



Our Service to Society



**ST VINCENT'S
HEALTH AUSTRALIA**

UNDER THE STEWARDSHIP OF MARY AIKENHEAD MINISTRIES

Social Responsibility Account 2013

Acknowledgement

St Vincent's Health Australia acknowledges that our health, aged care and research facilities are built on the traditional lands of Aboriginal and Torres Strait Islander people. We pay our respects to their elders past and present.

We commit to working with our Aboriginal and Torres Strait Islander partners in a spirit of reconciliation, especially in the provision of health and aged care. We renew our commitment to walk the journey of learning and healing together.

Contents

| | |
|---|----|
| SVHA snapshot | 2 |
| Message from Dr Tracey Batten | 4 |
| Our Mission | 6 |
| A preferential option for the poor | 8 |
| Community Health Benefit | 10 |
| Social Benefit | 18 |
| Supporting the work of our partners in care | 30 |
| Social Justice through Health | 32 |
| Bringing our mission to life each day | 44 |
| Our Partners in care | 52 |



St Vincent's Health Australia is the nation's largest Catholic not-for-profit health and aged care provider.

We operate more than 2,500 hospital beds, 1,100 aged care places, employ more than 16,000 remarkable people, work with over 2,500 medical practitioners and draw on the talents of over 1,300 generous volunteers.

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

We are proud to serve as a ministry of the Catholic Church in Australia under the stewardship of Mary Aikenhead Ministries.

SVHA snapshot



Our services comprise 27 facilities along the east coast of Australia including:

- public hospitals
- private hospitals
- aged care facilities, and
- co-located research institutes.



Our public hospitals

Sydney

- St Vincent's Hospital
- Sacred Heart Health Service
- St Joseph's Hospital

Melbourne

- St Vincent's Hospital
- St George's Health Service
- Caritas Christi Hospice



Our private hospitals

Melbourne

- St Vincent's Private Hospital, Fitzroy
- St Vincent's Private Hospital, East Melbourne
- St Vincent's Private Hospital, Kew

Sydney

- St Vincent's Private Hospital, Sydney
- Mater Hospital Sydney

Queensland

- Holy Spirit Northside Private Hospital (A partnership with the Holy Spirit Missionary Sisters)
- St Vincent's Private Hospital Brisbane
- St Vincent's Private Hospital Toowoomba



Our aged care services

Melbourne

St George's Health Service comprising:

- Riverside House
- Auburn House
- Cambridge House
- Prague House

Sydney

- St Joseph's Village
- Stella Maris Aged Care (Managed for the Sisters of Mercy Parramatta)



Queensland

St Vincent's Care Services comprising:

- Marycrest Retirement Centre & Lilian Cooper Nursing Home
- Villa La Salle
- Oxford Park Retirement Village, St Joseph's Villa & Madonna Villa Nursing Home
- St Paul's Villa & Magdalene Court Retirement Community
- St John the Baptist Retirement Community
- St Patrick's Villa
- Lourdes (Managed for the Diocese of Toowoomba)



Message from Dr Tracey Batten

Group Chief Executive Officer, St Vincent's Health Australia

St Vincent's Health Australia, is at its core, a community of 16,000 people in service to Australian society. Our service has evolved. We continue to build upon the vision of the five Religious Sisters of Charity who arrived in the colony of New South Wales 175 years ago to meet the needs of women who were abandoned as convicts and regarded as 'the detritus' of the then British empire.

These founding Sisters from Ireland, fulfilled their responsibility by ministering to those who were excluded by 'society' in the late 1830s. The Sisters worked for women, men and families who were living with a poverty that degraded and isolated them from all that was socially acceptable.

175 years later, St Vincent's Health Australia continues this tradition of service to those who are often excluded from the social constructs of what is acceptable in Australia. St Vincent's Health Australia fulfils its responsibility as a Catholic health and aged care provider by seeking out and serving those Australians who still are so often subject to exclusion and poverty. Our responsibility is to seek a just settlement for these Australians. We believe and make our decisions of care based on an unstinting commitment that each woman, man and child is a manifestation of God's gift of human dignity.

Every day for most of the last 175 years, we have run hospitals, aged care services, offered our presence, a place of refuge and at times a home for those living with poverty. We are pleased that state and federal governments have sought to partner with us, and we with them, to meet the health and aged care needs of so many Australians. However vital, these partnerships remain only one expression of St Vincent's Health Australia's service to the Australian community. Our mission arises before and beyond such partnerships.

This *Social Responsibility Account 2013* offers a broader and deeper narrative of our commitment to service. This report is not 'the' comprehensive account of all that the people and facilities of St Vincent's Health Australia contribute in seeking to benefit the broader community. Rather, this report offers a focus on *some* of the programs and stories of change in the lives of people living on the margins of our community.

In March 2013, Pope Francis accepted election to leadership of the global Catholic community with a specific focus on leading 'a Church that is poor and for the poor'. This challenge enforces

our previous decision to develop services in our newer program directions under the Social Justice through Health area. There is much we need to learn and develop to be more effective in our programs for those who we wish to accompany to better health outcomes.

Over the coming years we will invest more in our evaluation and research on the causes of poverty and injustice with regard to health outcomes for the Aboriginal and Torres Strait Islander people who partner with us, for those who are homeless in Brisbane, Sydney and Melbourne, and for those living in the community seeking asylum.

As the Group Chief Executive Officer of St Vincent's Health Australia I am proud of the story we have to tell. Our people are remarkable in their expression of solidarity with those living with poverty and in the collective commitment to justice for all Australians. I am also conscious that ours is a contribution, and not the solution, to the challenges of poverty and injustice. I look forward to further stories of commitment and initiatives to bring change for those living with poverty and injustice.

Tracey Batten
Group Chief Executive Officer
St Vincent's Health Australia



Our mission

Founded by the Sisters of Charity, St Vincent's Health Australia has been providing compassionate, high quality health and aged care to the Australian community since 1857.

Now under the governance of Mary Aikenhead Ministries, St Vincent's Health Australia is proud to continue this tradition of care, making a difference each day in the lives of those who access our services.

Our work is underpinned by our **mission**:

As a Catholic health and aged care service, our mission is to 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.

We draw on the talents of our people and collaborate with others who share our vision and values to continue the pioneering spirit of Mary Aikenhead and the Sisters of Charity. We are committed to providing compassionate and innovative care, enabling hope for those we serve.

In the realisation of our **vision**:

To lead transformation in health care inspired by the healing ministry of Jesus.

Our people act in concert with our *values* of compassion, justice, integrity and excellence. These values are like the points of a compass, guiding our actions, informing our decisions and shaping our behaviour each day.



Mary Aikenhead, the founder of the Sisters of Charity, continues to be a figure of inspiration and example to our people. Inspired by her deep faith and love of Christ, Mary Aikenhead walked the streets and lanes of her home city of Cork in south-west Ireland in the late 18th century reaching out to Ireland's poor.

She drew a community of Sisters and supporters around her, establishing Ireland's first hospital to care for the poor, opening schools for the poor, building workhouses and providing support to those without employment.

Through her vision and her efforts, lives were changed. Those living in poverty were able to find a way to break free from generations of entrenched social disadvantage through access to health care, education and social support. Mary Aikenhead's efforts drew those living on the fringes of her community into greater participation and inclusion.

Mary Aikenhead lived the call of the Gospel to set people free from the physical and social constraints that entrap them, bringing them to fullness of life:

The Spirit of the Lord is upon me, because he has anointed me to bring good news to the poor. He has sent me to proclaim release to the captives and recovery of sight to the blind, to let the oppressed go free, to proclaim the year of the Lord's favour. (Luke 4:18-19)

It is this same Gospel imperative, to see every person experience healing and wholeness of life, that continues to inspire and guide our efforts.

St Vincent's Health Australia is the nation's largest Catholic provider of health and aged care services. Our work in public hospitals, private hospitals and aged care services is conducted in Queensland, New South Wales and Victoria. Our staff of some 16,000 people deliver over one million experiences of care to people each year.

St Vincent's Health Australia leads innovation in health care through our affiliation with some of Australia's leading medical research institutes: the Garvan Institute of Medical Research, the Victor Chang Cardiac Research Institute, the O'Brien Institute and St Vincent's Institute.

At St Vincent's Health Australia, the vision of Jesus, the radical commitment and discipleship of Mary Aikenhead and 175 years of the presence and service of the Australian community by the Sisters of Charity permeates our decisions and behaviours each day.

This Social Responsibility Account captures only part of the whole expression of this vision, mission and heritage. As a health and aged care provider St Vincent's Health Australia deliberately chooses:

- to pursue partnerships with governments in leading the provision of highest quality care to each person in need who comes through the doors of our public hospitals,
- to intentionally seek opportunities to meet the health care needs of people in prison,
- to invest in the care of young people living with the challenges of mental illness, and
- to reach out and accompany women and men living rough in Brisbane, Sydney and Melbourne, providing health care and companionship when and where it benefits people most.

Whether it be people in prisons, those living with mental illness or people experiencing homelessness, St Vincent's seeks out those people that our wider society pushes to the margins: we search out those people that society deems are of lesser value or who live with the judgement of others.

Our accompaniment, desire for relationship and service of these people is core to our social contract with the community. Partnering with government means our remarkable people are at the service of Australians living on the margins. *Our Social Responsibility Account* is the extension of such organisational decisions and disposition.

Working together, our people are committed to changing the lives of those we serve each day, helping people to live fuller, healthier lives as active participants in the community. St Vincent's Health Australia works with federal, state and local governments, community based agencies and other health and welfare providers in delivering care that is attuned to the needs of each person.

Our most important partners are in fact the people we serve. We recognise that people should always be active participants in their health and aged care decisions, making informed choices that further their dignity and their right to self-determination. We are proud to partner with the people for whom we care in delivering safe, high quality, person-centred health and aged care services.

Working together, our people are committed to changing the lives of those we serve each day, helping people to live fuller, healthier lives as active participants in the community.

A preferential option for the poor

In Australia in 2013, we recognise that there are too many people living in situations of systemic social disadvantage who are prohibited from the full participation in society to which we believe each person is entitled.



As a Catholic health and aged care service we have a particular concern for these people. We believe that each person is created in the image and likeness of God and so our work is directed towards ensuring that the dignity of each person is honoured and respected. Like our founder Mary Aikenhead, we therefore cannot ignore situations where human dignity is violated or marginalised. We recognise that poverty, illness and social and economic systems are all factors that have the potential to diminish human dignity.

The Gospels are filled with stories of Jesus seeking out those living on the margins of society, in order to care for them, heal them and draw them back into full participation in the community. Time and again, Jesus gives preference to those that society often overlooks, placing their needs ahead of the needs and wants of people with money, power and influence.

The Gospels are filled with stories of Jesus seeking out those living on the margins of society, in order to care for them, heal them and draw them back into full participation in the community.

Moreover, Jesus is explicit in equating the measure of our love for God in terms of our care for the most vulnerable in our midst (Matthew 25:31-46). When we feed the hungry, welcome the stranger, clothe the naked, heal the sick and visit the prisoner we do so because we recognise Christ in the face of each person for whom we care.

In more recent years, Catholic scholars have described this as a Preferential Option for the Poor. In its simplest expression, this means that as Christians, the needs of the poor come first in all of our considerations. This focus was sharpened during the Second Vatican Council, most notably in the document *Gaudium et Spes* (The Church in the Modern World). The opening line of the document calls all people of goodwill to attend to the situation of others, especially those who are vulnerable:

*The joys and the hopes, the griefs and the anxieties of the [people] of this age, especially those who are poor or in any way afflicted, these too are the joys and hopes, the griefs and anxieties of the followers of Christ.*¹

More recently, this commitment was echoed in the writing of Pope Benedict XVI in *Deus Caritas Est* (God is Love). Benedict used the occasion of his first encyclical to emphasise the importance of love, charity and justice to our faith (#20). He explained that charity is just as central to the church as are the sacraments and scripture:

*Love of neighbour, grounded in the love of God, is first and foremost a responsibility for each individual member of the faithful, but it is also a responsibility for the entire ecclesial community at every level.*²

1. www.vatican.va/archive/hist_councils/ii_vatican_council/documents/vat-ii_cons_19651207_gaudium-et-spes_en.html
2. www.vatican.va/holy_father/benedict_xvi/encyclicals/documents/hf_ben-xvi_enc_20051225_deus-caritas-est_en.html

St Vincent's Health Australia recognises that as a Catholic health and aged care ministry we have a moral obligation to care for all in need, especially those who are vulnerable, and to place our resources in the service of the good of the whole community. We have a further obligation to look at the world from the perspective of those who are excluded, and to work with them to restore their full participation. When we return those who are vulnerable to full participation in society, we strengthen the whole community. In fact we cannot be a whole (and healing) community when some people are denied full participation.

