique opportunity to seek to enrich, inspire and enliven our patients, visitors, staff, Deakin University students and the broader community, through the establishment of a dedicated public art gallery.

In mid-2016, Epworth celebrated the opening of Epworth Arts Foundation's public art gallery at Epworth Geelong, with an exhibition of works titled The Victorian Scene, by artist Geoff Newton.

**A quick trip to emergency for Harry Potter**

Oliver's mum, Mihajla, brought him to the new Epworth Geelong Emergency Department one morning, after he'd fallen and split his lip. Oliver was dressed to head to his school's Book Day as Harry Potter, and had tripped on his cape – hitting his face on the wall and cutting his lip on the skirting board.

"I was just about to put his bag in the car and realised that Oliver had not brushed his teeth, so I sent him back into the house. Next thing I heard him crying, really crying, so I ran in and saw him on the floor covered in blood. And because Oliver was crying and his lip was swollen, it looked like there was a whole chunk of his lip missing," Mihajla says.

"I think Oliver went into shock. He went all quiet and sleepy. We live in Lara, about 15 minutes away from Epworth Geelong on the freeway, and I realised that the quickest way to get him to hospital was to drive him there myself.

"We were taken in straight away to a room. No waiting time at all. Oliver was much calmer once he was looked after by the nurses and doctors. He also got excited when he got into the bed and he realised he had a screen he could play with and had all the people looking after him.

"A surgeon stitched up Oliver's wound and because he is only little they didn't want to upset him or scare him, so they took him into theatre and gave him an anaesthetic. He got seven stitches. It all took about one hour.

"At one point we had a good laugh with the nurses. Oliver had a Harry Potter scar painted on his forehead and it must have been a bit too realistic because one of the nurses wanted to have a look at that, so we had to explain it was fake and we had a giggle."

*"Oliver was much calmer once he was looked after by the nurses and doctors."*



The Clinical Education & Simulation team conduct thorough scenario testing prior to opening.



## An unexpected pit stop

*“I received great treatment by the nurses and doctors.”*

“My wife Judi and I departed on a driving holiday from the Sunshine Coast; our plan was to travel to Victoria and drive from Melbourne to Adelaide via the Great Ocean Road. We had been looking forward to this trip, as it was the first holiday we’d had in a while,” Russell says.

“As we drove down south my knee became sore and increasingly more painful to bend. It was aggravated by sitting and driving for long periods of time and it got to the stage where I couldn’t get in or out of the car without suffering excruciating pain.”

Russell’s pain eventually became too intense to continue. He and his wife then spotted a sign directing them to Epworth Geelong.

“We arrived at the Emergency Department and were seen straight away. The lady in reception was lovely and I received great treatment by the nurses and doctors. The doctor drained fluid from the knee and that was a huge and immediate relief. He also provided painkillers, so I started feeling better pretty much straight away.

“We needed to wait while a number of tests were performed but, luckily, the pathology service was open on the weekend; they could assess the tests immediately and provide the results.

“We didn’t have a place to stay in Geelong, so Judi and I were a bit worried about what to do. Our doctor suggested we could use the Point of Care system at my bedside to connect to the internet and find a place locally. Judi did this while I was having the tests. We found a nice place to stay and were there for four days, enabling me to rest my leg.

“We never made it to the Great Ocean Road or to Adelaide. Instead, we decided to make our way back home slowly, so the knee wouldn’t flair up again. Thanks to the treatment I’d received the rest of the trip was actually nice. We drove through Ballarat and Echuca and went on a paddle boat. A good trip after all.”



Patient Russell (R) and wife Judi

## Creating a community of local staff at Epworth Geelong



More than 8000 people registered interest in employment at Epworth Geelong since expressions of interest opened in late 2014.

Since opening in mid-2016, Epworth Geelong now employs almost 400 staff, with 96 per cent of staff living in the Greater Geelong region.

Ward Host, Michael Eaton, has lived in the area for 23 years and was recently promoted to food services supervisor.

“I’ve only been here a short time but I love it here. The people I work with, people in other departments, the patients, and people around the hospital — everyone is just so polite and nice. The culture here is really positive.

“All the feedback we’re getting so far from the patients and their families has been really positive — I’ve heard nothing but nice things, which makes you a little happier with what you’re doing, knowing that you’re doing a good job.

“I live 15 minutes away which is really convenient, rather than having to go to Melbourne. I think it’s been very good for the local community,” Michael says.

Renae Galvin moved to Geelong from Newcastle for her role as ANUM in 4East.

“I decided it was time for a change and for some career progression. There wasn’t a lot available where I was. Then I found out Epworth Geelong was almost finished construction and was advertising for staff,” Renae says.

“It was good timing, I had been looking for a change. Coming here I see there is just so much opportunity for progression in any direction that I want to take. There are so many options that I don’t know what I want to do, which is a nice dilemma to have.

“At the moment it’s just about settling in and getting to know the Epworth way, getting a feel for how things run, but also getting to know the local area. It’s been exciting going to new restaurants and to the beaches in Torquay and comparing them to the ones at home. Everyone I’ve been working with here has been lovely, always giving me tips on where to go and what to do.

“It’s lovely to work in a brand new facility. I’ve come from a hospital where parts of it are so old they’re heritage listed. Amazing doesn’t quite cover it. Every room has a beautiful view, all the equipment is brand new. You tell people about it and they don’t quite get it — they have to see the site for themselves to really appreciate it.”

Pictured: Michael Eaton and Renae Galvin



## DELIVERING EXCELLENCE THROUGH INNOVATION

We embrace innovation and actively pursue opportunities to enhance the care we provide

Identifying ways to continuously improve services, processes and technologies keeps Epworth at the forefront of patient care, and ensures our continued status as a centre for excellence. Identifying opportunities for new ways of working, new treatments and new modes of delivery are tried and tested, to ensure patients receive the very best care available.

### Integrated falls prevention model — from emergency department to rehabilitation

In 2014, Epworth commenced a project to identify and prevent fall-related patient readmissions. During a six-month period in 2013, 1026 readmissions were recorded within 28 days across Epworth Richmond, Epworth Eastern and Epworth Freemasons. The Integrated Falls Prevention Model was subsequently initiated for a three-month trial in September 2015, a collaborative approach between the Epworth Richmond Emergency Department and the Rehabilitation and Mental Health Division.

It aimed to provide integration and a continuum of care between acute and rehabilitation services; prevent unnecessary acute hospital re-admissions; support timely discharge; and maximise independent living in older Australians with falls-related problems. The initiative placed a senior physiotherapist in the emergency department (ED), providing a supportive role to the ED physicians in enhancing patient care and improving patient flow from ED through to follow-up services at Epworth. The role was reinitiated and expanded in April, to include assessment and management of both falls-related and acute musculoskeletal injuries.

Outcomes of the model to date include:

- 61 patients admitted to Epworth Rehabilitation for an inpatient stay (includes those admitted directly from ED and those who were flagged but had a short acute stay initially)
- 227 patients managed by the ED physiotherapist
- 31 patients referred to Epworth Rehabilitation outpatient services.

Recent satisfaction surveys reported:

- 96 per cent of patients (50 replies) rated the ED Physiotherapy service as 10/10
- 100 per cent of ED physicians surveyed (19) have been very satisfied with the service and care provided.

Permanent recruitment to the role has commenced, with the aim of offering a seven-day-a-week physiotherapy service, providing coordinated care and enhanced patient outcomes for all appropriate patients.

### Point of Care — Expanding across Epworth

The Point of Care project, to install interactive bedside information systems for patients across Epworth, commenced in 2015 and was overseen by Epworth Eastern Executive Director, Louise O'Connor as Executive sponsor. The project was conceived as

part of the Epworth Excellence initiative; to identify opportunities to enhance the patient and staff experience with Epworth Eastern serving as the trial site.

Following the successful implementation of the first Oneview Point of Care bedside system at Epworth Eastern, the system has been progressively implemented across the Epworth Healthcare network.

The Point of Care program involves the installation of a touch-screen terminal in every patient room, providing:

- **patients** with access to information, education and entertainment options
- **doctors and nurses** with access to a range of clinical and non-clinical applications that will assist in improving workflows and provide easy access to information at the bedside
- **support services** staff with improved workflow and involvement in the care team.

The objectives of the Point of Care system include:

- enhancing the patient experience
- keeping patients safe and reducing risk
- giving staff access to information at the bedside to allow them to maximise engagement with their patients.

Since January 2016, the system has been implemented at Epworth Geelong and the majority of the wards at Epworth Richmond. The system is currently being deployed at Epworth Freemasons and the Epworth Rehabilitation sites. Throughout the year, Epworth also implemented two major software releases providing additional functionality such as admission surveys, nurse leader rounding, room ready management (cleaning and maintenance) and discharge Planning. With the introduction of additional functionality, clinical staff and support services staff can all use the Point of Care system to deliver on Epworth's vision to consistently deliver patient-centred care with compassion and dignity.

"The Point of Care system is an enabler for us to truly achieve the components of a patient-centred culture," Ms O'Connor says. "As a patient information device, it is intuitive and easy to navigate, helping us to continue to build engagement with and between patients, staff and doctors at an overall benefit to the patient experience."

Feedback from patients and staff has been very positive. Many patients have told staff they love the functionality and range of information and



entertainment options available. For staff, the integrated functions save a significant amount of time, enabling them to provide improved care for their patients. Epworth will continue to collaborate with partners, Oneview Healthcare, to deliver additional functionality and benefits via the Point of Care system.

### Jean Hailes for Women partners with Epworth Freemasons

Epworth Freemasons embarked upon an exciting collaboration with Jean Hailes for Women's Health — a national not-for-profit organisation dedicated to improving women's health. The new clinic, Jean Hailes at Epworth Freemasons, is located at the Epworth Freemasons GP Clinic 113 Albert St, East Melbourne. Both Jean Hailes and Epworth Freemasons have been operating services dedicated to improving women's health for over 20 years. Jean Hailes has an existing women's health medical clinic in Clayton where work is undertaken through the integration of research, clinical care and community and health professional education.

Many of the health professionals at the new clinic have come across from the former Epworth Freemasons Women's Health Clinic, complemented by the arrival of Jean Hailes' medical director and most senior clinician, Dr Elizabeth Farrell, and a host of Jean Hailes health professionals and experts.

The collaboration between the two organisations is an excellent opportunity to position both organisations towards meeting the health needs of women into the future.

### Heart patients at Epworth fitted with lifesaving vest

Patients with heart conditions such as cardiomyopathy have taken part in trialling a new life saving device, the ZOLL LifeVest — also known as a wearable cardioverter defibrillator. Six Epworth patients were given the opportunity to utilise the vest, with ZOLL providing the technology free to a number of cardiologists, including Dr Hendrik Zimmet based at Epworth Richmond.

The innovative new device is fitted with a defibrillator that monitors the heart and activates immediately upon sensing a problem. Circular metal plates monitor the wearer's heart rate and, if abnormal rhythms are detected, a shock is delivered via back pads to restore a normal rhythm on the spot.

The vest is worn day and night for approximately the first three months after diagnosis. This is the period of time where in the heart may, or may not, recover to the point where an Implantable Cardioverter Defibrillator (ICD) may, or may not, be necessary. This interim period is often when patients are most at risk of a cardiac event, so the vest provides additional protection and peace of mind to the patient while specialists monitor the condition and determine whether an ICD is appropriate.



## Partnering for excellence in women's health

In June, Epworth Freemasons and Jean Hailes for Women's Health collaborated to form Jean Hailes at Epworth Freemasons, a new women's health clinic.

"We realised pretty quickly that the synergies between our approach to women's healthcare and those of Epworth were significant," says Jean Hailes Executive Director, Janet Michelmore.

"There is a commitment from both organisations to keeping women well, and a commitment to providing them with evidence-based information in a format they find attractive, easy to understand and accessible."

Many of the health professionals at the new clinic have come across from the former Epworth Freemasons women's health clinic, complemented by the arrival of Jean Hailes' medical director and senior clinician Dr Elizabeth Farrell, and a host of Jean Hailes' health professionals and experts. This team will continue to provide women with a professional and caring approach, backed by extensive experience and in-depth understanding of women's health.

Jean Hailes is a national not-for-profit organisation dedicated to improving the knowledge of women's health throughout the various stages of life. The organisation offers a broad range of services including health checks and consultations on issues including menopause, polycystic ovary syndrome (PCOS), endometriosis, gynaecological and hormone

problems, pelvic pain, incontinence, depression, anxiety and sexual problems.

"This was an opportunity to provide specially designed resources for health professionals and women in the community, as well as the opportunity to do joint research projects," Janet says.

"We have the full spectrum of patients, from teenagers through to 85-year-olds, who visit the clinic. Epworth Freemasons has a hub of women's services, so to be part of that hub means better outcomes for our patients — and there is also the collegial experience for clinicians."

"We are really delighted to have formed a collaboration with one of the most renowned providers of women's health expertise both in Victoria and nationally. We align through an equally long history of service to women and a shared mission to improve the quality of women's lives through health service provision and education," says Executive Director Epworth Freemasons, David Nowell.

"We are excited about the opportunities this relationship will forge in terms of innovation, research and education for women's wellbeing in the future."

## Providing heart patients with peace of mind



"When I first started treatment for my cardiomyopathy, the condition was pretty dire.

"We saw some improvement from the medication and Hendrik, my cardiologist, had formed the view that while an ICD (Implantable Cardioverter Defibrillator) might be an option, given my age he didn't want to go down that path if we could avoid it," Shane says.

Instead, treating Cardiologist, Dr Hendrik Zimmet, gave the 42-year-old father of three the ZOLL LifeVest, a wearable defibrillator, new to the Australian market but used in the US and Europe. The LifeVest protects patients during the period in which it is unclear whether their heart will recover sufficiently, or whether they will require an ICD for long-term protection against dangerous abnormal heart rhythms.

The vest has a remote monitoring system, which sends signals to an online network: if Shane experiences an abnormal rhythm, Hendrik will receive an alert online. The system also alerts Hendrik if Shane is not wearing the vest at least 18 or 20 hours a day.

"The vest has a clear role in cardiac treatment. It does everything the implantable device does: it watches people 24/7 and it can detect the rhythm disturbance and deliver a shock. The pads are loaded with gel and if the patient is having a cardiac event it will activate and gel will come out," Hendrik says.

"Our term for the vest delivering a life-saving shock is a 'save'."

"There are quite a lot of patients with cardiomyopathy — a disease of the heart muscle that means the heart is unable to pump blood around the body adequately — who will actually improve their heart function over weeks to months and in some cases fully recover. International guidelines advise we don't put in an ICD straightaway in people who have this kind of problem, because they might not end up needing it," Hendrik says.

Shane wore his LifeVest day and night for the first three months after diagnosis — a dangerous period for patients waiting on confirmation as to whether they will need an ICD. While Shane and Hendrik waited to see whether Shane's medication would allow him to avoid surgery, the vest provided a level of reassurance to Shane and his family. His children were excited too, convinced that the life-saving vest gave their dad superpowers.

"My youngest son, my six-year-old, is into Buzz Lightyear, so he thought it was my jet pack!" Shane says.

Fortunately, Shane's condition improved significantly over the three months and he was able to avoid having an ICD implanted.

"It gave me a bit of peace of mind but the biggest advantage for me was my wife felt so much more comfortable knowing I had it on. I was back working at that stage and she was a lot happier knowing that if something went wrong I had the vest to look out for me."

Pictured: Dr Hendrik Zimmet fits Shane with a ZOLL LifeVest

### Streamlining the discharge medication process for patients

In December 2015, a pilot to streamline the patient discharge medication process was conducted, to improve patient satisfaction and safety. Based on feedback received from patients in the Press Ganey survey — regarding whether staff explain what new medications are for and whether staff describe a medication’s side effects — a blue patient discharge medication information sheet was developed.

The information sheet outlines discharge medication (including trade and generic name; what the medication is for; how often to take the medication; and common side effects. The sheet was developed by Orthopaedic Surgeon, Mr William Edwards, in conjunction with Slade Pharmacy; Jacinta Opie, project manager lead — performance improvement, and Melanie Gordon, project manager — quality, and given to 40 of Mr Edwards’ patients to trial.

Once admitted to wards at Epworth Richmond, patients were provided with the information sheet. The project team contacted patients 24 hours post-discharge via a follow-up phone call.

Of the 86 per cent of patients who were able to be contacted 24 hours post-discharge from hospital:

- 89 per cent stated they received enough information on discharge
- 86 per cent of those who received the blue discharge medication information sheet found it useful
- 91 per cent had no concerns 24 hours post-discharge from hospital
- 66 per cent of patients had a pain score less than two out of ten, which indicated the patient understood how to take their analgesia once home.

Due to use of the discharge medication information sheet, patients were delivered the same information by nursing staff, Slade Pharmacy and the project team. Patient calls to Mr Edwards’ rooms decreased by 98 per cent during the pilot.

The pilot enabled staff to provide consistent and clear messaging to patients about their medication requirements and scheduling. After the trial, an evaluation workshop took place with nursing staff on the wards, Slade Pharmacy, the project team and a patient, with an overwhelmingly positive result. As a result, plans are in place to develop a similar process for a larger cohort of patients in the orthopaedic group.

### Australian-first procedure minimises stroke risk in heart patients

In November 2015, Cardiothoracic Surgeon, Mr Michael Yii, performed an Australian-first procedure using a special titanium clip on an atrial fibrillation patient. Patient Barry, 69, had suffered from tightness of the chest, sweating and occasional nausea related to his irregular heartbeat. Atrial fibrillation can increase the risk of blood clots forming which, in turn, can lead to stroke.

During a procedure at Epworth Eastern, Mr Yii attached a titanium clip to the upper region of Barry’s heart, sealing off an area in which blood clots typically form. Since the operation, Barry has halved his medication and no longer experiences any fluttering or fibrillation in his heart.

Epworth is currently the only centre offering this procedure in Australia.

### New ablation procedure reduces muscle thickening

In June, Epworth Richmond’s cath lab successfully performed its first procedure using injected alcohol to reduce muscle thickening in the heart.

Hypertrophic obstructive cardiomyopathy (HOCM) is an uncommon inherited condition that causes thickening of the muscle of the left ventricle (LV), and usually involves the septum — the muscle that divides the right and left ventricle. Thickening of this muscle at the base of the septum can impede blood flow into the aorta, leading to symptoms such as shortness of breath, chest tightness, dizziness and palpitations.

A minimally invasive procedure — an alternative to medication (which can cause side effects), or open-heart surgery (which can be high risk and result in a prolonged recovery period) — is available, using alcohol injected through catheters to ablate (reduce) the muscle thickening.

This procedure, called alcohol septal ablation (ASA), is currently being offered to patients over 60 who are considered high risk for open-heart surgery. It is also offered to those who would like a less invasive approach after an informed discussion with surgeons and interventional cardiologists.

Epworth Richmond recently performed this procedure on an 84-year-old woman with exertional breathlessness and significant obstruction of blood flow from the LV into the aorta. Despite optimal medical therapy, she was still symptomatic. After injection of a small amount of alcohol, the obstruction was abolished with no complications.

# The device helping patients sidestep stroke

## In November 2015, Cardiothoracic Surgeons Mr Michael Yii and Mr Siven Seevenayagam performed an Australian-first procedure using a special titanium clip on heart patient, Barry.

Today, after two years of experiencing tightness in his chest, a racing heart and nausea, 69-year-old Barry has halved his medication and is now symptom free.

“The first episode happened about three-and-a-half years ago now. My heart suddenly started racing, then going slowly, then racing again, and I didn’t know what was going on,” Barry says.

“The episodes started to get more frequent. It got to the point where in the year before I had the surgery it was happening every two to three weeks and would typically last between eight and 10 hours. The longest one I ever had was 22 hours. Then it would stop and the next morning I would feel completely drained. It wasn’t a pleasant experience to go through.”

Barry’s condition, atrial fibrillation, increases the risk of blood clots forming, which in turn can lead to stroke. During a procedure at Epworth Eastern, surgeons ablated Barry’s atrium and attached a titanium clip to the upper region of Barry’s heart — called the left atrial appendage — using keyhole surgery, sealing off an area in which blood clots typically form.

Though new to Australia, the procedure has been performed overseas with a success rate of around 85 per cent in eliminating atrial fibrillation, and effectively removing the left atrial appendage in all cases.

Dr Andrei Catanchin assists Michael and Siven during these procedures, performing electrical studies and testing on the heart before and after Michael delivers heat energy (ablation). This disconnects certain parts of the atrium that have abnormal electrical activity — which causes atrial fibrillation.

“The first time I was hooked up to an ECG machine you could see my heart was going from 180 down to

130, down to 70 then up to 135. It was jumping all over the place,” Barry says.

“A lot of people don’t understand, I certainly didn’t, that the problem is not your heart in the sense your heart is going to stop, it’s just that the heart isn’t actually pumping properly. So you get blood pooling, then clotting and the danger is stroke, which is why they put you on blood thinners.”

Michael says, “The left atrial appendage is increasingly recognised as the source of stroke-causing clots in patients with atrial fibrillation. The Atriclip is arguably the safest and most effective way to remove the left atrial appendage, and can be performed using keyhole surgery.

“What we are trying to do in this operation is remove or eliminate this part of the heart. When you scan the patient three months after the operation, you virtually don’t see the appendage, it just disappears, because the clip removes it all,” he says.

“The main feeling is relief, knowing the heart palpitations won’t suddenly happen again. You could never predict when it would start, sometimes it was in the middle of the night; sometimes it was during the day. I think I was pretty lucky to have the surgery,” Barry says.

Pictured: Mr Michael Yii



The patient was discharged from hospital on day five and was symptomatically much better on follow-up. In 25 per cent of patients undergoing ASA, a permanent pacemaker is required as the alcohol can also damage the conducting system.

Short and long-term observational clinical data have suggested survival following surgical myectomy and ASA are similar but that surgical myectomy may be more effective in reducing the obstruction in some patients. There are no direct head-to-head comparisons of the two approaches in clinical trials at the present stage.

#### Medical imaging app facilitates 24 hour access for doctors

Epworth Medical Imaging has introduced a new mobile app for its referrers. The Epworth Imaging app is a digital tool for doctors, providing mobile access to patients' images.

The app also offers secure image-sharing features to referring doctors of Epworth Medical Imaging, allowing patients' images to be emailed or sent via text to other medical practitioners. While viewing images, referrers can also make notes and highlight areas in images using the app's 'draw' function before saving and sharing.

Developed to enable access to images remotely, Epworth Imaging is designed for reference rather than diagnosis. It is available for Android and iPhone from the Play and Apple stores.

#### Epworth first with advanced prostate cancer treatment

Epworth has become the first care provider in Australia to use Calypso transponders to enhance precision during image-guided radiotherapy treatments as a standard of care.

