



**Epworth**

EPWORTH  
HEALTHCARE

ANNUAL  
REPORT  
2015

**INNOVATION**  
**EXCELLENCE**  
**COMPASSION**  
**CARE**





**Epworth**

EPWORTH  
HEALTHCARE

ANNUAL  
REPORT  
2015

**IN ALL THAT  
WE DO  
FOR OUR  
PATIENTS**





At Epworth, our patients are at the centre of everything we do.  
We embrace innovation in clinical practice, education and research  
to provide our patients the best possible outcome and experience  
— everywhere, every day.

**THE ONE GOAL  
THAT DRIVES EVERYTHING  
WE DO IS IMPROVING THE  
LIVES OF PATIENTS.**

We are committed to  
providing the best in patient  
diagnosis and treatment, and  
delivering high quality  
clinical care and services.

## CONTENTS

### ABOUT US

➤ 5

### PRESIDENT'S REPORT

➤ 6

### GROUP CHIEF EXECUTIVE'S REPORT

➤ 8

### OUR STRATEGIC PLAN

➤ 12

### YEAR AT A GLANCE

➤ 14

### BOARD OF MANAGEMENT

➤ 16

### GROUP EXECUTIVE

➤ 17



### DELIVERING EXCELLENCE THROUGH INNOVATION

➤ 18



### OUR PATIENTS

➤ 26



### OUR PEOPLE

➤ 36



### OUR DOCTORS

➤ 46





**BUILDING  
AND SERVICE  
DEVELOPMENT**

➤ 54



**IMPROVING  
HEALTHCARE THROUGH  
RESEARCH**

➤ 66



**FOCUS  
ON  
EDUCATION**

➤ 84



**OUR COMMITMENT  
TO QUALITY AND RISK  
MANAGEMENT**

➤ 92



**CARING FOR  
OUR COMMUNITY**

➤ 96



**EPWORTH  
MEDICAL FOUNDATION**

➤ 104



## ABOUT US

Delivering excellence in  
diagnosis, treatment, care  
and rehabilitation.

Epworth is an innovator, embracing the latest evidence-based medicine to pioneer treatments to patient care.

We have proudly delivered on our promise of providing quality-focused healthcare to our community for 95 years. From our humble beginnings as a small intermediate hospital housed at Richmond Hill in 1920 we've grown to become Victoria's largest not-for-profit private healthcare group.

It is our exceptional standard of care that has taken us this far and will continue to lead us into the future.

Our patients have access to our care through our various sites across Melbourne including Epworth Brighton, Epworth Camberwell, Epworth Cliveden, Epworth

Eastern, Epworth Freemasons, Epworth Hawthorn and Epworth Richmond, as well as specialist centres in Melbourne City, Berwick and Lilydale. In 2016 we will extend this care as we open our new teaching hospital, Epworth Geelong, in partnership with Deakin University.

We will continue to embrace new technologies, expand our many services for patients that need them most and always put our patients at the centre of every decision and action.

Excellence. Everywhere. Every day.



## PRESIDENT'S REPORT

Across a broad spectrum of measures, the past year has been one of much progress and success at Epworth HealthCare.

*As an organisation, Epworth is committed to the principle of continuous improvement and contained within this Annual Report are the significant achievements that punctuate this year in review.*

From patient satisfaction scores to staff engagement surveys, outstanding accreditation ratings, growth in our medical research and teaching capabilities and progress in the delivery of new state-of-the-art hospital facilities, our 5000 Epworth employees and 2000 doctors have delivered with distinction again this year.

These achievements are consistent with the objectives of our strategic plan which was reviewed during the year. These objectives are encapsulated in our strategic vision, The Epworth Experience — consistently delivering patient-centred care with compassion and dignity. Our continued commitment to this vision will lead us to our goal of being the leading patient-centred and academic healthcare organisation in the Victorian private sector by 2017, with a reputation that extends far beyond our state borders.

Through the Epworth Geelong development in partnership with Deakin University we will link clinical practice with teaching and research.

We are also partnering with Barwon Health in the provision of some services for public patients. We have linked with local businesses to ensure the new Epworth Geelong is truly a site built by and available for the local community extending to the state's western border.

This collaborative approach is also echoed through the South West Regional Cancer Centre project as we partner with South West Healthcare to offer capacity for up to 500 patients each year from 2016.

The Epworth Richmond Lee Wing redevelopment, due to open in early 2016, and the Epworth Freemasons renovations also ensure our patients will have access to state-of-the-art facilities enabling us to provide exceptional care for our patients.

After nine years on the Epworth HealthCare Board (three as President and three as Deputy President) in November 2014 Janet Latchford retired leaving an immense legacy.



At the time of Janet joining the Board, she, together with Board colleagues of her time and the new management led by Alan Kinkade, set about firstly building a sound financial foundation and thereafter expanding the Epworth reach through the provision of new facilities and embracing our commitment to research and teaching.

It is through the outstanding service of Janet and her strong leadership that Epworth finds itself in the position we do today. We are fortunate that we have not lost Janet's involvement with Epworth as, following her retirement from the Board, Janet agreed to continue as Chair of the Epworth Research Institute.

Upon Janet's retirement, we welcomed Ms Laura Anderson to the Board in November 2014. Laura brings a wealth of local and international corporate experience coupled with her passion for Epworth and our commitment to the highest standards of patient care.

Success such as detailed throughout this report is not achieved without a strong and committed leader, and on behalf of the Board, I wish to thank and congratulate our Group Chief Executive Alan Kinkade and his executive team who work tirelessly to enhance our much-treasured reputation as a hospital group of excellence.



*Mr Rod Fitzroy*  
President



## GROUP CHIEF EXECUTIVE'S REPORT

Epworth has a proud tradition  
of clinical innovation.

*This has been an extraordinary year for innovation and service development, while developing our people's capabilities and the capacity of our facilities to meet our patients' needs. This tremendous investment will ensure that Epworth remains at the forefront of meeting patients' expectations for the 21st century.*

Epworth has a proud tradition of clinical innovation. Strategically, as an academic teaching hospital, we aim to be a learning organisation improving the health and experience of every patient by integrating clinical practice with education and research.

As a consequence of executing our strategies, we are witnessing an increasing pace of innovation. We are offering our patients access to novel treatments and therapies that are generally not available to them in the broader Australian healthcare system. Some of the more notable innovations this year include:

- The increase in clinical trials and our positioning as the first to offer many trials with novel drug and device therapies, particularly for the treatment of cancer and cardiac disease.
- In December, Epworth introduced the Calypso system treating our patients with higher accuracy radiation doses with less toxicity. Epworth is the Australian leader in this technology.
- In May, in an Australian first, Epworth corrected a young man's congenital jaw deformity using a bespoke 3D printed jaw joint, designed, developed and manufactured in Australia. This technology will transform the Australian healthcare system in the coming decade.
- Also in May, Epworth became the first hospital in Australia to use 'Elements' stereotactic radiosurgery to irradiate up to ten brain metastases at the same time, remarkably improving patients' outcomes and reducing the potentially deleterious effects of other treatments on the patient's memory and brain function.
- In March, Epworth introduced deep brain stimulation to treat Parkinson's and other diseases. Our first patient from Western Australia had a device implanted which delivers electric stimulation to precisely targeted areas on each side of the brain. Once implanted, tremors are controlled. The surgeries for the first patient and subsequent patients have been a resounding success.



- Epworth Freemasons introduced a technique known as PRA (posterior retroperitoneoscopic adrenalectomy) to remove tumours of the adrenal gland through small incisions in the back of the body instead of the front. This technique introduced by Associate Professor Julie Miller avoids the abdominal cavity altogether, eliminating common side effects of bloating, slowing of bowel function and shoulder-tip pain.
- In April, Epworth became the first private hospital in Victoria to use OCT (optical coherence tomography) for clinical application in coronary arteries. This emerging technology gives unprecedented views of what is going on in the coronary artery, helping cardiologists to differentiate tissue characteristics and the type of plaque present in arteries and helping doctors deliver the best treatment to their patients.

During the year, we have invested significantly in our people, our values and our culture. Highlights include:

- The Nurse Unit Manager (NUM) and Leadership Development programs. These programs will enable Epworth to attract and retain the best NUMs and leaders in the industry through recognising, rewarding, developing and supporting our people to be the best that they can be.
- The inaugural Cleveland Clinic Internship saw eight senior nurses participate in the development experience of a lifetime with the world-renowned Cleveland Clinic.
- The Epworth Scholarship Fund was created over the last few years and now has an endowed fund in excess of \$10 million. This was used to finance 58 scholarships to provide our people the opportunity to participate in a broad range of professional development opportunities locally and internationally.



In December, Epworth Freemasons experienced a major flood event that required the immediate relocation of 90 patients to other Epworth hospitals. Significant corrective works were then undertaken over a seven month period. While it was a dreadful experience, the way the Epworth team pulled together to support each other in this time of adversity was fantastic and in a spirit of which I am eternally proud.

Our reach in service provision continues to grow with the further development of mental health services that we now offer at Epworth Camberwell. We were also successful in a tender process to design, build and operate a public cancer service at Warrnambool.



In August 2014, the Federal Minister for Health, Honourable Peter Dutton MP officially opened the \$43 million redevelopment of Epworth Camberwell and launched Epworth's mental health service — the Epworth Clinic.

Epworth now has construction valued at over \$500 million underway at Epworth Richmond (Lee Wing — Pod 4), Epworth Geelong and Epworth Freemasons. These projects will provide state-of-the-art facilities and Epworth Geelong will provide broader service offerings to the greater Geelong community.

All projects are running on time and on budget with:

- Epworth Richmond Lee Wing (Pod 4) to open in February 2016
- Epworth Geelong to open in July 2016
- The South West Regional Cancer Centre to open in August 2016

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, consistently delivering excellent patient-centred care with compassion and dignity.

Our patients are receiving exceptional care and our incidence of patient falls and pressure injuries are now incredibly low and best practice in Australia. We are also witnessing continuing improvements in our patient satisfaction ratings with Epworth Eastern rated the best hospital in Australia within its category. To further embed Epworth Excellence into our culture, Epworth has committed over \$13 million to roll out Point of Care over the next 18 months. This program will provide an increased level of patient-centred care, easier access for patient education, unique services and improvement in nursing efficiency.

In October, The Australian Council of Healthcare Standards surveyed how Epworth was meeting national healthcare standards. The survey team assessed that Epworth met all national standards and met with merit the following areas:

- Safety and Quality
- Risk Management
- Quality Management Systems
- Nursing Care Guides
- Board Governance

The survey team was very complimentary about the innovation and creativity of Epworth, our clear patient-centric care and our robust audit and feedback processes. This was fantastic and all our staff, doctors and patients should feel extremely proud of this assessment.

As a not-for-profit organisation, Epworth relies on the generosity of our donors to help provide our patients with the best possible facilities, equipment, surgical expertise and access to research. Surplus funds are reinvested directly into our people, equipment, facilities and service delivery to improve patient care. Interestingly, more than half of all medical equipment purchased each year at Epworth HealthCare is funded by generous donors.

We have now raised over \$25 million towards the Epworth Richmond redevelopment. We sincerely appreciate the ongoing support of our benefactors and the many volunteers who support Epworth's mission of delivering excellence, everywhere, every day.

The 'Epworth Goes to Rio' Gala Ball raised a phenomenal \$5.6 million to fund research at Epworth. We received an outstanding \$2.3 million specifically from pledges, with \$1 million donated by Audrey Voss and \$1.2 million by Greg Curzon-Siggers. I thank both Audrey and Greg for their incredible generosity and dedication to the future health and wellbeing of many. The corpus of this fund has risen to over \$10 million in just four years and will, in perpetuity, through its grants, assist early career researchers to undertake research to improve the lives of our patients now and into the future.

Each year the Epworth Research Institute honours influential Epworth doctors by awarding research grants in their name. These named grants are made in perpetuity and honour clinicians who have contributed significantly to advance care, knowledge and research at Epworth. The two new inductees this year were:

- Dr Murray Johns
- Professor Jack Cade

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 unique partnership with Varian.

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 Clinical Institutes, our many committees and those who provide their time and wisdom in supporting our teaching and research agenda.

A number of people who have made significant contributions to Epworth's success passed away in 2014/15. We extend our condolences to the families of:

**Professor Kincaid-Smith AC CBE**, who joined Epworth in 1992 as director of nephrology, was the first woman to be appointed to a Chair at the University of Melbourne and was president of the World Medical Association.

**Associate Professor Michael Armstrong**, a respected and valued Epworth Eastern orthopaedic surgeon who worked with us for ten years.

**Mr Ian Torode**, an orthopaedic surgeon at Epworth Richmond who provided care to countless children for more than 30 years.

**Associate Professor Ramesh Nagappan**, a consultant intensivist at Epworth Eastern since its inception, and a respected mentor to young physicians.

**Bruce Lockwood**, an exceptional leader within the Epworth community and a past president of Epworth HealthCare.

I appreciate the wise counsel, guidance and support given to me by the Board during the year. I would like to acknowledge the significant contribution from Mrs Janet Latchford who retired as President from the Board this year and welcome our new Board Member — Ms Laura Anderson. We also welcome Mr Rod Fitzroy as our new President.

I am very 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



## OUR STRATEGIC PLAN

At Epworth our strategic plan ensures that our objectives are set, enabling our staff and doctors to contribute to our common goal of delivering excellence in patient care.

In 2013, Epworth developed a strategic plan to set the direction of the organisation through to 2017.

In our commitment to ongoing improvement, we have now conducted a midway review of our plan and as part of this our vision has been articulated as:

**The Epworth Experience — consistently delivering excellent patient-centred care with compassion and dignity.**

Our commitment to this vision will guide us to being the leading patient-centred and academic healthcare organisation in the Victorian private sector by 2017.

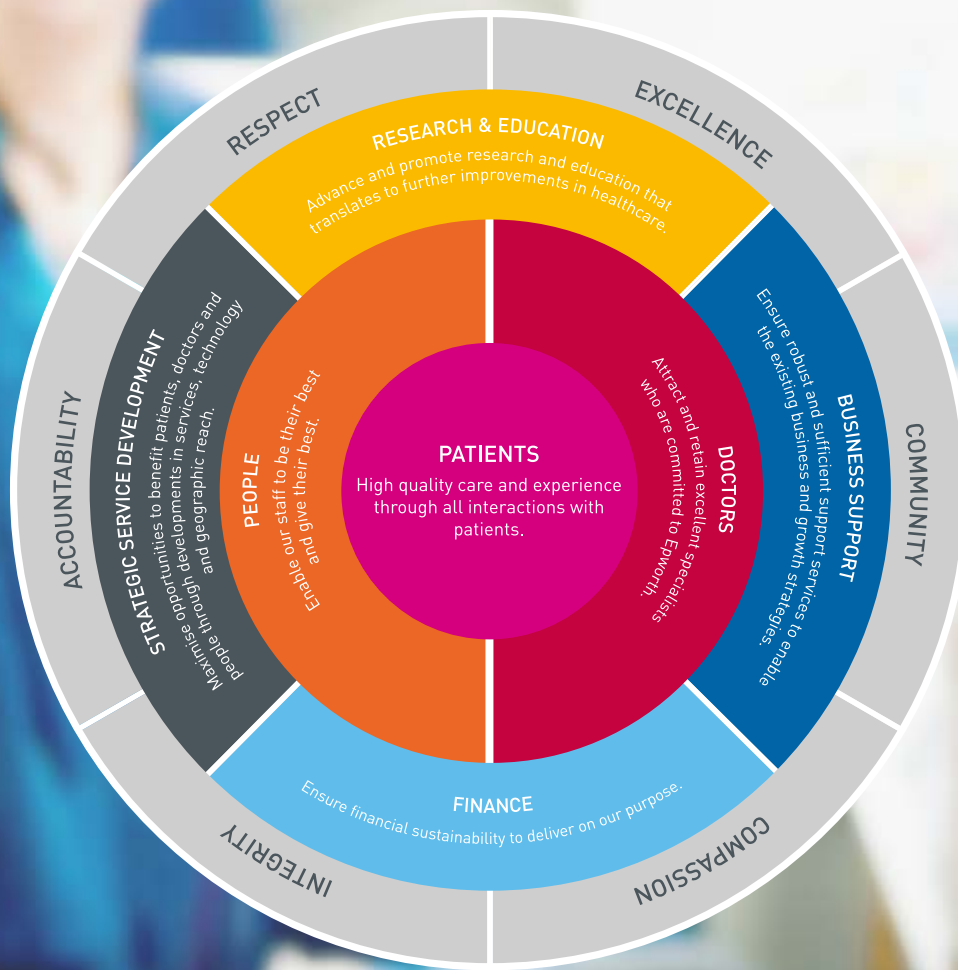
A review of the plan ensures we stay on track to reach our goals, and helps us explore ways to strengthen our approach.

A visual representation of our strategic plan tells the story of our strategy, clearly placing patients at the centre of all we do.

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

The updated plan is supported by the executive and our Board of Management and has been well received by staff. A Board committee has been established to facilitate optimal collaboration between the Board, the Group Chief Executive and the executive on strategic areas of focus. Activities of the committee include periodically reviewing the implementation of the strategic plan on behalf of the Board while maintaining a perspective on future directions and considerations in healthcare delivery.

Additionally, we are embarking on continuous improvement programs, detailed patient and doctor feedback and employee engagement analysis to measure our performance against our goal.



## YEAR AT A GLANCE

In 2014/15 we proudly continued to offer quality healthcare to our community. The graphs below provide an overview of the care we are privileged to provide.

