

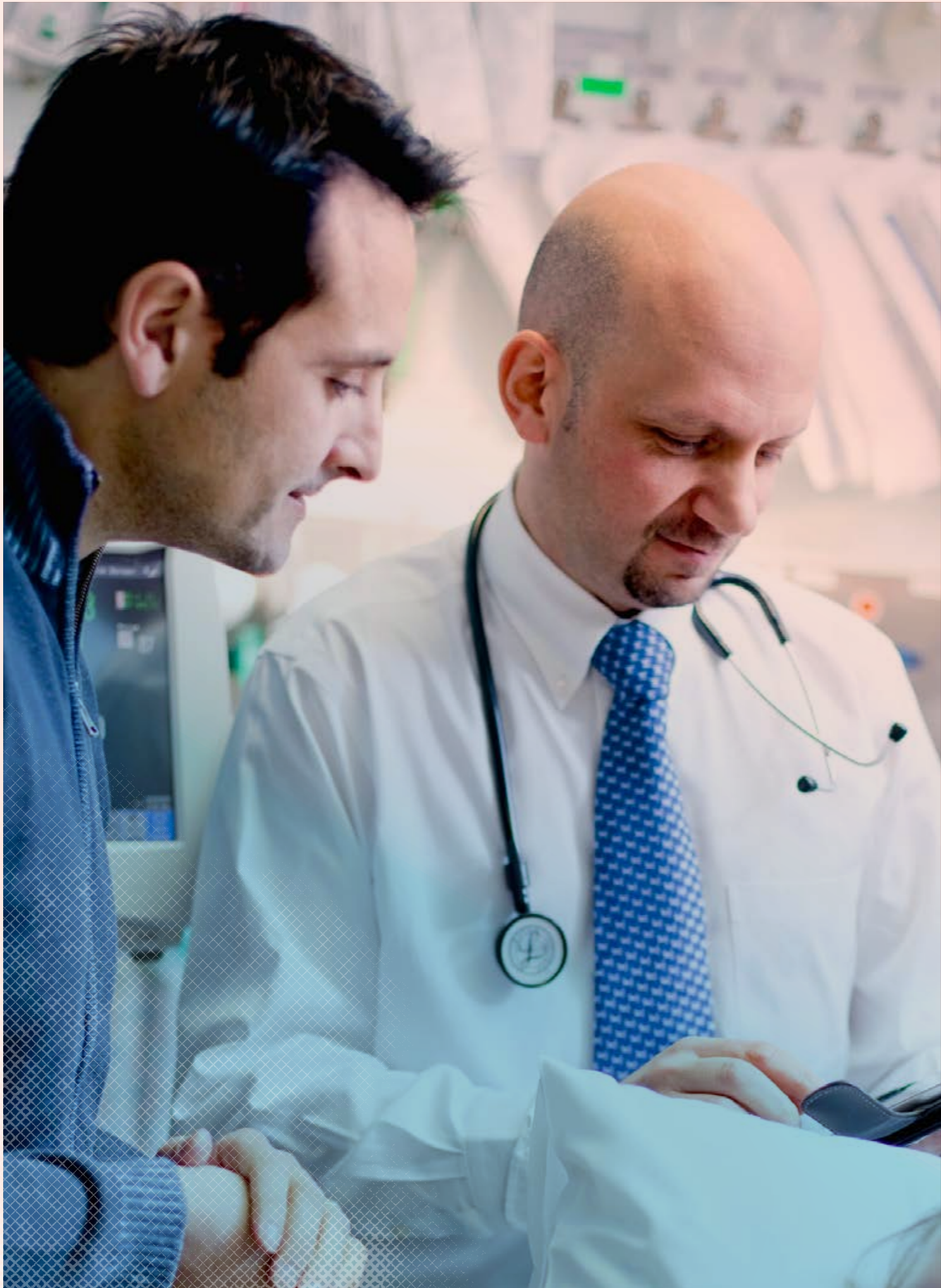


Epworth

*care* –  
**FULLY**

EPWORTH  
HEALTHCARE  
ANNUAL REPORT  
2014





*To treat a patient*

**CAREFULLY**



*is to address*

**ALL ASPECTS**

*of their*

**PHYSICAL AND EMOTIONAL**

*wellbeing*



*It's about*

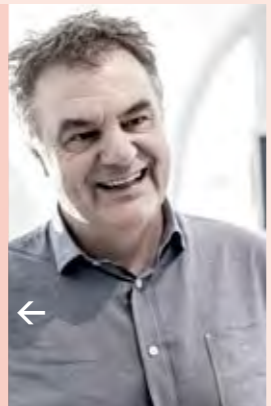
**DIGNITY COMPASSION & RESPECT.**



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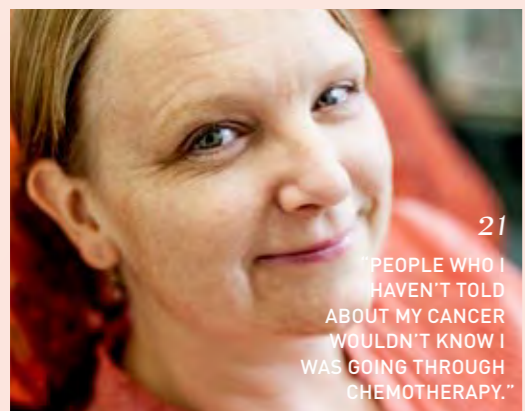


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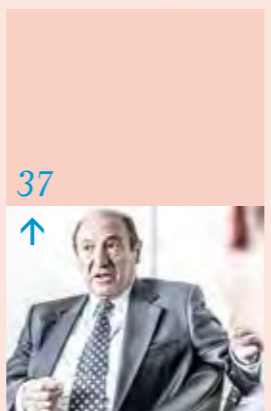
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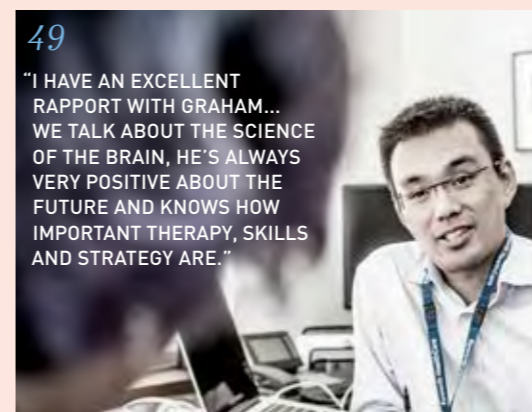


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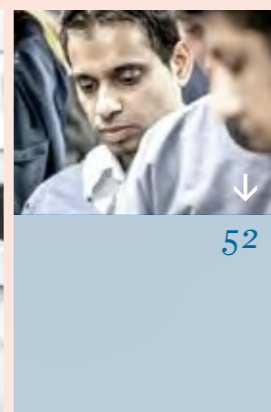


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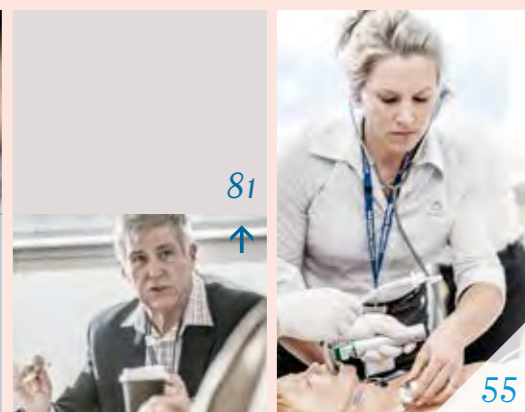
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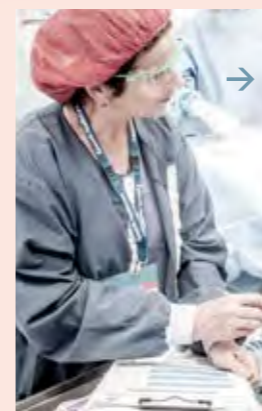
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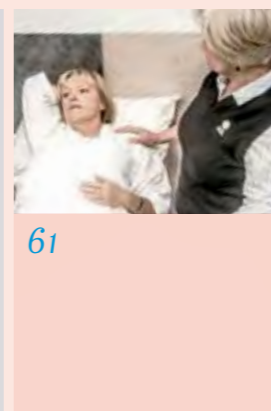
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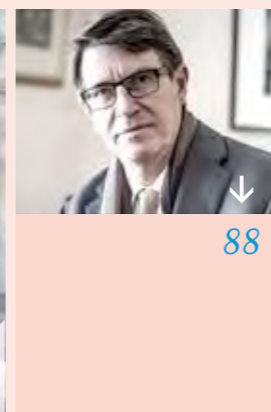
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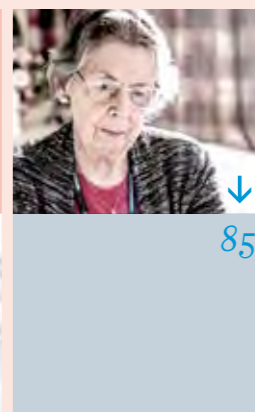
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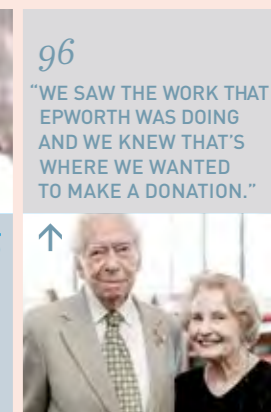
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## About Us



### CONTINUING OUR TRADITION OF PATIENT CARE

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

All aspects of Epworth's development during this time have been about creating improved facilities and services, comprehensive clinical education and world-leading research to improve patient outcomes.

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

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

More recently, Epworth Pathology has collection centres at every Epworth site and our new partnership with Sonic Healthcare and Epworth Medical Imaging, provides patients with access to advanced medical imaging services at Epworth Freemasons and Epworth Camberwell. Likewise, Epworth's new mental health service, Epworth Clinic, provides comprehensive mental health care and rehabilitation from its base at Epworth Camberwell.

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

Epworth's commitment to research as a means to continually improve patient outcomes is also undertaken in partnership with leading universities and research bodies within Victoria, Australia and worldwide. Research activity at Epworth is also supported by the Clinical Institutes, the Victor Smorgon Epworth Education and Research Institute, the Clinical Trials and Research Centre and Epworth's affiliation with the Cleveland Clinic.

For more than 90 years patients and doctors alike have chosen Epworth. Today Epworth is setting the standard for private healthcare in Victoria – for the next 90 years and beyond.





## President's

### REPORT

The 2013/14 financial year was a period of improving the care we provide our patients through extending our reach and services, enabling our staff and doctors to be their best, delivering excellence in clinical services and building the facilities that support these goals.

Epworth's new mental health service, Epworth Clinic, has provided Victorian patients with a 63 bed facility and team of highly-experienced consultant psychiatrists, mental health nurses and allied health staff. The clinic, located at Epworth Camberwell, creates unique treatment programs tailored to individual patient needs.

Our first medical imaging service, Epworth Medical Imaging, in partnership with Sonic Healthcare, has grown significantly since its launch. With sites at Epworth Freemasons and Epworth Camberwell, the service is providing our patients with the latest in diagnostic imaging that is producing excellent results.

During the 2013/14 financial year, Epworth has broadened its horizons to increase collaborations with leading medical research institutes, universities and research groups. Our partnership with the Ovarian Cancer Research Foundation (OCRF) has allowed cancer researchers direct access to Epworth clinical facilities, to help expedite lab-based research into better outcomes for patients.

A Commonwealth grant of \$6.4 million in 2013 is supporting the work of the Epworth Prostate Centre into 2017. These funds will help to translate research into more effective and efficient diagnosis, prognosis and treatments for prostate cancer – the most commonly diagnosed cancer in Australia – and deliver substantial benefits to patients, their families and the community.

Likewise our continued investment in our facilities ensures we are able to meet our strategic research and teaching objectives, for the benefit of our patients.

Our shared vision with Deakin University to develop an academic teaching hospital for the Geelong region is being realised, with the project achieving significant progress in 2013/14.

This will be a world class health precinct; delivering a new approach to healthcare, teaching and research incorporating purpose-designed training programs and integrating learning facilities within clinical areas of the hospital.

New consulting suites and retraining centre at Epworth Hawthorn and the refurbished rehabilitation Unit B at Epworth Camberwell have significantly broadened and enhanced the service we provide our rehabilitation patients.

Likewise the many milestones reached in our redevelopment of Epworth Freemasons and Epworth Richmond in 2013/14 are moving Epworth closer to delivering the advanced clinical and diagnostic facilities required for the changing needs of tomorrow's patients.

As part of our process to periodically review the Strategic Plan, the Board and Executive are currently working to build on and refine the plan to further reinforce our commitment to our patients. The Epworth Strategic Plan 2015–2017 will centre on creating a clear vision of, and a shared commitment to our patients, with a focus on care and experience, research and teaching

Our Group Chief Executive, Alan Kinkade and Executive team are working to articulate the agreed strategic priority areas into goals, objectives, actions and measures. Epworth's revised Vision for the next three years involves creating the Epworth Experience for our patients through caring with excellence, compassion and dignity. At the core of Epworth's refreshed Purpose remains a dedication to improving the patient experience, their health and wellbeing, through integrating clinical practice with education and research.

The Board farewelled two members during the 2013/14 financial year, after five years each of dedicated service to the organisation.

Mr Peter Hay retired from his Board position and also as a member of the Finance Committee in October 2013. Peter commenced his role with the Board of Management in August 2008.

Ms Judy Leitch retired from her Board position and as a member of the Audit and Compliance Committee and Chair of the Patient Care Committee in November 2013. Judy commenced on the Epworth Board of Management in September 2008.

Both Judy and Peter provided sound advice, guidance and support during their time on the Board and I extend my sincere thanks to them on behalf of the Board.

In November, we welcomed Ms Janet Matton to the Epworth Board of Management and also as a member of the Finance Committee and Patient Care Committee. Janet previously held the role of Vice President of Operations and Transformation for IBM Australia/New Zealand and brings to Epworth her extensive international experience in the IT industry and in business management.

Dr John Zelcer joined the Epworth Board of Management in April 2014 and also as member of the Patient Care Committee. John is a medical practitioner and healthcare strategy consultant whose distinguished record of service spans more than 35 years, covering the private, public and not-for-profit sectors.

As a not-for-profit organisation, we rely on the support of our donors, beneficiaries and ongoing fundraising efforts to ensure we are able to continue caring for our patients well into the future. The Epworth Medical Foundation has facilitated a tremendous level of support for the organisation in 2013/14 and I would like to thank them for their efforts.

I would also like to thank Group Chief Executive, Alan Kinkade and the Executive team for their hard work and all of our staff and doctors who deliver each day on our commitment to excellence in patient care.



**Mrs Janet Latchford**  
President

## Group Chief Executive's

### REPORT

This year has been one of growing reach in service provision while laying strong foundations for the future with a focus on improving our patient experience and their journey through Epworth.

We continue to recognise the changing needs of our patients and the need to provide new facilities to enable our doctors and staff to provide the best care. During the year we:

- » Commenced construction of the Pod 4 development in Erin Street, Richmond. This will be operational in early 2016 and provide a new emergency department, new ICU and CCU departments, six new operating theatres including a hybrid theatre as well as over 111 single inpatient rooms.
- » Commenced the \$59m redevelopment of Epworth Freemasons. The first stage includes a replacement of major services' infrastructure and an expansion and rejuvenation of our Clarendon Street theatre complex. We also commenced planning for a second stage development, which will see enhanced cancer services as well as additional consulting rooms delivered into the future.

Historically, like many other private hospitals, Epworth's pathology, radiology and radiation oncology services were provided by third parties. In some cases these were different across the hospitals and did not offer the range of services required by Epworth nor did they align with our teaching and research agenda. We have worked over recent years to create Epworth Pathology and Epworth Radiation Oncology and have further developed and improved our wide range of services as a result. Epworth Radiation Oncology introduced the Novelis TX™ stereotactic radiation machine – a first in the Australian private hospital sector. This allows the delivery of higher doses of radiation in a shorter treatment time destroying cancerous cells while minimising exposure to surrounding healthy tissues.

In December 2013, we launched Epworth Medical Imaging, with our first site at Epworth Freemasons. We have installed state of the art equipment offering a greater range of modalities for our patients. One such example was 3D breast imaging technology. This technology increases cancer detection by more than 27 per cent with early detection significantly improving survival rates. We have been successful in appointing a first class team of doctors and staff to this service. In May 2014, we commenced our second radiology service at Epworth Camberwell.

We also extended our reach as a service provider with the launch of our inpatient mental health service, Epworth

Clinic, at Epworth Camberwell. The service has developed significantly in the subsequent months and has proven to be an invaluable addition to Epworth's care portfolio.

Our other great service expansion initiative was the final approval and commencement of construction of Epworth Geelong in April 2014. This \$280m investment is the largest private hospital greenfield development in Victoria and will provide greater access to health services in south western Victoria and further our role as an academic teaching hospital through this partnership with Deakin University.

Our Executive and Leadership teams continue to put a great deal of time and effort into operationalising our Epworth Excellence program. This program continues to build a culture of service and excellence throughout Epworth.

We continue to engage doctors in all aspects of our operation. I acknowledge their passionate commitment to providing excellent care and their tremendous support for the continuing development of Epworth. I would like to particularly thank all the doctors who serve on our Institutes, our many committees and those who provide their time and wisdom in supporting our teaching and research agenda.

This year the Epworth Research Institute honoured influential Epworth doctors by awarding research grants in their name. These named grants will be made in perpetuity and honour the following clinicians:

- » Professor Priscilla Kincaid-Smith
- » Dr Graeme Sloman
- » Professor Brian Buxton
- » Professor Kingsley Mills
- » Associate Professor Joe Tjandra.

Our research activities continue to expand with Epworth increasing participation in a number of national and international clinical studies. The development of partnerships with other research organisations continues to evolve. We are pleased to have entered a partnership with the Ovarian Cancer Research Foundation to collaborate in research at Epworth.

We are focused on the development of our people. Our state of the art Clinical Education and Simulation Centres have facilitated new and improved clinical training programs. The Epworth Scholarship program provides extraordinary opportunities for our staff to undertake studies to advance their knowledge.



Our Leadership and Talent program has seen 60 emerging and operational leaders graduate and our Executive Talent Program has seen three talent program members promoted to senior leadership and executive roles. This year we have invested significantly in elearning, developing innovative and increasingly effective content and systems.

Our community recognised the excellence in care that Epworth provides and we continue to be a beneficiary of generous support, with over \$11m raised by the Epworth Medical Foundation. We have received tremendous support for the Epworth Research Institute raising \$1m at our 2013 Gala Ball to build the corpus to fund future research. We have raised over \$19m towards the Pod 4 development. We sincerely appreciate the ongoing support of our benefactors and the many volunteers who support Epworth's mission of delivering excellence, everywhere, every day.

In October 2013, Australians voted the Sir Aaron Danks gift that enabled Epworth Hospital in Richmond to open in 1920, the top Australian philanthropic gift of all time. This is a wonderful acknowledgment of the impact Epworth HealthCare has had not only within our local community but nationwide.

During the year, we honoured Epworth's tradition and history by commissioning artist Anton Hasell to develop a mural, which has been installed at the entrance of Epworth Richmond. This illuminated imagery celebrates Epworth's journey over the past 94 years.

We extend our condolences and sincere thanks to the families of those who passed away in 2013/14, each has made a significant contribution to Epworth over many years.

- » Brian Hamley AM served on the Epworth Board for 20 years and as President for 10 years until his retirement from the Board in 2008 and continued as a Trustee of the Epworth Medical Foundation
- » Royce Abbey AO who was Chairman of the Epworth Medical Foundation from 1990–2000
- » Jenny Henderson who was our long standing President of Friends of Epworth
- » Dr Benno Ihle, our highly valued Director of ICU, Epworth Richmond.

I appreciate the wise counsel, guidance and support given to me by the Board during the year. I would like to welcome our new Board Members – Ms Janet Matton and Dr John Zelcer and acknowledge the significant contribution from Mr Peter Hay and Ms Judy Leitch who retired from the Board this year.

I am very proud and fortunate to have a fantastic Executive who provides great leadership and commitment. I am proud of their outstanding achievements and those of their staff. Through their efforts we continue to deliver excellent care while laying strong foundations for our future.

I thank everyone for their continued dedication to Epworth.



**Mr Alan R Kinkade**  
Group Chief Executive

# Year at a GLANCE

## Total bed days

2013/14	415,590
2012/13	394,518
2011/12	383,436
2010/11	382,648

## Emergency department attendances

2013/14	26,606
2012/13	27,388
2011/12	28,137
2010/11	28,393

## Births

2013/14	2984
2012/13	3418
2011/12	3425
2010/11	3502

## Operations

2013/14	85,207
2012/13	78,196
2011/12	72,558
2010/11	72,362

## Total patient admissions

2013/14	132,969
2012/13	122,268
2011/12	115,097
2010/11	114,911

## Intensive care and coronary care bed days

2013/14	13,662
2012/13	13,730
2011/12	16,241
2010/11	15,762

## Same day surgery attendances

2013/14	37,050
2012/13	33,977
2011/12	31,937
2010/11	33,635

## Radiation oncology – total patients

2013/14	1423
2012/13	1127
2011/12	
2010/11	

Service commenced 2012/13

## Overnight occupancy

2013/14	85%
2012/13	89.28%
2011/12	88.5%
2010/11	87.3%

## Radiology – treatments administered

2013/14	10,230
2012/13	
2011/12	
2010/11	

Service commenced 2013

## Board of Management



*Mrs Janet Latchford*  
President

*Prof Peter Brooks AM*

*Dr John Zelcer*  
(commenced April 2014)

*Ms Maryjane Crabtree*

*Mr Alan Crosthwaite*



*Prof Paul Douglas*

*Mr Rod Fitzroy*  
(Deputy President)

*Mr Peter Hay*  
(Retired Oct 2013)

*Mr Alan R Kinkade*

*Ms Judy Leitch*  
(Retired Nov 2013)



*Mr Robert Macmillan*

*Rev Prof Christiaan Mostert*

*Ms Janet Matton*  
(commenced Nov 2013)



*Mr Alan R Kinkade*  
Group Chief Executive

*Mr Damian Armour*  
CEO, Epworth Geelong &  
Executive Director, Diagnostics  
& Radiation Oncology  
*Executive Director Epworth  
Freemasons (to May 2014)*

*Mr Vincent Borg*  
Executive Director,  
Rehabilitation &  
Mental Health  
*Executive Director Epworth  
Eastern (to Dec 2013)*

*Mr Allan Boston*  
Executive Director  
Special Projects  
(to Aug 2013)

*Mr Scott Bulger*  
Executive Director  
Epworth Medical  
Foundation



*Ms Liz Camilleri*  
Executive Director  
Finance

*Prof John Catford*  
Executive Medical Director  
Academic & Medical

*Ms Maree Feery*  
Executive Director  
Human Resources

*Ms Eileen Hannagan*  
Executive Director  
Epworth Richmond  
(to Feb 2014)

*Ms Elizabeth Kennedy*  
Corporate Counsel  
(to Jan 2014)



*Ms Bronwyn Mace*  
Executive Director  
Rehabilitation  
(to Oct 2013)

*Ms Louise O'Connor*  
Executive Director,  
Epworth Eastern  
*Executive Director  
Clinical Services  
(to Dec 2013)*

*Mr James Piplios*  
Executive Director  
Procurement and Facilities

*Dr Megan Robertson*  
Executive Director  
Research (to April 2014)

*Ms Deborah Stephenson*  
Executive Director  
Health Contracts



*Ms Susan Wardle*  
Executive Director  
Marketing and Business  
Development

*Ms Tess Lye*  
Corporate Counsel  
(commenced March 2014)

*Mrs Nicole Waldron*  
Executive Director  
Epworth Richmond  
*Executive Director,  
Operational Projects  
(Aug 2013–March 2014)*

*Mr Malcolm Wells*  
Executive Director,  
Operational Projects,  
(commenced March 2014)





## Our Patients

### *Epworth brings hair loss prevention system to Victorian oncology patients*

Epworth HealthCare has acquired two hair loss prevention systems for patients with cancer, to assist with reducing the anxiety that can result from chemotherapy-related hair loss. The Paxman Hair Loss Prevention System was installed at Epworth Richmond in March 2014 and the Dignitana DigniCap® system installed at Epworth Eastern in May 2014.

Since receiving the Australian TGA regulatory approval in August 2013, the Paxman units were introduced to hospitals in Adelaide and Sydney, but Epworth is the first hospital group to provide the service to Victorian patients with cancer.

Successful results have been recorded in the UK and Europe among both men and women undergoing the most commonly-used chemotherapy drug regimes. At Epworth, the system is primarily utilised among patients with breast cancer.

Chemotherapy can trigger hair loss due to a disruption of the hair's natural cycle. This cycle involves tiny blood vessels within the hair follicle, or root, providing the root with food and oxygen and processing any waste products. Chemotherapy drugs temporarily disrupt this process, causing the hair to fall out. Dramatically cooling the scalp during treatment, which shrinks the hair follicle, helps to prevent the chemotherapy drug from circulating to the follicle and making it more likely the natural cycle will continue.

The system can be plugged into a normal electricity socket next to the chemotherapy chair, with the scalp-cooling caps fitted on patients before their chemotherapy begins.

### *Cardiac monitor improves patient mobility*

Epworth HealthCare cardiac patients requiring ongoing monitoring are now afforded greater mobility with the purchase of the latest telemetry equipment. The Philips Intellivue MX40 telemetry unit is a brand new technology and the world's first wearable monitor.

The new system combines the benefits of patient monitors and telemetry to have a single wearable monitor that means Epworth can maintain progressive care of patients wherever they go in the hospital. Staff can be confident they have the right results where they need it, when they need it.

The MX40 incorporates the benefits of a patient monitor in a device light and small enough to be worn by ambulatory patients. Patients can be mobilised more quickly; allowing medical staff to confidently allow patients' independence and movement while they recover – effectively reducing recovery times.

Previously, telemetry data was gathered by the telemetry unit and transmitted to a central station where medical staff could monitor patients as they were in the ward. This was effective but meant patients requiring bedside monitoring were confined to the traditional patient monitor to obtain monitoring information.

The telemetry equipment was installed at Epworth Richmond in early 2014, through donations to the Epworth Medical Foundation, including funds raised at the Epworth Men's Health Lunch.

### *Understanding the rehabilitation journey*

Whilst losing a limb is a traumatic event, Epworth HealthCare's rehabilitation services hope to provide an environment in which patients can start to move forward, be positive about the future and establish the skills that will allow them to return to their previous lifestyle.

A patient education brochure *Understanding your Rehabilitation Journey* was released in May 2014 to Epworth patients undergoing amputee rehabilitation. The publication reflects the core rehabilitation values of education and support for patients who are working hard toward their recovery.

Epworth has a large traumatic amputee population and most external materials are aimed at, for instance, diabetic amputees. Physiotherapist, Alison Gargan, drove the project after recognising targeted materials were needed to bring information together into one place.

### Breath-hold technique a relief for patients with breast cancer

In June 2014, the Epworth Radiation Oncology service at Epworth Richmond was the second healthcare provider in Australia, and the first private healthcare provider in Victoria, to offer breast cancer patients a new technique minimising radiation exposure to the heart.

The treatment has been very well received by breast cancer patients, with many women self-referring to the service and many referrals coming from specialists across Epworth. Patients have noted a sense of relief to be able to minimise later health risks while remaining focused on the primary cancer treatment.

The deep inspiration breath hold technique requires patients with left-sided breast cancer to hold their breath while treatment is administered, increasing the distance between the heart and the treatment area and reducing the subsequent risk of heart injury that may present three to five years after treatment.

Markers are placed on the chest, linked to a monitor where patients can track how they are breathing during the ten minute delivery of treatment. Breath is held for between 25 and 40 seconds. The method is particularly important for women with existing cardiac risk factors, such as smoking, hypertension, high cholesterol or those with a family history of heart disease.

### A tailored approach to mental health

One in five Australians lives with a mental illness and its impact is felt in some way by all Australians. Epworth's new mental health service, Epworth Clinic, was developed in recognition of this significant health issue for the local community. The clinic provides patients and their families with access to a multidisciplinary team and a tailored approach to care, to ensure each patient is cared for as an individual with unique care requirements.

Epworth Clinic focuses on a collaborative approach to treatment and includes programs across the spectrum of mental health conditions. The clinic offers inpatient and day patient care for people experiencing acute stress disorders, depression, bipolar affective disorder, anxiety disorders, schizophrenia, borderline personality disorder and a range of other mental health conditions.

The team consists of consultant psychiatrists working with highly-experienced mental health nurses and allied health staff to create a program tailored to individual patients in hospital and after discharge. The clinic also has a number of consulting suites where psychiatrists manage outpatients in the community and accepts outpatient referrals from GPs and other medical specialists.

### Epworth Freemasons' mums – bonding from the beginning

One of the most important issues for mothers delivering their baby by caesarian section is the option to bond with their baby immediately post delivery.

For the 20 per cent or so of women who are medically advised to deliver in this way, most want to stay together with their baby immediately following birth.

Epworth Freemasons facilitated this important bonding moment, with works completed in the general day recovery area of the theatres at 320 Victoria Parade allocated especially to allow for those precious moments to be enjoyed with low impact on the other recovering patients in the area.

Staff in the day procedure area, together with midwives, take special care to ensure these new mums and bubs are united from the start of life.

### Epworth in global prostate cancer trial

Epworth HealthCare patients whose prostate cancer has spread were given the option of participating in two new trials being led by the Australian and New Zealand Urogenital and Prostate Cancer Trials Group (ANZUP).

One trial involves men with prostate cancer that has spread, with half receiving a powerful new hormone treatment which is stronger than the standard treatment. For patients with cancer that has been confined to the prostate, a second trial involves the combination of radiation therapy and the use of both standard and new hormone treatments.

Australia is leading the trials, which recruited 1900 men in five countries including New Zealand, Europe, UK, North America and Canada.

### Catheter lab first treats life-threatening condition

Atrial fibrillation, known as AF, is an irregular and often very fast heart rate. AF occurs when the upper chambers of the heart fibrillate resulting in rapid and irregular heart beat. As a result, blood is not pumped efficiently to the rest of the body.