Epworth Radiation Oncology (ERO) uses the Calypso system, a Varian Medical Systems technology, for precise tumour targeting and for reducing side effects during radiation therapy for prostate cancer. The system gives real-time information about the location of the prostate during treatment, which can shift by as much as several millimetres during a radiotherapy session.

#### Rapid response unit reducing stroke risk

Epworth Eastern's neurosciences unit opened in February 2016, providing early intervention, diagnosis and treatment for patients who present to their GPs with a suspected transient ischaemic attack (TIA) — a temporary blockage of blood to the brain, with symptoms often mimicking a stroke. The unit held a launch event with an expert panel discussion on TIA, led by Unit Director Dr Amanda Gilligan.

Epworth is working in partnership with the Eastern Primary Health Network to provide GPs and specialists with access to a TIA rapid response service. TIA is a high-risk warning sign for stroke within 90 days, with the highest risk (reported to be up to 50 per cent) occurring in the first two days. The service was developed to alleviate the difficulty patients experiencing TIA symptoms face in accessing rapid specialist treatment.

The new unit offers private hospital admission over the phone within hours of symptoms first appearing and provides a plan for rapid assessment — avoiding a potential emergency department stay. With a neurologist on call 24 hours a day, the new unit provides potentially lifesaving intervention before a stroke occurs. Unit staff also provide extensive patient follow-ups, at three, six and 12 months, as recommended by best care guidelines, as well as a follow-up phone call one week post discharge.

The unit is supported by a multidisciplinary team made up of neurologists, medical staff, specialist acute neurosciences clinical nurses and a dedicated allied health team with rapid access to radiology including MRI, pathology, cardiac investigations, vascular surgeons and cardiologists, as required.

#### The most advanced operating theatre arrives at Epworth Richmond

The new Siemens Artis Q hybrid biplane theatre, the first of its kind in Australia and New Zealand, was installed in early 2016 at Epworth Richmond. Epworth is the first private hospital in Victoria to offer this technology to patients.

The hybrid biplane theatre combines advanced, high-precision imaging technology with a fully equipped surgical suite, providing surgeons with a unique capability to view the patient's internal anatomy to a high level of detail, as well as obtain physiological and functional information during surgery. The technology is particularly suited to the treatment of heart, vascular and neurological disorders and allows for both open (traditional) and endovascular (minimally invasive) surgery, resulting in quicker procedures, a reduced risk of infection, shorter hospital stays and improved recovery.

Endovascular surgery is an innovative procedure for the acute treatment of all aspects of cerebrovascular disease, including stroke, aneurysms, brain bleeding and ruptured arteriovenous malformation. All these conditions can be fatal if not diagnosed and treated promptly. This new technology provides Epworth surgeons an unprecedented level of detail, so the graft or coil can be precisely positioned and checked, which in turn provides a better result for patients.

= CARE



## Targeting tumours: a safer way to beat cancer



"With traditional radiotherapy to the prostate bed, damage to the bladder and bowel can cause issues such as persistent bleeding in the urine; needing to pass urine sometimes four or five times overnight; and needing to use your bowels four or five times a day, with bleeding. In a few cases it's severe enough that men have had to have their bladders removed completely because the bleeding was unable to be controlled," says Director, Epworth Radiation Oncology, Dr Pat Bowden.

"By moving treatment away from the bladder and bowel onto the prostate bed, it seems we have greatly reduced, if not eliminated, those problems and that is all due to the fact that radiation treatment doesn't need that margin around it that you normally have to allow for movement of the tissues. The beacons track that movement so the radiation can just track the target," Pat says.

The damage caused by traditional radiotherapy treatment can be debilitating for patients.

All men on the PINPOINT trial had already had their prostate removed but the cancer had not been completely eradicated, based on elevated PSA (Prostate-Specific Antigen) levels — a chemical released by prostate cancer cells.

Trial participant, John, recorded no side effects from his treatment and is now fully recovered.

"I hope I'm not jinxing myself but so far the evidence is looking positive about my recovery. I think I've had a very good outcome from the trial," John says.

"I lost my wife to cancer 18 months ago, so I've seen the worst that cancer can do. My diagnosis came not long after she passed away and I was a pretty stressed out bloke. I was so happy to be part of the trial because if there is anything you can do to give people with prostate cancer a helping hand, then you should. I feel grateful now — vulnerable and grateful."

Epworth has become the first healthcare provider in Australia to use Calypso transponders to enhance precision during image-guided radiotherapy treatments as a standard of care.

Pictured: Patient John Healy

Just as a GPS can pinpoint where a car is at all times in relation to its destination, Varian's Calypso system provides continuous, real-time information as to the precise location of the prostate.

The prostate is not a stationary target. It can shift by as much as several millimetres during a radiotherapy treatment session. The Calypso system enables clinicians to track the prostate in real time during treatment, in order to help enhance treatment precision.

The Calypso system was critical to the ongoing PINPOINT trial, where, as the name suggests, beacons are used to target radiotherapy more accurately in prostate cancer patients. The trial, partially funded by the Ted Whitten Foundation, ran for 12 months from July last year and has recorded positive results for patients.

The insertion of beacons around the treatment site help to guide and concentrate radiation to the area it is needed whilst sparing the surrounding tissue.

## Early intervention a potential lifesaver

Time is critical for patients presenting with a suspected transient ischaemic attack or TIA.

Often the symptoms, which mimic those of a stroke, are subtle and will disappear or lessen over time. Yet, over the following three months, TIA patients are at high risk for stroke, with 50 per cent of strokes occurring in the first two days after symptoms appear.

TIA often goes undiagnosed and patients will wait up to two months for basic testing. Quickly identifying symptoms and confirming the diagnosis can mean the difference between life and death.

Margaret knows the risks all too well; she was admitted to hospital on advice from her GP, after experiencing a suspected TIA.

"That morning, the left side of my face was drooping a bit and I did get a fright. I went to the doctor and she said it sounds like a TIA and to get myself to an emergency department. I went home and thought, I don't have money for parking and I don't know quite where to go. I eventually called an ambulance."

Margaret's daughter, Joanne, rushed from work to meet her mother.

"I was extremely concerned by the lack of response to what had been apparently diagnosed as a TIA. I knew that time was a factor. It was from my own research that I stumbled across the new rapid response TIA service at Epworth Eastern. It was then, once we made contact with Epworth, that the care my mother needed materialised," Joanne says.

Epworth Eastern's neurosciences unit was established in February, developed by Unit Director Dr Amanda Gilligan to provide early intervention, diagnosis and treatment of TIA — a service previously only available interstate.

"Unless you see patients urgently, and they see the right specialist, they can go on for months with the wrong diagnosis, on the wrong medication, anxious about what they actually have or, more importantly,

they might have actually had a stroke and are at risk of having another one," Amanda says.

"We know from previous studies that if you treat patients in a rapid access TIA service, you can reduce the risk of stroke by 80 per cent.

"We have this window of opportunity to prevent what is a devastating, life-changing event and if we don't do it early we've missed the boat and patients' lives completely change."

Joanne says, "A unit such as this isn't about any one person; its benefit is evident at every level of care. From the moment the initial phone call was made, when I was able to speak with a neurologist, right through to the level of care following discharge, everything has been what we hoped. I know being here has made a difference to my mother because her blood pressure came down markedly once she was here. She was treated with dignity."

"From the very first phone call we spoke to someone who was interested and knowledgeable and was really positive. To hear that, at that particular moment, was so reassuring."

Patient Margaret chats with Dr Amanda Gilligan



### Epworth in the media

Media coverage about patient care; surgical advances; the establishment of new treatments and services; and the community activities of Epworth specialists and staff, increased exponentially during 2015–16. The highest volume of coverage was provided by the Geelong Advertiser around the six month lead-up to the opening of the new Epworth Geelong on 4 July 2016.

Epworth seeks media coverage to target audiences looking for meaningful stories about holistic care and compassion for patients and their families.

During the 12-month reporting period, Epworth received audience coverage in electronic and print media with more than 500 articles or broadcasts, many of which were syndicated to national audiences.

News items about Epworth are monitored by media group iSentia. The advertising industry equated the value of the 2015–16 reporting year’s publicity at an Advertising Space Rate (ASR) of \$6,952,333.

These figures do not represent the growing social media activity by the marketing team, which has expanded significantly and is recognised as the chosen source of news and information for people under 35 years of age.

### Improving internal communication and collaboration

After an extensive period of user consultation and research, Epworth launched phase one of the refreshed employee intranet in June. Feedback received from content publishers and users regarding the previous intranet formed the basis of a new and improved system, with greater functionality and usability.

The goals for the new intranet were very clear:

- to provide access to information and tools for staff to carry out their day-to-day work and administer their employment
- to provide a platform for teams to connect, communicate and collaborate together
- to become a central source of information for all departments and sites.

Among the improvements were a user-friendly layout and content structure, as well as the much-anticipated search function, allowing staff to easily locate individuals and specific content across the group.

The intranet has been launched in stages, and will continue to evolve and expand in step with the creation of content, tools and resources across the organisation. More than just a source of information, it will be a key business tool that will support the day-to-day activities of staff, with a shared focus on both corporate and clinical needs.

### Epworth Radiation Oncology certified for quality and safety in radiosurgery

Dr Mike Dally and the team at Epworth Radiation Oncology participated in an independent audit of their radiosurgery program in 2015, and were presented with a plaque to recognise the achievement of Novalis Certification for the highest standards in quality and patient safety in radiosurgery — the only private hospital in Australia to receive this accreditation.

Stereotactic radiosurgery provides cancer patients with advanced, precise radiation treatment in a non-invasive, non-surgical approach.

The Novalis Certification process is a rigorous, independent accreditation program that scrutinises all aspects of providing high-precision radiation oncology treatments. Worldwide, it promotes a very high standard of efficiency and safety for stereotactic radiosurgery (SRS) and stereotactic body radiation therapy (SBRT) treatments. The audit includes a review of organisational, personnel, technological and quality assurance requirements.

### Robotic prostate biopsies reduce infection

Hundreds of Victorian men are being saved from life-threatening infection with a new device currently in use at Epworth. The device allows transperineal biopsies to be performed robotically, in the hope of making prostate biopsy even better for patients. Epworth urology surgeon Associate Professor Jeremy Grummet is pioneering the use of this device, designed by Biobot, to diagnose prostate cancer.

“Instead of the usual 24 to 36 skin punctures that are necessary in standard transperineal biopsies, this new minimally-invasive device enables the same number of transperineal biopsies with only two skin punctures.

“Using this device is a way of performing guided biopsy of the prostate via the skin, where the sepsis rate is near-zero, compared with a small but significant sepsis rate — about two per cent— with traditional transrectal biopsy,” says Assoc Prof Grummet.

“When thousands of these biopsies are done every year in Victoria alone, that’s potentially a lot of men saved from life-threatening infection.

“I’ve been using it since July last year, refining the technology and the technique, and recently gave a demonstration to a group of Sydney urologists right here at Epworth. Now I think this technology is ready for widespread use, I’ll be giving a masterclass to Epworth urologists in the near future.”

The device goes by the unusual name of Mona Lisa — perhaps a play on the more famous da Vinci robots pioneered at Epworth over a decade ago. As well as using only two skin punctures, it can also fuse prior MRI images showing the cancer onto real-time ultrasound during the procedure so that biopsies can be directed to target the cancer in 3D, giving a highly accurate diagnosis.

### Finding the path best travelled at Epworth Richmond

Digital wayfinding was introduced at Epworth in early 2016; an electronic collection of journey maps to assist patients, visitors, staff, doctors and volunteers to find their way more easily at Epworth Richmond.

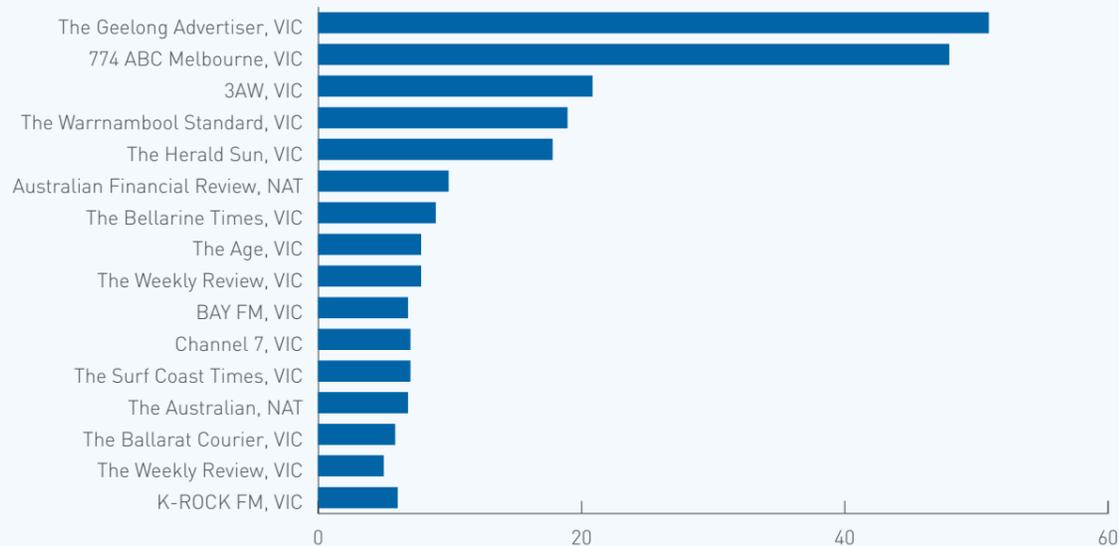
Five digital wayfinding kiosks have been installed at key locations across the site, including the Bridge Road and Erin Street entrances.

Key features of Epworth’s digital wayfinding include: multilevel maps and directions; doctors’ consulting room locations; language options including English, Italian, Greek and Chinese; the location of Epworth Richmond facilities — such as toilets and food services; directional maps to inpatient units and services as well as guides to car parking, public transport and the emergency department.

Additional features of the system include ‘easy guide mobile’, allowing patients and visitors to scan a QR code from the kiosk screens and launch a mobile application on their smartphone; and ‘easy web’, allowing use of the same functions available at kiosks, or at home on a PC.

All the user needs to do is define their entry point and then select their destination. A link has been placed on the Epworth website to launch the online directory and map.

EPWORTH RELATED NEWS BY MEDIA OUTLETS FROM 1 JANUARY 2016 – 30 JUNE 2016



Statistics unavailable from iSentia prior to 1 January 2016.



## FOCUS ON EDUCATION

Improving the patient experience by integrating clinical practice with education

Epworth HealthCare is a teaching hospital, with highly successful education programs for undergraduate, graduate and postgraduate medical, allied health and nursing students, and general practitioners. Programs are supported by senior specialist clinicians and clinical educators from across the group.

## CLINICAL EDUCATION AND SIMULATION

### Nursing and medical undergraduate education and training

Epworth aims to improve the health, wellbeing and experience of every patient by integrating the best of education and training with patient care.

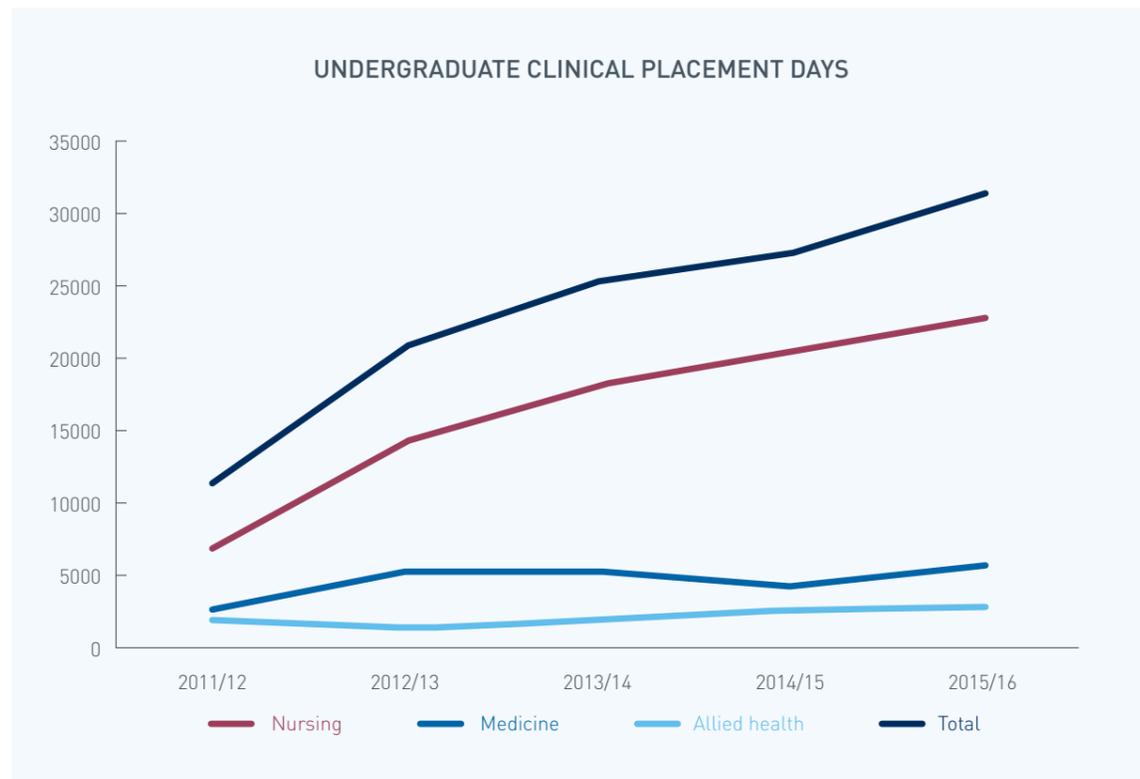
Epworth continues to develop its infrastructure, with the completion of Clinical Education and Simulation centres across Epworth. These are purpose-built simulated clinical learning spaces that create a safe learning environment, in which clinicians from all experience levels and disciplines can safely practise challenging aspects of patient care. Education modalities from tutorials, clinical skills sessions and the facilitation of complex clinical scenarios encourage high levels of clinical competence, critical thinking, teamwork and quality decision-making.

Simulation training uses structured planning, delivery and evaluation frameworks to create a safe and effective learning environment. Adult learning principles and experiential learning models form the frameworks for the programs, which encompass clinical, non-technical and human factor elements. Post-activity debriefing supports participants to reflect upon their practice and in doing so, uncover reasons behind decisions made.

The infrastructure is vital to the development of an environment that supports the active learning of current staff, undergraduate and postgraduate students by effectively linking academic studies with clinical practice. Student education at Epworth is considerable, with over 31,000 individual clinical placement days of training provided annually to students across 11 disciplines in allied health, nursing and medicine.

Managed and directed centrally are the group-wide undergraduate nursing placements and fellowship programs; simulation services and other education areas across the group; library and library services online; medical education; undergraduate medical students; Epworth Clinical School with The University of Melbourne; and Monash University medical student rotations.

### IN 2015/16, EPWORTH INCREASED CLINICAL PLACEMENT STUDENT DAYS BY 15% TO 31,287 DAYS



To deliver clinical placement training days, strong clinical relationships have been developed with education providers ranging from universities and TAFEs to private education providers. These relationships ensure students are well-supported during their studies and meet their expected educational outcomes for clinical competency and their academic course. The partnership between Epworth and higher education providers delivers work-capable health professionals — improving health outcomes in the community.

These clinical skills and simulation programs delivered from the state-of-the-art clinical simulations centres at Epworth Richmond, Epworth Eastern, Epworth Camberwell and Epworth Geelong include: Advanced Life Support (Adults) (ALS) Program; Paediatric Life Support (PLS) Program; Advanced Paediatric Life Support Simulation Program (APLSS); Insitu/Mobile Simulation Program; Effective Management of Anaesthetic Crises Course (EMAC); Maternity Simulation Program; Basic Life Support and Manual Handling; Massive Blood Transfusion Sessions; IV Cannulation Courses; and discipline-specific team training.

### Epworth has placement partnerships with:

- Monash University
- The University of Melbourne
- Deakin University
- Swinburne University
- La Trobe University
- Australian Catholic University
- Australian Nursing and Midwifery Federation
- Charles Darwin University
- RMIT
- Box Hill TAFE
- Holmesglen Institute
- Victoria University
- Chisholm Institute

### In the following disciplines:

- Medicine
- Nursing — Enrolled
- Nursing — Bachelor
- Nursing — Postgraduate
- Midwifery — Undergraduate
- Midwifery — Postgraduate
- Nursing — Master
- Paramedicine — Undergraduate
- Physiotherapy — Undergraduate
- Occupational Therapy — Undergraduate
- Speech Pathology — Undergraduate
- Exercise Physiology — Undergraduate
- Occupational Therapy — Undergraduate
- Radiology and Imaging — Undergraduate
- Dietetics — Undergraduate
- Social Work — Undergraduate
- Allied Health Assistance — Diploma
- Health Administration — Diploma

## NURSING EDUCATION

### Epworth Richmond

The Epworth Richmond education team has had a busy and exciting year training and supporting staff through the redevelopment and opening of the Lee Wing. The team, in conjunction with the Clinical Education and Simulation team, has continued to support nursing, medical and allied health staff through ongoing workshops, seminars and program opportunities.

Epworth is currently partnered with Australian Catholic University, The University of Melbourne and Deakin University in a variety of specialty postgraduate programs including orthopaedics, neurology, critical care, perioperative and oncology. There has been an increase in staff accessing such programs, which will inevitably assist in the growth of Epworth's services.

Epworth Richmond has been fortunate in being able to support an increased number of staff through the Graduate Nurse and Introduction to Specialty Practice (ISP) Programs. The ISP Program has had an overwhelming amount of interest and participation from all clinical areas over the past 12 months. The program aims to develop staff knowledge and skills to be able to care for the acute patient more confidently and equip staff to detect signs of clinical deterioration earlier, overall providing clinical areas with a stronger workforce.

### Epworth Eastern

The Epworth Eastern education team introduced its first education booklet highlighting the education events for the year. Among the events were the deteriorating patient insitu simulations, which were run by ICU and perianaesthesia educators. They were held across all wards and departments, including night shift, providing staff with the opportunity to reinforce clinical assessment skills regarding the deteriorating patient.

Twilight education sessions were also introduced monthly and involved nursing, medical and allied health staff across the hospital providing education on a variety of topics. ELearning was introduced as a portfolio of education and a number of clinical programs have been created. Non-clinical eLearning programs will be developed in the near future.

Epworth Eastern has continued partnerships with universities and TAFEs in providing a high level of undergraduate nurse placements, concentrating on providing students with the right support and clinical exposure. This partnership also extends to postgraduate courses, with a number of nursing staff enrolling in postgraduate studies in perioperative, critical care and oncology nursing.