### TOTAL BED DAYS

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

### EMERGENCY DEPARTMENT ATTENDANCES

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

### TOTAL PATIENT ADMISSIONS

2014/15	141,176
2013/14	132,969
2012/13	122,268
2011/12	114,911

### INTENSIVE CARE AND CORONARY CARE BED DAYS

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



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

#### OVERNIGHT OCCUPANCY

2014/15	85%
2013/14	85%
2012/13	89.28%
2011/12	88.5%

#### BIRTHS

2014/15	3,020
2013/14	3,418
2012/13	3,425
2011/12	3,502

#### OPERATIONS

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

#### SAME DAY SURGERY ATTENDANCES

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

#### RADIATION ONCOLOGY — TREATMENTS ADMINISTERED

2014/15	24,168
2013/14	23,346
2012/13	21,704

Service commenced 2012/13

#### RADIOLOGY — TREATMENTS ADMINISTERED

2014/15	33,446
2013/14	10,230

Service commenced 2013

## BOARD OF MANAGEMENT



Mr Rod Fitzroy  
President



Mrs Janet Latchford  
(Retired Nov 2014)



Prof Peter Brooks AM



Dr John Zelcer



Ms Maryjane Crabtree  
Deputy President



Ms Laura Anderson  
(Commenced Nov 2014)



Mr Alan Crosthwaite



Prof Paul Dugas



Mr Alan R Kinkade  
Group Chief Executive



Mr Robert Macmillan



Rev Prof Christiaan  
Mostert



Ms Janet Matton

## GROUP EXECUTIVE



**Mr Alan R Kinkade**

Group Chief Executive



**Mr Damian Armour**

CEO,  
Epworth Geelong



**Mr Scott Bulger**

Executive Director  
Epworth Medical  
Foundation



**Mr Vincent Borg**

Executive Director  
Rehabilitation & Mental  
Health



**Ms Liz Camilleri**

Executive Director  
Finance



**Prof John Catford**

Executive Medical  
Director  
Academic & Medical



**Adj Prof Sharon  
Donovan**

Executive Director  
Clinical Services



**Ms Rachel Droy**

Executive Director  
Health Contracts &  
Revenue (commenced  
February 2015)



**Ms Maree Feery**

Executive Director  
Human Resources



**Ms Tess Lye**

Corporate Counsel



**Mr David Nowell**

Executive Director  
Epworth Freemasons



**Ms Louise  
O'Connor**

Executive Director  
Epworth Eastern



**Mr James Piplios**

Executive Director  
Procurement and  
Facilities



**Ms Deborah  
Stephenson**

Executive Director  
Health Contracts  
(to February 2015)



**Ms Susan Wardle**

Executive Director  
Marketing and  
Business  
Development



**Mrs Nicole  
Waldron**

Executive Director  
Epworth Richmond



**Mr Malcolm Wells**

Executive Director  
Operational Projects



## DELIVERING EXCELLENCE THROUGH INNOVATION

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

### Victorian first for optical coherence tomography

In April, Epworth Richmond became the first private hospital in Victoria to use optical coherence tomography (OCT) for clinical application in coronary arteries. OCT is an emerging technology for performing high-resolution cross-sectional imaging, using near infrared light instead of sound.

Used by cardiologists, the OCT technology allows for a much more detailed image of coronary vessels, achieved in two to three seconds. Intravascular imaging with OCT requires the use of a catheter containing a single-mode optical fibre that emits and receives light. The optical echoes are then translated into a high-resolution, two-dimensional tomographic image.

Associate Professor Peter Barlis, who introduced the technology into Australia, worked with Associate Professors Ron Dick and Naylin Bissessor to use OCT to follow up on patients treated with a bioabsorbable stent more than two years ago.

A/Prof Barlis says the high level of imaging provides clearer results for doctors to work with.

“It gives us an unprecedented view of what’s going on in the coronary artery, and very clear images of how the artery is performing,” he says.

OCT helps cardiologists differentiate tissue characteristics and the type of plaque present in arteries, helping doctors decide on the best treatment for a patient.

“We use the technology on a case by case basis,” says A/Prof Barlis. “It’s for select patients — best suited to those with complex blockages or complex-to-fit stents.

“It’s also useful in patients whose stents may have developed complications — which unfortunately still happens — and this is by far the most useful test to be done, in addition to the angiogram, to give clues as to why the stent has failed.”

A/Prof Naylin says, “OCT is an excellent diagnostic tool that provides detail near field imaging of stents, coronary plaques and vessel architecture. It helps improve long-term outcomes by detecting disease early, so that treatment can be implemented timeously.”



### ARIA™ Medical Oncology Chemotherapy Prescribing launched

The oncology units at Epworth Richmond and Epworth Freemasons, in conjunction with lead oncologists, Slade Pharmacy and IT services, successfully implemented new functionality in the ARIA™ Medical Oncology information system which went live in February 2015.

The ARIA™ Radiation Oncology information system provides a comprehensive view of recorded patient information for oncology patients treated at Epworth.

The project delivered:

- a simplified and standardised process for electronically prescribing chemotherapy
- regimens, with a real-time view of the status of the order at any time

- real-time access to important oncology patient assessments and notes
- real-time access to drug administration events and history
- mobility (using mobile workstations at the point of care)
- collaboration and teamwork across both Epworth Richmond and Epworth Freemasons oncology sites and oncologists.

The success of the project would not have been possible without the team effort and continued enthusiasm of the oncology nursing staff and lead oncologists for embracing and facilitating the significant changes required.

## 3D printed jaw an Australian first

- In an Australian-first procedure at Epworth Freemasons, oral and maxillofacial surgeon Mr George Dimitroulis corrected a young man's rare congenital jaw deformity, using a 3D printed jaw and jaw joint designed and created in Melbourne.

Patient Richard Stratton was born without a left jaw joint (TMJ — temporomandibular joint) and as he grew, his jaw became more noticeably skewed, giving him limited flexibility that caused tension and pain, and restricted what he could eat.

Richard says his condition created a tightness in his face that would cause headaches on the opposite side as his right jaw joint had to overcompensate — something that was exacerbated when he was under stress.

“On busy weeks I'd go home with headaches and a lot of pain. It made everything a lot harder, and that affects when you're out socialising with friends,” says Richard. “I'd get quite tired, especially when I ate, and I just didn't want to talk as much.”

On 2 May 2015, Richard underwent surgery with Mr Dimitroulis and his surgical team in a five-hour operation to reconstruct Richard's missing jaw, using a custom-made piece printed in titanium and special polymer.



Richard Stratton

The jaw and jaw joint were designed, developed and manufactured by 3D Medical Limited (3DM) using the latest CAD-CAM technology with 3D metal printing capabilities.

Mr Dimitroulis says he envisions that customised medical devices will become an integral part of healthcare in the near future.

“Many people suffer from jaw joint disorders such as painful clicking and jaw locking, with thousands undergoing surgery each year to treat advanced arthritic and other degenerative joint conditions,” Mr Dimitroulis says.

“I can see that this prosthesis, invented here in Melbourne, could help people around the world who require total joint replacements for advanced degenerative joint disease of the TMJ.”

Mr Dimitroulis pioneered the development of the prosthesis with input from lead researchers Dr David Ackland and Professor Peter Lee from the University of Melbourne's Department of Biomechanical Engineering, and Ben Baxter from 3DM.

For Richard, the surgery has not only reduced his jaw pain but it has had a profound effect on his self-image, as well.

“I'm thankful Epworth had faith in a new solution because that's made a huge difference to my life”

“Because of the way my face was tilting to compensate, I had a tilted smile,” explains Richard. “It was subtle but it was something I was aware of and I felt self-conscious about that.”

Richard says he would often wonder what he “should have looked like”, if he had a functioning jaw. Post-surgery, he's overjoyed with the result.

“It's so amazing to have a symmetrical face,” says Richard. “It felt like this was the sort of face I was supposed to have. It's really increased my confidence and I feel comfortable in my own smile.”

Richard adds, “I think it was really awesome that Epworth was brave enough to allow George to perform the surgery. Not every hospital might have taken that risk on a brand new prosthetic, so I'm thankful Epworth had faith in a new solution because that's made a huge difference to my life.”



# New technology improves brain tumour treatment

- Every year, thousands of Australians are diagnosed with brain tumours and usually they are secondary to other cancers found in their bodies.

Epworth Richmond has become the first hospital in Australia to use a new Linac-based technology that can irradiate up to ten brain metastases at the same time.

Dr Mike Dally, Epworth Radiation Oncology head of stereotactic radiosurgery, hopes that a form of stereotactic radiosurgery called BrainlabAG ELEMENTS (Automatic Brain Metastases Planning) will eventually make whole brain radiation redundant. Whole brain radiation is a treatment that has been used for the last 50 years.

“Our aim is to demonstrate with our clinical research that brain function and quality of life can be preserved as well”

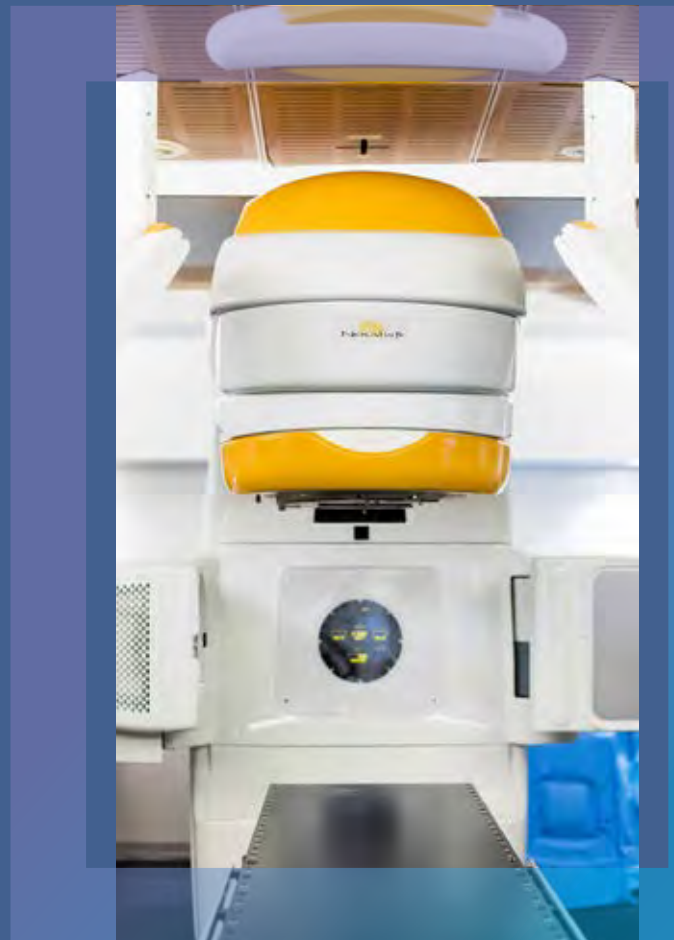
Dr Dally explains, “A patient with multiple brain metastases can receive radiation to their entire brain. This may control the disease within the brain for a number of months, but often has a deleterious effect on the patient’s memory and brain function, and therefore reduces the person’s quality of life.

“Up until now, patients with brain metastases have been able to receive focused stereotactic irradiation to one or two spots, sometimes three. Research from Japan has now demonstrated similar survival benefits for patients with up to ten metastases.

“Our aim is to demonstrate with our clinical research that brain function and quality of life can be preserved as well,” Dr Dally says. The SHRINC study (Stereotactic Hypo-fractionated Radiosurgery Including Neurological and Cognitive assessment) commenced at Epworth Richmond and Epworth Freemasons in late 2015.

Stereotactic radiotherapy can treat conditions that may not be able to be addressed by conventional surgery or radiation due to their position and/or the sensitivity of surrounding tissue, including malignant tumours of the brain, spine, lung, liver and prostate. It can also treat benign conditions such as arterio-venous malformations and other functional conditions such as trigeminal neuralgia.

The new treatment was introduced at Epworth Richmond in May 2015, five months ahead of any centre in the US, reinforcing the commitment at Epworth to utilising leading-edge technology that improves patients’ lives.



### Point of Care bedside system live at Epworth Eastern

Patients and clinicians are benefitting from the new Point of Care (POC) bedside system installed at Epworth Eastern, following collaboration by IT services, clinical staff and Oneview Healthcare.

This is an exciting collaboration as we strive to truly provide patient-centred care in all that we do. The aim of the system is:

- to improve patient experience, engagement and understanding of their care journey
- to improve staff satisfaction, improve time spent at the bedside with the patient and for non-clinical staff to be a part of the care team in all aspects of their roles
- to improve doctor satisfaction by having information available quickly, at the bedside.

Using touch-screen technology, the new terminals provide a range of entertainment, education and information services for our patients.

The terminals also offer our clinicians a range of integrated clinical applications including electronic prescribing and administration, patient results, electronic nurse rounding and a range of other customisable options, all accessed with a biometric signature. We have also added non-clinical functions to truly integrate the care team — this includes room ready (room cleaning and facilities maintenance tool) and electronic meal ordering.

The 22-inch Cybernet terminals have been installed at 154 bedsides and ten nurse station locations.

As POC project progresses, added features will be introduced including electronic leader rounding, effective discharge screens and admission/risk applications all designed to continue to meet our aim as specified above.

Following the success of the new system, a rollout to other Epworth locations is being planned, through 2015 and 2016.



## Epworth Clinic introduces new depression treatment

- For some patients suffering from clinical depression, antidepressant medications are not effective, due to undesirable side effects, a reduced efficacy over time — or a combination of both. But a new treatment available at Epworth’s mental health unit, Epworth Clinic, is offering a promising form of relief.

Transcranial magnetic stimulation (TMS) uses the application of a pulsed magnetic field, via a coil placed on the scalp, which alters the excitability and blood flow in specific areas of the brain. Repeated treatment (rTMS) has shown to be most effective, with patients receiving a course of treatment over a period of time.

Sessions typically last 30 minutes and treatment is supervised by a specialist psychiatrist and TMS qualified nurse.

“Initial treatment is 21 treatments over three weeks,” says Epworth Clinic’s Dr Peter Farnbach. Because Epworth offers the treatment over weekends, that means a consecutive treatment period resulting in a shortened hospital stay for patients, says Dr Farnbach.

Patients returning for treatment undergo the maintenance program, which is five sessions over a weekend, repeated every three to six months.

“The treatment is unobtrusive and has a very favourable side effect profile”

“We are also looking at doing some treatments twice a day, rather than daily, which will again shorten the length of stay,” says Dr Farnbach.

Though it’s not fully understood how rTMS works so effectively in treating depression, results speak for themselves.

“Our patients are doing very well. The treatment is unobtrusive and has a very favourable side effect profile,” says Dr Farnbach.



# Driving innovation

- **When Nancy Molloy suffered a fall at work, a fractured skull, bleed and blood clot led her to Epworth Rehabilitation to begin her physical recovery process.**

It was important for Nancy, who has multiple sclerosis, to regain her independence — a significant part of which, she says, was getting back behind the wheel.

“I was really keen to get back to driving and get life back to some semblance of normality,” says Nancy. “But having been off the road for a few months and knowing that I wasn’t as strong mentally and physically, I’d lost my confidence.”

Nancy worked with senior occupational therapist Pamela Ross at Epworth Hawthorn using the Ultra 2 Car, a high-tech French driving simulator gifted to Epworth from an anonymous donor via the Epworth Medical Foundation in November 2014.

The simulator at Epworth has been modified to accommodate more patients with disabilities — a factor Pam says may make it unique in Victoria — and has been used by around 17 patients so far.

As in Nancy’s case, patients who have lost use of their lower limbs can use a spinner knob added to the steering wheel and adapter attached to the pedals to accelerate and brake the car by hand.

“Nancy was able to learn to drive with hand controls and the simulator enabled her to do this in a safe and stress-free environment,” says Pam, who helped Nancy over a four-week period. “It was great to watch her gain confidence and develop the skills to use the equipment.”

It didn’t take long for Nancy to feel comfortable using the simulator, which she says reminded her of having her first driving lesson.

“Once Pam had set me up, it was easy going and once I got the hang of it, it was great fun,” recalls Nancy. “The different programs on the simulator for different driving conditions — raining, sunny, snowing — and situations — country, suburbs or city driving — were really helpful, so I could start off slow with minimal traffic, and then build up to busier roads when I gained more confidence. It was great to be able to test out my reflexes and response times as well.”

This meant that when Nancy went into real traffic with a driving instructor she was much more confident and needed fewer driving lessons, as she had already worked on her core driving skills during her practice, says Pam.

Many patients are referred to the simulator program following a traumatic brain injury that has resulted in cognitive and/or physical impairment, often from a car or workplace accident. But others are referred following amputation, stroke and diagnosis of MS or symptoms of dementia including



Alzheimer’s disease. Allowing someone back in front of the wheel in a safe and relaxed environment is key to boosting confidence and redeveloping lost skills, and can speed up the process of getting a patient closer to the goal of driving once again.

For Nancy, using the simulator helped propel her through her recovery in a supportive environment. “It’s given me the confidence to get back on the road again. I think I would have taken longer to get motivated and book in for lessons, if I hadn’t been lucky enough to try out the new simulator. It’s been a sort of refresher course and I think I’m a more careful driver for it.”



“It was great to watch her gain confidence and develop the skills to use the equipment”



Nancy Molloy receives driver simulator instruction from Pam Ross at Epworth Hawthorn

### Rare achalasia surgical technique available at Epworth Richmond

Epworth HealthCare is proud to be one of the only centres in Australia to offer patients a new technique for treating achalasia, a rare condition resulting in swallowing difficulties due to a non-functioning oesophageal muscle.

Treatment can provide better or even normal swallowing by dividing the lower oesophageal sphincter muscle. This is commonly done laparoscopically (with keyhole surgery), allowing food to pass more freely into the stomach.