AF can be highly symptomatic, with people experiencing palpitations, dizziness, fatigue, chest pain and breathlessness. These symptoms can erode physical independence as people with AF grow to rely on assistance from others for help with daily tasks.

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Patient Christopher underwent cryoablation in May



## Moving to a steady beat

“There’s nothing worse than waking up and feeling your heart racing and slowing and racing again. It puts you off doing anything.”

“My diagnosis of Atrial Fibrillation (AF) goes back to 2002. My heart rate would bounce around as high as 150 to 160 beats per minute, down to 50 to 60 and anywhere in between on an ongoing basis. I was on medication to get it more regular and even but every now and again I would go back into arrhythmia,” Epworth patient, Christopher said.

“Although there were long periods where I was not in AF, it restricted me a lot. In particular the medication makes you a bit weary and often tired, just wanting to rest all the time and that didn’t fit in with my work schedule and family life. It was quite difficult.”

The condition occurs when the upper chambers of the heart beat irregularly, preventing blood from being pumped efficiently to the rest of the body that may cause heart palpitations, fatigue, and shortness of breath.

Cryoablation is a minimally invasive procedure in which a doctor threads a flexible thin tube through the blood vessels to the heart, to terminate abnormal electrical pathways in the heart tissue with a freezing method.

Christopher, who underwent his cryoablation procedure in May, was treated by Cardiologist Dr Andrei Catanchin.

“The attention of Andrei and his team on the day was terrific. I was given a lot of information and I felt really comfortable through the whole process. I was surprised how quickly I recovered and was ready to go again. I left the hospital at 9.30am and I was working and doing general things later that day,” Christopher said.

“I feel a lot better now. I’ve been travelling a lot for my work, so I wouldn’t have felt like doing that otherwise.”

Another of Andrei’s patients, Susan, had treatment for her AF at Epworth in April.

“The thought of the procedure was a bit scary at first, being to do with your heart, but I just didn’t want to live like that and put my family and myself through the stress of it all. It’s been the best thing I’ve ever done, it’s been wonderful,” Susan said.

“I’m very grateful to Epworth for making this procedure possible for our patients because it is a bit of a stumbling block in many other parts of the country and the world – it is a very niche technology that is very nice to have available here,” Andrei said.

...from pg 16

The causes of AF are often unclear. In some cases, the causes of atrial fibrillation are a heart abnormality from birth or damage to the heart structure from a heart attack or heart valve problem. Many people with otherwise normal hearts may also develop atrial fibrillation.

Treating atrial fibrillation is important because it can lead to significant complications, including increased risk of stroke, increased risk of heart failure and increased risk of mortality.

Cardiologist Dr Andrei Catanchin, recently performed Epworth's first case of pulmonary vein isolation by cryoablation in the Catheter Lab at Epworth Richmond, making Epworth the only private hospital in Victoria to currently treat atrial fibrillation by both cryoablation and radiofrequency methods.

These two methods differ in that radiofrequency ablation devices rely on heat-based energy sources and cryoablation ablation devices rely on cold-based energy sources.

Catheter ablation is a minimally invasive procedure in which a doctor threads a flexible thin tube through the blood vessels to the heart to terminate abnormal electrical pathways in the heart tissue.

### Baby mosaic

On Mother's Day 2014, Epworth HealthCare celebrated the thousands of new lives that start at Epworth each year with a billboard outside Epworth Freemasons Victoria Parade Maternity Unit.



The 18 square metre artwork features a mosaic of 489 babies born at Epworth Freemasons over the past seven years. Since December, Epworth families were invited to submit their babies' photos via Epworth's Maternity Facebook page as part of the baby mosaic competition.

The winning bub, whose photo makes up the main image, was Alexander, born at Epworth Freemasons in June 2013. The digital version of the mosaic was made available to view via the Epworth Maternity Facebook page, the most 'liked' maternity hospital page in Australia; aiming to improve the patient experience by providing an informative, supportive and fun space for mothers before and after birth.

### Alter G gravity-support treadmill promotes earlier recovery

Two new anti-gravity treadmills, enable early mobilisation for Epworth patients with weight bearing restrictions following injury or surgery. This promotes earlier recovery and has been particularly effective in Epworth's orthopaedic multi trauma, joint replacement and amputee population.

The Alter G gravity-support treadmill was purchased through generous donations to the Epworth Medical Foundation, for patients at Epworth Richmond and Epworth Hawthorn.

### Pre-pregnancy planning classes at Epworth Freemasons

Epworth Freemasons successfully introduced pre-pregnancy planning classes in July 2013, designed to help prepare prospective parents both physically and financially before they become pregnant. Free classes are run quarterly.

Interest continues to be strong, with an average of 100 attendees per session. Topics covered include health and fitness, diet, genetic counselling, fertility and finance, what to expect from your obstetrician and paediatrician and the choice between public or private hospital care. The expert speakers are able to explain and answer many of the questions prospective couples could have or at least give them options to consider as they embark on the parenthood pathway. Information regarding each of the subjects covered is available in a pack to take at the end of the session.

### Melbourne-first gastroenterology service opens at Epworth Freemasons

Epworth HealthCare welcomed the Melbourne GI & Endoscopy service at Epworth Freemasons January 2014; the first of its kind in Melbourne.

The clinic is a unique, integrated gastrointestinal service based at 130-132 Grey St, East Melbourne and incorporates all aspects of gastrointestinal care. For the first time, Melbourne GPs will have access to a range of specialists within a single practice, allowing patients to secure appointments with multiple practitioners in one day.

The site brings together gastroenterologists, hepatobiliary and upper gastrointestinal surgeons, colorectal surgeons, oncologists and perioperative physicians, in a seamless service for patients and GPs. Specialists are able to undertake procedures at both Epworth Freemasons and Epworth Richmond.

With rapid changes in technology and techniques for managing both common and complex issues, Melbourne GI & Endoscopy offers a simple streamlined solution for GPs to ensure their patients receive the best available care. Members regularly present work at national and international conferences, and are using the latest techniques in minimally invasive and laparoscopic surgery, endoscopy, capsule endoscopy and anorectal manometry.

Subspecialty interests within the group include Barrett's oesophagus and GORD, management of the complex liver patient and hepatocellular carcinoma, colorectal carcinoma, inflammatory bowel disease, irritable bowel syndrome, iron deficiency anaemia and occult gastrointestinal bleeding, faecal incontinence, and all general gastrointestinal conditions.

### Creation of pre-admission patient information

Epworth HealthCare revised pre-admission information provided to patients from doctors' rooms from February 2014. The information is used to inform patients about what to expect during their admission to Epworth and to assist in their preparation for admission.

The review aimed to maximise patient preparation for surgery, minimise potential anxiety and reduce the number and variation in patient documents available. The existing brochures were collated and consolidated into one brochure that provides comprehensive content and presentation of information essential for patient preparation. The revised booklets have been distributed to all doctors' rooms and are provided on the Epworth website.

In addition to revising the written booklet, the project team also reviewed the medical record forms that patients are required to complete as part of their preparation for admission. These were revised and amended to ensure they provide the necessary patient demographic and health information to facilitate clerical and clinical pre-admission of patients. Removing variations of the form across Epworth sites has reduced the potential risk that may have resulted from capturing inconsistent information, as there is now a single version of each form in use.

To ensure patients are provided with an electronic means of submitting required pre-admission medical record forms, an online form was created and launched using the content of the revised forms.

The online form allows real time, secure transmission of patient information and provides information in a legible and accessible format for patient service centres. The uptake of the online form has increased since its launch and now accounts for a growing proportion of how forms are received.

The review committee involved numerous internal and external stakeholders in the evaluation and incorporated feedback into the final design and content of the materials. The approval process of revised documents was governed by internal and Board of Management sub committees.

### Partnering with consumers

Epworth HealthCare continues to grow and develop its Partnering with Consumers Committee as part of the commitment to ensuring effective consumer involvement in planning, delivery of improved quality, safety and accessibility of care and services. The current committee has established a great foundation on which to grow, with expertise and experience from a wide range of industries and backgrounds. The enthusiasm of the committee shines through. Involvement within the organisation to date has included patient information resource reviews, participation in staff education and policy reviews.

### Patient transport streamlined with private hospital-first system

A new communication system enabling orderlies to view and accept patient transport jobs easily and quickly has dramatically improved the service provided to patients at Epworth Richmond.

Epworth was the first private hospital in Victoria to implement the system, which is particularly designed for larger health facilities.

The new system, known as CARPS or Computer Assisted Radio Personal System, utilises the Android mobile phone platform. This allows the Epworth Richmond Patient Transport Department to view the full, up-to-date log of patient transport jobs at any point around the hospital and self-allocate jobs, removing the need for an individual to manage and distribute jobs one-by-one over a traditional hand-held radio or walkie talkie system.

The new system, which includes a mobile 'controller' monitored by the team leader that provides greater detail on completed jobs and transit times, has also facilitated improved reporting.

### Enhanced treatment options for stroke and traumatic brain injury patients

Occupational therapy staff can now offer patients who have deficits in arm and hand movement following neurological events such as stroke and traumatic brain injury, a wide range of treatment options to suit their individual needs.

The equipment is enabling Epworth patients with neurological deficits to achieve high repetition of movement in a range of tasks. This is a technique that research suggests is effective in maximising return of movement and function following neurological events. The equipment, received through generous donations to the Epworth Medical Foundation, is listed below.

The immediate results patients can see when using this equipment has resulted in high motivation to participate in therapy and even more importantly, hope for recovery of arm function following neurological events.

**ArmeoSpring** (Epworth Camberwell): A gravity-supported, computerised device that supports the patient's arm with an exoskeleton. It enables the patient to practise repetitive movements in the shoulder, elbow, wrist and forearm while playing computer-based games, which patients have found extremely engaging.

**ManovoSpring** (Epworth Richmond and Epworth Camberwell): This is an attachment for the ArmeoSpring. It is specifically designed to train grasp and release in patients with impaired hand functions. In combination with the ArmeoSpring, the ManovoSpring allows severely impaired patients to practise reach and retrieval movements in a large 3D workspace.

**Saebo Flex** (Epworth Camberwell, Epworth Hawthorn and Epworth Brighton): A customised dynamic splinting system, it positions the wrist and fingers into extension in preparation for functional activities. The patient is able to grasp an object by voluntarily closing his or her fingers. The extension spring system assists in re-opening the hand to release the object.

**Bioness H 200** (Epworth Brighton, Epworth Camberwell and Epworth Richmond): A functional electrical stimulation (FES) device that can be used to re-train arm and hand function. The splint provides customised FES and can be worn during the day to assist with everyday tasks. The device can be worn and used outside of therapy sessions, increasing the amount of input that patients receive.

**NeuroMoves** (Epworth Richmond and Epworth Camberwell): This is an FES system that is able to detect activity in the muscle that is associated with attempts to move. When an attempt to move is detected, the unit 'rewards' the patient with a few seconds of muscle contraction. This immediate visual and sensory feedback aids re-learning of movement.

Purchase of the equipment was made possible through generous donations from the Epworth Medical Foundation and donations have also enabled the occupational therapy kitchens at Epworth Brighton, Epworth Camberwell and Epworth Richmond to be updated. The kitchens now include adjustable features such as benches and work areas. The ability to adjust the environment is enabling therapists to fully assess patients' skills and to teach them a wide range of strategies and techniques to maximise their independence in domestic tasks.

### A lasting and precious memento for families

During the course of their duties, staff often observe the difficulties experienced by the family and friends of palliative care patients and staff have noted how important the preservation of memories becomes for loved ones. This feedback has led to the development of a memory book project, led by the Epworth Freemasons Pastoral Care team, with support from the Epworth Medical Foundation.

At such a difficult time for those involved, the book provides an opportunity for the patient and their loved ones to gather memories, observations, images and other personal information, to build together a lasting memento. Working on the project together can alleviate the sense of helplessness and fear and move to an acceptance and focus on what is truly important. The project also provides a chance to focus on a positive activity while in hospital.

### Launch of Epworth Eastern Breast Service

Epworth Eastern launched its breast service in March 2014, providing a specialist service conveniently located to meet the needs of patients in the Eastern suburbs. The service offers women with breast disease, in particular suspected or proven breast cancer, rapid referral and a specialist appointment within 24 hours of notifying the breast service triage nurse.

The service is a collaboration between Epworth Eastern and leading local specialists and provides patients with appropriate clinical assessment and investigation in a multidisciplinary setting.

The service provides a centralised service integrating breast surgeons, medical and radiation oncologists, breast care nurses, psychologists, dieticians, social workers and other relevant specialists. A multidisciplinary, holistic approach to patient treatment is emphasised, with access to investigatory tools and the latest treatment modalities including total body PET scanning.

Epworth Eastern recently invested in new scalp cooling technology, which aims to prevent or reduce hair loss in patients undergoing chemotherapy for the treatment of breast cancer.



Monica has seen great results from the new system



## Lifting patients' confidence



Following surgery to remove a lump from her left breast, Monica's oncologist suggested she try a new scalp cooling technology during her chemotherapy treatment at Epworth Eastern. Monica has been undergoing both treatments since May.

"Before my first oncologist appointment I got my hair cut short and coloured, something I have rarely done before – certainly not red highlights!

"My biggest disappointment regarding my breast cancer diagnosis was when the surgeon said I needed to have chemo and would lose my hair. I didn't want to look sick for my children and be reminded every time I looked in a mirror of what I was going through," Monica said.

The Dignitana DigniCap® system, uses a small refrigerated cooling unit to pump a liquid coolant through a fitted cap. This cool cap fits snugly around the head and will maintain a fairly constant temperature of around 5°C. By cooling the scalp during chemotherapy, blood circulation to the hair follicles will be reduced. The amount of chemotherapy reaching the follicles will therefore be reduced and hair is less likely to fall out.

Registered Nurse, Joanne Lee has been assisting Monica throughout her treatment.

"Monica has had great success with the system, losing only 20 per cent of her hair, which is significantly less than usual.

"I understand the appeal of the treatment. For women in particular, your hair is very important to your sense of self and feeling confident. It makes patients feel more comfortable during treatment," Joanne said.

"People who I haven't told about my cancer wouldn't know I was going through chemotherapy," Monica said.

"It has been great to keep my hair so on good days you can try and forget for a while what you are going through and feel normal."

### New endoscopy suites improving patient outcomes

Two new purpose built endoscopy suites were commissioned at Epworth Richmond in November 2013 and have provided state of the art facilities for endoscopic procedures.

Availability of 3D laparoscopic equipment has enabled surgeons to undertake complex laparoscopic surgical cases with advanced visibility which can assist with improved patient outcomes.

The laparoscopic ultrasound probe enables surgeons to conduct assessment of internal organs during surgery and assist them in dissection and removal of disease, ensuring the best possible outcome for the patient post operatively.

### Allergy service expands treatment and diagnostics

Epworth Allergy Specialists service treats both the adult and paediatric population and includes outpatient consultation inclusive of skin prick testing, allergy education, EpiPen demonstration and inpatient services inclusive of food and medication challenges and oral and subcutaneous immunotherapy for environmental allergens.

During 2013/14, Epworth Allergy Specialists introduced a number of new services, to assist with the diagnosis and treatment of allergies and related illness. This includes paediatric intradermal testing, which is used to test for allergies to antibiotics when greater sensitivity is needed.

Paediatric baked milk and baked cheese inpatient challenges were also introduced, for those suffering from cow's milk allergy. The challenges are undertaken to determine if the patient is now able to tolerate the food. Some individuals are able to tolerate baked goods as the cooking process alters the natural quality of the protein they are allergic to. While this doesn't remove the allergy, the patient is then able to tolerate the food if it is baked as opposed to its raw form. These challenges are prescribed after thorough consultation from the allergist.

Food allergies can cause significant discomfort and in some cases serious complications for sufferers. Component resolved diagnostics are now available to patients with

IgE-specific allergies, where purified native or recombinant allergens – the substance that causes an allergic reaction – are utilised to detect IgE sensitivity to individual allergen molecules. A true food allergy is triggered by IgE antibody production specific to a reactive food. IgE reactions generally occur within minutes of eating a reactive food, which is why they are also called 'immediate' hypersensitivity reactions.

After the first exposure to a food allergen, the body remembers what the allergen looks like and keeps a supply of IgE ready for immediate release if it sees that allergen again. The testing helps identify the allergens related to foods such as peanuts and eggs.

### Benchmarking cardiac patient outcomes

Epworth benchmarks cardiac patient outcomes against other healthcare organisations, to ensure continued leadership in progressive and innovative cardiac care.

Clinical databases are created to systematically collect health-related information on the quality, safety and outcome of care provided to individuals who undergo a particular procedure, are diagnosed with a disease, or use a specific health care resource.

In the July 2013 to June 2014 year, over 640 angioplasty and stent procedures were performed in the catheter lab, with 97 per cent of these patients receiving a drug-eluting stent (DES).

In the same period 766 cardiac surgery operations were performed.

Cardiac surgery is divided into four main groups:

- » Coronary Artery Bypass Graft (CABG) surgery only
- » Valve Surgery only
- » CABG and Valve Surgery
- » All other types of cardiac surgery

Approximately 40 per cent of patients undergo CABG, 23 per cent have valve-only surgery, 12 per cent have combination CABG and valve surgery and the remaining 25 per cent of patients are admitted for all other types of cardiac surgery.



The treatment method has proven a comfort for radiation oncology patient, Lynda



## Taking a breath for heart health



During breast cancer treatment, concerns can often arise for the patient about the possible effects of radiation therapy on their long-term health.

"The paradox with radiation therapy is that these women have a serious breast cancer they want to rid themselves of, but at the same time knowing that, unfortunately, this treatment might result in a cardiac problem down the track. This does play on their minds," Radiation Oncologist, Dr Andrew See said.

Cardiac complications are of particular concern for left-sided breast cancer patients because the heart lies very close to the back of the radiation field. There is considered a slightly higher risk of women sustaining heart attacks or getting heart disease.

The deep inspiration breath hold is a method made available for the first time in Victoria at Epworth HealthCare. The method decreases the risk of cardiac complications by increasing the distance between the heart and the treatment area.

"It was early May this year, I had my yearly checkup because I have a family history of breast cancer, and that showed some micro calcifications behind my left nipple. I came down to Epworth to see breast surgeon, Ms Jane O'Brien. Jane did a diagnostic incision that

showed I had ductal carcinoma in situ (DCIS), which is basically a cancer in the breast duct. Treatment for that type of cancer is incision and radiation," Lynda said.

"The technique is great. The first treatment I had I was thinking 'wow I'm really going to have to concentrate to get this right' and then I heard them say 'okay, breath now' and I thought 'is that all?' The longest breath hold is nothing that you can't manage. I can see above me when I'm holding my breath properly and know that my line is in the blue zone. Without the monitor there, you wouldn't know whether you were holding your breath appropriately or not, so it's really good to have.

"It's wonderful that Epworth can offer such new techniques to help prevent any possible side effects in the future. Besides the fact you're doing everything to stop the cancer from developing again, you don't want to have the added complications of radiation on top of that," Lynda said.

"The treatment has been very well received – we've had a lot of women who have self-referred and been very motivated. We hear thanks time and time again from women for being able to go on this treatment and for being able to optimise their long-term health," Andrew said.



## Our Staff

### *Employee engagement*

In November 2013, Epworth HealthCare conducted an organisation-wide Employee Engagement Survey with external provider, Best Practice Australia. This was the third survey across the group and focused on engagement, expectations and frustrations, issues that matter, team norms, leadership skills and safety. This gave Epworth the ability to track and trend results for specific questions between previous surveys; 2855 employees took the time to complete the survey representing a response rate of 65 per cent.

The survey found the overall level of staff engagement at Epworth to be 50 per cent, with the remaining 38 per cent neutral and 12 per cent disengaged. This result benchmarks higher than the private healthcare not-for-profit sector norms that averaged engagement at 46 per cent. The survey revealed the organisation has a culture of consolidation on the border of ambition. This type of culture often means being in transition and is reflective of the change Epworth has seen in recent years. It has positive characteristics, including a sense of consolidating the gains already made and a sense of future focus.

Sixty-four per cent of respondents agree Epworth is a 'truly great place to work'. Seventy-two per cent would recommend Epworth to family and friends as the best choice if they needed healthcare services.

The engagement survey results were widely communicated to all staff. To continue to strengthen engagement, action plans have been developed at an organisational, divisional and departmental level. The action plans are regularly monitored and reported on at a divisional and executive level.

### *Epworth neurological physiotherapist awarded Vincent Fairfax Family Foundation Churchill Fellowship*

In July 2013, the Honorable Alex Chernov AC QC, Governor of Victoria, awarded Dr Nataliya Shkuratova the prestigious Vincent Fairfax Family Foundation Churchill Fellowship at Government House.

Nataliya, a Senior Neurological Physiotherapist working with Epworth's rehabilitation team, was one of only 23 Victorian recipients. Nataliya used the Fellowship funding to visit the UK and the Netherlands.

Her field of study is multidisciplinary falls prevention interventions that can effectively protect older Australians from falls after discharge from hospital.

### *Performance at Epworth*

People are central to Epworth HealthCare's strategic plan; enabling staff and doctors to be their best and to give their best is a key strategic priority. Epworth staff undertake a performance development plan on an annual basis identifying progress, career opportunities and development needs. Effective performance management and development underpins the majority of Epworth's people strategies.

A post-implementation review of Epworth's new performance development process was undertaken in 2014, which was largely positive and also led to some positive improvements that have been implemented and well received. The focus remains on building a culture of ongoing coaching, feedback and recognition. It is critical that managers can accurately assess the performance of employees, provide high level coaching and develop team capabilities. Epworth's focus in the new financial year will be to develop an online performance management capability to ensure greater ease of use for managers and employees.

### *Scholarship program supports staff development*

Epworth HealthCare is dedicated to the ongoing development of staff; ensuring every possible opportunity is provided to assist staff with fulfilling their potential – for their benefit and the benefit of Epworth's patients.

Thirteen scholarships were awarded in 2013/14, ranging from \$2,000 to \$10,000. In addition to education programs, these scholarships provide the opportunity for staff to undertake a work-related project or study tour, complete a tertiary qualification or attend a professional course or conference.

As a not-for-profit private hospital group, Epworth HealthCare relies on the generosity of its community to enable it to stay at the forefront of advancements in healthcare. Many of the donors and sponsors who give to the Epworth Medical Foundation, are previous patients or business partners of Epworth.

## SCHOLARSHIP RECIPIENTS 2013

Recipient	Position	Division	Study/Project/Conference
<a href="#">Adrian Sexton &amp; Alison Gargan</a>	Exercise Physiologist & Physiotherapist	Rehabilitation & Mental Health	Study tour in America of the leading centres in amputee rehabilitation – improving clinical skills in Epworth's advanced training program
<a href="#">Bianca Meredith</a>	Registered Nurse & Midwife	Epworth Freemasons	Graduate Certificate of Nursing in neonatal special care
<a href="#">Daniel Hamilton</a>	Radiation Therapist	Radiation Oncology	Study tour of Amsterdam in therapeutic radiology and oncology along with a multidisciplinary training course on prostate cancer
<a href="#">Denise Lark</a>	Clinical Nurse Specialist	Epworth Richmond	Graduate Diploma in Cardiac Electrophysiology
<a href="#">Diane Lee</a>	Registered Nurse	Epworth Richmond	Postgraduate studies in cardiac care
<a href="#">Felicity Rogers</a>	Clinical Nurse Specialist	Epworth Richmond	Masters studies in urology and continence
<a href="#">Gabrielle Williams</a>	Registered Nurse & Midwife	Epworth Freemasons	Graduate Certificate of Nursing in neonatal special care
<a href="#">Kathleen Lambrick</a>	Direct Marketing Manager	Epworth Medical Foundation	Study tour of America attending annual Association of Healthcare Philanthropy conference then visiting hospitals in four states to look at the USA philanthropy sector
<a href="#">Megan Banky</a>	Physiotherapist	Rehabilitation & Mental Health	Research-based project in the effect spasticity has on mobility following a traumatic brain injury
<a href="#">Megan O'Kennedy</a>	Enrolled Nurse	Epworth Eastern	Bachelor of Nursing Degree specialising in administration of chemotherapy and palliative care management
<a href="#">Sharon Singh</a>	Critical Care Nurse	Epworth Richmond	Masters study in nursing practice
<a href="#">Tania Demarco</a>	Enrolled Nurse	Epworth Eastern	Bachelor of Nursing Degree at Deakin University

### [Dr Philip Williams recognised in Australia Day Honours list](#)

Dr Philip Williams AM was recognised during the Australia Day Honours event, for his expert leadership within Epworth HealthCare, along with his generous mentorship to health professionals across the hospital group.

Dr Williams was a member of the Epworth Board of Management 2002–2012, Deputy President 2004–2007 and President from 2007–2011. He was the Professor of Law and Economics at the Melbourne Business School

from 1978–2002, before taking up the position of Executive Chairman of Frontier Economics – one of Australia's foremost economic consulting practices. He is currently serving as inaugural Chairman of the Board of Management of the Epworth Research Institute, which was established in 2009. The Institute led a major change in attitude toward research in the private health sector as well as a significant increase in research activity.

Dr Williams dedicated much time and energy to supporting the Executive management team as they implemented a period of enormous operational, financial and cultural change.

### [Leadership and talent development](#)

During 2013/14, Epworth HealthCare has invested significantly in its leaders. Epworth has progressed 60 emerging and operational leaders through the Diploma of Management with Swinburne University, with a focus on developing capability in coaching, delegating and building a culture of service.

Epworth continued to support a pipeline of leaders with formal development being provided to current Directors of Clinical Services and the business management team. The formal development focused on emotional intelligence and coaching and was complemented with a tailored individual development plan to support the unique development needs of each senior leader.

This year the Epworth Talent Program, which focuses on the development of future Executive Director, Director of Clinical Services and Business Manager roles, continued to achieve great success. Outcomes included the promotion of three talent program members into senior leadership and executive roles, and measurable evidence-based increase in competency across all talent program members.

### [eLearning](#)

Epworth is taking an exciting new educational approach to eLearning, as part of the recently developed Epworth eLearning plan that will see the development of innovative and increasingly effective eLearning content and systems.

A course on clinical handover (National Standard 6) has been developed and made available on the EpLearn online learning system. The course was developed completely in-house using Epworth educational and technical expertise and features videos of staff in each Epworth location. Building the eLearning content has benefits in terms of relevance and focus as well as timeliness and cost efficiency.

The eLearning material is designed to be used by educators and clinical managers in a blended delivery where the online resources and video scenarios support face-to-face training and professional development. By focusing on behaviour in real clinical settings, the course represents an important advance from earlier compliance-focused training designs.

### [Employee Relations](#)

New Enterprise Agreements have been successfully negotiated for Epworth health professionals and health and allied services employees. Approximately 2000 employees are covered by these agreements, which continue to offer employment terms and conditions that are market competitive to both attract and retain high calibre employees.

### [Recognising and rewarding Epworth staff](#)

At Epworth HealthCare, we celebrate staff achievements with a range of special events, including local reward and recognition programs, length of service awards and quarterly CEO Dinners.

On 31 January, 2014 a graduation dinner was held at the Park Hyatt for the Graduate Nurse Program (enrolled nurse, registered nurse and midwifery), sponsored by First State Super. This was an opportunity to celebrate with colleagues and families the development of new graduates into confident professionals with awards presented for both divisional and overall Graduates of the Year.

This year one staff member reached a very special milestone – 50 years of service. Marg Sims commenced with Epworth in 1964 as a nurse working on the children's ward before taking on the important role of ward clerk on the Richmond Oncology ward. A surprise morning tea was held for Marg in April, to thank her for her commitment to the delivery of excellence to patients every day, to her colleagues and her career at Epworth.

### [Breast cancer rehabilitation pilot program](#)

An eight-week breast cancer rehabilitation pilot program was conducted at Epworth Camberwell in late 2013, helping Epworth patients cope with the residual effects of their diagnosis and treatment.

Specialist Breast Care Nurse, Trish Calder, and Pain and Oncology Services Manager in Rehabilitation, Catherine Carracher, in collaboration with Epworth Richmond, Epworth Camberwell and Deakin University, have been the driving forces behind the development and implementation of the tailored program for patients who have completed primary treatment. The partnership with Deakin University during the pilot program included focus groups to monitor the initial feedback and progress; Deakin continue to assist in the publishing process for pilot results. Since the pilot program a further three programs have been run, with each adjusted based on participant feedback.

The program is comprised of eight weekly two-hour sessions, including an hour of individualised exercise and an hour of supportive education. Topics covered included the benefits of exercise and a healthy diet, understanding emotions at diagnosis, during and post treatment, body image and self esteem, managing fatigue and exploring local supports and resources. The program aims to provide tools and strategies, empowering breast cancer patients to take control of their own health and return to previous roles and activities. Individual sessions around concerns that cannot be addressed within a group program are also available.

Participant Rhonda has valued her time in the program



## × A rehabilitation approach to cancer care

“Traditionally, rehabilitation has not always been associated with cancer patients but research has shown that with exercise, their survival and their quality of life is improved,” Specialist Breast Care Nurse Trish Calder said.

“I had one of those light bulb moments at an oncology survivorship conference in February last year. I came back and thought, ‘Epworth has all these rehabilitation facilities - why aren’t we tapping into them’? Of course the rehabilitation staff have approached the program with open arms and great enthusiasm,” said Trish.

Trish, together with Catherine Carracher, Pain and Oncology Services in Rehabilitation Manager, launched the Breast Cancer Rehabilitation Program with an eight-week pilot at Epworth Camberwell in late 2013.

The program involves weekly two-hour sessions; an hour of individualised exercise and an hour of supportive care and education.

“We’ve received great feedback from patients that the program has been beneficial. It has a social focus and it helps patients to understand they’re not alone in their recovery and that others understand them,” Catherine said.

“This is a teachable moment for these patients. Women in particular are extremely busy people, they manage households, they work, they take children to and from school and everywhere else and when cancer comes around they have to stop. They then often say, ‘I don’t want to get back on the treadmill I was on. I want to be

able to stop and rethink and prioritise what’s important or delegate something to my partner or my kids’.”

“The whole idea of the program is that it’s a stepping stone back to normal life, a bridging of the gap,” Trish said.

Rhonda was diagnosed with breast cancer in 2013 and has just completed the eight week course.