Recruitment via the Registered and Enrolled Nurse Programs has been successful as Epworth continues to attract and exceed expectations in the numbers and quality of the applicants. Another recruitment strategy introduced was the Enrolled Nurse Transition Program, which has run twice in the last 12 months. The program included study days and supported clinical time for qualified and experienced ENs who are currently not working in the acute care environment.

The Graduate Nurse Programs and EN Transition Program, along with the Perioperative Introduction Program and High Dependency Programs, show Epworth Eastern's commitment to supporting and developing its future workforce.

### Epworth Geelong orientation

After receiving handover from the builder and moving from its temporary office into the newly built hospital, the Epworth Geelong project team worked hard to prepare the building to be ready for patients on 4 July. Most of the management team was initially housed in a single office, which made communication and peer support visible and a strong uniting force — recruiting, purchasing equipment and marketing the service to the Geelong community.

Prior to onboarding the bulk of the workforce, with assistance from other Epworth divisions and the corporate office, there was a weekly session for Epworth Geelong managers to build their own knowledge of Epworth processes and culture, IT systems and, most importantly, the supports that were available to help them succeed.

The first of the large orientation groups arrived on 20 June. The program ran for five days for clinical and three days for non-clinical teams and was repeated the following week.

Approximately 180 staff were accommodated each week in sessions ranging from IT programs to basic life support and safe moves, ensuring all staff had the opportunity to learn about new equipment and meet each other to build a strong team.

### Epworth Geelong — from day one

In line with the team focus from orientation, the education team at Epworth Geelong is working to ensure that Epworth continues to offer a service that is inclusive and interdisciplinary.

There is already an ongoing program of in-service education within the wards and perioperative services as well as for the support services team.



In order to build capacity in neurosurgery, an evening session was offered to perioperative, ward nurses and members of the allied health team. These sessions will continue to run on a monthly basis, highlighting various specialties and services in Geelong.

Undergraduate clinical placements will commence in September 2016 with a group of third-year Deakin University nursing students. Students will be supported by the educators assigned to each department, and the educators will be responsible for facilitating education and learning opportunities and quality projects within the department. The critical care departments also currently combine education with the ICU liaison service.

### Epworth Freemasons

The Epworth Freemasons education team provides clinical support to both existing and new staff. Over FY 2015/16, the graduate programs at Epworth Freemasons have expanded to provide February and July intakes of enrolled nurses, registered nurses and registered midwives.

Postgraduate programs running in the division include midwifery, perioperative, urology, women's health and orthopaedics.

Undergraduate students from all major universities are regularly on the wards at Epworth Freemasons, both in the Clarendon Street campus and Victoria Parade maternity unit.

Oncology services have benefitted from the introduction of Eviq ADAC courses to upskill registered nurses in providing chemotherapy care to Epworth patients.

To meet the needs of staff in 2016, education has been expanded with courses and short day education in the

areas of diabetes education for midwives, haematology, male catheterisation and oncology updates.

### Epworth Rehabilitation and Mental Health

The Rehabilitation and Mental Health division supports its staff to be their best, receiving 226 study leave applications from nursing, allied health, administration and hospitality staff in 2015/16. The division also supported nursing and allied health to progress their postgraduate studies by providing financial support and education leave. In total more than \$37,200 and 2400 hours were awarded for external education.

Staff attended more than 3000 hours of in-service education, with a focus on the National Standards, clinical skills and increasing knowledge of new rehabilitation programs across the division. An eLearning module specifically designed for rehabilitation nurses was created to support learning.

The division continued to support graduate nurses with their transition into the workforce, with 20 registered nurses and six enrolled nurses rotating across all four sites through rehabilitation and mental health specialties.

**DOCTORS IN TRAINING HAVE GROWN 27% SINCE 2014 TO 56, AND INCLUDE POSTGRADUATE DOCTORS SUCH AS HOSPITAL MEDICAL OFFICERS, INTERNS AND REGISTRARS.**

## ONLINE LEARNING AND LIBRARY UPDATE

### Digital learning transformed

eLearning at Epworth has undergone a transformation. In 2015 a completely new approach was rolled out, including a new educational philosophy, new content and a new system. eLearning at Epworth is now clearly focused on developing Epworth's people in new and engaging ways and on directly supporting Epworth's quality of care and performance. The new eLearning program is designed to be delivered in many ways: in the workplace, in work teams, on mobile devices and to support career development and lifelong learning.

The first major step was a seamless transition to the new system in October 2015. Thanks to careful design, the change to a new and more capable system required no retraining for staff. There was no workplace disruption and training and compliance data continued to be gathered from across Epworth.

Since the new courses were launched in November, the use of online training has accelerated, with a 33 per cent year-on-year increase in course completions (Dec-Jun). Ninety-eight per cent of staff responded in extensive surveys that they had no issues with the new system and since the launch only 1.9 per cent disagreed with the statement: 'I can clearly apply this content to my workplace'.

eLearning is now delivered in short courses and focuses on current priorities, featuring Epworth staff responding to challenges and opportunities. There is a clear distinction between learning and reference material and eLearning is designed to be part of an integrated campaign. Development through a workshop process improves the quality and speed of course development.

There is also alignment with all courses having identified measurable organisational outcomes. These will be reviewed every 24 months for mandatory courses. There are increasing opportunities for non-mandatory learning as well. Already ten per cent of course completions are for courses that are not mandatory but can be selected from the growing course catalogue.

The new eLearning system is supported by training for educators, which has allowed staff to develop courses with support from the central eLearning team.

### Library update

The Epworth library continued to develop its services in 2015/16, with an ongoing focus on support at point of need. The Epworth Patient Education Resource Guide was made available via the new Point of Care

system, providing credible health information for patients and families. The Epworth Knowledge Bank has experienced significant activity since its launch in July 2015, showcasing Epworth's academic and clinical publications to a global audience.

The library at Epworth Richmond continues to grow in popularity, with 94,681 visits in 2015/16, an increase of nearly 12 per cent on the previous year. The team was delighted to offer a high-quality library space and collection at the opening of Epworth Geelong, continuing the commitment to support Epworth's excellence in education, research and clinical practice across all sites.

## 105% INCREASE IN LIBRARY USAGE IN 2015/16 WITH NINE RESOURCE GUIDES CREATED, 1992 ARTICLES SUPPLIED AND 199 LITERATURE SEARCHES

### Epworth Knowledge Bank

In its first 12 months the Epworth Knowledge Bank, a repository of published academic works, has attracted attention within Epworth and among colleagues and peers worldwide. Exposure is high, with more than 54,000 hits from nearly 6000 users from locations including Australia, Canada, US, UK, China, Russia, Japan, Brazil and Germany, among others.

Over 650 records have been added, showcasing Epworth authors' work. Publications include conference posters, refereed articles, letters to editors, and presentations, and links to PubMed records or free full text have been added. This information is used within Epworth to generate reports, identify areas of activity and track interest from outside the hospital.

As a window into Epworth excellence, the bank is a powerful tool, and will continue to demonstrate to peers and patients around the world Epworth's excellence in education, research and clinical practice.

## UNDERGRADUATE MEDICAL STUDENTS

The undergraduate medical student program continues to host cohorts of students from Monash University, The University of Melbourne and Deakin University in a variety of disciplines across Epworth.



## EPWORTH KNOWLEDGE BANK WAS ESTABLISHED TO RAISE THE PROFILE OF EPWORTH PUBLICATIONS, WITH 450 EKB RECORDS UPLOADED

In 2016, Epworth became a clinical school for The University of Melbourne with a cohort of 15 second-year medical students (MD2), who will remain at Epworth for the duration of their medical training. This program will continue into 2017 with another group of second-year medical students.

In addition to these ongoing placements, Epworth continues to host students from other institutions — both Australian and international — throughout the year, on clinical elective placements.

### Contributing to ongoing medical education

The 2015/16 Grand Rounds calendar continued the tradition of interesting and topical presentations across a wide range of specialities. All 11 clinical institutes contributed presenters to Grand Rounds

and a total of 38 presentations were delivered, including monthly research Grand Rounds.

Highlights of 2015 included international guest presenter Mr Tony Rutherford's presentation on 'Mixing the wrong sperm and eggs in an IVF laboratory' and 'The great debate — Is research bad for your health?' which featured lively audience participation.

In 2016, Grand Rounds changed significantly, moving to Tuesdays to enable medical students to attend. The audience for Grand Rounds also expanded to Epworth Geelong, joining via video conference together with Epworth Eastern and Epworth Freemasons.

The success of Grand Rounds is due to the contribution of all of the presenters who generously give their time to educate the Epworth community.

### Epworth becomes a clinical school of The University of Melbourne

Epworth now has its own independent clinical school of the University of Melbourne School of Medicine, with a cohort of 16 second year medical students (MD2) benefitting from this partnership for the first time in 2016. These students will see Epworth as their 'home site' throughout their clinical years. After spending 12 months at Epworth in 2016 studying general medicine and surgery and their subspecialties, they will complete psychiatry, paediatrics, general practice, obstetrics and gynaecology and rural rotations in 2017 and research and pre-intern rotations in 2018.

This clinical school is in addition to the other group of obstetrics and gynaecology students who rotate from the Royal Women's Hospital and who are taught through the Department of Obstetrics and Gynaecology at Epworth Freemasons. Epworth has been steadily increasing its teaching program for medical students from both Monash University and The University of Melbourne over the past eight years.

Epworth continues to have a very close relationship with Monash University, hosting around 20 students from third-year medicine at Monash and smaller numbers from their fifth-year cohort, as well as individual students from universities around Australia and throughout the world completing their six-week elective studies in their final year of training.

### International partnership creates new education pathways

Epworth remains dedicated to creating and enhancing educational opportunities for its staff. This year, Epworth formed a strategic alliance with New York-based Northwell Health — a healthcare organisation with a shared commitment to staff education and development.

# Helping shape the doctors of the future



Clinical education is critical for medical students. It allows them to gain invaluable, hands-on experience with the types of people, equipment and procedures they will see every day as qualified doctors.

In 2016, Epworth hosted 16 medical students from second year at The University of Melbourne, who spent the year at Epworth studying general medicine, surgery and subspecialties. The group was the first of many cohorts who will call Epworth their 'home site' — as an official clinical school of The University of Melbourne.

"A clinical school for medical students allows Epworth to teach them everything they need to know for their clinical years. Instead of students coming to us for five or ten weeks then going back to the university for lectures, they have everything here," says Epworth Dean of Medicine, Professor Geoffrey Metz.

Full time and visiting Epworth doctors, together with nurses, deliver a full syllabus to students including clinical skills, ward rounds, lectures, tutorials, seminars and workshops.

"It took tremendous support and a huge amount of work from our medical education administrators, Kate Sharp — who looks after The University of Melbourne students — and Catherine McLeod, to put an entire academic program together from scratch," Geoffrey says.

"The students were initially a bit unsure; 'Do I really want to go to a brand new clinical school that has no experience in delivering the whole curriculum, or do I want to stay in the safe place?'

"They are now very comfortable that they are getting all the education they need, and possibly more experience, because we have a broader range of interesting patients and an enthusiastic staff who are taking on the challenge of being the first teachers in a new clinical school," Geoffrey says.

Pictured: Professor Geoffrey Metz and students from The University of Melbourne.



The alliance will provide opportunities to enhance medical education, including physician leadership development, innovations in residency training, joint internship programs and interdisciplinary training. The two organisations will share best practices in emergency management and disaster preparedness; develop infection control protocols; and explore opportunities to partner for translational research, related to patient outcomes and experiences.

Epworth staff will also benefit from the opportunity to travel to Northwell to learn from some of the leading healthcare professionals in the US, as part of a scholarship program.

The alliance between Epworth and Northwell also creates pathways for the sharing of information on the complete employee lifecycle; enabling further growth in staff engagement, workplace culture, performance management and safety initiatives.

### Epworth and Harvard Medical School working together for patient safety

The Clinical Education and Simulation Centre's collaboration with the Institute for Medical Simulation, Harvard Medical School, continued in February, with Epworth hosting the 'Simulation as a teaching tool: Instructor course', attended by six Harvard faculty members.

This year's program concentrated on education around patient safety, utilising a mix of theory, practice, feedback and simulation to help participants learn to use simulation effectively within their own education programs.

Twenty-one participants attended from all over Australia from various medical and nursing disciplines, including anaesthetics, emergency, intensive care, neonatology, obstetrics and gynaecology, and paediatrics.



The Harvard Medical School and Epworth cohort

The feedback from participants was overwhelmingly positive. Epworth's contribution and unique simulation facilities have been widely commended and will lead to Epworth hosting further courses together with Harvard Medical School and the development of the partnership in the future.

### Australian Government grants received to support clinical education initiatives across Epworth HealthCare\*

LOCATION	COST
Epworth HealthCare	\$1.45m
Epworth Richmond	\$7.9m
Epworth Eastern	\$1.2m
Epworth Camberwell	\$1.2m
Epworth Geelong	\$12m**

Epworth is appreciative of funding provided by the Australian Government.

\*since 2010

\*\*Including \$5m from Australian Government Grants

**Epworth/Deakin nursing student takes out award**

An undergraduate nursing student who has close ties with Epworth, Suzanne Elliott, is currently completing her Bachelor of Nursing at Deakin University, combined with an Epworth Fellowship, known as the Collaborative Clinical Education Epworth Deakin (CCEED) Program.

Suzanne and the CCEED group completed all their core nursing seminars and simulations at the Epworth Clinical Education and Simulation Centre at Epworth Richmond. Over three years Suzanne will complete all her clinical placements across Epworth sites. As a part of the fellowship the students become a part of the Epworth community.

An innovation in course curriculum has seen the introduction of leadership electives for a select group, with Suzanne chosen to be part of the first cohort. During the second and third year of her degree, Suzanne will complete electives designed to enhance leadership skills. During the practical/clinical component of the leadership electives the students will follow nurse leaders, unit managers, educators and researchers.

Suzanne has had a fantastic start to her nursing degree, recognised by Deakin University with the Laerdal Award, awarded to a first-year student who demonstrated commitment to achieve a successful outcome in theoretical, simulated and clinical environments in the first year of the Bachelor of Nursing.

**Recognising outstanding patient care**

Alison Sadler was awarded the Epworth HealthCare Award in recognition of achieving consistent outstanding feedback for quality of patient care in the clinical components of the course.

Alison graduated in 2015 as part of the CCEED Fellowship Program and has been a valued and respected participant. She has also invested her time in the Epworth community, volunteering her time with the HeartSmart group.

Alison integrated into the Epworth nursing team, effectively communicated and interacted with the multidisciplinary team, communicated professionally at all times and displayed excellence in clinical practice while on clinical placement.

Alison has since relocated to NSW due to family commitments and in her acceptance speech spoke of her admiration to the clinical and education staff at Epworth.

**Nursing and midwifery graduates celebrate success**

In January, participants from the Enrolled Nurse, Registered Nurse and Graduate Midwifery Programs of 2015 came together at the Park Hyatt to celebrate the completion of their graduate year across Epworth. Graduates representing their respective program delivered speeches outlining an overview of their year, the support they received and stories of their experiences. Especially exciting was the announcement of the divisional nominees and winners of the enrolled, registered and midwife graduate of the year. From the divisional winners, an overall Epworth winner for each designation was announced.

All winners were selected due to their commitment to ongoing professional development, their demonstration of Epworth values and behaviours and their excellence in clinical care. Prizes were sponsored by First State Super, with each divisional winner receiving a \$200 David Jones voucher, while the overall graduate EN, RN and midwife of the year received a \$500 David Jones voucher.



From left, Jessica Boutzos, Veronica Mullerow and Robyn Hartley with Executive Director, Clinical Services Sharon Donovan.

Congratulations to: Graduate Enrolled Nurse of the Year: Robyn Hartley — Epworth Eastern; Graduate Registered Nurse of the Year: Jessica Boutzos — Epworth Rehabilitation; and Mental Health and Graduate Midwife of the Year: Veronica Mullerow — Epworth Freemasons.

“We have been very fortunate to have the support of ICU Director Dr Julian Hunt-Smith, Education Director Dr Laven Padayachee, and the Epworth Medical Foundation, which has enabled us to get the equipment we needed through donations,” says Ms Tan.

**ICU training program leads the way**

Intensive Care Unit (ICU) specialists Li Tan, Kyle Brooks and Tom Rosen have reflected on their own experiences in echocardiography education to custom-design a training program for ICU registrars. Epworth is now the first private hospital to have a College of Intensive Care Medicine (Australia and New Zealand) accredited in-house training program, a significant milestone for education delivery. The team ensured the course was robust and adequately structured, while maintaining an element of fun for participants.

With the recent expansion at Epworth Richmond, the ICU department has seen a boost from 15 to 26 beds, and an increase in registrars from five to 15. The one-year course enables registrars to finish with a certificate in critical care echocardiography.

*“Epworth is now the first private hospital to have a College of Intensive Care Medicine (Australia and New Zealand) accredited in-house training program...”*

“We wanted to develop a program that would generate enthusiasm,” says Ms Tan, who runs the program alongside Mr Brooks.

In planning for the past year, the Epworth Richmond critical care echocardiography training program was made possible after an increase in staffing and resources in the department, allowing for the first intake of trainees at the start of 2016.



From left, Julie Ford, Territory Sales Manager — Victoria, Laerdal Medical and Suzanne Elliott.



From left: Executive Director, Clinical Services, Sharon Donovan, Alison Sadler and Dr Lauren McTier, Director of Clinical Studies, School of Nursing and Midwifery, Faculty of Health, Deakin University.



## Breathing new life into clinical education

Two new emergency training courses have been introduced at Epworth's Clinical Education and Simulation Centre for staff and medical specialists: Effective Management of Anaesthetic Crises (EMAC) and Epworth Airway Team Training (EATT).

The two training courses, accredited by the Australian and New Zealand College of Anaesthetists (ANZCA), are delivered with the assistance of Director of Clinical Education and Simulation, Tess Vawser, Simulation Instructor, Tom Hallahan, and Anaesthetists Dr Laurie Poon and Dr Stewart Marshall.

EMAC is a mandatory requirement for anaesthetic trainees, with the course relying heavily on simulated anaesthetic crises and use of a high-fidelity training manikin.

"We are one of few centres that can run the program, due to our high-fidelity manikin in our simulated operating room, the HPS anaesthetic manikin that breathes and is fully anaesthetised and uses all the gasses. The feedback from participants has been about the realistic environment we create around that simulation," Tess says.

Epworth also launched EATT, a team-based simulated training course for Can't Intubate, Can't Oxygenate (CICO) situations.

"When you anaesthetise a patient you effectively paralyse them, which means their diaphragm and lungs don't work. This means you have to put a tube down their trachea to breathe for them. In a rare instance, if we can't get the tube in for some reason, there are various methods to help get that tube down. It's time critical, you only have three minutes to create an airway," Tess says.

"Our staff value the true inter-professional nature of the training, learning from each other, about each other, in what we do. Even though this hasn't been applied clinically yet, they get the opportunity to use the pieces of equipment in a safe environment, that they usually only see in a packet."

"This is an opportunity for nurses and anaesthetists to train together on a medical emergency that's infrequent in our clinical practice but requires a particular set of skills," says Tom. "We want high-performing teams and this means your team's likely to work better together when these situations occur in real life."

"US trauma teams work and train as a team so when they get the real gunshot wound and need to do an emergency thoracotomy, they can perform — that's what we want to do," Laurie says.

"We as anaesthetists are taught the mechanics of how to do a surgical airway but it's always in isolation and in a crisis it's always a team performance; being able to work with Tom and to work with the nurses is invaluable."

Pictured: From left, Anaesthetics/PACU Registered Nurse Jessica Clode, Anaesthetist Dr Laurie Poon, Simulation Instructor Tom Hallahan and Clinical Educator Lucy Ferris.

### LSVT@Loud program and workshop

LSVT@Loud is a voice therapy program offered at Epworth Rehabilitation, based on principals of neuroplasticity, or the brain's ability to change or reorganise itself and make new connections throughout life in response to life experiences. LSVT@Loud incorporates intensive vocal exercise, communication practice and application to real-life situations. Research has established this program as particularly effective for people with idiopathic Parkinson's disease.

The LSVT@Loud workshop was hosted by Epworth Rehabilitation in September 2015, with approximately 75 speech pathologists and student speech pathologists attending from around Australia. The presenters from the US reported it as a success and complimented Epworth on the education facilities at Epworth Richmond. Attendees also gave positive feedback about course content, presenters and the venue. Presenting this workshop at Epworth Rehabilitation highlighted the availability of this specialist program at Epworth and enhanced the relationship with LSVT Global overseas.

Epworth Rehabilitation treats approximately three patients per month in this program, across Epworth Richmond, Epworth Camberwell and Epworth Brighton. Individually, patients achieve at least a 5–10dB improvement in voice volume, translating to an improvement in intelligibility in conversation of approximately 30–50 per cent. This has positive implications for improved and more successful communication in a variety of situations. Typical comments received from patients include: 'My voice is clearer'; 'I no longer cough when I talk'; 'I don't need to repeat myself in conversation'; 'My friend told me my voice has improved'.

The program allows patients to stand up in front of groups to speak — in work environments such as meetings and speech making; it has increased their confidence in communicating when previously they would avoid it; and it has helped partners to hear them better.

### Learning leadership tools at Stanford University

In October, Executive Director, Rehabilitation and Mental Health, Vincent Borg; was given the opportunity to attend a leadership program entitled 'The Effective Use of Power', held at Stanford University. It was a six-day live-in course that covered many subjects, including content entitled 'Shared Leadership', which places an onus on all members of an organisation to take responsibility for achieving the shared vision of the organisation.

One of the case studies included in the course focused on changes at Stanford University Hospital

and the appointment of a new CEO, who immediately placed a focus on the patient experience, listening to employees, high executive presence at the coalface, and measuring outcomes.

Participants came from all over the world, including the US, Germany, Saudi Arabia, Chile and Nigeria and from organisations such as Google, NASA and Apple.

### ANZCA accredited courses introduced at Epworth Clinical Education and Simulation Centre

Two new emergency training courses accredited by the Australian and New Zealand College of Anaesthetists (ANZCA) have been introduced for Epworth staff and visiting medical officers. The Effective Management of Anaesthetic Crises (EMAC) and Epworth Airway team Training (EATT).

EMAC is a two-and-a-half-day course introduced in collaboration with the Monash University Department of Anaesthesia as a mandatory requirement for anaesthetic trainees. The course will be run at Epworth's Clinical Education and Simulation Centre on four occasions annually, catering for 12 anaesthetists. The course relies heavily on simulated anaesthetic crises and requires use of the Human Patient Simulator anaesthetic manikin. Epworth is one of seven centres in Australia and New Zealand to own this high-fidelity manikin.

ANZCA EMAC accreditors attended the first EMAC pilot course and were full of praise for the quality of the centre and the educational rigor displayed by the attending faculty.