The per oral endoscopic myotomy (POEM) technique allows the same operation to be undertaken using a conventional gastroscope, thereby avoiding incisions.

Mr Gary Crosthwaite, director of the Clinical Institute of General Surgery and Gastroenterology, undertook training for the technique in both the US and Germany. His POEM procedures have had excellent results for patients at Epworth Richmond.

“This is an exciting new development in the treatment of achalasia, which allows an even more non-invasive way of treating this condition than we had previously,” says Mr Crosthwaite.

“Treatment has progressed from open surgery where the recovery was lengthy to laparoscopic surgery which reduced pain and shortened recovery to a procedure that has no incisions at all,” says Mr Crosthwaite.

## OUR PATIENTS

Our patients are  
at the centre of all  
that we do.

### Advanced kidney stone procedure reduces patient trauma

Patients at Epworth Freemasons are benefitting from a new form of kidney stone removal, using a miniaturised telescope purchased from funds donated to the Epworth Medical Foundation.

**The Mini Perc enables kidney stones to be removed from a 3–4mm hole in the kidney, a less invasive method than when using conventional instruments.**

It is ideal for smaller stones, with conventional instruments still reserved for larger stones. The miniaturisation and development of these sophisticated instruments originates in Germany, and the telescope has been extensively used in India.

Associate Professor David Webb has been involved in the development of conventional keyhole surgery of the kidney, particularly in children, since the 1980s in both Europe and Australia. He reports that the Mini Perc enables a very cheap, cost-effective and atraumatic way to remove small stones in a single procedure. For patients and hospitals,

this results in a one-day case instead of the current two or three admissions required with multiple procedures using more expensive, disposable equipment.

“Recently I was able to use the Mini Perc to remove stones in two patients with rare recurrent stones from a congenital metabolic condition. Their condition, cystinuria, results in stones formed by amino acids which recur, are painful and cannot be treated by shock wave lithotripsy. Since childhood they have both had multiple surgeries. Both were delighted to have this procedure as a single treatment because they didn’t need to have a stent in the ureter, which is an uncomfortable accompaniment of conventional ureteric stones,” A/Prof Webb says.

“I have also used the Mini Perc for access to kidneys where the entry portal has been too small for conventional instruments, as well as to supplement removal of small stones in the presence of very large kidney stones.

“Currently, Epworth Freemasons is one of the few hospitals in Australia to have this equipment, and we are very grateful to our generous donor, who wishes to remain anonymous,” A/Prof Webb adds.



### Goodness Me it's a health and wellbeing magazine

To enhance the experience of Epworth's current patients as well as inform potential new patients of our services, an online wellbeing magazine was launched in February 2015.

Goodnessme.org.au features useful health and lifestyle tips, tapping into the expertise of Epworth staff and specialists.

Engaging articles are added weekly and the site is managed by Epworth's marketing team. Contributions are actively sought from staff to maintain dynamic content for the site's readers.

### Offering our patients the best in cancer care

The addition of the Varian TrueBeam radiotherapy system at Epworth Freemasons, along with the existing technology at Epworth Richmond, has supported Epworth HealthCare in becoming the largest stereotactic radiotherapy provider in Victoria — providing an unprecedented level of care for our oncology patients.

The new linear accelerator uses stereotactic radiotherapy — a highly accurate radiation beam that specifically targets tumours using onboard imaging, a robotic treatment couch and directed beam treatment.

The machine rotates around the patient to deliver a prescribed radiation dose from multiple angles with sub-millimetre precision.

“Epworth Radiation Oncology commenced treatment on its fourth linear accelerator, the Varian TrueBeam at Epworth Freemasons, with more than 80 patients being treated on the TrueBeam in its first two weeks of operation,” says Director of Epworth Radiation Oncology Dr Pat Bowden.

“This advanced technology enables our Epworth Freemasons patients and referring doctors to have access to stereotactic radiosurgery for the first time. Radiosurgery enables eradication of certain tumours with highly targeted radiation beams that cause minimal or no side effects.

“With the Varian TrueBeam purchase, Epworth Radiation Oncology continues to provide the most technologically advanced radiotherapy facilities in the country.”

The addition of the Varian TrueBeam expands the already large range of radiation therapy technologies available to Epworth cancer patients including stereotactic, deep inspiration breath hold for breast cancer, and Calypso.

Deep inspiration breath hold is used to reduce the dose received by the heart for left-sided breast cancer patients, reducing their risk of long-term cardiac events.

Calypso is the ‘GPS for the body’ where small transponders are inserted into the pelvis for prostate cancer patients to help locate the treatment area; it is interfaced with the linear accelerator and sends signals to the machine to compensate for any patient movements. This allows the treatment to be even more accurate than previously possible, and offers the opportunity to improve patient outcomes. Epworth is proud to host the first clinical installation of Calypso in Australia, which is offered to our patients at both Epworth Richmond and Epworth Freemasons.

### Epworth excellence captured in film

Celebrating the expertise, empathy and care experienced by Epworth patients and their families, our short film *A New Day* captures the workings of a hospital environment with the emotional highs and lows faced each day — birth, illness, getting better and death — in an honest and moving manner.

Garnering an impressive 28,500+ views in its first three weeks of release the film clearly touched the hearts of both Epworth staff and the public.

Epworth’s marketing and digital strategy manager, Kristina Garla, believes the short film reflects our dedication to patient care.

“The patient journey is very important to everyone at Epworth, and all our employees play an integral role in delivering the best possible patient experience. We would like to thank the considerable number of Epworth employees across Epworth Eastern, Epworth Freemasons, Epworth Hawthorn and Epworth Richmond for their generosity and flexibility to help us produce this piece of work that we are really proud of. We could not have done this without them.”

View the film on Epworth’s YouTube Channel:  
[youtube.com/user/EpworthHealthCare](https://www.youtube.com/user/EpworthHealthCare)





# Outstanding results for our first deep brain stimulation patient

➤ For Harrie Martens, life in retirement was starting to lose its sheen. Affected by his worsening essential tremor, Harrie's usual leisure activities were becoming harder and harder to enjoy.

"It restricted me very badly," explains Harrie. "I found I couldn't do simple things like writing, using a computer, fishing, playing pool. All the things I love to do."

The 65-year-old WA resident had been a keen traveller, touring the country in his campervan and meeting new friends on the way, but the tremor — which presented with traces of Parkinson's disease — meant getting out was becoming a challenge.

"I tended to become a bit of a hermit, because it's hard to go out and do things when you're shaking all the time," he says.

That's when Harrie booked in to have deep brain stimulation at Epworth Richmond, under the care of Epworth surgeons Mr Girish Nair and Mr Andrew Evans. Travelling from Albury, WA to Melbourne for the treatment meant Harrie could have surgery almost right away, under his private health insurance scheme, rather than waiting up to eight months in WA through public health.

"If my tremor returns I can adjust the intensity of the settings"

Harrie's procedure was the first for Epworth Richmond, which involves a surgically implanted medical device — similar to a pacemaker — that delivers electrical stimulation to precisely targeted areas on each side of the brain. Once implanted, tremors are controlled by a set voltage that can be raised or lowered depending on need.

"If my tremor returns I can adjust the intensity of the settings," explains Harrie.

A/Prof Bruce Waxman, Medical Director at Epworth Richmond, says deep brain stimulation surgery (DBS) has undergone significant changes in the past five years, reducing operating time and surgical complications.

"This new-look approach to DBS may convince the sceptics of its potential as a life-changing procedure," he says. "DBS can improve our patients' quality of life in one stage with a hospital stay of just two days."

Mr Nair says Harrie is extremely thankful for his treatment at Epworth.



Surgeon Mr Girish Nair

"Harrie came to me with disabling symptoms impairing his ability to be independent," says Mr Nair. "His surgery has been a resounding success and he is thrilled to have his life back in control."

Now returned to WA, Harrie is getting back to a regular life unrestricted by his tremor, and hitting the road in his campervan is top of the list.

"It's almost like getting a second lease of life," he says.

## Lung function improved with new treatment

- A revolutionary procedure is drastically improving the lives of patients with advanced emphysema. In February 2015, respiratory physician Dr Nick Wilshire performed the first bronchoscopic lung volume reduction (BLVR) at Epworth Eastern.

Used in the treatment of advanced emphysema, BLVR involves the insertion of one-way valves into the airways, allowing gas and mucous to exit the targeted area of the lungs, and preventing the re-entry of air into the targeted segment.

Worldwide, the procedure has been performed on more than 10,000 patients with chronic obstructive pulmonary disease (COPD) patients, and has an 80 per cent success rate in patients with severe emphysema detected on CT scans and evidence of hyperinflation on lung volumes. The surgery takes around 15 minutes to complete.

Emphysema sufferer Colleen Allan underwent surgery with Dr Wilshire in June, and says it's in carrying out her everyday activities that she's noticed the biggest difference.

"I had awful trouble sleeping and terrible trouble showering — I used to get in and out of the shower as quickly as I could — so those have been two of the main improvements," says Colleen, whose struggle with breathlessness made daily living a challenge.

"Trying to turn over in bed used to be an issue, but I don't approach that with fear anymore. I'm now breathing much easier in bed and sleeping like a baby.

"I had an ongoing discomfort in my midriff," adds Colleen, "and that's completely disappeared since the procedure."

*"I'm now breathing much easier in bed and sleeping like a baby"*

It is estimated that in Australia 7.5 per cent of adults over 40 have COPD that affects their quality of life, and up to 29 per cent of adults over the age of 75. It is the second leading cause of hospitalisation in our community, and one of the leading causes of death and disease burden.

"The procedure can be very successful, and lead to significant and prolonged improvements in patients' lung function, levels of breathlessness and quality of life," explains Dr Wilshire.

"With regards to Colleen, she was severely impaired in terms of lung function, with her capacity reduced down to 27 per cent. Quality of life, in terms of even the simplest of activities, was significantly impaired. The procedure was very straightforward, with three valves inserted over a 20-minute period. Recovery was uncomplicated, and at the one-month mark, Colleen had already noted a life-changing level of improvement in breathlessness and quality of life. In these cases, we can expect improvements in lung function of up to 40 per cent with the best responders."



Patient Colleen Allan is very grateful for the change Dr Nick Wilshire (pictured right) has made to her life



## Turning challenges into positive change

- **Cancer diagnosis isn't commonly associated with bringing a sense of empowerment. But for many, the change in life's direction can prove a valuable opportunity to focus on what is important.**

For two of our oncology patients, their cancer journey over the last year has led them to start new projects that have not only offered them a welcome distraction but will also be beneficial to others diagnosed with cancer.

For 39-year-old Shelli Whitehurst, her journey through stage IV bilateral breast cancer has empowered her to focus her entrepreneurial and business skills on a new challenge.

Shelli helped develop the Kit for Cancer — [www.kitforcancer.com](http://www.kitforcancer.com). Kit, as it is affectionately known, was launched through online crowd funding and is a physical pack full of tried-and-tested practical items that are useful for people undergoing chemotherapy.

“Kit for Cancer has been curated by current and former cancer patients and is designed to support people from the moment they are diagnosed to the ‘next’, by providing the essentials to assist them through the discomfort of treatment.

“Cancer is ugly, but that doesn't mean the treatment process has to be,” Shelli says.

The kits are available for individuals (either for direct shipment to a chosen recipient or to ‘pay it forward’ to someone who needs one) or through corporate social

responsibility programs where a kit is given to newly diagnosed staff members. Thirty per cent of all Kit proceeds are donated to support services for cancer patients and their families.

When diagnosed with stage II bulky, mediastinal Hodgkin's lymphoma, 20-year-old Kate Jenkins openly admits that there were plenty of times that she asked ‘why me’. But being a motivated and social young woman, Kate hasn't let her diagnosis stop her from keeping in touch with others or from having a good laugh.

Kate started a blog to share her cancer journey — [TinyK8.com](http://TinyK8.com). The blog was a way of keeping family and friends up to date with her journey and filling time during treatment but quickly developed into a practical personal insight into cancer treatment and the challenges each stage can bring.

“My blog is mainly about my diagnosis and the challenges it has brought to my everyday life,” says Kate.

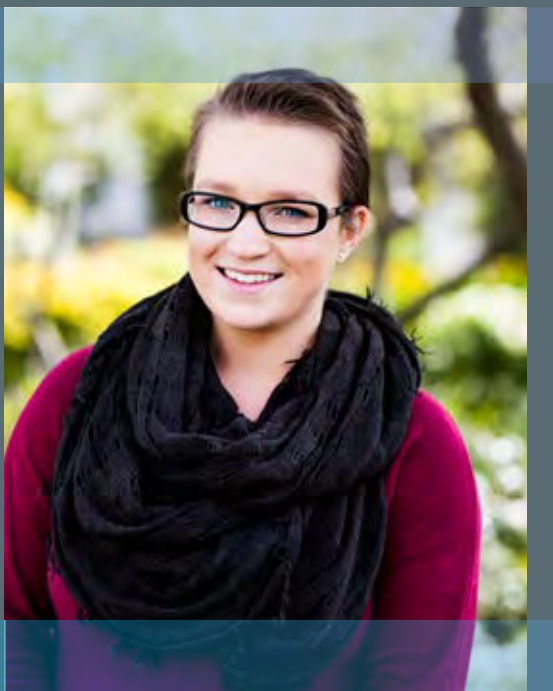
With treatment finished and over 15,000 hits on the blog, Kate hopes to continue her creative outlet on topics other than cancer.

In appreciation for the care she received at Epworth, Kate also generously donated \$10,000 to the Epworth Medical Foundation following a trivia night fundraiser. “This is a small way to give back to the team who helped me through my journey.

“The funds will be used for training nurses in the day oncology ward,” said Kate.

“Cancer is ugly, but that doesn't mean the treatment process has to be”

Epworth HealthCare is proud to be one of Victoria's leading providers of cancer care. We are committed to offering our patients access to new treatment options, new technology and a dedicated team that is well regarded for their commitment to providing the very best care possible.



Kate Jenkins



## Extending our rehabilitation reach

- Many patients who have had hip or knee joint replacement at Epworth Richmond are now offered access to Epworth's Rehabilitation in the Home (RITH) program as part of their ongoing care.

The program is an initiative of the rehabilitation team and allows patients to be discharged early from hospital, with rehabilitation continuing in their home.

Patients are in the RITH program for a maximum of six weeks, dependent on clinical need. RITH team leader Laura Davidson says, "What is great about Epworth's Rehabilitation in the Home Program is that the patients receive excellent continuity of care.

"We visit the patient before they leave hospital, discuss their expectations and goals and then continue that treatment at home," says Laura.

The RITH program has received excellent support from many orthopaedic surgeons as well as from the Epworth Richmond acute treating team.

The program initially began as a ten-month trial for BUPA patients in September 2014 following hip or knee joint replacement and upon its success will become a permanent offering.

RITH patient Susan Rogan used the service following her second knee replacement, and was visited by Laura at home from December 2014 to January 2015.

Susan says having met Laura already while she was being treated at Epworth Richmond meant she welcomed a familiar face at her home, and found Laura's care reassuring during a difficult recovery.

"I think that continuity of care is important," says Susan. "Hospitals often just put you out and lose interest in you once you've left, but with this service you get that follow-up treatment, and you feel like they really care about your progress and recovery. The holistic nature of the program is brilliant."

Susan also appreciated having Laura as a go-between, allowing Susan to pass on any concerns she might have directly to the surgeon at the hospital. Being able to reschedule appointments, if needed, was another plus.

"Laura was flexible so if I needed to move our treatment times, I could. In practical terms the flexibility is great. If you're still in pain and have a lack of mobility, it's extremely helpful that you don't have to get in a car, walk or go up steps to visit the hospital."



Susan Rogan discusses her progress with RITH team leader Laura Davidson

## Helping our smallest patients

- The special care nursery and the maternity unit at Epworth Freemasons are changing to accommodate the higher acuity or care needed by our smallest patients. This change is being made possible with the assistance of the Epworth Medical Foundation and the generosity of our donors.

In the past year, the special care nursery's capability improved with the introduction of heated humidified high flow nasal cannula therapy (HFNP), which now enables the unit to manage neonates with respiratory difficulties.

This improvement is hugely beneficial to both baby and mother. Where previously neonates with respiratory distress syndrome in the newborn period would normally have been transferred to a tertiary-level hospital, they are now being cared for in our special care nursery meaning mother and baby are no longer separated.

The support of our paediatricians with special interest in higher risk infants, and their capability in managing these neonates with this mode of respiratory support, increased our confidence in providing such a service.

The maternity unit would like to thank the Epworth Medical Foundation for its ongoing support in providing much-needed equipment for the special care nursery. Through this support the unit has been able to purchase the VapoTherm units and the cardiac monitors required to provide this therapy.

Now only a small number of babies are requiring transfer to a tertiary hospital for additional respiratory assistance in the form of continuous positive airway pressure (known as CPAP). The unit is currently working with the Epworth Medical Foundation to purchase the required specific ventilators and additional cardiac monitors to further expand our special care nursery service to being able to provide CPAP.



Midwife Shook Pin Ho assists mum Diane Gillis and baby Vivien





## OUR PEOPLE

Investing in Epworth's most  
valuable asset: our staff.

### Expanding our talent and leadership programs

Great patient care is at the heart of what drives our staff and we are proud to offer a number of development opportunities at Epworth HealthCare. These include enhancing the skills of our leaders to effectively lead and manage their staff to deliver an exceptional patient experience, as well as preparing them for future career opportunities.