“I think the biggest benefit for me has been the exercise. I’ve always been a person who has always been looking after someone else. You come away from the sessions feeling motivated again.

“You knew someone was there, watching over you along the way and they had your interests in mind,” Rhonda said.

Jenny started the program in early 2014.

“The program is exactly what someone like me needs; who has had the shock of the diagnosis and wants to know how to deal with it. It really gives you the confidence that every aspect of your welfare is taken into account,” Jenny said.

“Best practice is about a cohesive and interdisciplinary team approach. Rehabilitation is provided at one destination instead of through different clinicians in the community, the complete care continuum for these patients is provided within Epworth. We help to make those teams as connected as possible and ensure the process isn’t disjointed for the patient,” Catherine said.

### Dr Gavin Williams: 2013 Sir Edmund Herring Memorial (RACV) Scholarship recipient

Dr Gavin Williams has led the way in rehabilitation research at Epworth HealthCare for the past 18 years. The specialist physiotherapist has developed a program to teach advanced gait and running skills to people with neurological injuries. This program led to his doctoral studies – The development of a high-level mobility assessment tool (HiMAT) for people with traumatic brain injury (TBI). Since that time he has been a Post-Doctoral Research Fellow, focusing on the assessment, classification and treatment of mobility limitations following TBI.

In 2013, Dr Williams was the recipient of the highly regarded Sir Edmund Herring Memorial (RACV) scholarship. The subject for his scholarship studies was a continuation of his TBStrong study, which highlighted that muscle weakness rather than poor balance was the main cause of difficulty in walking following TBI. Previous attempts at strength training in stroke, cerebral palsy and other neurological conditions have failed to translate into improvements in the ability to walk. Together with his team, Gavin has conducted a large international review and identified key deficiencies in the way strength training programs have been delivered in neurological rehabilitation. He has developed and piloted an innovative new strength training program which incorporates athletic training principles. Preliminary results indicate that these exercises result in significantly greater muscle power generation for walking.

### Dr Bill Nimorakiotakis, supporting medical education

Deputy Director of Emergency Medicine, Dr Bill Nimorakiotakis has undertaken a number of projects during the 2013/14 financial year, to improve medical education for doctors and the general public.

In early 2014, Dr Nimorakiotakis assisted with the launch of a mobile app ‘Australian Bites and Stings’, providing first aid advice to the general public to help treat venomous bites and stings from Australian snakes, spiders and marine creatures.

Many patients are confused with what constitutes appropriate first aid for this type of injury and with collaboration with Commonwealth Serum Laboratories (bioCSL), a Smartphone app was developed to allow people easy access to this important information immediately after sustaining a bite or sting.

As a Fellow of the Australian College of Rural and Remote Medicine (ACRRM), Dr Nimorakiotakis has a passion for the education of doctors in rural and remote locations. In 2014, Epworth’s Clinical Education and Simulation Centre, in collaboration with Dr Nimorakiotakis and the ACRRM, hosted an Advanced Life Support (ALS) presentation run by the Australian Indigenous Doctors Association (AIDA). The presentation was well received by those in attendance and AIDA is grateful for Epworth’s hospitality.

Dr Nimorakiotakis helped to launch the ACRRM’s ALS course, with approximately eight courses held annually.

For the past eight years Dr Nimorakiotakis has also been involved with the Aeromedical Retrieval Service, providing remote medical services and emergency care in Queensland and was recently appointed as a Senior Retrieval Specialist with Queensland Health.

### A new look and feel for Epworth

In September 2013, Epworth began the transition to an updated logo and visual identity.

Staff worked closely with design firm, Emery Studio to strategically develop a stronger brand, which proudly celebrates its heritage while acknowledging Epworth’s current market position.

The refreshed logo is a slight modification of the old, with graphic elements combined to provide a more streamlined and contemporary look and feel. Logo colours have been intensified, elements rescaled and typographical changes employed to give stronger presence and more accurately reflect how people refer to the brand.

While the updated logo has been designed to represent Epworth as a leading and innovative organisation, it has been designed in such a way to retain the original intent of the Epworth brand and to protect years of brand recognition and equity.

This approach has also enabled Epworth to undertake a staged roll out where the old and new brand exist side-by-side during transition. This allows Epworth to manage costs of implementation appropriately for a not-for-profit organisation.

The release of a new design template system, a review of Epworth’s brand architecture, naming structure and authorisation to use the Epworth name and logo has also been undertaken.

### Longitudinal audit of trauma amputee rehabilitation outcomes

After establishing an amputee rehabilitation program in early 2011, the rehabilitation team quickly identified that there was a limited amount of research that guides patient management in the traumatic amputee population, as opposed to the diabetic or vascular amputee population. In mid-2013 the Amputee Rehabilitation Committee formed a Research Sub-Committee.

In early 2014 the first research proposal received ethics approval, with a project that aims to gain further information about the short and long-term outcomes of patients following traumatic limb loss. Data from this study will be used to improve Epworth HealthCare’s understanding of the issues specific to trauma amputees during rehabilitation and in turn improve the service Epworth provides to this population.



### At the forefront of healthcare digital marketing

In November 2013, Kristina Garla, Epworth's Marketing and Digital Strategy Manager travelled around Australia with the Australian Private Hospital Association (APHA) as one of three speakers for the APHA's Member Forum: Social Media for Your Hospital Facility. Kristina was invited to speak about Epworth's digital strategy and share how we have achieved success with our different platforms, such as being the only private hospital in Australia with a maternity app and Epworth Freemasons Maternity page being the most 'liked' private hospital on Facebook. Kristina and her fellow speakers, Lisa Ramshaw and Belinda Hughes, subsequently produced a book 'Don't be an Egghead', which is a Twitter guide for hospitals and health organisations. The book was launched at the APHA Congress in March 2014 and aims to help the industry embrace new media to enhance the patient experience.

### Epworth's wireless network

The proliferation of smart devices and tablets being used throughout the course of everyday business has attributed to wireless networking being considered as a base service, fast becoming an expectation by clinicians and patients alike. Wireless usage rates have grown significantly in recent times with the estimation that wireless devices will outstrip wired devices on networks by 2015.

In 2012, the Epworth Board of Management agreed with the vision to deploy wireless networking across all Epworth locations and the implementation undertook a three phase approach.

In 2013 and early 2014, the Information Technology Project Management Office led the core wireless infrastructure initiative, to provide faster and more convenient access to information through wireless devices for staff and patients.

The first stage of the project extended to Epworth Hawthorn, Epworth Camberwell and Epworth Richmond redevelopment areas, some additional coverage at the Elim and Pelaco buildings as well as the replacement of existing points at Epworth Richmond, Epworth Brighton and expansion of coverage at Epworth Freemasons and Epworth Cliveden. The latter half of 2014 will see the completion of the Epworth Richmond upgrade and coverage at Epworth's Specialist Centres in Lilydale, Berwick and Collins Street.

Completion of the final phase is to occur in the coming financial year, replacing the ageing system at Epworth Eastern and any additional points required at Epworth Richmond, as well as additional access points required for the Epworth Freemasons extension.

Currently each Epworth theatre has, on average, three wireless devices on the Epworth network between the surgeon and anaesthetist. There are more than 200 corporate portable devices on wireless plus consistent demand from patients to get internet access. Since the service was offered to Epworth Freemasons maternity patients, the average daily uptake is over 70 per cent by these patients. Epworth now also advertises the 'eduroam' network, which is the international university connected network across all universities. This is used daily by students enrolled with Deakin University, Monash University and the University of Melbourne. Epworth currently sees over 600 devices connected during a normal business day.

### Rehabilitation staff tour US amputee programs

Epworth HealthCare physiotherapist Alison Gargan and exercise physiologist Adrian Sexton, travelled to the US in June, on a 10-day tour of two key amputee rehabilitation facilities. A sponsored scholarship from Advantage Salary Packaging to the Epworth Medical Foundation funded the tour. Alison and Adrian visited The Centre for the Intrepid in San Antonio, Texas, specifically for military amputees injured in combat and the Richmond Veteran Affairs Medical Centre based in Richmond, Virginia, which facilitates rehabilitation for medical as well as trauma-based amputees.

The Epworth amputee rehabilitation program was launched two years ago and is a specialised service focusing on trauma-based amputee rehabilitation rather than vascular amputee therapy, which is caused by medical conditions such as diabetes.

The tour provided Alison and Adrian with the opportunity to examine trauma facilities engaged in world-leading therapies and research. New techniques were quickly introduced to Epworth's program upon their return.

### Determining tomorrow's technology needs

Epworth HealthCare's Information Technology Department undertakes an annual review of the information technology priorities. This includes both the technology needs and sets the key initiatives that will be undertaken in the following financial year. These initiatives include business, clinical, education and research priorities. These initiatives form part of the organisations ICT strategic plan and are included into a five year IT capital plan. The Executive team set these priorities together for the organisation so that the projects undertaken are strategic and also accepted to be introduced on an organisational wide basis.

The following key initiatives the IT team will initiate in coming years, outlined during 2013/14 strategic planning, include:

- » Implementation of the Aria Medical Oncology Clinical Information Solution
- » Upgrade of the organisations Intranet solution
- » Introduction of a new Point of Care solution at a Epworth Eastern that will be considered in the new Epworth Richmond and Epworth Geelong redevelopments
- » Implementation of a Rostering Time and Attendance Solution in the Richmond theatre complex that will then be reviewed and rolled out across the organisation
- » Upgrade of the Learning Management Solution
- » Review of Way Finding Solutions
- » Implementation of a Bed Management solution including a Journey Board
- » Installation of the upgraded Endobase solution for Endoscopy Services at Epworth Eastern, Epworth Freemasons and Epworth Richmond
- » Introduction of clinical audit repositories
- » Introduce Phase 2 capabilities of the Scanned Medical Record Solution including an option for a mobile solution
- » Introduction of a patient flow, appointment and digital media management solution for rehabilitation outpatients
- » Upgrade of the Medication Management Solution at Epworth Eastern
- » Review our requirements for the creation of secure messaging capabilities in the form of a clinical and patient portal
- » Develop our clinical information strategy journey
- » Review our patient administration solution and consider our options for replacement.

These projects will all be managed by the IT Project Management Office and a nominated Executive Director will be responsible for the Sponsorship of these programs of work.

### Scanned medical records create ease of access for staff and doctors

Over the past twelve months, Epworth HealthCare has implemented the first phase of the Scanned Medical Record (SMR) throughout the organisation. BOSSnet is now being used at all Epworth sites, replacing existing paper-based medical records and providing secure access to online pathology and radiology results.

The implementation of a scanned medical record allows Epworth to keep pace with the public sector and continue leading the private sector. It reduces the environmental impact of paper usage and allows for streamlining of Health Information Services (HIS) processes for staff and doctors.

Doctors and clinical staff are able to access BOSSnet on mobile devices once logged into the Epworth network via Citrix Remote access.

A patient's paper medical record is scanned into BOSSnet post-discharge and is then visible in real-time from any location internally and externally to Epworth. Patient care is directly improved by presenting the patient's medical record wherever it is required.

All Epworth rehabilitation outpatient forms are now electronically completed in BOSSnet as eForms replacing more than 260 paper-based forms.

As BOSSnet was implemented at each site, the SMR project team provided specialised training and on-site support for doctors, nurses and allied health staff – a significant undertaking.

More recently, BOSSnet has gone live in the Emergency Department with doctors completing clinical notes using new ED eForms and GP letters, which auto fax to the GP upon patient discharge from the Emergency Department. Emergency Department doctors are also now electronically signing off pathology results in BOSSnet.



Rehabilitation patient,  
Gordon with Physiotherapist,  
Alison Gargan



×

## The road to recovery

Web designer Gordon was involved in a motorcycle accident in January, resulting in an above-knee amputation of his left leg.

“My newborn daughter was only ten days old when I had my accident. That was a very difficult time for the family.

“Initially, just to get out of bed, I needed the slide sheet and about three people to get me out and into a wheelchair.”

Epworth HealthCare launched its amputee rehabilitation service in 2012 at Epworth Hawthorn, exclusively for patients who have undergone a sudden, trauma-related amputation.

“Eventually I began exercises to build up my strength again and build up the muscles required to use my prosthesis. I now come to Epworth Hawthorn most days of the week for physiotherapy and exercise physiology and go to Epworth Richmond for hydrotherapy.”

In June 2014, an Epworth scholarship funded by Advantage Salary Packaging enabled Gordon’s physiotherapist, Alison Gargan, and colleague, exercise physiologist, Adrian Sexton, to tour amputee-specific rehabilitation programs in the US. The tour included a Texan military rehabilitation centre aimed at repatriating injured soldiers back into active service.

“We get a select group of patients, which are very similar to the injured soldiers. They’re young, they’re predominantly males, with a traumatic amputation. So why can’t we get our patients achieving the same things, to the same high level?” Adrian said.

“I think a traumatic amputee is someone you can probably push a lot harder, they don’t have the cardiovascular problems associated with medical amputees. They’re going to be a lot fitter, a lot stronger and be able to achieve more. Most of our patients would get back to running or bike riding.”

“Seeing other facilities and programs in the US meant we could make sure we’re delivering our patients a standard of care on par with the rest of the world; using their time to the best of their advantage, in terms of getting them back to their everyday lives as quickly as we can,” Alison said.

Gordon says the accident has given him the time and perspective to reassess his career path.

“For the most part I expect to get back to my old lifestyle but a lot of things have changed for me. I might go in a different direction, try different things.

“One thing I’m really curious about is becoming a programmer for the processor knees in prosthetic legs. I would be in a minority in that I can program changes and test them myself.

“At the moment all I’m interested in is getting the medical hold on my motorbike licence lifted. We like to travel and I would like to go to Bali or Fiji and hire scooters – show my wife why I like riding.”

### ARIA in Medical Oncology – a comprehensive cancer solution

The Epworth Freemasons Day Oncology unit and the Epworth Richmond Day Medical unit have implemented the oncology information system known as ARIA. A series of site visits to Ballarat Health Services, Hunter Valley Health Services and Launceston General Hospital were undertaken identifying ARIA as the preferred system.

Staff attended specialised, formal training sessions across both sites and, after transitioning all existing paper based appointments into ARIA, have been successfully using the scheduling system since February 2014.

Staff at Epworth Freemasons and Epworth Richmond also use ARIA to import patient demographics from iPatient Manager (iPM), generate and print patient lists filtered by doctor, track a patient’s journey through the unit, print upcoming appointments for patients and view radiation scheduling appointments to ensure there is optimal sequencing of therapy.

A subsequent phase of this project is currently being planned to deliver improved functionality with the addition of chemotherapeutics / drug ordering.

### Fast user switching with biometrics in emergency

Fast user switching devices using biometric data access has been implemented throughout the Emergency Department at Epworth Richmond.

The department’s doctors and staff are able to place their finger or thumb on the biometric reader which then logs them onto the Epworth HealthCare network within seconds, bypassing the traditional username and password login.

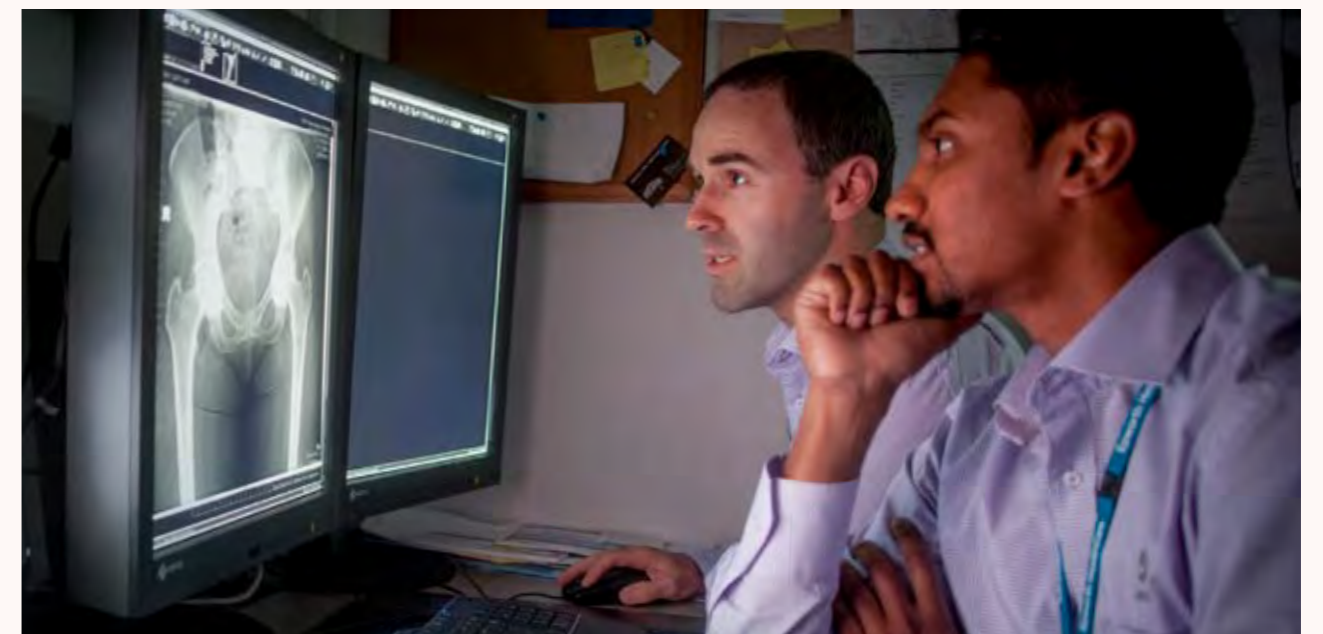
Fast user switching also allows for session portability. Staff can be logged on to a device in one part of the Emergency Department, walk over to another device, place a finger or thumb on the biometric reader and the same session and applications will instantly open on the new device.

### Conference app to facilitate interactivity

Doctors and other clinicians are among the top users of smartphones and tablets, the majority using these devices within their area of practice. Epworth HealthCare has already responded to its technologically savvy clients, employees and stakeholders with innovative in-house applications such as Bublove and Find a Doctor. Now, adding to this trend, a conference app has been produced in conjunction with Holmesglen TAFE.

A gifted group of nine Holmesglen students, under the guidance of IT lecturer Alan Schenk, designed, developed and built the app and the supporting infrastructure. The project has shaped their curriculum for the last two semesters. Mr Schenk’s philosophy that students engage more and work harder on real, industry projects was borne out in the delivery of the ‘e-conference’ app.

The app is designed to provide conference participants with information about speakers, sponsors and event details on their personal devices. More importantly, it provides interactive options such as polling, Q&A and feedback. It was initiated to add value to the Definitive Surgical Trauma Care (DSTC) course, which runs annually at Epworth Richmond, but will have applications for other Epworth events and is available to those who wish to use it.



## Our Doctors

### *Professor Olver recognised in Australia Day Honours list*

Professor John Olver, AM, was acknowledged during the Australia Day Honours for distinguished service in improving rehabilitation for people suffering from Traumatic Brain Injury. Professor Olver has been at the forefront of rehabilitation services at Epworth for more than 30 years and is an internationally-renowned expert in Acquired Brain Injury rehabilitation.

His commitment to rehabilitation medicine and patient care has been crucial to fostering research and developing policy that has been emulated across the globe. Under his leadership, the academic aspects of rehabilitative medicine for medical, nursing and allied health students was strengthened and the care offered to rehab patients changed for the better.

### *Epworth plays lead role in world-first trial*

Using a new technique that further advances the process of renal denervation, Epworth HealthCare patients participated in a world-first trial at Epworth Richmond and are now undergoing the 12-month checkup to monitor their progress.

Renal denervation involves using a catheter to apply mostly radiofrequency energy to nerves surrounding the arteries in the kidneys, as a treatment for ongoing high blood pressure. Epworth was the first private hospital in Australia to become involved in the trial during its early stages in 2013 and was one of three centres participating worldwide.

Principle investigator and interventional cardiologist, Associate Professor Tony Walton, treated 15 patients with uncontrolled hypertension using the new multielectrode radiofrequency (MERF) catheter to complete a multielectrode renal denervation (MERD).

The current procedure uses a single electrode that is passed by a catheter into the arteries of the kidney, zapping the renal nerves and reducing or eliminating the conduction signal to the sympathetic nervous system. The advanced system is capable of delivering radiofrequency energy simultaneously with the four-electrode catheter, making the technique faster and more comfortable for the patient.

The procedure does not involve a permanent implant or the risks of invasive surgery and takes approximately 40–60 minutes.

The trial monitors 50 patients over three years, tracking their quality of life, their reduced anti-hypertensive medications and blood pressure.

Treatment-resistant hypertension means patients have persistently high blood pressure despite taking three or more medications including a diuretic. The condition puts millions of people worldwide at risk of premature death from kidney disease and stroke, heart attack and heart failure.

The trial is sponsored commercially by Medtronic.

### *Undergraduate medical training at Epworth*

Epworth HealthCare continues to be involved in the education and mentoring of undergraduate medical students from Monash University and the University of Melbourne, who undertake five to seven week rotations across Epworth sites. Professor Geoffrey Metz, Director of Medical Education, along with a dedicated team of committed consultants across a range of disciplines including cardiology, general medicine, emergency medicine, general surgery, obstetrics and gynaecology, and gastroenterology, facilitate many hours of teaching for the students during their rotations.

Students are exposed to a range of learning opportunities such as attending ward rounds, tutorials, simulations, lectures, surgery, examining patients and practising their clinical skills. Recent feedback has many students rating their time at Epworth as 'exceptional'.

Staff at Epworth continue to work closely with the universities to expand the programs on offer.

In addition to these programs, Epworth offers clinical electives sites to visiting medical students from all over the world in a range of specialties. This allows international students to explore a chosen medical or surgical discipline, in a setting different from that of their primary training.

### Epworth Professor appointed President of RACS

Epworth Eastern Professor Michael Grigg was elected the next President of the Royal Australasian College of Surgeons in late 2013. At the time, it was almost 20 years since a Victorian surgeon had been elected to this position.

Previously President of the Australia and New Zealand Society of Vascular Surgery, Professor Grigg has extensive involvement with Epworth Eastern, dating from the time the hospital opened its doors in 2004.

Professor Grigg is a vascular surgeon and the Monash University Professor of Surgery based at Eastern Health – a position that he has held for 15 years. He is also the Executive Clinical Director of Surgical Services at Eastern Health.

Professor Grigg founded the Surgical Research Group at Eastern Health and has been a reviewer for numerous journals and the National Health and Medical Research Council. His major research interests relate to arterial replacement surgery. He is a Wellcome Foundation research fellow.

### Appointment of new Directors of Clinical Institutes

Epworth HealthCare welcomed two new Clinical Institute Directors in the last year. Professor Gab Kovacs and Mr Gary Crosthwaite joined the Institute leadership team, bringing their considerable experience to the Obstetrics & Gynaecology and General Surgery/Gastroenterology Clinical Institutes. These appointments follow the completion of terms for Associate Professor Robert Rome and Associate Professor Neil Collier, who, as inaugural appointments, were pivotal in the establishment of the Clinical Institute structure.

### Spreading the word on adrenalectomy

A procedure that helps patients recover more quickly and with less pain following an adrenalectomy – removal of one or both of the adrenal glands – is gaining popularity in Australia, thanks to Epworth Freemasons Dr Julie Miller, who mentored surgeons in Sydney in September 2013.

Professor Peter Campbell and Dr Niles Navin were proctored by Dr Miller at Sydney's Liverpool, St George's and Macquarie hospitals, learning Posterior Retroperitoneoscopic Adrenalectomy (RPA) – a procedure where three tiny incisions are made just below the ribs on the back while the patient is prone. Dr Miller was the first specialist endocrine surgeon to perform PRA at Epworth HealthCare in 2012 when it was the only private hospital on the east coast of Australia performing the procedure.

She has now performed more than 50 of these procedures and has the largest experience in Australia and New Zealand.

The technique was first introduced by Professor Martin Walz in Germany in 1995, and results in less post-operative pain and faster recovery than traditional laparoscopic adrenalectomy, without any increase in operative time, cost, or complications.

### Advancement in medical credentialing

During 2013 Epworth HealthCare implemented an electronic medical credentialing system that could revolutionise professional governance in hospitals. Brought about by regulatory changes to the national accreditation standards, and responding to audit recommendations for service improvement, a multi-disciplinary body of professionals collaborated to redesign our approach to medical credentialing. An online credentialing application, electronic credentialing workflow system and an improved governance framework over the end-to-end process was introduced.

Apart from the improved efficiencies, the most significant component of the process transformation has been the ability to receive electronic notifications from the Australian Health Practitioner Regulation Agency (AHPRA) if any Epworth doctor's national registration has been cancelled, suspended, or restricted in any way. This data exchange was piloted by Epworth in partnership with AHPRA as an Australian-first and facilitates the highest standard of validation and verification of the registration status of medical professionals.

### Influential Epworth clinicians honoured during Research Week

Epworth Research Institute grants were named in honour of influential Epworth HealthCare clinicians for the first time in 2014. Five of the research grants awarded in 2014 bore the name of a key member of staff, past and present; recognising each honouree's contribution to Epworth's growth and development during critical periods in the organisation's history.

The Professor Brian Buxton, Professor Priscilla Kincaid-Smith, Professor Kingsley Mills, Dr Graeme Sloman and Associate Professor Joe Tjandra Research Grants were announced as part of Research Week, 26–30 May.

Epworth has benefitted greatly from their contribution in areas as varied as cardiology, nephrology, orthopaedics and coloproctology.



Michael underwent a new procedure for high blood pressure in 2013

## Helping to ease the pressure

“My problem with high blood pressure goes back at least 20 years. It got to the point where the tablets I was taking just weren't helping,” Epworth HealthCare patient, Michael said.

Michael was also awaiting urgent hip replacement surgery; continually postponed due to his high blood pressure placing him at high risk of complications.

“I was actually booked in to have the hip replacement in November 2011, but I had a heart attack in October 2011 and Associate Professor Ron Dick had to put a stent in the artery in my heart. Following this incident my blood pressure was consistently high, fluctuating at times in excess of 200 over 100. It was after this that I was referred to Associate Professor Tony Walton for a renal denervation procedure.”

The renal denervation technique, pioneered in Melbourne, involves using a catheter to apply mostly radiofrequency energy to nerves surrounding the arteries in the kidneys. It's used to treat patients like Michael, who are on multiple medications but still have not achieved blood pressure control.

Michael underwent a new type of denervation procedure in August 2013, as part of a worldwide trial.

“Epworth was one of three centres around the world invited to be part of Medtronic's Multielectrode Radiofrequency (MERF) catheter study because of our involvement in radiofrequency denervation since it first began,” Tony said.

“The MERF catheter does the job much more quickly and hopefully more effectively. It is also much more comfortable for the patient and saves on resources because there is much less catheter lab time involved. The results so far show a good drop in blood pressure with a very high level of safety, which is what we've come to expect from that procedure.”

“At first it didn't seem to be working. Suddenly, five months after the operation my blood pressure dropped from around those very high figures to numbers like 120 to 130 over 70 to 80. I was able to book in my hip replacement, which I had four months ago,” Michael said.

“High blood pressure is hard to explain. You do feel a bit different, you know that something's not quite right and because I also had pain in my hip I wasn't actually doing much exercise.”

“When I was last up at Noosa, I walked about 60km in a week. I went walking every morning around the national park; I like walking and it's such a beautiful area on the coast.”

Tony says research into the effectiveness of renal denervation is ongoing.

“The MERF study forms part of wider research into the value of renal denervation however we have certainly seen encouraging results at Epworth. Patients involved in this study, who have suffered long-term effects of high blood pressure, have recorded noticeable improvement for the first time.”

### Remote access for oncologists streamlines patient management

Epworth HealthCare is now facilitating rapid and secure remote access for Visiting Medical Officers to a centralised oncology management suite, to allow oncologists to access patient information from any location or device.

The Epworth radiation oncology team collaborated with Epworth's information technology team to identify the right software solution, while maintaining a secure, paperless working environment and efficient service delivery. A solution was found with the delivery of medical oncology information systems, ARIA TM and EclipseTM via Citrix servers. Citrix securely deliver apps, data and services to any device on any network or cloud.

Individual management of patient information and treatment planning are key requirements of radiation oncology service delivery. Radiation oncology systems must also support the needs of doctors, with most now relying on mobile and tablet devices to access patient information.

### Registry participation

As part of the commitment to benchmarking outcomes of care and to supporting system wide analysis of care Epworth participates in a range of Clinical Quality Registries. These are a type of clinical database that systematically collect health-related information on the quality, safety and outcome of care provided to individuals who undergo a particular procedure, are diagnosed with a disease, or use a specific healthcare resource. In particular, clinical quality registries provide specific information about the appropriateness of healthcare and the effectiveness of healthcare. Analysis of reports supports the Clinical Institutes and governance structures in knowing how well care is being delivered. Some clinical areas, in which Epworth participate in Clinical Quality Registries, are cardiac surgery, intensive care, prostate surgery, joint replacement surgery, dialysis, cancer and cardiac procedures.

### Milestone for Epworth cardiac surgeons

Epworth HealthCare met a significant milestone in February, when surgeons performed their 100th procedure in a trial that uses the innovative Medtronic CoreValve System.

Performed in the Catheter Laboratory, this cardiac procedure is designed to enable replacement of a diseased aortic valve without open heart surgery or surgical removal of the native valve.

Epworth has increased its lead role among Australia's private hospitals performing this procedure, and since March 2010, Associate Professor, Tony Walton has led the trial at Epworth, resulting in treatment for 100 patients with severe symptomatic aortic stenosis.

The CoreValve System is a minimally-invasive alternative to open-heart surgery for aortic valve replacement in patients who are at high or prohibitive surgical risk. The system allows a replacement heart valve to be placed in a patient's body via a catheter traditionally inserted in the femoral artery near the groin.

Associate Professor Walton joined Cardiac Clinical Institute Chair, Associate Professor Ron Dick, with colleagues and friends from trial sponsor Medtronic Australasia in a celebration dinner on 18 February 2014.

The CoreValve system, which has been implanted in more than 7500 patients worldwide and in approximately 800 patients in Australia, is now awaiting TGA approval in Australia.

### Leading Australia in neurosurgery

Epworth HealthCare is the largest single private hospital provider of neurosurgical treatment in the country, providing a third of all private neurosurgery procedures in Victoria. This includes more than 2500 private spinal surgical patients per annum.