The Clinical Education and Simulation Centre, in close collaboration with Dr Laurie Poon, has also developed Epworth Airway Team Training (EATT), an inter-professional simulation-based course on the management of Can't Intubate, Can't Oxygenate (CICO) situations.

These life-threatening emergencies occur infrequently, but require implementation of a specific set of skills to resolve the situation. Achieving ventilation via an emergency cricothyroidectomy is a mandated skill all practising anaesthetists need to demonstrate.

As the course is inter-professional, anaesthetic nursing staff are also trained in the specific requirements of this medical emergency and the simulated scenarios can approach more closely the sequence of events if this were to occur in an operating room.

The course will be run three times each year, attended by four anaesthetists and 12 nurses.

## Excellence, respect and accountability rewarded

Epworth honours the top performing nursing and midwifery graduates each year, as part of the Epworth Graduate Program. In 2015, Veronica Mullerow was awarded Graduate Midwife of the Year; Robyn Hartley, Enrolled Nurse of the Year; and Jessica Boutzos, Registered Nurse of the Year.

Veronica has spent her life working closely with children and their families. After nearly 20 years working in early childhood education, Veronica decided to translate her love of children to a career in midwifery.

"I have found my experience at Epworth to be positive, fun and always educational. I love being a midwife because it's a rewarding career where I learn as much from families as I do from my colleagues and feel privileged being part of each family's journey into parenthood. I hope to have a long career in midwifery at Epworth.

"I studied alongside my twin sister and was very excited to begin my new career at Epworth. The graduate year was fun and challenging and I couldn't have done it without the fantastic education team, staff and other graduates that supported me throughout," Veronica says.

Robyn Hartley came late to the field of nursing, completing her qualification after her three children grew up.

"I wanted to be a nurse when I was at high school but everyone talked me out of it, so I became a hairdresser instead. I stopped working when my children were young and was a stay-at-home mum.

"After my children finished school, I went back to study nursing and I really enjoyed it. I love the patient contact and that every day is different. You never know how the day will turn out," Robyn says.

Robyn completed her first rotation at Epworth Eastern in oncology and is currently completing her final rotation in orthopaedics.

"I hope my experience shows it's never too late to change careers and to do something you really love. I hope my husband and kids are proud of me because it's been quite a journey for our whole family."

Jessica Boutzos completed her graduate year as a rehabilitation and mental health nurse. She currently works in acute cardiac care at Epworth Richmond.

"To succeed as a graduate you need to have enough support to be able to develop your skills but you also need to be left alone, to not be smothered so you can make those decisions on your own," Jess says.

"Epworth's program really allowed me to gain confidence because I was given responsibility from the get-go. It was the perfect balance between support and trust.

"At the end of the day, if you're not providing excellence, if you're not respecting the patients, if you're not holding yourself accountable for your actions, then you're not nursing. The Epworth values aren't something I feel are imposed on me, they are simply things I already want to do every shift. If I don't do those things then I haven't nursed that day."

Pictured: From left, Jessica Boutzos and Robyn Hartley

# = TRUST



### Epworth Geelong undergoes rigorous testing before opening

The clinical education and simulation team was engaged by the Epworth Geelong commissioning team to conduct comprehensive onsite or 'insitu' scenario testing of systems and processes at Epworth Geelong, to identify areas of improvement prior to the site opening in July.

Director of Clinical Education and Simulation, Tess Vawser, and Project Manager — Commissioning, Epworth Geelong, Hannah Teasdale, oversaw the program of testing, ensuring Epworth Geelong was safe and ready for patients on day one.

"We were about to open a brand new hospital and insitu scenario testing made the process of opening a new hospital real for our staff and took them on a journey to the clinical phase."

"Our aim was to test all touch points, systems and processes required to facilitate safe and effective patient movement through the continuum of care," Ms Vawser says.

The program captured common scenarios and based them around real (de-identified) patient cases. In some cases the patient scenario crossed multiple clinical areas, for example a bariatric patient arriving to emergency via ambulance for emergency Abdominal Aortic Aneurysm surgery. This patient required a massive blood transfusion in theatre and was transferred to ICU where a ventricular fibrillation arrest scenario unfolded.

For some aspects of testing, manikins assisted to make the scenario more realistic. Alternatively there were aspects of the insitu testing enhanced with the use of simulated patients who could give feedback on their experience. GoPro cameras also provided an effective way to analyse and evaluate the clinical scenarios.

This crucial aspect of the commissioning phase led to a confident and informed decision to proceed with the opening of Epworth Geelong in July 2016.

## GP LIAISON: CONNECTING GPs WITH EPWORTH

Epworth's GP Liaison team provides a quality Royal Australian College of General Practitioners (RACGP)-accredited education program for GPs. Through its various communication channels, the unit also raises awareness of the services and medical expertise available at Epworth's divisions.

Epworth's GP continuing professional development (CPD) education program is tailored specifically to the educational needs of GPs. The topics are selected by the GPs themselves, through an annual questionnaire which helps identify learning needs in the GP community. Epworth specialists are then selected to provide high-quality education sessions for GPs. All education meetings are accredited by the RACGP.

Through Epworth's education program, GPs are provided with an opportunity to enhance their clinical skills and update their clinical knowledge on new and advanced surgical and diagnostic procedures and medical treatments.

In 2015/16, the GP Liaison Unit delivered 78 education meetings to 2124 GPs using a variety of educational modalities, which provided 238 specialists across the Epworth group opportunities for professional development. These educational activities included:

- GP clinic lunches (36)
- GP evening meetings (34)
- Lunch and Learn webinars (14)
- RACGP accredited CPR training (3)
- full day Category 1 education days (5).

General practitioners have assessed Epworth's GP education activities as relevant and of a high standard as part of the GP needs assessment survey conducted in October 2015. GPs were surveyed, with the data being used to identify priority topics for the Epworth 2016 GP education program and to improve communication with GPs.

### Category 1 symposia

In 2016, the GP Liaison team collaborated with both Eastern Melbourne Primary Health Network and with Jean Hailes in some of the Category 1 education days to better connect GPs with Epworth in the final year of the current triennium.

The first Category 1 event in 2016 was a mental health symposium, held at Epworth Clinic. Workshops and plenary sessions covered dementia

diagnosis and treatment; aged psychiatry; psychotropic medications in the elderly; anxiety; psychiatric aspects of chronic pain management; depression and cognitive behaviour therapy; mindfulness; and managing bipolar disorder. Speakers included renowned aged care specialist Professor David Ames, Dr Lyn-May Lim, Director for Aged Psychiatry at Epworth Clinic, and Dr Graham Wong, Medical and ECT Director at Epworth Clinic. Attendees provided very positive feedback and said that the event was excellent and very well organised, and that the rotating workshops — including their size — were ideal, offering good engagement opportunities to participants.

The second Category 1 symposium of the year was held at Epworth Eastern, in collaboration with Eastern Melbourne Primary Health Network (EMPHN). Epworth was delighted to deliver this GP symposium on chronic disease management in conjunction with the EMPHN, where topics covered diabetic and vascular problems.

The day opened with a plenary session on renal complications of diabetes followed by a plenary session on stroke presented by Dr Amanda Gilligan, Director of the neurosciences unit, Dr Jay Hocking and Dr Lachlan Maddock. The GPs found these sessions relevant to their general practice and found the information on Epworth Eastern's neurosciences unit with regards to transient ischaemic attack assessment and appropriate treatment very useful.

Afternoon workshops covered veins and arteries and vascular complications. Using the fully equipped simulation centre at Epworth Eastern, a practical session on artery grafting allowed GPs to use the grafting material, which gave them an insight into the surgical side of cardiac and thoracic surgery.

As always, the women's health Category 1 symposium was a popular event for GPs and this year Epworth had the pleasure of collaborating with Jean Hailes for Women's Health, which recently opened a clinic at Epworth Freemasons. Topics ranged across the lifespan from endometriosis and fertility through to menopause and mood, and were presented by esteemed specialists in their respective fields.

The rotating workshops covered body image, pregnancy, menstrual abnormalities, urogynaecology, cardiac problems and breast cancer. Feedback was excellent with many positive comments received on the relevance of topics and high quality of speakers. GPs enjoyed the small group rotating workshops after each of the plenary sessions.

### Category 2 education program

The 'Lunch and Learn' RACGP-accredited fortnightly webinar program has grown from strength to strength over the past year, as GPs continue to embrace online education in between their busy work schedules.

The one-hour sessions enable GPs to log on from the comfort of their office or home to listen and participate in an interactive, virtual education session with leading Epworth specialists.

Topics in FY 2015/16 have varied and have included allergies in children, aged psychiatry, management of obesity, spider bites, anaphylaxis, breast reduction surgery, spinal surgery and neck pain.

Feedback from attendees and presenters using the service has been overwhelmingly positive.

Regular monthly divisional evening meetings continue to be held and are popular for attending GPs to further their knowledge and education in shorter sessions.

### GP communication

The GP Update website, launched in 2015, has continued to be popular with GP subscribers as it provides an easy 'one stop shop' with links to education events (both face to face and online learning), clinical articles, Epworth's services, latest news, redevelopment news and specialist directories.

The team also communicates with its reader base through a monthly round-up e-newsletter containing a summary of relevant education events, latest clinical articles, new services and news updates as well as through a fortnightly GP education events e-newsletter. The unit has also increased its Twitter presence through regular tweets to its growing follower base and to connect both with GPs and others in the medical community. The team continues to improve its communication with GPs through social media and by attracting new members to its electronic subscribership.



## IMPROVING HEALTHCARE THROUGH RESEARCH

Translating research into  
better patient outcomes

Epworth has made significant contributions to medical research in areas strongly linked to clinical care, and continues to innovate and expand its research network. Epworth is committed to fostering research that will improve healthcare and enable Epworth's patients to access novel treatments. We continue to drive excellence in clinical research programs by promoting and supporting investigator-initiated and commercially-sponsored research, strengthening existing research collaborations and developing new associations.

To view the full Epworth Research Report 2015/16, visit the Epworth HealthCare website.

## RESEARCH AT EPWORTH

Epworth's purpose is to improve the health, wellbeing and experience of every patient by integrating clinical practice with education and research. Epworth is proud of its growing capability and reputation for conducting clinical research, which is ultimately to benefit our patients. By 2017, Epworth seeks to become the leading patient-centred, academic healthcare organisation in the Victorian private sector. The Epworth vision is: The Epworth Experience — consistently delivering excellent patient-centred care with compassion and dignity. The nexus between medical care, education and research is pivotal to achieving this goal.

The growing maturity of Epworth research activities is reflected in the number of publications from an Epworth author; presentations at conferences, symposia and workshops; our expanding commercial trial involvement; our inclusion in national forums run by the government and industry bodies; and our increasing role in advocacy for research within the private health sector. In recent years, there has been significant growth in the number of books, book chapters and articles published in peer-reviewed national and international journals by Epworth researchers.

Research activity at Epworth is supported by the Epworth Research Institute and the Epworth Medical Foundation and is conducted by various research groups, including the Clinical Trials and Medical Innovation Group, the Epworth Prostate Centre, the Epworth Radiation Oncology Research Centre and professorial research groups, among others. We also have ongoing affiliations with the Cleveland Clinic, as well as partnerships with major universities, nationally and internationally.

**RESEARCH PUBLICATIONS  
INCREASED BY 18%  
IN 2015/16 TO 253 PUBLICATIONS  
— EXCEEDING THE ANNUAL  
TARGET BY 12%**

### Ethical approval of research projects

All research conducted at Epworth must be approved by Epworth's Human Research Ethics Committee (HREC) before it can commence. Led by Reverend Professor Emeritus Christiaan Mostert (Chair, HREC), and Professor Mari Botti (Chair, Low-Risk Subcommittee), the HREC is formed under the auspices of the National Health and Medical Research Council (NHMRC), which provides leadership and advice regarding research governance in Australia.

Epworth would like to thank the members of the HREC for their continued dedication and support with research studies. We particularly acknowledge the work of Ms Marisa Stevens, who stepped down from the HREC in 2015/16, and welcome Dr Ken Khamly, Dr Gershon Spitz and the Reverend Tom Rose, who have joined the HREC.

#### HREC and low risk subcommittee submissions:

##### Number of submissions

HREC — 70 new submissions  
HREC Sub-Committee (Low and Negligible Risk) — 54 new submissions

#### HREC committee:

Reverend Professor Emeritus Christiaan Mostert (Chair)  
Professor Mari Botti AM  
Professor Peter Brooks AM  
Professor Emeritus John Catford  
Professor Jane Fisher  
Ms Sarah Pollock  
Mr Ian Unwin  
The Honourable Peter Young  
Ms Marissa Stevens (resigned in 2015/16)  
Dr Ken Khamly (joined in 2015/16)  
Dr Gershon Spitz (joined in 2015/16)  
Reverend Tom Rose (joined in 2015/16)

#### Low risk subcommittee:

Professor Mari Botti AM (Chair)  
Reverend Professor Emeritus Christiaan Mostert  
Dr Karin Hammarberg  
Ms Tess Lye

### ERI research grants

Every year, the Epworth Research Institute (ERI) provides competitive grant funding for research projects to be conducted at Epworth. A new category of grant was introduced in the current funding round to complement existing types. Strategic grants (with a supported budget of up to \$100,000) now sit alongside feasibility grants (with a supported budget of up to \$10,000), and development grants (with a budget of up to \$50,000). In 2015/16 there were 15 projects funded to a total of just over \$655,000.

**IN 2015/16, EPWORTH RESEARCH  
INSTITUTE FUNDED 15 GRANTS  
TOTALING \$655,000  
— UP FROM \$405,000 IN 2015 AND  
\$240,000 IN 2014**

### Epworth professorial updates

Epworth has a number of professorial Chairs in partnership with The University of Melbourne, Monash University and Deakin University.

#### Professor of Nursing

##### Epworth/Deakin Centre for Clinical Nursing Research

*Professor Mari Botti*, AM PhD Melbourne RN BA PGDACP MRCNA, Epworth Chair of Nursing, Deakin University

Professor Mari Botti leads the Epworth Deakin Centre for Clinical Nursing Research, which allows nursing staff and students to gain high-quality clinical research training and acquire the skills required to utilise evidence-based paradigms to optimise clinical care. She has an international profile in clinical and health services evaluation. Prof Botti is a foundation member of the Deakin University research priority centre in Quality and Patient Safety and has a particular interest in postoperative pain management and the investigation of models of care that encourage patient engagement in their care, safety, health and wellbeing. She was awarded the Epworth Research Institute Achievement Award for the 2016 Research Leader of the Year.

Prof Botti was the recipient of an AM (Member in the General Division of the Order of Australia) for her significant service to nursing and clinical education, as an academic and author, and to pain management research.

#### Epworth Victor Smorgon Chair of Surgery

*Professor Richard de Steiger*, MBBS FRACS FAOrthA, Epworth Victor Smorgon Chair of Surgery, The University of Melbourne

Professor de Steiger is an orthopaedic surgeon with a special interest in hip and knee joint replacement, and the management of adult hip disorders. He is deputy director of the Australian Orthopaedic Association National Joint Replacement Registry and has been appointed president of the International Society of Arthroplasty Registers (ISAR), a role

which has responsibility for coordinating all the international registries to achieve the global aim of improving outcomes for patients having joint replacement surgery. In 2013/14, the Epworth Musculoskeletal Research Centre was established in the Hoddle Street academic precinct.

#### Epworth Victor Smorgon Chair of Medicine

*Professor Richard Gerraty*, MBBS MD FRACP, Epworth Victor Smorgon Chair of Medicine, Monash University

Professor Richard Gerraty is a stroke neurologist conducting stroke and vestibular research at Epworth, including participating in important investigator-initiated multi-centre trials funded by the NHMRC. He is neurology co-editor of the Journal of Clinical Neuroscience. He is a member of the Council of the Australian and New Zealand Association of Neurologists, and is a member of the board of the Brain Foundation, Victoria.

#### Epworth Victor Smorgon Chair of Rehabilitation Medicine

##### Epworth Monash Rehabilitation Medicine Unit (EMReM)

*Professor John Olver*, AM MBBS MD FAFRM (RACP), Epworth Victor Smorgon Chair of Rehabilitation Medicine, Monash University

Professor John Olver is head of EMReM and director of rehabilitation at Epworth. The appointment of an inaugural Victor Smorgon Chair of Rehabilitation was made through the collaboration of Epworth and Monash University in July 2009. The Epworth Monash Rehabilitation Medicine Unit (EMReM), which has been designated as a research arm of Epworth Rehabilitation, commenced in July 2010.

As a world leader in rehabilitation medicine research, EMReM delivers research findings that can be applied quickly and effectively to improve clinical rehabilitation programs, so that people recovering from injury or illness can maximise their quality of life, restore physical mobility and improve cognitive development. Prof Olver has developed successful national and international partnerships through his involvement in various research projects.

#### Professor of Surgery

*Professor Glenn Guest*, MBBS BSc(Hons) FRACS, Professor of Surgery, Deakin University

Professor Glenn Guest has a joint appointment as professor of surgery at Epworth and Deakin University to provide leadership in medical education, research and surgery practice, particularly at Epworth Geelong. As a general and colorectal surgeon working in both the private

and public sector, Prof Guest has established a strong reputation for high quality clinical practice. He will continue his long-term commitment to the provision of public healthcare services by maintaining an appointment at Barwon Health, and through his involvement in international humanitarian aid and development work as the director of the Australian Timor L'Este Aid for Specialist Services Program (ATLASS).

Prof Guest has been strongly involved in teaching medical students and developing a general surgical training program in southwest Victoria. He has strong clinical research links with the Centre for Intelligent Systems Research at Deakin University working on incorporation of haptics and robotics into surgery.

#### Professor of Psychology

##### Monash Epworth Rehabilitation Research Centre (MERRC)

*Professor Jennie Ponsford, PhD MA BA, Chair of Psychology, Monash University*

Professor Jennie Ponsford is director of the Monash-Epworth Rehabilitation Research Centre. MERRC aims to conduct research in trauma rehabilitation with a view to reducing long-term disability. Prof Ponsford and her team collaborate locally, nationally and internationally with other trauma research groups.

A world leader in her field, Prof Ponsford has spent more than 30 years as a clinician and researcher characterising and predicting outcomes and developing interventions for these difficulties after mild, moderate and severe traumatic brain injury (TBI). Prof Ponsford serves on the editorial board of a number of international journals, and is on the executive committee of the International Brain Injury Association and the Australasian Society for the Study of Brain Impairment.

#### Professor/Director of Molecular Oncology and Cancer Immunology

*Professor H. Miles Prince, AM MBBS (Hons) MD FRACP FRCPA MACD AFRACMA, Professor of Medicine, Monash University and The University of Melbourne*

Professor Miles Prince is a haematologist and his clinical research in the last 15 years has involved the development of new targeted treatments for blood cancers including monoclonal antibodies, cell-based therapy, gene therapy and new epigenetic agents. Prof Prince holds a number of national and international haematology appointments and is a member of the Australian, American and European Societies of Haematology.

Prof Prince is the Director of the Centre for Blood Cell Therapy at Peter MacCallum Cancer Centre as well as the director of the International Society of Cutaneous Lymphoma and the Myeloma Foundation Australia. He is Chairman of the Medical Scientific Advisory Committee to the Myeloma Foundation Australia and Chairman of the LymphomaHub, an international group of experts providing education to blood and cancer experts around the world.

In 2014, Prof Prince was awarded Membership of the Order of Australia (General Division) for significant services to blood cancer research, patient care and philanthropy leadership.

#### Professor of Dermatology

*Professor Rodney Sinclair, MBBS MD FRACD, Chair of Dermatology, The University of Melbourne*

Professor Rodney Sinclair holds a joint appointment with The University of Melbourne and Epworth. Prof Sinclair has extensive research experience across a broad range of dermatology conditions, with specific interest in autoimmune diseases of skin and hair, skin cancer, psoriasis, genetic skin disorders and skin stem cell biology. He has further established the Epworth dermatology research precinct with an increasing number of sponsored clinical trials as well as his own research in psoriasis, atopic dermatitis, skin cancer, actinic keratosis, cellulitis and infection of the skin, alopecia and nail infections (onychomycosis).

#### Professor of Health Informatics Management

*Professor Nilmini Wickramasinghe, PhD MBA, Professor-Director of Health Informatics Management and Professor of Health Informatics, Deakin University*

Prof Nilmini Wickramasinghe works to help define and develop relevant health informatics research projects within the Epworth environment in particular, but also conducts research internationally in various aspects of digital health, focusing on using technology to facilitate the delivery of high-value, patient-centred care.

Research within the health informatics management group at Epworth focuses extensively on successfully moving forward to design, develop, deploy and use technology solutions to deliver superior healthcare; thus enabling Epworth to pursue research in leading areas of health informatics today.

## Improving patient access to world-first cancer treatments

Clinical research trials involving new drugs and devices are usually classified into four phases — phase I, II, III and IV. Epworth has now extended its clinical research activity, from Phase II and III, to include phase I clinical trials.

There are currently three phase I oncology trials underway, and one phase I mental health trial.

Dr Ross Jennens is one of Epworth's primary investigators for oncology early-phase trials. He says the move into phase I has wide-reaching benefits for Epworth patients and staff.

"Phase I trials are a good opportunity for patients to access new drugs and treatments. We also know patients who are treated in centres where clinical trials are conducted for cancer treatments have better results than patients in hospitals without clinical trials. So it's not just the patients who go on the trials who get better outcomes.

"It improves quality controls from the oncologist's point of view, the nursing staff's point of view, pharmacy — everyone gets up-skilled by being part of a site involved in clinical trials. That's part of the impetus for improving patient care," says Ross.

A phase I clinical trial helps to confirm patients can safely use a new drug or treatment. Doctors collect data on the dose, timing, and treatment safety.

This phase also requires specialised research staff with closer patient monitoring. The trials are generally shorter in length compared to those in the subsequent phases, lasting several months to a year, and usually have only 10 to 30 participants.

"A phase trial I means moving from the lab bench where molecules are being worked on and discovered, to monitoring that effect in humans; What is the right dose to give? What dose seems to have an effect? And how quickly is it metabolised?



"They are labour intensive trials — with patients needing lots of blood tests to check things like levels of the medication, so it is a more involved process for the patient.

"It requires lots of research staff time as well; establishing all the resources and infrastructure. We are well set up at Epworth so ancillary services are easily available — pharmacy, radiology and pathology are all based onsite and are very willing to participate. One of the stumbling blocks in the public sector is those services are often overstretched; they find it hard to be able to provide a rapid service like we do," Ross says.

"These trials are often for patients who have run out of standard treatment options. So we're hoping the medication being trialled may be useful for them and for controlling their tumour."