In the 2014/15 financial year, 416 participants attended various Leadership One Day workshops and 60 participants started the Emerging and Operational Leadership Programs which align to a Diploma of Management from Swinburne University. In addition, we piloted our Strategic Leaders Program targeted to our senior leaders at Epworth.

Epworth talent programs focus on the development of future executive directors, directors of clinical services, business managers and nurse unit managers (NUMs). This year the Epworth talent program extended significantly to include a pipeline of future nurse unit managers. During the 2014/15 financial year 33 future NUMs were identified and began their journey with an initial assessment followed by world-class development. Our future executive directors, director of clinical services and business managers were provided with significant acting opportunities to broaden their knowledge and experience and apply learnings from the leadership program participation.

### Enhancing engagement

In the 2014/15 financial year Epworth has focused on continuing to deliver the strategies and initiatives which were committed to following the 2013 engagement survey. The success of the strategies and initiatives actioned to date, were evident in the February 2015 Pulse Engagement Survey. The results of the Pulse Engagement Survey indicated that ten of the 14 departments previously identified as in a lower end culture had significantly improved. In addition, strategies are well underway to prepare for the October 2015 engagement survey.

### Robust workforce planning

The Group Workforce Steering Committee was established to provide governance and oversight of workforce planning across the group. Epworth HealthCare's workforce planning includes key programs of work designed to position Epworth as a destination employer, most particularly in view of the planned workforce growth with Epworth Medical Imaging at Epworth Richmond, the Lee Wing redevelopment at Epworth Richmond and the establishment of Epworth Geelong.





One such program of work has been the development of Epworth's employee value proposition (EVP). Our EVP was developed following extensive research, numerous focus groups, internal and external survey and data analysis in order to clearly articulate Epworth's unique set of offerings and so positively influence target candidates and employees. Our EVP is our unique employer offering and gives current and future employees a reason to work for Epworth. It is as follows:

At Epworth, we care. We care about our patients, and we care about our people. We care about career development and progression. About attracting the highest calibre professionals. About nurturing potential. We care about innovating; staying ahead of the field. And we care about giving all our people the support they need to thrive in our growing, fast-paced and ever-changing organisation.

Epworth's advertising and recruitment campaigns for the Epworth Richmond Lee Wing redevelopment and Epworth Geelong have since commenced with an array of multimedia placements planned in accordance with service openings and need. A series of public recruitment information forums have been held for both Epworth Richmond and Epworth Geelong with further forums scheduled. These have attracted strong interest from potential candidates and the sessions conducted so far have been well attended.

Epworth has recently seen the establishment of the Recruitment Service Centre. This centralised recruitment function will manage aspects of recruitment administration currently undertaken by divisional HR teams. Coupled with a series of process changes this approach represents contemporary best recruitment and human resource practice for large organisations such as Epworth and will ensure we have the adaptability and scalability to meet the increased volume of recruitment and to meet changing future demands.

## Nurse unit manager program of work

Supporting our nurse unit managers (NUMs) to be their best and give their best is a top priority for Epworth HealthCare and central to our continued success. A significant program of work has been developed to ensure that Epworth continues to attract, recruit and retain top nursing leaders.

In late 2014 PriceWaterhouseCoopers (PWC) was engaged to work with Epworth to identify the factors that make being a NUM at Epworth rewarding, as well as the barriers we face in enabling our NUMs for success. From the PWC recommendations four key themes of work were developed. Each theme has an executive project sponsor who is responsible for delivering a number of projects within their theme.

The project themes and executive sponsors are:

1. Give NUMs more consistent expectations, sufficient time, and enable the NUM role for success

**Sponsor:** *Nicole Waldron*  
(Executive Director Epworth Richmond)

2. Strengthen NUMs' business acumen and management skills to support their effectiveness

**Sponsor:** *Louise O'Connor*  
(Executive Director Epworth Eastern)

3. Ensure the NUM workforce is aligned to the Epworth NUM success profile through targeted workforce development and the development of a strong NUM value proposition

**Sponsor:** *Maree Feery*  
(Executive Director Human Resources)

4. Show NUMs you value them

**Sponsor:** *Vincent Borg*  
(Executive Director Rehabilitation and Mental Health)

Significant progress has been made on many key projects under this exciting program of work. Forums have been held with all NUMs to keep them informed of the progress and seek their feedback, which indicates that we are on the right track to address their key priorities. Through delivering the many projects that are part of this program of work, Epworth is building a compelling value proposition for these key leaders.

Project highlights include:

- Review and update of the NUM position description to clearly articulate performance priorities, as well as an investment into NUM management time and ward clerk hours to ensure NUMs have the time and support they need to be successful. This also includes reviewing the position description of the ANUM and ward clerk to ensure all roles are aligned to support optimum operations and provide an exceptional patient experience.

- A comprehensive development offering for all NUMs over the next two years has been designed. The first component of the development journey saw all NUMs participate in a 360-degree feedback survey which provided invaluable feedback and will support career development.
- The first in a series of purpose-built development workshops for NUMs to build capability in financial management has been developed.
- A specific scholarship targeted for nurse unit managers.

Executing this program of work will ensure Epworth remains an employer of choice for top nursing leaders. This innovative and diverse program of work will support NUMs in the crucial role they play in ensuring Epworth achieves our vision of consistently delivering excellent patient-centred care with compassion and dignity.

## Health, safety and wellbeing

Epworth HealthCare has continued its health and wellbeing campaign to further enhance the safety and wellbeing culture across the organisation. Each year, the campaign theme has been refreshed to continue to connect and engage staff with safety in an innovative way.

In 2014 we held the Epworth Safety Selfie campaign and competition. This involved many staff and teams taking safety selfies highlighting the importance of safety in the workplace. All the pictures of staff and teams were captured in large safety selfie poster boards with the 'Life is Better in a Safer Workplace — Epworth, Better' caption included and were placed at each site to show the importance of safety. All of these programs are linked to the original safety syndromes campaign launch of the safety and wellbeing strategy initiative, launched in 2013.

Epworth continues to focus on its overall safety performance with work health and safety scorecards and key performance indicators to sustain performance and accountability. Given the focus on injury prevention there has been a drive on ensuring that incident investigations and corrective actions are proactively identified and closed. This is to ensure that the risks are identified and controls are in place to minimise risk to staff and others. The key driver of staff accountability continues, in particular the importance of staff speaking up and taking appropriate action regarding staff safety concerns. Since the launch of the strategy in 2013, the results relating to lost time frequency rate have improved significantly and exceeded the 20 per cent reduction target each year including in 2014/15.

Epworth's staff wellbeing program initiatives have been reviewed and expanded to ensure there is support in place for staff and managers, including a 24/7 external confidential employee assistance program, manager assist program, and internal wellbeing education programs. Each year staff are also encouraged to participate in Epworth-sponsored health and wellbeing-related events including Febfast, the Global Corporate Challenge, RU OK Day? and National Safety Week.

On Epworth's intranet there is a wellbeing site with a large amount of information, resources and useful links made available for staff to access at any time. Related protocols have been developed to support managers and staff and wellbeing training programs are now available to staff. These programs include resilience and managing mental health in the workplace and there has been excellent feedback from managers and staff that these training programs have provided them with extra support, skills and knowledge. Safety and wellbeing is also embedded in all of Epworth's leadership programs.

### Embedding our performance development planning (PDP) and a culture of feedback and recognition

Annual performance reviews are a key component to successfully aligning employees to the organisation's strategic goals and creating a culture of feedback and rigorous performance discussions. To enable our leaders to have these conversations successfully, leaders identified as participating in the PDP process were invited to attend training focussing on building a culture of ongoing coaching, feedback and recognition. To complement this training, eLearn programs for managers and employees are currently being developed to encourage the active participation by all employees in performance and development. These eLearn programs will be made available in the new financial year.

### Cleveland Clinic Intern Program

In its inaugural year the Cleveland Clinical Nursing Leadership Intern Program supported eight nurses to travel to the pre-eminent Cleveland Clinic in the US in March 2015, made possible through the generosity of donors and sponsors to the Epworth Medical Foundation.

As part of the program, the Epworth nurses participated in a two-week observational learning experience specifically designed for Epworth. Furthermore each nurse on their return from the program is responsible for implementing a quality improvement project related to their experience in this particular area.

### Cleveland Clinic Intern recipients

<b>Marnie Price</b>	Nurse Unit Manager	Richmond
<b>Heike Raymer</b>	Nurse Unit Manager	Rehab
<b>Claire Henry</b>	Clinical Nurse Facilitator	Freemasons
<b>Natalie Smith</b>	Perioperative Educator	Freemasons
<b>Anne Boyle</b>	Nurse Unit Manager	Eastern
<b>Anna Scott</b>	Nurse Unit Manager	Rehab
<b>Amy Bellomo</b>	Nurse Unit Manager	Richmond
<b>Natalie Brkljaca</b>	Clinical Nurse Facilitator	Freemasons

### Epworth's volunteers thanked and awarded

National Volunteer Week was held this year from 11–17 May 2015. During this time we officially recognise the outstanding commitment and support that volunteers provide worldwide. Here at Epworth, more than 200 volunteers contribute to the smooth running of our hospitals on a day-to-day basis.

We thank all Epworth volunteers for committing their time and helping to give our patients the best possible experience, in all facets of our operations.

The theme of this year's volunteer week was 'Give Happy, Live Happy', to highlight how volunteering improves the health and happiness of all.

Epworth executives hosted a special celebratory lunch at Epworth Richmond to thank our volunteers and showcase some of the outstanding work achieved through volunteering. Liz Camilleri, Executive Director, Finance, presented at the lunch, and executive directors from Epworth Richmond, Epworth Eastern and Epworth Freemasons presented the length of service awards to volunteers celebrating five, ten, 15 and 20 years of service.

### Epworth Scholarship Program

The scholarship program provides a further opportunity for Epworth HealthCare to deliver on its strategic objective of 'Enabling our people to give their best and be their best' by providing an opportunity for staff to undertake a work-related project or further studies, or attend a conference, professional course or study tour.

This year a total of 57 scholarships were awarded to staff across all divisions ranging in value from \$2,500 to \$10,000. Some of the scholarship activities being funded in 2015 include postgraduate studies in cardiac care, an investigation into an American hospitality room service model, attending the Studer leadership conference, and representing Epworth at the World Congress of Physical Therapy in Singapore.

The Epworth Scholarship Program goes beyond what is generally available elsewhere in the health industry and is made possible through the generosity of donors and sponsors to the Epworth Medical Foundation.

Recipient	Position	Scholarship Project
<b>Epworth Eastern</b>		
Anne Morrissy	Clinical Nurse Specialist	American Society of Thoracic Surgery Conference in Seattle, US
Feng Li	Environmental Services Assistant	Graduate Certificate in Nursing
Fiona Adcock	Clinical Nurse Educator	European Operating Room Nurses Association Congress, Peri-Operative Care, Rome
Jane Thomas	Clinical Nurse Educator	European Operating Room Nurses Association Congress, Peri-Operative Care, Rome
Jasmine Kumar	Nurse Unit Manager	Graduate Certificate in Stomal Therapy Nursing
Jessica Johns	Food Services Manager	Bachelor of Business Management, Swinburne University of Technology
Link Dumesny	Allied Health Assistant	Exercise Physiology course in heart failure therapy
Michael Roberts	Environmental Services Manager	Bachelor of Business Management (online)
Sarah Frost	Associate Nurse Unit Manager	Masters in Urology and Continence at La Trobe University
Tina Meacham	Theatre Technician	Certificate IV Theatre Technician
<b>Epworth Freemasons</b>		
Aaron Ward	Trade Cook	Diploma of Business Management, Victorian Employers' Chamber of Commerce and Industry
Amber Ramsay	Registered Nurse	Graduate Certificate of Clinical Nursing specialising in peri-operative Nursing, Australian Catholic University
Anne Laul	Enrolled Nurse	IV Medication Unit for medication endorsement
Dang Huynh	Theatre Technician	Certificate III in Health Services Assistance Operating Theatre Technician
Emma Ferguson	Clinical Nurse Specialist	Certificate IV in Training and Assessment, Australian Nursing and Midwifery Federation
John Mackay	Enrolled Nurse	Bachelor of Nursing, La Trobe University
Kerrie Vasiliadis	Bistro Chef	Effective Management Course
Marisa Stevens	Oncology Liaison Nurse	Visit leading US hospital specialising in pancreatic cancer such as John Hopkins
Sally Morison	Nurse Unit Manager	Masters of Clinical Leadership, Deakin University
Suzanne Hawksley	Manager Acute and Oncology Services	Masters in Clinical Leadership, Deakin University
Ursual Magro	Environmental Services Assistant	Effective Management Course
<b>Epworth Rehabilitation</b>		
Abby Hutchison	Occupational Therapist	Assessment of Capacity for Myoelectric Control with upper limb prosthetic use, Sweden and tour of European facilities in trauma amputee rehabilitation
Catherine Carracher and Jo Goodridge	Pain & Oncology Services Manger and Allied Health Manager	Travel scholarship to US & UK to investigate rehabilitation for oncology patients
Catherine Louis	Physiotherapist	Masters of Physiotherapy (Musculoskeletal), University of Melbourne
Elizabeth Sloan	Physiotherapist	Linking the Chain Conference, Physiotherapy New Zealand
Gavin Williams	Post Doctoral Fellow	Five Rehab staff to present research at World Congress of Physical Therapy, Singapore
Jeynell Broatch	Excellence Coach	Studer Leadership Conference and visit leading Rehabilitation Centres in US
Jill Chapman	Excellence Coach	Studer Leadership Conference and visit leading Rehabilitation Centres in US
Laura Di Nicolantonio	Physiotherapist	Self-efficacy Pilot Education and Peer Support Program for Multi-Trauma Orthopaedic patients



### Epworth Rehabilitation continued

<b>Megan Banky</b>	Physiotherapist	Investigate the ecological validity of the Tardieu Scale of muscle spasticity in Traumatic Brain Injury patients
<b>Megan Hamilton</b>	Physiotherapist	Vestibular Rehabilitation, Emory University, Atlanta, US
<b>Natasha Gregory</b>	Physiotherapist	Pilot Independent Walking Program to evaluate mobility outcomes post total hip or knee replacements
<b>Sally Moyle</b>	Clinical Nurse Specialist	Masters of Clinical Nursing
<b>Sara Aldous</b>	Physiotherapist	Project to review the return to cardiovascular training and high level mobility following neurological injury

### Epworth Richmond

<b>Andrea Hunter and Paul Hayes</b>	Hospitality Services Manager and Head Chef	Investigate American hospitality room service model developed by Don Miller & Associates
<b>Anna Greed</b>	Registered Nurse	Masters in Nursing Practice, Deakin University
<b>Diana Lee</b>	Registered Nurse	Postgraduate Diploma in Cardiac Care, Deakin University
<b>Emma Harvie</b>	ICU Liason Nurse	Travel scholarship to investigate Medical Emergency Team response and attend Rapid Response Conference
<b>Jessica Hamer</b>	Registered Nurse	Masters in Nursing Practice, Graduate Certificate in Critical Care Nursing
<b>Joshua Borg</b>	Business Officer	Clinical Coding, Health Information Management Association
<b>Laura Frazzetto</b>	Registered Nurse	Graduate Certificate in Health Sciences majoring in Orthopaedics, Australian Catholic University
<b>Megan O'Riely</b>	Clinical Care Co-ordinator	Attend the European Society of Cardiology World Congress on Acute Heart Failure, Seville, Spain
<b>Stephanie Oxley</b>	Associate Nurse Unit Manager	European Association of Percutaneous Cardiovascular Intervention Cardiovascular Course, Paris

### Epworth Corporate

<b>Being Wei</b>	Charge Radiation Therapist	Brachy Academy Training, Christie Hospital Manchester re High Dose Rate (HDR) brachytherapy for skin cancer & tour London hospitals using this technique
<b>Bridie O'Donnell</b>	Medical Practitioner	Cleveland Clinic internship in Executive Health and Wellness Institute
<b>Daniel Knoche</b>	Simulation Technologist	Certified Technology Specialist Program and attend InfoComm Conference and Expo, US
<b>Isobel Smith</b>	Excellence Coach	Graduate Certificate in Organisational Coaching, Swinburne University
<b>Lisa Smith</b>	Group Manager Business & Analysis	Making Strategy Work, Wharton's Executive Education Program
<b>Margaret Hjorth</b>	Nurse Unit Manager	Investigate patient online portal for cancer patients at Lewis Cancer and Research Pavilion, St Joseph's Candler, US
<b>Mervyn Tan</b>	Radiographer	Masters of Clinical Education, University of Melbourne
<b>Nola Bailey</b>	Assistant Manager Radiation Therapist	Study tour to investigate Stereotactic Body Radiotherapy techniques in the treatment of pancreatic cancer
<b>Rhonda Grant</b>	OHS Advisor	Advanced Diploma, Work Health and Safety
<b>Rob McBride</b>	Store Person	Medical Terminology, Infection Control, Handling Sterile Stock, Mayfield Education
<b>Saskia Spikjer</b>	Medical Imaging Technologist	Introductory Obstetrics Ultrasound Workshop, Australian School of Medical Imaging
<b>Thang Nguyen</b>	Charge Radiation Therapist	European Society for Therapeutic Radiology and Oncology Accelerated Partial Breast Irradiation Training Course, Barcelona, Spain
<b>Tim Norbury</b>	Clinical Products Advisor	Diploma of Management, Franklin Scholar

## Strength through adversity at Epworth Freemasons

- It takes a powerful team to keep it together in the event of a disaster, and when an unexpected flooding event happened at Epworth Freemasons on Clarendon Street just days before Christmas 2014, staff across Epworth HealthCare rallied together to ensure the care and comfort of our patients was the highest priority.