One of the unique aspects to Epworth's spinal surgery services is the collaboration between neurosurgical and orthopaedic spinal surgeons, which makes for a mutually supportive and at times innovative atmosphere, combining broad and deep experience with a healthy appetite for new spinal technology.

The Epworth Neurosciences Clinical Institute is in its fifth year, and embraces all neurologists, neurosurgeons and orthopaedic spinal surgeons practising at Epworth Richmond, Epworth Freemasons and Epworth Eastern.

### Structured clinical audit

One of the key roles of Clinical Institutes is clinical audit. This detailed monitoring and analysis is a process to improve patient outcomes through systematic review of care. This year has seen the expansion of clinical audit in anaesthetics, general surgery and cancer services.

### Prestigious award for medical process review

Epworth Medical Administration Registrar, Dr Paul Eleftheriou, was named by the Royal Australasian College of Medical Administrators (RACMA), as the 2013 recipient of the prestigious Margaret Tobin Challenge Award. The award, open to shortlisted College candidates from Australia and New Zealand, is awarded for the best twelve-minute presentation at the annual RACMA conference.

Dr Eleftheriou, who has previously trained in surgery and medical education, was recognised for his contribution to the practice of medical administration through improving medical accreditation processes at Epworth.

This is undertaken with a data management system that manages credentialing of doctors in a program that could revolutionise professional governance in hospitals.

Together with SharePoint technology specialists OBS, Epworth developed the Medical Services DataBase (MSDB), an automated online system that updates information daily, compared with the previous system, which required three accreditation staff and a RACMA registrar handling multiple Excel spreadsheets and thousands of medical practitioner paper files.

Initially scoped by Epworth Business Analyst David Salter, the new system ensures compliance with scope of clinical practice policies, providing a way to validate the professional practice of an individual doctor at any time.

A linked web service piloted with the Australian Health Practitioner Regulation Agency (AHPRA) conducts a daily update on Epworth medical practitioners and signals an immediate alert regarding any changes instituted by AHPRA and the Medical Board, reducing the time needed for accreditation and reference checking from weeks to days.

### Epworth Richmond specialists provide medical aid in Sri Lanka

Cardiologist, Dr Jennifer Johns, has volunteered with The Australia Sri Lanka Medical Aid Team (AuSLMAT) since it was first formed in 2004, following the Boxing Day earthquake and tsunami.

The AuSLMAT team of volunteers, organised by founding member, Cardiologist, Dr Quintus de Zylva, travel to hospitals, dispensaries and orphanages all over rural Sri Lanka, delivering medical equipment, consumables and medicines. Members provide lectures, workshops and hands-on training across a broad range of medical specialties. This past year, the team has focused on the management of diabetes, hypertension and heart disease; conditions increasingly common in Sri Lanka.

Dr Johns, who visits Sri Lanka to work with the team annually, says she has found volunteering in a third world country interesting and rewarding and is grateful for the support received from colleagues, many device companies and the cardiac catheterisation laboratory at Epworth Richmond.

Over the past decade, AuSLMAT has supported the cardiac catheterisation laboratory at Karapitiya Teaching Hospital in Galle, providing training to medical and nursing staff and consumables, such as catheters, guidewires, balloons and stents. Significant progress has been made in the cardiac interventional program, with the team in Galle now able to take on quite complex cases.

### Epworth Eastern surgeon contributes to developing nations cardiac healthcare

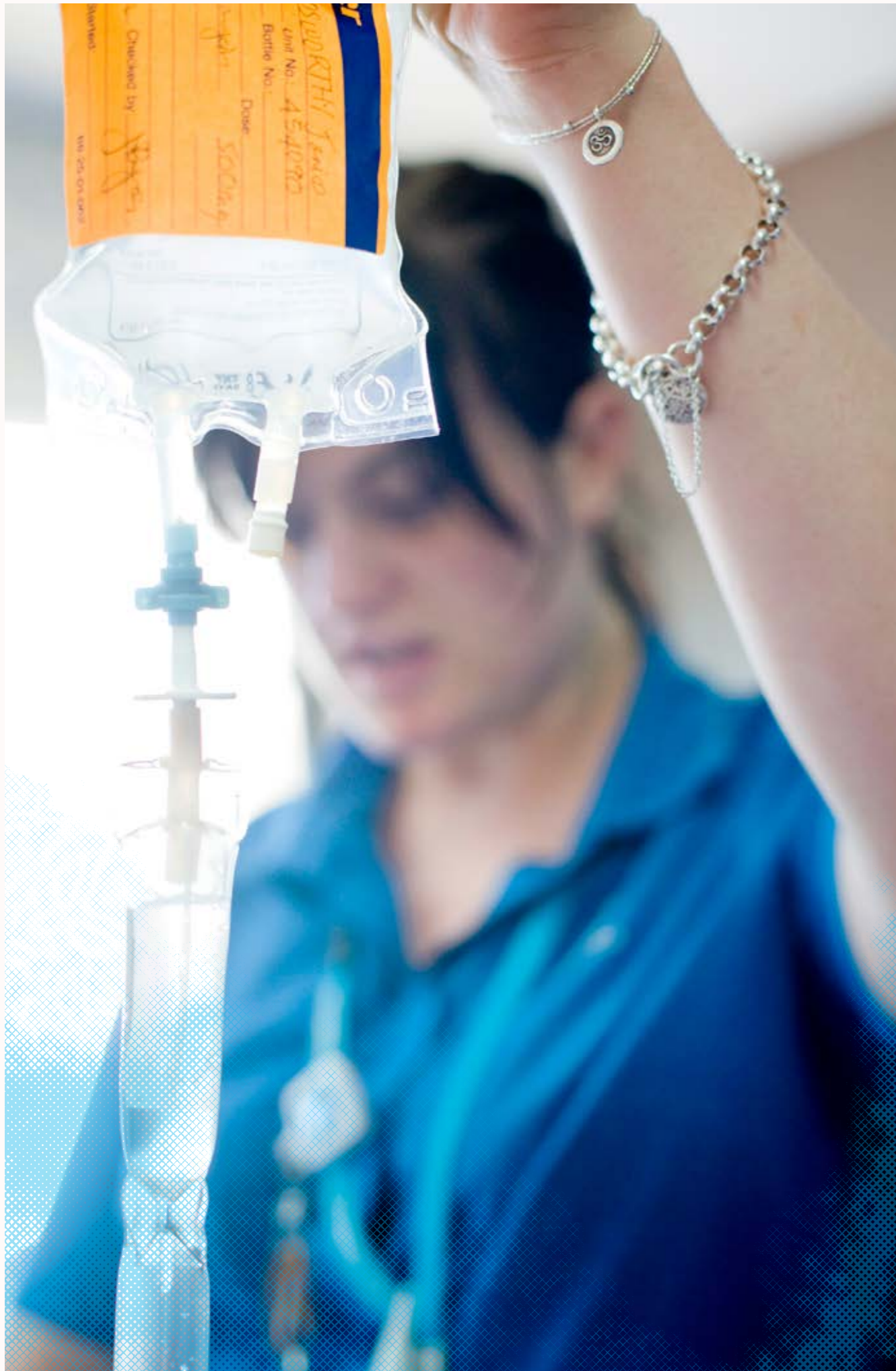
Epworth Eastern Cardiothoracic Surgeon, Mr Michael Yii, has been involved with improving healthcare in developing nations, in particular China and Myanmar (Burma), since 2001.

Mr Yii has been involved with development of cardiac surgery and health services in central China (Zhengzhou, Henan Province) for thirteen years, including frequent visits to teach, operate and mentor. During this time, the region has progressed from its infancy to become a key area for cardiac surgery in China, surpassed only by Beijing. In 2007, Mr Yii received the Yellow River Friendship Chinese National Day Award for contributions to improving healthcare and standards in Central China.

In 2013/14, he received a three million Yuan grant from the provincial government and Henan Provincial People's Hospital to perform collaborative research and teaching (Academician Level Specialist Award).

Mr Yii also maintains a longstanding involvement with development of cardiac surgery in Yangon, Myanmar, assisting in the region since 2005.





*Richard found lasting relief from chronic back pain following surgery at Epworth Richmond*

## *Flight to a pain-free life*



When a workplace incident left airline pilot Richard with debilitating back pain, it took 18 months to confirm damage to his spine was the source of the pain. Now pain free, Richard is looking forward to returning to work and an active lifestyle.

“I had 18 months of researching as to why I was sore, as I’ve never had back pain before. I went from GPs to spine surgeons to pain management rehabilitation programs, where they teach the patient cognitive thinking patterns to deal with and manage the pain when they are unsure of the origin.

“I thought pain was just pain but pain has so many dimensions and facets,” Richard said.

“I went and had a discogram procedure to test my discs and it was proven unequivocally I had a problem with my L4-L5 disc. I rated nine out of ten on the Visual Analogue Pain Scale.”

An MRI showed Richard’s L4-L5 disc, the main disc required for bending, was severely damaged. This was confirmed with a discogram, a diagnostic procedure where a needle is placed in the spine’s lower discs.

“A total disc replacement was recommended, to best retain motion and reduce the risk of what’s called ‘adjacent segment disease’ – wear and tear on the discs above and below.”

To complete the procedure, the affected disc is removed and a steel alloy metal-on-metal prosthetic disc inserted via an abdominal incision that navigates the bowel and major blood vessels – avoiding the lumbar nerve roots in the spine.

“I’ve gotten my life back, I really have. It’s been amazing. I’d never had back pain before – I’ve always been able to do everything I wanted to do. I went from that to literally not being able to walk or drive during a horrific 18 months. I had to sell my house last year and move back in with mum,” Richard said.

“I spent five days at Epworth Richmond after my surgery and I remember waking up and realising the pain that I had was completely gone. It was incredible. I then went to Epworth Brighton where I stayed for nearly two weeks and I did rehab twice a day.”

“The first night I finally got home and into my own bed I got a bit teary eyed, a bit emotional. What a rollercoaster it has been.”



## Strategic services development

### *Revitalised theatre complex another milestone for Epworth Richmond redevelopment*

The rejuvenated theatre complex opened in February 2014, following completion of Epworth Richmond redevelopment stage four in February. Works undertaken on the level three, Bridge Road complex resulted in a revitalised suite of theatres and recovery areas that will provide a range of benefits to patients, clinical staff and surgeons. The new complex consists of five new theatres, including two endoscopy theatres, a post-anaesthetic care unit (PACU), recovery area for day surgery patients, expanded waiting area for level three admissions and a new transit lounge.

The new theatres provide the latest technology for surgeons to care for their patients. In addition to general surgical capability, the facilities cater for patients coming in for orthopaedic surgery and for those coming in for endoscopy diagnosis and treatment. The new theatres also facilitated growth in Epworth orthopaedic and neurosurgical capabilities.

The complex now includes an additional 22 bays and patients will now move from admission to these discreet areas whilst they await surgery and post-operatively as they await pick up, providing much greater dignity and privacy for our patients before and after surgery.

### *Enhancing patient care at Epworth Freemasons*

The second floor maternity rooms at Victoria Parade were refurbished in 2013 to enhance their appearance and improve the comfort for maternity patients.

A redevelopment commenced at Epworth Freemasons Clarendon Street in May 2014 to upgrade the ageing infrastructure of the building, expand the theatre suite and refurbish the Day of Surgery Admission, Day Recovery and Central Sterile Supply Department areas. Completion is expected by mid-2015.

The Epworth Board of Management also approved the new development of the Epworth Freemasons Centre at 126 Grey Street, to be integrated with the Clarendon Street redevelopment. This facility will host new medical consulting suites and a cancer centre to build on Epworth's existing reputation for providing high-quality services in a peaceful diagnostic, treatment and support precinct. Construction will commence in 2015.

### *Endocrine Surgical Centre opens at Epworth Freemasons*

In 2013/14, the Endocrine Surgical Centre opened at Epworth Freemasons, providing coordinated care for patients with endocrine problems requiring surgery.

The centre provides a multidisciplinary group of specialists, including endocrine surgeons, endocrinologists, radiologists and consultant dieticians. The team work together to ensure patients receive the best possible care; placing patients at the centre of the care plan where each area of expertise comes together to determine the best outcome.

Conditions that affect the thyroid, parathyroid or adrenal glands often involve both medical and surgical problems, due to the production of limited or excess hormones. An overall understanding of both the surgical and hormone issues is required for the best assessment and management of a patient's condition. A team approach is not only more efficient but provides patients with improved care.

### *Epworth launches medical imaging service*

Epworth Medical Imaging launched, in partnership with Sonic Healthcare, at Epworth Freemasons in December 2013 – the first radiology partnership in Victoria for Sonic.

More than 1000 examinations were completed within the first month and Epworth Medical Imaging has continued to invest in state-of-the-art equipment and technology since the service opened, with the addition of a new 128 slice Siemens Somatom Definition CT scanner, installed at Epworth Freemasons.

The new CT will continue to ensure that Epworth Medical Imaging provides outstanding image quality for both the radiologists and referrers with ultra low radiation for patients. The scanner can perform a wide range of examinations including interventional, musculoskeletal and neurological, as well as cardiac and general CT angiography.

The launch was followed by the opening of a second branch at Epworth Camberwell in May 2014. The practice offers inpatient and outpatient services, including plain x-rays, low dose 80 slice CT scanning and ultrasound.

Patients visiting Epworth Medical Imaging at Epworth Camberwell can access a walk-in service for outpatients, where appointments are not required for some examinations.

### Construction commences at Epworth Geelong

On 28 April 2014, works commenced to construct stage one of Epworth Geelong following the construction tender being awarded to Brookfield Multiplex Corporation.

Epworth Geelong, located in Waurm Ponds and adjacent to Deakin University, will be built in stages with the first stage to deliver a fully functional acute and rehabilitation academic teaching hospital opening in mid-2016.

Epworth HealthCare and Deakin University are working together to develop purpose-designed training programs for medical, nursing and allied health students and staff within clinical areas of the hospital, and a dedicated education precinct and simulation centre.

Acute services at Epworth Geelong will include obstetrics, cardiology, oncology, general medicine, respiratory medicine, neurology, neurosurgery, gastroenterology, orthopaedics, colorectal surgery, urology and vascular surgery.

Once fully operational, Epworth Geelong will provide 262 overnight inpatient beds (including 12 ICU beds, eight special care nursery cots and eight complex care unit beds), an Emergency Department with 20 treatment spaces, nine operating theatres, six birthing suites, two catheter laboratories, two procedure rooms, a clinical education and simulation precinct, private consulting suites and sessional consulting rooms, retail space (including pharmacy, pathology and medical imaging) and ample car parking.

Epworth continues to receive expressions of interest from people seeking clinical and non-clinical employment opportunities at Epworth Geelong for when the hospital opens. Already more than 400 people have submitted their details. Following commissioning of stage one, Epworth Geelong is projected to provide ongoing employment for more than 430 full-time staff, including medical, nursing, diagnostic allied health, administrative and support services staff.

### New consulting suites and retraining centre at Epworth Hawthorn

New rehabilitation consulting suites opened on level 2 at Epworth Hawthorn in 2014, following relocation of the rehabilitation executive team to new office space directly across the road from the site.

This is the latest development in an ongoing renovation of the site since it was first acquired in December 2012. Following the acquisition, work immediately began to transform Epworth Hawthorn into a trauma rehabilitation centre of excellence; and to continue the outstanding work of Epworth Hawthorn's day surgery unit.

In September 2013, town planning amendments received council approval and enabled the development of a new Functional and Work Retraining Centre. The centre, managed by the occupational therapy team, is a unique therapy area used to identify safety and competence to return to specific tasks and to gain an understanding of patient's physical and cognitive strengths and limitations. This new service was an extension of the existing service at Epworth Richmond and enabled Epworth Hawthorn patients ease of access.

Inpatient rehabilitation for multi trauma orthopaedic patients successfully commenced at Epworth Hawthorn in March 2013 and outpatient programs commenced in April 2013. Stage 1 of the refurbishment was also completed in 2013, providing two new rehabilitation gymnasiums, a new 'activities of daily living' (ADL) kitchen, therapy rooms and a living skills therapy area.

### Male Urogenital Reconstructive and Aesthetic Centre opens at Epworth Freemasons

In early 2014, Dr Ajay Chauhan and Dr Justin Chee, started the Male Urogenital Reconstructive and Aesthetic Centre (MURAC) based at Epworth Freemasons.

MURAC is a unique combination of two sub-specialised reconstructive surgeons – Dr Chee, a urological surgeon and Dr Chauhan, a plastic and reconstructive surgeon, working closely together to maximise patient outcomes.

The MURAC team also includes colorectal surgeons, bariatric surgeons, sexual medicine psychologists, a specialist urologic prosthetic nurse, experienced theatre and post operative ward nurses to optimise patient outcomes.

The goal of MURAC is to optimise the management and outcomes of patients with complex genitourinary conditions. This is achieved by accurate assessment, careful and considered individualised patient treatments and world's best practice post operative care.

One of the main roles of MURAC is to manage male urinary incontinence and erectile dysfunction. With the help of Registered Nurses, Angela Wilkinson and Emma Ferguson, Epworth is able to provide a prosthetic urology team to fully assess and treat these two debilitating conditions that may occur following treatment for prostate cancer.



Left. Epworth HealthCare Group Chief Executive Alan Kinkade and Vice-Chancellor, Deakin University Professor Jane den Hollander. Right. An aerial view of construction at the Epworth Geelong site



## On track towards a teaching hospital

For a number of years, Epworth HealthCare and Deakin University have shared a vision to develop an academic teaching hospital in Geelong and combine their experience and skills to deliver a new approach to healthcare, teaching and research.

Working together to create a world-class health precinct, incorporating purpose-designed training programs and integrating learning facilities within clinical areas of the hospital, this vision will soon become reality when Epworth Geelong opens its doors in mid-2016.

"Epworth Geelong will combine the best of new private health facilities and Epworth's renowned high-quality healthcare services with Deakin University's training and research activities and knowledge," said Epworth Group Chief Executive, Alan Kinkade.

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

Deakin University Vice-Chancellor, Professor Jane den Hollander said "This partnership has tangible benefits for all – enabling contemporary excellent education for nursing, medical and allied health students, fostering research collaboration between our health professionals and providing additional health choices for the community."

"Epworth Geelong will provide clinical training at undergraduate and postgraduate levels and, with a critical mass of staff, it will also be an important centre for research in a range of health sciences."

"It has been our experience that people who train in the region, stay in the region, and Epworth Geelong will enable us to retain and attract new medical specialists, health professionals, researchers and services to the growing Geelong area and regional Victoria more generally," Jane said.

"The partnership between Epworth and Deakin has developed significantly over ten years, particularly in the field of nursing education and research, and I am looking forward to a diverse, fulfilling collaboration throughout the lifetime of Epworth Geelong as well," Alan said.



### *Epworth Richmond opens Acute Psychology Service*

As part of a broader initiative to integrate allied health services into the acute wards at Epworth Richmond, the Acute Psychology Service was established in December 2013. Many patients admitted to Epworth Richmond experience changes in cognition, behaviour and mood either directly related to, or in addition to, their medical condition.

The service has been developed to provide specialist input to patients, families and staff to help diagnose, understand and better manage these difficulties. Appropriate psychological intervention can improve patient outcomes and reduce unnecessary length of stay. The service is dedicated to the acute wards and all staff are able to make referrals for either neuropsychological or clinical psychology input.

### *Erin Street development underway at Epworth Richmond*

The major redevelopment at Epworth Richmond continues; redesigning the way the hospital operates to meet the needs of the 21st century, responding to patient, doctor and staff expectations and building a healthier future in the heart of Melbourne.

The 62 Erin Street building was completely demolished to make way for construction to commence on the new Pod 4 development. Kane Constructions were awarded tender to construct Pod 4 and works commenced in April 2014 following excavation to the lowest basement car park level.

Due to be operational by mid-2016, Pod 4 will provide five basement car park levels with more than 250 car spaces, a new Emergency Department with 35 treatment areas, a 26-bed ICU, a ten-bed cardiac intensive care unit and 29 bed cardiac inpatient unit, six new operating theatres, and three levels of inpatient units with 111 single rooms and consulting suites.



### *Emergency Department celebrates 25 years of excellence in emergency medicine*

The Epworth HealthCare Emergency Department turned 25 in 2014, having opened as Victoria's first private hospital emergency department in 1989.

Launched in April that year, the Emergency Department was established as part of the push to ensure Epworth was a modern and technologically driven hospital. The department has become renowned for its specialist and often groundbreaking emergency cardiac treatments. In 1995, Epworth became one of the first hospitals in Australia to offer emergency balloon dilation for acute myocardial infarcts. That same year, Epworth consistently delivered the best time in the country for emergency cardiac catheterisation and was achieving the best heart attack survival rates.

The department was awarded the Australian Private Hospital's Association Award for Excellence in 1991 and in 1996 became the first private hospital to be accredited for advanced vocational training of emergency medicine specialists.

### *Mental health services open and further refurbishment at Epworth Camberwell*

Also at Epworth Camberwell, August 2013 saw the Mental Health service, Epworth Clinic, open at Epworth Camberwell, including consulting suites and two wards comprising of 63 single rooms with ensuites to provide privacy, safety and comfort for our patients throughout their stay.

A refurbished rehabilitation Unit B was completed on level 1, housing 44 rooms with selected ensuites refurbished in addition to the nurses' station. Rehabilitation A, a brand new ward, was developed and opened with 34 beds that included ensuites.

### *Epworth Eastern recruits flying doctors*

Epworth HealthCare and the Royal Flying Doctor Service (RFDS) Victoria joined forces in January 2014 to provide patient transport services conveying non-emergency patients between home, hospital and specialist treatment at Epworth Eastern.

Royal Flying Doctor Service Mobile Patient Care teams have already established a rewarding relationship with patients and staff at Epworth Richmond and Epworth Freemasons.

The new agreement will see RFDS Victoria's Mobile Patient Care road vehicles and crews provide the same patient transport services between all Epworth sites, including Epworth Eastern.



## *A clearer picture*



*Radiographer, Conar Halliday*

In December 2013, Epworth HealthCare launched its first medical imaging service, Epworth Medical Imaging in partnership with Sonic HealthCare, at Epworth Freemasons. Following the service's success, a second branch was opened at Epworth Camberwell in May 2014.

Director of Operations, Radiology, Ms Sandy Chamberlin, said the past few months have been an exciting time for Epworth Medical Imaging.

"We have established a first class team of professionals, whose sole aim is to provide the best possible care to patients, including timely and accurate diagnosis. Our investment in state-of-the-art computerised and digital equipment has enhanced the services available to our referrers and patients.

"The partnership between Epworth and Sonic Healthcare has enabled Epworth Medical Imaging to be at the forefront of radiology services in Melbourne and Victoria. Our specialist radiologists, supported by highly trained and experienced technical and clerical practice staff, are part of a medically led radiology organisation, dedicated to providing outstanding quality and service to the doctors and patients they serve," Sandy said.

More recently, the service installed the latest in 3D breast imaging technology, as part of its breast screening service.

All women who present for breast imaging at Epworth Freemasons Medical Centre are imaged using this latest 3D technology. Breast tomosynthesis uses very low x-ray energy to create thin layers or 'slices' to build a 3-dimensional mammogram.

Doctors and researchers agree early detection is the best defence against breast cancer. If lesions are found early, before spreading to lymph nodes, the five-year survival rate is almost 100 per cent. 3D mammography finds cancers earlier than 2D mammography alone, with a 27 per cent increase in cancer detection and a 40 per cent increase in invasive cancer detection.

Epworth Medical Imaging also now provides patients with an upgraded, 128-slice computed tomography (CT) machine.

"The new CT ensures we provide outstanding image quality with guaranteed ultra-low radiation for patients," Sandy said.

"By using the latest technology available, Epworth Medical Imaging aims to provide the highest image quality whilst ensuring a minimal radiation dose. We are very excited to be installing the latest MRI technology and look forward to offering an MRI service to our patients and referrers from November 2014."

"We are happy with the growth of the organisation to date and look forward to the next 12 months at Epworth Medical Imaging", Sandy said.

### Epworth Freemason's Breast Cancer Clinic relocates

Early in 2014, the Epworth Freemasons Breast Clinic relocated from Albert Street back to its original home at 320 Victoria Parade, East Melbourne.

The advantage for women using the service is its colocation with mammography and ultrasound in the one space, enabling ease of access for those seeking a comprehensive breast screening service.

The Epworth Freemasons Breast Clinic was established in 1986 to deliver a specialised service to women. Over the years, many women have come to rely on the expertise of the clinic to provide regular breast screenings and to record and advise of any changes in the breast area. The private and comfortable space is shared with our radiology provider to ensure the provision of a complete and expert service.

The model of care is unique and incorporates a multidisciplinary approach. At each visit clients receive a complete clinical assessment by a female doctor skilled in breast examination. Specialist radiology of the breast using mammogram and/or ultrasound techniques is then provided.

### Epworth branches into mental health

Epworth's first mental health service, Epworth Clinic, opened at Epworth Camberwell in August 2013. The clinic provides 63 beds for inpatient services as well as day patient programs for adults and adolescents.

Epworth Clinic focuses on programs across the spectrum of mental health conditions. The clinic offers inpatient and day patient care for people experiencing acute stress disorders, depression, bipolar affective disorder, anxiety disorders, schizophrenia, borderline personality disorder and a range of other mental health conditions.

The team consists of consultant psychiatrists working with highly-experienced mental health nurses and allied health staff to create a program tailored to individual patients in hospital and after discharge. The clinic also has a number of consulting suites where psychiatrists manage outpatients in the community and accepts outpatient referrals from GPs and other medical specialists.

### Clinical Institutes brainstorm new healthcare opportunities for Epworth

In October 2013, a special all day strategic forum was held with Directors of Clinical Institutes and the Epworth Executive on Epworth's future growth. The purpose was to consider a range of initiatives that each Institute thought worth exploring such as new services, facilities, equipment and technology. The discussions were very fruitful and a total of 93 proposals were made which were grouped as follows:

- » International healthcare
- » Telehealth outreach
- » Acute and chronic pain service
- » Non-operative back clinic
- » Comprehensive cancer centre
- » Gynae-maternity-paediatric service
- » Medical/surgical units

These suggestions were assessed in further detail and many are now being considered in the context of future service developments, for example a new Cancer Centre at Epworth Freemasons. International healthcare also received special attention.

Epworth already provides limited healthcare services to international visitors and a number of medical specialists have existing overseas relationships. Currently no dedicated international healthservice existed at Epworth which provides bundled care for international patients. This is in contrast to leading Singapore and US centres (e.g. Cleveland Clinic, John Hopkins, Mayo Clinic) where integrated diagnostic, treatment, rehabilitation, travel, accommodation and concierge services are provided at a premium level.

With the expansion of beds, theatres and advanced treatment services (e.g. stereotactic radiotherapy) there is considerable opportunity for Epworth to enter this market in a planned and phased way. Depending on demand and engagement across Epworth a new International Health Service could generate substantial surpluses which could be invested in education, research and pro-bono healthcare. The Board of Management subsequently agreed that Epworth should investigate becoming Australia's leading, high end provider of healthcare to international patients at its hospital sites in Victoria. There is also an opportunity to engage in international medical training through income-generating contracts with overseas governments. China is a very large emerging market with considerable opportunities for growth and this is where attention is currently being focused.



Epworth Clinic Medical Director and Director,  
ECT Dr Graham Wong



## An individual approach to care



Kate\* has lived with mental illness for the past 12 years, seeking treatment for psychosis, anxiety and depression through a number of inpatient and outpatient programs. After a long period of stability Kate relapsed and required hospitalisation. She has been receiving treatment as an inpatient and outpatient at the Epworth Clinic since February, with Medical Director, Dr Graham Wong.

"I didn't want to go back to my previous clinic and I found out that Graham, who I had met at that clinic, was now at Epworth. That was an important reason for my coming to Epworth, but now I've been here I would not go anywhere else," Kate said.

"The nursing and allied health staff are so accessible and easy to talk to and even when everyone's running around really busy they still make so much time and effort for you.

"I have never been made to feel like I wasn't competent or wasn't able to continue outside of the hospital. The staff use their own experiences to describe a strategy. It's not a sterile environment," Kate said.

Graham said the emphasis at Epworth Clinic is very much on individualised treatment, with a focus on transitioning back into the community.

"At Epworth Clinic we have much more of a focus on tailoring our therapy to the individual, rather than simply providing a generic program. That's why we allocate all patients a Recovery Care Coordinator.

"We involve the patient, their therapist team and community care providers, but just as much family and support people. We talk with them at all stages about what we've learnt, what might happen in the future and what their role might be," Graham said.

"It doesn't feel like you're anonymous, even when the unit is full it feels like you've got that one-on-one care. Because we have, not just a contact nurse every day but a contact within allied health and my psychiatrist here, it feels much more holistic," Kate said.

"That's what's really good about Epworth Clinic, with the inpatient and outpatient groups we get more of an understanding of the signs we're becoming unwell and what kind of strategies we can put in place ourselves, before we actually have to come in as an inpatient. There is amazing transitional support here," Kate said.

"I have an excellent rapport with Graham... we talk about the science of the brain, he's always very positive about the future and knows how important therapy, skills and strategy are."

\*Name has been changed.



## Education

### *Epworth supports General Practitioner professional development*

Epworth HealthCare's continuing professional development (CPD) education program for general practitioners helps GPs provide the best possible care for patients.

Epworth's GP Liaison Unit provided 73 accredited education meetings in 2013/14, educating more than 2000 GPs from Melbourne and regional Victoria. This included the introduction of webinars to support greater access to CPD activities across the region.

The education program leads to improved health outcomes for patients by providing GPs with the opportunity to participate in accredited high quality education designed to educate GPs on topics relevant to general practice.

By participating in Epworth's comprehensive GP CPD education program, GPs are able to enhance their clinical skills and update their clinical knowledge on new and advanced surgical and diagnostic procedures and medical treatments which in turn enhances patient care.

General practitioners play a central role in the design, development and ongoing review of the education program.

Epworth's program is specially tailored to the education needs of GPs; the topics are selected by the GPs themselves through regular questionnaires, which help to identify learning gaps in the GP community.