The theologian Gustavo Gutierrez writes:

*God has a preferential love for the poor not because they are necessarily better than others, morally or religiously, but simply because they are poor and living in an inhuman situation that is contrary to God's will.*³

When looking at how St Vincent's Health Australia demonstrates a Preferential Option for the Poor, we assess our work in regard to:

- Our services to the poor and marginalised,
- Our contribution to the common good of the community as a whole, and
- Our commitment to Catholic values.

St Vincent's Health Australia is pleased to work closely with state and federal governments and deliberately seeks opportunities to serve the community, especially those who are most disadvantaged. This report details our efforts and commitment over and above our contracted services to meet the needs of Australians whose access to health care is otherwise limited or denied.

3. catholicmoraltheology.com/an-option-thats-not-optional-the-preferential-option-for-the-poor/, Gustavo Gutierrez, *Essential Writings*, (ed. James Nickoloff), Fortress Press, 1996.

In responding to the Gospel call to exercise a preferential option for the poor, St Vincent's Health Australia has developed three models to assess our contribution and effectiveness.

1 Community Health Benefit

Programs and services designed to increase health in communities and increase access to health care. It includes the provision of patient concessions, health outreach programs, clinical education and research.

2 Social Justice through Health

Through the provision of care, advocacy and research, we seek to change the structures and systems that lead to some people experiencing poorer health outcomes than others as a consequence of poverty, marginalisation or vulnerability. Our focus is on addressing the health care needs of Aboriginal and Torres Strait Islander people, people experiencing chronic homelessness and people living in the community seeking asylum.

3 Social Benefit

Outreach services to the community that contribute to the greater good. This includes donations and in kind support, our volunteer programs and services that support general wellbeing.

Community Health Benefit

Our Community Health Benefit programs reflect the difference we seek to make to people's health and wellbeing over and above our contracted services. We especially seek out those people who struggle to link in with health services due to social isolation, geographic isolation or cultural circumstance. Our programs and services are evidence based and designed to meet the needs of the specific population groups served.



Patient Concessions

Providing excellence in care to all people in need of care, regardless of capacity to pay, has been a hallmark of St Vincent's services since its foundation. While most Australians have access to health care through Medicare or the Department of Veterans Affairs, there are many in the community who require assistance that is not covered by these services. St Vincent's Health Australia seeks to change the structural issues that cause inequities in health care as well as caring directly for women and men in need. The story of Mr LC is one such example.

Mr LC came from the Philippines to live with his daughter who is an Australian resident. He supported himself in several jobs but had to cease working when diagnosed with renal cell carcinoma. He was ineligible for Medicare support under his visa arrangements. Initially treated at the Prince of Wales Hospital, he was later transferred to Sacred Heart Health Service for palliative care.

During his admission, staff went to extraordinary lengths to support Mr LC and his family, requesting the Department of Immigration grant a visitor's visa to his only son to enable him to visit his dying father. When this was denied, staff established Skype access so that Mr LC could at least see and communicate with his son before his death.

Following his death, Sacred Heart's Social Worker continued to support Mr LC's daughter, arranging for the Prince of Wales Hospital to cancel their claim on the family for the costs of medical care.

St Vincent's Hospital's executive team approved the waiving of Mr LC's medical costs which amounted to \$86,667, enabling the family to pay for an appropriate funeral and burial for their father.

Accessing aged care services can also present hurdles for those on low incomes. St Vincent's Care Services helps people on low incomes access care by waiving bonds and writing off payments for those in need.

Mr LC's story illustrates the multidimensional aspects of poverty in Australia: Mr LC was denied access to communication and the support of his family, and denied access to the 'universal' health care that many of us regard as a right. These denials represent an erosion of human dignity that St Vincent's Health Australia must confront as a Catholic health and aged care provider.

Overcoming financial hurdles

A 'hand up' rather than a 'hand out'

The Darling Downs region of south-west Queensland has been dramatically affected by harsh environmental and economic factors in recent years. Concerned at the potential for regional community members to compromise health outcomes due to financial hardship, St Vincent's Hospital Toowoomba General Manager and Administration Manager identified an unmet need.

Through research, a financial services product was sought that enabled payment of surgical procedures over time – a mission-oriented product that considers the financial capacity of applicants who are seeking a 'hand up' rather than a 'hand out' when planning their health care needs.

Certegy Ezi-Pay Express is a direct-debit no interest payment plan introduced to St Vincent's Hospital Toowoomba. Patients are able to schedule procedures with minimal waiting periods. Payment periods for procedures undertaken range from 12-24 months, depending on the ability of the applicant to make affordable repayments. Dignity and confidentiality considerations of the applicant are a priority throughout this process.

Between July 2010 and May 2012, 70 medical procedures have been undertaken from specialty areas of gynaecology, obstetric admissions, ENT, and ophthalmology.

Patient Response

"I was faced with the prospect of having to pay for dental surgical procedures for two of my children. I delayed these procedures for one month in order to pay other household debts, and was informed that severe dental deterioration had occurred, meaning that more complex surgery was now required at a cost of \$1500 more than the original quote.

"I was able to demonstrate that I could put down the deposit required and pay the remaining amount off over 24 months in easy fortnightly repayments – with no interest! I can make additional payments to pay off the amount faster with no penalties."

Providing supported access to care allows this woman to avoid making a choice between her children's health and the family's financial stability. Targeted and empowering interventions like Certegy make a difference in people's lives beyond providing access to oral health care.

Providing supported access to care allows this woman to avoid making a choice between her children's health and the family's financial stability.



Rankin Court supports around 290 people each month and last year provided 105,000 occasions of care.

Helping people overcome addiction

One of the most marginalised groups in our community are people experiencing addiction to opioids such as heroin and morphine.

People often present for care and support with a range of highly complex conditions associated with their addiction including homelessness, mental illness, HIV and hepatitis. These people are often reluctant to present for care as they have low levels of trust in mainstream health care providers and experience a high degree of isolation from the community as a whole. They are rarely made welcome by mainstream community support agencies.

Rankin Court provides a non-judgemental, supportive place where people can break long standing addictions. Many of its clients have long term addictions, have previously been unable to complete rehabilitation programs and have high complex care needs. Many clients self-refer to Rankin Court.

As a result of the intervention and support by staff, clients of Rankin Court are able to reduce their incidence of illicit drug use, reduce occasions of harm, engage again with a health care provider, and link in to housing and other community based supports. Rankin Court supports around 290 people each month and last year provided 105,000 occasions of care.

Meeting the needs of the whole person 24 hours a day

Health care needs don't respect office hours and St Vincent's Hospital Sydney has extended the availability of social work services to provide crisis intervention support to people 24 hours a day.

Similarly, people with cancer require far more than medical support and care. Recognising that patients face a psychological challenge as well as a physical one, St Vincent's Hospital Sydney draws on funds donated by the community to provide specialist psychological counselling for people with cancer.

Gorman House – A community of care

People seeking to withdraw from alcohol and other drugs are often subject to misunderstanding and judgement from the community. Many people experiencing addiction often have a history of extensive social disadvantage and poor support networks. Gorman House is a non-judgemental community of care, offering clinical and psychological support to people as they withdraw from alcohol and other drugs.



Finding hope in the darkest times

The delivery of a still born baby or loss of a newborn must rank as one of the most devastating experiences any person can endure. Extending care that enables people to find their way through such loss is both a challenge and a privilege for staff at the Mater hospital. The Parenting After Loss and Pregnancy After Loss programs include education and access to support groups for parents who have experienced such loss to enable them to share their grief, and experience hope and understanding. Stormanson House a support service allied to the Mater hospital, also provides accommodation to families experiencing the loss of a still born child.

Priest's Foundation

St Vincent's Health and Aged Care donates funds to the Archdiocese of Brisbane's Priest's Foundation. The Foundation exists to assist priests through health care and support their needs in retirement.

Priests often have limited family or community support and financial capacity when they retire from parish ministry. The foundation funds two part-time registered nurses employed by St Vincent's Private Hospital Brisbane to provide a health care coordination service for the priests of the Archdiocese. The health care coordinators assist with doctor's appointments, hospital stays and aged care placements. The nurses provide education about health and wellbeing, also bringing together networks in the church and health care sector as appropriate to the needs of each individual. This is an important opportunity for St Vincent's to care for men who have often spent their lives caring for others.

Toowoomba Community Care Transport

People in remote and regional Australia often experience poorer health outcomes because of limited access to care. This problem is exacerbated for older people living in remote and regional communities who lack access to transport.

St Vincent's Hospital Toowoomba is pleased to support the Toowoomba Community Care Transport Incorporated, a service that provides medical transport for aged and mobility challenged Garden City residents. This service caters for approximately 500 return medical appointments per month for many pensioners and infirm members of our local community.

The nurses provide education about health and wellbeing, also bringing together networks in the church and health care sector as appropriate to the needs of each individual.

Reaching out to the aged

Getting older can be a time of increased vulnerability in the lives of many people who have not previously sought assistance. Our society esteems independence and it can be difficult for people to acknowledge and accept care no matter how sensitively it is offered.

Club Bright and Club Connect are two initiatives of St Vincent's Hospital Sydney's Psychogeriatric Service that provide group based psychological therapy programs to older adults experiencing mental illness living in the community and in aged care residences. Many older adults in these scenarios often have limited access to such care. The support provided by Club Connect enables many individuals to continue living in their own homes.

Donations of medical equipment and supplies

Health care resources are hard to come by and finding a good home for superseded equipment or surplus supplies is one way of making sure that scarce resources are not wasted.

St Vincent's Private Hospital Melbourne donated equipment to Rotary, Cabrini Outreach and the University of Melbourne Veterinary Hospital. One hundred patient beds were sent to Papua New Guinea via Rotary and surplus furniture was donated to Hotham Mission. Returned medicines which are not suitable for re-use but satisfy clinical criteria are donated to the St Camillus Conference of the St Vincent de Paul Society for donation to overseas missions. These donations support health providers who serve poorer communities in Australia and overseas, extending health care to people who may otherwise miss out.

Footwear Bank

Falls are the leading cause of injury among older people admitted for hospital care, with one third of people aged over 65 falling each year nationally.

Many of the people identified as at risk of sustaining a fall don't have the means to purchase safe footwear due to financial hardship and/or limited family support. The Podiatry Department and Falls Working Party of St Vincent's Hospital Melbourne have collaborated to introduce a Footwear Bank to assist people in this position through the provision of suitable footwear and education in terms of preventing a fall and avoiding harm.

Health care resources are hard to come by and finding a good home for superseded equipment or surplus supplies is one way of making sure that scarce resources are not wasted.

Community Health Benefit

| Program | Total Cost | Costs Recovered | From | Net Contribution | Number people served |
|--|---|-----------------|-------------------------------|------------------|----------------------|
| Aged Care Resident Concessions | \$780,629 | | SVCS | \$780,629 | 168 |
| Aged Care Resident Support ¹ | \$62,400 | | SJV | \$62,400 | 6 |
| Certegy Ezi-Pay | \$64,960 | | SVPHT | \$64,960 | 22 |
| Clinical Psychology Services | \$146,000 | \$146,000 | Donations | | 273 |
| Club Bright | \$23,007 | \$23,007 | NSW Ministry of Health | | 57 |
| Club Connect | \$10,000 | \$10,000 | NSW Ministry of Health | | 5 |
| Community Aged Care Package discounts ² | \$12,337 | | SJV | \$12,337 | 7 |
| Diabetes Outreach Clinic | \$16,607 | \$8,892 | NSW Ministry of Health | \$7,715 | 23 |
| Footwear Bank | \$17,746 | \$17,746 | Department of Health Victoria | | 5 |
| Gorman House | \$1,330,000 | \$1,330,000 | NSW Ministry of Health | | 1,504 |
| On Call Crisis Roster | \$41,189 | \$41,189 | NSW Ministry of Health | | |
| The Priest's Foundation | \$100,000 | | SVHAC | \$100,000 | 57 |
| Rankin Court Registrar | \$130,000 | \$65,000 | SVPHS | \$65,000 | 3,480 |
| Self Care Apartment discounts ³ | \$19,200 | | SJV | \$19,200 | 2 |
| Stormanson House Bereavement Support Groups | \$12,300 | | Mater | \$12,300 | 90 |
| Patient Concessions/Waivers | | | | | |
| SVPHS | \$170,198 | | SVPHS | \$170,198 | 178 |
| Mater | \$49,596 | | Mater | \$49,596 | 159 |
| SVHM | \$82,888 | | SVHM | \$82,888 | 36 |
| SVHS | Solomon Islander Patients | \$208,313 | SVHS | \$208,313 | 23 |
| | Overseas Patients | \$404,431 | SVHS | \$464,876 | 28 |
| | Hope, Healing and Humanity Trust ⁴ | \$89,760 | \$89,760 | Donations | 19 |
| SHHS – Solomon Islander patients | \$116,808 | | NSW Ministry of Health | \$116,808 | 1 |
| SHHS – Overseas Patients | \$60,445 | | NSW Ministry of Health | \$60,445 | 1 |
| HSN | \$23,019 | | HSN | \$23,019 | 102 |
| SVPHT | \$500 | | SVPHT | \$500 | 2 |
| SVPHM | \$168,393 | | SVPHM | \$168,393 | |

Notes

1. Supported Resident Ratio

SJV have 48% supported residents. This means that of the 84 permanent residents currently at SJV 40 residents have been admitted as Concessional Residents. The average Supported Resident Ratio in the Aged Care Industry is normally 40%. Supported Residents do not pay an Accommodation Bond nor Accommodation Charge as they are assessed by Centrelink as being financially disadvantaged. SJV does receive a supported resident supplement from DoHA but the investment income for SJV is lower than it could be if the 48% had paid an accommodation bond. \$62,400 in lost interest on 6 residents. The extra 6 residents would bring the Supported Resident Ratio to 40%. 40 (18 are Sisters of Charity).