*Pictured: Dr Ross Jennens*

In 2014/15, Prof Wickramasinghe was awarded the prestigious Schoeller Senior Fellowship by the University of Erlangen-Nuremberg, Germany. This has resulted in a memorandum of understanding between Epworth's Health Services Research and Education and the School of Business and Economics at FAU University at Erlangen-Nuremberg, Germany. This will enable more joint research by the Health Informatics Management Unit with key researchers at FAU, including expanding projects in big data analytics, 3D printing and sensors.

## TRANSLATING RESEARCH INTO PRACTICE

We are very proud that a number of our research projects are clear examples of clinical research that leads to change in our clinical practice and procedures and improves our care and outcomes in patient management.

### Patient outcomes after open and minimally invasive surgery for prostate cancer: longitudinal study

Senior investigator: Professor Mari Botti

In Australia, prostate cancer is the most commonly diagnosed cancer in males and the second most common cause of cancer deaths in men. The treatment for localised prostate cancer is most often prostatectomy surgery. Prostatectomy surgery includes traditional open radical prostatectomy and minimally invasive surgery including robotic-assisted prostatectomy surgery.

The physiological, functional, psychosocial and cognitive outcomes associated with the long-term trajectory of recovery have not been investigated adequately, nor has there been a prospective, comparative evaluation of the outcome associated with different surgical modalities.

This longitudinal, comparative study of 1100 men examines patient outcomes after open and minimally invasive surgery for localised prostate cancer. This research is significant because little is known of the trajectory of patient recovery after prostatectomy surgery within the setting of an ageing Australian population and advances in technology. The findings will address gaps in research, inform patients about their long-term recovery, and provide evidence for optimal care of patients who undergo prostatectomy for localised cancer irrespective of the surgical modality.

### Translation of evidence into pain management practices (MAPP) in acute care environments

Senior investigator: Professor Mari Botti

A major focus of the drive to improve the quality and safety of healthcare is to standardise care processes to ensure patients receive care based on best available evidence and do not experience variations in the quality of care. Management of post-surgical pain is a care process known to be highly variable and inadequate.

In Australia, over 40 per cent of patients experience significant pain and hence, unnecessary suffering and increased associated risk. In partnership with clinicians, the aim is to develop, implement and evaluate an improved method of treating pain using a clinical decision support system based on best available evidence for managing postoperative pain. The method will be tested in three sites to assess external applicability.

### Progression to total hip arthroplasty following hip arthroscopy

Senior investigator: Professor Richard de Steiger

Hip arthroscopy offers a minimally invasive surgical technique for treating hip pathology and there has been significant expansion in its use in recent years. There is evidence that a proportion of patients require total hip arthroplasty in the years immediately following their arthroscopy, suggesting that they have not derived major benefit from the procedure. This retrospective cohort analysis was conducted on all patients who underwent hip arthroscopy at our institution from 2004–2013. Patients were then matched to the Australian Orthopaedic Association's National Joint Replacement Registry in 2016, to identify those who subsequently underwent hip arthroplasty.

Many arthroscopies were performed on patients with osteoarthritis, who were older than 50 or obese. Conversion to arthroplasty occurred in greater than 20 per cent, with more than half of these occurring within two years. Osteoarthritis and age, but not obesity, were significant risk factors for early conversion to arthroplasty, and should inform future arthroscopy indications.

### Progression to total knee arthroplasty following knee arthroscopy for osteoarthritis

Senior investigator: Professor Richard de Steiger

Recent evidence has shown knee arthroscopy to be ineffective for treating patients with knee pain and associated osteoarthritis. Despite this, there are studies to show that knee arthroscopy for patients with knee osteoarthritis is not decreasing. The aim of this study is to identify the proportion of patients

with osteoarthritis that progress to total knee arthroplasty following knee arthroscopy.

We have identified 12.8 per cent of patients with osteoarthritis who underwent a knee arthroscopy progressed to total knee arthroplasty within two years. As there are known complications with knee arthroscopy there may be no clear benefit of this procedure in this group of patients.

### The consequences of olfactory impairment following traumatic brain injury

Senior investigator: Professor John Olver

The aims of this study are to:

- identify the incidence of olfactory impairment (as measured by the Pocket Smell Test — PST and the University of Pennsylvania Smell Identification Test — UPSIT) following traumatic brain injury (TBI) in a consecutive sample of adults admitted to the brain injury rehabilitation program at Epworth Richmond
- investigate the natural progression of olfactory dysfunction following TBI in the context of recovery (6 and 12 months post-injury)
- identify acute factors that are associated with long term olfactory outcome.

This study has received funding from a number of sources.

### The influence of adjunctive therapy on outcome following botulinum neurotoxin (BoNTA) injection for focal spasticity in adults with neurological conditions

Senior investigator: Professor John Olver

This project aims to investigate the influence of adjunctive therapy on outcome following injection for focal spasticity in adults with neurological conditions. The group of adults will be provided with a prescribed program from an experienced clinician following their injection, designed to maximise their outcome. The rate of adherence to the prescribed program will be examined to determine if adherence to therapy improves outcome.

This pilot study will contribute to the limited body of evidence for adjunctive therapy following BoNTA injection and more importantly influence the direction of future research studies. More specifically the aims of the study are:

- to compare adherence rates to a prescribed therapy program between those who achieved their predetermined rehabilitation goals and those who failed to do so three months following BoNTA injection

- to determine if there is a difference between non-functional and functional goal attainment three months following BoNTA injection.

### The use of light therapy to treat daytime sleepiness and fatigue following traumatic brain injury

Senior investigator: Professor Jennie Ponsford

This novel study is the first randomised controlled trial of a non-pharmacological treatment for post-TBI sleepiness and fatigue. It builds on our existing work investigating the prevalence and nature of fatigue and sleepiness post-TBI, and demonstrating the efficacy of light to improve alertness in healthy volunteers.

The primary aim of this study is to evaluate, in a randomised controlled trial, the effect of blue light therapy versus yellow light therapy (placebo) and 'treatment as usual' on subjective daytime sleepiness and fatigue.

It is hypothesised that participants will show reduced daytime sleepiness and fatigue; improved sleep quality, attention, reaction time, and health-related quality of life; and reduced depression following blue light therapy, compared with those receiving yellow light therapy or treatment as usual. If successful in alleviating fatigue and daytime sleepiness and/or alleviating their impact on individuals' lifestyles, blue light therapy could be readily implemented into clinical practice, as it is relatively unobtrusive and inexpensive to deliver.

### Safer roads to recovery: assessing readiness for driving after traumatic brain injury

Senior investigator: Professor Jennie Ponsford

More than two-thirds of traumatic brain injury (TBI) survivors return to driving. Despite this, limited research investigating driving performance following TBI has been conducted. The aims of this study have been to examine, objectively, the nature and causes of driving difficulties following TBI as a basis for developing more reliable and valid assessment procedures for readiness to return to driving, and thereby, improving the safety of drivers with TBI.

Key objectives are to:

- examine which specific driving behaviours are compromised post-TBI
- examine which pre-injury, injury-related, sensorimotor, cognitive, and personality factors are associated with these driving difficulties
- identify the degree to which off-road, simulated and on-road assessment predict naturalistic driving behaviour.

Driving performance is being investigated in simulated, on-road and naturalistic driving conditions.

This research will guide the development of more sensitive driving evaluation procedures including cognitive screening, simulated and on-road assessment. Findings will also form the basis of more effective driving retraining programs, thereby contributing to improved safety and mobility for those with TBI who return to driving.

#### Designing and developing pervasive mobile solutions to support chronic disease management

##### Senior investigator: Professor Nilmini Wickramasinghe

This project includes concurrent trials being run in Australia, Canada, China, Germany, Sri Lanka and the US. It is a large, multi-stage research project that includes the use of smartphones and portals to facilitate better monitoring and management of type 1 diabetic, type 2 diabetic and/or GDM patients. In addition, the team is looking into non-invasive blood glucose detection using smart sensor technology.

#### A value-based assessment of the Point of Care system at Epworth

##### Senior investigator: Professor Nilmini Wickramasinghe

The project attempts to quantify the benefits to healthcare value afforded by the Point of Care system at Epworth, including improved access, quality and cost effective delivery of care. This project has received funding from Epworth Medical Foundation and Epworth. A feature of the project is the possibility to include various predictive analytic capabilities, which will assist to identify individual strategies and population health strategies for better management of care.

#### OrthoSport Victoria

##### Exploring the high re-injury rate in younger patients undergoing anterior cruciate ligament reconstruction.

Younger age is increasingly recognised as a risk factor for anterior cruciate ligament (ACL) graft rupture and contralateral ACL injury after ACL reconstruction. The primary purpose of the study was to determine the rates of graft rupture and injury to the contralateral native ACL in younger athletes. The study cohort consisted 354 consecutive patients who were younger than 20 years when they underwent their first primary hamstring tendon autograft ACL reconstruction.

Graft ruptures occurred in 57 patients (18 per cent) at an average time of 1.8 years after surgery. Early graft ruptures were more prevalent in patients who underwent surgery when they were younger than 18 years versus those in the 18–19-year age group. Males had higher rates of graft rupture than females, with the youngest males (<18 years) at the highest risk in the investigated cohort.

Identification of high risk groups for re-injury is crucial to develop surgical and rehabilitation strategies to prevent it.

#### Factors influencing outcomes following anterior cruciate ligament reconstruction

Anterior cruciate ligament (ACL) rupture is a common and debilitating knee injury that affects young, active people in particular. It is commonly treated by ligament reconstruction. Although results are generally successful, there is evidence to indicate that return to pre-injury sporting activities occurs in only half-to-two-thirds of patients and that the long-term incidence of osteoarthritis remains relatively high.

The aim of this study is to prospectively document a variety of potentially influential factors in a large group of patients (600) undergoing ACL reconstruction, and to evaluate their influence on return to activity, graft and contralateral ACL rupture, and the development of osteoarthritis in the operated knee. It is anticipated this study will provide valuable information about the risk factors for re-injury following ACL reconstruction and the development of post-traumatic osteoarthritis.

#### Epworth Prostate Centre

##### The impact of a multidisciplinary complex prostate cancer clinic

This trial aims to implement and evaluate the comprehensive multidisciplinary prostate cancer clinic. The clinic provides a model of care to enhance patient outcomes and wellbeing, and addresses the supportive care needs commonly identified by patients with prostate cancer. The clinic also aims to engage and recruit patients into other research studies and clinical trials. Patients with complex prostate cancer are reviewed, providing a platform for supporting translational development, capitalising on discoveries, and accelerating the translation of these discoveries into clinical practice.

The trial meetings consistently host over 20–30 health experts including urologists, medical oncologists, radiation oncologists, a general practitioner, nurses, a psychologist, radiologists and pathologists, along with research scientists. Personalised treatment plans are established

for each patient, with reference to disease state, psychological and emotional needs, and their suitability for clinical trials.

The meetings and clinic have not only proved to be valuable for patients currently diagnosed with prostate cancer, but have also provided our researchers with a patient population that can be directly recruited into clinical trials and research projects.

##### A pilot randomised controlled trial to evaluate the usefulness and effectiveness of an animated pelvic floor muscle exercise (PFME) model for patients prior to radical prostatectomy

This study aims to assess the efficacy of delivering patient education via an animated 3D pelvic floor model DVD. It evaluates the utility and effectiveness of an animated pelvic floor muscle exercise (PFME) model for instructing patients how to correctly perform pelvic floor contractions, which have been shown to improve post-prostatectomy urinary incontinence.

The pelvic floor animation was designed and developed by the study investigators in collaboration with animators from the Memorial Sloan Kettering Centre. Urinary incontinence is a severe cause of distress to patients post radical prostatectomy, and the study will help to determine if patients who undergo specific training have a speedier return of urinary continence post-operatively.

#### Epworth Radiation Oncology

##### Looking towards the future of radiation oncology

Three-dimensional (3D) printing is a process where a physical object is created from a three-dimensional computer model. Although 3D printing has been used in a number of industries, its use in oncology patients has been limited. Given that radiation treatment techniques are now strongly driven by rapid technology, staff at Epworth Radiation Oncology will undertake a pilot project examining the various applications of 3D-printed models and accessories to the patient setting.

##### The application of forward thinking in radiation oncology

The current standard of care for patients with advanced cancer affecting the brain is currently used with limited efficacy. In contrast, stereotactic irradiation, a type of radiation therapy treatment in which a few very high doses of radiation are delivered to small, well-defined targets, is the preferred treatment, but has up until now been limited due to technological restrictions.

The aim of this project is to utilise innovative software that allows seamless radiation treatment of multiple brain metastases to investigate the effect of stereotactic irradiation on quality of life and disease control in patients diagnosed with brain cancer.

## EPWORTH RESEARCH WEEK

One of the highlights in the Epworth calendar is the annual Epworth Research Week, which showcases the many and varied research activities conducted at Epworth. This year was no exception, with a number of significant aspects emphasising Epworth's growing research capability and capacity.

As part of Epworth's ongoing efforts into improving Research Week, our researchers and attendees were given the opportunity to provide feedback on the 2015 Research Week. Very helpful and constructive comments were received from a broad range of respondents, leading to more sessions with internal Epworth speakers, increased publicity of events and active involvement of all Epworth sites in hosting sessions.

#### Forums and symposia during the week

The 2016 Epworth Research Week featured a variety of forums and symposia, including:

- opening plenary given by Professor Miles Prince (Epworth Professor/Director of Molecular Oncology and Cancer Immunology) on 'How to cure cancer'
- poster viewing session held in the Epworth Clinical Education and Simulation Centre, featuring over 60 posters from Epworth researchers, an increase of around 40 per cent on the previous year
- Research Grand Round, presented by international expert Professor Alan Trounson, on regenerative medicine and cell therapies
- cardiac sciences forum with Professor Stephen Nicholls on plaque imaging
- Point of Care/digital health symposium held at Epworth Eastern
- nursing symposium, featuring international guest speaker Debi Boyle on nurse compassion fatigue
- allied health symposium held at Epworth Hawthorn on research into the road to recovery
- mental health plenary presentation by Professor David Castle at Epworth Camberwell
- prostate cancer symposium at Epworth Richmond.

# Radiation oncology patients receive cutting edge treatment

Three years ago, Epworth Radiation Oncology strengthened its commitment to patient care, venturing into in-house oncology research to help patients achieve better outcomes from radiotherapy.

Since then, the number of Epworth-run radiation oncology research projects has increased significantly, with approximately 15 per cent of radiation oncology patients currently involved in active clinical research projects.

Director of Epworth Radiation Oncology, Dr Pat Bowden says this is significantly above the number required for an organisation to be considered actively engaged in research activity, "The national recommendation is five per cent, to be considered engaging properly in research, so we are well above that benchmark. Almost all of these trials were conducted in-house, with just a couple where Epworth patients were participants in externally-run trials.

"We were able to increase the level of research undertaken at Epworth because we were able to gain access to new equipment — a lot of which was first in Australia, and still is.

"Epworth also has a large patient population, particularly of prostate cancer patients, and their cancer was especially applicable to these new treatment techniques," Pat says.

"Our patients love being on clinical trials, they like the thought they are getting state-of-the-art treatment and are at the cutting edge of treatment protocol. Patients also feel as though they're giving something back by participating, and their data is being used to help future patients."

Key radiation oncology projects currently underway include TRANSFORM — the third largest stereotactic radiotherapy trial in the world for metastatic prostate cancer and PINPOINT, where beacons are used to target radiotherapy more accurately. The PINPOINT trial, partially funded by the Ted Whitten Foundation, is finishing ahead of schedule, with recruitment expected to take three years but with all patients engaged in just over a year.



"I think the growing activity exemplifies how successful research can be even in individual organisations. Most major cancer trials are multicentre but it's a tribute to Epworth that we are able to generate the ideas and the infrastructure to get a project going but also the number of patients you need to have a single centre trial of global significance."

Pictured: Dr Pat Bowden

## Epworth Research Week dinner

A highlight of the 2016 Epworth Research Week was the annual dinner held to celebrate Epworth's research achievements, recognise the Epworth honourees who have made valued professional contributions to the organisation over the years and make significant funding announcements. Close to 300 guests attended the dinner, held at the MCG, with representatives from state government, the Epworth Board of Management and the Epworth Medical Foundation, as well as university and research organisation partners.

Professor Anne Kelso AO, CEO of the NHMRC, delivered a compelling speech 'Medical research in the 21st century', during the evening. Three leading Epworth clinicians — Mr Arthur Day AM, gynaecologist; Mr Campbell Penfold, colorectal surgeon; and Professor Jack Mackay AM, colorectal surgeon — were added to the list of seven Epworth honourees, and had named grants awarded in their honour.

The Epworth Research Institute grants, posters and awards were announced during the dinner, with a total of \$658,000 in funding awarded.

## Epworth Research Institute funding awards and grant recipients 2016

This is the sixth year of the Epworth Research Institute (ERI) grant scheme, made possible through a research corpus maintained from funds donated to the Epworth Medical Foundation. In 2015/16, a record 36 applications were received for funding, up 20 per cent on the previous year. The ERI Research Committee, chaired by Prof John Catford, assessed and ranked all applications.

This year saw three categories of applications considered: feasibility grants (with a supported budget of up to \$10,000), development grants (with a supported budget of up to \$50,000) and strategic grants (with a supported budget of up to \$100,000). Applications for projects in gynaecological cancer were also considered in a separate funding pool.

The ERI Board has approved support of a total of 15 applications, to a total of just over \$655,000, which is a significant increase on previous years.

Congratulations to the following grant recipients for 2015/16:

### FEASIBILITY GRANTS:

**Ms Jemma Keeves** — Physiotherapist, Epworth Rehabilitation  
*Longitudinal prospective study of outcomes following traumatic amputation*

Over the last four years Epworth has developed its service to rehabilitate patients following traumatic amputation. This project will undertake preliminary analysis of pilot data in patients following traumatic amputation in order to examine possible trends and patterns, to optimise the Epworth amputee rehabilitation service and improve patient outcomes.

**Mr John Kenny** — Chief Medical Physicist, Radiation Oncology, Epworth Richmond  
*3D printing applications in Radiation Oncology*

This project explores the feasibility of a hybrid approach to materials used in 3D printing where the customisation benefit of 3D printing is combined with flexible sheets tailored to the patient's body contours.

**Ms Abi Oliver** — Chronic Disease Program Coordinator, Epworth Rehabilitation  
*Feasibility and impact of the New Dimensions Reconditioning Program at Epworth Camberwell*

The New Dimension Reconditioning Program is a new initiative being undertaken by Epworth to increase the uptake of healthy lifestyle choices and improve the outcomes of patients following bariatric surgery, with this project evaluating feasibility impact of the program on patient outcomes over a 12-month period.

**Mr Samuel Towns** — Senior Medical Physicist, Epworth Richmond  
*Gold nanoparticles as a novel contrast agent for radiation therapy*

This project investigates the use of nanoparticles as a novel contrast agent in CT imaging of target area, as a means for target delineation for radiation therapy planning and treatment.

**DEVELOPMENT GRANTS:**

**The Dr Murray Johns Research Grant**

**Ms Michelle Kahn** and **Ms Megan Banky** — Physiotherapists, Epworth Rehabilitation  
*Better assessments for better outcomes: revolutionising outcome measurement using innovative technologies in people with acquired brain injury (ABI)*

This project is expected to improve the care that acquired brain injury patients receive and is likely to have a major international impact, as clinicians will have accessible tools both to assess their patients' physical function and motivate them.

**The Associate Professor Joe Tjandra Research Grant**

**Dr Felicity Lorains** — Clinical Neuropsychologist, Epworth Rehabilitation  
*Pilot randomised controlled trial comparing computer-based memory training and compensatory memory rehabilitation in acquired brain injury*

This project will be the first study to establish which approach to memory rehabilitation is most effective and cost efficient, and which approach maximises acquired brain injury survivor functional outcomes and quality of life.

**The Professor Pricilla Kinkade-Smith Research Grant**

**Dr Trisha Peel** — Antimicrobial Stewardship Physician, Epworth Richmond  
*Optimising antimicrobial use at Epworth HealthCare*

This project will enable detailed auditing of antimicrobial prescriber behaviours at Epworth HealthCare.

**The Professor Jack Cade Research Grant**

**Dr Diane Kelly** — Staff Intensive Care Specialist, Epworth Richmond  
*Critical care interventions at the end of life: a simulation-based study*

This project will analyse real-time intensive care trainee and specialist decision-making relating to the provision of critical care interventions for a critically unwell, elderly dying patient.

**The Mr Kingsley Mills Research Grant**

**Mr Brian Devitt** — Director of Research OrthoSport Victoria and Fellow, Epworth Richmond  
*Am I doing it correctly? Optimising knee rehabilitation in the aged population through biofeedback*

The purpose of this study is to assess the use of biofeedback to improve the quality and effectiveness of knee rehabilitation in an aged population with moderate to severe osteoarthritis, to improve symptoms and function.

**The Dr Graeme Sloman Research Grant**

**Dr Kyle Brooks** — Staff Consultant Intensivist, Epworth Richmond  
*VEREEFY: Validation of Epworth Richmond's echo education focused year*

This study will assess ICU trainees' ability to perform echocardiography. The results of this study will critically inform the future direction of echocardiography training in Australian ICUs.

**The Mr Arthur Day Research Grant**

**Dr Leon Dunn** — Medical Physicist, Epworth Richmond  
*Biofeedback for patient motion management in breast and lung cancer radiation therapy*

Custom-built software at Epworth will be used to evaluate the clinical impact of patient motion during radiotherapy throughout the patient's care path (imaging through to treatment), with feedback from the patients complementing the data analysis.

**The Mr Campbell Penfold Research Grant**

**Dr Daniel Croagh** — Hepatobiliary Surgeon and Interventional Endoscopist, Epworth Richmond  
*Personalised chemotherapy in pancreatic cancer: panitumumab for RAS wild-type pancreatic cancer as determined by EUS FNA*

This study using endoscopic ultrasound guided biopsy will enable selection of a small group of patients suitable for a clinical trial examining the efficacy of panitumumab, an EGFR inhibitor.

**The Associate Professor Jack Mackay Research Grant**

**Associate Professor Martin Richardson** — Dept of Surgery, Orthopaedics, Epworth Eastern and Epworth Richmond  
*Echidna Pin Project: clavicle repair*

Fractures of the middle third clavicle have traditionally been treated with a sling, commonly resulting in problems that often result in chronic pain. This project will evaluate a new fixation device that has been developed for the repair of middle third clavicle fractures.



# Engaging patients in their recovery



Orthopaedic surgery requires patients to get up and move as soon as possible after their procedure.

However, patients who are not fully informed about how to manage their pain, and rehabilitation schedules, or without clear goals, can experience delays in their recovery.

“It is really important for patients to be informed about, and take part in, their recovery after total hip replacement surgery,” Epworth Deakin Centre for Clinical Nursing researcher, Jo McDonall says.