The GP Liaison Unit hosted more than 2000 GPs at a variety of events as part of the GP education program, including:

- » 25 GP CPD evening events
- » 35 GP clinic lunches
- » One GP conference
- » Three cardiopulmonary resuscitation (CPR) training sessions
- » Five webinars
- » Four Category 1 days

### *Clinical Institute symposia*

Epworth HealthCare's Clinical Institutes continued their contribution to Melbourne's medical educational calendar with several very successful symposia. Organised by Epworth's Clinical Institute leaders these events have become a regular part of the calendar attracting local and international speakers.

The key events for this year were:

- » Celebrating 10 years of Australian Robotic Surgery
- » Fourth Epworth Clinical Institute of Obstetrics & Gynaecology Symposium
- » Perioperative Medicine Symposium
- » Cardiac Sciences Symposium 'Case Based Cardiology: Discussing, Updating and Managing Current Cardiology Cases'

### *GP conference*

The Epworth HealthCare GP Continuing Professional Development Conference was held 24–25 August 2013 at the Epworth Clinical Education and Simulation Centre at Epworth Richmond. The interactive conference was opened by Executive Director, Academic & Medical, Professor John Catford. More than 40 Epworth specialists presented at the conference, educating 88 GPs with workshops focussing on plastering, suturing, joint injections and knee and hip assessments. The conference was the first to be held in metropolitan Melbourne and was a huge success, receiving very positive feedback.

"Very good, professional organisation of the conference. Excellent educational outcome"

"Very interesting selection of topics, very relevant to general practice, opportunity to ask questions at lunch and morning/afternoon tea"



General practitioners observe a plastering demonstration

## ✕ An educational network for general practitioners

General practitioner Dr Catherine Dodgshun recognises the importance of continuing professional development (CPD), having attended many education sessions held by Epworth during the last financial year.

Dr Dodgshun is a GP in Melbourne who has an interest in all aspects of general practice with a particular focus on older people's health, women's health and preventive medicine.

Dr Dodgshun attended several Category 1 CPD events coordinated by Epworth in the last financial year including cardiology, oncology, women's health and men's health.

"I attend a variety of Category 1 CPD events each year provided by a range of different organisations, preferring those provided by not-for-profit and government organisations as I perceive the information delivered is more likely to be objective and evidence-based.

"Epworth Category 1 CPD events form an important component of the events I participate in. I see these events as part of my overall professional development, which also involves self-directed research based on patients seen, reading journals, on-line learning, clinical audits, speaking with specialists and case-based discussion with colleagues.

"Key benefits from attending Epworth's Category 1 events include improving knowledge of current thinking and trends in practice, keeping up to date with new developments, learning practical tips that can be implemented in clinical practice, and interacting with colleagues and specialists."

Dr Dodgshun says Epworth's GP CPD program provides a vehicle for her to update skills and knowledge, and engage face-to-face with other health professionals.

"It is important for doctors to undertake ongoing education in order to provide high quality, patient-focused care, communicating relevant and up-to-date information. This enables patients to make informed choices to optimise their health and it enhances their experience of the health system.

"Epworth educational events provide an opportunity to interact with GP colleagues as well as meet specialists to whom I currently refer patients or would like to consider referring.

"The program provided by Epworth benefits GPs and I believe also helps to increase Epworth's role in the community. It is evident that the efforts by the GP liaison team, specialists and support staff of Epworth contribute to a useful and successful program."

### Clinical education and simulation

Epworth HealthCare has dedicated clinical skills and simulation facilities across Epworth for students and staff to enhance their clinical skills and knowledge. These advanced learning centres, which include simulated operating suite areas, wards and manikins help students and staff replicate real life scenarios in realistic settings. The benefit of simulation-based clinical education is that participants can learn skills and techniques in a safe and supportive environment. Epworth also has mobile simulation capability for on-site training where a dedicated facility is not available.

Since opening in February 2013, the Epworth Richmond Clinical Education and Simulation Centre has maintained an 80 per cent utilisation from Monday to Friday, averaging one Saturday every three weeks for internal and externally run workshops. Since 2011, there has been a 190 per cent increase in student placements across Epworth.

During the 2013/14 financial year, a number of new training programs were initiated for Epworth staff and doctors, including advanced paediatric resuscitation, a Massive Blood Transfusion Protocol and emergency training for high-dose-radiation brachytherapy. In addition to the education component of these programs, it aids staff in identifying and analysing environmental systems hazards or operational defects in day-to-day clinical situations – leading to improved patient safety.

### Advanced paediatric resuscitation

Additional life support training for Epworth HealthCare clinical staff working with children was introduced in September 2013, as a more advanced supplement to current basic paediatric life support training. Advanced Paediatric Resuscitation is an inter-professional, simulated training session involving a life-like infant manikin that helps participants prepare for possible emergency scenarios.

Sessions are run by a paediatrician, emergency physician and simulation staff and are tailored to meet the needs of specific groups, from day surgery staff to ICU or emergency staff among others. The training has helped staff and doctors to identify how they operate in a team and the importance of allocating a leadership role in emergency situations. The program assists staff in streamlining processes, defining roles and developing awareness of team resources.

The course is a full day in the simulation facility at either Epworth Richmond or Epworth Eastern, covering the usual paediatric skills stations, such as identifying airway differences and applying cardiac compressions with more advanced topics, such as alternative methods for inserting an IV where the vein is too small. Following a session on crisis resource management, and five skills stations, everyone is involved in the realistic scenarios and then the team debriefed.

Advanced resuscitation training was initiated following a review of paediatric processes undertaken in early 2013.

### Our students – key statistics

#### INCREASE IN CLINICAL PLACEMENT STUDENT DAYS:

	2011	2012	2013	2014*	% Increase 2011–2014
Nursing	5016	6930	14,187	18,815	275%
Medicine	1956	2641	4303	4265	118%
Allied Health	1947	1947	2630	2800	44%
<b>Total</b>	<b>8919</b>	<b>11,518</b>	<b>21,120</b>	<b>25,880</b>	<b>190%</b>

\*2014 annualised forecast

#### TOTAL STUDENTS ACTIVE AT EPWORTH IN 2013/14: 2500

#### EPWORTH HAD AGREEMENTS WITH THE FOLLOWING EDUCATION PROVIDERS IN 2013/14:

Monash University	Australian Nursing and Midwifery Federation
University of Melbourne	Charles Darwin University
Deakin University	RMIT
Swinburne University	Box Hill TAFE
Latrobe University	Holmesglen Institute of TAFE
Australian Catholic University	Charles Sturt University
Australian College of Nursing	

#### STUDENTS WORKED UNDER THE FOLLOWING DISCIPLINES IN 2013/14:

Medicine	Exercise Physiology
Nursing	Dietetics
Physiotherapy	Paramedicine
Midwifery	
Occupational Therapy	
Speech Pathology	
Psychology	

**Undergraduate, graduate and postgraduate education and training at Epworth**

Epworth HealthCare is a teaching hospital, with highly successful education programs for undergraduate, graduate and postgraduate medical, allied health and nursing students, as well as general practitioners. The programs are supported by senior specialist clinicians and clinical educators from across the group.

The benefits include improving the quality of care for patients and outcomes; educating and training the current and future clinical workforce; enhancing innovation and the introduction of advanced technology and treatments. The advantages of a teaching hospital also include expanded research activities leading to improved patient treatments and the ability to provide industry leadership through being a best-practice healthcare organisation.

**Undergraduate nursing**

Epworth is committed to delivering quality integrated clinical education programs with its education partners and throughout the last year has delivered increased training through a range of innovative models.

The Collaborative Clinical Education Epworth/Deakin (CCEED) undergraduate nursing model has continued to strengthen with increased integration of the education curriculum with our clinical training that sees students having a seamless education and clinical experience in our education and simulation centres.

**Postgraduate education and training:**

**EPWORTH FREEMASONS**

Epworth Freemasons has been supporting staff over the 2013/2014 financial year at all levels of education from undergraduate, graduate and postgraduate studies including nursing and allied health.

Each year scholarships are made available specifically for Epworth Freemasons' staff, based on the wishes of long-term Epworth Freemasons' supporters.

Recipient	Donation	Qualification
Fiona Tabart	Thornton Scholarship	Graduate Certificate in Clinical Research Melbourne University
Emma Cameron	Freemasons Hospital Association	Masters of Clinical Education Australian Catholic University
Claire Henry	Thornton Scholarship	Grad Dip Urology & Continence La Trobe
Judy McAullife	Freemasons Victoria Scholarship	Master of Clinical Nursing – Oncology University of Tasmania
Sam Cameron	Freemasons Victoria Scholarship	Post Grad in Cancer/Palliative Care University of Melbourne

Emma Cameron has been included in the Dean List from Australian Catholic University for 2013 recognising excellence in completing her Masters in Clinical Education.

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Clinical Teacher, Lauren Wilgose working with a high-fidelity child manikin capable of reacting to resuscitation techniques

× **Building clinical confidence**

Patient resuscitation, a high pressure, high-stakes clinical situation for staff and doctors, is greatly assisted by ongoing emergency training. Comprehensive refresher exercises paired with frequent exposure to situations requiring resuscitation methods builds confidence in skills and procedures.

The resuscitation of a child requires different methodology and knowledge and can be a particularly stressful event, especially when these events do not occur often in daily practice.

“The advanced paediatric resuscitation training recognises that paediatric emergencies are rare and, despite their extensive experience, clinicians welcome the additional training,” Paediatric Educator, Jenny Hough said.

Compared to the basic paediatric resuscitation training, largely targeted toward nurses, the advanced program takes an inter-professional approach.

“We’ve run a number of advanced sessions since the first in September 2013 and we hold these fairly regularly now. We include doctors, physiotherapists and nurses and it is primarily about getting the team dynamics happening as it would in a real-life situation,” Jenny said.

“We use a high fidelity manikin that can talk and has a pulse, the chest rises and falls, you can administer drugs and intravenous (IV) fluids, and it also accommodates an IV line into the leg.”

Peita Sims is an Intensive Care Unit (ICU) liaison nurse, a role that will attend and assist in paediatric emergencies.

“My main background is in adult ICU and adult advanced life support (ALS). I have always felt a little unsure about paediatrics, so I felt that by gaining experience in paediatric ALS scenarios, I will feel more comfortable when these situations arise within the hospital and be able to be of beneficial assistance to the paediatric ALS team.

“I felt that it was important to get a better understanding of the role that may be required of me. The training was a great experience and very well run. The simulations are very lifelike.

“Epworth has increasingly more paediatric admissions and it is important that the staff responding to paediatric emergencies have the appropriate, up-to-date knowledge and skills required to treat these patients,” Peita said.

...from pg 54

#### Postgraduate courses being clinically supported through Epworth Freemasons:

Postgraduate Certificate in Perioperative Nursing x2 – Deakin University

Postgraduate Diploma in Oncology x1 – Melbourne University

Postgraduate Diploma of Midwifery x4 – RMIT

Single Postgraduate Unit - Special Care of the Neonate x3 – Latrobe University

#### Other courses staff are currently being supported to complete:

Masters in Clinical Nursing – University of Tasmania

Masters of Clinical Leadership – Deakin University

Masters of Nursing (Urology and Continence Management) – University of Melbourne

#### Graduate Nurses

Throughout the 2013/2014 period Epworth Freemasons have supported 29 registered nurses, 15 registered midwives and 8 enrolled nurses through their graduate programs.

#### Other Courses

The perioperative departments continue to offer the Perioperative Introductory Program for novice staff.

An online training course for oncology drug administration is also available.

#### Rehabilitation

The Rehabilitation & Mental Health Division continued to support staff to be their best and give their best through the introduction of the Study Leave Committee, which received a total of 233 applications from nursing, allied health, administration and hospitality staff in 2013/14. In total more than \$35,000 and 2750 hours were awarded for external education. Staff also attended more than 2500 hours of in-service education, with a focus on National Standards, clinical skills and increasing knowledge on new case mix programs implemented across the division.

In addition to scholarships, the division also supported nursing and allied health staff to progress their postgraduate studies by providing financial support and education leave of more than 750 hours. The Epworth rehabilitation service is committed to research into the best rehabilitative practices for our patients. More than 20 allied health staff are currently undertaking postgraduate study and the division boasts a number of PhD qualifications in allied health.

The division continued to support graduate nurses during their transition into the workforce, with 18 graduates per year rotating across all four Epworth's rehabilitation sites. Financial year 2013/14 saw record numbers of graduates applying to join the program.

#### Epworth Eastern

Epworth Eastern continues to strive to develop staff, with a strong emphasis on postgraduate education, with a large increase in the number of staff undertaking postgraduate study at Epworth Eastern in 2013/14.

Epworth Eastern continued its strong association with Deakin University for both the perioperative and critical care courses. This year has also seen the introduction of the Postgraduate Certificate of Nursing Practice (Cancer and Palliative Care stream), partnering with the University of Melbourne. In the first year, four staff from Epworth Eastern are undertaking this course.

Educators work closely with both the students and universities to ensure students are receiving the right support and exposure to higher acuity and more complex situations. This ensures staff are equipped to provide efficient, high quality healthcare to all our patients, and become an integral part of Epworth's workforce.

Epworth Eastern continues to support those transitioning into the workforce from undergraduate training. Recruitment into graduate programs for both registered nurse and enrolled nurses in 2013 and 2014 attracted record numbers and high quality candidates. This is a testament to the strong commitment Epworth – and Epworth Eastern – provides in the support and development of its future workforce.

#### Epworth Richmond

The education team continues to support the clinical areas of the hospital as well as registered nurses undertaking postgraduate study.

For the 2014 academic year, Epworth Richmond has supported 37 registered nurses to undertake postgraduate study in the specialties of orthopaedics, oncology, perioperative nursing, intensive care, cardiac and accident and emergency. Fourteen current enrolled nurses are undertaking an upgrade to Diploma and a group of 18 registered nurses is undertaking the revised Introduction to Specialty Practice. This course was offered outside the critical care areas for the first time – recognising the varying specialties within the hospital. Epworth aims to continue to refine this program and offer it across Epworth HealthCare in 2015.

Epworth Richmond increased its February registered nurse graduate intake to 43, and included a perioperative services full year program for the first time. This has been successful and will continue in 2015. Deakin University has recruited from the 2014 cohort of Epworth graduate registered nurses to study the wellbeing of our graduates and we await the results in order to enhance the program.

The critical care educators recently undertook an Advanced Life Support (ALS) Assessors Course with staff from clinical education, Epworth Freemasons and Epworth Eastern. This aims to jointly provide an ALS introduction, assessment and refresher program standardising assessment and resources across the group.

To engage the associate nurse unit manager group, a team leader program was introduced and will continue to be offered in 2015, along with a program of in-service education, seminars and workshops.

#### Massive Blood Transfusion Protocol

A timely and efficient response from clinical staff to a patient requiring an emergency blood transfusion is a key component of clinical best practice – traditionally related to trauma patients. The introduction in October 2013 of an official protocol for the emergency transfusion of blood at Epworth HealthCare has streamlined this process for staff and visiting medical officers (VMO); delivering a rapid response to any patient undergoing surgery.

The Massive Blood Transfusion (MBT) protocol facilitates the most efficient processing of blood and timely delivery and administration of blood and blood products to the critically bleeding patient – optimising resources and expertise in patient blood management. A training package was assembled to rollout the new protocol across the organisation and includes a film showing the protocol being enacted in a simulated environment and a package of materials to guide clinicians through each step of the process.

Each Epworth site was provided with supportive resources to enable them to create the MBT emergency pack specific to the needs of their environment.

The protocol effectively improved response times for the critically bleeding patient, enhancing patient care and safety while boosting VMO and staff confidence.

The Department of Health, Victoria, has requested a copy of the training video, as part of its Blood Matters program.

The protocol will be presented at the Australian Society of Post Anaesthetic Nurses (ASPAAN) conference in August 2014.

#### Grand Rounds

The 2013–14 Professorial Grand Rounds calendar saw the introduction of monthly research presentations, adding to the already successful weekly presentations. While the presentations occur at Epworth Richmond, Epworth Eastern and Epworth Freemasons are able to link in via videoconference to bring staff together across multiple sites. Professor Richard Gerraty, Epworth Victor Smorgon Chair of Medicine – Monash University & Member of the Teaching Hospital Steering Committee, ensures topics

selected for Grand Rounds have broad appeal, with the high quality presentations attracting large audiences of Visiting Medical Officers, allied health professionals, clinical and non-clinical staff. The Grand Rounds continue to provide an opportunity for presenters from all aspects of healthcare to speak to the Epworth community.

#### Category 1 Men's Health in General Practice symposium

Epworth hosted a successful Men's Health in General Practice symposium on 31 May 2014.

Sixty-seven general practitioners from metro Melbourne and regional Victoria attended the symposium, held in the Clinical Education and Simulation Centre at Epworth Richmond.

The event, which preceded Men's Health Week being held 9–15 June, provided GPs with much needed information on a wide range of issues affecting the health of men.

Presentations were made by Epworth's leading specialists on topics including screening and treatment of prostate cancer, digestive health, bladder, testicular and kidney cancers, sexual dysfunction, mental health, obesity, sleep apnoea, muscle disorders and cardiac risk factors.

Attendees sent positive feedback to the GP Liaison team.

"I would like to commend your group for a job well done for the Men's Health Seminar held on the 31st May 2014. It was very informative, innovative and relevant to our current General Practice."

#### A decade of robotic surgery

Epworth celebrated 10 years of robotic surgery with Australia's first multidisciplinary robotic surgical symposium in November 2013. Convened by Director of Robotic Surgery, Mr Daniel Moon, the program featured pioneers of robotic surgery in various specialties from around the country and three international experts.

The international experts were Professor Mihir Desai, University of Southern California, USA, Professor John Boggess, University North Carolina, USA and Professor David Jayne, University of Leeds, UK. Three simultaneous live surgical cases were performed and transmitted to the Clinical Education and Simulation Centre at Epworth Richmond.

Over 100 delegates attended, with the symposium a resounding success and providing a high quality scientific and surgical exchange.

Epworth Richmond was the first hospital in Australia to pioneer this exciting medical technology, and December 2013 marked the 10th anniversary of Australia's and Epworth's first robotic surgical case.

### Library services

The Epworth library has enjoyed a year of growth and integration, building on its location in the Clinical Education and Simulation Centre, Epworth Richmond. The library's reach has grown across the group, with information services delivered to all sites including discovery of publications based in evidence, writing systematic reviews, e-learning in the web environment, literature searches, document delivery and other support to busy staff in education and clinical roles.

The library space itself has developed into a thriving learning centre where students and staff come to read, learn and share new knowledge. Evening events have also become popular, as Clinical Institutes and other groups hold meetings, dinners and education sessions in this flexible area. The collections have grown supporting all sites thanks to the generosity of our donors through the Epworth Medical Foundation. The library is looking forward to expanding its services and supporting education and research at the new Epworth Geelong development.

### Epworth Eastern hosts Australasian-first Maze IV training course

Australasia's first Maze IV one day training course was held at Epworth Eastern on 20 June, with two trainers, one of whom was Epworth cardiac surgeon, Mr Michael Yil.

Dr Stefano Benussi, who has a long association with the Maze IV course in Europe, travelled from Milan, Italy, to partner with Michael as a course trainer. The course, which details the effective treatment of atrial fibrillation (AF) in cardiac patients using the Maze IV surgical technique, covered topics such as the pathophysiology of AF, patient selection, operative techniques and perioperative considerations among others.

The interactive course, organised by medical device distributors, Stenning & Co and parent company AtriCure Inc., is a first for the Oceania region and is an increasingly important training tool for surgeons.

Recent advances in technology as well as a better understanding of AF have resulted in an increasing uptake of AF ablation procedures by cardiac surgeons. The course aimed to provide a clear understanding of AF surgical principles, current recommendations and guidelines, and to enable surgeons to further develop their expertise in the Maze IV operation for the benefit of their patients.

### Emergency training for high-dose-rate (HDR) brachytherapy

The introduction of a simulated learning method for Epworth HealthCare staff and doctors involved in administering high-dose-rate (HDR) brachytherapy is a Victorian-first and has led to a dramatic improvement in emergency response times and ultimately staff and patient safety.

HDR brachytherapy uses an intense radiation source delivered through temporarily placed applicators in a series of two to four treatments and is commonly used to treat cancers of the prostate, cervix, endometrium, breast, skin, bronchus, oesophagus, and head and neck among others.

The treatment is unique in radiotherapy, in particular brachytherapy, in that radiation is administered internally via an inserted device rather than the more common external method. This raised concerns for staff involved about an appropriate course of action should an emergency situation occur.

A simulated training situation was developed in December 2013 to supplement current paper-based guidelines and provide invaluable hands-on experience for staff and doctors. The simulation, made possible by the expertise of the Clinical Education and Simulation Centre, meant staff could obtain appropriate emergency skills while negating the danger of possible radiation exposure. Likewise, it enabled critical systems testing that improves both day-to-day and emergency situation outcomes.

The initial simulation involved multiple scenarios and was filmed. This material, together with an ongoing schedule of live simulations, is now used to train Epworth clinicians. As a result of the new training model, the team recorded an 18 per cent total emergency response time improvement, with the source of the radiation removed from the patient and contained within 45 seconds – compared with the American Association of Physicists in Medicine recommended one to two minutes.

Findings were presented at the 23rd Annual Scientific Meeting of the Australasian Brachytherapy Group in February 2014, with a follow up presentation scheduled at the Combined Scientific Meeting (CSM) in September 2014.



Nurse Unit Manager, Pauline Fogarty, left and Graduate Nurse, Eliza Wilson



## Streamlining the transfusion process

Epworth maintains its vigilance in ensuring all staff and Visiting Medical Officers (VMO) are familiar with protocols that help to guide daily practice.

"Our main aim was to streamline efficient care of the critically bleeding patient, and to have haematology and our anaesthetists working as one under a single Massive Blood Transfusion Protocol," Anaesthetics and PACU Nurse Unit Manager, Pauline Fogarty said.

"At Epworth, many doctors practice as a visiting medical officer, with varying connections to other healthcare providers all with their own policies and procedures. It is important for us to ensure our VMOs are familiar with Epworth's guidelines for massive blood transfusions."

In 2013, Pauline received a \$10,000 Epworth scholarship sponsored by Covidien, which funded the protocol's establishment and the subsequent education program rollout.

Once the process was defined, tested and approved, Graduate Nurse, Eliza Wilson, created and coordinated the protocol's education component for Epworth staff, doctors and anaesthetists. The program was run at the Clinical Education and Simulation Centre at Epworth Richmond.

"We invited people from each Epworth site, including anaesthetists, hospital coordinators and nurses. The sessions contained three major components; familiarisation with the protocol, including the contents

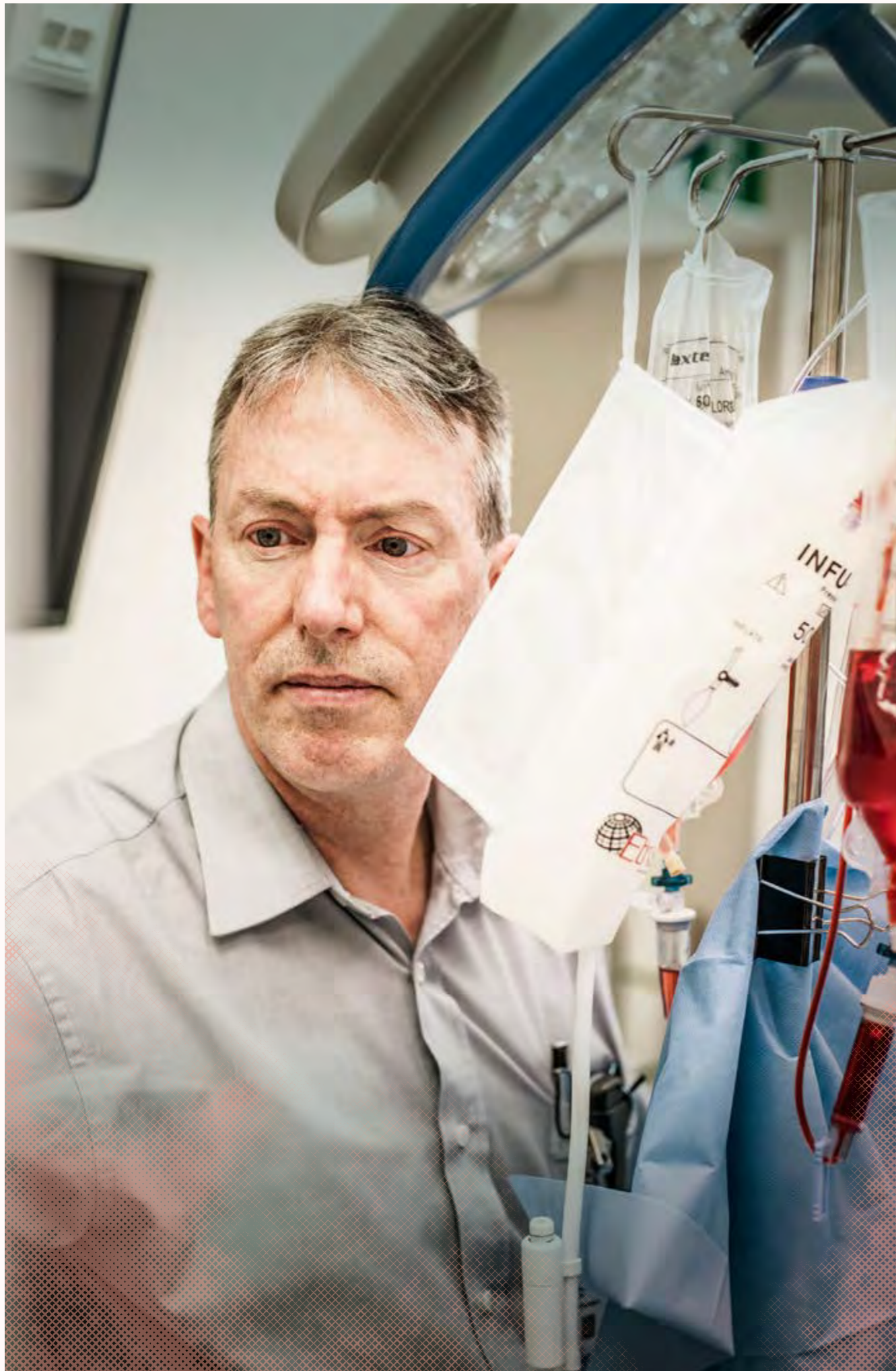
of the site-specific MBT emergency pack; a viewing of the MBT critical bleeding video and lastly, completing a simulated critical bleeding scenario using the protocol.

"Patients avoid unnecessary exposure to blood products, minimise blood loss and optimise their blood volume and tolerance of anaemia," Eliza said.

"There was also an overwhelming approval of the use of the simulation lab and the critical bleeding scenario, from which they were able to carry out the MBT protocol. Participants felt they were able to grasp the key steps by fulfilling each of the roles and going through the process in a realistic situation."

Pauline said, "Having the pack means everyone's on the same page as to what to do. The bloods are all labelled and ready, the tubes are all there, what you need in the first lot of tests, what you need in the second, third, fourth. Task cards that you put around your neck tell you what your role is. The pack makes it clear how to get the haematologist on the phone using the dedicated line. It just really speeds up the path for that critically bleeding patient."

"VMO confidence in our awareness of the situation and in our procedure has dramatically increased. The training pack was sent out to all anaesthetists and we had a lot of people asking us questions and asking to look it over. The intensive care units now have packs and so does the emergency department, so they follow the same guidelines," Pauline said.



Clinical Education & Simulation Coordinator, Tom Hallahan, left, Brachytherapy Section Head, Dr Yen Tran, Director of Clinical Education & Simulation, Tess Vawser and Registered Nurse, Mary Bongiorno

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## Making every second count

When administering high-dose radiation (HDR) therapies, every second counts. This is because, unlike other therapies, the radiation is administered internally. Training staff on emergency procedures in this environment can be a dangerous undertaking, due to possible radiation exposure.

“The challenge was coming up with a way to do the training without using the actual equipment. We couldn’t re-enact the situation because staff would then be exposed to radiation. Although an emergency situation has never happened at Epworth, it’s about giving staff the training in case it ever does,” Brachytherapy Section Head, Dr Yen Tran said.

“It’s never been done before in Victoria, so we just wanted to create something that would allow staff and patients to feel comfortable with the procedure at all times.”

Treatments are of very short duration, approximately five minutes and should an emergency situation occur, clinicians will have a maximum of two minutes to remove the device to avoid lasting damage.

“We of course had a paper-based radiation plan but it was just how we thought it might happen. To then be able to physically re-enact the steps through a simulation means we can improve on our process and test our systems. Ultimately, you don’t know how you would react in an emergency until it’s happening,” Yen said.

“Initially in the simulation we thought we’d use a simulation manikin but Director of Clinical Education and Simulation, Ms Tess Vawser, suggested it would be more realistic for her to stand in as a simulated patient.

We ran through four simulations. Tess would let us know as the patient what worked and after each one we would suggest other things that we could do differently.

“Having the video of the simulation was amazing; being able to watch yourself and how you react. It’s one thing to run through and do it but it’s another to watch that back and see what you didn’t do well,” Yen said.

“We improved straight away. The process was then streamlined and we updated some of our current emergency procedure because it actually works better for us.”

During a HDR brachytherapy procedure, Registered Nurse, Mary Bongiorno, will assist in patient care after the applicator removal, allowing the patient to leave the treatment area promptly and efficiently.

“Emergency training for HDR treatments at Epworth has been an integral part in the delivery of care to cancer patients. The simulations have provided an insight into the importance of working within the team, managing an increased level of stress at the same time allaying the anxieties of the patient.

“To have the simulations available to staff has enabled us to practise this emergency in a safe environment; providing the confidence and professionalism required for a radiation emergency,” Mary said.





## Research

### Research at Epworth

Health and medical research is now an established part of the academic environment at Epworth HealthCare, with many of Epworth's clinicians, staff and patients participating in a wide variety of clinical and translational research programs across a broad range of clinical areas.

The Epworth Research Institute (ERI) is committed to fostering research that will improve healthcare and enable Epworth's patients to access novel treatments which may not otherwise be available to them. This aspiration calls for strengthened partnerships at many levels – Epworth clinicians, researchers, government, industry, patients and the community.