2. Discounted CACP Packages

SJV offers discounted CACP Package Service to financially disadvantaged clients and all SJV Self Care Residents. CACP is a community aged care package to provide care to self care residents and clients in their own home in order to keep them independent for as long as possible. Light cleaning duties, showering, shopping and escorts to appointments are offered. Minimum hours of service is 3 hours per week to maximum of 7 hours per week (1 hour per day).

3. Discounted Self Care Apartments

SJV has allocated two self care units for financially disadvantaged residents. These two residents only paid the in-going contribution rather than paying the full bond. SJV have forgone the interest to be earned from the balance of these two apartment bonds.

4. The Hope, Healing and Humanity Trust provides humanitarian financial support for patients.

Right: Pauline de Weerd, Aboriginal Health Network Coordinator, St Vincent's Sydney.



Social Benefit

As a health and aged care service committed to bringing our mission to life, St Vincent's recognises that our response to those in need often extends beyond immediate health and support needs. We are proud to serve and participate in the community, endeavouring to respond to the needs of individuals and groups as they arise.

Our community support includes direct donations to support community providers, supporting our staff in volunteering in the community, and developing volunteer programs to draw on the generosity, skills and talents of those keen to work with us in our hospitals and aged care facilities.



Above: New mum with Samantha Dunne. Top right: Jane Myers and Samantha Dunne.

Our volunteer programs

St Vincent's Health Australia is supported by over 1,000 volunteers working across our public hospitals, private hospitals and aged care services who provide over 120,000 hours of service to patients and the community. This equates to an in kind financial contribution to the community of some \$2,955,600 per annum⁴.

These include Angel Volunteers who assist patients with meals, completing menus, providing hand and feet massages and tending to patients' flowers and plants on the ward. All volunteers assist patients and visitors with directions within the hospital.

Our volunteers provide pet visiting services in many of our facilities. Volunteers also provide a trolley service for patients offering magazines, cards, pens, pencils and puzzle books as well as basic toiletries to patients. Volunteers play piano and sing to patients, and provide administrative assistance to the staff.

Friendly visitor volunteers bring joy and hope to patients when they are at their most vulnerable and their quiet presence brings calm and peace to the ward.

Providing support for carers

Carers in the community provide an invaluable support to those they love but often experience loneliness and isolation.

The Carers' Support Group based at St Joseph's Hospital Auburn, provides education, information, emotional and social support to carers in the community.

Supporting our staff in supporting the Community

Not content to confine their efforts to the workplace, many of our staff volunteer their skills and expertise in serving people in need within Australia and overseas, continuing to change lives enabling others to live life to the full.

St Vincent's Private Hospital Melbourne offers formal support to staff wishing to volunteer their services through its Community Support Leave program. In 2012-13, 20 staff members accessed this support in the service of some highly vulnerable communities.

One example was the work of staff members Samantha Dunne and Jane Myers who volunteered in a child birth education program in Mongolia.

Child birth education in Mongolia

Mongolia is the second most polluted country in the world and the fifth poorest country in Asia on the United Nations Human Development Index. Temperatures in winter can drop as low as minus 35 degrees, demographic statistics vary but the population is estimated to be over three million with a growing population. The United Nations estimates an average of 36 deaths per 1,000 live births.

In May-June 2013, SVPHM staff Samantha Dunne and Jane Myers volunteered in a child birth education program that would help to save lives, save money within the health care system through early recognition, detection and avoidance of ill health, and to empower women and families to have a better understanding and control of their and their infant's wellbeing.

The project was an enormous success. Key city hospitals in Ulaanbaatar are commencing booking systems for child birth education participants and are setting up training venues to begin formal classes in September 2013. Andy Mayer a Childbirth Educator and project member remains living in country and will oversee this stage of the project, teaching CBE classes in action.

While St Vincent's Private Hospital Melbourne makes a financial contribution in supporting the work of its staff, the major contribution is the value in building capacity in such communities, improving maternal and early childhood health outcomes for some of the world's poorest people.

The project was an enormous success. Key city hospitals in Ulaanbaatar are commencing bookings systems for child birth education participants and are setting up training venues to begin formal classes in September 2013. Andy Mayer a Childbirth Educator and project member remains living in country and will see this stage of the project, teaching CBE classes in action.

⁴ Calculation based on Australian Bureau of Statistics guide to calculating the financial value of the contribution of volunteers. See www.ourcommunity.com.au/boards/boards_article.jsp?articleid=1622



Bottom left: MEMIC Launch. Bottom right: MEMIC Teachers.

St Vincent's physicians contribute to emergency care development in Myanmar

Staff from St Vincent's Hospital Melbourne, Doctors Georgina Phillips and Michael Augello joined a group of emergency physicians, surgeons and anaesthetists from Australia and Hong Kong to deliver the first ever Myanmar Emergency Medicine Introductory Course (MEMIC).

Myanmar is a country vulnerable to significant catastrophic events. Cyclones and earthquakes have killed hundreds of thousands of people in the last five years. Internal conflicts are also significant causes of death and injury.

Developing the emergency responsiveness of local clinicians will directly impact the number of lives saved and minimise the impact on people of injury and subsequent disability now and in the years ahead.

The five-day emergency medicine course was the initial component of a comprehensive and intensive Post Graduate Diploma in Emergency Medicine through the University of Medicine 1 in Yangon, designed to rapidly train a group of junior specialists from other disciplines to become the first cohort of emergency physicians in Burma.

The course adopted adult-based learning principles adapted to a low resource environment. Both clinical knowledge and skills were introduced as well as emergency medicine concepts and systems such as triage and emergency department design, pre-hospital planning, and disaster preparedness.

Embedded through the course were the themes of emergency department leadership, communication,

teamwork and teaching. One of the MEMIC co-instructors alongside Drs Phillips and Augello was Dr Antony Chenhall, a former longstanding St Vincent's Hospital staff member.

The Australian government funded the MEMIC through the Ambassador's Direct Aid Program with the assistance of the Royal Australasian College of Surgeons. Drs Phillips and Augello will continue their support for emergency medicine development in Burma through follow up capacity building visits.

Building community capacity

Building community capacity locally has been the focus for Physiotherapy staff from St Vincent's Hospital Melbourne. Each year staff undertake a clinical rotation to the Kimberley Population Health Unit in Western Australia to provide direct clinical care and health education care to the local Aboriginal community.

Developing the emergency responsiveness of local clinicians will directly impact the number of lives saved and minimise the impact on people of injury and subsequent disability now and in the years ahead.



When a woman is escaping family violence, generally there is no time to pack anything. It's a matter of grabbing the kids and running.



Hampers donated to the women and children of McAuley Community Services.

Building healthy communities of the future

St Vincent's Clinic Foundation is central to the community benefit the Clinic extends to the community. The foundation was the vision of Sr Mary Bernice Elphick RSC and the founding doctors of St Vincent's Clinic. The foundation was established to support innovation in, and delivery of, high quality patient care through clinical research and education.

In 2013, St Vincent's Clinic Foundation awarded:

- 14 Research Grants
- 4 Multidisciplinary Grants
- 1 Travelling Scholarship
- 5 Clinical Excellence Awards
- 12 Allied Health and Nursing Presenter Grants.

The grants will enable medical, nursing and allied health research into areas as diverse as cancer, heart disease, HIV, diabetes, cardiac transplants, Parkinson's disease and infection control.

Practical support for vulnerable women

Mother's Day Hampers McAuley Community Services for Women

McAuley Community Services for Women manage three safe houses. McAuley is unique in that it offers a 24-hour service for women to arrive day or night fleeing family violence. This is the second year St Vincent's Private Hospital Melbourne has collected goods and donated hampers to McAuley Community Services for Women in May for Mother's Day.

As Sally Elford Fundraising Director at McAuley says, "When a woman is escaping family violence, generally there is no time to pack anything. It's a matter of grabbing the kids and running. So families staying at our safe house really appreciate all the toiletries, clothing, baby supplies and household goods. It lifts their spirits during a really traumatic and frightening time. I am personally very touched that so many staff took the time to buy and donate items – the fact that they care about, and are willing to help, families in terrifying situations... I'm humbled by this incredible display of goods in front of me. It encapsulates the spirit of generosity and says a great deal about the incredible staff at St Vincent's Private."

St Vincent's staff rallied to donate goods and several staff were particularly resourceful in garnering outside bulk donations, from the pharmacy's suppliers and clothing through the Cotton On Foundation.

Through the St Vincent's Private Hospital Melbourne Facebook page, Claire Hewett our Social Media Manager connected a local Mother's Group to the McAuley collection. One of our mum's, whose baby was born at our hospital last year, brought in several bags of gorgeous baby goods collected by her Mothers Group. Through social media, the hospital connects with over 2,000 followers and other readers, continuing to connect with the community in unique and powerful ways.

Reaching out to support mums in need has also been the work of staff at St Joseph's Campus Auburn. Extending practical support to refugee mums and their newborns, the campus provides baby packages and small gifts for each mum. This project is done in conjunction with the Sudanese Community Pastoral Carer. 95 packages were distributed in the last year.

Similarly, St Vincent's Private Hospital Toowoomba has a long standing partnership with Manna House, a support service to women and children affected by violence. The hospital community provide household items and care packages to support women who are unable to live safely at home. Each Christmas the Executive team supplies Christmas lunch to the families and staff of Manna House.

Changing lives

Many of those for whom we care are people who already experience a high degree of vulnerability. Where possible, we extend our efforts to help these people change their lives and develop capacity to exercise choice and independence in their own lives.

Education and employment

Supporting people's access to education and employment are synonymous with the vision of Mary Aikenhead and many of our hospitals pursue this mission in quiet unheralded ways.

St Vincent's Private Hospital Melbourne provides employment opportunities to clients presented by the Brotherhood of St Laurence, many of whom are former asylum seekers now resident in Australia and looking to build employment skills that will be recognised locally. Six staff were employed last year.

Similarly, two young men are now Year 11 students at Melbourne's Xavier College as a result of scholarships established by St Vincent's Private Hospital Melbourne. The students participate in the Friday Night School, a program established by Margaret Gury

to provide educational assistance beyond normal schooling for children and young adults who are from non-English speaking backgrounds. The school focuses on assisting young people who are refugees from Ethiopia, Sudan, East Timor and Vietnam, as well as other developing countries. Many students of the Friday Night School live in the Richmond public housing estate, however students do come from all over Melbourne for this specialised educational assistance. Approximately 180 students attend the Friday Night School each week, which is run in the St Ignatius Centre Hall.

St Joseph's Hospital Auburn also supports the education and future opportunities of people through the provision of ten scholarships to staff members of Sudanese background. The staff are studying nursing at Western Sydney University and the scholarships will support their future employment and capacity to provide culturally appropriate health care to fellow Sudanese Australians in the years ahead.

Residents of The Way in Fitzroy are men with a history of homelessness who have difficulty accessing long term residential accommodation. The Way is a supportive community for men who often face the additional challenges of addiction and psychiatric disability. The Way provides these men with a home marked by dignity, belonging and care, all achieved without government funding and very little recurrent funding. St Vincent's Hospital Melbourne provides the community with use of the premises, maintenance support and a meal each day as well as access to clinical care through the hospital's emergency department.



Extending hope to others

In caring for people's health, St Vincent's recognises the flow on impact in people's lives of illness and injury.

We work to support people as they rebuild their lives, looking for innovative ways to provide practical assistance.

Building healthy communities

St Vincent's Private Hospital Melbourne also provides clients of The Wellington with access to the flu vaccination for those who wish to participate.

The very resourceful Infection Prevention Team provided multi-lingual information alongside the vaccination to all who arrived on the day. This is planned as an ongoing initiative as part of the hospital's ongoing commitment to mission to support our local community by bringing God's love to those in need.