“There are studies that say providing patients with brochures or other written information materials doesn’t actually make any real difference to their recovery, that is why we needed to think outside the box, be different.”

A recent research project conducted at the Epworth Centre for Clinical Nursing Research examined links between patient participation and improved rehabilitation using a multimedia intervention program, and provided patients with a framework to help them make sense of their recovery pathway.

Professor Richard de Steiger and team developed a multimedia intervention for patients post total knee replacement surgery. Together with PhD candidate Jo,

and led by Professor Mari Botti, the team conducted a cluster randomised trial involving 240 patients, examining how this multimedia intervention could improve a patient’s ability to participate in their recovery and how this may benefit their health outcomes.

“We provided evidence that, if patients were given information about what to expect each day — from the first day after surgery through to the day of discharge, the patients were more informed, knew what their goals were and participated in their recovery. It was a really exciting finding,” Jo says.

“Patients who had access to the MyStay TKR intervention stayed a day less in hospital, had less pain and were more satisfied with their treatment than those who weren’t receiving the intervention.”

In 2016, Jo received the Epworth Research Institute Brian Buxton Strategic Research Grant together with Professor Mari Botti, Professor Richard de Steiger, Associate Professor Ana Hutchinson and Ms Kate Steen. The team will use the funds to initiate the next phase of the trial; tailoring the program for patients undergoing hip surgery.

“We are very grateful to have received this funding from the Research Institute, the money will be used to improve patients’ experiences of care at Epworth,” Jo says.

“The MyStay program uses multimedia — text, voice and animations — it actually engages all the senses. It even benefits patients who may not have good eyesight or are hearing impaired, and age has not proven to be a barrier. We had a 95-year-old gentleman in our previous study who was getting his granddaughter to buy him an iPad, because he loved it so much.”

“The MyStay THR intervention will be designed to be nurse-led, so the patients actually navigate the program with their nurses and engage with them as part of their care. The nurses are crucial in this process — they are the link. We really want to embed this type of intervention as a new process of care that will foster a partnership between nurses and patients.”

The MyStay THR program allows easy access to information on daily goals of care, exercise and medication routines, pain management and other key information.

Pictured: From left, patient Jenny Lawrence and Jo McDonall.

## STRATEGIC GRANT:

### The Professor Brian Buxton Research Grant

**Ms Jo McDonall** — Research Affiliate, Epworth Deakin Centre for Clinical Nursing Research, Epworth *Multimedia (MyStay) intervention for managing patient experience (MIME) following total hip replacement surgery: a cluster randomised trial.*

The purpose of this research is to design, implement and evaluate improvements in post-operative outcomes for patients following total hip replacement surgery, and explore the relationships between patient participation, patient experience and patient satisfaction with care.

## GYNAECOLOGICAL CANCER:

### The Audrey Voss Gynaecological Cancer Research Grant

**Dr Rachel Delahunty** — Medical Oncologist, Epworth Eastern *Circulating tumour DNA in endometrial cancer*

The aim of this study is to assess the utility of molecular genomic profiling as a predictor of relapse in endometrial cancer and in conjunction, assess its prognostic capabilities.

## 2016 poster awards

This year again saw a judging panel comprising judges from a number of disciplines who assessed posters submitted both on the abstract and displayed poster, around the research question and hypothesis; methodology; results in text; graphs and tables; conclusion(s); and visual presentation.

Four new categories of poster awards were created this year to encourage nursing and allied health staff to be involved in research.

The winners of the 2016 Research Week poster awards were:

### Experienced Researcher Poster Award

**Dr Homayoun Zargar**, Urology Fellow, Epworth Eastern *The Impact of United States Preventive Services Task Force (USPTSTF) Recommendations Against PSA Testing on PSA Testing in Australia*

### New Researcher Poster Award

**Mr Nicholas Tan**, Monash medical student working with Associate Professors Ron Dick and Dr Tony Walton *Long-term survival outcome after Transcatheter Aortic Valve Implantation*

### Allied Health Research Poster Award

**Elizabeth Moore**  
*Therapy adherence increases goal achievement following BoNTA for focal spasticity in adults*

### Nursing Research Poster Award

**Rachel Waugh**  
*An observation audit tool for nurse-to-nurse bedside clinical handover*

## 2016 Epworth Research Institute achievement awards

These awards were instigated in 2015 to recognise the contribution of Epworth research in a variety of categories. Following endorsement by the Board of the Epworth Research Institute, the following three awards were announced at the Epworth Research Week Dinner.

**Researcher of the Year: Associate Professor Gavin Williams**, Specialist Neurological Physiotherapist at Epworth Rehabilitation.

**Research Leader of the Year: Professor Mari Botti**, Professor of Nursing and Head of the Epworth/Deakin Centre for Clinical Nursing Research

### Research Benefactor of the Year:

**The E.J. Whitten Foundation**

## Sponsors

Thank you to Sanofi and Melbourne Pathology for their significant support of the Epworth Research Week.

[To view the full Epworth Research Report 2015/16, visit the Epworth HealthCare website.](#)



Audrey Voss with scholarship recipient Dr Rachel Delahunty



## OUR COMMITMENT TO QUALITY AND RISK MANAGEMENT

We take pride in delivering quality outcomes and reducing risk to our staff, patients and visitors

At Epworth we aim to deliver excellence in every aspect of patient care, measuring our performance against national standards and, where no national standards exist, we set our own. In fact, we often set higher standards for ourselves — we don't just want to provide good care, we want to provide the very best.

### Clinical Standards

In addition to hospital standards set by the accreditation agencies, we set our own clinical standards and monitor, review and evaluate all aspects of care and service against them.

### Epworth accreditations

In 2016, Epworth opened two new facilities, Epworth Geelong, and the South West Regional Cancer Centre in Warrnambool, where the radiation oncology service operates. Epworth is obligated to have these facilities accredited against the Australian Commission for Safety and Quality in Healthcare's National Safety and Quality Health Care standards, to demonstrate that the right systems and processes are in place to ensure patient safety.

Epworth engages the Australian Council on Healthcare Standards to undertake its organisational accreditation requirements. Two surveyors were onsite within a week of opening to assess each facility against the required standards.

The surveyors reviewed policies and protocols, ensuring:

- staff had been appropriately oriented to the organisation, the facility, their department and their role
- practice review processes were established
- patients would be provided with accurate and relevant information about their admission or visit.

The feedback from the surveying teams was very positive. They were impressed by the quality of the facilities; by evidence of strong governance structures; that the Epworth culture was embedded into the services; by the 'can do' attitude of staff; by the fantastic workforce planning, recruitment and orientation processes that were undertaken to open the facilities.

Interim accreditation was awarded to both facilities with zero recommendations. This is a great achievement and one that the executive team and staff are extremely proud of.

**88%**  
**OF STAFF AGREE 'MY WORKPLACE IS A SAFE WORKPLACE TO WORK IN'**

### Quality of care — National Standards

The Australian Commission for Safety and Quality in Health Care (ACSQHC) introduced ten National Standards in 2012. The intent of the standards was to create a standardised set of guidelines to protect patients from harm and improve the quality of care provided. National Standards 1 and 2 set the overarching requirements for the effective application of the other eight national standards, which address particular aspects of patient care and safety.

**National Standard 1 — Governance for Safety and Quality in Healthcare** aims to ensure effective and integrated systems are in place to maintain and improve the reliability and quality of patient care and improve patient outcomes.

Epworth has done a tremendous amount of work to showcase and be proud of. Epworth has robust systems and processes for reporting of incidents and complaints; investigating, analysing, and providing feedback on the outcomes of investigations; and making required changes to improve outcomes for patients.

The organisation has a very comprehensive enterprise risk management frameworks where risks are routinely reviewed and the controls amended and updated to minimise the impact of harm to patients and staff.

Epworth has robust consent processes which include the patient and are monitored regularly.

The organisation-wide survey in 2016 will be Epworth's opportunity to showcase what has been achieved and the quality of care provided to patients.

### National Standard 2 — Partnering with our Patients

The intent is to ensure there is an environment that supports and is responsive to patient, carer and consumer input and needs, with a strong focus on consumer involvement and engagement.

Epworth has expanded on the fundamentals of this standard over the past twelve months and can clearly demonstrate that patients, their families and carers are at the centre of what is achieved each day, improving patient outcomes. Examples include:

- rollout of the Epworth strategy, where patients are at the centre of the core business
- launch of 'A new day' video encapsulating the heart of Epworth
- consumer involvement on projects — discharge medication and end-of-life care
- introduction of an icon on patient-related publications to indicate consumer involvement, e.g. falls

- expansion of the Partnering with Consumers committee and increased involvement of consumers to review patient-related publications, patient feedback and quality and safety performance
- continuing to engage with VMOs and GPs to ensure Epworth is continuing to engage, inform and educate
- Patient Experience Week at Epworth Richmond and Epworth Eastern, with plans to repeat this concept across the organisation including 'partnering with our patients'.

Epworth's environment is responsive and inclusive of patient needs, acknowledging that all patients are individual and different in their needs, identifying robust ways to measure their levels of satisfaction and subsequently working to improve on areas where expectations have not been met.

### The intent of National Standard 3 — Preventing and Controlling Healthcare Associated Infections

is to prevent patients from acquiring preventable healthcare-associated infections and effectively manage infections when they occur by using evidence-based strategies.

Standard 3 requires infection control to be continually monitored, audited and assessed on a regular, planned basis. Improvements based on evidence and results should be instigated when identified. Epworth has a planned program of improvement activities across all sites (action plan 2016/2017).

Surgical site infections have seen similar rates of infections this year to 2015, with the improvements in providing feedback to doctor groups. A new project has commenced, reviewing the number of surgical site infections in total hip replacements and to determine whether there is a noted difference if the patients have a pre-operative antimicrobial shower.

In hand hygiene, the areas audited have expanded to include the physiotherapy gyms and neurostimulation unit. The hand hygiene posters were reviewed and new posters were produced as a result. Future work includes a targeted program of prevention activities relating to the medical day units (for patients and visitors).

Across all criterion, education for staff, visitors and patients will be addressed in the overall program review. This will include an assessment evaluation of current activities, review of network hospitals and literature, along with consultation with education experts to plan the program for 2017.

Epworth remains committed to facilitating the safe administration of medications through ensuring competency of all clinicians involved in the prescription, dispensing and administration of medications and adherence to Epworth policies and protocols.

This links in with **National Standard 4 — Medication Safety**. A priority for all divisions is to facilitate engagement with patients and their carers, to ensure patients are well informed, active participants in their own care.

During 2015/16 a framework has been developed to provide more comprehensive governance of medication safety throughout Epworth. This framework has been developed to address areas of known risk or error through the assignment of subject matter experts to develop strategies to manage risk, facilitate relevant incident review and data analysis, and develop appropriate processes to address identified areas of concern.

Completed activities include the following:

- review and changes to protocols
- agreement for inclusion of National Prescribing Service online learning module 'Understanding Medication Safety' as mandatory for all nurses on commencement, and including some medication calculations for all nurses annually
- ceased supervised medication rounds for new registered and enrolled nurses — currently for graduates only
- documentation of Best Possible Medication History (BPMH) and development of strategies to improve compliance in each division
- review and additions to the Nurse Initiated Medication List
- development of an education package for roll out of changes in response to process for medication errors
- VTE prevention documentation on the Medication Chart — changes have been made to reflect the current version of the National Inpatient Medication Chart.

Patient identification and matching patients to their intended treatment is an activity that is performed routinely in all care settings and can often be treated as a relatively unimportant task. However, the failure to correctly identify patients and match to an intended treatment or intervention can result in a medication or blood transfusion error, an error in diagnostic testing or a procedure being performed on the wrong person or the wrong side of the body.

**National Standard 5 — Patient Identification and Procedure Matching** sets the expectations for all healthcare workers.

When the National Standards were first introduced, much of the work for National Standard 5 focused on the need to standardise and implement suitable patient identification bands that met the new requirements, and for surgical areas to implement a suitable version of the World Health Organisation (WHO) Surgical Safety Checklist (2008).

With these two key strategies in place across Epworth there has been a growing focus on improving the ways in which Epworth is able to measure and improve care across all aspects of the three core components of Standard 5:

- identification of individual patients by at least three approved identifiers when providing care, therapy or services
- a patient's identity is confirmed using three identifiers when transferring responsibility for care
- health service organisations have explicit processes to correctly match patients with their intended care.

Epworth's policy requires two patient identification bands to be in place. The results from the Point Prevalence survey show an improving compliance with this aspect of patient identification. The results indicate that there is a continuing improvement in compliance year on year, with 99.7 per cent compliance.

An audit completed by the Standard 6 Clinical Handover group in February this year, showed there was a gap in the confirmation of patient identity at the time of handover with required identifiers, and there was confusion with the meaning of the 'I' in the ISOBAR mnemonic used to assist in the handover process. There has been clarification that the 'I' relates to confirmation of identity rather than just being a reminder for staff to introduce themselves to the patient. This has been addressed through both Standards 5 and 6 focus months and the Clinical Leadership Group.

A vital part of matching the patient to the correct procedure is the presence and completion of a valid and complete consent form. Epworth reports on correct specimen documentation and compliance with surgical safety checklist documentation requirements. Regular observational audits are undertaken of the Surgical Safety Checklist process and reported quarterly. Epworth's performance against these indicators is excellent.

**National Standard 6 — Clinical Handover** requires healthcare organisations to implement documented systems for effective, timely, relevant and structured clinical handover that supports safe patient care.

An observational audit of clinical handover was undertaken in late 2015 and 763 handover interactions were observed during the two-week audit period. The audit focused on the five aspects of clinical bedside handover:

- preparation
- introductions
- verbal information using the ISOBAR framework
- safety check
- conclusion.

The results of this audit were positive, overall however they did highlight areas where further improvement can be made, including:

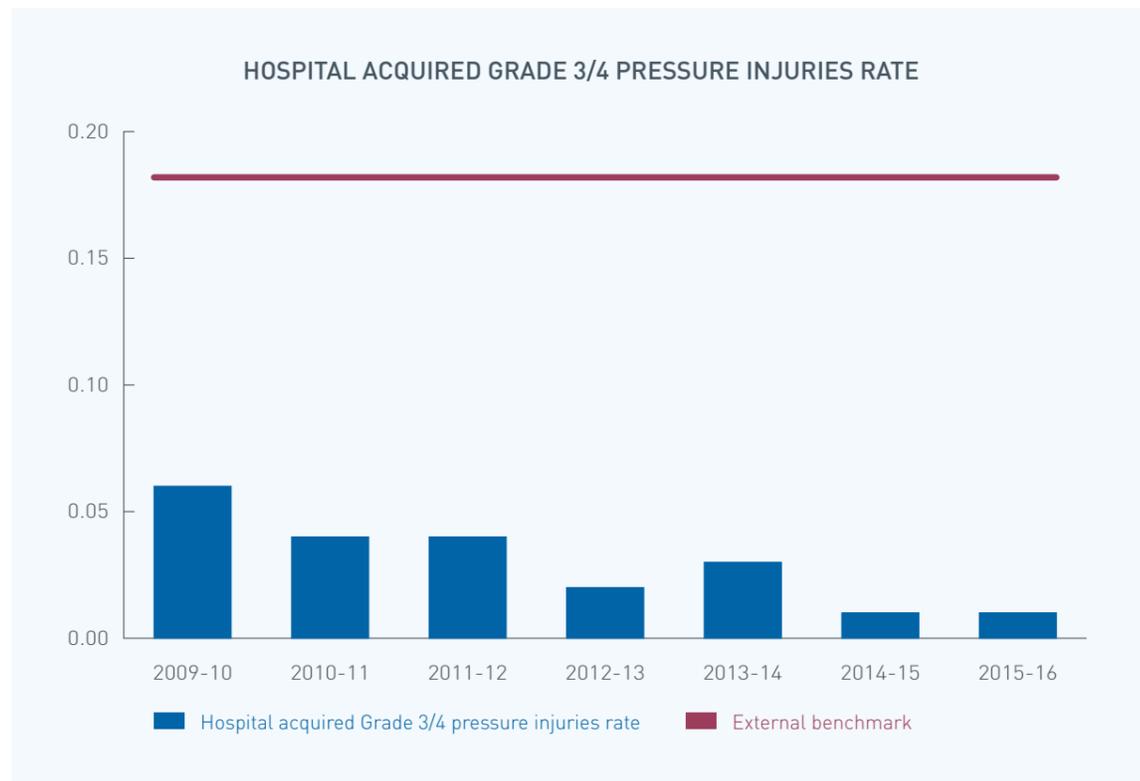
- following hand hygiene protocol when entering/leaving the patient's room
- checking of the patient's identification at the commencement of handover
- visualising forms that contain vital patient information — risk status, observations and medication chart
- ensuring the environment is left safe for the patient
- documenting in the patient's clinical record that clinical handover has taken place.

**National Standard 7 — Blood and Blood Products** ensures that patients who receive blood and blood products do so appropriately and safely. In 2015, the clinical workforce were using a dedicated blood and blood product order form for all transfusion episodes. This form was designed by the Group Transfusion Committee in 2014 and is in line with the requirements of the Australian Commission on Safety and Quality in Healthcare.

The Group Transfusion Committee review all adverse transfusion reactions, blood wastage and non-compliant blood samples. Education resources to clinical areas during the August blood focus month have had a focus on these blood-related adverse outcomes.



**= ACCOUNTABILITY**



It is a requirement that consent is obtained before any blood or blood product transfusion. There has been a steady increase in the compliance of obtaining blood consent since the introduction of a new consent form in 2014 and the above-mentioned blood order form.

Key activities have included:

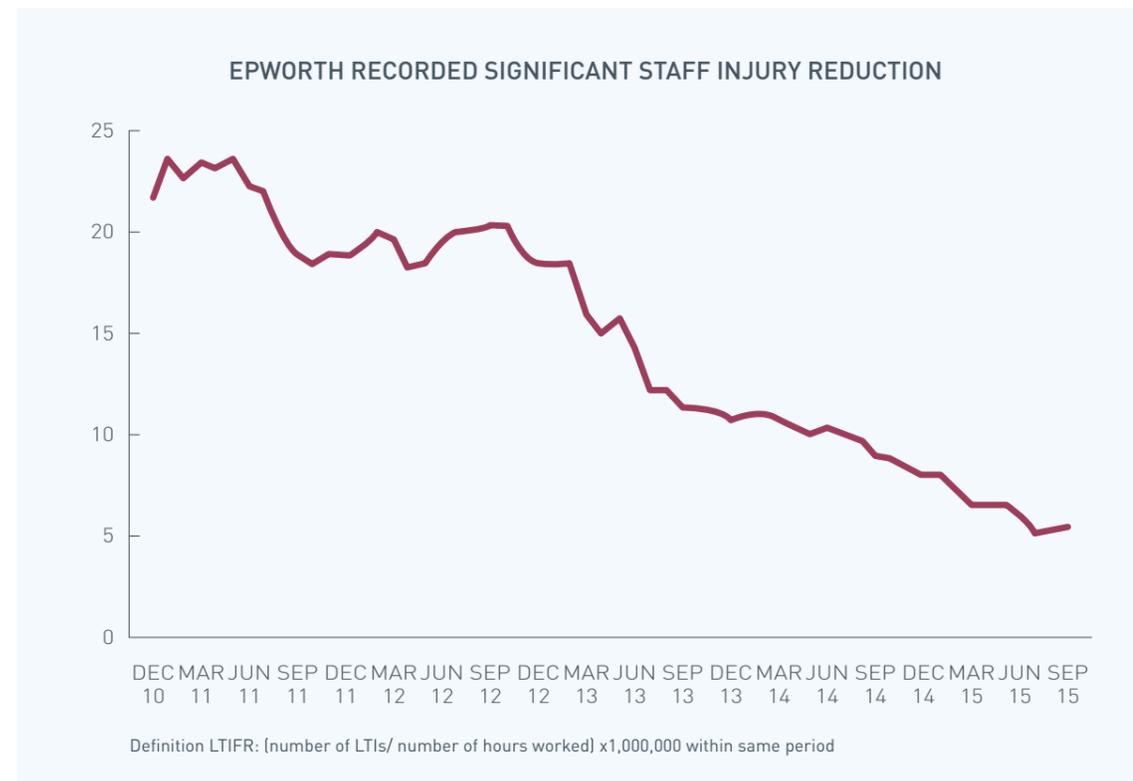
- group-wide audit of the blood and blood product order form and consent
- review of the blood and blood product order form based on nurse and doctor feedback
- registration by Epworth with the Immunoglobulin Governance Program – BloodSTAR
- Epworth Freemasons taking part in the National Blood Authority trial, to improve cold chain compliance and prevent wastage due to variances in blood fridge temperatures.

The intent of **National Standard 8 – Pressure Injury Prevention and Management** is to prevent patients from developing pressure injuries and effectively manage pressure injuries when they do occur. It requires health service organisations to implement evidence-based systems to this end. This includes the development of risk assessment tools that are embedded into usual clinical practice; appropriate resources to ensure management of pressure injuries; audit and data collection to evaluate

effectiveness, and finally, patient understanding of the risk and strategies to prevent it.

Ensuring that pressure injuries are prevented and managed is a key safety and quality challenge across the organisation. Every patient should receive comprehensive care and not be at risk of developing a pressure injury while in Epworth’s care. Even though a range of systems and processes have been introduced to identify at-risk patients and prevent pressure injuries, this area remains a high priority to ensure that patients do not experience preventable adverse events because their risk is not identified or properly managed.

The Standard 8 – Preventing and Managing Pressure Injuries Committee will continue to focus on education and support for all staff to ensure that effective assessment and care of patients is undertaken. The committee will also continue to ensure that the tools to engage and involve patients in their own care are utilised effectively so that prevention of risk is a priority.



