



**ST VINCENT'S  
PRIVATE HOSPITAL**  
MELBOURNE

A FACILITY OF ST VINCENT'S HEALTH AUSTRALIA



**2021**

**QUALITY OF  
CARE REPORT**

*building on brilliance*



**ST VINCENT'S  
PRIVATE HOSPITAL**  
MELBOURNE

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Cover image: Joshua Xavier is a nurse on the Cardiac unit and was instrumental in developing an information reference for pacemaker and defibrillator patients. See page 21.





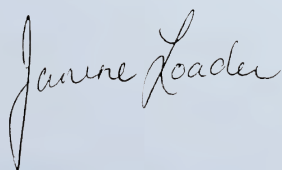
# CEO Message

AS WE REFLECT BACK ON 2021, I'D LIKE TO THANK OUR TEAM FOR IT'S CONTINUED RESILIENCE IN THE FACE OF ONGOING CHALLENGES FROM THE PANDEMIC.

COVID dominated many aspects of our lives and while 2021 did not turn out to be the year we had hoped for, the lessons learned in 2020 enabled us to begin a new "business as usual" and focus on the way forward in continuing to deliver our mission.

As so often happens in life, it is in the hardest of times that we see the most amazing things. This was true here in our workplace and I am delighted to share many of these stories with you here in this report.

I hope you enjoy reading the 2021 Quality of Care Report and look forward to the year ahead at St Vincent's Private Hospital Melbourne with the knowledge that we are ready to continue building on brilliance.



**Janine Loader**  
Regional CEO,  
St Vincent's Private Hospital Melbourne



## WHO WE ARE

# St Vincent's Health Australia

ST VINCENT'S HEALTH AUSTRALIA IS THE NATION'S LARGEST CATHOLIC NOT-FOR-PROFIT HEALTH AND AGED CARE PROVIDER.

Our services comprise 28 facilities along the East Coast of Australia including:

- 6 public hospitals
- 9 private hospitals
- 13 aged care facilities, including independent living and residential care facilities
- 4 co-located research institutes (Victor Chang Cardiac Institute, Garvan Institute of Medical Research, O'Brien Institute and St Vincent's Institute of Medical Research)

St Vincent's Health Australia operates more than:

- 2,500 hospital beds
- 1,100 aged care beds
- employs over 16,000 staff
- works with over 2,500 medical practitioners
- draws on the talents of over 1,300 generous volunteers and consumer representatives.

Each year we provide care to more than 250,000 inpatients and over a million episodes of ambulatory care through our outpatient services.

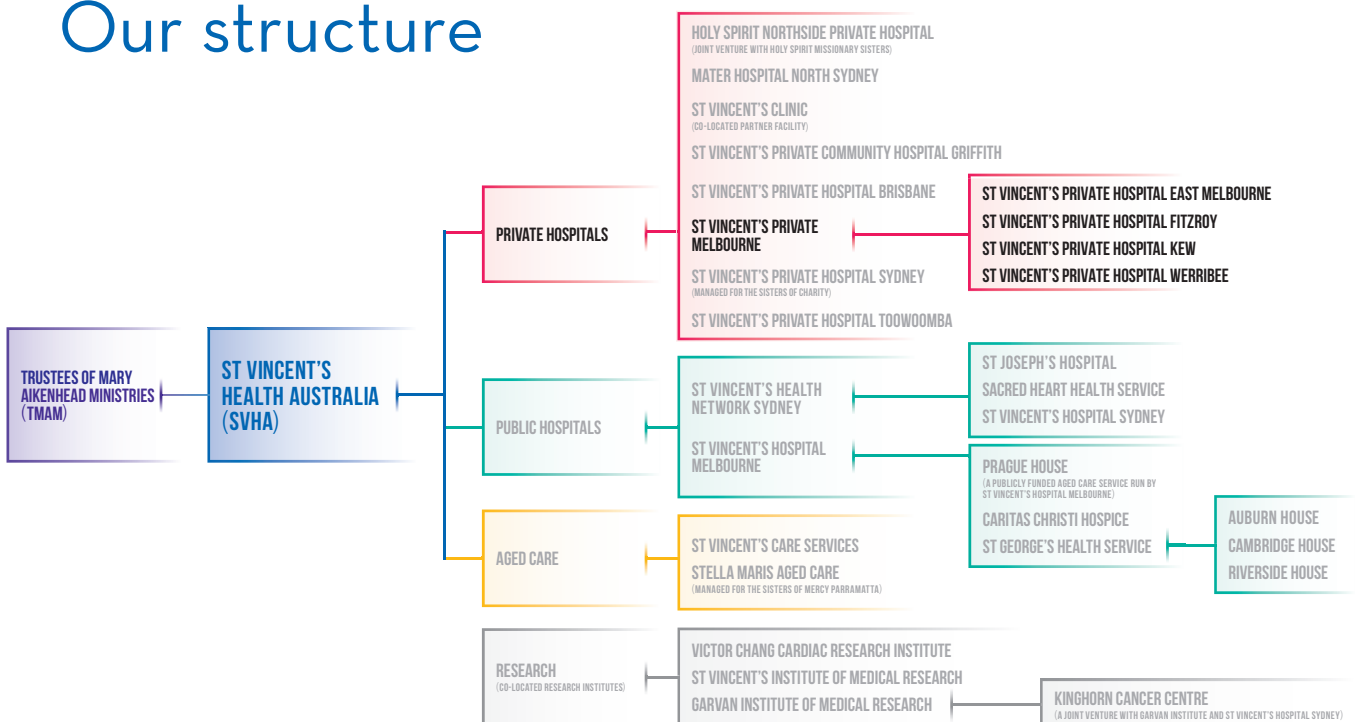
### Our Heritage

Founded in 1857 by the Sisters of Charity in Sydney, St Vincent's Health Australia provides a diverse range of health services to the community. These include acute medical and surgical services, emergency and critical care, aged and sub-acute care, diagnostics, mental health, correctional health, palliative care, residential care, research and education. St Vincent's Health Australia is committed to providing compassionate, high-quality health and aged care to the community.

### St Vincent's Private Hospital Melbourne

St Vincent's Private Hospital Melbourne is part of St Vincent's Health Australia. It operates under the direction of the Trustees of Mary Aikenhead Ministries, which was established by the Sisters of Charity of Australia on 1 July 2009, to continue their work in health, education and welfare services.

## Our structure



# St Vincent's Private Hospital Melbourne

ST VINCENT'S PRIVATE HOSPITAL MELBOURNE (SVPHM), A FACILITY OF ST VINCENT'S HEALTH AUSTRALIA, IS A NOT-FOR-PROFIT, PRIVATE, CATHOLIC HOSPITAL WHICH COMBINES THE HIGHEST QUALITY HEALTHCARE WITH MODERN FACILITIES AND THE LATEST TECHNOLOGY. SVPHM IS ONE OF MELBOURNE'S LARGEST AND BUSIEST ACUTE CARE HOSPITALS WITH SITES IN FITZROY, EAST MELBOURNE, KEW AND WERRIBEE.

Our major specialties are orthopaedics, cardiac services, obstetric services, paediatrics, reconstructive plastic surgery and neurosciences. Other specialties include: ear, nose and throat, oral and faciomaxillary surgery, oncology, haematology, gynaecology, urology, thoracics and digestive diseases.

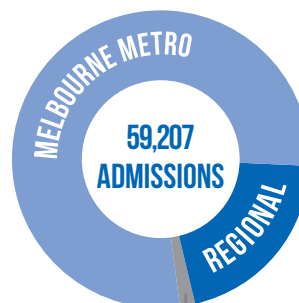
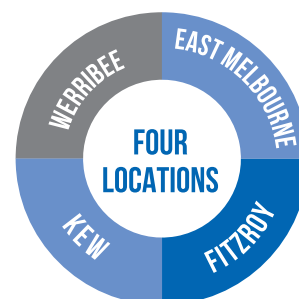
### Our History

In 1998, Mercy Private Hospital and St Vincent's Private Hospital merged. For more than 70 years, the Sisters of Charity and the Sisters of Mercy, two separate religious congregations, ran the hospitals independently. In June 2008 the merged entity acquired Vimy Private to consolidate and expand its services to the community.

The Sisters founded the hospitals to serve the sick and disadvantaged in Melbourne. Their vision was to create the most well equipped hospitals in Australia and promote the Healing Ministry of Jesus.

Today, we are St Vincent's Private Hospital Melbourne and the mission of our founding Sisters remains at the heart of our organisation. In November 2017, after identifying a need for services in the western growth corridor of Melbourne, St Vincent's Private Hospital opened a new, purpose built private hospital site in Werribee taking us to 580 beds with 298 procedural areas over four hospitals.

We build our reputation on our history of leadership in compassionate care, healing and serving people with special needs.



GEELONG & WERRIBEE

A photograph of two medical professionals, a woman and a man, in an operating room. They are wearing blue scrubs and surgical caps. The woman is holding a white object, and the man is holding a blue folder. They appear to be in a discussion. The background shows surgical lights and equipment.

	
580 BEDS	1,713 STAFF
	
39,634 OPERATIONS	2,126 BIRTHS
	
80 VOLUNTEER AND CONSUMER REPRESENTATIVES	1,817 STAFF INFLUENZA VACCINATIONS



## WHO WE ARE

# COVID-19: Another year on

2020, THE YEAR THE PANDEMIC HIT, CLOSED WITH VICTORIANS ENJOYING SOME LONG YEARNED FOR FREEDOMS AND THEN... NEWS OF AN OUTBREAK IN NSW!

Victorian officials were quick to implement 14 day quarantine requirements for anyone returning to our state from the greater Sydney, Northern beaches or central beach areas of NSW. Travel permits and other restrictions were put in place by year end and, as the number of NSW cases grew and a few Victorian cases were diagnosed, Victoria promptly closed its borders to NSW and the Premier strongly advised us against travel to our northern neighbour.

Precautionary measures to limit virus transmission within Victoria were implemented as we watched the number of cases grow in NSW. By the end of the first week of January 2021, Victoria had zero community cases. For our hospitals, vigilance continued through patient screening, preadmission COVID testing, limitations on visitors and 14 day pre-admission quarantining for patients who had attended any of the ever growing list of exposure sites.

By early February, Stage 4 lockdown restrictions were implemented across Victoria for five days (only four reasons to leave home, remaining within your 5km zone, essential worker permits, mandatory wearing of face masks). Elective surgery was suspended during this lockdown. The five day lockdown caused significant disruptions to the hospital but despite this our teams proved once again how agile they could be in the face of such challenges.

It was at this time too that the first of the COVID-19 vaccines arrived in Australia and the federal government announced a phased roll-out. This was a significant turning point in the ongoing pandemic fight and cause for celebration. Healthcare staff were amongst the high risk frontline workers included in the initial group for vaccination. Staff in Intensive Care Units were the first of our teams to be vaccinated in March 2021.

Victorians were delighted when the Premier announced the end of the five day lockdown on 17th February and this allowed some lifting of restrictions within the hospitals. Visitor restrictions dictated by the DHHS included more than a dozen rules for various patient groups and it is a credit to our concierge and ward staff that this was managed effectively.

Easter 2021 was very different to the previous year where we endured a long hard year of lockdown and on 9th April, 2021, Victoria marked the 39th day in a row where no new local cases of COVID-19 were recorded. By this stage, 400 of our staff had been vaccinated and the question on everyone's lips was whether you could change to a different vaccine for the second dose.

Mid May saw even further lifting of restrictions within the hospitals and our weekly CEO Message notes "Share food is allowed to resume provided there are facilities to ensure hand hygiene practices are attended and that utensils are used to serve." Things were looking up!



Then, less than two weeks later, in the last week of May, another “circuit breaker” lockdown of 7 days was announced. Elective surgery (except Category 1 and 2) was again suspended and no hospital visitors were permitted.

The Delta outbreak in Sydney and subsequent transmission to Victoria through interstate delivery drivers saw local case numbers reach 18. Victoria was plunged back in and out of stage 4 lockdowns from 28 May through until late October in order to fight the surge of Delta cases.