St Joseph's Hospital Auburn and St Vincent's Hospital Melbourne collaborate with the local Alcoholics Anonymous groups, offering spaces for the groups to meet in a supportive and non-judgemental environment. Over 90 meetings are held annually in this quiet and dignified support to people in need in the community.

Supporting people with cancer

A cancer diagnosis can impair capacity for employment for individuals undergoing treatment and/or their carers and family.

To assist, the Cancer Patient Assistance Fund was established to help people pay rent, utility bills, purchase food and groceries and provide petrol vouchers and access accommodation near the hospital to enable people to attend treatment.

Reaching out to the isolated elderly

The Mater hospital supports the Linkage program which improves the quality of life for residents in aged care facilities in Sydney by linking them with trained volunteers offering regular companionship on an individual basis.

Through Linkage, the volunteers receive ongoing management, support and training from the two part-time program coordinators. The Mater hospital funds this program as an outreach of the hospital.

Providing dignity at the end of life

Sadly, some of our patients and residents die without the connection of family and friends and the staff of our health and aged care services endeavour to ensure that no person dies alone.

This care sometimes extends to paying for the funeral services of people who die without means to pay for a dignified funeral and burial. Our staff also often attend these funeral services, ensuring that every person's life is marked by care to the very end. Cost of funeral services is met by our hospital and aged care services.

Overcoming problem gambling

The Gambling Treatment Program of St Vincent's Hospital Sydney is a free service for people with a gambling problem.

An individually tailored program is developed for each person utilising a cognitive behavioural approach and research evidence on treatment effectiveness. Clients are initially offered 6-12 weekly sessions, with follow up sessions for up to two years. The program is conducted by psychologists who provide individual face to face sessions as well as telephone support.

And doing good

Putting food on the table

Honouring our patron saint, St Vincent de Paul, staff at St Vincent's Darlinghurst campus collect food and grocery hampers each year on the feast day, 27 September, for distribution through the St Vincent de Paul Society Conference at Minto and the Sisters of Charity Outreach service.

The Wellington is a drop-in centre in Collingwood opposite the high-rise flats that serves to connect isolated and disenfranchised people in a safe, local, social setting. The catering department at St Vincent's Private Hospital Melbourne provide a hot meal for the Wellington clients fortnightly.

Meals are also provided to St Mary's House of Welcome each Saturday by St Vincent's Private Hospital Melbourne, and the hospital also sends surplus food to Ozanam House. Both Ozanam House and St Mary's House of Welcome are outreach services to men and women experiencing homelessness in the Fitzroy and North Melbourne areas. Through the Wellington, Ozanam House and St Mary's House of Welcome, St Vincent's Private Hospital Melbourne serves over 13,500 meals to people experiencing homelessness each year.

And clothes on their backs

The provision of clean clothing to vulnerable people attending our emergency department is a simple way of supporting the dignity of people in need of care.

With the support of a grant from the Sisters of Charity Foundation in 2012, social work staff at St Vincent's Hospital Sydney have been able to support patients attending emergency and throughout the hospital.

Christmas care in the community

Christmas means a great deal to the staff of our health services who recognise a time to share with others in the community. Our staff are acutely aware that Christmas can be a time of isolation for many who are separated from family and friends, so the invitation to demonstrate our care and connection with others is always met by an overwhelming response.

2012 was no exception with over 500 hampers donated by staff to patients and community groups. Staff are given a list of the preferences of each person and buy gifts specific to each recipient. Hampers are donated to recipients through St Vincent's home care nursing services, and in partnership with community agencies including the Society of St Vincent de Paul, Sacred Heart Mission St Kilda, and The Wellington Collingwood, and the Eastern Area Visitation Program's 'Gifts for the Elderly'.

Through the 'Giving Tree' at St Vincent's Darlinghurst and Auburn campuses, staff gave gifts to 1,430 people at Christmas.

Puppy love

Pets play a vital part in the lives of many people, and the Pets of Older Persons Service (POOPS) which was founded by the team at St Joseph's Hospital Auburn in collaboration with the RSPCA is a creative way of fostering this wonderful relationship.

Where older people need to move into residential care, and can no longer care for their pet, POOPS helps find foster accommodation for the loved pooch or moggy until the older person can return to care for them if at all possible.

Social Benefit

| Program | Total Cost | Costs Recovered | From | Net Contribution | Number people served |
|--|------------|-----------------|-------------------------------|------------------|---|
| Al Anon Meetings | \$1,260 | \$1,260 | NSW Ministry of Health | | 800 |
| Auburn Carers' Support Group | \$16,000 | \$16,000 | NSW Ministry of Health | | 20 |
| Cancer Patient Nutrition Supplement | \$2,400 | \$2,400 | Nelune Foundation | | 610 |
| Cancer Services Transport Drivers | \$100,000 | \$100,000 | Nelune Foundation | | 700 |
| Cancer Patient Assistance Fund | \$19,655 | \$19,655 | Nelune Foundation | | 100 |
| Nelune Centre Cancer Support Services | \$650,000 | \$650,000 | Nelune Foundation | | |
| Clothing Assistance | \$5,250 | \$5,250 | Sisters of Charity Foundation | | 283 |
| Community Support Leave Program | \$12,240 | | SVPHM | \$12,240 | 30 |
| Flu Vax for clients of The Wellington | \$250 | | SVPHM | \$250 | 6 |
| Funerals for the Poor | \$10,925 | \$10,925 | | | |
| Gambling Treatment Program | \$67,243 | \$67,243 | NSW Ministry of Health | | |
| Hampers for Sudanese mums | \$2,850 | | SJH | \$2,850 | 95 |
| Kamberra Mental Health Support Group | \$5,389 | \$5,389 | Lidcombe Catholic Club | | 20 |
| Linkage | \$84,165 | | Mater | \$84,165 | 90 |
| Make a House a Home | \$2,500 | \$2,500 | NSW Ministry of Health | | |
| Mary Stringer Trust Fund ¹ | \$3,159 | \$3,159 | Mary Stringer Trust Fund | | 300 |
| POOPS | \$4,480 | \$4,480 | Trust | | |
| Research Grants | \$528,380 | | SVC Foundation | \$528,380 | |
| Samaritan Trust Fund ² | \$9,489 | \$9,489 | Samaritan Trust Fund | | 350 |
| Scholarships Sudanese Nursing Students | \$3,000 | \$3,000 | SJH | | 10 |
| Scholarships Xavier College | \$13,724 | | SVPHM | \$13,724 | 2 |
| St Mary's Hospital India | \$20,775 | | HSN | \$20,775 | 20 |
| Meals on the Table | | | | | |
| The Wellington | \$13,478 | | SVPHM | \$13,478 | 360 meals pa |
| St Mary's House of Welcome | \$50,484 | | SVPHM | \$50,484 | 13000 meals pa |
| Ozanam House | \$80,333 | | SVPHM | \$80,333 | |
| The Way | \$15,000 | | SVHM | \$15,000 | 3000 meals pa |
| Patient & Relative Accommodation | | | | | |
| SVHS | \$2,920 | \$2,920 | NSW Ministry of Health | | 16 |
| HSN | \$1,045 | \$1,045 | NSW Ministry of Health | | 3 |
| Sisters of Charity Outreach | | | | | |
| SVPHS | \$997,423 | | SVPHS | \$997,423 | |
| SVC | \$302,795 | | SVC | \$302,795 | |
| Volunteer Programs | | | | | |
| SVPHM | \$46,978 | | SVPHM | \$46,978 | 120,000 hours of support provided by over 1,000 volunteers equating to \$2,955,600 p.a. in kind benefit |
| SVHM | \$128,981 | \$128,981 | Department of Health Victoria | | |
| SVHNS | \$46,905 | \$46,905 | NSW Ministry of Health | | |
| SVPMS | \$118,573 | | SVPMS | \$118,573 | |

Notes

1. The Mary Stringer Trust Fund is used to support cardiac patients and their carers who are experiencing financial distress.

2. The Samaritan Trust Fund is used by social work staff to assist patients in need to purchase incidental items to make their hospital stay more comfortable.



Human chain of kindness leaves Gerry walking tall



As footsteps approach his bedroom, Gerry Sokolo quickly moves his bandaged legs to the extreme left of the bed.

He pats the space between him and the wall, beckoning for farm manager Pat Weldon to sit down with a bedtime story.

This is different, thinks Pat. I reckon I'm about to be set up.

Amid the chaos of the dorm-style Children First Foundation's farm in Kilmore, 10-year-old Gerry has had plenty of time to think in the three weeks since his operation.

"How did they cut off my legs?" Gerry wants to know.

Pat is honest, explaining that surgeons cut the skin and sawed through the bone.

"What did they do with my legs?"

He doesn't know, Pat admits, but the doctors are good people and they would have done the right thing by his legs.

"Can I see my legs?"

"No, buddy."

It is as radical a procedure as you can get.

How do you explain to a boy born in the slums of Tanzania that he needs to be flown to the other side of the world to have both legs chopped off?

And that the physical pain he will endure – over two separate operations – will be worth it, allowing him to walk straight and tall for the first time.

"The kids have already worked out in their own mind what's useless and useful to them, I don't have to say much," said orthopaedic surgeon Ian Torode.

Standing has never been possible for Gerry. He was born with the most severe form of the rare lower limb deficiency, tibial hemimelia.

With the shin bone missing in both legs – and consequently no ankle or knee joint – his feet were bent awkwardly upwards and his legs stuck in lotus-position.

Not that it has stopped him getting around.

A can-do attitude, however, can only get you so far in a country where albinos are routinely killed for their body parts, belief in witchcraft is common and child labour is rife.

But Gerry's fate – his chance of a future where he can get a meaningful job and walk proud – has been secured through a human chain of kindness.

This chain started in the shanty towns of Tanzania's largest city of Dar es Salaam, where Gerry was first rescued and adopted into the home of a local business woman.

The chain then stretched to the Children First Foundation in Kilmore where he has spent the past two years preparing for and recovering from surgery, cared for by volunteers.

On a flight donated by Emirates, it stretched to a cardiac theatre in India where surgeons stabilised his failing heart so he could survive the leg surgery.

The chain then linked to an operating table at St Vincent's Private Hospital in East Melbourne where his legs were removed by theatre staff who had donated their time for the procedure.

The final links were added by Fitzroy prosthetist Richard Fejer who handcrafted the legs at his Orthopaedic Appliances workshop, and by students of St Monica's College and St Peter's Primary School in Epping who raised \$5000 for Gerry's care.

Gerry had been told about Ahmed Kelly by his guardian before he arrived in Australia.

Ahmed was proof that not only did life go on after losing your legs, but life could be exceptional.



Exposure to chemical weapons in Iraq had left the 21-year-old adopted son of Children First Foundation founder Moira Kelly with no forearms, hands and needing two prosthetic legs.

"Don't say anything," Pat told Ahmed the first time the boys met, "just kick off your legs so he can see them."

Pat watched Gerry studying Ahmed, his eyes wide, scanning Ahmed's body in wonder as they casually mentioned how Ahmed loved swimming, playing football and driving a car.

The spark of what-could-be was ignited. Through this special bond, Gerry came to understand that if he trusted the doctors and worked hard at rehabilitation, his life, too, could be exceptional.

Gerry's pride is evident in his posture. Four months after the surgery, he no longer needs to physically look up at everyone he meets. He can see further.

Pat is teaching him to waltz in the farm kitchen; a slightly wonky one-two-two, one-two-two stomp around the laminated island bench.

The spark of what-could-be was ignited. Through this special bond, Gerry came to understand that if he trusted the doctors and worked hard at rehabilitation, his life, too, could be exceptional.

Gerry has started kicking a soccer ball, the main motivation for him going through with surgery.

As the main obsession of other Tanzanian boys his age, soccer to him signifies normality.

Gerry will return to Australia in about a year to be fitted with longer legs with movable knee joints.

"When I got my first legs I just wanted to run straight away," Ahmed tells Gerry.

"But with patience comes big things, like playing football.

"When I played they called me 'Nails' because I was tough as nails."

Gerry tilts his head to the side, thinking.

"I'm going to be fast and tough," he decides. "I want to be called tough as lightning."

Details: childrenfirstfoundation.org.au
 Story by Brigid O'Connell.
 Photos: Tony Gough and Jason Edwards.
 Reprinted with permission from the Herald Sun, 10 October 2013.

Supporting the work of our partners in care



Understanding and responding to the needs of people is best done face to face and many of our health and aged care services support our community partners in care through donations and in kind support. This enables those services closest to people to deliver care and support that is tailored to the needs of each individual. To this end, our services were proud to be able to assist the following community groups in 2012.

The following community providers assist people in the local community through the provision of friendship, meals, financial aid, budgeting advice, assistance in paying utility bills and advocacy.