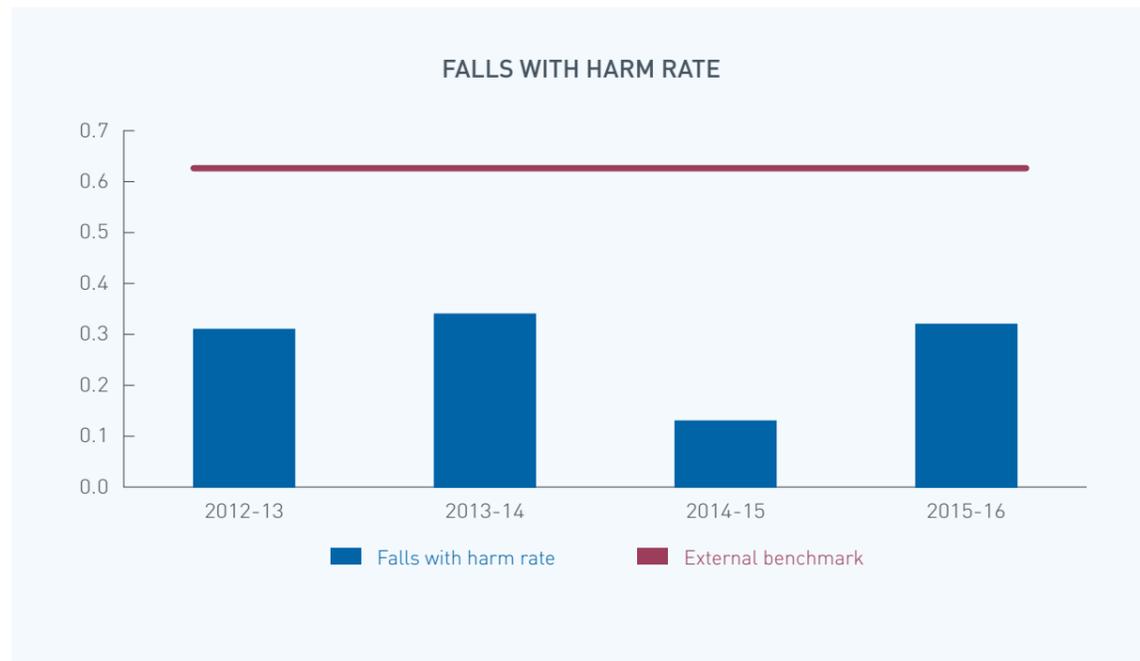
**Making Epworth quality data accessible to all**

As a healthcare organisation, providing accessible, transparent data on the quality of care Epworth offers is imperative. In May, Epworth launched its most comprehensive and up-to-date collection of hospital and clinical performance data. This data is a key tool in measuring performance. The Quality of Care section of the Epworth website provides information about:

- patient satisfaction, sourced from Press Ganey surveys
- the organisation’s performance against each of the ten National Safety and Quality Health Services Standards and
- key statistics from each of the clinical areas.

In addition to hospital standards set by the accreditation agencies, Epworth sets its own clinical standards and monitors, reviews and evaluates all aspects of care and service against these. Each clinical institute carries out audits of performance against specific standards as well as collecting information reported to external agencies. Where available, Epworth uses externally validated data, such as reports to registries and national independent bodies, to assess performance.

Dr Nathan Johns, a specialist rehabilitation medicine physician practising at Epworth Brighton, wrote to Epworth recently about his experience using this new data, “As a clinician interested in patient-centred quality care, I’ve been impressed by Epworth’s new quality of care section on its website. Epworth has committed to providing transparent quality and safety data accessible by clinicians, patients and other interested parties. It has already proven clinically useful as I was able to direct an interested pre-operative patient with hip osteoarthritis to the orthopaedic and rehabilitation sections.”



**National Standard 9 — Recognising and Responding to Clinical Deterioration** aims to ensure patients who have conditions that are deteriorating are identified, and an effective and timely response is activated. Over the last 12 months, a number of improvements have occurred at Epworth. These include:

- ensuring MET Code Blue criteria is visible on assessment forms, including the diabetes record and neurological assessment forms
- incorporating specific neurological criteria into the MET and code blue criteria
- modifying the MROA Not for Cardiopulmonary Resuscitation form to a more comprehensive and clearly documented resuscitation plan form
- updating the physiological observation protocol to guide staff in appropriate assessment and escalation processes.

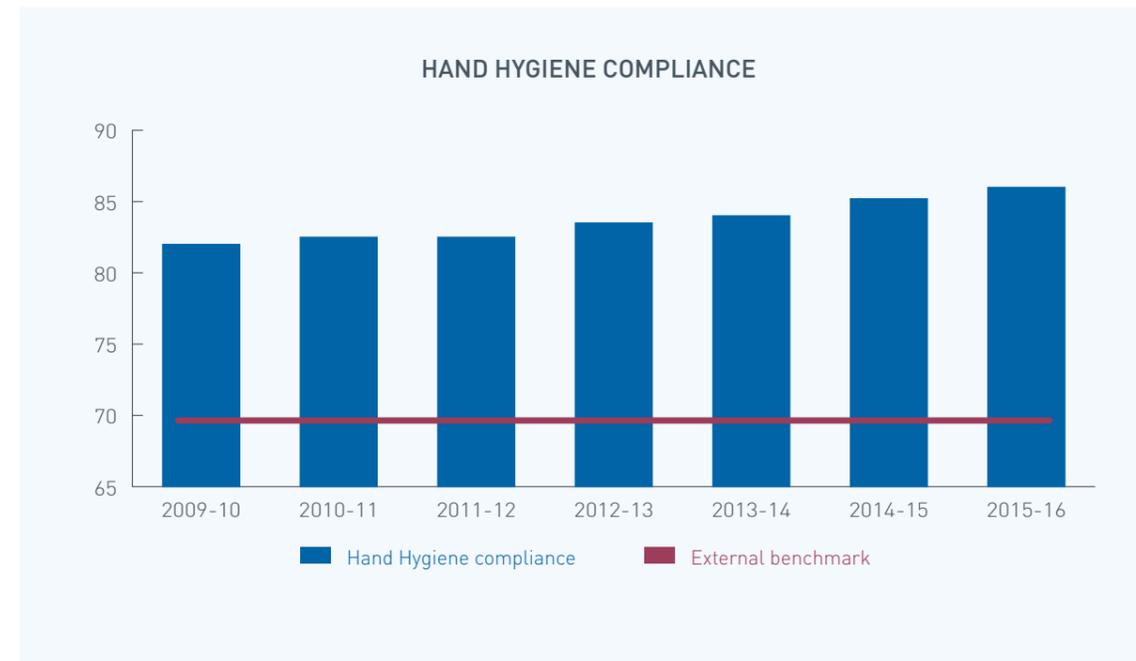
Furthermore, to ensure patients at the end of their life journey receive excellence in care, a suite of forms, protocols, patient information material and staff resources have been developed and implemented. This package was developed in consultation with consumers to ensure that it meets the needs of patients.

A process developed for patients and their loved ones to escalate any concerns in the patient's medical condition is currently being implemented. This project aims to ensure that patients' and loved ones' voices are heard and patient outcomes are improved.

Falls-related injury is one of the leading causes of morbidity and mortality in older Australians. More than 80 per cent of injury-related hospital admissions in people aged 65 and over are due to falls and their related injuries. **National Standard 10 — Preventing Falls and Harm from Falls** aims to address this known risk to patients. Activities over the past 12 months include the following:

- development of a new patient information brochure (finalised March 2016). This brochure incorporated consumer input and included a patient story. There was positive feedback from patients about the brochure and the information available to them while in hospital and when discharged home
- development of falls equipment registry
- inclusion of falls risk discussion in clinical handover
- development (ongoing) of a staff education information and a program teaching patients about safe use of walking frames, by the Epworth Rehabilitation falls group.

The fairly static falls rate across Epworth shows that the organisation's results are generally lower than benchmark falls with harm rate. This is likely indicative of improvements in implementing preventative strategies, satisfactory compliance with hourly rounding, and the involvement of patients with their care since the introduction of bedside clinical handover. To achieve a reduction in falls over the next twelve months, Epworth will maintain the focus



and accountability to a 'no harm culture' in fostering the commitment of all staff in their role in risk prevention at Epworth.

**Epworth Antimicrobial Stewardship (AMS) Program 2015-16**

**Monitoring antimicrobial usage**

All instances of dispensing monitored antimicrobials are visible to the AMS team without a requirement for doctors or hospital staff to obtain pre-approval or undertake any other referral activity which may delay prompt patient care. Each quarter, over 2000 courses of treatment with a monitored antimicrobial or culture of a significant organism are recorded by the AMS pharmacist. These are tracked to determine the indication, identify potential benefit for AMS physician review, and flag those already being managed by an infectious diseases specialist (outside of scope for AMS review).

**Prospective audit and feedback**

The AMS physician rounds have expanded over the last year to offer twice-weekly rounds at each acute site.

Each quarter, around 700 patients (around 900 courses of treatment) are now reviewed, and almost 200 recommendations to optimise antimicrobial therapy have been documented, with 66 per cent of recommendations being enacted by the treating doctor at the patient's next review.

**Prescribing appropriateness**

Antimicrobial selection at Epworth is generally appropriate, with most recommendations to modify therapy related to optimisation in response to microbiology results, de-escalation from intravenous to per oral dosing, or discontinuation when ongoing therapy is no longer indicated.

The volume of meropenem supplied per 1000 bed days group-wide has dropped 31 per cent in the last 12 months (a 58 per cent reduction at Epworth Eastern).

The AMS team again participated in the annual National Antimicrobial Prescribing Survey (NAPS), and expanded the capture for this point-prevalence survey to inpatients at all divisions. 2015 results saw improvement in indicators:

- 71 per cent antimicrobial prescriptions deemed appropriate (matched the national benchmark, and exceeded both the 2015 private hospital cohort, and the results seen at Epworth in 2014)
- 59 per cent surgical prophylaxis prescriptions deemed appropriate (exceeded both the 2015 national benchmark, and the results seen at Epworth in 2014).

This year Epworth has also been part of the design and pilot group for a surgical prophylaxis-focused NAPS which has now been rolled out nationally.



## CARING FOR OUR COMMUNITY

Having a positive impact on our community since 1920

For more than 95 years, Epworth has maintained a strong tradition of care. We support many health-related causes each year, particularly those that are closely aligned with our patients through our specialty areas.

We partner with international charities and national service organisations by providing our facilities free of charge for specialist procedures unavailable in patients' countries of origin. Epworth encourages and supports our staff to be involved in their communities.



**Epworth Clinic therapy team supporting the value of community**

The Epworth Clinic team coordinated a food drive for the Asylum Seeker Resource Centre (ASRC), as a way of supporting those in need within the community. The team asked all staff at Epworth Camberwell to purchase extra items in their weekly supermarket shop, with the idea that if every staff member donated a couple of items they could make a real impact. With the support of Director of Clinical Services Mental Health, Susan McLean, and Director of Clinical Services Rehabilitation, Suzie Hooper, the work began.

The ASRC supports newly arrived people in the community, over half of whom have no income and 90 per cent of whom live under the poverty line. Since its inception in 2001, the ASRC has assisted over 10,000 asylum seekers, providing in excess of 2.5 million hours of free assistance worth more than \$200 million.

After three weeks of collections at reception, the team had amassed a huge bootful of non-perishable food as well as toiletries. They estimated the products donated to be worth about \$800. The volunteers at ASRC were incredibly grateful for the staff's efforts.

**Epworth supports Fun4Kids Festival at Warrnambool**

With Epworth entering a new chapter in healthcare in the south west of Victoria, we are proud to have partnered once again with Warrnambool's iconic Fun4Kids Festival, a seven-day festival for children, attracting families from across the state. During a week in late June, Epworth helped kids let their creativity run wild at the annual event, designed for children aged two to 12.

Epworth worked with local artist Eliza-Jane Gilchrist to create a space at the festival for kids to develop art, using cardboard to create various shapes and objects, forming the 'Strange Garden'.

Epworth continues its involvement in the south west of Victoria with the recently opened South

West Regional Cancer Centre, offering radiotherapy treatment to residents of the region.

**Epworth Clinic provides education for the Mental Health Professional Network**

Epworth Clinic joined with the Mental Health Professional Network (MHPN) for the Hawthorn district in March 2015. The MHPN is a Department of Health-funded initiative.

Meetings are held with the objective to provide quality educational opportunities for members of the MHPN. Attendees comprise mainly allied healthcare professionals including psychologists, social workers and general practitioners.

Epworth Clinic presented on the following topics:

- 'The management of depression — advances in ECT and TMS' presented by Dr Graham Wong, director of psychiatry and ECT and Dr Peter Farnbach
- 'Depression in the elderly' presented by Dr Lyn- May Lim
- 'Diagnosing different types of depression' presented by Amit Zutshi
- 'Metabolic syndrome (MetS) and mental health' presented by Dr Vaidy Swaminathan
- 'Therapeutic advances and risk factor management of dementia — our best chance to tackle dementia' presented by Dr Terence Chong
- 'Bipolar and bipolar spectrum — practical clinical tips' presented by Dr Michael Piperoglou.

The feedback from participants has been excellent.

**Making a difference with Mercy Ships**

In April, Caroline McLoughlin, clinical nurse consultant/acute pain nurse at Epworth Richmond, volunteered for a three-week posting with Mercy Ships — state-of-the-art hospital ships delivering much-needed medical care to people without access to adequate surgical and related healthcare. The service delivers free surgeries and healthcare to the poorest people in the developing world. Australian surgeons, nurses and other staff volunteer their services and pay their own expenses so funding can go to patients and services.

Caroline journeyed from Melbourne to Madagascar to join the charity ship and help provide free surgical care to residents of the African island. On the eight-deck Africa Mercy, which can hold up to 450 crew, Caroline made her home alongside other volunteers from around the world, from varying clinical and non-clinical professional backgrounds.

# Fostering kids' creativity through art



Epworth is proud to have partnered once again with Warrnambool's iconic Fun4Kids Festival, a seven-day festival for children, attracting families from all over Victoria.

'Strange Garden brought to you by Epworth' was a unique space within the festival and featured a beautiful cardboard installation by local artist Eliza-Jane Gilchrist. Strange Garden encouraged children to use their own style and creativity to grow the installation, creating shapes through drawing and building their own sculptures.

"My inspiration for Strange Garden came from the desire to build sculpture with kids, and wondering how best to do that. Because a lot of sculpture techniques and tools are not suitable for kids to work with, and it takes a long time to build things, I needed something quicker and safer," Eliza-Jane says.

"The Art Gallery of Ballarat commissioned me to devise a workshop based on a work in their collection. I was enchanted by a small papier mache work by James Morrison called Mt. Hesperus, with a densely-decorated surface. It was the inspiration to work in cardboard and to decorate the surface of the sculptures with textures.

"It's important for kids to become accomplished at thinking creatively. For their future they need flexible brains that are good at problem solving. Nothing trains them for this so well as the arts. The notion of play is central to making art, trying different things, understanding failure, trying something else until it works.

"Building this sculpture is one way kids can learn these things. They work collaboratively, so they get the satisfaction of contributing to something larger than they could build by themselves. The drawing activity is a pleasure; drawing patterns is calming and meditative. It's good for kids to learn techniques they can employ to change their mental state.

"An essential reason for engaging with kids on a project like Strange Garden is that it is fun! They feel excited by the transformation of something so hum drum as cardboard into this exciting other world."

Volunteer theatre staff members attend for a minimum of two weeks and ward staff members a minimum of nine weeks. The charity sends out a team in advance to each location, to find out what the specific medical needs are. In Madagascar, obstetric fistulas (a complication from prolonged labour) are particularly common, along with cleft lips and palates and facial growths.



Caroline McLoughlin

#### Volunteering in Africa with LearnToLive

Over the past three years, Hospital in the Home ANUM, Andrea Gunn, has volunteered internationally with a group called LearnToLive (LTL). LTL is a non-government organisation (NGO) founded in 2011 by Australian registered nurse Yanti Turang. Each year doctors, nurses, allied health professionals and administrative volunteers come from all over the world to work in Laos, Indonesia and, for the first time this year, in South Africa.



Andrea Gunn, left, during her time with the LearnToLive program

In September, Ms Gunn travelled to the Ufafa Valley of rural Kwazulu-Natal, South Africa, with eight other health professionals, to partner with community-based NGO Woza Moya. Woza Moya services almost 20,000 people affected by the highest prevalence of HIV in South Africa. They invited volunteers to complete a needs assessment to help them form and implement protocols and education programs for the future.

In two weeks, Ms Gunn and other volunteers saw 200 patients; trained 30 community care workers in health education, including diabetes, diarrhoea, tuberculosis and HIV; ran nine reproductive health education programs in schools, and held menstrual hygiene workshops.

#### Congratulations to all who took part in September

Epworth had 28 teams participate in taking 10,000 steps per day for the month of September for Cerebral Palsy Alliance. Epworth contributed \$4841 in fundraising (plus the registration fee). Every dollar raised provides vital equipment, therapy and services to children and adults living with cerebral palsy and contributes to groundbreaking research into the prevention of cerebral palsy — and maybe even one day the cure. A big, well done, to Epworth's top three fundraising teams: The Sole Sisters, The Bees and Pre-admissions Nurses, for making a huge difference to thousands of people living with cerebral palsy. Australia-wide, Steptember raised \$3,951,009.

#### Epworth volunteers awarded for their work

On 2 October, Epworth Eastern volunteer Moira Axten received an award at the Victorian Senior of the Year ceremony, held at Government House. Moira was presented with the Healthy and Active Living Award for her contribution to the health and wellbeing of seniors in the community. Starting her career as a physical education teacher in her native Scotland, Moira later immigrated to Melbourne where she took on lecturing and teaching positions.

Throughout the years, Moira has committed her time to helping older people learn how to maintain healthy bodies and minds, and currently runs an exercise program twice a week, which has proved very popular. Moira has volunteered with Epworth Eastern for nine years, giving her time as a newspaper trolley volunteer around the wards. She says she was thrilled and surprised to win the award.

"I was humbled by the award but nevertheless felt very honoured," says Moira. "I certainly do not do all this to be rewarded; I just get a great deal of satisfaction from being able to give so many people the opportunity to keep moving and keep healthy."

"I absolutely love volunteering; in fact, I retired early and almost immediately became a volunteer," Moira adds. "All my volunteering has involved contact with people of all ages and with different needs. To feel that I am able to help so many people in some way, however small, makes it all worthwhile and rewarding."



## Making a difference with Mercy Ships

Caroline 'Caz' McLoughlin, clinical nurse consultant/acute pain nurse at Epworth Richmond, loved her experience volunteering with Mercy Ships so much that she's already planning a return trip.

Embarking on an incredible three-week posting, Caroline made the epic journey from Melbourne to Madagascar in April, to join the charity ship and help provide free surgical care to patients who would not normally have access to treatment.

"There was one other Australian with me. He is an engineer and will be there for six months," says Caz. "If you're a theatre staff member you have to go for a minimum of two weeks. If you're a ward staff member it's a minimum of nine weeks. There's a doctor who has lived on the ship for 30 years and there's even a school on the ship," Caz says.

"There are 35 kids on board, so whole families will go, and one of the parents will be working on the ship while the other one will look after the kids before and after school."

The Mercy Ship usually spends ten months at a location, but due to fears around the spread of the Ebola virus, it's been docked in Madagascar for the past two years. The charity sends out a

team in advance to each location, to find out what the specific medical needs are. In Madagascar, obstetric fistulas (a complication from prolonged labour) are particularly common, along with cleft lips and palates, and facial growths.

"I worked in recovery, in the post-op area," says Caz. "We had all five theatres running on the ship, with a theatre list of about 12 patients per day. (Working in PACU [post-anaesthesia care unit]) was a highlight because you could see the patient's response to treatment after surgery. Even though they didn't speak English, body language went a long way, so people who had had big growths on their faces for years, you could show them the mirror afterwards and then they'd touch their face in disbelief," Caz says.

"The way that parents reacted to their kids — some of them just started crying because they were so happy their kids were better. That was really nice to see. They finally had this relief that life was going to be different."



Epworth volunteers awarded for their work, pictured (centre) with Executive Director Epworth Eastern, Louise O'Connor.

Four Epworth Eastern volunteers were the recipients of Caroline Chisholm Awards, which recognise outstanding members of the community of Chisholm, in a ceremony held on 31 October. Bill Preston and Peter Lewis both volunteer for HeartSmart, a rehabilitation program offered to Epworth cardiac patients. Helen Seifert, a patient at Epworth Eastern, nominated Bill and Peter after receiving their excellent care and support as part of the HeartSmart program.

Patrick Montgomery and Peter Marburg were also awarded. Patrick first began volunteering with Epworth Eastern in 2005, shortly after the hospital opened. He has worked in numerous roles, including regularly manning the hospital's information desk, welcoming patients as they enter the hospital and helping with directions. His friendly and helpful nature makes him a valuable asset to the hospital.

A former patient, Peter Marburg chose to volunteer at Epworth after being impressed with the care he received during his stay. Peter uses his years of experience in finance and accounts (as the former Chief Financial Officer for Stihl), to help out in the human resources department with sorting and filing documents in the personnel files. Peter has been a crucial member of the Epworth Eastern team for over six years. Congratulations to Moira, Bill, Patrick and Peter for the well-deserved recognition of their volunteering efforts.

#### Pancake Day success

Hungry Epworth staff and visitors across Epworth Eastern, Epworth Freemasons and Epworth Richmond enjoyed a pancake treat on 9 February (Shrove Tuesday). Pancake Day was held to raise funds for UnitingCare, supporting people in crisis to get back on their feet and have the opportunity for a fresh start in life. A total of \$1408 was raised on the day, thanks to the help of staff and volunteers who prepped, cooked and served pancakes.

#### Epworth Eastern winter appeal

Epworth Eastern hosted its annual winter appeal during June, with staff encouraged to donate warm winter clothing, jumpers, coats, blankets or non-perishable food items to two worthy causes.

There was a fantastic response, with many boxes of donations collected in departments across the hospital. The items contributed were donated to UnitingCare Harrison Services. This community service provider supports children, youth and families in crisis and ongoing need; has a youth homelessness team that deals with young people who are alone and facing homelessness; and runs the Boroondara Community Outreach Program, which helps adults who have experienced or are experiencing mental illness or issues of social isolation.

#### Epworth Eastern cooking up a storm with the Salvos

The Salvation Army in Box Hill provides a community dinner one Sunday a month for members of the local community, with volunteer cooks organising, preparing and serving meals. Staff at Epworth Eastern have volunteered at these dinners since July 2009.

The Salvation Army dinners provide Epworth Eastern with an opportunity to support its neighbours and engage with the local community, as there are usually between 60-80 locals who turn up on the night. Epworth calls for volunteers to work at the dinners twice a year and consistently has a group of 12-14 staff and family members attend.

Those who attend the dinners speak of how good it feels to work together as a team and prepare, cook and serve a meal to 60-80 people. Epworth Eastern is always warmly welcomed, and as they serve and clean up on the night the team receives many compliments from the guests for the meal. Some staff bring their older children or teenagers along, so they too can help those in the community who are struggling. Staff members comment on how their children have gained a greater understanding of their community and those less fortunate than themselves from attending and helping out.

#### Morning tea bake sale raises money for cancer

In May, medical students from Epworth's newly formed Clinical School hosted a bake sale for Australia's Biggest Morning Tea and raised over \$1100 for the Cancer Council. Donations help support cancer research, prevention and support services.