Case numbers started to rapidly increase with 120 cases, 900 active and 2 deaths recorded on 31 August and then 2292 cases on the 13th October.

By mid-September restrictions were eased slightly as the state hit 70% of first dose vaccinations. Sadly though for our football fans, we lost hosting rights for the Grand Final to Perth!

The majority of patients in hospital with COVID-19 in the first week of October

were unvaccinated (85% of patients in Victorian hospitals and a massive 98% of ICU patients were not vaccinated), a strong reminder of the efficacy of the vaccine and the important role vaccination plays in protecting our community.

On October 22nd, in accordance with the road map out, 70% of Victorians were double vaccinated and lockdown ended albeit with density restrictions, continued mask wearing and limited privileges for the unvaccinated.

During this time the Victorian Government was no longer aiming for zero cases. It determined that the vaccination program would allow Victorians, like the rest of the world, to live with COVID.

The December 2021/January 2022 surge of the Omicron variant saw daily cases numbers exceed 20,000 and so our tortuous story of the pandemic continues into another year.

SUMMARY OF LOCKDOWNS 2020 -21			
LOCKDOWN NO.	YEAR	DATES	NO. OF DAYS
Lockdown 1	2020	31 March - 31 May	62 days
Lockdown 1.5*	2020	1 July - 8 July	8 days
Lockdown 2	2020	9 July - 27 October	111 days
Lockdown 3	2021	13 - 17 February	5 days
Lockdown 4	2021	28 May - 10 June	14 days
Lockdown 5	2021	16 - 27 July	12 days
Lockdown 6	2021	5 August - 21 October	78 days

Note: Lockdown in this table refers to where Greater Melbourne was under stay at home restrictions and only essential services were operating. \*specific postcodes/public housing.





## WHO WE ARE

# COVID streaming at Kew



UNDER THE VIABILITY AGREEMENT KEW BECAME A COVID STREAMING HOSPITAL ON TWO OCCASIONS FOR LOW ACUITY CASES ACCEPTING PATIENTS FROM ALL PUBLIC HOSPITALS.

“Our COVID patient population was transferred predominately from St Vincent’s Public and The Northern Hospital,” reports Emma Saliba, General Manager/Director of Clinical Services - Kew.

Dr Tim Lightfoot volunteered to oversee the medical care of these patients. “Dr Lightfoot’s expertise in understanding the variety of COVID strains and how they impact the community was integral in caring and treating our patients”.

“The team pulled together to prepare the environment and care for these patients. What is even more remarkable” explains Emma, “is that this preparation was done in the middle of a full organisation wide accreditation survey.”

Kew was placed in the privileged position to care for COVID positive public hospital patients and Aged Care residents over two 4 week periods.

It was a fantastic team effort led by Angela Naylor (Acting NUM), Jodie Swingler (NUM), Michelle Battye and the PPE champions. The team was able to transform their surgical environment into a COVID friendly hospital within 24 hours and with the assistance of David Galea, Property and Infrastructure Manager and experts to ensure our infrastructure was safe to go.

We cared for 20 patients over this period. We learnt from East Melbourne’s care model and drive from last year. Our theatre staff stepped outside of their comfort zone to care for these patients and support their colleagues. It was a multidisciplinary approach to care and most importantly a display of living our values and mission. A great team building experience and one that is so important to our community

Dr Tim Lightfoot

## Werribee Vaccination Hub

OUR WERRIBEE TEAM RALLIED TOGETHER IN A VERY SHORT TIME TO WELCOME THE WERRIBEE VACCINATION HUB ON SITE IN SEPTEMBER 2021.

“Thomas O’Sullivan and the Allied Health Team relocated the rehab gymnasium to level 2 to facilitate this initiative and the code blue N95 response team were available to attend to any distress calls from the hub” reported Libby Fifis, General Manager/Director of Clinical Services.

The vaccination hub was able to deliver over 1300 vaccines per week over several months to the local Werribee community. “It was a rewarding partnership and we were pleased to be a part of this great opportunity to support our local community” said Libby.





# Our Mission, Vision and Values

OVER 175 YEARS AGO FIVE SISTERS OF CHARITY ENDURED A HAZARDOUS FOUR MONTH JOURNEY ACROSS THOUSANDS OF MILES OF OCEAN TO VENTURE TO AN UNKNOWN LAND CALLED AUSTRALIA. THEY WERE COMPELLED BY THE ORIGINAL VISION OF THEIR FOUNDER, MARY AIKENHEAD - TO CARE FOR THE POOR AND VULNERABLE.

This sense of serving, of purpose, of mission has continued undiluted across the decades. The love of Christ urges us to continue striving to meet these needs.

That is both our heritage and our legacy - where we have come from and where we are committed to continue heading.

It is what urges us on, calls us to continually exceed our own expectations, to be better than we thought we ever could be. That's why we call it a mission.

And mission is everything we do: from cleaning the rooms to providing cutting edge technology, from delivering highly complex surgical procedures to a meaningful conversation with a patient.

## Our Mission

As a Catholic healthcare service we bring God's love to those in need through the healing ministry of Jesus. We are especially committed to people who are poor or vulnerable.

## Our Vision

We lead through research driven, excellent and compassionate health and aged care.

## Our Values

St Vincent's Health Australia's four core values are:

## COMPASSION

Our care is an act of love. We are present and accompany people when they are most in need.

## JUSTICE

To act with courage and speak in pursuit of what is right and just.

## INTEGRITY

Ensuring our actions and decisions are transparent.

## EXCELLENCE

Our care is safe, evidence based and continually seeking to improve.



# Reconciliation is our business



ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE ARE THE OLDEST LIVING CULTURE IN THE WORLD BUT THERE IS A SIGNIFICANT GAP WITH NON-INDIGENOUS AUSTRALIANS IN LIFE EXPECTANCY AND HEALTH OUTCOMES.

Reconciliation, therefore, is core business for our hospitals and we are actively engaging the hearts and minds of our staff and patients to improve the health and wellbeing of Indigenous people in our care.

Equity, service excellence and community connection underpin the ongoing Reconciliation journey of St Vincent’s Hospital Melbourne and St Vincent’s Private Hospital Melbourne through our Reconciliation Action Plan (RAP) and commitment to Closing the Gap between Indigenous and non-Indigenous Australians within a generation.

We recognise that colonisation and past practices of governments and institutions have resulted in intergenerational trauma for many Aboriginal and Torres Strait Islander people who do not always feel welcome when accessing health services.

Reconciliation is a shared responsibility for all Australians and must go above and beyond symbolic gestures to deliver meaningful, tangible change across all aspects of society.

Our hospitals are working collaboratively to deliver the actions and targets in the St Vincent’s Health Australia Reconciliation Action Plan. The theme of Reconciliation Week 2021 - “More than a word. Reconciliation takes action.” - resonates strongly. Our hospitals are committed to addressing the needs of Aboriginal and Torres Strait Islander patients, families and staff.

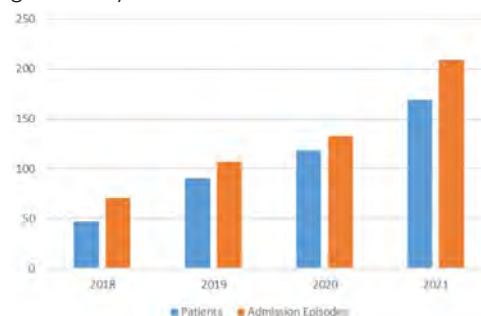
We are creating a welcoming environment, raising cultural awareness and reforming our processes to ensure culturally safe care.

Reconciliation reminds us to look compassionately at the underlying social and emotional factors that impact on health. Patient-centred care should always be culturally safe and trauma informed.

### Aboriginal and Torres Strait islander patients

Patients who would like cultural support or to speak with our Aboriginal Hospital Liaison Officer before, during or after their stay are able to have this arranged through our pre-admission team, the ward nursing staff or pastoral care.

Our strategies to provide an environment where First Nations people feel safe to identify as Aboriginal and/or Torres Strait Islander are ongoing and the number of patients continue to grow each year:



**6**  
INDIGENOUS  
STAFF MEMBERS  
(as at Dec 2021)



## Seamless career start with scholarship

JUST MONTHS INTO HER FIRST JOB AS A REGISTERED NURSE, LAUREN MIODRAGOVIC IS DELIGHTED DAILY BY HER COLLEAGUES' CONSISTENT ACTS OF KINDNESS.

"I notice all the time that the nurses are very kind to the patients. They show empathy to every patient and always check back to ensure no patient is worried or alone or afraid," Lauren says.

The supportive environment of St Vincent's Private Hospital Melbourne (SVPHM) has eased the nerves Lauren felt before she started in February and every day she says she is learning and growing in confidence and independence. "The hospital community is like family," she says.

Lauren was a recipient of the annual scholarship awarded by SVPHM to an Aboriginal and Torres Strait Islander undergraduate nursing or midwifery student at the Australian Catholic University (ACU). She studied at ACU Ballarat, where she grew up, and is a descendant of the Palawa people of Tasmania.

The scholarship has been awarded for the past 11 years, with many recipients the first in their family to go on to tertiary education. It provides funding for three years of university study and direct entry into SVPHM's Graduate Nurse Program.

For Lauren the scholarship covered the costs of expensive textbooks, a study desk, and travel and accommodation for student placements. "I highly recommend ACU students to apply for this scholarship. It's given me great support and a very good start to my nursing career," Lauren says. "It alleviated a lot of stress and I'm now able to relocate to Melbourne and start this new chapter of my life."

Lauren's first rotation in the Day Procedure Unit was followed by a stint in the Cardiac Unit. Her eyes are open wide to the many opportunities in nursing and she is interested "down the track" in specialising as a nurse practitioner.

Left: Lauren's love of nursing started early as a child. Insert: Lauren today at St Vincent's Private Hospital.



## Volunteer buddy program

When patients were unable to have family visit the hospital, they were able to request a call from one of our wonderful volunteers. "While the Volunteers weren't here on site to chat and provide company to our patients, they were still able to make contact and support them over the telephone" reports Julie Wain, Mission Integration Manager.

IF YOU ARE INTERESTED IN BECOMING A HOSPITAL VOLUNTEER, PLEASE CONTACT OUR VOLUNTEER COORDINATOR, DEANNA FINN, ON 9928 6938 OR EMAIL [deanna.finn@svha.org.au](mailto:deanna.finn@svha.org.au)

# Pastoral Services



ST VINCENT'S PRIVATE HOSPITAL MELBOURNE IS VERY FORTUNATE TO HAVE 18 PASTORAL PRACTITIONERS. "THEY HAVE TERTIARY AND POST-GRADUATE QUALIFICATIONS IN THEOLOGY, MINISTRY, ART AND MUSIC THERAPY, SPIRITUAL DIRECTION AND PASTORAL COUNSELLING" EXPLAINS PASTORAL CARE COORDINATOR, ANDREW SOMERVILLE. "THEY ARE AN INTEGRAL PART OF THE HEALTH CARE TEAM AND YOU MIGHT BE SURPRISED AT JUST HOW THEY CONTRIBUTE TO THE PATIENT EXPERIENCE."

**The Encounter:** Pastoral care practitioners are members of staff and move around the wards meeting a great diversity of people, who happen to be hospital patients, in that moment of encounter.

Without really knowing what the spiritual/pastoral carer has to offer, the vast majority of patients welcome the opportunity to have a conversation. Initially, this willingness to converse could flow from the patient's own friendliness, loneliness, courtesy, curiosity, need or grief.

"It is amazing what happens in those first few moments of the encounter between us, as strangers. The patient makes a decision about whether they want to engage and open up or maintain caution and distance.

Where the conversation goes from there is about the developing dynamic between the patient and the practitioner" explains Christine Haag, Pastoral Care Practitioner.