Society of St Vincent de Paul Parkville Melbourne
 Donation of \$10,000 by St Vincent's Private Hospital Melbourne

The Wellington
 Donation of \$2,000 by St Vincent's Private Hospital Melbourne

Hotham Mission
 Donation of \$2,000 by St Vincent's Private Hospital Melbourne

Hotham Mission
 Donation of \$2,000 by St Vincent's Private Hospital Melbourne

Hope House
 If you are a woman with children in Brisbane and homeless, you will be competing with some 4,000 other women and children for one of only 43 beds. Hope House was opened by the St Vincent de Paul Society in Brisbane in 2010 to care for women and their children by providing safe and secure access to housing. Last year they assisted 29 women and their children transition into permanent accommodation.
 Donation of \$25,000 by St Vincent's Health & Aged Care

Patients in financial difficulty
 Many of our services care for patients and residents on low incomes who often face additional hardship due to illness and ageing. Our staff often provide assistance to patients through their own generous support buying clothes, shoes, travel cards and providing petrol money to support patients. Donations are made on an individual basis and respond to the needs faced by each person.
 Staff at St Vincent's Hospital Melbourne's 5 West cared for a school teacher who was unable to work due to recurrent head and neck cancer. The woman was unable to communicate due to her surgery. Staff took up a collection to purchase an iPad for the woman, enabling her to communicate with staff, family and friends.
 Cost of donations met by staff of our health and aged care services.

St Mary's Hospital Periyapatna, India
 St Mary's Hospital south west of Bangalore in the Mysore area of India, provides health care services to promote quality of life to the poor and the needy of India's Periyapatna district. The hospital provides necessary care and treatment to all categories of people regardless of their financial status and also to reach out to the rural areas where the medical facilities are not available.
 Holy Spirit Private Hospital Northside was pleased to be able to make a donation of \$20,775 to support the continuing work of St Mary's Hospital.

Outreach to rural communities
 Our services welcome many patients and residents from rural and regional areas into our services, and St Vincent's Private Hospital Toowoomba has been able to take that engagement a step further through its long standing association with Downs & West Community Support, a ministry of the Sisters of Charity. The service offers encouragement and practical assistance to the people of rural and remote Queensland who are severely affected by drought or flood, or family matters beyond their control.
 St Vincent's Private Hospital Toowoomba provides a car and an annual donation to support the work of the Sisters in going out to meet with families in need, providing hampers and financial assistance, linking people in to community and government support and providing care and assistance during times of natural disaster such as the floods in early 2012. Through their work, Downs & West Community Support provided direct assistance and support to 86 families, 660 individuals, 45 primary school students, delivered 560 hampers and covered 43,454 kilometres to bring care and attention to people in need.
 Donation of \$25,000 by St Vincent's Private Hospital Toowoomba

Supporting those living with chronic illness
 Living with chronic illness can not only be physically disabling but impact on people socially and emotionally. Having access to a group that understands and supports you can be critical. The Myalgic Encephalomyelitis, Chronic Fatigue Syndrome and Fibromyalgia Support Association of Queensland draws on the support of St Vincent's Private Hospital Toowoomba in providing premises for the group to work and meet and connect with people in the community experiencing chronic and constant pain.
 In kind donation by St Vincent's Private Hospital Toowoomba

Support for the homeless
 St Vincent's Health & Aged Care supported the annual St Vincent De Paul CEO Sleep Out on the streets of Brisbane to raise awareness and money to support those who are homeless.
 \$5,000 donation by St Vincent's Health & Aged Care

Caritas Australia
 St Vincent's Health Australia makes a donation each year at Christmas to Caritas Australia in lieu of posting Christmas cards.
 \$2,500 donation by St Vincent's Health Australia

Mercy Foundation
 The Mercy Foundation was established by the North Sydney Sisters of Mercy in 1990. It is an organisation committed to social justice and structural change to create greater social equity and inclusion in the Australian community.
 The Mercy Foundation is an independent voice, informed by evidence and current research on the issue of homelessness, its causes and consequences.
 The Mercy Foundation has a special interest in the prevention and impact of homelessness on single women and women with accompanying children and in the implementation of appropriate policy, systems and service responses.
 \$200,000 donation by the Mater hospital

Social Justice through Health

The Social Justice through Health program has been developed by St Vincent's Health Australia as a core part of its strategy to further our mission to care for all, especially those who are poor and vulnerable. Through this program, we endeavour not only to change people's lives, but to change the circumstances that lead to poor health outcomes in specific communities of people.



We recognise that when Jesus reached out to those who came to him, a transformation took place that went beyond physical healing. People were not only restored to physical wholeness, they also experienced hope and were returned to their rightful place in the community. This same inspiration of attending to the needs of the whole person guided the actions of Mary Aikenhead, driving her to adopt a pioneering spirit in the delivery of compassionate care. We too seek to make a difference in the lives of those people who experience poverty, vulnerability and marginalisation by bringing healing to all people in need of care, and by strengthening our society, such that every person is included and contributes to the life of the whole community.

The Social Justice through Health program recognises the powerful connection between the provision of clinical services, medical and social research, and advocacy in health policy. We understand that people seeking health care are subject to the influences of health policy, health care design and delivery, housing, employment, education and geographic isolation. In order to deliver truly person-centred health care, we must therefore not only deliver high quality health care, but work to change those systems that adversely impact the health of individuals and the community as a whole.

We know that there are groups of people in the community who experience poorer health outcomes and, in some cases, significant life expectancy gaps, because they are subject to systemic structural injustices. Social Justice through Health focuses on bringing about long term change in the structural and systemic causes of ill-health caused by poverty, marginalisation and vulnerability.

Given its resources, its physical locations and its internal expertise, St Vincent's Health Australia is focusing its efforts on improving health outcomes for:

- Aboriginal and Torres Strait Islander people and communities,
- People experiencing chronic homelessness, and
- People in the community seeking asylum.

Our efforts in regard to each of these communities are directed through our work in

1. Clinical Care: through the delivery of services and community partnerships committed to bringing about long term changes in health outcomes
2. Research: examining the social determinants of health to improve health services and guide initiatives
3. Advocacy: advocating for and contributing to health and social policy that aims to improve health services for all people, especially those experiencing poor health outcomes

Clinical care

Aboriginal and Torres Strait Islander People Working in partnership to realise equity in health care for Aboriginal and Torres Strait Islander people

The inequities in health outcomes experienced by Aboriginal and Torres Strait Islander people are well publicised. St Vincent's is proud to work in partnership with many Indigenous communities to change this and help these communities to further develop their own expertise and skills in health care delivery and disease prevention.

Aboriginal Health Liaison Officer (AHLO) and Aboriginal Health Network Coordinator (AHNC) roles are established at St Vincent's public hospitals in Melbourne and Sydney.

Staffed by Indigenous people, these staff provide support to Indigenous inpatients in hospital and coordinate care with local providers to ensure that patients are linked in to ongoing support on discharge. AHLOs and AHNCs also play a significant role in linking mainstream health services like St Vincent's with Indigenous health care providers.

AHLOs and AHNCs are also a vital resource of expertise providing cultural awareness training and advice to their fellow health care colleagues, ensuring that care provided to Indigenous people is delivered in a manner that is culturally sensitive and safe.

St Vincent's Hospital Melbourne is grateful for the partnership established with St Vincent's Private Hospital Melbourne in support of the Aboriginal Hospital Liaison program. The private hospital makes an annual commitment of funds which has allowed the program to expand its reach to support Aboriginal patients in the mental health unit. The boost in funding has also meant greater support for Aboriginal people attending outpatient clinics for ongoing care. Prior to this extension of service, the failure to attend outpatient care rate for Aboriginal patients was double that for non-Indigenous patients.

Being admitted to hospital for care can be an anxious time for all of us but for Aboriginal and Torres Strait Islander people it can be particularly stressful. In partnership with the Victorian Aboriginal Health Service (VAHS) – Family Counselling Service, St Vincent's Hospital Melbourne provides five dedicated beds in its mental health unit. This enables the creation of a culturally safe environment for Aboriginal patients requiring inpatient mental health care, and with the support of VAHS' Family Counselling Service, such patients are linked in to ongoing care and treatment in the community following discharge.

In order to ensure that mental health care extended to Aboriginal patients is delivered in a manner consistent with cultural norms and sensitivities, VAHS' Family Counselling Service provides a consultant psychiatrist to work at St Vincent's inpatient mental health unit.

Working in partnership with the community to deliver care and further local expertise is also the model for St Vincent's Campus' services in Redfern and Moree.

The Pius X Aboriginal Medical Service, Moree conducts regular ear, nose and throat clinics for children in partnership with St Vincent's Clinic and St Vincent's Hospital Sydney. The Aboriginal Medical Service cover the costs for flights and the doctors forego their private consulting and operating time to provide the service. Six clinics were conducted during the year offering care to over 60 people.

Similarly, the Aboriginal Medical Service in Redfern has partnered with St Vincent's Clinic to enable patients better access to care through bulk billing specialist services, particularly in the areas of orthopaedics and urology. In order to address the social, cultural and geographic barriers that prevent people accessing care, specialist clinicians from the hospital and clinic attend the Aboriginal Medical Service Redfern on a regular basis and also offer continuing education to the service's local clinical staff. Dr Courtenay an Orthopaedic surgeon from St Vincent's Clinic volunteers his time to conduct the clinics in collaboration with a senior physiotherapist from St Vincent's Hospital.

Well over 100 patients have been assessed and treated by the clinicians since the inception of the clinic in 2011 and strong links have been developed between the Aboriginal Medical Service and the orthopaedic services team at St Vincent's Hospital Sydney.



Guests of The Sister Francesca Healy Cottage.



People experiencing chronic homelessness

A network of care

People experiencing homelessness often have complex chronic diseases and can have problems gaining access to appropriate health care. There is much evidence which shows that people who are homeless tend to seek assistance at hospital emergency departments in a crisis rather than accessing early care through a local doctor. **This means that people are often more unwell and more socially isolated by the time they encounter care than might otherwise be the case.**

The Brisbane Common Ground Integrated Nursing Service is a collaboration between St Vincent's Private Hospital Brisbane, Mater Health Services Brisbane and Micah Projects providing a nurse coordination service at the Brisbane Common Ground housing initiative. Half of the tenants at Brisbane Common Ground have been chronically homeless and half have low incomes.

Micah Projects is a community organisation based in West End, Brisbane, that provides a range of support and advocacy services to individuals and families experiencing homelessness.

Since its establishment in January 2013, the nurse coordination service has engaged with the tenants at Brisbane Common Ground and connected many with health care providers. The statistics of the service show that the nurses have been able to assist many tenants to actively address health care issues. This has meant that hospital admissions and ambulance call outs have been minimised. In most cases the ongoing management of illness has been in relationship with the nurses, General Practitioners and specialist services.

The Sister Francesca Healy Cottage

The Cottage is a short term hospital in the home facility that enables homeless people to receive holistic health care in a setting that is conducive to recovery. The Cottage, the first facility of its kind in Australia, provides an opportunity to reassess the health, accommodation and social support needs of patients in a safe and supportive setting.

The Cottage provides a range of services to its clients including meals and support with daily living activities such as showering and dressing. Nursing services are provided on a 24 hour on call basis through the Hospital in the Home network. St Vincent's Hospital Melbourne provides pre and post admission medical support including outpatients clinics, imaging and pathology, and emergency medical care through the hospital's emergency department. The hospital also provides access to allied health care including dietitians, podiatry, social work, housing support networks, mental health clinicians and drug and alcohol counsellors.

Staff at The Cottage can also help clients with health education including diabetes management, wound care, managing anticoagulant therapies, assistance with follow up medical appointments, and linking clients in to an ongoing care network.



NSW Health Minister Jillian Skinner with Tierney House Guest.



Tierney House Manager, Cameron French (right) and Johnny.

Tierney House

Tierney House is a new 12 bed residential unit adjacent to St Vincent's Hospital Sydney, providing those experiencing homelessness time to address their broader health issues through the provision of additional health support.

Tierney House care coordination, assessment, treatment and referral is provided on an outreach basis to chronic rough sleepers. The team works in partnership with Neami National's Way2Home Support Team to provide holistic support for clients' health and housing needs.

'Hope to the Homeless', a fundraising initiative of St Vincent's Hospital Sydney, raises funds to ensure each resident of Tierney House receives with a care pack on admission. This care pack includes clothing, toiletries and footwear.

Prague House

Prague House is a 45 bed low level care facility funded by the Department of Health and Ageing.

Many residents have a mental health diagnosis, an alcohol related brain injury or both, which means that they are often turned away from mainstream aged care services. Most residents have a background of homelessness, have little or no family support and few, if any, friends. Almost all of the residents are financially disadvantaged. The residents are younger than a traditional aged care facility with the average age being 67 years old.