## Pro-bono surgery completes a lifetime of care



INFANT post-frontal advancement      8 YRS pre-midface distraction with frame lat      17 YRS pre-op facial reconstruction      19 YRS pre-op nasal reconstruction      19 YRS post-op nasal reconstruction

### Bradley Bola has endured more than his fair share of major surgeries in his 19 years.

Papua New Guinean, Bradley Bola, was born with Crouzon Syndrome, which meant his skull sutures fused prematurely, resulting in skull and facial growth abnormalities that affected his quality of life.

Unable to access adequate surgical care at home, Bradley was fortunate to be connected with the services of Rotary Oceania Medical Aid for Children (ROMAC), an organisation dedicated to providing specialist treatment to children from developing countries.

Through the efforts of ROMAC, Bradley has been able to travel to Melbourne to undergo treatment at no cost to him or his family, for a total of four life-changing surgeries, with a fifth scheduled later this month. Epworth maxillofacial surgeon Associate Professor Andrew Heggie performed three of Bradley's surgeries — the last two at Epworth, with the most recent this past May.

"Bradley has had three previous procedures," Andrew says. "The first was a forehead advancement when he was an infant, then at eight or nine we performed a distraction of his mid-face, using anchorage pins attached to the skull to pull his face forwards.

"Then we heard from his PNG paediatrician when he was 17 and approaching the end of his growth.

That's when he had his major surgery — a full mid-facial advancement and chin advancement. After that surgery we knew his nose was flattened and twisted, and that we would need to fix it from a breathing perspective, which is what this most recent surgery has achieved."

Andrew says the four-hour surgery was a success and that Bradley is recovering well.

"He's a very hardy young man and he has a pretty high pain threshold," says Andrew. "The surgery made an immediate difference to him, and it's a huge change from our point of view, as well."

ROMAC's Gaynor Schols says the surgical assistance of Andrew and Epworth is greatly appreciated.

"Associate Professor Heggie has always offered his services pro-bono and ROMAC, Bradley and his family are extremely grateful," she says.

"We would also like to sincerely thank Group Chief Executive Alan Kinkade and all the wonderful staff at Epworth. With the spiralling costs of treating children, all the financial help ROMAC can get is very important, to allow us to keep our service going."

Andrew says he is a longstanding supporter of ROMAC and the wonderful service it provides.

"At a personal level it's the most satisfying work I do," he says. "To see the happiness and increase in self-esteem that surgery provides these kids, who come from very impoverished backgrounds, is a terrific feeling."



## EPWORTH MEDICAL FOUNDATION

We are immensely grateful to the generous donors who support the work that we do

Epworth provides world-class care to our patients because of the generous support from benefactors, corporate sponsors, philanthropic trusts, community groups and volunteers.

Donations made to the Epworth Medical Foundation make a real and positive difference to our patients. Funds are used to purchase new equipment, upgrade our facilities, facilitate important research, support patients in need, and deliver prestigious staff scholarships. All of these outcomes ensure that our patients continue to receive the best possible care.

### Counsel and governance

Executive Director, Scott Bulger, and his team in the Epworth Medical Foundation are grateful for the governance and support provided by the Board of Trustees throughout the year. The trustees are:

- Mr Michael Robinson AO (Chair)
- Dr Philip Williams AM (Deputy Chair)
- Ms Cathi Biddick
- Ms Evelyn Danos
- Assoc Prof Ron Dick
- Mr Brad Harris
- Mr Keith Irvine
- Mr Alan R Kinkade
- Mr Stephen Newton AO
- Mr David Rosback AM
- Mr Bruce Siney

### Funding the latest technology

Almost 50 per cent of all new medical equipment and technology purchased at Epworth is funded directly by donations. Some of the items purchased through donated funds by the Epworth Medical Foundation are outlined below.

- This year Epworth opened one of the world's most advanced hybrid operating theatres, to provide patients with the latest advances in surgical technology. The donor-funded Siemens Artis Q hybrid biplane theatre is the first of its kind in Australasia. The hybrid biplane theatre is particularly suited to the treatment of heart, vascular and neurological disorders, and can allow for both traditional open surgery, as well as minimally invasive endovascular procedures.
- Epworth donors also gave generously to bring advanced echocardiogram heart-monitoring technology to our intensive care unit (ICU). This generosity is already saving lives. Echocardiograms are the gold standard for monitoring the heart and its various chambers and valves. Having this equipment onsite in the ICU means patients gain immediate access to this life-saving technology.
- Epworth was the first private hospital in Australia to acquire a Lumenis Pulse 120H holmium laser, funded by donations, and now in use at Epworth Freemasons to treat patients with benign prostatic hyperplasia (HoLEP), and to remove large kidney and bladder stones. The holmium laser represents a less invasive procedure, results in reduced bleeding and a lower complication rate, and ultimately leads to a drastically-reduced recovery time.
- The special care nursery at Epworth Freemasons' maternity unit is now better equipped to care for at-risk newborns. The nursery recently received

equipment funded by individual donations including heated, humidified, high-flow nasal cannula therapy (HFNP), used to manage newborn babies with respiratory difficulties. Prior to the introduction of this equipment, babies showing evidence of respiratory distress had to be transferred to a tertiary-level paediatric hospital. Now, they are able to stay at the special care nursery at Epworth. This removes the distress and risk involved with transferring the child, and ensures that mother and baby are not separated.

- Breast cancer patients at Epworth Freemasons also have access to a new diagnostic tool known as the Wireless Lymphatic Mapping Probe, to diagnose and treat the spread of cancers into the maxillary lymph nodes. This probe, funded through donations, has been a tremendous innovation for both surgeons and breast-cancer patients alike, providing an accurate and less-invasive procedure for lymphatic mapping, important to detect the spread of the disease. This technology uses an injection of radioisotopes in the tumour bed to identify the cancerous lymph nodes. It is then able to follow the spread of cancer, removing the need for further invasive procedures and side effects.
- Epworth Eastern has doubled the number of chemotherapy and haematology treatment beds in its day medical unit to 18, as part of a major renovation. Alongside the treatment chairs and the improved environment, donations have also helped to purchase scalp-cooling machines to prevent hair loss for patients undergoing chemotherapy. Epworth was the first hospital in Victoria to make scalp-cooling available to patients.

### Epworth receives largest ever bequest

This year Epworth was advised we were the beneficiary of the most significant bequest gift in the history of the organisation.

Mr and Mrs John and Margaret Schneider wanted to leave a legacy of helping others and generously provided funds to name a new hospital wing, to endow 30 scholarships, to endow a new professorial appointment, to support patients and establish an equipment endowment fund. This fund will help us to provide the very best equipment possible to care for our patients both today and into the future.

### Australia's most expansive scholarship program

Epworth has established an extraordinary staff scholarship program, funded entirely through donations. The purpose of the scholarships is to encourage our staff to innovate, to excel, and to never stop learning. For patients, this means that they are cared for by highly motivated professionals with advanced training, in a culture of outstanding care.



Staff members celebrate the installation of the new wireless lymphatic mapping probe

This year over 80 scholarships were awarded to staff across all divisions and all levels of the organisation. Some successful recipients will use their scholarships to travel to the US or the UK, to investigate best practice approaches in other hospitals and bring their learning back to Epworth. Others will attend conferences in their area of speciality; conduct research projects to identify and implement best practice approaches; or undertake further studies to continue professional development in their current and future roles at Epworth, providing improved safety and patient care. In addition, eight leading Epworth nursing staff attended the prestigious Cleveland Clinic in the US as part of a two-week professional development experience. All of these scholarships were funded entirely by donations.

### Research — an essential component of patient care

At Epworth, research is an essential part of the care we give to patients. Alongside exemplary medical care in state-of-the-art facilities, providing patients with the best possible care also means giving them early access to new treatments and trials, and ensuring we remain at the forefront of global medical innovations.



Emma Manoilova receives the Heartbeat Richmond Scholarship, with President of Heartbeat John Thurkle and executive member Fay Henderson

### Barcoding tumours — a new era in cancer care

Epworth's new Director of Molecular Oncology and Cancer Immunology, Professor Miles Prince, is working on 'tumour profiling', a new way of diagnosing and treating cancer. Rather than a one-size-fits-all approach to chemotherapy or radiation therapy, this is the process of tailoring treatments and modifying approaches according to each patient's particular biological characteristics. The foundation has attracted funding to support Professor Prince in his research in the fields of molecular oncology and cancer immunology, ensuring our patients have access to the latest innovations in cancer treatment, particularly the individualised mapping of cancer cells to create targeted treatments that offer the best chance of success.



Professor Miles Prince, Director of Molecular Oncology and Cancer Immunology

### Treating prostate cancer with unparalleled technology

Researchers at Epworth are exploring an exciting new development in the treatment of recurrent prostate cancer, by making use of unparalleled technology (PSMA-PET scans and Calypso real-time tracking) to diagnose and treat recurrent prostate cancer. Made possible through the generous support of the EJ Whitten Foundation, the trial will provide a potential cure for men with locally recurrent prostate cancer.

Prostate cancer is the most commonly diagnosed cancer in Australian men, and the third-most common cause of cancer death. Despite a high initial cure rate, up to 40 per cent of men experience cancer recurrence within five years of having radical surgery to remove their prostate. This research trial is redefining the standard of care for men with recurrent prostate cancer. Epworth is the only hospital in Australia with the experience and technology required to undertake

this trial. Epworth diagnoses and treats more than a quarter of all prostate-cancer patients in Victoria, and offers the most advanced radiation oncology service in the state. It also has Australia's only access to Calypso, the most advanced, real-time target-tracking technology in the world. For men whose cancer has returned only to the prostate bed, researchers are using Epworth's Calypso technology to deliver a curative dose of radiation, maximising the chance of cure while minimising damage to nearby healthy structures.

### Supporting Epworth Richmond's redevelopment

This year the new Lee Wing opened at Epworth Richmond, comprising a state-of-the-art critical care area. Some of Epworth's most generous benefactors took the opportunity to leave a lasting legacy to the hospital through the naming rights in the hospital's major capital campaign.



Nurse Unit Manger Meredith Elliott and her team in the new paediatric unit

As a result, the Lee Wing is named in honour of Mr and Mrs PS Lee; the new and expanded emergency department with 35 treatment spaces honours Matthew and Audrey Voss; the 26-bed intensive care unit honours Miri and Moshe Meydan; a 39-bed acute and high-dependency cardiac unit honours Zig and Helen Inge; an orthopaedic unit honours Ken and Cathi Biddick; and more than a hundred private rooms are named for donors wishing to leave their mark on the new facility. The facilities are truly world class, purpose-designed for best practice patient care, and equipped with cutting-edge medical equipment and technology.

In direct response to community demand, Epworth Richmond opened its new paediatric ward named in honour of the Susan Harris Foundation. The 20-bed paediatric ward has been fitted out to better care for our littlest patients. Each of the rooms is equipped with state-of-the-art technology, and specially designed to care for the children's needs, to enable us to provide best-practice paediatric services in a dedicated environment.

### Gym upgrades thanks to donors

Epworth has completed its \$750,000 donor-funded allied health treatment area upgrade across Epworth Richmond, Epworth Camberwell, Epworth Hawthorn and Epworth Brighton. Following the installation of more than 1600m<sup>2</sup> of new safety flooring; the temporary relocation of more than 60 staff; the installation of more than 420 cutting-edge new pieces of equipment; and the construction of a bathroom retraining area and renovation of two bathrooms, two laundries and a kitchen, this project is now complete. New exercise bikes, height-adjustable parallel bars, pilates reformers, treadmills and elliptical trainers are now being fully utilised by patients and staff.

### Easing costs for regional families

An extended stay in hospital brings its own set of physical and emotional challenges, not the least of which is the sense of loneliness and lack of support when family and loved ones are far away. Epworth is now in a position to offer accommodation vouchers — fully funded by donations — to families in financial need, enabling them to stay overnight in Melbourne to visit their loved one at Epworth. The vouchers make a significant difference to patients and their families, who would otherwise be separated because their loved ones could not afford to stay in Melbourne.

"We were recently able to offer the family of a long-term patient the opportunity to come to Melbourne to visit him, for the first time during his hospital stay," said Lauren Mosso, Senior Chaplain and Pastoral Care Coordinator. "The generosity of our donors has made a huge difference to the family, and to this patient's wellbeing."

### SUPPORTING EXCELLENCE IN PATIENT CARE

#### Moulin Rouge at Epworth

Thanks to the sponsors, doctors, staff and friends who attended the 2015 Epworth Gala Ball, the Epworth Research Institute will benefit from \$3.3 million, helping to improve patient outcomes. A total of 1300 guests were transported to Paris for 'Epworth Moulin Rouge', an evening of cabaret in the round. The 2015 ball was held in the Palladium Ballroom at Crown on 1 August. Major sponsor Medownick Laser Clinic and major partners ConMed and Gallay were accompanied by 50 other sponsors who supported the event, each helping to achieve this year's amazing success. Eleven auction items were on offer, including a mega media package from Channel 7, 3AW and the Herald Sun; business class tickets to Europe via Singapore Airlines; a forgone commission with Kay and Burton, and generous hospitality packages from Levantine Hill winery in the Yarra Valley.



Mr & Mrs PS Lee and family in front of the recognition signage of the new wing named in their honour

A highlight of the evening was when Epworth's Group Chief Executive Alan Kinkade called for pledges in support of research at Epworth. Doctors, sponsors and benefactors stood to pledge their support, often expressing appreciation for the care provided by Epworth to members of their family. The room fell silent when Professor Brian Buxton stood to claim that one of his former cardiac patients had asked him to announce their anonymous pledge of \$1 million, to establish a cardiac research fund at Epworth. In addition, the Epworth Board of Management agreed to match every dollar donated during the evening, doubling the difference made to fund translational bench-to-bedside research. The Epworth Gala Ball is just one of the events organised by Epworth's Special Events Committee, chaired by Mrs Robyn Beddison OAM.



Epworth Medical Foundation Executive Director Scott Bulger with major benefactor Audrey Voss on the dance floor at the gala ball.

### Women in Healthcare Luncheon

Hosted by the President of the Epworth HealthCare Board of Management, Rod Fitzroy, the eighth annual Women in Healthcare Luncheon was held at Zinc, Federation Square, on 8 October and attracted a record attendance of approximately 400 guests. With Epworth specialist breast cancer surgeon Dr Chantel Thornton acting as MC, leading cardiologist Dr Jennifer Johns AM and cardiothoracic surgeon Associate Professor Silvana Marasco addressed the issue of cardiac disease in women and the latest techniques and outcomes in minimally invasive cardiac surgery. Thanks to major event sponsor, Conquest Services, and associate sponsor, Abbott Vascular, a record net profit of \$103,000 was raised. These funds have assisted in the purchase of a portable echocardiogram machine for the new intensive care unit at Epworth Richmond.

### Epworth Charity Golf Day

The Epworth Corporate Charity Golf Day was held at Huntingdale Golf Club on 7 March, with a field of 100 players including corporate sponsors, Epworth executives and doctors. Mr PS Lee was the major sponsor of the event, and together with 14 hole sponsors and ten team sponsors, a net profit of over \$92,000 was raised. Bidvest won the team prize and Jellis Craig and LCI the second and third team prizes. Proceeds from the day have purchased five paediatric difficult intubation trolleys for paediatric services at Epworth Richmond. This equipment will be used in the new paediatric unit for children who are in urgent respiratory distress.

**Men's Health Lunch**

The diagnosis and treatment of prostate cancer was the topic for discussion at the fifth annual Men's Health Lunch held in May in the Members Dining Room of the MCG. A total of 470 guests attended the event, including sponsors and leaders of industry, health and the community. Sports physician Dr Peter Larkins was MC for the day, with guest speakers including urologist Associate Professor Nathan Lawrentschuk and Director of Radiation Oncology, Dr Pat Bowden. The take-home message was for men to become more active about their health by improving diet, engaging in regular exercise and scheduling regular checkups and screening. Thanks to associate sponsors Advantage Salary Packaging, the ANZ Bank and 12 table sponsors, the event raised \$150,000. The Special Events Committee has dedicated the proceeds to endow a doctor's grant to be awarded annually in perpetuity.



Dr Peter Larkins, Dr Pat Bowden, GCE Alan Kinkade and Assoc Prof Nathan Lawrentschuk at the Men's Health Lunch

**Friends of Epworth Race Day**

A brave 400 guests faced the chilly weather to attend the Friends of Epworth Race Day at Moonee Valley Racing Club on 18 June. Attendees were kept cozy in the Champions Room overlooking the course, with a three-course meal, all-day beverages and the opportunity to have a flutter on the tote. Female jockey Casey Bruce acted as MC and assisted with Fashions on the Field. Special guest Des O'Keefe, CEO of the Victorian Jockey's Association, interviewed jockey Willy Hernan about his injury and subsequent rehabilitation at Epworth following a fall in 2008 in Geelong. Nine races were sponsored by Epworth suppliers and friends, including Silver Thomas Hanley, DI Office Designs, GJK Facility Services, Bidvest, Kane, Vital and Zouki. An amazing \$50,000 was raised from the event thanks to our sponsors, staff and friends.

**Challenge yourself!**

This year the Epworth Medical Foundation organised a number of local and overseas charity challenges, including trekking along the picturesque Great Ocean Walk; cycling alongside the Gulf of Thailand; exploring exotic Sri Lanka; hiking through the hill tribes of Vietnam and taking the Buddhist pilgrimage trail on the Kii peninsula of Japan.

Teams of donors, doctors, past patients, nurses and friends have together raised more than \$500,000, which has been used directly to help patients by funding important research, accommodation grants, new equipment and technologies, and compassionate patient-care services. For many, participating in an Epworth Charity Challenge is a life-changing event — an unforgettable experience that combines international exploration with physical endurance, cultural exposure, lifelong friendships, and the opportunity to make a genuine difference to patients at a time when they are at their most vulnerable.

This year's calendar of challenges is more exciting than ever before. Each Epworth Charity Challenge is hosted by an Epworth Medical Foundation representative, and all funds raised are used to care for patients at Epworth, by supporting important services, new equipment, and innovative research.



Board President, Rod Fitzroy, Group Chief Executive, Alan Kinkade and Board members Professor Paul Douglas and Emeritus Professor Christiana Mostert on the Thailand cycling challenge.

**Guaranteeing a sustainable future for education at Epworth**

Philanthropy at Epworth is providing a sustainable future for education, research, innovation and patient support — ensuring our patients receive the best care possible today and in the future. To this end, a number of corpus funds have been established as part of our commitment to education not only today, but for generations to come.

**Capital Works**

Epworth Medical Foundation has raised \$25.5 million (\$25,564,477) towards the Epworth Richmond capital campaign and \$250,000 towards the Epworth Geelong capital campaign. Naming rights have been provided at a variety of levels through the naming of the new Epworth Richmond Lee Wing, several inpatient wards, new facilities and private rooms.

**Victor Smorgon Institute at Epworth**

The Victor Smorgon Institute at Epworth has a corpus of over \$11 million (\$11,170,804) which is used to fund professorial appointments at Epworth. These academic chairs will assist Epworth to become a leading academic and teaching hospital.

**The Epworth Research Institute**

The Epworth Research Institute has a corpus of \$9.6 million (\$9,674,571) which is used to fund research grants each year. This year a total of \$655,000 was awarded via 15 research grants ranging from \$10,000 to \$100,000 across the board, including Orthopedics, Rehabilitation, Radiation Oncology and Intensive Care.

**Educational endowment**

We have over \$8 million (\$8,221,108) invested in our educational endowment fund, which will fund 70 endowed scholarships at a total of \$330,000 this year and every year after, in perpetuity.

**Epworth Innovation Centenary Fund (EPIC)**

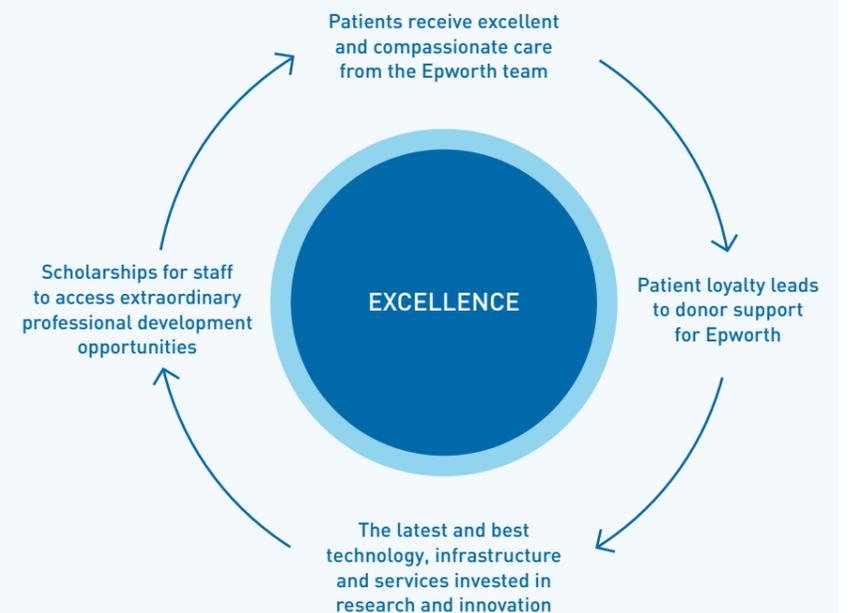
It is Epworth's intention to build the Epworth Innovation Centenary Fund (EPIC), over the next four years — a \$50 million corpus to be launched in Epworth's centennial year 2020. The \$50 million fund will include \$30 million endowment to fund innovation, \$10 million endowment to fund patient support programs and \$10 million endowment to fund doctor and registrar grants. The Epworth Board of Management has agreed to match gifts made to the EPIC fund dollar-for-dollar, up to a total of \$25 million, to help build the fund. The Epworth Medical Foundation has raised over \$4 million (\$4,092,324) to date, from major gifts and gala events.

**THE CIRCLE OF EXCELLENT CARE AND BENEFACTION**

*Connecting and growing through excellence in care*

*At Epworth, we understand that by providing the very best in care for our patients, we are developing a connection with each patient that can last a lifetime. This relationship then creates a circle of loyalty and commitment to Epworth that in turn often leads to patients becoming benefactors. Gifts are often given to provide scholarships to staff, to provide equipment or to assist in our research endeavours. This in turn leads to a more skilled and motivated workforce eager to deliver excellence in care to our patients.*

**Alan R. Kinkade**  
Group Chief Executive  
Epworth HealthCare



## HONOUR ROLL

*Epworth is deeply grateful for the care and compassion our donors show to our patients through their thoughtful generosity. Each gift truly changes the way Epworth is able to care for our patients, and enables us to go above and beyond for them.*

*Please join us in thanking those listed for the support they have given us during the past year. It is this generosity, and the cumulative impact of all our donors, that enables us to do what we do.*

### Thank you to our supporters

The Epworth Medical Foundation is grateful to the following individuals, companies, associations and trusts that have supported our work throughout the year. In addition to those listed below are those who have asked to remain anonymous.

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