The pastoral care practitioner has the perception and the skill to see where the patient is and to be with them where they choose to be. Of course, the pastoral carer has the training to explore, encourage and empathise in an encounter when the patient is open to sharing their story. At other times, a courteous withdrawal is required.

There are times when other hospital staff come to pastoral carers for debriefing, emotional support or Holy Communion. Staff supporting each other, particularly during COVID 19, is very important.

**Isolation:** "We meet patients who are isolated through age, location, disability, death of loved ones, broken relationships, mental and physical ill-health. It is helpful to offer a listening ear and understanding, to allow the person to communicate and explore with another human being who cares."

The pastoral carer can assist the person to explore the internal and external resources and opportunities that may be available and perhaps to see things from a new perspective. Being truly listened to is healing and brings hope.

**Difficult Experiences:** Injury and illness can bring fear, anxiety, depression, misery. Being able to speak about the experience and associated feelings often gives relief.





Left: Andrew Somerville.

Sometimes the possibility of consulting a psychologist or social worker can be explored.

Being with a caring and non-judgmental stranger can allow patients to open up and share more deeply than is possible with their own families. The pastoral carer assists the patient to see and understand their own experience and feelings. This is validating and affirming and can be the beginning of change to a new direction.

**Spirituality and Religion:** Patients who place themselves within a religious tradition may want to talk about their beliefs and faith, their relationship with God, and their religious practice.

In this Catholic hospital, Holy Communion and familiar prayers are offered and enjoyed by many. Our Chaplain Priest can be requested for confession, anointing of the sick or the last rites before death. Whatever the patient's religious tradition, the pastoral carer honours it and can also liaise with external religious representatives.

Many patients express a spiritual perspective and a more personal relationship with the Divine, not mediated through any Church. Whatever the religious tradition and/or spiritual perspective of the pastoral carer, we are here to honour the truth of the other's experience and be a companion on their path. We are often asked to make a spontaneous prayer that meets the need of the moment.

It is never an issue if a patient says they are atheist or reject religion. We are not here to promote a particular worldview except perhaps that of respect and care for humanity.

**End of Life:** As our patients can face life-limiting illnesses and may come to hospital for their last days, pastoral care practitioners can be called on to enter the sacred space of the end of a person's life.

A person's response to the end of their life is unique and complex. Great gentleness and sensitivity is necessary to be allowed to enter and/or remain in the dying person's world. It can be a profound sharing of soul to soul, human to human, in the face of mortality and in the quest for meaning. What the patient needs and wants cannot be predicted. The patient is vulnerable and this is the time for the pastoral carer to be most flexible, open and responsive to the individual. Of course, the experience touches the pastoral carer.



Werribee: Tony Williams

"St Vincent's Private Hospital Werribee (SVPHW) attracts patients from the western region of Melbourne and provides an atmosphere of welcome and hospitality often found in smaller, local hospitals. Patients often remark about the friendliness and warmth of the staff during their stay.

Pastoral care at SVPHW can offer support to patients, families and staff across the different services that are provided including day surgery and oncology. Pastoral Care listens attentively to the needs of patients, whether it is connected to pain management or grief and loss.

Pastoral Care is at times surprising when patients so willingly show trust as they share personal issues and experiences."



Kew: Jenny Hurley

"Kew is a brilliant site to work at being a small unique hospital.

Only having one surgical ward and a day procedure unit, it feels like a boutique country hospital, welcoming and warm. Pastoral practitioners are embraced by the friendly staff.

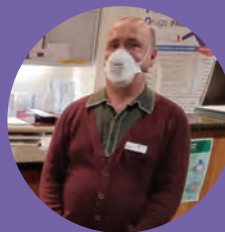
Most patients have brief admissions allowing us to support a great variety of patients, with occasional follow up visits. The depth and diversity of the visits makes it a rewarding and stimulating site to work at. Each day is completely different."



East Melbourne: Christine Haag

"It is great getting to know the people in rehabilitation. They are here for longer than many patients and seem to appreciate the companionship and talking about what is important to them.

In East Melbourne we also have oncology patients who we get to know over the course of their treatment. Our surgical patients have shorter stays and often just a single encounter with pastoral care."



Fitzroy: Greg De Vere

"There are six wards at Fitzroy Private and each ward has its own vibe.

Pastoral care staff at Fitzroy tend to look after the same wards. This is good for building relationships with patients, some of whom are here regularly, and with the staff on those floors. When other staff get to know the pastoral care staff they are more likely to make a referral to us to provide care to particular patients.

Some patients have little idea what pastoral and spiritual care can offer but offering the patient the chance to say the thing they want or need to say is the important part. The patient decides to accept the offer or not."

# Vale Moira O'Shannessy



OUR DEAR FRIEND AND COLLEAGUE MOIRA O'SHANNESSEY PASSED AWAY ON BOXING DAY 2021 AFTER A SHORT ILLNESS.

Moira was a Pastoral Carer at St Vincent's Private Melbourne for twenty-one years. She was the Pastoral Care Coordinator for several years; in recent years she relinquished that role to focus fully on the beautiful bedside care she gave to every patient.

Many of the Pastoral Care team related to her strong and kind leadership, and the wise and gentle determination she shared with many staff and patients. Moira has delivered gentle and precious care to many patients at both East Melbourne and Fitzroy. Even in her very frail days she was concerned for others.

Moira was a very devoted one-eyed Essendon supporter, spending many a Monday morning gloating a good win! Moira was also well known for sharing her clean and funny jokes with everyone.

Some of Moira's wonderful hospital legacies are Christmas related. Each year Moira would admire each department's Christmas tree, decorations, Santa, reindeers, tinsel, and very gently and firmly be heard to say to the most influential person in that department "Don't forget the Birthday Boy." Of course she was referring to Baby Jesus, and often helped acquire a nativity scene for that department to display our Catholic heritage and Christian origins alongside the colourful decorations. The other lovely Moira inspiration is the very cute Baby Jesus Ultrasound photo she acquired for the crib during Advent in the Fitzroy Foyer each year. That lovely tradition will live on!

Moira's dearest friend Sr Pat Walker was always impressed with the fact, that when it was appropriate, she beautifully promoted the Sisters of Charity with patients; especially the beginnings of the Order, the work of the early sisters, and the way the caring

ministry was carried on and carried through over the ages. She was a great advocate for our catholic origins and our Sister's heritage.

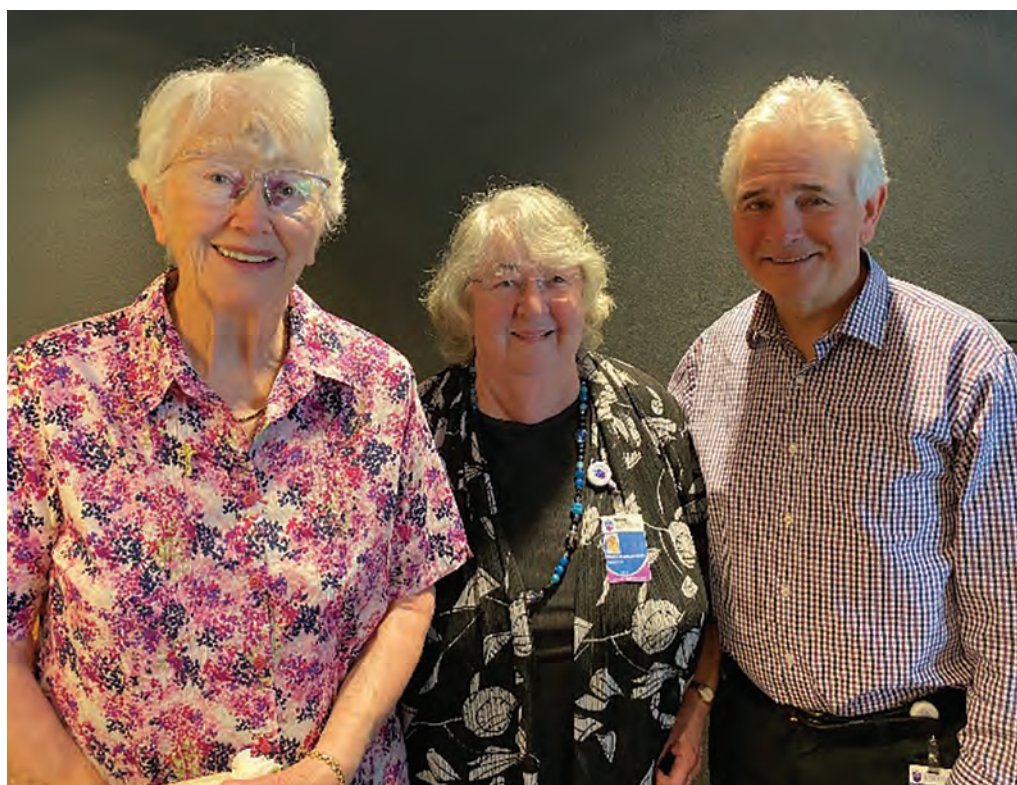
Julie Wain, Mission Integration Manager spent some quiet time with Moira in her last few days. "She was in a very calm and peaceful place. She had attended to all of her affairs, organised her own funeral, (exactly how she wanted it) and made sure she had neatly completed important tasks" reported Julie.

Moira started her working life as a Primary School Teacher and then went on to become a Pastoral Care Practitioner. She spent a lot of her time in her final weeks checking to make sure everyone was okay, like a teacher and pastoral carer would.

Moira was Mum to her three beloved sons Tim, John and Martin, and she has asked us to keep them, and her husband Joe, in our prayers.

In Moira we have lost a friend, a loyal staff member, one of our own, a recipient of the February 2016 Values-in-Practice VIP Award and a gentle wise woman. May Moira's dear soul rest in peace.

Above: Moira O'Shannessy. Below: Moira flanked by Pastoral Care colleagues Sr Pat Walker and Tony Williams.





# Congratulations Julie

WINNER OF PAT WELDON HUMANITARIAN AWARD, CHILDREN FIRST FOUNDATION

Each year, the Children First Foundation recognises the outstanding service of an individual or organisation who has gone above and beyond in their commitment to improving the lives of children in developing countries, through their work either in Australia or overseas. Julie Wain, Mission Integration Manager at St Vincent's Private Hospital Melbourne, was the 2021 recipient of this honour and awarded the Pat Weldon Humanitarian Award.

Julie works tirelessly behind the scenes to make the partnership between Children First Foundation and the hospital successful. Most of all, Julie is a passionate advocate for the Foundation. In her own words, she sees it as her role "to ensure everyone across St Vincent's Private understands the privilege and importance of the Children First Foundation partnership to the hospital's mission."

Julie is a St Vincent's trained nurse and commenced working at our East Melbourne campus (then Mercy Private) in 1982. From 1985 until 2011 she worked in the operating theatres at both East Melbourne and Fitzroy before becoming involved in a range of quality improvement projects. "Then in 2014 the opportunity arose to take on the Mission Integration Manager role" explains Julie, a role she has held since that time.

Her Mission role encompasses a broad portfolio managing the Pastoral Care Team, the Hospital Chaplaincy and Hospital Volunteer programs. She also coordinates the hospital's support of community outreach programs, one of which is Children First Foundation.

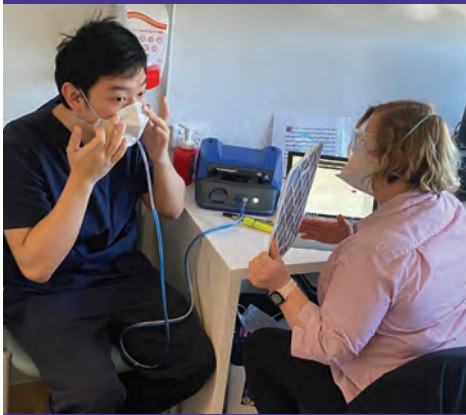
Over 100 life-changing surgeries have been undertaken pro-bono over the Foundation's 20 year relationship with SVPHM.

Julie lives and breathes the hospital's values - compassion, justice, integrity and excellence. Along with her colleagues, she is determined to do everything in her power to help transform the lives of all Children First Foundation kids who walk through the doors of our hospital.