Late in the evening of 21 December 2014, a water pipe burst on the top floor of the Clarendon Street campus, sending water through the floors causing damage to the western areas of the building.

Epworth staff, many of whom had commenced their Christmas leave, were on site as soon as they heard the news and Epworth's emergency response team immediately leapt into action, initiating the emergency management plan, to evacuate the building.

On the night of the flood, more than 90 patients were transferred to other sites, mostly to Epworth Richmond and Epworth Freemason's Victoria Street building. In the weeks that followed, the Clarendon Street campus reopened all but two inpatient units to the west which needed ongoing repair.

Epworth Freemasons Executive Director David Nowell says, "We could not be prouder of the team at Epworth Freemasons, or more grateful for the support of staff across other Epworth sites. Their commitment and work ethic during this time was unprecedented."

A partnership with Eastern Health Box Hill Hospital was arranged so that Epworth could temporarily use two auxiliary wards at the Arnold Street location to ensure no patient was inconvenienced by the closure of two inpatient units and Epworth Freemasons could continue to run to capacity until the damaged areas were repaired.

Relocation discussions were held with staff affected by ward closures. Most of the staff from 1 and 2 West raised their hands to temporarily work from the Arnold Street location to keep the unit together, all agreeing that a united team would ensure the Epworth patient experience remained consistent no matter which hospital housed them.

Epworth Freemasons Patient Liaison Officer Noelene Medley says, "The quality feedback we received from patients throughout this time has only made me more proud to work at Epworth Freemasons. I spoke to most of the patients who were impacted by the flood event who all reported they always felt safe and well cared for and commended the staff involved for their calm demeanour and commitment to patient comfort."

Wards 1 and 2 West reopened in July 2015, refurbished and better than ever. The Epworth Freemasons team celebrated with a cocktail function, inviting staff, specialists and practice managers to thank them for their ongoing support throughout the six months of change. Guests only had positive things to say about conduct at the site, doctors were grateful for the exceptional patient care throughout this time, and nurses were excited for new beginnings in refurbished wards.

There is now a unique bond within the team at the Epworth Freemasons Clarendon Street site, who know they can face any challenge and come out on top, stronger than ever — something that will only positively reflect on patients at Epworth Freemasons.



# Hospital herb garden flavours patients' plates

- Epworth Cliveden chef Bevan Vahland has a vision for Epworth's smallest hospital kitchen, focussing on locally grown produce and a program of sustainability — something he hopes could eventually reach across all Epworth sites.

It began with the idea of starting a herb garden. Tucked away in an interior courtyard of Epworth Cliveden's buildings, an assortment of terracotta pots reveals fresh herbs and plants — three types of mint, birds-eye chillies, thyme, lemongrass and more — that get used as ingredients and garnishes in the hospital's dishes. Though somewhat dormant during the winter months, in spring it bursts to life, and Chef Bevan is already well underway planning his next season's planting.

"Stage one was our basic herbs. Stage two through spring we'll start looking at our more ornate herbs that get us fragrance and colour on the plate," Bevan explains. "We're looking at strawberries and how we can utilise the fruit and the flowers, and we're also looking at tomatoes and capsicums — easy-to-grow food that we can use in the space we've got out there."

It's an extra touch that's certainly been noticed by patients at the hospital. Feedback has been positive with patients appreciating the element of freshness on their plates, as well as knowing it hasn't travelled far to reach them. For Bevan, this focus on food source is what drives him in his work at Epworth Cliveden.

"If as chefs and apprentices we aren't connected to where food comes from, how can we then say to our customers that we know its source? If we say, 'Look, we grew this here for you', it improves the patient experience," says Bevan.

"If we can create something amazing for them that changes their perspective from the moment they come in, that's really important."

Bevan says Epworth Cliveden's menu is seasonal, changing approximately every three months. "Our lunch is really very modern Australian and our dinner tends to be a bit more comfort food. The patients love it, and the surgeons do as well."

With plans to expand the garden to Epworth Cliveden's other usable spaces, Bevan also wants to look into the idea of composting.

"I haven't worked out the details yet, but somehow taking our food waste and converting that into compost and then putting that straight back into the garden. It's about being part of the solution, not the problem — do we want that to go to landfill or do we want it to go back and replenish the food for our patients of the future?"



Chef Bevan Vahland

"The patients love it, and the surgeons do as well"

Being a boutique site, Epworth Cliveden makes a perfect testing ground for projects like this, says Bevan, with the goal of expanding ideas further into the bigger healthcare network.

"We're quite unique," he admits. "But in a kitchen that cares about where their food comes from, the end product is going to be a much higher quality."

# Holistic approach to care

- Patient care is more than medical care. It is a holistic approach at every stage of a patient's journey. At Epworth, this is an approach that is embraced at every site by every team.

At Epworth Eastern the staff in the environmental team (who are responsible for site and ward cleaning) and the food services team (who are responsible for patient meals) are recognised as playing vital roles in patient outcomes.

Tina Rawnsley has worked at Epworth Eastern for five years in her role as a food services assistant and recognises that she plays a unique part in the patient journey.

“When I enter a patient room I am there to be more than the person delivering food — I am a listening ear,” says Tina.

“In my role I have an opportunity to build relationships with patients and their families — especially those who come in for repeat visits. Patients often just need someone to talk to who isn't part of their medical team or their family. I am always happy to lend an ear and offer a friendly smile. I get a great deal of satisfaction knowing that I can make a difference to their day.”

Tina explains, “I can make people comfortable and happy. I check that they have everything they need, curtains drawn, phone moved closer or containers opened. I believe these little things make a big difference.”

Julie Naidoo has worked at Epworth Eastern for seven years in the housekeeping team and says the most important part of her day is being there for our patients.

“On average I spend ten to 20 mins per visit to each patient room which allows me time to really be there for our patients,” says Julie.

“It is my priority to make our patients' environment clean and comfortable. I recognise that while they are in hospital their room is their home and I always do all that I can to make sure their room is perfect. Infection control is a serious issue and I do my very best to keep our patients safe. But I also don't forget the little things that make a house a home and try and take the extra time to offer additional support as needed.”

Julie continues, “I love the interaction I have with patients and because I get to see patients quite often through their stay, or subsequent stays for some, I can build a relationship with them quite quickly.

“I consciously make myself available and am there to listen if a patient wants to tell their story,” says Julie. She also explains that the housekeeping team is very supportive of this approach to care. “If I need to spend more time with a patient our team works together and understands that our schedules can change and we are flexible to help each other and our patients.”

Epworth is proud to offer our patients access to teams that work together to provide exceptional patient care.



Tina Rawnsley



Julie Naidoo



## Emergency care in safe hands

- **Joining the Epworth Richmond Emergency Department team was always the logical choice for Dr Jen Mines. When returning to work following maternity leave in 2009, Dr Mines knew that Epworth would offer her flexibility to be there for her new family, and was excited to work for a department that was very well regarded among her peers.**

Dr Mines began studying for her fellowship exam when she joined the Epworth team, successfully passing in 2012 and completing her college training in 2015. The support offered to her and her colleagues from the department is a true testament to the value that is placed on the team.

“Being a part of the Epworth Richmond Emergency Department provides opportunities not often found at other hospitals,” says Dr Mines.

“I am proud that I now have the opportunity to showcase these benefits when training medical students.”

Dr Mines continues, “Patients have expectations when they come to Epworth and it is our job to accommodate and exceed their expectations. Because the department is so well resourced and staffed it makes it easy to look after our patients.”

This high standard of care is set to continue with the emergency department redevelopment due for completion in early 2016.

But it is more than just process or environment — the Emergency Department also has a great team.

Dr Mines explains, “It is not just about doctors looking after patients. It is everyone working as a team that ensures we

provide great patient care. This care is only made possible by working with nurses, doctors, support staff, orderlies, pharmacy, pathology, radiology, theatre, intensive care, ward staff and the many other teams we work with every day.

“The department provides rapid access to specialists and investigations can be conducted as required. I truly believe our patients receive the best care possible,” says Dr Mines.

Dr Mines also works in the Epworth Hospital in the Home team which allows her to provide short-term ongoing care for suitable patients in their home following discharge from hospital.

“This work provides me with a welcome reminder that patients ultimately want to be at home,” says Dr Mines. “I feel my work in the emergency department is enhanced by keeping this goal at the forefront of all of my care decisions.

“Patients have expectations when they come to Epworth and it is our job to accommodate and exceed their expectations”



Dr Jen Mines

## OUR DOCTORS

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

### World leaders in coronary surgery

Epworth HealthCare cardiac surgeons Professor Brian Buxton, Associate Professor Philip Hayward and their co-workers have continued to attract international attention for their advancements in coronary bypass surgery.

The team presented the findings of their study into the use of arterial bypass grafts at major international cardiac conferences with outstanding feedback from peers around the world.

The Epworth studies, involving thousands of patients, have demonstrated survival is improved by about a third if patients receive all arterial bypass grafts rather than mostly vein grafts. This is true even in older and sicker patients, as all risk groups were assessed.

The initial development of coronary artery surgery in the US was the use of saphenous vein grafts to bypass blocked coronary arteries.

Unfortunately it became clear that vein grafts had a limited life expectancy with around half blocking within 12 years,

and more recent studies suggest they may in fact contribute to the continued progress of coronary artery disease.

The operation was subsequently improved with the development of coronary arterial grafts from the chest wall called internal mammary grafts. In patients with extensive coronary artery disease this was a major advance but the role of arterial grafts has been limited in most parts of the world, with the standard bypass operation becoming one mammary artery and a variable set of vein grafts.

In 1995–2010 surgeons at Epworth reduced the use of saphenous vein grafts and used internal thoracic or mammary and radial artery grafts, many abandoning the use of saphenous vein grafts entirely.

“The challenge for the team now is to use this research, both to continue to derive the best outcomes for Epworth patients through our community expertise of all arterial grafting; and to use our international recognition as leaders in this field to highlight to physicians and patients alike that Epworth remains Australia’s leading centre for treatment for coronary disease,” says A/Prof Hayward.



### Doctors hold 'The Epworth Conversation'

The inaugural Medical Leaders Dinner: 'The Epworth Conversation' was held on 2 October 2014 and brought together 120 medical leaders from all Epworth sites and clinical institutes. Eight Epworth HealthCare Board members and 12 Epworth executives also participated in a lively discussion with a frank and fearless exploration of The Epworth Conversation themes: 'What's working well', 'What's not working so well' and 'Where should we go from here?'

Feedback from the evening has formed an action plan to guide future initiatives.

The dinner also provided an opportunity to present the winner of the Peter J Dohrmann Medal. Associate Professor Craig Lynch, who received the award, used the grant to study advanced skills and techniques in robotic rectal cancer surgery in the US, UK and Asia earlier this year. His findings will help improve patient recovery and cancer outcomes

through access to world-class surgical techniques and support Epworth's position as a national and international centre of training and mentoring in robotic surgery.

Find out more about A/Prof Craig Lynch on page 50.

### Australia honours Professor Costello

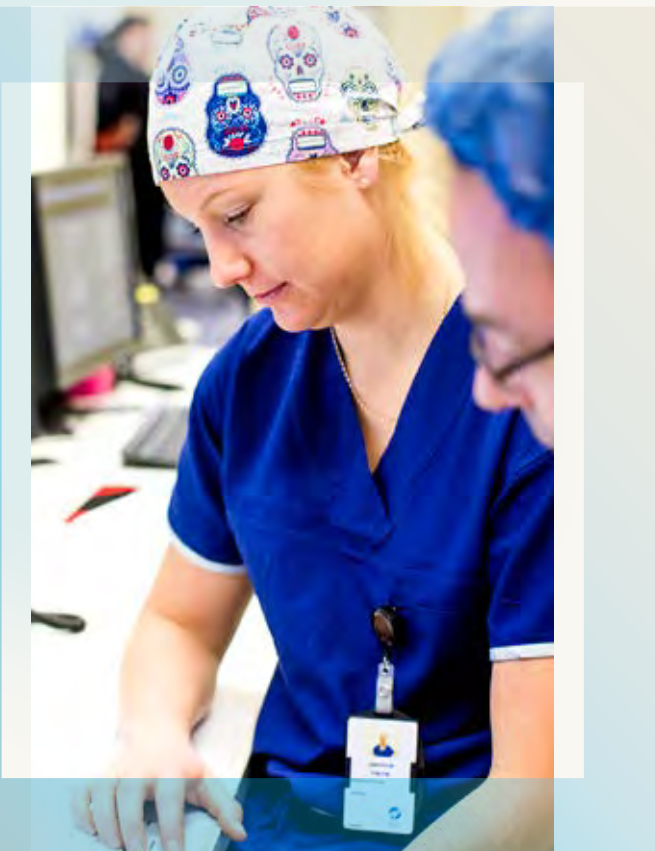
Professor Anthony Costello, Epworth HealthCare urologist and Professor of Surgery at the University of Melbourne, was honoured with a Member (AM) in the General Division of the Order of Australia in the 2015 Australia Day Honours List.

The honour was conferred for significant service to medicine in the field of urology as a clinician, administrator and author, to cancer research and to medical education.

Prof Costello is an accomplished consultant surgeon and the director of urology at the Epworth Medical Centre, encouraging the advancement in surgical technology for prostate cancer.

In 2004, when Epworth introduced the first surgical robot to Australia and New Zealand, Prof Costello performed the first robotic prostatectomy after completing his training in the US. Since then, he has performed or mentored thousands of robotic procedures and has been instrumental in developing training opportunities for other urological surgeons. He has also actively promoted this minimally invasive technique to make it accessible to both private and public patients around Australia.

Epworth extends congratulations to Prof Costello on this remarkable and well-deserved achievement.



### Queen's Birthday honours recognition

Three Epworth HealthCare professionals were honoured for their contribution to Australian Society in the Queens Honours list, released in June 2015.

Epworth Eastern's Associate Professor John (Jack) Mackay, a colorectal surgeon, was honoured for his extraordinary contribution to both the public and private health sectors in Australia, with an Order of Australia as a Member in the General Division (AM). A/Prof Mackay was appointed the inaugural medical director at Epworth Eastern in 2005, and has contributed to Epworth's Teaching Hospitals Steering Committee since 2007 and the Clinical Review Committee since 2009.

Renowned cardiologist Dr Jennifer Johns was appointed a Member of the Order of Australia (AM) in recognition of a lifetime's work in medicine, including her role as the first female president of the National Heart Foundation and her charity work with the Australian Sri Lanka Medical Team in the wake of the 2004 Boxing Day tsunami. Dr Johns has practised at the Austin hospital since 1987 and has run a private practice at Epworth Richmond for 31 years.

Professor Niki Ellis is a member of Epworth's Human Research Ethics Committee, and is one of Australia's leading occupational physicians and an expert in assisting organisations to manage workplace stress. Prof Ellis provides leadership and advice regarding research governance in Australia. She received a Medal (OAM) in the General Division.

Group Chief Executive of Epworth HealthCare Alan Kinkade says he is proud to have such distinguished people working at Epworth and congratulates them all.

"For many decades, our specialists have devoted their careers to the better treatment and management of illness, therefore significantly improving the lives of people both here in Australia and overseas.

"They have also been committed to the teaching of Australia's future clinical workforce through their mentoring of younger colleagues and their myriad publications," Mr Kinkade says.

### Dr Bronwyn King honoured

Congratulations went to radiation oncologist Dr Bronwyn King who was awarded the 2014 President's Award from the Thoracic Society of Australia and New Zealand and was also named one of the Australian Financial Review/Westpac 100 Women of Influence in 2014.

While applying for a home loan, Dr King coincidentally discovered she had been unwittingly investing in the tobacco industry via her superannuation investments. Shocked that she hadn't previously thought about where her super monies went, she founded the 'Tobacco-Free Super' campaign to help others ask about their investments.

The initiative involves engaging with Australian superannuation funds to encourage tobacco divestment. Dr King's work contributed to 18 major funds implementing completely tobacco-free investment mandates, with a total tobacco divestment to date of \$1.2 billion.

"As a cancer doctor who cares for patients and families directly suffering as a result of tobacco exposure, I felt obliged to act," says Dr King.



# Revolutionary adrenal surgery

- A switch from operating through the front of the abdomen to the back has meant significant changes for surgery on adrenal tumours, benefitting patients and reducing recovery time.

Epworth Freemasons' Associate Professor Julie Miller, an American specialist endocrine surgeon now based in Melbourne, is something of a pioneer in her field. She has introduced to Australia an updated approach to adrenal surgery that's fast becoming standard, with surgeons worldwide now making the transition.

The technique, known as PRA (posterior retroperitoneoscopic adrenalectomy) involves removing a tumour of the adrenal gland through three small incisions in the back of the body instead of the front — a reversal of a technique that's been standard since the 1990s.

PRA was developed by German surgeon Prof Martin Walz, who has now performed over 2000 cases. A/Prof Miller travelled to Germany to learn how to perform the operation from Martin, before introducing the procedure in Melbourne three years ago.

“This is a technique that requires a surgeon to essentially relearn the anatomy from a mirrored perspective — something that can be a challenge at first, but pays off after a short learning curve,” says A/Prof Miller, who has now performed more than 100 PRA procedures.