The growing maturity of Epworth research activities is reflected in the rapidly increasing publication rate, our expanding commercial trial involvement, our inclusion in national forums run by the government and industry bodies, and our increasing role in advocacy for research within the private health sector. Research at Epworth plays an integral role in the daily professional lives of the clinicians and staff; to the improvement of patient outcomes.

### Timely ethical approval of research projects

Backed by strong clinical and therapeutic expertise, and a highly flexible and customised approach to research, clinical programs progress quickly, safely and cost-effectively.

All research conducted at Epworth must be approved by Epworth's Human Research Ethics Committee (HREC) before it can commence. Led by Reverend Professor Christiaan Mostert, the HREC is formed under the auspices of the National Health and Medical Research Council which provides leadership and advice regarding research governance in Australia. One of Epworth's key attributes is the timely execution of research project approvals. The Clinical Trials and Research Centre (CTRC) and the Research Centres team work closely with the HREC coordinator to facilitate ethics submissions and approvals to ensure timely execution.

Epworth would like to thank the members of HREC for their continued dedication and support with research studies.

### HREC meeting attendance – 2013/14

	Eligible to attend	Attended
Rev Prof Emeritus Christiaan Mostert	11	11
Professor Mari Botti	11	10
A/Professor Jim Breheny	11	7
Professor Peter Brooks AM	11	8
Professor Emeritus John Catford	7	5
Professor Niki Ellis	2	1
Professor Jane Fisher	11	8
Mr Alan R. Kinkade	4	3
Professor John Olver	11	6
Ms Sarah Pollock	11	5
Professor Jennie Ponsford	11	6
Dr Megan Robertson (to April 2014)	8	4
Mr Roland Williams	6	5
The Hon Peter Young	11	8
Ms Harriet Ziegler	11	7

### HREC and Low Risk Subcommittee Submissions:

Number of submissions

- » HREC – 38 new submissions
- » HREC Sub-Committee (Low and Negligible Risk) – 54 new submissions

### Highlights of the 2013/14 financial year:

- » The Clinical Trials & Research Centre continues to support clinical trials across a number of disciplines, including a trial for Transcatheter Aortic Valve Implantation (TAVI) where Epworth was the second highest recruiter of patients worldwide, and a polycystic kidney trial where Epworth was the highest recruiter within Australia.
- » The fourth round of ERI Grants were finalised in May, with over \$230,000 being distributed to support five major grants (up to \$50,000) and two smaller grants (up to \$10,000). The ERI Research Committee was impressed by the quality of the applications for the year, with competition for funding rising each round.
- » The fourth annual Epworth Research Week was held in May, with a poster competition in the Epworth Richmond auditorium and daily sessions with expert internal and external speakers. The sessions addressed areas of current research interest, including the value of registries and the history of renal denervation for hypertension, and the first industry and partners research forum exploring opportunities for efficiency gains in commercial clinical research.
- » The annual ERI Dinner was held during Research Week, with more than 250 people attending to celebrate research achievements and hear the announcement of successful grant recipients. The dinner was attended by ERI staff, Epworth Board of Management members and Executives, clinicians and staff involved in research, collaborating partners and ERI benefactors, with world-renowned bioethicist, Professor Peter Singer as keynote speaker.
- » Epworth has continued to be actively involved as a founding member of the Monash Partners Academic Health Science Centre that has now been formally endorsed by the State Government and provided with seed funding for administrative and research functions.
- » Epworth are also members of the Australian Centre of Health Research and the newly-formed Western Alliance Academic Health Sciences Centre, through Epworth's Geelong hospital development initiative.
- » Epworth has been invited to be a member of the Monash Comprehensive Cancer Consortium.
- » The Research Centres across Epworth have extended to include the establishment of:
  - The Epworth Radiation Oncology Research Centre under the leadership of Dr Andrew See
  - The Epworth Dermatology Research laboratory under the leadership of Professor Rodney Sinclair
  - The Epworth Musculoskeletal Research Centre under the leadership of Professor Richard de Steiger

- A new partnership between Epworth and the Ovarian Cancer Research Foundation has also been established under the leadership of Associate Professor Tom Jobling.
- » Epworth Research Institute has efficiently implemented an advanced computer-based clinical trials management system. This has enabled a seamless integration across research, governance and financial components of trial management.
- » The Institute has worked diligently to strengthen links with industry and increase commercial trial activity. Clinical research activity consisting of investigator-initiated and commercially sponsored trials has grown significantly every year with over 200 projects this year.
- » With more than \$7 million in the ERI corpus, including \$1m raised during the Epworth 2013 Gala Ball, Epworth is well on the way to achieve the target of \$10 million by 2017.
- » During 2013/14, 228 posters and presentations were produced.
- » Sixty-three per cent of posters and presentations were presented at forums external to Epworth.
- » Publications of articles and book chapters have nearly doubled to just over 190.

### Clinical Trials and Research Centre (CTRC)

Epworth Research Institute's aim to improve health and healthcare services is being realised through collaboration, advocacy and operational excellence in research. The Hoddle Street research precinct at Epworth Richmond is the home of the seven Epworth professorial units and the CTRC and the recently established Musculoskeletal, Dermatology, Prostate and Ovarian Cancer Research Centres. This co-location of research groups enables daily interaction, improving opportunities for collaboration, and encourages cross-disciplinary research activities.

The ongoing expansion of research across Epworth is coordinated by the Clinical Trials and Research Centre, which provides support services to Epworth clinicians, staff, affiliates and collaborators, assisting with a growing portfolio of investigator-initiated research programs across all eleven Clinical Institutes. Support services are also provided to commercial organisations that undertake clinical research at Epworth.

The CTRC plays a key role in the promotion of Epworth's research activities and developments both internally and externally, and is responsible for organising research forums and events, and producing publications.

### Epworth Prostate Centre

Epworth Prostate Centre is a unique, multidisciplinary, translational environment where clinicians and scientists can work closely together to advance discovery in prostate cancer research. Established in 2009 with Commonwealth Government support and under the executive directorship of Professor Tony Costello, the progress made by the centre was further recognised by the Commonwealth in 2013 with a significant grant of \$6.4 million to support prostate cancer research through to 2017. This support will translate the significant foundational research into more effective and efficient diagnosis, prognosis and treatments for prostate cancer, delivering substantial benefits to patients, their families and community. Also it will deliver real value to the Australian health system by providing an evidence based system for the management of prostate cancer.

At Epworth Prostate Centre, research is currently focused on identifying:

- » new ways to detect prostate cancer
- » ways to distinguish between slow growing and aggressive forms of prostate cancer
- » how prostate cancer responds to treatments and the molecular mechanisms that allow prostate cancers to resist current drug treatments
- » accurate markers that predict treatment response.

Beyond detecting and treating the disease, the research looks broadly at prostate cancer, the impact of the disease on individuals and communities and how the disease and treatment affects the quality of life of men and their families.

One such initiative is a multidisciplinary clinic that has been established to study the unmet needs of men with prostate cancer and provide supportive physical and emotional care to enhance their treatment outcomes.

Epworth Prostate Centre accesses and contributes to prostate cancer registries. Prostate cancer registries enable ongoing research into the successful prevention and treatment for prostate cancer. Men with prostate cancer donate tissue samples and clinical information for the purposes of medical research and education. These registries are a vital resource for researchers.

Clinical trials are a large component of the work of Epworth Prostate Centre. As well as independently running a number of clinical trials with researchers involved in the centre, there is also participation in trials run by other researchers and organisations. In 2014 researchers from the centre were running seven clinical trials including three trials sponsored by pharmaceutical companies and four investigator lead trials with more planned for 2015.

### OrthoSport Victoria Research Centre

Under the leadership of Professor Julian Feller, OrthoSport Victoria, in partnership with Epworth HealthCare, aims to enhance orthopaedic research with the conduct of high quality clinical research. It encompasses a broad range of projects from the management of sport injuries in elite athletes to knee replacements in patients presenting with osteoarthritis.

#### RESEARCH SNAPSHOT

##### COMPUTER ASSISTED VERSUS CONVENTIONAL OPENING WEDGE HIGH TIBIAL OSTEOTOMY – A COMPARISON OF RADIOGRAPHIC OUTCOMES

Medial opening wedge high tibial osteotomy (HTO) is a well-established procedure used in the management of patients with medial compartment osteoarthritis and varus (bow leg) lower limb alignment. The aim of the procedure is to slightly over correct the lower limb into slight valgus (knock knee) alignment, thereby unloading the affected medial compartment. Successful long-term outcome is dependent on patient selection, surgical technique and adequate correction. The exact amount of correction required is unknown, although OrthoSport Victoria has demonstrated in a previous gait analysis study that a correction to somewhere between two and three degrees of valgus is sufficient to improve abnormal adduction moments at the knee. Although most surgeons use a combination of intra-operative radiographs and visualisation to assess correction, the use of computer navigation is becoming increasingly popular in an attempt to improve surgical accuracy.

This study did not show a significant overall difference in radiographic outcomes of medial opening wedge high tibial osteotomy when comparing the use of intraoperative navigation to a conventional alignment technique. It did however demonstrate that navigation has a small effect on the spread of radiographic results about a certain target. This effect was most evident when considering patients with a larger preoperative deformity. We have also shown that navigation improves accuracy for this particular group of patients, and it may therefore have a role in this setting. Studies with more accurate outcomes measured immediately after surgery are required to definitively examine the accuracy of both operative techniques.

## Epworth Professorial Updates 2013/14

Epworth has seven professorial chairs in partnership with the University of Melbourne, Monash University, Deakin University and RMIT.

### Professor of Nursing

#### EPWORTH DEAKIN CENTRE FOR CLINICAL NURSING RESEARCH

**Professor Mari Botti, Epworth Chair of Nursing, Deakin University**

Led by Professor Mari Botti, the Centre aims to encourage and foster nursing staff and students to gain high quality clinical research training and acquire the skills required to utilise evidence-based paradigms to optimise clinical care.

Professor Mari Botti is the Epworth/Deakin Chair in Nursing and Alfred Deakin Professor at Deakin University. Her research focus is clinical and health services evaluation. She is a foundation member of the Deakin University research priority centre in Quality and Patient Safety and has a particular interest in postoperative pain management and the investigation of models of care that encourage patient engagement in their care, safety, health and wellbeing. She consults widely in the establishment of research collaborations and chairs the Deakin University Human Research and Ethics Committee.

### Epworth Victor Smorgon Chair of Rehabilitation Medicine

#### EPWORTH MONASH REHABILITATION MEDICINE UNIT (EMREM)

**Professor John Olver, Epworth Victor Smorgon Chair of Rehabilitation Medicine, Monash University**

Professor John Olver is Head of EMReM and Director of Rehabilitation at Epworth. As a world-leader in rehabilitation medicine research, the Epworth Monash Rehabilitation Medicine Unit delivers research findings that can be applied quickly and effectively to improve clinical rehabilitation programs, so that people recovering from injury or illness can maximise their quality of life, restore physical mobility and improve cognitive development. Professor Olver has developed successful national and international partnerships through its involvement in various research projects.

#### RESEARCH SNAPSHOT

##### PATIENT OUTCOMES AFTER OPEN AND MINIMALLY INVASIVE SURGERY FOR PROSTATE CANCER

Prostate cancer is the most commonly diagnosed cancer in Australian males after lung cancer, and is the second most common cause of cancer deaths in men. Surgery includes both traditional open radical prostatectomy and minimally invasive, robot-assisted prostatectomy. The physiological, functional, psychosocial and cognitive outcomes associated with long term recovery after surgery have not been investigated adequately, nor has there been a prospective, comparative evaluation of the outcome associated with the different surgical modalities.

A longitudinal, comparative study, funded by a three year grant from the Prostate Cancer Foundation of Australia, examines patient outcomes after both open and minimally invasive surgery for localised prostate cancer. The findings will address gaps in research, inform patients about their long-term recovery, and provide evidence for optimal care of patients who undergo prostatectomy for localised cancer irrespective of the surgical modality.

#### RESEARCH SNAPSHOT

##### THE USE OF A POST-STROKE CHECKLIST (PSC) TO IDENTIFY PERSISTENT LONG-TERM PROBLEMS AMONGST POST-STROKE SURVIVORS

This research project addresses the frequency of commonly reported long-term problems in Australian stroke survivors using a scale known as the Post Stroke Checklist (PSC). This study will be performed in collaboration with the Alfred hospital and is the first of its kind in Australia. The PSC consists of 11 long term issues that patients can experience post stroke (e.g. pain, mood, cognitive, communication etc) and identifies the appropriate course of action for each issue. The PSC has been designed to identify common long-term issues and enable a more appropriate mechanism for care for post stroke survivors. A secondary aim is to determine patients' overall satisfaction with the PSC.

### Epworth Victor Smorgon Chair of Medicine

**Professor Richard Gerraty, Epworth Victor Smorgon Chair of Medicine, Monash University**

Professor Richard Gerraty is Chairman of the Australasian Stroke Network Unit, a part of the prominent Leadership Group of the Stroke Clinical Network of Victoria's Department of Health, and is a member of the Council of the Australian and New Zealand Association of Neurologists.

His goal is to increase stroke and neurology research at Epworth, including participating in important investigator-initiated multi-centre studies, and developing new collaborations across Epworth sites. Professor Gerraty is actively involved in a number of projects and this year has expanded his repertoire considerably.

### Epworth Victor Smorgon Chair of Surgery

#### EPWORTH MUSCULOSKELETAL CLINICAL INSTITUTE

**Professor Richard de Steiger, Epworth Victor Smorgon Chair of Surgery, The University of Melbourne**

Professor de Steiger is an orthopaedic surgeon with a special interest in hip and knee joint replacement, and the management of adult hip disorders. He is also Chairman of Epworth's Musculoskeletal Clinical Institute and Deputy Director of the Australian Orthopaedic Association National Joint Replacement Registry. During the last three years, the clinical institute has continued to define the objectives and goals for surgical services, ensuring commitment to patient care, teaching, audit and research.

In 2013/14, the Epworth Musculoskeletal Research Centre was established in the Hoddle Street Academic Precinct. A research assistant has been appointed to coordinate the clinical trials the department will carry out in conjunction with other institutes.

### Professor of Psychology

#### MONASH-EPWORTH REHABILITATION RESEARCH CENTRE

**Professor Jennie Ponsford, Chair of Psychology, Monash University**

The Monash-Epworth Rehabilitation Research Centre aims to conduct research using research grants in trauma rehabilitation with a view to reducing long-term disability. Established in 2000, the centre is tracking more than 2000 patients over 20 years following a Traumatic Brain Injury (TBI).

Professor Jennie Ponsford is the Director of the Monash-Epworth Rehabilitation Research Centre. Professor Ponsford and her team collaborate locally, nationally and internationally with other trauma research groups. A world leader in her field, Professor Ponsford has spent more than 30 years as a clinician and researcher characterising and predicting outcomes and developing interventions for these difficulties after mild, moderate and severe TBI. Ongoing projects in the centre are focusing on early intervention for patients in post-traumatic amnesia, as well as treatments for fatigue, sleep disturbance and attentional difficulties after TBI.

#### RESEARCH SNAPSHOT

##### CLINICAL AND MRI STUDY OF TRANSIENT ISCHAEMIC ATTACK (TIA)

This investigator-led study is a clinicoradiological correlation in 70 TIA patients admitted through the emergency department of Epworth, looking at the duration of symptoms and signs in TIA and correlating these with acute MRI on admission and one week MRI to detect recurrent infarction.

#### RESEARCH SNAPSHOT

##### LIFETIME RISK OF TOTAL JOINT REPLACEMENTS

Professor de Steiger has collaborated with the University of Melbourne EpiCentre (Centre for Clinical Epidemiology, Biostatistics and Health Services Research) in population based studies investigating the lifetime risk of both total hip and total knee joint replacements. This research demonstrated an increase in lifetime risk for patients undergoing lower limb arthroplasty in Victoria and identified disparities relating to healthcare setting and socio economic status. These studies will have important implications for public health policy.

#### RESEARCH SNAPSHOT

##### THE EFFICACY OF EARLY REHABILITATION AFTER TRAUMATIC BRAIN INJURY

Traditionally rehabilitation in traumatic brain injury (TBI) has been delayed until after emergence from post-traumatic amnesia (PTA) which is a period of confusion following coma, in order to minimise agitation and maximise learning potential. However this may miss the potential to make earlier rehabilitation gains. In this randomised controlled trial we are examining the efficacy of providing training in activities of daily living (ADL) to TBI patients still in PTA compared to introducing ADL training after PTA. This project has the potential to influence practice in brain injury services both nationally and internationally and is funded by the Epworth Research Institute, Monash University, William Buckland Foundation and the Institute for Safety, Compensation and Recovery Research.

### Professor of Psychology

#### MONASH-EPWORTH REHABILITATION RESEARCH CENTRE

Professor Jennie Ponsford, Chair of Psychology, Monash University

The Monash-Epworth Rehabilitation Research Centre aims to conduct research using research grants in trauma rehabilitation with a view to reducing long-term disability. Established in 2000, the centre is tracking more than 2000 patients over 20 years following a Traumatic Brain Injury (TBI).

Professor Jennie Ponsford is the Director of the Monash-Epworth Rehabilitation Research Centre. Professor Ponsford and her team collaborate locally, nationally and internationally with other trauma research groups. A world leader in her field, Professor Ponsford has spent more than 30 years as a clinician and researcher characterising and predicting outcomes and developing interventions for these difficulties after mild, moderate and severe TBI. Ongoing projects in the centre are focusing on early intervention for patients in post-traumatic amnesia, as well as treatments for fatigue, sleep disturbance and attentional difficulties after TBI.

### Professor of Health Information Management

Professor Nilmini Wickramasinghe, Epworth Chair in Health Information Management, RMIT

Professor Nilmini Wickramasinghe works to help define and develop relevant health informatics research projects within the Epworth HealthCare environment.

Research within the health information management group at Epworth focuses extensively in these areas, enabling Epworth to pursue research in leading areas of health informatics today.

In 2013/14, Professor Wickramasinghe held the first, very successful, Health Informatics Master Class. She also received three separate best publication and poster awards from leading international conferences; MedInfo, ACIS (Australasian Conference on Information Systems) and ECIS (European Conference on Information Systems). This underscores the quality of the research performed by her team.



#### RESEARCH SNAPSHOT

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#### RESEARCH SNAPSHOT

##### SUCCESSFULLY IMPLEMENTING CPOE SYSTEMS INTO AUSTRALIAN PRIVATE HEALTHCARE CONTEXTS

Professor Wickramasinghe together with Dr Stephen Vaughan, Director of the Cancer Services Clinical Institute at Epworth, received a grant from Varian to look into the principle issues regarding the adoption of a Computerized Provider Order Entry (CPOE) in the private healthcare sector. The project Multi-centred study to measure user satisfaction, is underway.

### Professor of Dermatology

PROFESSOR RODNEY SINCLAIR, CHAIR OF DERMATOLOGY, THE UNIVERSITY OF MELBOURNE

Professor Rodney Sinclair holds a joint appointment with the University of Melbourne and Epworth HealthCare. Professor Sinclair has extensive research experience across a broad range of dermatology conditions, with specific interest in autoimmune diseases of skin and hair, skin cancer, psoriasis, genetic skin disorders and skin stem cell biology.

Professor Sinclair has further established the Epworth Dermatology research precinct with an increasing number of sponsored clinical trials as well as his own research in psoriasis, atopic dermatitis, skin cancer, actinic keratosis, cellulitis and infection of the skin, alopecia and nail infections (onychomycosis). Key highlights include: winning the bid to host the World Congress of the International Society of Dermatology in Melbourne in 2021; an invitation to deliver the Plenary Lectures at the World Congress of Hair Research in Korea in 2014, the International Hair Restoration Society Meeting in Malaysia in 2014 and to Chair the Symposium

on Androgenetic Alopecia and Telogen Effluvium at the World Congress of Dermatology in Vancouver in 2015.

Amongst his research successes is a 2014 Commonwealth House of Representatives Parliamentary inquiry into Skin Cancer in Australia, and the discovery of the link between skin cancer and internal malignancy.

#### RESEARCH SNAPSHOT

##### GROUND BREAKING RESEARCH ON DERMATOLOGY

Research from this group has been published in the prestigious journal Proceedings of the National Academy of Science that identifies a single molecular pathway in the skin that modulates both hair growth and fat tissue. A review article from these authors was featured on the cover of the prestigious British Medical Journal.

### Study targets aggressive brain tumour

The ACT IV study is a Phase III trial targeting patients with newly-diagnosed glioblastoma multiforme (GBM), an aggressive malignant brain tumour. The study provides a novel targeted vaccine or placebo in combination with standard radiotherapy and chemotherapy. Median survival time for patients with a GBM diagnosis is approximately 15 months and the trial aims to extend this time frame using this novel vaccine. The vaccine targets the 30 per cent of GBM patients with the EGFRvIII protein, which is over expressed on their tumour cells, to try to stimulate the body's immune system to fight those tumour cells.

In addition to the standard chemotherapy drug temozolomide, participants receive a monthly injection of the investigational vaccine rindopepimut or placebo for as long as they remain well and wish to continue. Patients are also monitored regarding their survival and wellbeing following completion of their participation in the trial.

Approximately 700 patients are participating in the trial worldwide, with Epworth being one of the highest recruiting sites in Australia. Epworth's Principal Investigator, Medical Oncologist, Dr Ross Jennens, was approached nearly three years ago to find suitable participants from within Epworth. The trial has been running at Epworth since mid 2012.

### SmartWard to streamline clinical team processes

Trials of SmartWard, the bedside information system created to help clinical and allied health staff with planning and documenting clinical care, have demonstrated significant progress in the technology since first conceptualised in 2011.

An Epworth Research Institute large grant is funding the latest trial, which follows a string of successful system tests conducted through a collaboration between Epworth HealthCare, Deakin University, RMIT University, Eastern Health and SmartWard.

Following on from the initial focus groups and early simulation with nursing staff, the system commenced the next stage of testing and development in August 2013. The current project involved a multidisciplinary team using the system in simulation at Epworth Eastern.

The ongoing testing will ensure SmartWard, originally designed for nurses, is suitable for doctors, pharmacists, dieticians and others who would typically use medical records during their day.

The device was developed by Matt Darling in 2011, after observing the daily routines of nursing staff on the ward where his daughter was cared for. He saw that many of the nurses were frustrated with the volume of documentation required, which took them away from the patient for significant periods. The system allows information to be updated in real time, cutting down on paperwork and allowing nurses to spend more time with their patients.

The system was officially launched at Epworth during Research Week celebrations, 26-30 May 2014.



Twin brothers Paul and David



## Sibling support



Paul was diagnosed in 2006 with a pituitaryoma, a rare, benign type of brain tumour, and was treated with surgery and radiation therapy. Seven years later Paul was diagnosed with a new malignant brain tumour, glioblastoma multiforme (GBM), one of the most common, and most aggressive, brain tumours in adults. He has two tumours and underwent surgery followed by radiation therapy and chemotherapy at Epworth Richmond.

In August 2013, Paul's treating physician neurologist and neuro-oncologist Dr Lawrence Cher, raised the idea of Paul participating in the ACT IV trial. The international trial, in which Lawrence is co-investigator, involves administering a monthly investigational drug or placebo aimed at extending the life expectancy of patients with GBM.

"Lawrence gave me a document to read at the beginning about the trial but I was ready to sign it right then, as far as I was concerned what harm could it do? Nothing can make it any worse and best case scenario it might actually do some good and someone might learn something along the way," Paul said.

Paul's identical twin brother, David, has become his carer since the first diagnosis, attending all of Paul's appointments with him. David says the Epworth treatment team has been an invaluable source of support.

"I've been so lucky with the specialists and support staff. Not only are they excellent physicians, they're such excellent people," Paul said.

"For me, because I'm the carer, there are times when Paul hasn't been well and I've been so grateful to be able to ring Lawrence or Wendie Hopkins (Clinical Research Coordinator) or Dr Michael Dally (Head of Stereotactic Radiosurgery) at any time, just to ask them what I need to do. I can't say how good that is. Paul and I are so close that I can tell when something's not going right," David said.

"The team at Epworth thought a lot about what makes the life of a cancer patient difficult and what they can do to alleviate that; I reckon they ticked pretty much all the boxes."

Although the trial is still in the early stages, Paul and David remain positive about the future.

"Even without the trial, Paul's not the type of person to lie down and say 'it's all over', he doesn't do that. I think a lot of it's mental strength," David said.

"David and I still go out and play golf if we want to, this hasn't stopped us; we went up to Port Douglas recently and had a good time."

"We know Paul's got this tumour and we know there are things we have to do but we don't sit there worrying about it, it doesn't make a lot of sense to do that, it will just drag you down," David said.

### Professor Wickramasinghe receives Best Research in Progress award

Epworth Chair of Health Information Management, Professor Nilmini Wickramasinghe has once again helped an Epworth project win international recognition. With her colleagues Dr Steven Cole and Dr Len Kliman, Professor Doug Vogel and Mr Steven Goldberg, they received the second runner's up award at the European Conference on Information Systems (ECIS) for best Research in Progress paper.

The research involves a gestational diabetes mellitus (GDM) pilot trial underway at Epworth Freemasons, to enable superior self-care for patients with diabetes.

More than 500 people attended the conference held in Tel Aviv in June 2014. With the theme Digital Work, Digital Life, it explored innovative designs, new business models as well as the affordances and controversies of digital work and life.

### Research Week at Epworth

The Epworth Research Institute hosts a successful Research Week each year, showcasing many of the clinical research projects being undertaken at Epworth, together with academic and research partners.

The program, held in May 2014, included a poster display and competition, breakfast and lunch sessions highlighting Epworth research and local clinical research, international experts as guest presenters, research seminars and a benefactors' session. A large research poster display adorned the auditorium and corridor at Epworth Richmond.

Exceptional presentations and workshops were delivered during the week, and attracted record numbers of participants.

Key forums and symposia of the week included:

*Allergy Respiratory Research Forum* with presentations delivered by Professor Robin O'Hehir and Dr Joanne Smart

*'Innovations in Technology for Healthcare'* by Professor Jim Black, Professor Nilmini Wickramasinghe, Professor Mari Botti and Mr Matt Darling *Cardiac Sciences Research Forum*, *'Cardiac MRI: there is more than shape and function'*, Dr Leah Iles and *'The Clinical Use of Cardiac MRI'*, Dr Sylvia Chen

*Oncology Research Forum* which featured the Ovarian Cancer Research Foundation at Epworth *'A New Translational Platform for Ovarian Cancer Research'* presented by Associate Professor Tom Jobling and Dr Andrew Stephens

*Stem Cell Research Forum* where Associate Professor Megan Munsie and Dr Kirsten Herbert talked about *'Stem Cells and their Clinical Application – Now & Future'*

Clinical Research Symposium which was an educational symposium providing researchers with an understanding of what they need to consider in further developing their skills as a clinical investigator, opportunities to sharpen their skills in clinical trial design and translational research and, importantly, how to successfully access funds. Presenters included Associate Professor Harriet Hiscock, Associate Professor Carolyn Allan, Mr Scott Bulger, Ms Annie Chester and Dr Dean McKenzie.

Healthcare Quality Forum featuring Dr Ross Wilson who presented on *'Healthcare quality: a continuing journey, comments on the US system and contrasts with the Australian setting'*.

The early-career researcher poster was awarded to Ms Louise O'Connor, for her poster *'The use of point of care surveys to identify key quality and safety priorities for multi-site health service'*.

The established research poster award was presented to Dr Emma Cohen for her poster *'Patient Participation in Acute Cancer Care: Quality of Symptom Management'*.

### Research Week sponsors

Epworth Research Institute acknowledges the generosity of the following sponsors who contributed to the success of Research Week: Abbott Vascular, Melbourne Pathology, Ansell, Slade Pharmacy and SmartWard.

Associate Professor, Deakin-Epworth Centre for Clinical Nursing Research, Bernice Redley, left, and Epworth Nursing Chair, Professor Mari Botti



## × A smarter way to work

“I like the idea that the nursing staff can do all of their usual documentation in the patient’s room. This gives them greater opportunity to engage with the patient, and patients have a sense of being involved in their own care and making decisions for themselves,” Nurse Unit Manager, Jasmine Kumar said.

Professor Mari Botti, Epworth’s Nursing Chair and Head of the Epworth Deakin Centre for Clinical Nursing Research notes that while SmartWard is a project with a strong information technology component, improving patient care and job satisfaction for staff lies at the heart of it.

“SmartWard in its most simple application is a documentation tool, where nurses can enter electronically what they currently do in multiple paper forms. In its most sophisticated form it will actually be a decision support and planning tool.”

“The idea is to reduce the risk of missed care, which happens because of unpredictable events in wards and people getting busy. It will provide prompts for care based on the care plan and that will allow nurses to think ‘can I do it now’, ‘do I need help because I’m busy?’”

“The outcome of the first focus groups was very positive; nurses could see the value of it and the potential to have input into its design. They valued being asked their views about the system. A lot of the time technology is brought in and clinicians are required to use it, rather than being part of the development,” Mari said.

The device has been in a simulation environment at Epworth Richmond since 2012 and was recently installed at the simulation lab at Epworth Eastern as part of a new, multidisciplinary trial.

The multidisciplinary study allows doctors, dieticians, pharmacists and anyone else who would access a medical record to do so in a simulated learning environment, so they can also have input into the design.

“Eventually all members of the multidisciplinary team will be able to access the patient’s history from their desks, while the nurses will need to spend less time on paperwork and have more time with the patient,” Jasmine said.

Complex Case Manager/Discharge Planner, June Greaves will form part of the group trial. “I see the system’s potential for giving access to more information at the ward level, which would be time saving and allow for immediate follow up.

“It could also give other disciplines knowledge of patients’ needs or home set-ups, potentially decreasing the length of stay and enabling a more knowledgeable discharge.”

“We know that clinical risk is significantly reduced when staff are at the bedside, developing shared goals with patients, undertaking assessments and actively managing risk,” Executive Director Epworth Eastern, Louise O’Connor said.