Julie says "When the children are in hospital there is a wonderful energy amongst our teams who know that our healing mission is alive and well, with everyone making a big difference in such a practical way. Our care is a gift, the essence of why we do what we do. The children's presence is an inspiration and to witness them thriving after surgery is joyful. Some of the children are now well into their 20's and doing remarkable things in life, including nursing, often reflecting that Australia, Pat Weldon, Children First Foundation, and St Vincent's Private Hospital have changed their lives for the better. How good is that!"







## N95 mask fit testing

ST VINCENT'S PRIVATE MANDATED THE WEARING OF N95 MASKS FOR ALL STAFF WORKING IN PATIENT FACING AREAS IN ALL OF OUR HOSPITALS WHILE AIRBORNE TRANSMISSION REMAINS A THREAT.

To facilitate this mandate, a respiratory protection Fit Testing program was established to ensure staff were protected and fitted to an N95 respirator. Fit testing ensures the N95 respirator provides an adequate seal around the face to offer protection against infectious airborne particles.

"Respiratory protective equipment is required when it is not possible to eliminate the risk of exposure to transmissible airborne infections such as COVID-19" explains Infection Prevention Manager, Michelle Batty. "The N95 respirator when fitted and worn correctly provides a very effective respirator seal and without this, air and small particles leak around the edges of the mask and into the breathing zone of healthcare workers. Viruses don't bounce off the N95, they get trapped within the mask, hence the importance of careful donning and doffing."

Only respirators that meet the requirements of Australian Standards or equivalent international standards are utilised at St Vincent's Private. A range of N95 respirators is available offering variety to accommodate different facial structures.

Above: Staff member undergoing the mask fit testing process

# Accreditation

IN OCTOBER 2021 ST VINCENT'S PRIVATE HOSPITAL WELCOMED FIVE ACHS SURVEYORS FOR A FIVE DAY REVIEW OF THE ORGANISATION AGAINST NATIONAL SAFETY AND QUALITY HEALTH SERVICE STANDARDS.

"The accreditation survey had initially been scheduled for May 2020 but was cancelled due to the pandemic" reports Quality and Risk Manager, Christine Balfour. COVID-19 again threatened the survey in 2021 as Victoria plunged back into lockdown and borders closed.

"There was an enormous amount of work that had been done by our staff over the preceding years to ensure compliance with the revised National Standards and they were ready to showcase it" said Christine. "In the final weeks it was on, off and then thankfully on again.

It is usual to have interstate surveyors to avoid any conflict of interest" she explains. "For this survey the ACHS agreed to three of the interstate and regional surveyors to visit us virtually and another two were onsite. Logistically we managed the virtual visits through iPhones, iPads and tablets and, on the whole, this worked very well."

"We had very positive feedback from the surveyors about the warm welcome they received and, importantly, we were able to demonstrate our wonderful work and compliance to all standards. It was an amazing effort for all involved, especially with the challenges that surrounded us."

CEO Janine Loader said that "all staff should feel very proud of the excellent results received and commitment to patient care." She also gave special thanks to the Quality team which went above and beyond to ensure the smooth coordination of accreditation and the fabulous role they play in creating a culture of quality and safety every day.



Quality and Risk Manager,  
Christine Balfour



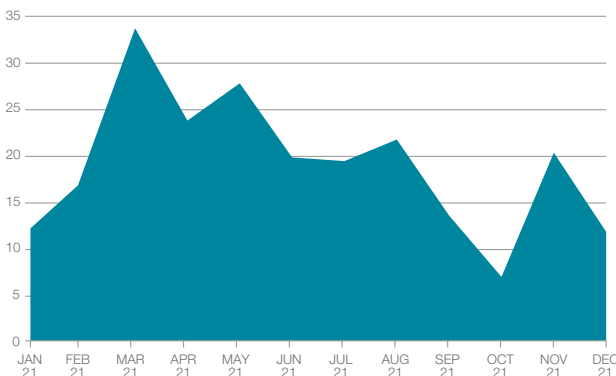
# Quality and Safety Data

ST VINCENT'S PRIVATE HOSPITAL MELBOURNE TRACKS AND REPORTS ALL ADVERSE INCIDENTS THAT OCCUR WITHIN THE FOUR FACILITIES.

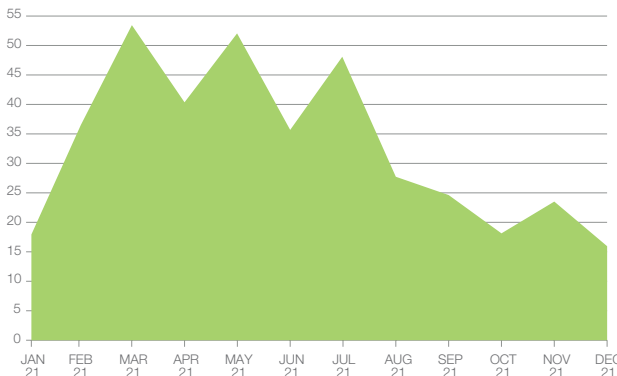
This information is used to monitor performance and assists the hospital to focus improvement efforts. Listed below are some of the key patient safety performance results for 2021. Additionally, the organisation seeks ongoing feedback from patients about their experience.

The Net Promoter Score (bottom right) tracks this and, supplemented with written feedback, is also used to highlight where we are doing well and what we can do to improve care and service for our patients.

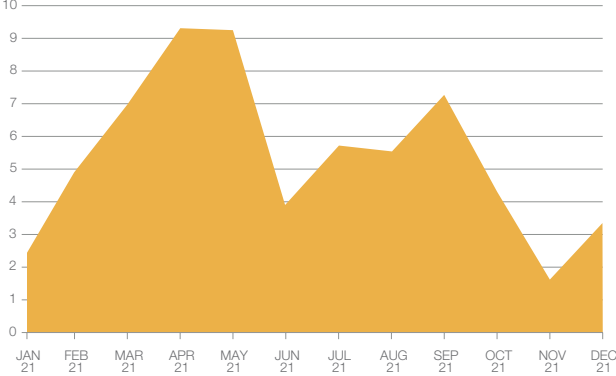
**FALLS PER 10,000 BED DAYS**



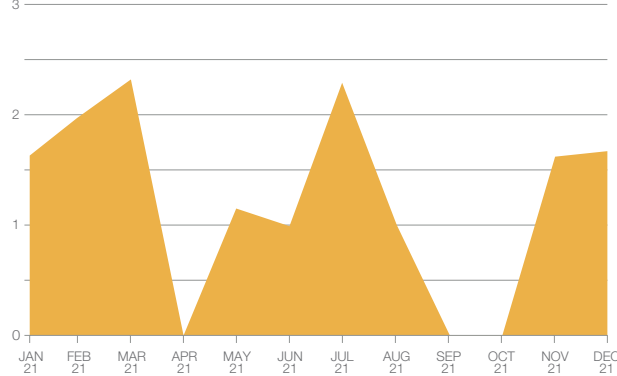
**MEDICATION INCIDENTS PER 10,000 BED DAYS**



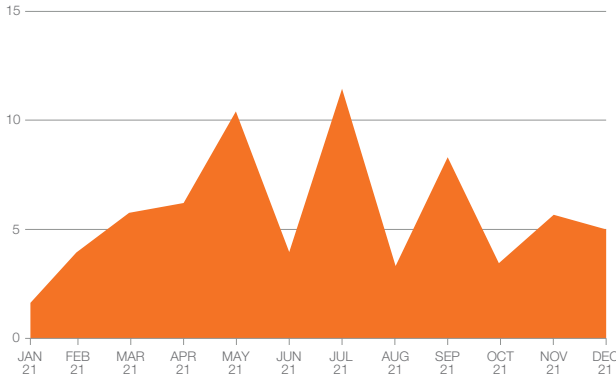
**OCCUPATIONAL EXPOSURE INJURIES – SHARPS/ NEEDLES**



**OCCUPATIONAL EXPOSURE INJURIES - SPLASH/SPRAY**



**HOSPITAL ACQUIRED PRESSURE INJURIES (STAGE 1 & 2) PER 10,000 BED DAYS**



**NET PROMOTER SCORE**



## QUALITY AND SAFETY

# Advance Care Planning

PLANNING FOR YOUR FUTURE HEALTH



Kaitlin Wilson, Quality Consultant, explains that “Advance Care Planning is the process of planning for your future health. It involves writing down your values and preferences in a document called an Advance Care Directive and/or

nominating a person to make medical decisions for you. The law refers to this person as your *Medical Treatment Decision Maker*.”

“If there comes a time when you are too unwell to speak for yourself, an **Advance Care Directive** will help guide a nominated person and your healthcare team to make the decisions that are right for you” explains Kaitlin.

In an effort to encourage patients to consider their future health, the hospital decided to develop an information pack that could be provided to those patients who would benefit from such discussion and planning. Hospital Consumer Reps assisted with development of the information brochures.

Marian Kingswood was one of several Consumer Reps who collaborated in development of the pack and noted “This is close to home for me! I have some friends who are now widowed or not married so I understand the importance of these discussions with family or friends in order for their wishes to be known when the time comes. And I have also recently been given similar documents by my GP to look at and discuss with my family.”

This process is supported by legislation (Medical Treatment Planning and Decisions Act 2016).

APRIL  
FALLS  
MONTH



THE APRIL FALLS MONTH CAMPAIGN WAS IMPLEMENTED SEVERAL YEARS AGO TO REMIND STAFF AND PATIENTS ABOUT THE RISKS OF FALLING. “IT PLAYS WITH THE APRIL FOOL’S DAY TERMINOLOGY TO CATCH PEOPLE’S ATTENTION” ADVISES TOM O’SULLIVAN, QUALITY & RISK CONSULTANT.

“The campaign highlights our processes to assess patients, particularly the elderly, for risk of falling and the variety of prevention strategies available. This year we focused on medications that may affect a patient’s fall risk.”

“Confusion, dizziness, fainting for example can be adverse effects from medications that are used to manage pain or depression” explains Tom “and it’s these side effects that then increase the risk of a fall. Relevant fall prevention strategies such as flagging the high risk status and educating the patient are actions that we can take to reduce the fall risk in such situations.”



## Room Service rolled out to all sites

St Vincent’s Private embarked on implementation of a room service dining model at the East Melbourne campus in June 2020. “This was met with overwhelmingly positive feedback” reports Carolyn Moore, Director of Support Services.

“Room service dining is the platinum standard for hospital patients as it combines restaurant quality food, hotel style accessibility and clinical excellence. Meals are served at a time that suits the patient, they arrive hot and the variety of choice is increased. It also means that we can, for example, offer all day breakfast if that’s what a patient prefers” Carolyn explains.

“Following the success at East Melbourne, the room service dining model was rolled out at our other three hospitals in Kew, Fitzroy and Werribee in 2021.”

Full service roll out at the larger Fitzroy site will be completed in 2022.



# My surgical journey

## MY SURGICAL JOURNEY

WELCOME TO ST VINCENT'S PRIVATE HOSPITAL. THIS PATHWAY WILL INFORM YOU ABOUT WHAT TO EXPECT ON YOUR SURGICAL JOURNEY TODAY.