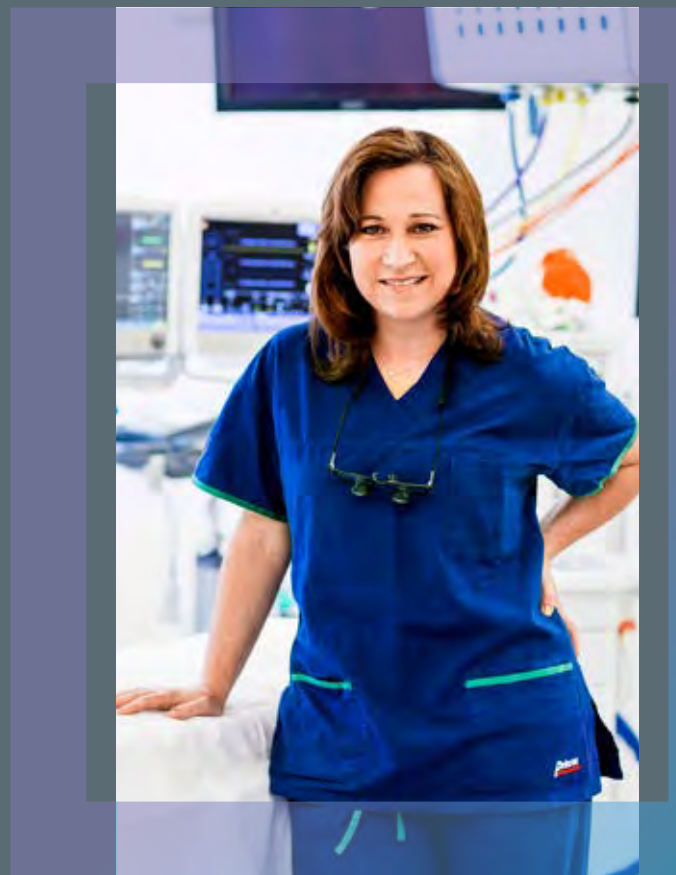
“We're accustomed to entering the abdominal cavity from the front, but the adrenals sit right at the back,” she explains. “To expose an adrenal tumour from the front, we must first displace the bowel and the liver on the right, or the spleen and pancreas on the left. Many patients have had previous abdominal surgery, and the resulting scar tissue increases the risk of injuring the bowel or other organs.

“With PRA, however, we turn the patient face down, and access the adrenal tumour from the back. This way, there's nothing in the way: no other organs and no scar tissue, so it's a much more direct approach. You avoid the abdominal cavity altogether, eliminating common side effects of laparoscopy such as bloating, slowing of bowel function and shoulder-tip pain.”

The new technique requires less time under anaesthetic (average operating time is around 40 minutes), and the notable benefit of PRA is that access via three small incisions under the 12th rib results in less pain and more rapid recovery for the patient. “Upon awakening, most patients say they have little to no pain, while some describe a bit of a dull ache,” says A/Prof Miller. “Just over half my adrenal surgery patients take no narcotics at all after the operation.”

On the evening ward round, patients are usually sitting up having dinner, asking when they can go home. Some patients go home the day of surgery, while others leave the next morning. “Day case adrenalectomy is something I never thought I would see in my career,” says A/Prof Miller. “It's great to see how well patients recover.”

Since performing her first PRA in 2011, A/Prof Miller has been visited by many other surgeons wishing to learn the procedure. A highlight has been mentoring other surgeons learning PRA across Australia. “The journey has been very fulfilling on a lot of levels — to help my patients, and to help my colleagues develop skills in this new procedure, the way other surgeons have helped me.”



Associate Professor Julie Miller

## Exploring the realms of robotic surgery

- In the continually evolving field of robotic surgery, staying at the forefront of developments is crucial. That's why Associate Professor Craig Lynch — colorectal and laparoscopic surgeon at Epworth Richmond and Epworth Freemasons — scheduled five weeks of research and study in an international trip he undertook as part of a scholarship he received winning the Peter J Dohrmann Medal.

A/Prof Lynch received the medal in 2014, which was established to support the professional development of Epworth medical practitioners with a travel and study grant up to the value of \$10,000. In June 2015, A/Prof Lynch travelled to the US, the UK, Japan and Korea — to learn about advanced skills and techniques in robotic rectal cancer surgery.

"In the US, I did an advanced robotics course at the da Vinci Intuitive factory and I spent some time at the Cleveland Clinic visiting their robotic surgical unit," recalls A/Prof Lynch.

"In the UK I met with Mr David Jane, a colorectal surgeon who recently led ROLARR, a major international robotic colorectal surgery trial of which I was a part, and from there I went to Tokyo to visit the Olympus research and development lab. They have developed what's called 4K laparoscopy, which is like ultra-high-definition laparoscopy."

A/Prof Lynch ended his trip in Korea where he participated in a single-port robotic course with Mr Phil Smart, another colorectal surgeon at Epworth. It was a journey that provided a wealth of new knowledge for the already highly experienced surgeon, who was the first to perform a series of robotic colorectal operations in Australia at Epworth Eastern in December 2009.

"You've got more dexterity and better vision, so we can operate with more precision to get better results"

"It was a great opportunity to go and spend a good amount of time visiting with people and making connections in terms of robotic surgery worldwide," says A/Prof Lynch.

"I've been at a disadvantage here because my experience to date has been pretty limited. There are very few colorectal surgeons with robotic experience in Australia and I've got no one to learn from unless I go overseas, so being able to learn from people has been fantastic."

Robotic surgery is increasingly replacing open surgery in certain cases, as a minimally invasive option for patients, where appropriate.

"In places like America, robotics is being used for more and more operations because they're seeing benefits like reduced length of stay and reduced complications," explains A/Prof Lynch.

In using robotics, says A/Prof Lynch, "you've got more dexterity and better vision, so we can operate with more precision to get better results."



Associate Professor Craig Lynch

## Epworth/Cleveland Colorectal Fellowship Dinner

In February 2015, the Epworth/Cleveland Colorectal Fellows and others came together for a dinner to welcome home Dr Jennifer Ryan, 2013/14 Fellow, on her return from the Cleveland Clinic in the US. Dr Ryan will next be heading to the new Fiona Stanley Hospital in Fremantle, WA, to complete her final year of the CSSANZ Fellowship Program before returning to Epworth and Melbourne.

The colorectal program, now in its seventh year, has facilitated five Fellowships. Previous Fellows Mr Eugene Ong, Mr Satish Warriar and Dr Phil Smart have all returned to Epworth, practising specialist colorectal surgery.

Epworth HealthCare and our Fellows are grateful for the support of our long-time sponsor, Covidien. It is only with this assistance that Epworth can enable our Australian Fellows to gain invaluable clinical and operative experience in the Department of Colon and Rectal Surgery at the Cleveland Clinic, one of the best and largest colorectal departments in the world.

At the dinner, newly appointed Fellow Dr Ameera Deen was welcomed. She is completing her clinical/research year at Epworth in 2015 under the supervision of Associate Professor Jack Mackay and Associate Professor Craig Lynch, and will leave for Cleveland in 2016.

This program was born out of the foresight and enthusiasm of Epworth Group Chief Executive Alan Kinkade and Dr Vic Fazio from the Cleveland Clinic, with educational and organisation support from A/Prof Mackay, and the creation of the Covidien Fellowship Education Grant by Covidien's Phil Bone and his colleagues.

### Congratulations to our Epworth/Cleveland Fellows:

2009/10 Mr Eugene Ong	2013/14 Dr Jennifer Ryan
2010/11 Mr Satish Warriar	2015/16 Dr Ameera Deen
2012/13 Dr Philip Smart	

## Pakistan medical visit

Epworth HealthCare hosted a truly unique event in December 2014, organised by Epworth's Health Information Management group.

Twelve senior medical professionals, including government ministers, deans of universities and heads of medical departments from hospitals across Pakistan, took part in a two-day visit at Epworth as a key part of their individual Leadership Training Program.

Over the two days, we presented leading-edge methods for training, research and medical practice and showcased Epworth as a great example of delivering first-hand excellence in healthcare.

The cohort of presenters, including Professor John Catford, Professor Richard de Steiger, Professor Mark Frydenberg, Professor Mari Botti, Professor Daniel Moon, Dr David Phillips, Dr Len Kliman, Dr Andrew Stephens, Dr Geoffrey Metz, Ms Tess Vawser and Ms Annie Chester, showcased Epworth expertise during the visit.

In addition to these presenters, clinical and facility tours of Epworth's emergency department, the Clinical Education and Simulation Centre, and Epworth's Radiation Oncology Research Centre were lead by Dr Ron Sultana, Ms Tess Vawser and Mr Paul Fenton, respectively.

The delegation was most impressed with the calibre of resources at Epworth, the quality of medical education and training, and our leading-edge technologies. They expressed a genuine interest to continue forging ongoing collaborations across a number of areas.

## In memoriam

Epworth mourns the loss of Professor Priscilla Kincaid-Smith, who died peacefully at her home on 18 July 2015.

Professor Kincaid-Smith AC CBE joined Epworth in 1992 as Director of Nephrology after serving as the Director of Nephrology at the Royal Melbourne Hospital from 1967–1991. She also served as an Epworth Board member, and was chair of the Medical Advisory Committee and a member of the Epworth Human Research and Ethics Committee.

Professor Kincaid-Smith was the first woman to be appointed to a Chair at the University of Melbourne in 1975 and became president of the World Medical Association in 1993. Her most substantial contribution to medicine was the discovery that certain analgesic combinations were causing chronic kidney disease. This discovery led to the banning of these compounds and saved many people from developing end-stage renal failure. She also made substantial contributions to research on the link between the kidney and high blood pressure, and campaigned for easier availability of oral contraceptives for women in developing countries.

In 2014, the Epworth Research Institute announced a research grant in her honour, as one of the leading consultants who left their mark at Epworth and helped build our reputation for excellence in clinical care. We were very pleased that she was able to attend the Research Dinner and present it to Dr Andrew See. In 2015 the Professor Priscilla Kincaid-Smith Research Grant was awarded to Associate Professor Nathan Lawrentschuk.

## An exciting direction for Epworth Richmond's ICU

- Dr Julian Hunt-Smith realised very early in his medical career that he wanted to work in an environment where he could make a difference to patients.

He found intensive care medicine a unique speciality which linked being able to care for the sickest patients in the hospital with being able to make a real impact.

Dr Hunt-Smith joined Epworth in March 2015 as director of the intensive care unit (ICU) at Epworth Richmond. He quickly identified with Epworth's values and goals and the way these are embedded into every level of the organisation.

"ICU is an area that attracts people who embrace the intense pressure each shift can present, while gaining immense satisfaction from helping patients"



Dr Julian Hunt-Smith

Since joining, Dr Hunt-Smith has been impressed by the amazing team he has the pleasure of working with every day. "ICU is an area that attracts people who embrace the intense pressure each shift can present, while gaining immense satisfaction from helping patients. The Epworth ICU team is very impressive both in regards to the demonstrated excellence in patient care and the compassion shown towards patients and their families," says Dr Hunt-Smith.

Over the next year, it is Dr Hunt-Smith's desire to build a multidisciplinary team that has a strong academic focus on education and research. This, partnered with already impressive patient-centred care, makes for an exciting future for the ICU. By using the team's existing strong skill set and desire for continuous improvement there is a unique opportunity to retain and attract the very best in the field.

"We want our team to be recognised, and having significant outputs in the academic sphere will provide them with the recognition they deserve," says Dr Hunt-Smith

"The most rewarding part of my role is having the opportunity to work with great people in a team and see the effects that this has on patient care. Indeed I've been quite amazed by the amount of positive written feedback the team currently receives from former patients and their families," says Dr Hunt-Smith.

"While we see patients at their sickest, it is a privilege to provide the medical care they need and to see them leave the ICU for further management on the wards. Even when things get difficult, offering advice and support to families is very rewarding," Dr Hunt-Smith continues.

With the Epworth Richmond Lee Wing scheduled to open in early 2016, Dr Hunt-Smith is also preparing for the move to a new ICU. "The move to the new unit will require changes to work practices, which is also extremely exciting. We are actively looking at attracting the best staff, maximising efficiencies in patient flow and bringing in high-end equipment which will make the new ICU a true asset to Epworth and our patients," says Dr Hunt-Smith.





## BUILDING AND SERVICE DEVELOPMENT

Expanding our reach of care  
through development.

### Investing in excellence

Epworth celebrated its 95th birthday in 2015. Throughout the years our organisation has achieved a great deal not only in the range of treatments and services offered to patients, but also in our continuous growth in services and locations providing excellent care for a growing and ageing population and meeting new demands in healthcare.

We are redeveloping our existing hospitals, expanding to new locations and enhancing our equipment and services to ensure we are always the private healthcare provider of choice across Victoria.

### Epworth Richmond

#### Introducing the Lee Wing — opening early in 2016.

Currently under construction, the 62 Erin Street building at Epworth Richmond, previously known as Pod 4, formally received its new name in December 2014.

The Lee Wing was named in recognition of Mr and Mrs PS Lee who have been generous supporters of the hospital for many years.

This new wing is the first instalment of the Epworth Richmond redevelopment taking place along Erin Street and is on schedule to open in the first quarter of 2016.

Construction of the Lee Wing ‘topped out’ in April 2015 — a major milestone in any development when the build reaches its highest point. Epworth Richmond staff celebrated with a BBQ in the courtyard.

On opening, the Lee Wing will provide a new and expanded emergency department with 35 treatment spaces, a 26-bed intensive care unit, a ten-bed cardiac intensive care unit and 29-bed cardiac inpatient unit, six new operating theatres, three levels of inpatient accommodation with 111 private rooms, consulting suites and 250 additional car parking spaces.

Early in 2015, Epworth Richmond announced a hybrid theatre would be included in the new theatre precinct which will combine advanced, high-precision imaging technology with a fully equipped surgical suite to support the needs of heart and vascular surgeons as well as interventional radiologists, neurologists and cardiologists.



### Additional improvements to Epworth Richmond's main theatre precinct

Epworth Richmond's main theatre precinct on Level 3 saw additional works this financial year.

The priority was to improve the theatre environment for our patients, staff and doctors through creation of better storage facilities, development of more efficient work practises and the elimination of unauthorised access to improve safety and reduce risk.

Following a comprehensive review of security to the theatre complex, additional swipe card access points, new intercom systems and security cameras were installed throughout the space to restrict unauthorised access to the operating suite, providing a safer environment for all.

This package of works also provided capacity for five new recovery bays close to the Erin Street theatres and enabled a complete overhaul of the administration and office space, creating a larger and centralised office area for theatre management and a new reception desk facing the Erin Street lift lobby on Level 3 to greet staff and visitors.

New storage areas were provided in these works which have improved work practises, increased circulation space and created a safer environment for everyone within the theatre complex.

A new pharmacy store was also created to further assist with the provision of compliant medication management.



### A new home for Epworth Richmond's cardiac diagnostic services

A larger and purpose-built space was developed for Epworth Richmond's non-invasive cardiac unit located on Level 1 near the hospital's Bridge Road entrance.

The expert team of cardiologists, technologists, sonographers and specialist nurses moved to their new location in June 2015 and, at the same time, changed their name to Cardiac Diagnostic Services to better reflect the work they undertake.

This team now has a dedicated space that better services its requirements to continue providing the detailed investigations essential to the diagnosis and treatment of cardiac patients into the future.

### New retreat for patients of Epworth Richmond Oncology

Epworth Richmond opened a dedicated courtyard for 4ES oncology inpatients and their families early in 2015.

The Barb Heine Family Retreat provides a private and peaceful retreat for patients away from the ward environment, and was made possible by a donation from the Kids & Families Foundation on behalf of cancer patient Barbara Heine.

In addition to the Family Retreat, a new access point and pathway was created between Epworth's oncology unit on Level 4 of the Erin Street Building through to Epworth Radiation Oncology within the Epworth Centre, providing direct patient access between locations without having to change floors.

### Expanding oxygen supply

A new medical oxygen vessel was installed behind the Elim building at 29 Erin Street on 1 March 2015 and was connected to the existing Epworth Richmond hospital via pipeworks running under Erin Street.

This oxygen vessel will triple the capacity of medical oxygen stored for Epworth Richmond and will supply the existing site as well as the new wings to be built along Erin Street over the coming years.

With endorsement from Heritage Victoria, the heritage-listed stables behind the oxygen vessel enclosure were also fully restored.

The Elim site also saw additional works during this time, including landscaping, installation of better lighting and new footpaths into the facility to improve access and safety for patients accessing the rehabilitation building.



Epworth Richmond's Lee Wing



## Epworth Freemasons

### Revitalising the Epworth Freemasons Clarendon Street campus

A \$59 million redevelopment at the Clarendon Street campus has been underway since early 2014 to upgrade the ageing infrastructure of the building, expand the theatre suite and refurbish a number of areas within the site.

Two new theatres opened early in 2015, to bring the total number of theatres at Clarendon Street to eight and enable an increase in theatre lists. Surgeon Mr Marcus Carey and his team were delighted to use the facilities in the first theatre to open on 2 March.

The second theatre opened one month ahead of schedule on 11 May and increased the capacity for orthopaedic surgery within the campus.

Theatre staff and doctors of Epworth Freemasons provided input into the design of the new theatres which has proven to be very successful.

In May, a new day of surgery admissions centre, short stay unit and six interview rooms opened, now co-located with our operating suite, offering patients a smooth and seamless transition through their surgical pathway on Level 3.

New Wards 1 and 2 West were on track to open in July, to offer a more enhanced patient experience, with new services and new modern decor for a more comfortable environment.

### An unexpected turn of events at Clarendon Street

On 21 December 2014, an unexpected flooding event caused by a burst water pipe forced the temporary closure and evacuation of patients at the Epworth Freemasons Clarendon Street campus which reopened two weeks later following major restoration works. Two inpatient units, 1 and 2 West, were severely damaged by the floods and were closed for seven months while repair and refurbishment works took place.

Epworth entered into a partnership with Eastern Health Box Hill Hospital to temporarily utilise two spare wards to ensure business as usual for Epworth Freemasons while 1 and 2 West were refurbished.