## Research Funding Awards

This is the fourth year of the Epworth Research Institute Grant awards, made possible through interest on the corpus built by funds donated to the Epworth Medical Foundation. In 2013/14 there were seven projects funded to a total of more than \$235,000. This year for the first time, five of the Epworth Research Institute Grants were named in honour of influential Epworth HealthCare clinicians, recognising each honouree’s contribution to Epworth’s growth and development during critical periods in the organisation’s history. Professor Brian Buxton, Professor Priscilla Kincaid-Smith, Mr Kingsley Mills, Dr Graeme Sloman, and Ms Yvonee Tjandra on behalf of Associate Professor Joe Tjandra, each personally presented the award to successful applicants at the Epworth Research Institute Dinner.

Congratulations to the following grant recipients:

### ERI GRANT RECIPIENTS 2013/14

#### Professor Brian Buxton Research Grant

**Professor Nilmini Wickramasinghe** \$41,692

*‘The role for predicative analytics to leverage healthcare data assets’*

#### Associate Professor Joe Tjandra Research Grant

**Ms Helen Crowe** \$49,688

*‘A pilot randomised controlled trial to evaluate the usefulness and effectiveness of an animated pelvic floor muscle exercise (PFME) model for patients prior to undergoing radical prostatectomy in improving the ability to perform correct pelvic floor contraction.’*

#### Mr Kingsley Mills Research Grant

**Dr Gavin Williams** \$48,673

*‘Neuroplasticity and motor recovery following traumatic brain injury (TBI)’*

#### Dr Graeme Sloman Research Grant

**Dr Sylvia Nguyen** \$21,802

*‘Cognitive Behavioural Therapy for fatigue following traumatic brain injury.’*

#### Professor Priscilla Kincaid-Smith Research Grant

**Dr Andrew See** \$50,000

*‘MAESTRO – A Phase II Trial investigating the management of solitary adrenal and kidney tumours using Stereotactic Ablative Radiotherapy for patients with renal cell cancer.’*

### EPWORTH RESEARCH INSTITUTE SMALL GRANTS

**Ms Michelle Kahn** \$10,000

*‘Development and preliminary validation of a clinically feasible instrumental scoring system for assessing associated reactions in people with brain injury’.*

**Dr Robert Stirling** \$10,000

*‘Improvement in quality of care provided to lung cancer patients at Epworth HealthCare through the support and development of the Victorian Lung Cancer Registry’.*

A certificate and a \$1000 voucher were also awarded to poster winners, Dr Emma Cohen for her poster entitled ‘Patient participation in acute cancer care: Quality of symptom management’ and Ms Louise O’Connor, for her poster entitled ‘The use of point of care surveys to identify key quality and safety priorities for a multi-site health service’



### Epworth HealthCare partners with Ovarian Cancer Research Foundation

A new partnership between Epworth and the Ovarian Cancer Research Foundation (OCRF) has been established to develop an ovarian cancer research centre at Epworth Richmond.

The new facility will primarily undertake translational research, implementing clinical trials arising from previous and ongoing OCRF-funded projects, as well as basic clinical and scientific research programs. The collaboration is expected to lead to a rapid expansion in the growth of basic science and clinical trial opportunities for those involved.

The OCRF fund the majority of the work undertaken in the MIMR-PHI Ovarian Cancer Biomarker Laboratory and are fully funding the lab at Epworth.

Working together with Epworth, the OCRF will look to advance projects such as the search for an early detection test using combination blood and urine markers and a newly discovered cancer specific mechanism of immune evasion, which may offer novel detection and treatment regimes.

The OCRF was established almost 15 years ago, with a three-pronged mission to develop and implement an early detection program for ovarian cancer; improve the mortality rate, management and long-term survival of women with ovarian cancer and; gain fundamental understanding of the causes of ovarian cancer.

Under the direction of co-founders Associate Professor Tom Jobling (Chairman) and Ms Liz Heliotis (CEO), the OCRF has established research funds and brought together surgical, clinical and laboratory research teams to develop a better understanding of ovarian tumour pathology. These relationships have evolved into a strong and focused program of research, aimed at improving diagnosis and patient management.



### Exploring a stereotactic solution for Parkinson's

Parkinson's Disease is a progressively degenerative neurological disorder for which there is no known cause, and limited treatment. Epworth Radiation Oncology Research Centre is offering patients with severe and drug-resistant tremors the opportunity to take part in a trial to explore a non-invasive alternative. Traditionally understood as a cancer therapy, stereotactic radiation is administered in a single escalating dose using image guidance. The patient is then monitored for side effects and quality-of-life measures. Leading this research trial is Dr Michael Dally, one of Australia's most experienced radiation oncologists in the field of stereotactic radiosurgery.

### New hope for early kidney cancer treatment

A surgical trial underway at the Epworth Radiation Oncology Research Centre is giving new hope to patients with adrenal and kidney tumours. The incidence of kidney cancer is increasing in Australia. However as it is predominantly a disease of the elderly, many patients are considered unsuitable for surgery owing to the presence of medical co-morbidities. Now a new clinical trial will explore the potential benefits of stereotactic radiosurgery as an alternative treatment to manage early kidney cancer. Patients attend a number of stereotactic radiosurgery sessions targeting the cancer over ten days with the outcomes measured by MRI and CT scans. It is hoped that this treatment will enable patients to maintain normal kidney function and avoid dialysis.

*For further information on current research projects, published books and articles, posters and presentations relating to the 2013/14 financial year, please refer to the research supplement available at [epworth.org.au](http://epworth.org.au)*



Senior Clinical Research Coordinator,  
Nicole Fairweather

## Partnering for progress

Translating research into better outcomes for patients is the driving force behind the partnership between Epworth HealthCare and the Ovarian Cancer Research Foundation (OCRF).

Epworth is set to become a hub for ovarian cancer clinical trials, based on research from the OCRF-funded MIMR-PHI Institute of Medical Research.

"We're now at a point where we are trying to expand some of the research work we're doing in the labs here into a translational phase. Previously, we had no mechanism to take that to patients and no mechanism to get that into the clinic, which is the absolute key. The partnership with Epworth presents a very good opportunity to do that, as one of the largest healthcare providers around," Head of the Ovarian Cancer Biomarker Laboratory, MIMR-PHI, Dr Andrew Stephens said.

"The staff in the clinic will be all Epworth staff. We will be mobile between the two sites. I think it's going to grow quite quickly; we'll be quite busy down there," Andrew said.

Nicole Fairweather recently joined Epworth as Senior Clinical Research Coordinator for the partnership. Nicole's role involves coordinating and overseeing operations for the OCRF-funded clinical sample program, across multiple collection sites and maintenance of the OCRF facility at Epworth's Hoddle Street site.

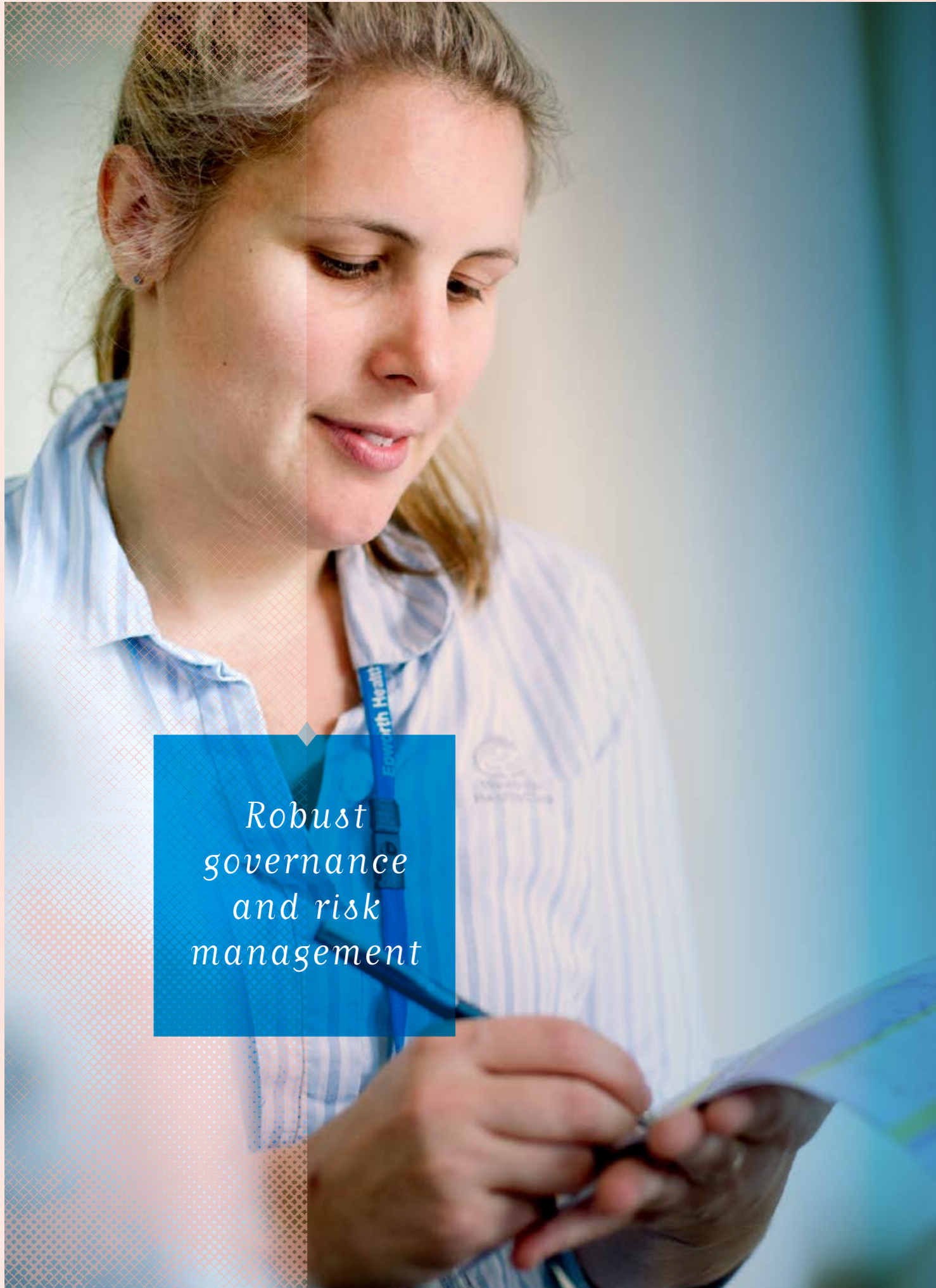
"I am very excited to be a part of this new collaboration; the benefits to partnerships like these in furthering ovarian cancer research are enormous. The partnership allows us direct access to clinical services, patients, surgeons and facilities, enabling me to provide the highest quality tissue samples, collected, processed and stored according to the researchers needs.

"This gives researchers the best chance to develop the vital early detection test required for this insidious disease. An early detection test would increase survival from approximately 20 to 25 per cent five year survival for late stage diagnosis to 80 to 100 per cent five year survival for Stage 1 cancer."

"We believe the OCRF/Epworth collaboration has the prospect of facilitating high-level clinical and basic scientific research into an insidious disease that claims the life of one Australian woman every 10 hours," OCRF chairman and co-founder, Associate Professor Tom Jobling said.

"The partnership with Epworth comes at an important time, when we have two promising looking projects that we need to move forward and get into the clinic.

"After all, there's not much point in us doing all this research in the lab if it goes nowhere."



## Robust governance and risk management

Epworth HealthCare's Quality, Productivity and Risk Management division saw a number of significant achievements during the 2013/14 financial year. The Board Audit and Compliance Committee, Chaired by Ms Maryjane Crabtree, monitors all group-wide enterprise risks, with in-depth detailed analysis being undertaken for each risk to ensure an appropriate control environment exists.

The National Safety and Quality Health Service (NSQHS) standards have been created by the Australian Commission on Safety and Quality in Healthcare (ACSQHS). Over the past eighteen months, the Epworth's working party and focus months have assisted staff to increase their general awareness and knowledge of individual National Standards, with specific focus on the intent of standards, links to policies and protocols and audit data and outcome results, demonstrating compliance to the standards objectives.

Over the past 12 months, the following group working party and focus months have been completed:

- » Clinical handover;
- » Blood and blood product management;
- » Deteriorating patient;
- » Medication safety;
- » Prevention and management of pressure injuries;
- » Governance;
- » Partnering with consumers;
- » Falls prevention;
- » Patient identification; and
- » Procedure matching.

One of the key achievements during the year was the development of the Epworth Incident Management Investigation Toolkit. The toolkit was developed to assist Epworth employees in the management of incidents and near misses as defined in the Enterprise Risk Management Framework, the Risk Management Policy and the Incident Management Protocol.

Education has commenced across key groups within the organisation and the final investigation process is due for implementation in August 2014. A Quick Guide Reference Tool and a Staff Responsibilities information page have been developed to complement the toolkit.

RiskMan continues to be used across the group for the reporting and documentation of incidents and hazards and for the management of risks identified on the risk register. In 2014 a medico-legal module and a legislative compliance module were added to the RiskMan suite of facilities, improving management and monitoring in these areas.

### *Antimicrobial stewardship and guidance implementation*

Epworth HealthCare and Slade Pharmacy have embarked on a collaboration to optimise the use of antibiotics within the group. One full-time pharmacist and three part-time physicians were recruited by the Epworth Antimicrobial Stewardship (AMS) Committee to form the AMS team. This team began work in April 2014, with an early focus on ensuring a positive result for NSQHS, Standard 3 at the ACSQHS Accreditation survey and a longer-term focus of ongoing effective antibiotic use across Epworth.

The AMS team is responsible for ensuring that clinicians at Epworth have access to, and follow, appropriate national and local guidelines for antibiotic prescribing. The team are working to ensure optimal use of antibiotics for our patients and to minimise the risks of unnecessary use, and the development of antibiotic resistant micro-organisms.

The use of broad-spectrum and last-line antibiotics is being reviewed, and this information will be communicated to clinicians within the hospital. This information will be used by both the AMS team, and prescribers, to maximise the usefulness of antibiotics now and into the future.

Work has begun on the implementation of Guidance-MS® – a software tool that will simplify the monitoring and analysis of antibiotic use. This will permit real-time tracking of our use of broad-spectrum antimicrobials across the Group, with a plan to provide individual prescriber-level feedback, to the benefit of the patient.

The AMS Committee also developed a patient brochure; Antibiotics are everyone's business, designed to help patients understand how best to use antibiotics, and what their treating clinicians are doing to best manage the prevention and treatment of infection.



### Rapid response to clinical deterioration.

Epworth's acute and rehabilitation services have come together to implement two patient observation systems as a further means of ensuring Epworth patient safety. The systems assist staff to identify and respond to patients who are at risk of deteriorating or developing complications during their stay in hospital.

The Group National Standard 9, Recognising and Responding to Clinical Deterioration Committee, has introduced two recommended NHQHS track and trigger observation and response charts. Acute services have introduced the single parameter system with two response categories, whilst rehabilitation sites have introduced the Adult Deterioration Detection system. These two charts have been designed around human factor principles and include the capacity to record the core physiological observations (respiratory rate, oxygen saturation, heart rate, blood pressure, temperature and level of consciousness), to specify the physiological parameters and other factors that trigger an escalation of care and specify the actions required when care is escalated.

Since the introduction of the track and trigger observation charts, annual point prevalence data shows a decrease in the number of patients who trigger one of the rapid response criteria from 3.5 per cent in 2013 to 1.4 per cent in 2014. There has been an increase in the number of patients receiving treatment if they breach the rapid response criteria, thus reducing the risk of patients developing adverse events. Since the introduction of the charts, the number of patients readmitted to the intensive care unit has decreased to an average of 4.75 patients.

Epworth has since incorporated the observation charts' principles into other areas, such as the emergency department and operating theatres.

### Nursing Care Guides

Nursing Care Guides (NCG) have been rolled out for urology, general surgery, colorectal, breast surgery, ENT, orthopaedics, neuroscience, gynaecology and oncology. The NCG will continue to rollout across all Epworth HealthCare sites by specialty. The guides have been positively received by nurses and doctors, with noticeable improvements in documentation and care.

Since the introduction of the NCG, independent Press Ganey patient survey data addressing 'nurses keeping patients informed' has improved with an increasing mean trend.

Initially a pilot program was implemented in the urology specialty across Epworth Eastern, Epworth Richmond and Epworth Freemasons. Pilot results indicated an improvement to consistency of content of nursing documentation. An audit six months post urology implementation was performed.

This demonstrated continual compliance with documentation of recording an introduction or admission progress notes. Documentation of complications demonstrated improvement since the pilot. Patient outcomes were well documented in areas of patient response to pain relief, drug orders and doctor follow-up and resolution of issues. This has led to improved communication between all health professionals as there is a narrative of information that can be accessed by all medical and allied health staff. This has a significant, beneficial flow-on affect to patient outcomes.

### Infection and sepsis after Transrectal Ultrasound (TRUS) guided prostate biopsy procedure

Following a successful grant application, the Infection Control team undertook a study on the incidence of sepsis following a TRUS prostate biopsy. The results identified that, of the patients receiving this treatment at Epworth, 1.2 per cent were readmitted with a urosepsis (infection).

Infection and sepsis after TRUS prostate biopsies are the most common cause of hospital readmission following the procedure. The frequency is estimated to be one and two per cent and studies indicate the infection rate is increasing and can be associated with antibiotic resistance (Fluoroquinolone resistant organisms). Antibiotic overuse or misuse has been held responsible, but a wider dissemination of resistant organisms resulting from globalisation and international travel may also be a factor.

The study examined the risk of infectious complications following TRUS prostate biopsy and whether infection is more common in men with recent overseas travel or antibiotic use.

Two hundred and fifty-five patients were contacted, with a median age of 64 years. Of these, 144 patients (56 per cent) had a transrectal biopsy and 111 patients (43 per cent) had a transperineal biopsy. Of all patients, 92 patients (36 per cent) reported recent overseas travel, with 29 patients reporting travel to multiple countries. Of the patients that had reported international travel, 48 (52 per cent) reported travel to a low or middle income country.

Results identified that there have been two post-operative admissions with urosepsis (infection). It is anticipated the study will continue into 2015.

### Introduction of a quality projects document library and project register

The Quality, Risk and Productivity Improvement division has created and introduced a quality project register to guide and support quality coordinators, nurse unit managers and other staff undertaking clinical audit or quality improvement projects. The register is provided as a SharePoint site and mimics the site used by the Information Technology department project team. The register includes a range of standard tools and templates designed to guide staff through project initiation to developing project plans, communication plans and transition plans. The site provides a centralised point for quality project requests and approval and allows all Epworth HealthCare managers to have visibility about current and past projects.

The templates provided are based on PRNCE2 project methodology, which is widely used at Epworth and allows projects to be managed according to their size and complexity. The site was launched in the 2013/14 financial year and has been embraced by staff, which is leading to improved project planning and implementation maturity at Epworth. The site also allows management oversight of projects across the organisation, with improved documentation of outcomes against expected benefits.

### Theatre improvement project

The Epworth Richmond operating theatres form a major component of the group's activity. In early 2014, an opportunity was identified to improve the efficiency and productivity of the theatres. Epworth engaged PricewaterhouseCoopers (PwC) to conduct an eight-week review of the theatres. Key areas of focus included the management and storage of consumables and equipment, booking practices and patient flow through the theatres.



Draft recommendations were presented to the Project Steering Committee and reorganised by the business into four work streams:

1. Booking rules: How patient bookings are initiated by rooms, the content and format of the bookings and the timeframes in which they are received
2. Performance: The monitoring and active management of bookings and theatre activities
3. Structure: The departmental structure of bookings, theatres and Day of Surgery Admission
4. Environment, equipment, consumables and refurbishment: The physical environment, security, storage of consumables and equipment, including the refurbishment of existing theatres to maximise space, optimise layout and improve patient flow through the theatres.

The scope of the first and second work streams has been extended to group-wide application, whereas work streams three and four are Epworth Richmond specific. A formal program structure has been developed to plan and implement the recommended changes and includes representatives from each operational site, with medical director and Visiting Medical Officer representation.

Planning and implementation of recommendations formally commenced in June 2014 and is expected to be completed in the 2014/15 financial year.

### Launch of workplace health and safety campaign

During Health and Safety Week in October 2013, Epworth HealthCare launched a safety and wellbeing campaign to improve attitudes and behaviours to safety and enhance the safety and wellbeing culture across the organisation. The campaign used the concepts of the existing slogan Think, Act, Stay Safe; developed as part of a staff competition in 2012.

Part of the key message was to reinforce the need for staff to have accountability for their own safety as well as the safety of others. It also highlighted the importance of staff speaking up, showing concern and taking appropriate action for all safety issues. The campaign focused heavily on staff wellbeing as an imperative part of workplace safety.

As part of the campaign, Epworth identified five attitudes or behaviours that were turned into 'Safety Syndromes'.

These 'syndromes' included 'I've always done it this way', 'I don't want to ask for help' and 'I have to cut corners'. From these 'syndromes' they generated associated acronyms i.e. SLAGIATT: Seemed like a good idea at the time and ICC: I cut corners, which became the basis of the communication vehicle to set about addressing and changing staff behaviour or mindsets around safety.

Performer Colin Lane assisted with the rollout of these messages to staff; explaining the syndromes in the 'Talking Safety Syndromes with Colin' video, launched during Health and Safety Week.

The overall message of the campaign was Life's Better in a Safer Workplace. Epworth. Better. Since its introduction, health and safety staff have noticed a significant increase in staff enquiries, including seeking assistance, asking questions and investigating ways of limiting injuries, all of which are positive and encouraging results. Furthermore, the Lost Time Injury Frequency Ratio has decreased month-on-month.

The campaign and reinvigorated wellbeing program have been positively received by all staff and offer another way of engaging and connecting staff with workplace safety.

### Clinical bedside audit

Epworth HealthCare has commenced clinical bedside auditing to ensure that staff meet the requirements documented in policies and protocols for patient care and safety. The audits incorporate three components – review of the patient medical record documentation, patient interview regarding their perception of care elements and an environmental or surroundings safety check. Each inpatient clinical department is required to complete two audits per week.

Between July 2013 and June 2014, over 1800 audits were completed. The results of the audits are communicated to the specific wards that completed the audits and are used in clinical risk analyses and provide guidance for national standard focus months. Results are reported to the NSQHS group working party and Epworth quality team and each indicator or question is assigned a tolerance level for the elected and accepted result. Areas of non-compliance can also trigger the generation of a group improvement project, aimed at improving compliance to national care standards.



Partnering with Consumers Committee member, Ross

## × A collaborative approach

"I came to Epworth HealthCare in 2009 as the consequence of an annual health check. My GP immediately referred me to Cardiologist, Associate Professor Ron Dick, and after five minutes and three questions Ron said 'You've definitely got heart disease, we need to get you in for an angiogram, what are you doing Friday?'"

Cardiothoracic surgeon, Mr Peter Skillington, completed Ross's triple bypass, followed by a ten day stay at Epworth Richmond that included visits from HeartSmart volunteer Kaye Caulfield. After his recovery was complete, Ross joined Epworth as a volunteer with the HeartSmart program, which provides cardiac patients with ongoing support and education.

"I started by visiting patients, which I really enjoyed. I have since graduated to become something of the program's administrative 'guru'," Ross said.

In 2013, Ross also became a member of Epworth's newly-developed Partnering with Consumers Committee, an initiative promoting feedback from those who have directly experienced Epworth's services and model of care. The committee also forms part of the organisation's Standard 2 Accreditation commitment.

"I have been contributing to feedback on written materials, publications, forms, and a variety of things that go out to patients or they see during a visit. As a committee we are, I think, still establishing ourselves. What I would like to see in the longer term is a much more intimate involvement with past patients and their families.

"There's a strong tendency for us in hospitals to treat and look after the patients, give them a great experience and then when they go home the focus can slope off fairly quickly. Whereas my experience was that the HeartSmart rehab program was particularly important. As a result I lost 20kg and started going to the gym, something I'm still doing three times a week. It completely changed the way I was living, and that was a consequence of follow up and the opportunity I had to have a continuing relationship with the hospital.

"That's a substantial example of the importance and significance of partnering with consumers. In my view it's part of our total commitment of excellence, everywhere, every day," Ross said.

"The experience of working on the committee has been a good one, building an increasing number of meetings. We initially met once a quarter and we're now aiming at once every couple of months because the work load is slowly starting to expand. The committee is strongly supported by the senior Epworth staff, who come along and participate.

"I would like to see us not only become established but to do it really well. My aspiration is to see Epworth manage the partnering with consumers process in such a way that other hospitals come to us and ask us how to do it. That would be a real feather in our cap."



*Caring  
for our  
community*

### *Australia's first daVinci robot donated to museum*

The first daVinci robot Epworth HealthCare introduced to the Australian hospital setting in 2003 moved to the Scienceworks Museum at Spotswood in November 2013. The surgical robot was donated by Epworth to Scienceworks for Think Ahead, a permanent exhibition about advances in science and technology.

The robot, predominantly used in Australia for the removal of tumours in prostate, kidney and uterine surgeries as well as cardiac procedures, changed surgical options for patients when it was introduced. Robots improve surgeons' dexterity and control.

Since the daVinci's inaugural operation at Epworth ten years ago, it has assisted in more than 200,000 operations across the globe. Robots are now used in dozens of hospitals across Australia, and have the potential to be used in other complex surgeries in the body.

### *Epworth Eastern launches hand massage program*

Epworth Eastern launched a hand massage service for patients in October 2013, following the success of the Epworth Richmond program and at the suggestion of Registered Nurse, Sharada Rumi. The service is staffed by volunteers and supported by Volunteer Services Program Manager, Frances Yucedag. Full training was provided for those who expressed interest in the program.

The program focuses on providing a calming experience for patients, as an extension of patient care services on the ward. Patients are either aware of the program and request a massage, selected by staff on 5 North and South or visited by a hand masseuse. Feedback was initially requested at the conclusion of each service, to ensure patient satisfaction and ongoing improvement during the program's early stages.

### *Epworth Richmond supports the Lighthouse Foundation*

Epworth Richmond's relationship with Lighthouse Foundation began in 2013 and continues to grow with support from Hospitality Services Manager, Andrea Hunter, Head Chef, Paul Hayes and Purchasing Officer, Morris Dintinosante.

Lighthouse Foundation supports young people who have experienced homelessness and are often traumatised by abuse and neglect. Lighthouse operates ten suburban homes in which young people form a family unit with a primary carer providing support. The residents learn skills which help them to transition into independent living. The Lighthouse Youth Resource Centre provides ongoing outreach to over 700 past residents and support to homeless young people.

Epworth Richmond used proceeds of a staff fundraiser to purchase a freezer for the Youth Resource Centre, which was donated fully stocked by Epworth supplier, Delica Meats. Epworth Richmond delivers food supplies regularly, helping Lighthouse to support its residential homes and promote the importance of nutritious meals. Morris Dintinosante coordinates the deliveries with shuttle bus driver Uni dropping off food supplies as he circles between Cremorne Street and the hospital.

Paul Hayes also arranged work experience for a young Lighthouse resident with pastry chef Vivien Barton. Engineering Operations Manager, Arthur Short, has organised for his team to provide maintenance checks at Lighthouse homes and team member Saxon Schultz volunteered to assist with data entry.

### Leica Neurological Operating Microscope

Funds raised from the Epworth Medical Foundation June appeal enabled Epworth HealthCare to purchase the next generation in operating microscopes. The Leica Neurological Operating Microscope is used in the operating theatre by neurosurgeons to treat patients with brain tumours and other neurological conditions such as spinal tumours, strokes and aneurisms.

Neurosurgeon Mr Craig Timms invited donors who contributed to the appeal to gown up, cross the red line in operating theatres and view the machine that they had helped to purchase. Organised on a weekend when the theatre was not in action, donors reported that it was wonderful to meet Mr Timms, dress up in scrubs and see the fantastic piece of equipment that they had made possible through their individual gifts. The total cost of the neuro microscope was \$413,072.90.

Surgeons praise the equipment for being easy to use, mobile, and improving the visibility of the tumours in brain and spinal surgery.

This is the only microscope worldwide with the ability to use fluorescence guides to outline tumours and aid surgical intervention. It works by using a solution called 5-ALA which when illuminated under blue light, causes the patient's tumour to glow an intense red while their healthy tissue appears blue, enabling the neurosurgeon to see the tumour more clearly than ever before.

### Run for Connor

In September 2011, 17 year-old Robert Connor Dawes ran from his home in Sandringham to the boatsheds on the Yarra as part of his training for the upcoming rowing season. Two months later, Connor was diagnosed with an anaplastic ependymoma, a type of malignant tumour. Major surgery resulted in loss of movement to his right side, impaired vision and short-term memory loss. Connor was determined to improve and spent hours each day at Epworth Brighton working on his physical and mental rehabilitation.

After leaving a lasting impression on the Epworth Brighton staff, Connor sadly lost his battle with brain cancer. To continue his legacy, Connor's family set up a fund to support brain cancer research. Connor's Run is an annual event held in September to raise funds for brain tumour research and treatment.

Each year, staff at Epworth Brighton volunteer on the day and assist with sponsorship for the event.

### Epworth Christmas choir

Each year in the lead up to Christmas, carol singing and festive music fill the halls and wards of Epworth HealthCare, led by the Pastoral Care teams at each site. The Christmas choir is a hit among staff and patients, with many staff returning each year to spread the joy.

Choirs elicit an incredible and often emotional response from patients, their families and ward staff. The staff choir at Epworth Richmond visits wards, emergency, ICU and waiting areas to sing a range of favourite Christmas carols. On other days, patients are treated to the sounds of the Salvation Army Band; Trinity Trebles and the Strathcona School Choir; Organised Water; and the Bill Brown Singers.

At Epworth Freemasons, the Salvation Army Veterans' Band performs their annual Christmas concert. Patients, doctors and staff gather in the courtyard to enjoy an hour of traditional Christmas music, while those unable to leave their rooms can watch the concert on their televisions. At Epworth Eastern, volunteer Gill Bell leads a group of staff and volunteers who sing on two different days; while Ensemble Q+, introduced to Epworth by a former patient, donates their time on another day.