Prague House is home to residents. Prague House has close working relationships with GPs, case workers and inpatient services. Support is provided by staff and volunteers to attend appointments with residents, accompany them shopping and participate in the community. Residents are able to choose from a wide variety of activities that are specifically designed to meet individual needs.

Homeless Health Care Coordination

When people with a history of homelessness do access care, it presents an important opportunity to engage people in a better network of care to support their ongoing health and well being.

St Vincent's Hospital Sydney has created a Homeless Health Coordinated Exit Planner who works in the emergency department. The coordinator provides comprehensive assessment and care coordination to homeless people and those at risk of homelessness, especially people with complex care needs. Ongoing support can then be delivered in collaboration with local health and community services.

The Access, Liaison and Early Referral Team (ALERT) at St Vincent's Hospital Melbourne provides a similar service bridging care provided to patients in the emergency department with community based care for people who are homeless. Whilst ALERT provides allied health, care coordination and/or discharge planning to all patients in the emergency department who require care, a feature of the model is that it enables those with complex needs to be identified and assessed in the emergency department and then managed and supported in the community, under the care of a single team.

Particular attention is paid to those clients who present frequently to the emergency department, in addition to those with issues of mental health, substance use, complex care, aged care, homelessness, disability and victims of assault and violence.



Members of the Inner City Health Program team (L-R): Ruth Daniels, Sarah Coconis, Amy Cason, Angela Cooper, Tess Anderson, Liane Davison, Selina Thomas, Jeanette Cudmore and Raquel Zilberman.

Having a home is a preventative health care measure⁵

Having access to a safe and secure home is a significant factor associated with many complex care needs such as mental illness, addiction and chronic illness. For people with complex health care needs, securing safe, affordable housing on an ongoing basis is often a greater challenge than for others. So when people experiencing homelessness connect with one of our health care services on an inpatient, emergency, outpatient or community basis, St Vincent's seeks to assist people to access housing support.

Our health services partner with a number of community housing and support agencies in order to streamline care and take advantage of local networks and expertise. Working in partnership with the person experiencing homelessness and other support agencies, we can help people to access and remain in safe housing, and also link in to ongoing health care.

The Health Outreach Team of St Vincent's Hospital Sydney provides outreach health care through medical, nursing, podiatry and psychiatric clinics and individual follow up at a variety of locations appropriate to individual client needs. This includes local drop-in centres, hostels, churches and public spaces. This team includes the Medibeat nurse, in partnership with Mission Australia.

The Clarendon Homeless Outreach Service (CHOPS) is a program conducted by St Vincent's Hospital Melbourne's mental health unit to engage people with mental illness and assist them in maintaining treatment, improving health outcomes, and gaining access to secure accommodation.

People with mental illness are supported by a team of clinicians working on an outreach basis seven days a week.

Similarly, staff at St Vincent's Melbourne work in partnership with local housing support providers in the Doorway Program, the Housing Mental Health Pathways Program and the MIND/City of Yarra Housing Program. Each of these services sees a range of community housing providers working in collaboration with clinical mental health staff to ensure that people with mental illness who are homeless, or at risk of homelessness, are able to access and remain in housing that is supportive of their needs. Working in partnership not only means that people can access accommodation but with a shared referral network, people are also linked in to ongoing clinical care.

At St Vincent's Hospital Sydney, staff have similarly engaged in a number of innovative programs and partnerships to serve those in the local community experiencing, or at risk of, homelessness. The Way2Home program provides care coordination, assessment, treatment and referral on an assertive outreach basis to chronic rough sleepers. The team works in partnership with the Way2Home Support Team of Neami National⁶ to provide holistic support for clients' health and housing needs.

'Make a House a Home' provides practical support to clients of the Homeless Health Service providing kitchenware, soft furnishings or a television as they move into accommodation. Clients are able to choose from a selection of styles, in order to personalise their new home.

6. Neami National is a non-government mental health organisation that provides rehabilitation and recovery support to people with a serious mental illness who require assistance in areas of skill development, social contact and housing.

People in the community seeking asylum

The human cost of care

People living in the community seeking asylum face a range of social and cultural challenges in addition to the legal and bureaucratic hurdles associated with their visa application. Many such people are ineligible for Medicare and prevented from accessing employment. This means that people seeking asylum often defer seeking health care until the situation is critical given that they must bear the full cost of any medical assistance or treatment they may require.

As such, helping people seeking asylum to better care for themselves and their families through accessing preventative health care and education is one way of giving people greater independence and avoid incurring costs. Through their association with the Asylum Seekers' Centre in Newton, staff from St Vincent's Private Hospital Sydney provide health education to people seeking asylum in the areas of mental health and wellbeing, kidney health, nutrition, oral health, men's and women's health, resuscitation and basic life support, and surviving the Australian summer.

If people require intervention and treatment, the Inner City Health Program's (ICHP) Primary Care Team provides nursing and health promotion support to people accessing the Asylum Seekers' Centre of NSW. The Asylum Seekers' Centre provides front-line support and advocacy for community-based asylum seekers. In addition to extreme social disadvantage, many individuals presenting for care suffer a range of co-existing

health disorders which may have been previously untreated. The ICHP Primary Care Team is committed to justice and equity in health care for this disadvantaged population and will continue to provide health care support on an ongoing basis.

Further assistance to people seeking asylum is provided through St Vincent's Clinic and St Vincent's Private Hospital Sydney. Several doctors at the Clinic provide pro bono specialist medical services to clients, and the hospital's imaging and pathology department waives the costs of associated medical tests including pathology, radiology, ultrasound, CT and MRI, and Nuclear Medicine services.

People seeking asylum often defer seeking health care until the situation is critical given that they must bear the full cost of any medical assistance or treatment they may require.



Davinea O'Brien and Alysha Secombe perfect their resuscitation skills.



Left to right: Alysha Secombe (Aboriginal Nursing Cadet) and Davinea O'Brien (Aboriginal Nursing Cadet), Ben Gorrie (Program Coordinator) and Jason Coombes.

Advocacy

Aboriginal and Torres Strait Islander people and Communities

St Vincent's recognises that health outcomes for Aboriginal and Torres Strait Islander people are significantly improved when health care is delivered by, and in partnership with, Aboriginal and Torres Strait Islander people and community services.

In light of this, St Vincent's offers a number of cadetships in health care to support the growth in the numbers of Aboriginal and Torres Strait Islander people as clinicians. This will mean that more Aboriginal and Torres Strait Islander people will be available to deliver care within their own communities, and will also be available to educate non-Indigenous clinicians in the delivery of safe, culturally appropriate health care.

St Vincent's Private Hospital Sydney held the second intake of the Aboriginal and Torres Strait Islander Nursing Cadetship Program in 2013. Four nursing cadets were recruited into the program, to join the two cadets who started in 2012. Through the program, Bachelor of Nursing students are employed at St Vincent's Private Hospital each year.

St Vincent's Private Hospital Melbourne in partnership with the Australian Catholic University offers an Indigenous Nursing Scholarship on an annual basis. The scholarship is offered to Indigenous nursing students studying in the Bachelor of Nursing, Bachelor of Midwifery, or Bachelor of Paramedicine/Bachelor of Nursing course at the Melbourne or Ballarat campus of ACU for the remaining duration of their studies from the year in which they apply successfully, up to the length of a standard three-year full-time nursing course. The scholarship is valued at \$5,000 per annum.

St Vincent's Private Hospital Sydney held the second intake of the Aboriginal and Torres Strait Islander Nursing Cadetship Program in 2013. Four nursing cadets were recruited into the program, to join the two cadets who started in 2012. Through the program, Bachelor of Nursing students are employed at St Vincent's Private Hospital each year.

The Victorian Aboriginal Nursing Cadetship Pilot Program aims to increase the number of Aboriginal nurses employed in Victorian health services by providing a cadetship as part of the Bachelor of Nursing course. The pilot program at St Vincent's Melbourne included four Aboriginal Cadetships and provided support and paid clinical placement experience for up to 12 weeks in a variety of clinical areas within St Vincent's, in addition to the usual clinical placements that are part of the Bachelor of Nursing program.

Changing the culture of nursing

One of the cadets at St Vincent's Hospital Melbourne, RMIT student Jason Coombes, has featured in an edition of the *Koori Mail*. As one of Australia's first Indigenous flight attendants and after 15 years with Qantas, Jason decided he needed a career change. Jason wanted to give back to the Aboriginal community by improving health outcomes for Aboriginal Australians. Jason, who is now a graduate nurse at St Vincent's, said the cadetship enabled him to gain valuable first-hand experience as a nurse and he praised the culture at St Vincent's.

"At the end of it all I would love to be working at St Vincent's because the hospital has such a fantastic connection with the Koori community here in Melbourne," Jason said. Jason is also urging other Aboriginal people to consider a career in nursing. "We definitely need more Aboriginal nurses."

The clinical work placement was also to the benefit of St Vincent's and our patients by increasing the skills of nursing staff through teaching and exposure to cultural awareness. The clinical support and mentoring by the Project Officer, an Aboriginal registered nurse, was well received by the cadets. The cadets said that they felt well supported during their placement and enjoyed discussing the Project Officer's career path and sharing experiences of student life.

The program has proven successful in increasing the number of Aboriginal nursing staff at St Vincent's, in achieving good outcomes and experiences for the cadets, and in raising awareness of Aboriginal culture throughout the hospital.



Jason Coombes putting care into practice.

One of the cadets RMIT student Jason Coombes has featured in an edition of the *Koori Mail*. As one of Australia's first Indigenous flight attendants and after 15 years with Qantas, Jason decided he needed a career change.



Nareeba Moopi Moopi Pa Aged Care Hostel

Nareeba Moopi Moopi Pa Hostel has been providing care and accommodation to the aged since 1994.

It is managed by the North Stradbroke Islander Housing Co-operative Society Ltd. North Stradbroke Island has an ageing population and Moopi is the only aged care facility on the island and currently has 14 high/low care places. Moopi is seeking 16 high care places and a capital grant of \$5.1 million to expand the existing facility. This will result in Moopi becoming a 30 bed facility but will only address an immediate need.

The immediate area of North Stradbroke Island is the logical choice for residents seeking aged care services in their local community. Following Native Title determination in July 2011 there have been increasing numbers of people returning to the area. It is estimated that there has been an eight per cent increase in the Indigenous population locally. These people are an important part of the local Quandamooka community of North Stradbroke Island and an important objective is to address the needs of the Indigenous people of the Quandamooka area.

The research, knowledge and consultation provided by St Vincent's Care Services, conducted in partnership with the local community, demonstrate a need for additional residential care beds in the area to service the current and future needs of the Brisbane South region, particularly for Aboriginal and Torres Strait Islander people.

As part of St Vincent's Care Service's commitment to closing the gap, the proposed initiatives were developed by considering the capability, strengths and opportunities with the Aboriginal and Torres Strait Islanders health and

wellbeing on North Stradbroke Island aged care facility. St Vincent's Care Services worked with the North Stradbroke and Moopi community to lodge a submission under the Aged Care Approvals Round for a capital development grant to establish a further 16 aged care places.

Research

The presence of people living in our community seeking asylum is a phenomenon that has given rise to highly charged political debate. At the heart of this debate are people. These people, and the ways in which St Vincent's might extend care appropriate to their needs, has been the focus of research commissioned by St Vincent's Health Australia in 2012.

Deena's story offers one insight into the complex needs of people seeking asylum.

Deena is a young woman from Afghanistan who is currently living in a caravan in country Victoria with her husband and 7 year old daughter. They have no family in Australia, fleeing their home country after a massacre in their small village and Deena speaks very little English. They are awaiting assessment of their refugee status. Both Deena and her husband have physical and psychological scars from the torture they experienced and feel that even if they wanted to go back to their country, there is nobody left in their community to return to.

Deena experienced increasing headaches that she did not tell anyone about for six months and then collapsed while dropping her daughter off at school one morning. She was taken to the local hospital where a CT of her brain showed

what appeared to be a tumour. Although Deena was ineligible for Medicare, she was able to receive inpatient care at the local hospital under the Victoria Government fee waiver scheme and was referred to St Vincent's Hospital Melbourne for surgery to remove the tumour. She was transferred via ambulance (also covered under the scheme) and her husband and daughter were driven to meet her in Melbourne by a member of the local community. Deena's surgery revealed a malignant brain tumour secondary to breast cancer.

The day after her admission she was seen by one of the cancer social workers with an interpreter. She stated that she was so shocked because she has had headaches ever since leaving her country and thought it was best not to tell anyone. In assessing her living situation the social worker learns that Deena's husband has been doing casual labouring in the town where they have been living. They have been allowed to stay in a caravan owned by a member of a local church organisation and have also been given support with food parcels and clothes organised by the local school their daughter attends.