The temporary Epworth Freemasons at Box Hill Hospital wards were successfully opened to patients in February 2015 thanks to the extraordinary work of staff across Epworth HealthCare to put the processes and systems in place ensuring patients would continue to receive the same high-quality care and service renowned across Epworth's campuses.

The refurbished 1 and 2 West opened in July 2015.

Read more about Epworth's staff efforts during the flood recovery on page 42.

### A new MRI facility at Clarendon Street

Monday 27 October 2014 saw the first examination using the new magnetic resonance imaging (MRI) machine at Epworth Medical Imaging on Albert Street.

An additional waiting area, change room, nurse set-up area and bathroom were also developed adjacent to the MRI exam room to support the new function modality.

### A brighter and better day procedure centre at Victoria Parade

The day procedure centre at Epworth Freemason's Victoria Parade campus also undertook refurbishment works to the reception and waiting area to improve the patient experience and journey.

With four operating theatres, an endoscopy room and a 22-bay recovery room, the Epworth Freemasons day procedure centre is one of the largest and busiest of its kind in Melbourne.

The Victoria Parade special care nursery also recently introduced high-flow equipment for infants with respiratory distress syndrome in the newborn period.

This will help reduce the incidence of transfers to neonatal intensive care and minimise the need to separate mother and baby.

## Epworth Geelong

### Epworth Geelong makes great progress towards opening in July 2016

Epworth Geelong has taken shape quickly since construction gained momentum following the pouring of the ground floor slab in August 2014.

Equally as fast has been the growth of interest from clinical and non-clinical professionals wanting to work at Epworth Geelong.

In the last week of October 2014, the Epworth Geelong project team held a series of open forums for people interested in employment. This was an opportunity to provide an introduction to Epworth HealthCare and the new hospital, as well as offer some insight into the initial thinking around the recruitment process.

Around 400 people out of more than 1000 who had expressed interest in employment attended these forums, all eager to find out more about the hospital.

By the end of June 2015, close to 3000 people had submitted their expressions of interest to work at Epworth Geelong when the hospital opens in July 2016.

On opening, Epworth Geelong will provide a comprehensive range of acute medical, surgical and rehabilitation services with 172 overnight inpatient beds, an emergency department, an intensive care unit, 11 operating theatres (including one hybrid), two catheter laboratories, two endoscopy rooms, six birthing suites, private consulting suites and sessional consulting rooms, a rehabilitation hydrotherapy pool and gym as well as on site medical imaging, pathology and pharmacy services.

#### A traditional celebration of a major construction milestone

Construction of Epworth Geelong reached a major milestone in April 2015, reaching the highest point of the building on Level 7.

Epworth HealthCare celebrated with a symbolic 'topping out' ceremony on Wednesday 20 May, attended by friends and partners of Epworth.

Guests of honour included Federal Minister for Health, the Hon Sussan Ley MP and Member for Corangamite, the Hon Sarah Henderson MP, who both toured the site and participated in a ceremony that celebrated the project's achievements so far.

The topping out tradition began in the northern hemisphere more than a thousand years ago. The story goes that when people in Scandinavian countries were building their homes, they would celebrate the setting of the last and highest wood beam by tying an evergreen fir tree from the surrounding land to the highest point of the building.

With help from the team at Brookfield Multiplex, Epworth was able to honour the topping out tradition at our Geelong campus with an acacia tree, native to the local land.

*Take a 3D tour of the Epworth Geelong and Epworth Richmond developments on the Epworth You Tube channel: [youtube.com/user/EpworthHealthCare](https://youtube.com/user/EpworthHealthCare)*

#### South West Regional Cancer Centre

##### Epworth to provide cancer services to Warrnambool community

This financial year, Epworth HealthCare was awarded a contract to design and construct a new multidisciplinary cancer facility in Warrnambool, and also operate the radiotherapy service on behalf of the Victorian Government.

The South West Regional Cancer Centre will have the capacity to provide radiotherapy treatment for up to 500 patients per annum with two radiotherapy bunkers, one with a linear accelerator (radiation treatment machine), operated by Epworth Radiation Oncology as a public service with no cost to patients.

An 11-bed day oncology unit on Level 1 will be operated by South West Healthcare, with consulting suites on Levels 1 and 2 for medical oncologists, radiation oncologists, allied health professionals and other specialists to collaborate in a multidisciplinary environment.

A dedicated supportive care centre on the ground floor will offer services and resources to support the wellbeing of cancer patients and their carers.



Federal Minister for Health, the Hon Sussan Ley MP and Epworth Group Chief Executive Alan Kinkade take a tour of Epworth Geelong during the topping out ceremony

This supportive care centre will be named in honour of the Peter's Project foundation, a group who lobbied for a dedicated cancer facility in Warrnambool

It was the late Peter Jellie's wish for Warrnambool to have its own cancer treatment facilities so locals would not have to spend long periods of time away from their family and daily lives while they were receiving treatment in larger cities.

Led by Peter's wife Vicki, the Peter's Project foundation and community rallied together to raise funds towards a regional cancer centre. With generous support from the local community, the Peter's Project foundation raised \$5 million and successfully secured a commitment of \$15 million from the state government and \$10 million from the federal government to make this cancer facility possible.

Construction on the centre, located opposite South West Healthcare's Warrnambool Base Hospital on Ryot Street, commenced in February 2015 and is due to open in mid-2016.

## Epworth Eastern

### New theatre at Epworth Eastern

A ninth theatre opened on level 2 at Epworth Eastern in February 2015 to better accommodate the growing number of new and existing VMOs who require theatre sessions.

The increased operating capacity was met with great enthusiasm from doctors, with 40 out of 40 available sessions committed to while the theatre was under construction.

Theatre 9 is co-located with Epworth Eastern's brand-new state-of-the-art catheter laboratory and together they form a welcoming and exciting new clinical area for patients, staff and surgeons.

### New catheter lab equipment brings clearer images

An updated catheter lab reopened on 14 April at Epworth Eastern after a successful two-week installation of the new Siemens Artis Q machine. Siemens provided comprehensive training for our radiographers, cardiac technicians, nurses, VMOs and our orderly.

The new machine came complete with a new chief radiographer in Tony Coates. Tony worked at Box Hill Hospital for 21 years in a senior management role and started at Epworth Eastern on 13 April. Tony worked long hours with Epworth Eastern staff to help train them on the new machine.

Exciting features of the new machine include three-dimensional CT capability, embolisation guidance software and a significantly reduced radiation dose with greater enhancement of x-ray images.



The new South West Regional Cancer Centre, due for opening in mid-2016



## Epworth Camberwell redevelopment opens

The \$43 million redevelopment of Epworth Camberwell was officially opened in August 2014 by the Federal Health Minister, the Hon Peter Dutton MP, who also launched Epworth Clinic — Epworth’s inpatient service and day program established for mental health patients.

The redevelopment of Epworth Camberwell, which included new mental health and education facilities in its design, resulted in a total number of 153 beds for rehabilitation, sleep studies and mental health.

Welcoming Minister Dutton on his first visit to the new facility, Group Chief Executive Alan Kinkade explained that the redevelopment included 72 new beds, comprising beds for psychiatry services and additional rehabilitation beds, including beds for sleep studies, and a state-of-the-art education precinct.

“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.

“Our teams consist 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. Furthermore, it is unique in that it is integrated with one of the best rehabilitation services in the country to make available exercise, dietary and healthy living activities,” Mr Kinkade adds.

“I am delighted to see our important vision realised to develop a world-class mental health service which is dedicated to delivering quality care for each patient and achieving the best possible outcomes,” Mr Kinkade says.

Epworth Camberwell provides dedicated rehabilitation services, which include clinical management of inpatients and outpatients requiring rehabilitation following acquired brain injury (ABI), hip and knee joint replacement, multi-trauma, orthopaedic surgery, neurological events such as stroke, cardiac events and pain management issues.

“We were delighted to receive \$1.2m from the Department of Health and Ageing as a Federal Government Innovative Clinical Teaching and Training Grant to support our teaching hospital model. It provided for a lecture theatre; tutorial and debrief rooms; and consulting and therapy rooms with attached observation rooms for medical, nursing and allied health students,” Alan said.

Read about the successful growth of the Epworth Clinic on page 23.

## Balance Disorders Clinic opens at Epworth Camberwell

A new Balance Disorders Clinic opened at Epworth Camberwell in March 2015. This clinic is run by specialist neuro-otologists and neurologists who diagnose balance disorders that affect the vestibular system and cerebellum. The clinic offers cutting-edge technology including infrared and high-speed video-oculography. These are diagnostic, non-invasive video-based methods of measuring eye movements, which can rapidly identify and quantify vestibular and cerebellar causes of imbalance.

The clinic is suitable for all patients who present with dizziness, vertigo, gait disturbances or problems with coordination.

Following diagnosis, some patients will then be referred on to our Vestibular Rehabilitation Program which is offered at three sites, Epworth Camberwell, Epworth Brighton and Epworth Richmond. This is a specialised multidisciplinary service with skilled therapists specifically trained in managing vestibular disorders.

## Expanding our mental health care

The Epworth Clinic has seen significant growth over the last financial year, with an increase in staff and service offerings, and expansion into a second ward. It’s proof of the ongoing demand for treatment options for patients with mental health issues — something that Epworth strives to deliver with excellence, innovation and, above all, sensitive patient care.

Headed by Director of Psychiatry and ECT Dr Graham Wong and Director of Clinical Services Sue McLean, the clinic includes senior managerial staff, approximately 30 psychiatric nurses and 11 multidisciplinary team clinicians, made up of social workers, occupational therapists, clinical psychologists and an exercise physiologist and dietician. Currently 26 accredited psychiatrists work on site in the clinic’s consulting rooms.

2015 year saw the introduction of an innovative treatment modality for depression known as transcranial magnetic stimulation, which involves the application of a pulsed magnetic field that alters the excitability and blood flow in specific areas of the brain. It’s been providing relief to patients who have not had success using antidepressants, with encouraging results.

In addition, the therapeutic day programs now include several new offerings: WISE (wellness, interaction, support and engagement) for the over-65s; MOVE (mindful movement, intuitive eating), focussing on the long-term behavioural change of eating habits and physical activity; and ACT, acceptance and commitment therapy, which now includes a specialist program for patients with OCD (obsessive compulsive disorder) and an advanced course called ACT for Relationships.



Two separate programs at the clinic are designed specifically for young people. Life Skills helps support functionality across multiple domains including school, vocational pursuits and social connectivity, and helps develop and strengthen coping strategies for high-prevalence disorders such as anxiety and depression. DBT (dialectical behavioural therapy) for youth is tailored to young people who are experiencing interpersonal difficulties and centres on increasing the ability to practise mindfulness, distress tolerance and emotion regulation.

Lauren Moore, Epworth Clinic's new intake coordinator, says it's an exciting time for the clinic as it heads towards further expansion.

"Our staff strive for excellence in client-centred care. Focussing on our future as a service, we will provide a mental health program that maintains high levels of care, professionalism, communication and team work."

### Epworth HealthCheck service maximises wellness

For those concerned about staying healthy, Epworth HealthCheck, established in 1991, provides a focussed process that reviews lifestyle, medical and family history. The program includes appropriate diagnostic and imaging tests to identify existing health status and to plan for optimal management of health risks.

**"The last time I completed my HealthCheck was three years ago and it saved my life"**

Professor James Cameron, director of Epworth HealthCheck, says the service is popular among people wishing to pay closer attention to their physical wellbeing and to take action — often pre-emptively — to maintain optimal health in the future.

Feedback from clients using the service highlights the potential life-saving benefits of getting checked early.

"The last time I completed my HealthCheck was three years ago and it saved my life. I am very happy to be doing it again this year," says Peter Halstead.

The Epworth HealthCheck program involves a medical consultation and investigations to assess patients' current health and to establish an evidence-based pathway to optimise wellness and maximise prospects of enjoying a longer, healthier and happier life.

**Blood sugar, blood pressure and cholesterol level tests** help to measure an individual's risk of heart disease and diabetes. Unhealthy lifestyle choices such as poor diet and smoking begin to have effect in the mid-thirties, however known risk factors have very few symptoms and many people may not realise they are at increased risk of stroke, heart disease or heart failure.

**Stress echocardiography** provides ultrasound imaging of the heart before and after a treadmill exercise stress test. It provides structural and functional information on the structure of the heart chambers and valves and is useful in stratifying risk of heart disease.

**Mammograms and/or breast ultrasounds** aid in recognising changes in breast tissue and early detection of abnormal cells. Early detection increases success of treatment.

**Bowel cancer screening** involves an FOBT test and is the most effective and recommended way to screen for pre-cancerous polyps in their earliest stages when they are easier to treat and cure.

**Skin checks** help to monitor changes in the skin or to detect presence of skin cancers. An encouraging 95% of skin cancers can be treated successfully if detected early so it's important to get to know your skin.

**Body composition scanning** provides an accurate evaluation of weight and fat distribution. The scans can assess weight, including skeletal, organ and muscle mass and focus specifically on the distribution of fat and lean muscle throughout the body.

**Bone mineral density tests** help to evaluate and monitor risk of osteoporosis or osteopenia and may provide a signal to start paying closer attention to bone health and to consideration of steps to alter diet and exercise.

### Jean Hailes at Epworth Freemasons

Epworth Freemasons has embarked upon an exciting collaboration with Jean Hailes for Women's Health — a national not-for-profit organisation dedicated to improving women's health. The new clinic, Jean Hailes at Epworth Freemasons, replaces the Epworth Freemasons Women's Health Clinic — located at Epworth Freemasons GP Clinics at 113 Albert St, East Melbourne.

Both Jean Hailes and Epworth Freemasons have been operating services dedicated to improving women's health for over 20 years. Jean Hailes has an existing women's health medical clinic in Clayton where work is undertaken through the integration of research, clinical care and community and health professional education.

Health professionals from the Epworth Freemasons Women's Health Clinic have now joined forces with a host of Jean Hailes health professionals and experts, led by Jean Hailes medical director and most senior clinician Dr Elizabeth Farrell. This team will continue providing women with a professional and caring approach, backed by extensive experience and in-depth understanding of complex women's issues.

The collaboration between our two organisations brings together expertise to better meet the needs of women into the future.

## Milestones of care

Epworth has a proud history of providing exceptional healthcare to the people of Victoria and beyond. During 2014/2015 we celebrated three milestones that recognise past achievements and our future commitment to patient care.

### Epworth's 95th birthday

Happy birthday Epworth! 2015 sees Epworth reach the significant milestone of 95 years since the first Epworth hospital was founded — a 25-bed Methodist intermediate hospital housed at Richmond Hill.

Epworth's inception began as the idea of a Methodist minister from Long Gully, Bendigo. Reverend William Palamountain, who spent time as a patient in the Salvation Army's Bethesda Hospital in 1912, was so impressed with the level of care he received there that he decided to establish a hospital with the same service and care for Methodists.

With the support of Methodist congregations, Sunday school scholars and generous benefactors, the hospital officially opened its doors on 27 February 1920, offering a commitment to providing the very best available care to all patients, regardless of their religious affiliation.

Now an eight-campus health organisation with over 1200 beds and employing over 5000 staff and more than 2000 doctors and specialists, Epworth's current core values remain unchanged since those early days — delivering the utmost excellence in patient care.

### Epworth Eastern's tenth birthday

On 1 June 2005, Epworth Eastern opened its doors with much anticipation for what the future would hold. Two days later, the operating suite welcomed its first patient for surgery.

Some of the achievements of Epworth Eastern over the last ten years include being the first to perform the following clinical procedures:

- Robotic gynaecology surgery — Mr Tom Manolitsas
- First bone anchored hearing aid implant — Dr Sherryl Wagstaff
- Robotic bariatric surgery — Mr Patrick Moore and Mr Anthony Clough
- Thoracic robotic surgery — Dr Siven Seevanayagam.

Epworth Eastern has grown from a staff of 250 in 2005 to employing 768 staff in 2015. Many of our dedicated staff have been there since the hospital opened and constantly demonstrate their adaptability to change with the demands of such a dynamic organisation. Our staff pride themselves on delivering the Epworth experience — caring with compassion, dignity and excellence — to our patients and their families.



Since 2009, hospital staff extended their care to their local community by volunteering and donating to various local charities including the Salvation Army, UnitingCare, Boorondara Community Outreach Program and Mirabel Foundation.

Epworth Eastern continues to offer exceptional care and support our community.

### Delivering 25 years of dialysis care

In October 2014, Epworth HealthCare's dialysis unit turned 25 — having been established as the first private dialysis unit in Australia on 4 October 1989. Since then, the unit, based at Epworth Richmond, has experienced many changes and considerable growth.

The unit was established by Professor Gavin Becker with Lee Douglas (dialysis coordinator at The Royal Melbourne Hospital at the time) providing the groundwork and helping to acquire staff with dialysis training and experience.

The service began humbly, with just three outpatients referred from The Royal Melbourne Hospital and receiving treatment in a single room. Initially there were three patient shifts per week on Monday, Wednesday and Friday afternoons. The dialysis team worked in isolation, with one staff member caring for three patients. At the time, only stable outpatients could be dialysed at Epworth.

In 1991 the service capacity increased to six dialysis chairs and in 1997 the entire dialysis unit moved and increased to eight chairs.

In 2013 a new, purpose-built dialysis unit opened and capacity expanded to 12 chairs with the potential to increase to 20 chairs into the future.

This growth was needed as patient numbers have significantly increased over the years, from just three regular patients in 1989 to more than 30 in 2014.

The dialysis unit is now open seven days a week.

Today Epworth is able to treat patients with different needs including those commencing dialysis, acute inpatients, and people who need ongoing dialysis while holidaying in Melbourne.