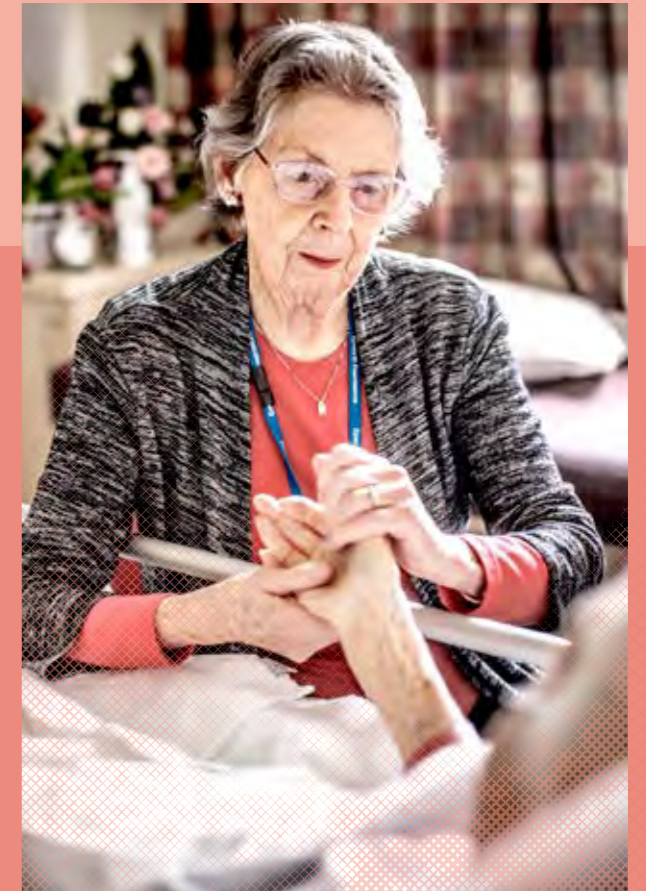
### Helping Wesley Mission at Christmas

Epworth staff at all sites are committed to generously supporting Victorians in need through Wesley Mission Melbourne's Food for Families Appeal. Throughout November and December, staff donate food items, biscuits, toiletries and toys or games for children. This enables Wesley Mission to distribute food and gifts not only over the Christmas season, but throughout the year.

### Christmas giving

Epworth Eastern staff supported the sites' annual Christmas appeal, with a collection of gifts and non perishable food items. All boxes distributed across Epworth Eastern were returned full of goods to be donated, including toys, games, food, make up, books and Christmas treats that assisted Boroondara Community Outreach, who provide support to people in need.

Likewise, funds raised from stalls operating across the site during the year also purchased \$1000 of toiletry items for men and women; such as tissues, shampoo, conditioner, toothpaste, toothbrushes and soap. These items went to the Uniting Care Harrison, who distributed them to people in need.



Hand massage volunteer Elizabeth

## A healing hand

Research has shown the benefits of complementary care (such as massage) to patient wellbeing, in addition to medical treatment. Benefits can include a reduction in fatigue, nausea, anxiety, depression and pain. Patients can also benefit from improved sleep, quality of life and mental alertness.

Epworth Eastern's hand massage service for patients is staffed by Epworth volunteers, Jill Segan, Susanne Smith, Elizabeth Voce and Julie Maddock.

"The role has been very rewarding as I observe patients relaxing, appreciating a hand touch, the time to chat and many times sharing their problems and sometimes loneliness," Elizabeth said.

"All express their appreciation of the service with comments ranging from 'I feel so relaxed. I was so tense and concerned over the coming surgery and I can now breathe normally'. 'That was so calming, thank you so much.' 'A great opportunity to talk with someone, while experiencing contact via a hand massage.' For patients with a longer stay, it has been rewarding to be remembered and asked to revisit them."

"It's useful to understand how the patient may be feeling on that day. Patients often express feelings of anxiety and fear of the unknown. They are concerned about procedures and the results of tests. Sometimes they are worried about partners and children at home.

"Some of the elderly are confused or concerned about the prospect of admission to an aged care facility," Jill said.

"I have not had any patients who did not enjoy the feeling of the personal touch. Often I find that male patients are amazed how good it makes them feel. I had one man who fell asleep, he felt so relaxed. Or sometimes patients will simply want to hold your hand and talk," Susanne said.

Julie said, "I find the visit is sixty per cent conversation and forty per cent massage. I've not had one patient who didn't remark on how much better they felt after the massage. Apart from personal non-invasive attention, it often serves to distract their brain from areas of pain even if only for 20 minutes."

The hand massage service is also offered at Epworth Richmond.

### Epworth supports Field of Women

Epworth Freemasons hosted a corporate box at the Melbourne Cricket Ground on the night of the Breast Cancer Network Australia's (BCNA) Field of Women event, held on Mother's Day weekend, Saturday 10 May.

The Epworth box was attended by staff and doctors associated with the Epworth Freemasons Breast Clinic, which has provided breast primary screening, diagnostic and tertiary care for women for 20 years. On the field, participants in pink and blue ponchos formed the shape of the Pink Lady to show their support for all Australians affected by breast cancer. All funds raised help BCNA to continue to provide free information and support to the growing number of Australians diagnosed with breast cancer each year.

### Lucas II cardiac compression machines

The Epworth Medical Foundation has purchased ten Lucas II cardiac compression machines, now available at all acute care facilities at Epworth Richmond, Epworth Freemasons and Epworth Eastern.

The cardiac compression machine (CCM) uses new technology to provide continuous and quality CPR to patients who have undergone cardiac arrest. The CCMs have been placed in all three Intensive Care Units, emergency and Epworth Richmond catheter laboratory, as well as our Clinical Education and Simulation Centre to train our staff.

There are several advantages of using the CCM over human CPR. Manually compressing the chest to a depth of 5cm (about one-third of the chest cavity) at a rate of 100 compressions per minute can be physically tiresome. The CCM compresses the chest automatically. It also uses a suction device which adheres to the chest to form a seal and provides complete recoil so that the patient's chest wall returns to the starting position between each compression. This enables the patient to breathe passively and maintain optimum circulation while in a life threatening state.

The machine is also radio translucent allowing the cardiologist to use image guidance while performing an interventional cardiac procedure to regain normal function while the machine is in action. The emergency response and catheter laboratory staff members have been trained in the correct usage of the CCM in our Education and Simulation Centre. Staff members in the education centre are now developing a protocol for use of the machines with input from our emergency and cardiac specialists.

Donors who contributed \$12,500 towards the purchase of each cardiac compression machine were invited to view the machine in action in the new Clinical Education and Simulation Centre.

### National Volunteer Week

The annual Epworth Volunteer Thank You Lunch was held at Epworth Richmond in May, in appreciation of the almost 300 volunteers across the organisation.

A number of volunteers received service awards during the event, including Margot Jenkinson, Audrey Lane and Judith Selby for five years of service at Epworth Eastern; and Emma Bardon, Ross Baxter, Kathleen Barr, Erica Hillas and Dot Williams for five years volunteering with Epworth Richmond.

Three Epworth Freemasons volunteers, Judy Currie, John Currie and Joan Miller, were recognised for an impressive 10 years of dedicated service to the site.

The theme for National Volunteer Week in 2014 was 'Celebrate the Power of Volunteering'.

### Pancake Tuesday raises more than \$1400 for charity

The 2014 Pancake Tuesday event was held in March at Epworth Eastern and Epworth Richmond. A record number of pancakes purchased raised more than \$1400 for UnitingCare Australia, providing care to individuals and families in crisis.

Epworth's Pastoral Care team run the event each year, supported by the executive team, food services staff and volunteers.

### Boroondara Volunteer Expo 2014

Epworth representatives attended the Boroondara Volunteer Expo at Hawthorn in March, to assist with growing the organisation-wide volunteer program.

Epworth Freemasons volunteer, Trish Amoretty, Epworth Eastern volunteer, Gill Bell, along with her Guide Dog Gilda, and Epworth Richmond volunteers, Keith Cozens, Emma Bardon, Robert Mero, Kaye Caulfield, Lois Drinnan and Janice Pearce, worked incredibly hard to ensure Epworth's successful presence at the expo.

It was a very successful event for Epworth's Volunteer Services Program. The volunteers and Volunteers Services Program Manager, Frances Yucedag, spoke with many interested people and handed out over 200 expression of interest forms.

### Heartbeat

Epworth HealthCare has several auxiliaries that support its work through stalls, events and raffles. The largest and most-long-serving of these is Heartbeat. This year Heartbeat celebrates its 30th anniversary. Run entirely by volunteers, the group has raised more than \$1.5 million since its inception in 1984 to help cardiac patients at Epworth. More recently the auxiliary has funded new defibrillators, a cardiac heating and cooling system, an intra-aortic balloon pump and a critical care cardiac monitoring system. All of these items are essential to providing the best care at Epworth.

### Epworth Eastern winter appeal

The annual Epworth Eastern winter appeal received a fantastic response from staff across the site. Donated items, including jumpers, blankets, coats and non-perishable food items helped support UnitingCare Harrison Services and the Boroondara Community Outreach Program. UnitingCare assists youth and families in crisis, while Boroondara helps adults, most of whom have a dual diagnosis of mental health issues and a disability. Both services are increasingly providing support to the homeless.

### Pastoral care services

The pastoral care teams at Epworth assist patients, family members and staff to build hope during difficult times of crises, illness or trauma. Pastoral care includes visiting patients and family members, arranging rituals and services of worship, and providing support to staff during times of need.

Throughout 2013/14 more than 500 patients attended memorial services organised by each of the pastoral care departments, to remember those who passed away at Epworth. The services offer people the strength and comfort they need to help them through difficult times. Pastoral care teams also coordinate and help coordinate and help at staff fundraisers such as the Pancake Tuesday event, to raise funds for community organisations.

Each of the pastoral care teams at Epworth Eastern, Epworth Freemasons and Epworth Richmond has continued to expand their spiritual and emotional support to patients, families and staff.

### Epworth/Collingwood Football Club partnership

The Epworth HealthCare/Collingwood Football Club partnership is now in its tenth year, having been set up initially to engage long-term rehabilitation patients and their families in socialisation and communication. The program acts as a diversion for patients from their injuries and hospitalisation and involves regular visits by Collingwood football players to Epworth. Although originally commenced for patients with Acquired Brain Injury (ABI), the program has been expanded to include patients with orthopaedic multi trauma.

Alan Toovey has been the Collingwood player representative for the last two years. He has engaged with trauma patients and their families and has been an exemplary ambassador for the club. Alan completed an exercise science qualification earlier this year.

The partnership also provides access to football tickets for patients, their families and staff. The opportunity for patients to attend Collingwood training sessions is also part of the program and in 2014, two therapy sessions will be held at the Westpac Centre.

### Australian Red Cross Blood Bank

Epworth staff have been consistent supporters of the Australian Red Cross Blood Bank mobile blood bank drive, with approximately 110 Epworth Richmond staff donating blood during the 2013/14 financial year. With one donation potentially saving three lives, this equates to approximately 330 people in the community who have benefitted from the ongoing generosity of Epworth donors.

The Red Cross visit Epworth Richmond every three months on average.







## Epworth Medical Foundation

Epworth HealthCare was founded in 1920 with philanthropic funds and thanks to the generosity of many supporters, philanthropy continues to be instrumental to its endeavors and achievements to this day. In 2013/14 the Epworth Medical Foundation raised a total of \$11m thanks to the individuals, companies, associations and trusts who value and support our work.

Donations fund more than half of all new advanced medical equipment purchases in our hospital and more than 80 per cent of all research funding so that ultimately Epworth can deliver the best possible care to patients. Donations also make it possible to build new world-class facilities and compassionate support programs to help patients and their families deal with difficult diagnoses and treatments.

### Board of Trustees

The Epworth Medical Foundation is grateful for the governance and support provided by the Board of Trustees throughout the year. The trustees are:

Mr Michael Robinson AO (Chair)  
 Ms Cathi Biddick  
 Mr Lindsay Cuming AM  
 Ms Evelyn Danos  
 Associate Professor Ron Dick  
 Mr Rod Fitzroy  
 Mr Keith Irvine  
 Mr Alan R Kinkade  
 Mr Anthony Nicholas  
 Mr David Rosback AM  
 Mr Bruce Siney  
 Dr Philip Williams AM

### Epworth's founding gift voted greatest gift of all time

During 2013/14, the donation that founded Epworth HealthCare in 1920 was voted by the public as the top Australian philanthropic gift of all time. The generous benefaction of six thousand pounds from Sir Aaron Danks in 1920 which enabled the purchase of the original 13-room mansion on Richmond Hill, 'Yalcowinna', was voted the best ever gift for the far-reaching consequences it achieved.

The people's choice was decided from a pool of 50 organisations selected by Pro Bono Australia. The Top 50 Gifts celebrates Australia's most significant philanthropic achievements from the early 1800s until today. The project was initiated by The Myer Family Company, The Myer Foundation and Sidney Myer Fund, Pro Bono Australia, Philanthropy Australia and the Asia-Pacific Centre for Social Investment and Philanthropy at Swinburne University of Technology, to showcase Australia's most significant philanthropic achievements. Each gift has been responsible for shaping Australian society, culture and public policy in areas including the arts, environment, health, housing, science and education. It is fantastic that the spirit of philanthropy which established Epworth nearly a century ago is still blossoming at Epworth today.

### Medical equipment donated

Epworth HealthCare is a leader in many clinical areas including oncology, cardiology, rehabilitation, orthopaedics and maternity. Donations this year have helped fund advanced medical equipment to improve patient outcomes in many of these areas.

#### In Epworth's units, donations have helped to fund:

- » Centrally-based patient cardiac telemetry systems to monitor cardiac patients anywhere in the unit
- » V60 ventilators and oxygen monitors

#### In operating theatres, donations have funded:

- » An operating microscope to delicately remove brain tumours
- » Advanced minimally-invasive aortic instruments for cardiac surgery
- » Ultra-vision retractors, surgical headlights and pacing boxes

#### In Intensive Care, donations have funded:

- » The latest ultrasound machines

#### And in the Emergency Department:

- » Multiple ECGs, cardiac compression machines and defibrillators.

These all help in the quest to save and improve lives.

In the area of rehabilitation, donations have purchased driver-simulators to train patients with acquired brain injury to return to driving; a Bioness H200 to activate damaged nerve pathways that control hand and arm muscle movement and an Alter G Treadmill to assist patients to learn to walk again, the first of its kind in Australia.

In cancer care, donations have helped to purchase a Varian linear accelerator to treat multiple cancers with stereotactic radio-surgery; scalp-cooling systems to prevent hair-loss from chemotherapy, the first in Victoria; palliative care beds for improved patient comfort and care; a GreenLight laser system for prostate cancer resections and accommodation support grants for rural patients seeking cancer treatment at Epworth.

Donations have also funded the purchase of:

- » Syringe pumps to deliver intravenous medication to patients in critical care units, including neonatal and paediatric intensive care;
- » Paediatric resuscitation trolleys with specialised equipment to resuscitate children from infants to 16 years of age.
- » Provision for age-appropriate private rooms for children with colourful soft furnishings, sofa beds for parents to stay, communication tools and entertainment units.

Without the support received through various means – online, mail, telephone and regular giving – these life-saving purchases would not have been possible.

### *Gala Ball*

This year's Gala Ball, held on Saturday 3 August at 2013 Crown Palladium, proved a wonderful success with a record attendance and record amount raised. One thousand three hundred guests attended the evening and more than \$1 million was raised to foster research within the Epworth Research Institute enabling Epworth to continue to provide the best possible treatment and care to its patients now and in the future.

Guests were treated to an evening of entertainment with Master of Ceremonies and entertainer Tim Campbell, tributes to ABBA and dance band Déjà Vu. The record breaking auctions included a Jeep Compass Sport, European river cruise with APT and heart shaped diamond pendant from Kozminsky.

Thanks to the tremendous support from our major partners ConMed, Gallay Medical and Merlon, associate sponsors Brainlab, Lifehealthcare, Medownick Laser Clinic, Slade Pharmacy, Technology One, Westpac and Zouki and 40 other sponsors which ensured the events success. Thanks also to members of the Special Events Committee led by Mrs Robyn Beddison OAM for their fantastic support in organising such a memorable night.

### *Giving to build research*

The research projects undertaken at Epworth HealthCare give patients access to new treatment trials at the frontier of medicine, with the possibility of health outcomes that are above and beyond those that could be achieved in a standard clinical setting. At the Epworth Research Institute, donations are funding important studies, such as a new treatment for trembling due to Parkinson's Disease and an international trial into a life-saving, minimally-invasive form of heart surgery.

### *Donors support minimally invasive cardiac surgery*

Generous donations from patients involved in a core valve replacements trial have helped this research to proceed. Epworth is one of eight Australian hospitals taking part in an international trial in which surgeons can replace a dysfunctional aortic valve without invasive surgery. The procedure, known as core valve replacement is minimally invasive and particularly beneficial to patients who are considered to be a high or prohibitive surgical risk, such as older patients.

### *Helping build Epworth's facilities*

In addition to the major redevelopment at Epworth Richmond, donations have been put towards facility improvements including the cancer and rehabilitation wards.

The redevelopment of Epworth Richmond is a truly historic event, creating a hospital campus that will become the largest private hospital in Victoria with 777 beds and the largest surgical facility, both public and private, in Australia with 39 operating theatres. Since making named facilities available, a number of areas have been committed and over 60 private rooms named in honour of our numerous donors. Facilities named to date include the Audrey and Matthew Voss Emergency Department, the Richard and Marietta Manders Foyer, the Zig and Helen Inge Cardiac Unit, the Ken and Cathy Biddick Orthopedic Ward, the Elias and Colleen Jreissati Courtyard, the Medtronic Auditorium, the James and Linda Wang Lecture Theatre and the Roy and Joan Mackenzie Library.

In addition, donors have funded a comprehensive upgrade to the oncology unit at Epworth Freemasons with advanced equipment and comfortable furnishings making it a more welcome place to stay. The upgrade includes new chemotherapy trolleys, blood pressure monitors, adjustable height beds and an ice machine. In addition, the palliative care rooms have been fitted with sofa beds so loved ones can stay overnight and balconies have been furnished to give patients and their visitors respite from the busy clinical environment.

Purpose-designed kitchens at Epworth's rehabilitation sites will now give patients the ability to relearn everyday tasks following injury or illness. Fitted with adjustable cupboards, bench tops and hot-plates together with mobility support devices, these kitchens provide a safe and supportive environment for mastering daily living skills.

### *Mackenzie Library*

The library within the Clinical Education & Simulation Centre was named in honour of Roy and Joan Mackenzie, who are providing ongoing support for its resources. Roy and Joan emigrated to Australia in the 1940s. Roy served as a navigator on RAF Bomber Command with SOE and SAS in the Middle East and Europe. Joan is an artist and a dressmaker by trade and has lived an active and charitable life. In recent years, they named Epworth as a beneficiary in their wills and endowed a fund that would support the growth of Epworth's library resources.

The Mackenzie Endowment Fund provides annual funding for new books, journal subscriptions and other library resources to bolster Epworth's growing research and teaching activities. Epworth's vision is to become one of the world's truly great academic and teaching hospitals and it is through the support of benefactors such as Roy and Joan that this dream is on track to become reality. Roy and Joan passionately believe in the pursuit of knowledge and have given generously to support our hospital and research resources.

### *Philanthropy supports staff development*

Epworth's philanthropic ethos has led to the organisation being the only hospital in Australia to offer over 40 scholarships, endowed in perpetuity, to build a legacy of learning that will impact both staff and patients now and in the future. Endowing a scholarship in perpetuity involves making a significant donation with the interest each year funding a staff member to further their education in a particular area of interest.

The vibrant scholarship program at Epworth is a most prestigious and highly-sought after staff engagement tool. The scholarship program offers staff the opportunity to further their education by completing a tertiary qualification, undertaking a field of study or attending an international conference or study tour. The scholarships help staff members further develop their skills and abilities, ensuring that Epworth will continue to provide patients with the best care possible.

Each of these scholarships is made possible by the generous support of individual and corporate sponsors through the Epworth Medical Foundation. In 2014, generous families including the Hydens, the Patons, the Heymansons, the Jreissatis and the Voss' have donated funds to endow scholarships in perpetuity, ensuring their wonderful legacy of learning and clinical care will last forever.

Year after year, each scholarship ensures that these families will be remembered fondly and forever at Epworth.

One family who recently established a perpetual scholarship at Epworth is the Heymanson family. The Heymanson Family Oncology Nurse Scholarship is made possible through the generosity and compassion of the late Bruce Heymanson. His wife Rosalie and their three children are proud to honour his legacy in this meaningful way. In 2014, the Heymanson Family Scholarship was awarded to Megan O'Kennedy to further her education in oncology nursing.

### *Men's Health Lunch*

The second Epworth Medical Foundation Men's Health Lunch was held in May 2014, with a focus on robotic assisted surgery in the treatment of cardiac disease. Four hundred and fifty people attended the event organised by Epworth's Special Events Committee in the Members' Dining Room of the MCG. Radio 3AW's John Burns provided light-hearted relief as Master of Ceremonies with speakers Associate Professor Ron Dick, Chair of Cardiac Sciences; Dr Peter Larkins, Sports and Exercise Physician and Mr Aubrey Almeida, Cardiothoracic Surgeon specialising in robotic assisted surgery.

A cardiac compression machine and surgical robotic console were on display for guests to test their surgical expertise as well as an information desk providing blood pressure checks and practical health tips. Major sponsor of the event Device Technologies was joined by associate sponsors Advantage Salary Packaging, ANZ and Philips, and eight table sponsors. Some fabulous prizes were on offer including an ultimate AFL Grand Final experience, a weekend with Australia's GreenEDGE team and lunch for ten by the Big Group. The event raised \$140,000 which will be put towards equipment in cardiac equipment at Epworth.

### *Women in Healthcare Luncheon*

The Epworth Medical Foundation held its sixth annual Women in Healthcare lunch, in October 2013 at Federation Square. Hosted by the President of the Epworth Board of Management, Mrs Janet Latchford, together with Master of Ceremonies, Lynda Kinkade, from the Seven Network, the event focused on health issues facing modern women today.

Speakers included Critical Care Clinical Institute Chair, Associate Professor Nerina Harley, Radiation Oncologist, Dr Bronwyn King, and Respiratory and Sleep Disorder Physician, Dr Michelle Caldecott. Topics included breast and gynecological cancer, cardiac disease, sleep apnoea, obesity, anxiety, depression and other common concerns. Thanks to major sponsor Advantage Salary Packaging and six table sponsors, the event raised \$30,000 for women's health at Epworth.



### Corporate Golf Day

A record field of 29 teams enjoyed a wonderful day of sport and camaraderie at this year's Epworth Corporate Golf Day at the Metropolitan Golf Club on St Patrick's Day. The Ambrose event commenced with a shotgun start at 1.00pm after a light lunch in the newly refurbished clubhouse. There were plenty of activities to amuse players at each of the tees including food and beverage tastings and purchasing a shot from a professional golfer. The prize winners were presented with awards by Group Chief Executive, Alan Kinkade, at a celebratory barbeque after the tournament.

Congratulations to Princes Laundry who took home the trophy. Thanks to the event sponsor Mr PS Lee, 12 hole sponsors and 13 team sponsors, the event raised \$80,000 towards the purchase of an ultrasound machine.

### Friends of Epworth Race Day

Members of the Friends of Epworth auxiliary, staff and sponsors, attended the Friends of Epworth Race Day at Moonee Valley Racing Club on Saturday 29 March and helped to raise \$55,000 towards equipment at Epworth. Racing personality Rob Gaylard acted as MC and guest tipster at the event with special guest Des O'Keeffe, Chief Executive of the Victorian Jockeys Association, and guest jockeys Brenton Primmer, Chris Symons and Michelle Payne, each sharing their experiences of Epworth's rehabilitation services following falls during racing. The success of the day would not have been possible without the support from race sponsors Device Technologies, Epworth Medical Imaging, HSPC, Kane, Medownick, Melbourne Pathology, Pantry Packer and Silver Thomas Hanley as well as ten table sponsors.

Friend of Epworth also holds fundraising stalls throughout the year at Epworth Freemasons and Epworth Richmond.

### 'Run for Your Life' Fun Run

One hundred and fifty staff, family and friends donned singlets and runners to participate in Epworth HealthCare's Fun Run on Sunday 16 March. The 'Run for Your Life' event took place at Princes Park, North Carlton to help raise awareness about the importance of keeping fit whilst raising funds for Cardiac Services at Epworth. Open to all, participants walked, ran or jogged the 3.2km perimeter and enjoyed a sausage sizzle afterwards, with \$8,000 raised to fund equipment in cardiology.

### Vietnam Cycling Challenge

Twenty-five enthusiastic bike riders cycled almost 380 kms through Vietnam in February 2014 to raise funds for Epworth's cardiac rehabilitation program, HeartSmart. After landing in Ho Chi Minh, the group cycled through villages, salt pans, coastal paths and rice paddies to the world heritage city of Hoi An.

Although challenged by long days and a few hills, the troupe completed the trip with some opting for the support vehicle when it got a little tough. Children and villagers appeared from nowhere to call hello and put out their hands for a high five as they passed. The annual cycling challenge, now in its sixth year, raised \$50,000 to support the Epworth's HeartSmart program.

Epworth HealthCheck patient Campbell McLaren joined the bike riders this year having hardly ridden a bike since he was a teenager. Campbell attended the Men's Health Lunch last year, which encouraged guests to have a regular health screening. The cardiac stress echo test he underwent as part of the HealthCheck service – Epworth's comprehensive health screening service – identified the need for an immediate angiogram, followed by a stent implant two days later. Campbell was enormously relieved and thankful to staff for their fantastic support and follow up.

### Great Wall Challenge

Sixteen participants raised a total of \$75,000 for cancer services at Epworth by taking a ten-day trek along the Great Wall of China, an ancient wonder of the world. The 'Hike for Health' included both restored and un-restored sections segmented with magnificent watchtowers atop mountain ridges with magnificent views over the local area.

Included in the troupe were oncologist Dr Allan Zimet, Epworth Medical Foundation Executive Director Scott Bulger, Trustee Cathi Biddick, several staff from cancer services and active members of the community.

### Great Ocean Walk for Wellness

A group of walkers, ranging from 17 to 75 years of age, battled the elements to hike 40 kilometres along the Great Ocean Walk in October. The walk from Cape Otway to the Twelve Apostles raised \$15,000 to help patients from country Victoria gain access to cancer treatment at Epworth. Battling up muddy hills, down steep steps and along windy ridges the troupe took in great views, pounding surf, changing vegetation and wonderful wildlife, all off the beaten track along the picturesque Victorian coastline.

### Donor networking

Epworth HealthCare was founded almost a century ago on philanthropy, compassion and a genuine care for our fellow human beings. This sense of community and friendship has stayed with Epworth throughout the decades with the Epworth Medical Foundation organising regular get-togethers for its donors. In addition to hospital tours and 'meet the doctor' sessions held at the various hospital sites, several outings were organised including a day trip to Bendigo, Cranbourne Botanic Gardens, the Johnston collection, steam train ride on the goldfields railway and tram boat ride on the Yarra.





Roy and Joan Mackenzie

×

## Funding a knowledgeable future

Roy and Joan Mackenzie generously donated funds for the ongoing growth of Epworth's library,

Since their donation, the Roy and Joan Mackenzie Library Endowment Fund is now used to purchase resources for the library. In 2014, all of the print books for the library were purchased via the fund.

"One of the reasons we donated was that we worked hard on our own and we just wanted to give it to the right people.

"We never thought it would turn out like this, it's a beautiful facility. We've had people come up to us and say 'we never knew you had anything to do with that!' Now the doctors and student nurses come here and have somewhere to meet and study – before they had nowhere for that sort of thing," Joan said.

"Roy and Joan passionately believe in the pursuit of knowledge and have made a significant contribution to Epworth. Their generosity ensures current and future generations of health professionals are able to provide optimum care to our patients," Donor Relations Manager, Vanessa Dannock said.

Library Manager, Susie Moreton said, "It is through the endowment we are able to purchase texts for our clinicians; and in return Epworth is able to offer the best clinical care. Every time I lend a book or see a trainee reading a text I know Roy and Joan would be delighted, and I am thrilled to be able to plan a bright future due to the Mackenzie endowment."

"We saw the work that Epworth was doing and we knew that's where we wanted to make a donation," Joan said.

The Epworth Medical Foundation is grateful to the following individuals, companies, associations and trusts that have supported our work throughout the year. In addition to those listed below are those who have asked to remain anonymous.

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Stanley Kenneth Brown  
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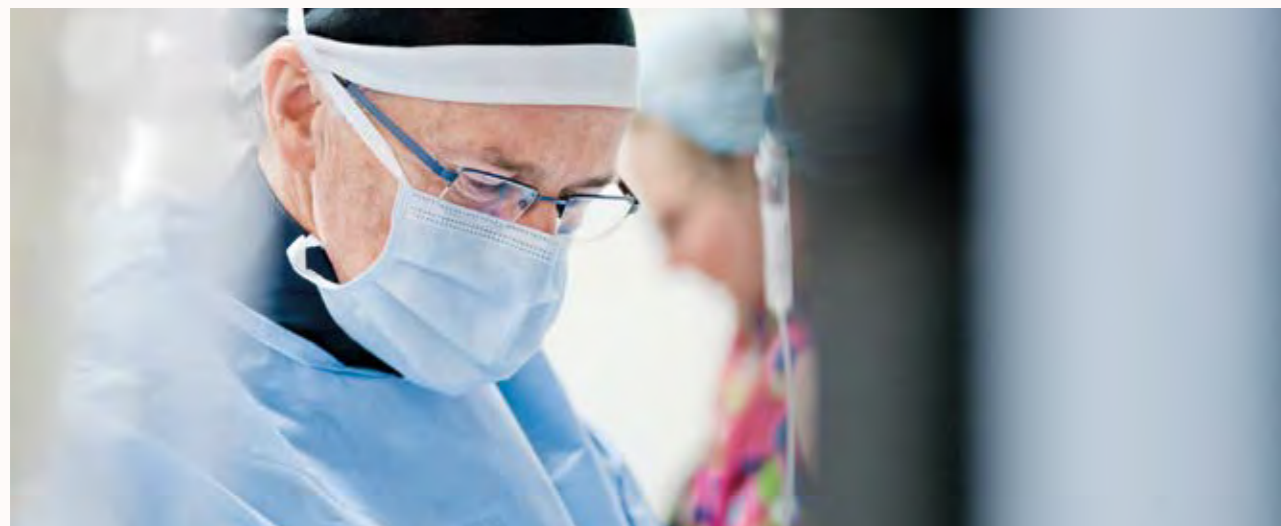
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