1. **ARRIVAL TIME**  
Your surgeon will arrange your arrival time to Hospital. Waiting times will vary according to your surgeon and their theatre list, each patient may therefore have different waiting times.
  2. **WELCOME**  
Our Concierge team will welcome you at the entrance of the Hospital, check your COVID-19 screening and temperature for everyone's safety.
  3. **CLERICAL ADMISSION**  
Our customer service team will check your details are correct and collect any payments required.  
Please let our receptionist know at this time if you are unable to sit comfortably and they will alert the nursing staff to assist.
  4. **NURSING ADMISSION**  
Our nursing staff will check your details are correct and that you are wearing identification bands. The nursing admission will include taking all of your vital signs such as blood pressure, heart rate and details of your medical history.  
We will also confirm your pick-up and clear arrangements if you are a day case.
  5. **PRE-OP PREPARATION**  
You will be provided with a theatre gown and taken into a waiting bay close to your operating time. We will ensure you are warm, comfortable and given a call bell as you wait for your procedure.  
We will also safely store your luggage.
  6. **SURGICAL TEAM REVIEW**  
This is where you will be seen by your surgeon/anaesthetist and surgical nursing team.  
All your details will be checked again for your safety. If you have any questions, please ask your surgical team.
  7. **OPERATION / SURGICAL PROCEDURE**  
Being in the operating environment can be an overwhelming experience. Our professional surgical team are there to support you through this time.
  8. **RECOVERY**  
Our trained recovery team will look after you as you wake from your anaesthetic and endeavour to keep you as comfortable as possible.
  9. **POST RECOVERY**  
**IF YOU ARE LEAVING TODAY:** You will be provided with some refreshments and change into your own clothing. Your designated pick-up person will be contacted with instructions regarding pick-up time and requirements for collecting any medication from the pharmacy.  
**IF YOU ARE STAYING IN HOSPITAL:** You will be transferred to a ward room and your belongings will be delivered to you. Our nursing team will provide your post-operative care and communicate with you the stages of your ongoing recovery.
- PLEASE ASK OUR CARE TEAM FOR AN UPDATE AT ANY TIME.

Victoria Matulin, Nurse Unit Manager of our Fitzroy Perioperative Services, is always listening to her patients to understand how they experience care within the surgical unit. "We do ongoing surveys of our patients, seeking feedback about the service we provide but sometimes it's the casual conversations too that provide us with ideas, small sparks that generate improvements" reports Victoria "and this year listening to her patients generated design of a communication aid."

"Patients arrive at the hospital for surgery but aren't necessarily aware of all the steps in the process nor the expected time in each stage. We developed the My Surgical Journey tool initially as a flyer but later as a large poster to detail what they can expect step by step and approximate times along each stage of the journey."

"Waiting times are a constant source of concern for patients and so our new poster gives patients an understanding of what they can expect and how long it should take. We also highlight that waiting times can vary from surgeon to surgeon and so if someone goes in ahead of you it may be that they have a different surgeon."

"Upon arrival in the unit, we point out the poster to patients so they can familiarise themselves with what to expect" said Victoria "and we have found that this has had a significant impact. Patients appear more relaxed knowing what the next stage in the journey will be and that we haven't forgotten them."

A recent patient says "Victoria is a kind and welcoming nurse, always checking that I felt safe and warm."

## MET Call: one year on

### MET - MEDICAL EMERGENCY TEAM

Prior to July 2020, this rapid response process had only been activated 22 times reports Michelle Killick, Quality & Risk Consultant, yet incident data indicated that many more should probably have been triggered.

"Our Escalation of Care Committee reviewed the process and established that staff were often unsure when and why to call such a response. This informed a revised MET Call process which included clear criteria for staff to follow."

The new process is fully supported by Managers, Directors of Clinical Services and the Medical Director and recent data speaks for itself: 245 MET Calls in the six months since implementation of the new process in July 2020, a tenfold increase, and then a staggering 760 calls over 2021. A staff survey also indicated improved staff confidence and willingness to activate a MET call.

"This has meant a marked reduction in the number of serious patient events following a deterioration," said Michelle "a wonderful achievement."



Above: Michelle Killick with East Melbourne NUM Tess Young

# A special welcome

Aboriginal and Torres Strait Islander families requesting extra cultural support are telephoned prior to admission to discuss their care needs and then met at the front entry of our hospital upon arrival, accompanied through the admission process and on to the ward.

Late last year we welcomed a 15 year old patient and her mum to our East Melbourne site for surgery.

This young patient was glued to her phone screen, hardly raising her eyes to feign a smile at Mum's insistence. It was a busy day with a 10 minute wait in the main Ground Floor foyer. Mum and our staff member chatted away happily and the patient was in 'phone zone' texting, pretty much ignoring everything else.

A busy nurse greeted the patient, her mother and staff member upon arrival in the Kids Ward and apologised that there would be another ten minute wait for the bed to be ready. It seems there were lots of kids and their parents all being admitted at noon for 1pm theatre starts.

Getting out of the lift it became obvious that this teen-aged patient, if she were to stop looking at her phone,

might look at the 'kiddy' decorations on the ward and give a solid 15 year old eye-roll, at the indignity of being so grown up in a kiddy space.

Mum, too, looked tentatively at the ward, then at her daughter, then back at the rather beautiful and colourful underwater decorations everywhere. In October the theme for the ward's decoration was "Under the Sea", there were life sized dolphins, seals, fish, plant-life and so much amazing colour in the ward entry and all along the hallway.

The young patient looked at the decorations, put her phone aside and ran to the hanging mobiles above and all around the foyer. She turned to her mum with the most beautiful, innocent look of joy and awe and said confidently, and with genuine surprise, "Look Mum, we're Water People, this is for us."

She then spent the next ten minutes taking selfies of her and mum with each decoration, examining each piece carefully, front and back, the art detail, the colour and the life-like detail. She also spent a good deal of time chatting and sharing the photos on her phone.

It was a magic moment to see a pre-occupied teenager transform into a happy and delighted kid - the colour and vibrancy of the decorations were speaking a very special language to her. She happily chatted to her mum and hospital staff and the probably very nervous teenager became a little relaxed and more comfortable.

She had her surgery that afternoon, and went home the next morning. When we spoke to Mum at home a few days later she was so appreciative of the welcome and safe environment they encountered, with a lovely, happy reference to the "Under the Sea" welcome, agreeing that it was so special for Water People to feel so at home.

Our welcome mat on this day was not red carpet, but a canopy of coral, plankton and fish swimming through the ward. It was a reminder that visual art is another language that speaks to each of us in a very personal way. Our patient's reaction on this occasion demonstrated this in a most delightful way!

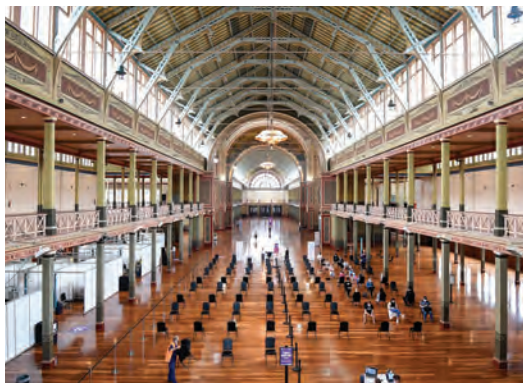




# St Vincent's Vaccination Centre at the Royal Exhibition Building

Managed by St Vincent's Hospital Melbourne, the COVID-19 Vaccination Centre at the historic Royal Exhibition Building opened in March 2021 and was one of Victoria's high-volume sites.

When its doors first opened, it saw critical worker groups in Phase 1b rolling up their sleeves as part of Australia's COVID-19 vaccine rollout. This included essential public and private sector workers in health, emergency services and transport.



# What matters to you?

“WHAT MATTERS TO YOU? WEEK IS PROMOTED GLOBALLY IN JUNE EACH YEAR TO ENCOURAGE PERSON CENTRED COMMUNICATION” EXPLAINS DONNA KELLY, DIRECTOR OF PATIENT EXPERIENCE AND SERVICE EXCELLENCE.

“It invites staff to ask what matters to the patient, to listen to the answer and use this information to offer more personalised care. Meaningful connections lead to more inclusive healthcare decisions, care strategies, personalised care and trust. There is no right or wrong answer, it is intended to help listen to the individual needs of our patients and promote patient centred communication.”

This year St Vincent’s Private Hospital developed a What Matters to You? postcard which is handed to patients at admission. Patients are asked to think about their specific needs or wishes at this particular time and to share them with nursing staff when they arrive in the ward. “The aim is to empower patients to have conversations so that our staff can plan care for patients to best meet their needs” explains Donna.



## Rated #1

For the 2nd year running SVHA Private Hospitals were ranked Number 1 in Australia for overall hospital rating by Medibank members, Overnight Patients, compared to all other private hospital groups as well as private patients in public hospitals!

“We are over the moon with the result” reports Donna Kelly, Director of Patient Experience and Service Excellence. “It’s a fantastic achievement from all staff who play a vital role in creating an exceptional experience of care, compassion, and excellence for our patients and their families.”

“In addition, SVHA Private Hospitals were ranked Number 1 in Australia for overall hospital rating by Medibank members, Same Day Patients, compared to all other private hospital groups and including private patients in public hospitals. In 2020 we were ranked No. 2 so it is wonderful to see further ongoing improvement!”



# From R.E.A.C.H. to REACH Out

Patient and Family Escalation of Care

PATIENT AND FAMILY ESCALATION PROCESSES ARE DESIGNED TO PROVIDE A SAFETY NET FOR PATIENTS AND THEIR CARERS TO COMMUNICATE UNRESOLVED CONCERNS AND RECEIVE A TIMELY RESPONSE.

“St Vincent’s Private had a process in place across its four sites” explains Diana Smith, Quality Consultant - Consumer Engagement. “We felt, however, there was room for improvement and so in 2019 put our hand up to participate in the Safer Care Victoria HEAR Me trial. This trial aimed to develop a robust and consistent 3-step escalation mechanism across all public and private hospitals in the state.”

The HEAR Me trial concluded around the time the pandemic hit in 2020 and the Department of Health decided not to pursue this state-wide initiative. “There were some components of the HEAR Me process that we felt needed finessing” reports Diana, “however, there were several lessons that we took away and used to refine our established program.”

Consumer Representative Jillian McClure worked with the project team to re-brand and re-word posters in patient rooms. The program name was changed from R.E.A.C.H. to REACH Out. “The meaning behind each letter of the old R.E.A.C.H. acronym was not seen as critical (and no one could remember it anyway!), more so was the behaviour we wanted to encourage from patients and families, i.e. to REACH Out for help.”

“We revised the poster content too so that patients and families understood what REACH Out was. We wanted them to feel confident to speak up and be clear about the 3 step process. The process is also consistent with our 3 step process in Welcome packs, pre-admission information and patient information videos about how to raise concerns or complaints. So now, rather than have once process for patient escalation and another for raising concerns, there is an easy three step process for all.”



The HEAR Me trial also provided ideas for incorporating an evaluation methodology into our process. This was done by developing a Medical Record form to document an escalation. “Our Medical Record forms are bar coded so they can be easily retrieved for auditing purposes” said Diana. The forms are completed by Hospital Coordinators responding to the Step 3 escalation and they also alert the Quality office of an event via their shift handover sheet.

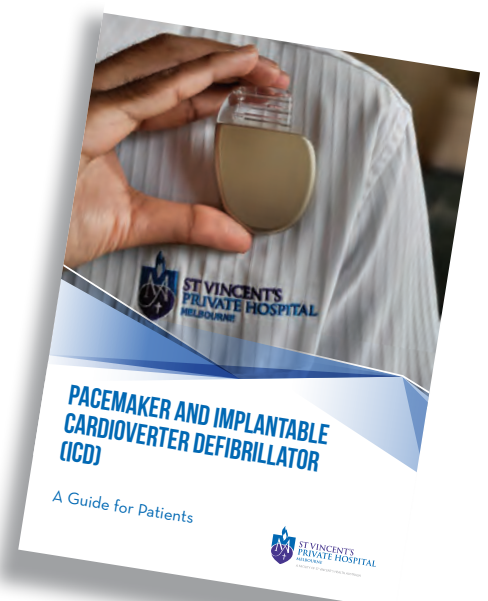
## “So I need a pacemaker.”

JOSHUA XAVIER

Nurse Joshua Xavier, noted the range of questions coming from pacemaker patients and identified a need for an informative reference tool about this procedure. He set about collecting comprehensive patient feedback about what patients undergoing insertion of a pacemaker or cardioverter defibrillator required to make them better informed and prepared.