Deena states that she has been overwhelmed at the kindness of people in their town but describes living in substandard conditions. They have not had enough money to pay their weekly bills; they do not own a car or any new clothes and have been cold all winter. She says that she feels they are living in limbo. She explains that they have received three overdue accounts this month and that they are fearful that if lawyers get involved it will hurt their chances of gaining refugee status.

When Deena was admitted to hospital her husband and daughter arrived with no money or place to stay in Melbourne. The social work department provided funds for

temporary accommodation but explained that this would not be able to continue indefinitely. Her daughter's school also contacted Deena to say they are concerned about her absence but Deena says she is scared to be alone and does not want her husband to leave.

Deena has had nightmares since she left Afghanistan and they escalate while she is in hospital. She believes that her cancer is a result of her trauma and she exhibits increasing signs of anxiety. She asks the social worker if she can help them to stay in Melbourne, as she wants to be near the hospital.

Deena's story reflects the complex needs of people seeking asylum in Australia. The *Asylum Seeker Health and Wellbeing* study, commissioned by St Vincent's Health Australia, was delivered in September 2012.

In seeking to serve people seeking asylum living in the community, St Vincent's sought to better understand the specific needs of this community, pinpoint the range and placement of existing support services, and identify where we could best direct our efforts in meeting people's health care needs.

The research will assist St Vincent's as we look to partner with agencies presently working with people in community detention, and help determine what services we can and should provide. We want to help those in need of assistance and care today and influence national policy to contribute to long term change.

The *Asylum Seeker Health and Wellbeing Scoping Study* is available to download via St Vincent's website: www.svha.org.au on the News and Publications tab.

Social Justice through Health

| Program | Total Cost | Costs Recovered | From | Net Contribution | Number people served |
|---|-------------|-----------------|--|------------------|----------------------|
| Aboriginal and Torres Strait Islander Nursing Cadetship Program | \$81,964 | \$44,000 | Dept of Education, Employment and Workplace Relations | \$37,964 | 6 |
| Aboriginal Health Liason Officer and Aboriginal Mental Health Liason Officer Programs | \$228,120 | \$50,000 | SVPHM | \$178,120 | 308 |
| Aboriginal Health Network Coordinator | \$98,000 | \$88,000 | Mater (\$5,000), SVPHS (\$5,000), Ministry of Health (\$88,000) | \$10,000 | 177 |
| Aboriginal Nursing Cadetships | \$34,302 | \$31,755 | Dept of Education, Employment and Workplace Relations | \$2,547 | 4 |
| Indigenous Nursing Student Scholarships | \$16,000 | | SVPHM | \$16,000 | 3 |
| Moopi Moopi Pa Aged Care | \$30,000 | | SVPHM, SVPHB, SVCS | \$30,000 | 14 |
| Moopi Moopi Pa Macroplanning Project | \$4,000 | | SVHA | \$4,000 | |
| Orthopaedic Outreach Service Redfern | \$5,250 | | SVC | \$5,250 | 100 |
| Psychiatric Registrar Specialist Training Position | \$130,000 | \$100,000 | Victorian Aboriginal Health Service – Family Counselling Service | \$30,000 | 510 |
| Dedicated beds in mental health for Koori inpatients | \$737,452 | \$737,452 | | | 49 |
| Asylum Seekers Centre Health Education Program | \$3,215 | | SVPHS | \$3,215 | 120 |
| Asylum Seeker Research Study | \$6,126 | | SVHA | \$6,126 | |
| Pro bono care for patients through the Asylum Seekers Centre | \$1,210 | | SVC | \$1,210 | 31 |
| Brisbane Common Ground Integrated Nursing Service | \$50,000 | \$25,000 | Mater Health Services Brisbane | \$25,000 | 62 |
| Clarendon House Outreach Service | \$592,465 | \$256,133 | Department of Health, Mental Health, Drugs and Regions Division Victoria | \$336,332 | 4,640 |
| Doorway Program ¹ | | | | | 10 |
| Homeless Health Coordinated Exit Planning for Emergency Department | \$117,000 | \$117,000 | National Partnership Agreement on Homelessness | | 165 |
| Homeless Health Service | \$984,362 | \$984,362 | National Partnership Agreement on Homelessness | | 2,115 |
| Housing Mental Health Pathways Program ² | | | | | 72 |
| Inner City Health Care Program | \$4,000 | \$4,000 | NSW Ministry of Health | | 92 |
| Make a House a Home | \$5,250 | \$5,250 | Sisters of Charity Foundation | | 103 |
| Medibeat | \$90,000 | \$90,000 | Mission Australia | | 138 |
| MIND/Yarra Community Housing ³ | | | | | 8 |
| Prague House | \$2,046,960 | \$2,046,960 | Department of Health and Ageing | | 54 |
| Sister Francesca Healy Cottage | \$332,812 | \$332,812 | Department of Health Victoria | | 232 |
| Tierney House ⁴ | \$600,000 | \$147,000 | Tierney House Trust Fund | \$453,000 | 128 |
| Way2Home Health Team Program ⁵ | \$981,000 | \$981,000 | National Partnership Agreement on Homelessness | | 338 |
| Social Justice through Health Project | \$147,601 | | SVHA | \$147,601 | |
| Social Determinants of Health Alliance | \$7,272 | | SVHA | \$7,272 | |

Notes

1,2,3. Funds for these programs are held by an external partner

4. Tierney House opened on 24 September 2012, so the number of people served relates to September 2012 – 30 June 2013.

5. Clients' served in partnership with NEAMI

Right: Mandy Punch, Aboriginal Health Liaison Officer, St Vincent's Hospital Melbourne.



Bringing our mission to life each day

Our people bring our mission to life each day, often working outside their roles to ensure that our care is tailored to meet the needs of individuals and their families. Here are some of their stories.



Bev Hassett won a National Volunteer Award.



Hospitality is its own reward

Every Wednesday after lunch, Bev Hassett offers drinks, and sometimes chocolates and biscuits to patients and their families at St Vincent's Hospital Melbourne's palliative care service, Caritas Christi.

Bev has been volunteering as a palliative care nurse at Caritas for over 11 years and this year received a National Volunteer Award from the Prime Minister in recognition of her commitment and dedication to St Vincent's patients.

"I'm absolutely humbled by this," Bev said, after receiving her award.

"Dad died at Caritas several years ago. He had such wonderful care. I started volunteering here because I just wanted to give something back," Bev explains.

Inspired by her experiences at Caritas with her father, Bev and her husband David have sought to provide a bit of luxury at Caritas by donating crystal glassware and a fully stocked beverage trolley, which Bev offers to patients and their families every Wednesday afternoon.

As well as crystal glasses and champagne flutes to celebrate special occasions, Bev and David have provided strawberries and sparkling wine on Melbourne Cup Day, as well as biscuits, chocolates and sweets to patients and their families over the years.

"My father loved to share a drink with us but the hospice was really only able to provide cask wine. Donating good quality alcohol and glassware is our way of helping bring some of the outside into the hospice. It gives patients and their families something to enjoy together and allows them to forget for a short time where they are. It's so important."

As well as crystal glasses and champagne flutes to celebrate special occasions, Bev and David have provided strawberries and sparkling wine on Melbourne Cup Day, as well as biscuits, chocolates and sweets to patients and their families over the years.

As an ex-nurse, Bev also tends to patients as part of her volunteering role at the hospice.

"Throughout my working life, I was focused on getting patients well so they could go home. Palliative care is, of course, very different. But it's not doom and gloom. I find being at Caritas very serene. It's a beautiful place and I am truly privileged to volunteer here."

Bev was presented with the National Volunteer Award at a special lunch arranged by St Vincent's manager of volunteers, Judy Clover. The awards were announced nationally by the Federal Minister for Health on International Volunteer Day on 5 December 2012.

Keeping cool in the city

With Sydney bearing the brunt of record breaking heat in the first few weeks of 2013, our vulnerable locals were at high risk of heat exposure and the associated risks that follow. But thank goodness, there to help them was a small, dedicated team of staff who came together across different disciplines of the Inner City Health Program (ICHP), to coordinate a plan and hit the streets, armed with bottled water, sunscreen, hats and reusable water bottles to give out to those who needed a little bit of extra care on those particularly hot days.

Amy Cason, Manager of the Way2Home team and part of St Vincent's Homeless Health Service, was one of the key organisers of the initiative. Having little time to prepare for such unpredictable weather, Amy and her colleagues quickly organised the purchase of sunscreen, several crates of bottled water and donations of hats and reusable water bottles, ready to beat the heat. In a coordinated plan of attack, they covered areas from Bondi to the CBD to Glebe, checking the spots they know well, where our homeless community are often to be found.

With staff pitching in from the ICHP Primary Care Team, the Mental Health Rehabilitation team, Program for Early Intervention and Prevention of Disability and joining forces with Homeless Health, Amy says "to have staff coming from outside of Homeless Health is fantastic. These are our homeless clients and we are committed to seeing them, but for other staff who have their own cohort of clients to visit, to take the time out of their busy day to come with us is great!"

This compassionate team of 12 made their deliveries in the morning, and followed-up by checking in on people again in the afternoon. On two occasions, staff had to arrange hospitalisation for members of our vulnerable community

who had become seriously unwell, and who may have otherwise gone unnoticed.

And they weren't the only people that were glad to see our team on that incredibly hot day. Amy describes the general reaction, "People were surprised. People were just pleased that someone cared. That someone was thinking about them, someone they'd never met was concerned that they might need assistance."

"It's an amazing demonstration of our hospital's mission. It's so simple and yet so effective, and can mean the world to so many people who are often so isolated and can unfortunately, go unnoticed."

As Amy said, "just having a quick chat and giving a bottle of water, can make a big difference."

This compassionate team of 12 made their deliveries in the morning, and followed-up by checking in on people again in the afternoon. On two occasions, staff had to arrange hospitalisation for members of our vulnerable community who had become seriously unwell, and who may have otherwise gone unnoticed.



Thomas and Anna Anda with their daughter Ashleigh (and teddy bear) at St Vincent's Hospital.



Mark and Jasmine Vickery.



Caring for those who care for others

When health worker **Thomas Anda** was diagnosed with tongue cancer in Papua New Guinea in August, 2012, word spread quickly through his small southern village of **Maia**. Thomas works as an **Extended Health Worker** and his wife **Anna** works as a nurse/midwife in the southern highlands of PNG.

Papua New Guinea has only limited treatment options for cancer patients, and Thomas, like many other Papua New Guineans diagnosed with cancer each year, decided that his best chance of survival would be to seek medical treatment overseas.

"Everyone knows cancer can kill people. I went to the village and told my family and friends about my diagnosis, and from there they spread the word and everyone chipped in," Thomas said.

His local community, family and friends were not wealthy, but together pooled resources and raised around \$30,000 towards his travel expenses and treatment. With that money, Thomas came to Australia. Starting his treatment in Horsham, he was referred to St Vincent's Hospital Melbourne in August for a subtotal glossectomy, neck dissection, tracheostomy and free flap repair as a combined procedure with ENT and the Plastics Unit.

"Everyone knows cancer can kill people. I went to the village and told my family and friends about my diagnosis, and from there they spread the word and everyone chipped in."

Papua New Guinean residents do not have reciprocal rights for health care in Australia and Thomas's funds were limited. St Vincent's nurses and staff worked tirelessly to raise \$3000 with the help of St Vincent's Foundation to contribute towards Thomas's living expenses in Melbourne, and St Vincent's management and Mission department stepped in to waive a substantial proportion of Thomas's medical fees, enabling him to complete his treatment and radiotherapy, thereby saving his life.

Thomas stayed at St Vincent's for a total of six weeks last year and he has recently returned to Melbourne with his wife Anna and daughter Ashleigh for follow up treatment.

"I feel at home here. Everybody has been so friendly and kind to me. I am so thankful to everyone across the hospital. The care has been A1, more than A1," Thomas says of his time at St Vincent's.

"When I returned after my initial treatment I had an audience with the whole village at our home. Everybody wanted to hear what had happened in Australia, about the nurses who had looked after me, about the radiotherapy. They were very impressed and happy to see me alive. They were glad I made the choice to go to Australia.

"Many in my village didn't say anything; they were just in tears that I was alive. They had been praying, this was a blessing."

Realising a dream

With less than two weeks left to live, cancer sufferer **Mark Vickery** had only one dream – to marry the love of his life.

When doctors told the 27-year-old at Christmas his time was running out, his friends, family and hospital staff rallied to make his dying wish come true.

In 18 hours, working alongside the family, staff at St Vincent's Hospital Sydney fast-tracked obtaining a notice of intention to marry from the courts, secured a donated wedding dress, bridesmaids' dresses, flowers and a cake.

Catering staff made sandwiches and fruit platters for the reception, while nurses dressed Mark in a shirt and tie and decorated the ward with rose petals and pot plants from the hospital's foyer.