“I found they were not only interested in how to care for themselves at home after discharge” reports Joshua “they also requested information about what the pacemakers and defibrillators do, the structure and function of the heart with one of these devices, post-operative care while in hospital as well as when they go home.”

A booklet was developed in collaboration with clinical staff and patients. “Patients have taken an active role in design of this comprehensive booklet by providing input with respect to the information being relevant, clear and concise and with appropriate images. It was also important for them that we used positive language so patients felt reassured and confident when reading about what to expect” Joshua proudly reports.





# St V's is in my DNA



“ST V'S IS IN MY DNA”. THAT'S WHAT CONSUMER REPRESENTATIVE ANGELA GRISS SAID IN 2014 TO THEN CEO, IAN GRISOLD, WHEN HE ASKED WHY SHE WAS INTERESTED IN BECOMING A CONSUMER REPRESENTATIVE FOR ST VINCENT'S PRIVATE HOSPITAL.

I guess my St V's story began when I was born in East Melbourne at St Vincent's Maternity Hospital, across the road from the current St Vincent's Private Fitzroy in Victoria Parade.

My mother had graduated as a nurse at St Vincent's in 1944. As a very young child I remember being taken regularly by my mum into the hospital to visit Sr. Cephas with whom she had worked in the X-ray department. I recall that she had a very large black cat, probably the reason why to this day I am not fond of cats despite the fact that they seem to like me.

I commenced my training in 1963 and continued working at the hospital until my marriage to Charles in 1968. I returned for a few months after that to work in St. Angela's Ward (now no longer) with Sr. Berchmans. This was in the early days of open heart surgery.

From there I went to Caritas Christi where my Gran was a patient and where I had the opportunity to work alongside my mother, until the birth of our first child. In early 1972, when he was a few months old, I was interviewed for a Friday night position at what was a fairly new private hospital, St Vincent's Private, next door to the public hospital in Fitzroy. I was successful and Sr Fabian asked me to act as the Friday Night Supervisor whilst also working in charge of a ward at the same time.

It wasn't really an onerous task in those days and mainly consisted of gathering ward reports and drafting a full report ready for Sr. Fabian bright and early on Saturday morning. In 1977 I returned again to the public for Friday night duty which was colloquially known as the 'Friday Night Mother's Club'.

My sister commenced her training in 1974, but that is not the end of the family connection with St V's. My husband Charles became a member of the SVPH Board in the late 1980's in the time of Sisters Zita Cloonan and Maureen Walters and when Mr John Clareborough was Medical Director. He later became a member of the St V's public hospital Board, St Vincent's Institute Board and, eventually, the St Vincent's Health Australia national Board. In some 20 years in the service of St Vincent's Health, Charles admired very much the work of the Sisters of Charity.

The most recent younger generation family connection with St V's is our son Michael who has been working in Environmental Services at the public hospital for over 20 years.

The last 13 years of my working life were spent at Vimy House Kew, which of course is now St Vincent's Private Hospital Kew, a campus of St Vincent's Private Melbourne. Back then, there were many St V's trained nurses working there as the Director of

Nursing had also trained at St V's and was always happy to hire St V's girls.

During all of these years I did stints as a member of the St V's Graduate Nurses Association, now known as the St Vincent's Alumni. The first was 11 years from the time I graduated until just before the birth of our first child. It was 1966 Sr. Augustine, the Nurses' Home Sister, cornered me and said, "the Association needs someone young like you". I joined and was the baby amongst women of my mother's age and older, continuing until 1977 when our third baby arrived. The second stint was 12 years from 2010 until just recently when I resigned, having been Treasurer for 9 years.

Moving forward to more current times, my friend and former neighbour, Jillian McClure encouraged me to become a volunteer at SVHM, the public. I had had a previous poor experience (elsewhere) as a volunteer so it took a bit of convincing! Jillian however was very persuasive and I still volunteer as a Consumer Rep at St V's Private.

After meeting with Diana Smith, Quality Consultant, I agreed to start as a Consumer Representative in mid-2014 on the Standard 4 Medication Safety Committee. Recently I have also taken on the Consumer Rep role for Standard 7 Blood Management.

Top: Angela Griss in 2022. Following page (top): Angela as a graduate nurse; (bottom) Angela with husband Charles and son Michael.





I feel that as a nurse and a consumer I can look at issues from both sides of the fence so to speak. I am also not afraid to ask questions, voice my opinion or make suggestions. Some examples of my involvements that come to mind include:

- Input into production of an Analgesics brochure for patients and suggested changes to similar brochure used by the new Pharmacy provider.
- Very early on in my Committee role, I was interviewed during an Accreditation survey and asked about what I thought could improve the effectiveness and quality outcomes of the Committee. I had for some time been concerned that there was not a doctor present at the Medication Safety meetings. This feedback was taken on board shortly afterwards and I feel the doctor makes a great contribution to the work and decisions of the committee.
- After a recent inpatient episode, I provided feedback regarding greater take home information for Day Procedure patients particularly in relation to the timing and type of analgesics in theatre and PACU making for the patients ability to make an informed decision about analgesics taken at home. This was promptly addressed.
- I completed a three day course conducted by Safer Care Victoria on Adverse Patient Safety Events. I have subsequently participated as a Consumer Representative on a Root Cause Analysis review of a serious patient incident and the course material assisted me to participate effectively.

I have been a “dragon” over the years (a term I’ve given myself I might add) regarding the need for change to the prescribing of opioids, high risk pain medicines, in particular the quantity dispensed to a patient on discharge. Last year I participated as a consumer in a survey by the Australian Commission on Safety and Quality in Health Care in the lead up to their development of the Opioid Analgesic Stewardship in Acute Pain Clinical Standard. The standard has now been released and, while I know it will take some time for it to be fully implemented, I am pleased to see this long overdue change.

During the pandemic and subsequent lockdowns leading to online meetings, I didn’t have any difficulty participating apart from minor stress caused by my limited I.T. skills. It will be nice to meet in person again sometime in the future as there are many new members on the committee that I have only ever met via the computer screen.

There were many occasions when Charles and I were involved in or attended functions associated with both our connection to and work at St V’s and Charles’ career at the ANZ Bank and in the accountancy profession. Whilst some of that was ‘part of the job’ so to speak, there were also many pleasurable opportunities for both of us to enjoy, including quite a lot of overseas travel. We are fortunate to have seen quite a lot of the world.

As for the other parts of my life, I also worked hard in what I call the ‘unpaid workforce’ (as have all mothers at some stage) and am proud to have three lovely children and now seven grandchildren. During their primary school years, I served on the schools Education Board as both secretary and president. I am also actively involved in a Church Family Group where we have made some good friends and with whom we have enjoyed some great times (and still do).

The Sisters of Charity have been, and continues to be, a great direct and indirect part of my life and that of my family. I think that we have all benefited from that.

ANGELA GRISS





# Triple the joy

IN MARCH WE CELEBRATED MULTIPLE BIRTH AWARENESS WEEK, AN ANNUAL CAMPAIGN HIGHLIGHTING THE UNIQUE NEEDS OF MULTIPLES AND THEIR PARENTS.

Late last year Luke and Alessandra welcomed triplets Evie, Ruby and Ella here at St Vincent's Private under the care of Obstetrician Dr Vanessa King. They kindly shared their multiple birth story.

"Triplets are not very common at all" explains Dr King, "about 1 in 9000 births. Alessandra had a previous delivery with me, she has a little boy, and it was a pretty exciting occasion when she came for her first visit in this pregnancy. I put the scanner on her tummy and could see there was certainly more than one."

Alessandra recalls that moment "there were two, then Vanessa scrolled further across and there were three. It was mind-blowing and took a long time to sink in. The scanner showed the twin girls that looked like they were going to be identical and a third separate baby." Dr King explains "it meant that Alessandra ovulated two eggs which both fertilised and then one of those split."

Dad Luke reports how he "got the phone call that day from Vanessa and Alessandra and triplets was the last thing I thought they were going to say. They said we've got something to tell you... and I jumped in and said what is it? Is everything ok? And then they

told me there were three babies. My reaction was you're kidding!"

Reflecting back, Alessandra says "the pregnancy was quite smooth considering what could have happened, I was very lucky in that regard. Obviously I got a lot bigger, a lot quicker. It was hard over COVID not being able to see everybody but the silver lining was that I got to rest a lot more because there was nowhere to go and no one to see. It was definitely difficult not to be able to share ultrasounds and doctor's appointments with Luke as I had to attend them alone." Dr King explained that "growth of the twin girls was dropping off a little bit so we brought forward the caesarean. I had checked with the Paediatrician to make sure he was happy to deliver at St Vincent's Private and we met the criteria on ultrasound and gestation."

Luke told how they were both pretty calm on the day, particularly Alessandra who he described "as amazing. When it happened, it happened really quickly and I didn't know where to look to be honest. There was one in front of me, then another. Everything was happening all at once, it was astounding." Alessandra adds "It all went very smoothly and was planned down to a tee, very different to a natural delivery."



"The fantastic thing about having the triplets at St Vincent's rather than a major, bigger hospital Neonatal Intensive Care Unit or Special Care" reports Dr King, "is that St Vincent's is very family orientated and it feels a little more relaxed than some other places might. It allows for greater bonding and friendship between the nurses looking after the babies in Special Care."

Luke adds "it was great that the babies were able to spend time in Special Care at St Vincent's to grow bigger and get into a routine. I loved watching the girls graduate so to speak each week, for example, from nasogastric tube to then feeding out of a bottle and we've been able to come in at any time. I've taken photos every day to see how they have progressed along."

Luke and Alessandra were excited to take the babies home with fingers crossed that lockdown was ending so they could finally introduce them to family and friends.







## Farewell Therese Sherrin

FROM NURSE TO CONSUMER REP

IN AUGUST WE CELEBRATED THE AMAZING NURSING CAREER OF THERESE SHERRIN WHOSE TIME AT SVPHM SPANNED MOST OF HER WORKING LIFE. SHE HAS BEEN A MAINSTAY ON THE 7TH FLOOR, STARTING OUT IN THE ORTHOPAEDIC UNIT THEN TRANSITIONING TO COLORECTAL AND GENERAL SURGERY.

Therese says she has met the most lovely patients and staff "I am very proud to have worked at SVPHM, it's been like another family. Everyone has been lovely and I am sad to be leaving - but also excited."

Upon hearing about Therese's retirement, one patient commented "My husband was one of those lucky patients who got to experience your amazing and professional care. You also took the time to reassure me that he would be okay. Thank you so much, I will never forget your wonderful kindness. You truly are a gift to the world."

When Therese set off to settle into retirement, such was her commitment to patient care that she offered to continue her involvement with St Vincent's Private as a Consumer Representative. "A house move to the Surf Coast did not

even sway her resolve to end ties with St V's" laughs Diana Smith, Quality Manager - Consumer Engagement.

"Therese is the type of person that is always trying to improve the services and care provided to patients" explains Diana. "She joined that Partnering with Consumers Committee in 2019 but prior to her formal membership would often seek feedback or advice from the Consumer Representatives when assisting her Manager or ward team to improve patient care."

Diana adds "Therese has a quiet manner that endears her to all she has contact with. It's a lovely mix of care, humour and empathy. We are so very lucky to have her continue on as a Consumer Representative."

## Leading the way

OUR NURSE UNIT MANAGER (NUM) STEVEN HOMANN, LEADS THE COLORECTAL, GENERAL SURGERY AND GYNAECOLOGY WARD AT ST VINCENT'S PRIVATE FITZROY AND, ON INTERNATIONAL MEN'S DAY IN 2021, WAS A WONDERFUL EXAMPLE TO HIGHLIGHT THE POSITIVE VALUE MEN BRING TO THE WORLD, FAMILIES AND COMMUNITIES.

Steven has worked across the organisation for more than 16 years. He started when he was 18 at St Vincent's Private Hospital East Melbourne as an enrolled nurse (EN) on the ENT, urology and paediatric wards and said he "loved it over there".

Steven subsequently transferred across to Fitzroy and has worked his way up to Nurse Unit Manager over the past 15 years.