At 2.00pm on December 29, Mark married his sweetheart Jasmine from his hospital bed in the waiting area of Ward 9. The couple read their vows surrounded by about 30 friends and family. Their daughters Nakiesha, 5, and Sieana, 3, were the proud flower girls.

"It was the day we'd been waiting for so many years and we finally got there. We finally got the chance to profess our love for one another. It was our rainbow in the middle of the storm," Jasmine said.

That night, Mark told his wife he "knew it was his time."

Four days later, he died peacefully in his sleep with Jasmine by his side.

Looking out for the health of people seeking asylum

Staff from St Vincent's Private Hospital visit the **Asylum Seekers' Resource Centre** and provide primary health awareness education to people seeking asylum who are living in the community once a month as part of a community engagement project.

The aim of the program is to give people seeking asylum a greater understanding of their own health through primary prevention education and to help them adapt to life in Australia.

Some of the aims of the project are to provide nutrition advice and awareness about the common food groups and food handling for healthy and safe nutrition. Other health prevention and awareness sessions cover topics such as kidney health, oral health, healthy heart, diabetes, women's and men's health, and a supermarket tour with a dietitian.

Each session runs for one hour at the Asylum Seeker Resource Centre and St Vincent's Private Hospital staff coordinate, organise and/or present the education session. Approximately 10-15 participants have attended each session.

Any unknown signs and symptoms that the asylum seekers may experience during the health assessment checks are referred to the centre's registered nurse for follow up with the centre's GP.

The key internal clinical departments that work with the clientele are Human Resources, Nursing Education, Dietetics and Nursing Staff as required.



Above: Afonso de Jesus and Eliana Maia.



Top: Afonso de Jesus. Bottom: Afonso, Eliana and hosts.



Above: Micheal Sellings.

Collaborative efforts build healthy lives

Afonso de Jesus and Eliana Maia are two young people from East Timor whose lives have been changed. Afonso is 15 years old and was left with a broken tibia after he was shot as a toddler during the militia violence in East Timor in 1999. His injury was never treated, resulting in a shin bone bent at a 90 degree angle.

Eliana Maia suffered a tuberculosis infection of the right hip some four years ago, leaving her right hip shortened, stiff and inward curving. Walking for both young people was incredibly difficult impacting on their capacity to walk to and from school and their capacity to participate in community life.

Afonso and Eliana met a surgeon from Holy Spirit Northside Private Hospital Brisbane Dr Bill Donnelly when he visited East Timor with his son, a student at St Joseph's College, Gregory Terrace. Afonso and Eliana met Dr Bill through Christian Brother Bill Tynan.

“The children really touched the lives of our hospital staff. Theatre staff fundraised to provide the children with soccer balls, games, sports shoes and money. Their generosity of spirit has been overwhelming.”

“Word in the region got around that a doctor was in the area and each night the local people would line up outside my tent asking for assistance,” said Dr Bill. “This is when Brother Bill introduced Afonso and Eliana to me – their injuries were the most serious of all the children.”

Afonso and Eliana underwent x-rays at Dili Hospital and were flown for surgery to Holy Spirit Northside, which provided the services at no cost. At the time of surgery, Afonso's infected bone was visible through the broken skin. While the surgery for both Afonso and Eliana was reasonably straightforward, the kind of medical treatment required was not possible in East Timor.

This life-changing surgery for Afonso and Eliana means their lives will never be the same. Before their surgery, they had never travelled in a plane, and were not used to running water and electricity. Now Afonso plays soccer and Eliana is jumping, walking and attending school.

Holy Spirit Northside General Manager Daniele Doyle said, “The children really touched the lives of our hospital staff. Theatre staff fundraised to provide the children with soccer balls, games, sports shoes and money. Their generosity of spirit has been overwhelming.

“This truly wonderful outcome for the children has been enabled through the collaborative efforts of a supportive Catholic community. It has been our pleasure to care for Afonso and Eliana and to be involved with this wonderful Catholic network.”

Turning his life around

Michael Sellings is a man with a purpose. He is currently enrolled at Australian Catholic University where he is studying humanities, majoring in film making. When he's not at university, Michael spends time as a gardener, growing his own vegetables. It's a far cry from his life seven years ago.

Michael became well known to staff at the St Vincent's Hospital Melbourne's emergency department in 2006. He regularly attended the department following overdoses and for help with other serious health complications caused by substance abuse and living rough. Michael was completely disconnected from society. He lived in a squat with no identification, no Medicare number and no money or bank account. He was disillusioned with life, suffering from anxiety and depression and harbouring feelings of anger and resentment towards others.

All of this changed when a lengthy hospital admission at St Vincent's forced him to stop and think. Michael had always felt the world was an ugly, dog-eat-dog kind of place. But his time at St Vincent's challenged this.

“People were nice to me on a daily basis,” he recalls. His interactions with staff members who treated him with dignity and respect opened Michael's eyes to how different life could be.

“The specialists would talk about examples from their own lives so I always felt as though I was talking to a person, not just a practitioner. They spoke to me like a fellow human being,” he continues.

St Vincent's is clearly a place where Michael feels comfortable. He smiles and waves as he spots staff members whom he came to know during his care.

“When I was diagnosed with chronic liver disease, I had to have a procedure that in 50 per cent of cases people die. But the gastroenterologists gave me confidence I would come through it.

“And when I was given a colostomy bag, the colorectal surgeon refused to give up on me. He was convinced he could get my bowel working properly again. I had four different surgeries, but we got there and seeing his determination, the fact he wasn't going to give up, was such a positive thing.”

Michael also speaks fondly of staff at The Cottage and the profound support he received from The Way, who were instrumental in his recovery once he left hospital.

It wasn't easy, but with support from St Vincent's Michael got his health back on track and his addictions under control. The Assessment, Liaison and Early Referral Team helped him reconnect with services such as Centrelink and to find stable accommodation.

“My life unfolded as my health improved,” he says.

Michael is now drug free. Instead of allowing his anger to consume him, he uses it as a catalyst to help others. He has already produced two short films about his experience and is passionate about using film to reach others who are marginalised.

“There are so many stories to tell,” he enthuses. “I want to make people think. To take them out of their comfort zone, because it's only when people are outside their comfort zone that they can really see what is going on around them.”



Above: Dr Eugenie Tuck recognised for outstanding service to correctional health.

“None of it would be possible without the extremely dedicated staff who remain faithful and committed, even through the most difficult times. They are wonderful people and I am extremely proud of them.”

In the footsteps of Mary Aikenhead

From their early days where they tended to the women in the female factory in Parramatta in the mid 1800s, the Sisters of Charity have prioritised the care for people in prison as core to the delivery of their mission. Often they are surrounded by exceptional medical staff, none more dedicated and beloved than Dr Eugenie Tuck.

St Vincent’s Correctional Health Service Medical Director, Dr Tuck, was recently presented with the Catholic Social Services ‘Perkins Award for Excellence’ at Parliament House in Canberra.

The award is recognition of Dr Tuck’s outstanding contribution to health care during a 47 year medical career. Dr Tuck began her career in general practice in 1966 and moved into correctional health in 1987, taking a position at Pentridge Prison. In 1997 Dr Tuck joined St Vincent’s, where she has worked as Medical Director for 16 years, managing 80 staff at the 954 bed health facility at Port Phillip Prison in Laverton.

Correctional health medicine is recognised as one of the most difficult working environments in health care, with some of society’s most disadvantaged and marginalised people, many of whom have complex physical and mental health needs.

“Patients are separated from their family and friends. As well as dealing with their medical issue, they are also dealing with feelings of detachment, vulnerability and fear,” Dr Tuck said.

“It can be a difficult and confronting place to work. I’ve seen some staff last one day, but if you are comfortable with

yourself and working in this environment, then you can really make a difference in peoples’ lives.”

Throughout her career, Dr Tuck has actively sought to assist prisoners to better integrate back into the community upon completion of their sentences. Dr Tuck educates patients on infections such as Hepatitis C, helps them with mental health issues to give them the skills to better manage their behaviour and works with drug addicted patients to become drug free.

“I am eternally grateful for the opportunity I was given to join the St Vincent’s team and deliver care to these patients. These are people that the community would much rather forget about, but St Vincent’s values of compassion and justice extend to all people, and I have seen the power of these values to turn lives around.”

Dr Tuck has been instrumental in transforming the way in which correctional health services are delivered across Victoria through her contributions to the Corrections Health Board of Victoria, the Kirby Review of the Victorian Prison System and the establishment of the Opiates Substitution Therapy Program and Hepatitis C Treatment Program.

Dr Tuck retired in August 2013, and her presence will be sorely missed by staff across St Vincent’s and in the broader health community. After 47 years in health care, 16 years at St Vincent’s and an enviable reputation for excellence in her field, Eugenie remains deeply humble and prefers to deflect praise on to her colleagues.

“None of it would be possible without the extremely dedicated staff who remain faithful and committed, even through the most difficult times. They are wonderful people and I am extremely proud of them.”

Our partners in care

Sisters of Charity Outreach Sydney

Sisters of Charity Outreach, a work of the Congregation of the Sisters of Charity based at St Vincent's Clinic Sydney, is committed to supporting people in need through the active participation of trained volunteers and staff. Outreach is a compassionate, diverse service supporting the vulnerable in our society, with an emphasis on women and families.

Outreach is committed to providing holistic care and being a human presence through its service of education, hospitality, counselling, visiting, transport and referrals. Outreach endeavours to be a voice for the voiceless.

Sisters of Charity Outreach Toowoomba

Established in 1996, Sisters of Charity Outreach continues to serve the people of Toowoomba and the Downs and West regions. The Outreach team works in partnership with St Vincent's Private Hospital Toowoomba in response to supporting the community, especially those who are disadvantaged or marginalised.

Outreach volunteers visit people in the community who are unwell, bereaved or alone, and also visit residents in aged care facilities and boarding houses. Volunteers conduct English conversation groups for local residents from 16 different language groups. The service also supports people with chronic illness and local Aboriginal and Torres Strait Islander youth.

Curran Foundation

The Curran Foundation was established in 1984 in response to funding shortages for health services at the St Vincent's Hospital Campus in Darlinghurst, Sydney. At that time, the hospital's transplant service was in hiatus due to lack of funding.

Recognising how funding shortages could compromise patient care, staff morale and clinical innovation, the Curran Foundation was established to create an endowment whereby financial support could be provided in perpetuity to the hospital.

The Foundation has provided over \$18 million in grants to St Vincent's since its inception and maintains the endowment. In 2013, the Curran Foundation was renamed the St Vincent's Curran Foundation and continues its mission to foster excellence and innovation in patient care, research and clinical education across St Vincent's.

The Curran Foundation provided \$1,506,440 in support to St Vincent's Hospital in 2012.

Friends of the Mater

Friends of the Mater offer ongoing support in the form of fundraising for the Mater hospital. In 2012 they raised funds to support research into the areas of metastatic melanoma, chemotherapy and quality of life, mastectomy and post-mastectomy treatments, patient wellness, anaesthetic techniques, multiple-ligament knee reconstruction, diabetes and surgical oncology.

Friends of the Mater provided \$703,046.65 in support of the Mater in 2012.

Mater Lives Committee

The Mater Lives Committee was formed in 1985 to raise the profile of the hospital being built at that time by the Sisters of Mercy. The Committee continues to raise funds in support of the hospital's work including the refurbishment of the hospital foyer, the construction of the Mater Healing Garden and purchase of medical equipment including the central foetal monitoring unit used in the maternity ward.

Mater Lives Committee provided \$64,430 in support of the Mater in 2012.

St Vincent's Hospital Little Shop

The Little Shop packs a big punch. Located in the foyer of St Vincent's Hospital Sydney, the efforts of the shop's volunteers helped fund the hospital's state-of-the-art Hybrid Catheter Laboratory in 2012. Representing the latest technology available, the facility is a combined operating theatre and cardiac catheter laboratory. The new technology and integration of procedures provides a new level of accuracy and allows treatment for complex cases and high risk cardiology patients. This acquisition means faster, more accurate and far less invasive treatment for our patients.

St Vincent's Curran Foundation responded generously to the plea for assistance, contributing significant funding towards the purchase, however there was still a shortfall. Thank goodness for the kindness and generosity of 24 volunteers who staff our Little Shop, because it was their contribution that filled the gap.

The Little Shop contributed \$150,000 to St Vincent's Hospital Sydney.

Right: Amanda Tunstall, member of the 'Connections' Aboriginal Women's Art Therapy Group, St Vincent's Hospital Sydney.



Credits

Design: Holy Cow! Design & Advertising.

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**ST VINCENT'S
HEALTH AUSTRALIA**

UNDER THE STEWARDSHIP OF MARY AIKENHEAD MINISTRIES