Providing insight in to being a male nurse, he says "There were only two male nurses back when I started but now there are about seven, so we are turning the tide.

There are a lot more men coming into nursing these days, which is great!

"I think it's nice to have a mix of genders. We are certainly surrounded by great women here, and they have taught me a lot. My Mum was a nurse, so I had a bit of an idea what I was getting myself in to.

It's nice to be a point of difference though, as sometimes a patient might want to talk to a male nurse. When I was 18 it did raise some eyebrows but in 2021 it's not a thing anymore to surprise people that there are male nurses.



Working here is never dull. I know all the faces and have been trained by the best in the industry. It doesn't matter what department you head to, you know someone, and you see new faces and are supported through each change.

I maybe have another 42 years here before I get to retire, it depends on how long my kids will live at home for and going by today's standards, I could have them until they are 40!" said Steven.

## INNOVATION AND EDUCATION

# Fitzroy redevelopment plans

ONSITE WORKS COMMENCED ON A NEW 12 STOREY TOWER AT THE FITZROY CAMPUS IN LATE 2021.

The tower is adjacent to the current hospital on the corner of Victoria Parade and Brunswick Street and will feature an additional four state-of-the-art operating theatres, all equipped to deliver the latest techniques in robotic and image-guided surgery: a new intensive care unit; new day oncology service; new radiology services, which will support single-visit diagnosis, assessment and treatment, new birthing suites and a new special care nursery, among other upgrades.

An interesting aspect of the pre-build works was an assessment to provide due diligence advice regarding existing heritage listings and the potential of the site to contain subsurface archaeological deposits.



### Birds Eye View

Catherine Tisdale, one of our long stay patients, had a bird's eye view of the pre-build excavation works from her inpatient room on the 6th floor and was keen to know what was going on.

Her physician, Jonathon Darby, arranged a tour once excavation and assessment works were completed. "Cath has been on such a challenging journey and the team on 6th floor had embraced her as a part of the family. She really appreciated an opportunity to learn more about the dig site and this gave her an outlet to think about and reflect on. She is such a lovely person."

Catherine was a school gym teacher when in 2007 a heavy weight landed on her left (dominant) hand. "It exploded like a tomato" she explains. "Reconstruction efforts were made but I developed a wound that wouldn't heal. It was a bacterial infection that led to my thumb and finger being amputated. Over time the infection spread up my arm necessitating a below elbow amputation and then eventually the full arm."

"I've spent a lot of time in St Vincent's Private Fitzroy either for surgery or infusions and the archaeological dig below my window has been very interesting to watch."

Catherine explained that whilst in hospital for her accident, she was diagnosed as coeliac. "I have no symptoms currently but have commenced a coeliac diet as a preventative measure. Fitzroy only had one gluten free breakfast cereal option, cornflakes, so I gave some feedback. This resulted in a meeting with the Food Services Manager who added Weetbix to the breakfast offerings for me."

Since then, a la carte room service dining has been introduced at all of our hospitals providing a broader range of gluten free options for our coeliac patients.

We wish Catherine well on her health care journey.



# New technology with a personal touch



Computer systems and new technologies bring a myriad of benefits to all aspects of our daily lives. Take our eAdmission system for example, instead of filling in pages of forms prior to your hospital admission and relying on an efficient postal service to deliver it in a timely manner, the eAdmission system allows patients to complete their registration and pre-admission information via an online portal.

This has the added benefit of being accessible for future admissions where the previously entered information can be called up, reviewed and only updated as required. No need to enter the entire data set again! Sounds pretty good doesn't it.

For many patients this system works well. For some though, a computer, information systems and navigating the language of the health system generally can be daunting. That's where our Pre-admission Help Desk comes in. Patients without computers or who struggle with them need not worry. They can simply call the Help desk for assistance either to help them through the process or complete it for them.

Neurosurgical patient Mr Richard Young is one patient who turned to the Help Desk for assistance and he wrote to tell us about his experience. "Today I called St Vincent's Private pre bookings. I was attended to by Mel who restored my faith in customer service. Mel clearly understands what the public needs and is not frightened to use her initiative to simplify the process. Her phone manner is beyond reproach and she makes the customer feel as though the stupid questions that are asked are treated with respect. She obviously has the innate ability to understand



I struggle with computers so she just pleasantly took over and resolved the matters in no time. Mel turned what could have been a stressful and uneasy situation into an absolutely pleasurable experience. Being on the front line Mel would be one of the most valuable assets in the organization by resolving problems before they emerge. Mel is clearly providing a service way above world's best practice and I thank her for making my interaction an absolute joy."

Above (left): Patient Richard Young; (right) Mel Simkin.



## The Silver Knitters

Margaret, Carol, Lois, Cherie, Sue, Pat and Toni (who is in her 90's!) lovingly and skilfully hand make a beautiful assortment of soft toys, given out to some of our smallest patients as cuddle buddies and take home momentos in the Paediatrics ward at East Melbourne.

Previously meeting fortnightly to make the goodies, COVID and the challenges it brings has not stopped these amazing women, with them now independently crafting their beautiful creations and individually bagging them for hygiene and safety.

Providing all of their own wool, wadding, bags, time, energy and effort to the cause, the ladies say they find it extremely rewarding and fulfilling knowing they have bought a smile to a small face after surgery and given back to the community in this special way.

"We feel truly blessed to have the Silver Knitters as part of our community, they are an incredibly gifted group of ladies" reports Jenny Gozdzik, General Manager/Director of Clinical Services East Melbourne "and cannot thank them enough for the selfless contribution they make."

# St Vincent's Awards 2021



**EVEN WHEN YOU ARE THE BEST, YOU DESIRE TO BE MORE...TO GO BEYOND” Mary Aikenhead**

**Congratulations East Melbourne:**

The team at East Melbourne won the **SVHA’s Innovation and Excellence Award** for **“Team Excellence”** along with the **“People’s Choice Award”** for provision of care to relocated Aged Care residents. Fifty six residents were transferred to St Vincent’s Private East Melbourne hospital for care during the peak of the COVID-19 outbreak in 2020 and the award recognises the role East Melbourne staff played in the supporting the community during this time.

Jenny Gozdzik, General Manager/Director of Clinical Services at East Melbourne said the awards were a “true testament to the high quality, compassionate and excellent care our full team of nursing, medical, ancillary, allied health, infection prevention, environmental services, food services and other support staff were able to offer, it is a credit to our

whole team, especially those managers who really stepped up and out of their comfort zone during such a challenging time. I’m so proud to see this recognised nationally. Congratulations to you all!”

**Congratulations Quality and Risk:**

The Quality and Risk team was recognised with the **“Digital, Technology and Sustainability Finalist Award”** for their hard work on locally designing and developing a dashboard which displays data in real time to capture more than 30 quality and safety indicators.

Quality and Risk Manager, Christine Balfour acknowledged the work of her team in developing the dashboard and particularly Taissa Usatoff (right) for her passion in leading the project.



**Slade Pharmacy at St Vincent's Private Melbourne**

The Slade Pharmacy group was welcomed into the SVPHM family in November 2021. Slade has over 40 years of experience in hospital pharmacy services and is committed to delivering exceptional pharmacy care for our patients.



**The expertise hospitals rely on**



# Supporting the workforce transition from aged care to acute

WORKFORCE SHORTAGES ACROSS ALL SECTORS HAS BEEN ANOTHER CASUALTY OF THE PANDEMIC.

“Within health” explains Education Consultant, Julia Hill, “these shortages have become critical and beginning to impact the effective management of our service.”

“Vaccination clinics, COVID testing centres and tracing roles have attracted staff away from hospital based employment. There has been a lot of movement of staff over the last two years as health workers have become understandably burnt out at the challenges faced.”

“We are not unique in this predicament, the workforce issue is widespread” reports Julia. “What is important to us though is that we are able to continue to provide quality and safe care.”

“Prior to the pandemic St Vincent’s Private had expanded opportunities for Enrolled Nurse (EN) positions. Julia explains that an EN completes an 18 month Diploma of Nursing qualification as opposed to a Registered Nurse who does a three year degree.

“EN’s work beside RN’s within their legal scope of practice and we have an EN Program for new graduates to support and mentor them in their first nursing role and an acute care transition for experienced EN’s providing them with the opportunity to gain acute care skills.”

“A number of Enrolled Nurse (EN) staff recruited in recent times have come from the Aged Care sector into our acute care transition program” she discusses. “This cohort has a mature approach as it is not their first nursing role. With basic nursing skills, some life experience and professional resilience, we are very happy to welcome them to St Vincent’s Private and support their transition from aged care with a similar support process that we provide for the new graduates” explains Julia.

“Due to the success of the acute care transition program for EN’s we have just welcomed our first cohort of RN’s into our acute care transition program and



will run a combined EN and RN acute care transition program as well as the graduate programs as a way to build a diverse but sustainable workforce.”

“The support we provide enhances their confidence as they begin nursing in the acute health sector alongside RNs. It is empowering for them and provides a degree of clinical governance at an organisational level.”

Above: Julia Hill



## Honouring our Veterans

The hospital continued its ANZAC and Remembrance Day traditions of honouring the 1.5 million service men and women who have served our country in all conflicts, wars and peacekeeping operations by serving Anzac biscuits to all inpatients with their morning cuppa.

Our General Managers at each site visit Veteran inpatients on these days to deliver a hospital show bag and thank them for their special sacrifice.

# Rose to the occasion



ROSE HIBBERD, DEPUTY SUPPLY MANAGER, IS A WELL-KNOWN HOSPITAL IDENTITY WHO CAME TO US FROM MILDURA 21 YEARS AGO WHEN SHE MOVED TO MELBOURNE WITH HER HUSBAND AND YOUNG DAUGHTER.

“I had worked as a Ward Clerk in the children’s unit at Mildura Base Hospital for 19 years. My whole life was in Mildura, family and friends, so I remember feeling quite isolated when we relocated” explains Rose.

“I thought back then that I would eventually like to work at the Royal Children’s Hospital as I had loved working in the children’s ward in Mildura. The job at St Vincent’s was the first one I applied for and 21 years later I’m still here.”

“I started at St Vincent’s Private as Ward Clerk in the Intensive Care Unit (ICU). Ward Clerking was what I knew and probably the reason I got the job. In addition to the general clerical duties there, I took it upon myself to contact companies directly to source products the ICU unit required.

This caught the attention of the Supply Manager at the time who later gave me the opportunity to move into the Supply role.”

The pandemic presented challenges to Supply services everywhere. “Luckily the issues we faced with supply shortages, especially for key items like masks, hand gel and other PPE, were supported by the national procurement effort of St Vincent’s Health Australia” explains Rose.

“Personally I was challenged during the pandemic too. I put on weight in 2020 and had some health issues but in 2021 I decided I needed to do something about it. I used my time in lockdown to lose weight and get fit. I’ve lost a total of 45 kilograms and my health has improved drastically.”

A strong work ethic and loyalty are qualities instilled in Rose. “I really enjoy the work I do here” she says “and it is rewarding to see the younger team members learning and growing in their roles too.”

“After twenty one years at St Vincent’s Private, fifteen of those in the Supply Department, I have never felt the need to look for anything else. I suppose I’m well and truly part of the furniture.”

Above: Rose Hibberd, Deputy Supply Manager

## Prostate cancer Specialist Nurses

IN MARCH THIS YEAR, ST VINCENT’S PRIVATE HOSPITAL, PROUDLY SUPPORTED BY THE PROSTATE CANCER FOUNDATION OF AUSTRALIA, ANNOUNCED THE INTRODUCTION OF DEDICATED PROSTATE CANCER SPECIALIST NURSES, MOLLY AND GAIL.

For the 19,000 men diagnosed each year in Australia, the complex treatment pathways, potential long term side effects and treatment decisions can cause significant anxiety and distress for both patients and their families. From support at diagnosis to assisting patients in navigating through the complex healthcare system, our Prostate Care Specialist Nurses will be there to help.

Molly and Gail bring vast experience, knowledge and passion to their roles and are enthusiastic to support our prostate cancer patients and their families from diagnosis and throughout their care journey.





# Welcome ROSA: the Robotic Surgical Assistant

IN MAY 2021 ST VINCENT'S PRIVATE KEW WAS DELIGHTED TO WELCOME THEIR VERY OWN ROBOTIC SURGICAL ASSISTANT - OR ROSA FOR SHORT - TO DELIVER CUTTING EDGE TECHNOLOGY IN TOTAL KNEE ARTHROPLASTY.

Collecting information before and during surgery, ROSA works closely with the surgical team to create a more personalised approach to complex surgery by first identifying each patient's unique anatomy and then tailoring placement of the implant - the overall aim being improved patient comfort, recovery and satisfaction.

Purchase of the ROSA for Kew is part of St Vincent's Private's ongoing commitment to providing the most up-to-date technology and equipment, alongside first class compassionate, highly skilled and excellent care.

Mr Hayden Morris, Orthopaedic Surgeon, who has been working closely with ROSA explains: "ROSA is a new technology assisting the surgeon to achieve one of many complex factors in surgery - that being, the accuracy and individualised alignment of implanting the prosthesis. This is just one of many factors which contributes to good knee surgery." Reflecting on this new technology, Mr Morris commented that he was "looking forward to the next step in improving patients outcome's in knee replacement surgery with robotically assisted prosthetic implantation."



# Bridging the clinical and digital environments

AFTER MORE THAN TWO DECADES AT ST VINCENT'S PRIVATE, DAVE HUSTLER, IS A FAMILIAR FACE ACROSS ALL FOUR SITES. "I STARTED AT ST V'S 21 YEARS AGO AS AN ENROLLED NURSE AT EAST MELBOURNE ON THE 4TH FLOOR WHICH DID A LOT OF ENT AND UROLOGY" DAVE EXPLAINS.

"I was part of a pilot program between Deakin University and St Vincent's and Mercy Private Hospital, as we were known then, to complete a rapid Enrolled Nurse (EN) to Registered Nurse (RN) conversion.

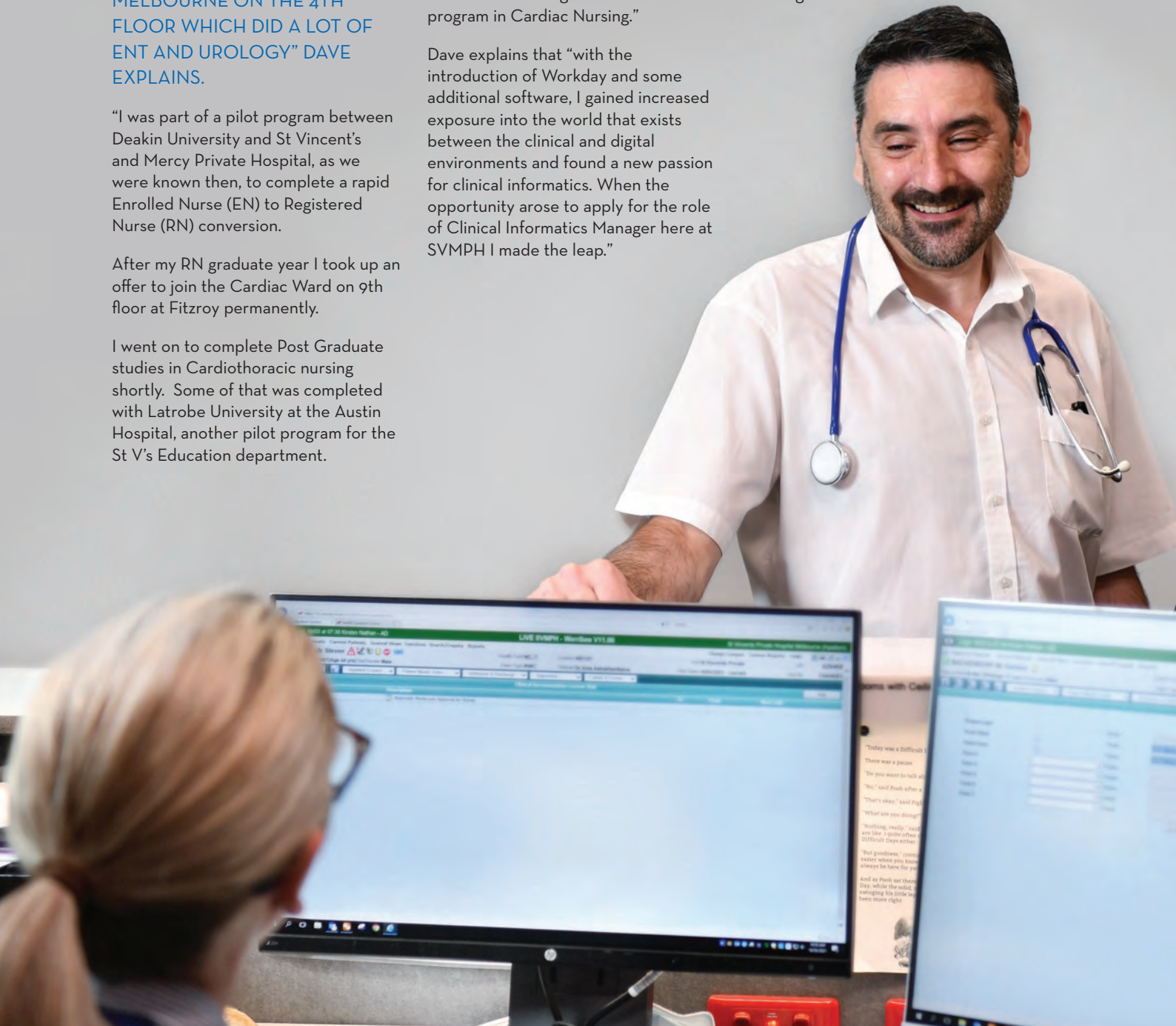
After my RN graduate year I took up an offer to join the Cardiac Ward on 9th floor at Fitzroy permanently.

I went on to complete Post Graduate studies in Cardiothoracic nursing shortly. Some of that was completed with Latrobe University at the Austin Hospital, another pilot program for the St V's Education department.

Over the years I discovered a new passion for education and sharing knowledge. I accepted a part-time maternity relief position as Clinical Resource Nurse on the Cardiac Ward. This expanded over the years to a part-time Clinical Coach role and then a full-time position as the Education Consultant running the Post Graduate program in Cardiac Nursing."

Dave explains that "with the introduction of Workday and some additional software, I gained increased exposure into the world that exists between the clinical and digital environments and found a new passion for clinical informatics. When the opportunity arose to apply for the role of Clinical Informatics Manager here at SVMPH I made the leap."

"Currently I'm primarily working in conjunction with St Vincent's Health Australia's Support Services, the Digital and Technology department and all of our incredible nurses to have St V's Private uploading a digital discharge summary to My Health Record and to G.P.'s for all patients who are discharged from our care."





# Keeping in touch on social media



Join St Vincent's Private Hospital Melbourne on Facebook:  
 @stvincentsprivate  
 @stvincentsprivatebaby  
 @stvincentsprivatewerribee



Find us on Instagram:  
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If you are sharing pictures with us use #stvincentsprivate or #stvincentsprivatebaby or #stvincentskids



Find us on Twitter at @SVPHMelb



Find us on YouTube:  
 St Vincent's Private Hospital Melbourne

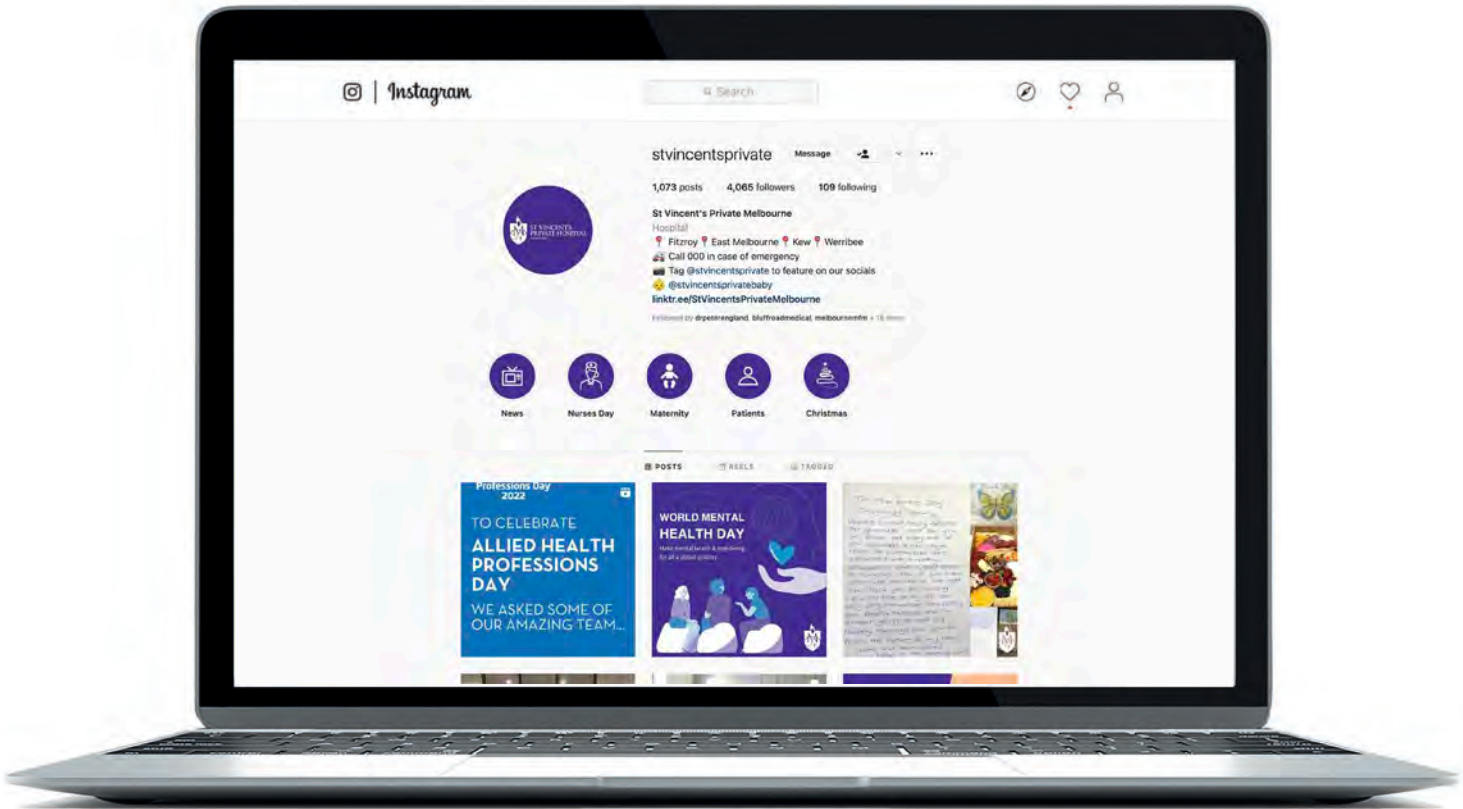
## WHAT DO YOU THINK?

We welcome your feedback to ensure our Quality of Care Report is engaging, easy to read and relevant to the community.

Please email [diana.smith@svha.org.au](mailto:diana.smith@svha.org.au) or contact (03) 9411 7258.

Our **Partners in Safety** brochure can be downloaded from our website.

It provides tips for patients and families for staying safe while in hospital.



## DISTRIBUTION

St Vincent's Private Hospital Melbourne distributes copies of the Quality of Care Report to patients, staff and key stakeholders. The publication can also be downloaded from our website.



*Developed in consultation with our patients*

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**ST VINCENT'S  
HEALTH AUSTRALIA**

UNDER THE STEWARDSHIP OF MARY AIKENHEAD MINISTRIES