There is a sense of family among staff, with the majority having worked with the unit for many years. During their time they have seen the service grow in size, patient numbers and acuity.

However, unchanged is the excellent standard of care delivered to patients and the friendly rapport between staff, patients and their families.





## Spasticity service provides coordinated care

- After working in the spasticity management field for many years, Professor John Olver recognised that a coordinated approach to care for people with neurological conditions would provide the best patient outcomes. While each member of the care team was providing valuable care separately, together the care could be even better.

Launched in 2009 at Epworth Richmond Rehabilitation, the spasticity clinic offers a unique approach for adults and adolescents with neurological conditions such as stroke, traumatic brain injury, multiple sclerosis, spinal cord injury, cerebral palsy and neuropathies. Last year the clinic was relocated to Epworth Hawthorn and has taken on a new dimension with the addition of a new specialist surgeon, Dr Natasha van Zyl. The clinic has also expanded this year to be offered at Epworth Camberwell.

This service provides patients with a multidisciplinary approach to care by collaborating with the patient, their general practitioner, occupational therapist, physiotherapist, rehabilitation physician and surgeon as appropriate. The service is led by specialist clinicians who are recognised for their expertise in providing spasticity management.

By working with patients, the therapy team develops a tailored treatment plan that incorporates the individual's needs and goals with the ultimate aim of achieving the best possible outcome for their patient and their family.

During the clinic, the care team work together to improve a patient's independence, recreational activity and community interaction.

Prof Olver leads the spasticity service and explains how this unique approach is improving patient outcomes.

“By working as a team we are able to discuss treatment options from our differing perspectives thus arriving at the best management plan for the patient,” he says. “The patient is also involved in this process by setting individualised goals for their treatment outcomes.

“This new service offers access to the full spectrum of care available from splinting, massage, stretching and strengthening through to medication treatment and surgery,” says Prof Olver.

“By working as a team we are able to discuss treatment options from our differing perspectives thus arriving at the best management plan for the patient”





## Construction boosts Geelong economy

- Epworth Geelong has not yet opened its doors to patients but the hospital is already making a positive impact to the Greater Geelong community, having awarded more than \$21 million to local manufacturing and construction trades and suppliers.

Construction of Epworth Geelong was the primary contributor to the 557 per cent increase in Greater Geelong non-domestic building activity figures in November 2014 when the build gained momentum. By 30 June 2015 there were more than 550 people working on site.

Epworth Geelong CEO Damian Armour says, “Epworth Geelong’s construction ethos was established from the outset, conscious of the economic environment in the region, it was important to us that contracts be awarded to local companies as much as possible.”

This vision was shared by Brookfield Multiplex, who formally engaged companies including Geelong Fabrications (structural steel), Geelong Fire Services, Norris Plant Hire (Civil Works) and Geelong Telephone Company, to name a few.

In addition, other subcontractors engaged on the project have been sourcing local employees who live in the Greater Geelong region.

Both Epworth HealthCare and Brookfield Multiplex have been impressed by the quality of work and supplies available within the region.

“Many of the companies have been around for decades and provide a great quality product and service, with years of industry experience to match,” says Mr Armour. “When Epworth Geelong opens, patients and visitors can walk through the doors knowing our hospital is of the highest quality because of the standard within the local industry.”

In offering more work locally, we have enabled new apprenticeships to commence through contractors on site, to give up-and-coming building and manufacturing employees the chance to learn their trade on an exciting and large-scale project.

GForce, which provides apprenticeship, traineeship and employment opportunities in the Geelong region, placed 15 new and local electrical apprenticeships through Appselec, Decon Industries, Geelong Fire Services and QA Electrical.

Appselec had 37 local electrical apprentices on site in total, including the new placements through GForce, while D&E air conditioning had four local mechanical service apprentices out of 175 people on site.

It has certainly been a positive start to what is an exciting future ahead for Epworth Geelong.



## IMPROVING HEALTHCARE THROUGH RESEARCH

Clinical research  
leads to better  
patient outcomes.

Research activity at Epworth is supported by the Epworth Research Institute and the Epworth Medical Foundation and is conducted by various research groups, including the Clinical Trials and Medical Innovation Group, the Epworth Prostate Centre, the Epworth Radiation Oncology Research Centre and Professorial research groups, among others. We also have ongoing affiliations with the Cleveland Clinic, as well as partnerships with major universities, nationally and internationally.

### Research at Epworth

Epworth HealthCare is proud of its growing capability and reputation for conducting clinical research, which is ultimately to benefit our patients. By 2017, Epworth seeks to become the leading patient-centred, academic healthcare organisation in the Victorian private sector.

This is embodied in the Epworth strategic plan and its purpose statement:

To improve the health, wellbeing and experience of every patient by integrating clinical practice with education and research.

The Epworth vision is: *The Epworth Experience* — consistently delivering excellent patient-centred care with compassion and dignity. The nexus between medical care, education and research is pivotal to achieving this goal.

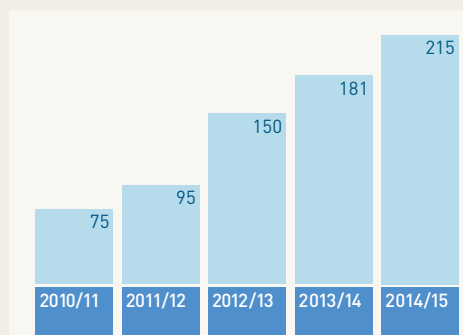
The growing maturity of Epworth research activities is reflected in the number of publications from an Epworth author, presentations at conferences, symposia and workshops, our expanding commercial trial involvement, our inclusion in national forums run by the government and industry bodies, and our increasing role in advocacy for research within the private health sector. In recent years, there has been a significant growth in the number of books, book chapters and articles published in peer-reviewed national and international journals by Epworth researchers.



### Ethical approval of research projects

All research conducted at Epworth must be approved by Epworth's Human Research Ethics Committee (HREC) before it can commence. Led by Reverend Professor Emeritus Christiaan Mostert (Chair, HREC) and Professor Mari Botti (Chair, Low-Risk Subcommittee), the HREC is formed under the auspices of the National Health and Medical Research Council (NHMRC) which provides leadership and advice regarding research governance in Australia.

One of Epworth's key attributes is the timely execution of research project approvals. The Research Development & Governance team and Clinical Trials and Research Centre (CTRC) team work closely with the HREC coordinator to facilitate ethics submissions and approvals to ensure timely execution. This also applies to a number of investigator-led research projects which are approved by the HREC on an annual basis.



Epworth publications

Epworth would like to thank the members of HREC for their continued dedication and support with research studies. We particularly acknowledge the work of Professor John Olver, A/Professor Jim Breheny and Ms Harriet Ziegler, who resigned from the HREC during FY2014/15 after a number of years of service, and welcome Mr Ian Unwin, who has recently joined the HREC.

#### HREC AND LOW RISK SUBCOMMITTEE SUBMISSIONS:

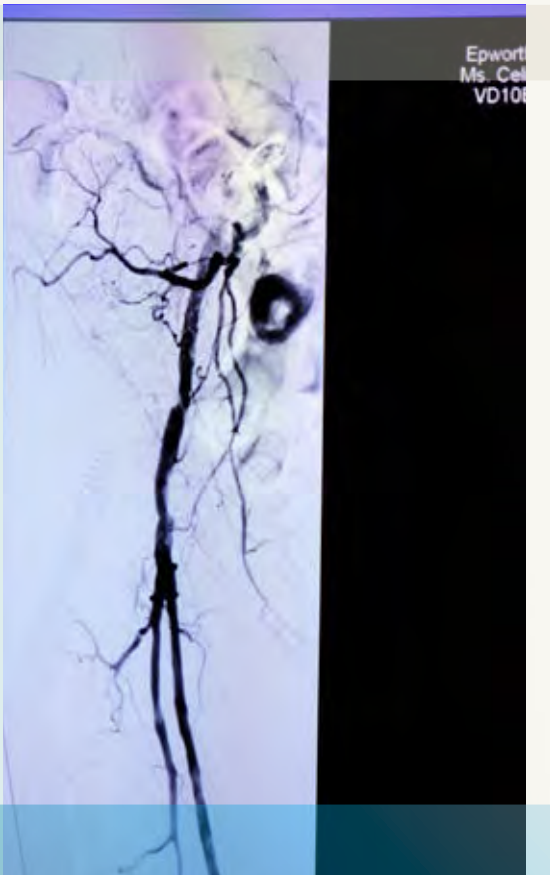
##### Number of submissions

- HREC — 47 new submissions
- HREC Sub-Committee (Low and Negligible Risk) — 47 new submissions

#### HREC meeting attendance — 2014/15

HREC	Eligible to attend	Attended
Reverend Professor Emeritus Christaan Mostert	11	9
Professor Mari Botti	11	10
A/Professor Jim Breheny	6	5
Professor Peter Brooks AM	11	8
Professor Emeritus John Catford	11	7
Professor Niki Ellis	11	8
Professor Jane Fisher	11	9
Dr Karin Hammarberg	1	1*
Professor John Olver AM	1	0
Ms Sarah Pollock	11	9
Professor Jennie Ponsford	11	6
Mr Ian Unwin	1	1
The Honorable Peter Young	11	10
Ms Harriet Ziegler	6	6
Low Risk Subcommittee		
Professor Mari Botti	10	10
Dr Karin Hammarberg	10	9
Ms Tess Lye	10	7
Reverend Professor Emeritus Christaan Mostert	10	6

\*Alternate for Professor Fisher





## EPWORTH PROFESSORIAL UPDATES 2014/15

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

### Professor of Nursing

#### EPWORTH DEAKIN CENTRE FOR CLINICAL NURSING RESEARCH

Professor Mari Botti, Epworth Chair of Nursing, Deakin University

⇒

Professor Mari Botti leads the Epworth Deakin Centre for Clinical Nursing Research which allows nursing staff and students to gain high-quality clinical research training and acquire the skills required to utilise evidence-based paradigms to optimise clinical care. Prof Botti has an international profile in clinical and health services evaluation. She is a foundation member of the Deakin University Centre for Quality and Patient Safety Research 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 is the Chair of the Low Risk Subcommittee of the Epworth Human Research Ethics Committee and is Chair of the Deakin University Human Research and Ethics Committee.

### Epworth Victor Smorgon Chair of Rehabilitation Medicine

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

Professor John Olver AM, 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. Prof Olver has developed successful national and international partnerships through his involvement in various research projects. He is also the inaugural recipient of the Epworth Research Leader of the Year.

### Epworth Victor Smorgon Chair of Medicine

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

⇒

Professor Richard Gerraty is a stroke neurologist conducting stroke and vestibular research at Epworth, including participating in important investigator-initiated multicentre trials funded by the NHMRC. He is neurology co-editor of the *Journal of Clinical Neuroscience*. He is a member of the Council of the Australian and New Zealand Association of Neurologists, and is a member of the Board of the Brain Foundation, Victoria.

### Epworth Victor Smorgon Chair of 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.

### Professor of Psychology

#### MONASH-EPWORTH REHABILITATION RESEARCH CENTRE

Professor Jennie Ponsford, Chair of Psychology,  
Monash University

⇒

The Monash-Epworth Rehabilitation Research Centre (MERRC) aims to conduct research in trauma rehabilitation with a view to reducing long-term disability. Professor Jennie Ponsford is the director of the Monash-Epworth Rehabilitation Research Centre. Prof Ponsford and her team collaborate locally, nationally and internationally with other trauma research groups. A world leader in her field, Prof Ponsford has spent more than 30 years as a clinician and researcher characterising and predicting outcomes and developing interventions for these difficulties after mild, moderate and severe traumatic brain injury (TBI). 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 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. Prof Sinclair has extensive research experience across a broad range of dermatology conditions, with specific interest in autoimmune diseases of skin and hair, skin cancer, psoriasis, genetic skin disorders and skin stem cell biology. Prof 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 (a condition developed from years of exposure to the sun), cellulitis and infection of the skin, alopecia and nail infections (onychomycosis).

### Professor of Health Informatics Management

Professor Nilmini Wickramasinghe, Professor-Director of Health Informatics Management and Professor of Health Informatics, Deakin University

⇒

Prof Nilmini Wickramasinghe works to help define and develop relevant health informatics research projects within the Epworth HealthCare environment in particular, but also conducts research internationally in various aspects of digital health. Research within the health informatics management group at Epworth focuses extensively in successfully moving forward to use technology solutions to deliver superior healthcare, thus enabling Epworth to pursue research in leading areas of health informatics today.

In 2014/15, Prof Wickramasinghe was awarded the prestigious Schoeller Senior Fellowship by the University of Erlangen-Nuremberg, Germany. She has a very active international presence running healthcare IS/IT information systems/information technology streams at most of the leading international IS conferences. Prof Wickramasinghe was instrumental in introducing the Healthcare IS/IT stream into the Australasian Conference on Information Systems (ACIS) and together with her co-track chair was awarded best track at the last ACIS conference held in Auckland, New Zealand in December 2014.

### Epworth Research Institute Board

The Epworth Research Institute (ERI) is a public company, limited by guarantee, established in 2009 to support the undertaking of clinical research at Epworth. One of its important roles is to approve the funding of worthy research applications that are submitted on an annual basis for support. These internal grant applications are assessed for strategic alignment, research team strength, budget suitability and scientific merit by a Research Committee of the ERI, chaired by Professor John Catford, Executive Director, Academic & Medical. The ERI Board is currently composed of the following members:

Mrs Janet Latchford (Epworth HealthCare), Chair

Mr Alan Kinkade (Epworth HealthCare)

Mr Alan Crosthwaite (Epworth HealthCare)

Mr Scott Bulger (Epworth HealthCare)

Mr Michael Robinson AO (Epworth HealthCare)

Professor Gail Risbridger (Monash University)

Professor Brendan Crotty (Deakin University)

The representative from The University of Melbourne is currently vacant

## TRANSLATING RESEARCH INTO PRACTICE

We are very proud that a number of our research projects are clear examples of clinical research that are leading to changes in our clinical practice and procedures and improving our care and outcomes in patient management.

### Patient outcomes after open and minimally invasive surgery for prostate cancer: longitudinal study

Senior investigator: Prof Mari Botti

In Australia, prostate cancer is the most commonly diagnosed cancer in males and the second most common cause of cancer deaths in men. The treatment for localised prostate cancer is most often prostatectomy surgery. This includes traditional open radical prostatectomy and minimally invasive surgery including robotic-assisted prostatectomy surgery.

The physiological, functional, psychosocial and cognitive outcomes associated with the long-term trajectory of recovery have not been investigated adequately, nor has there been a prospective, comparative evaluation of the outcome associated with different surgical modalities. The findings from the longitudinal study will address gaps in research, inform patients about their long-term recovery, and provide evidence for optimal care of patients who undergo prostatectomy for localised cancer, irrespective of the surgical modality.

### Translation of evidence into pain management practices (MAPP) in acute care environments

Senior investigator: Prof Mari Botti

A major focus of the drive to improve the quality and safety of healthcare is to standardise care processes, where post-surgical pain is a care process known to be highly variable and inadequate. In Australia, over 40% of patients experience significant pain which leads to unnecessary suffering and increased associated risk. The aim is to develop, implement and evaluate an improved method of treating pain using a clinical decision support system based on best available evidence for managing postoperative pain.

### Patient participation in postoperative care activities in patients undergoing total knee replacement surgery

Senior investigator: Prof Mari Botti

Multimedia Intervention for Managing patient Experience (MIME): This study tests whether a nurse-led, multimedia intervention, using tablet device technology, can improve patient participation in acute postoperative care after total knee replacement (TKR) surgery. The primary objective is to determine whether a multimedia intervention, compared to usual care, reduces the intensity of postoperative pain in patients who have undergone a TKR.

### An international, multicentre, observational, prospective, longitudinal cohort study to assess the impact of integrated upper limb spasticity management including the use of BoNT-A injections on patient-centred goal attainment in real life practice (ULIS III)

Senior investigator: Prof John Olver

The primary objective is to assess the longitudinal attainment of patient-centered and function-related goals after botulinum toxin A (BoNT-A) injection (including following repeated injection cycles where these occur) alongside integrated spasticity management used in real-life settings over a period of two years. This is an international collaboration involving multiple sites interstate and overseas.

### The use of a post stroke checklist (PSC) to identify persistent long-term problems amongst post-stroke survivors

Senior investigator: Prof John Olver

This project aims to identify the frequency of commonly reported long-term problems in Australian stroke survivors using a scale known as the post stroke checklist (PSC). The PSC consists of 11 long-term issues that patients can experience post stroke (e.g. pain, mood, cognitive, communication) 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. This study is well into recruitment, approaching a third of the recruitment target of 300 patients.

### Audit of elective joint replacement and hip fracture rehabilitation outcomes

Senior investigator: Prof Richard de Steiger

This project monitors complications and measures functional outcome of more than 3500 patients coming to rehabilitation after hip and knee replacement and hip fracture. The team is also looking at establishing a protocol for prophylaxis of thromboembolism. In addition, it is expected the current study will assist in optimising future rehabilitation programs to achieve best functional outcomes, for example, length of stay, discharge destination and complications.

## Saccadic progression in vestibular neuritis

Senior investigator: Prof Richard Gerraty

Patients with acute vertigo due to vestibular neuritis (a disorder that affects the nerve of the inner ear) have abnormal eye movements which can now be recorded and quantitated with the ICS impulse video-oculography device. With the support of the Epworth Medical Foundation Professor Richard Gerraty acquired the latest version of the device for a project examining the progress towards recovery in vestibular neuritis patients admitted to Epworth Hospital. With Kunal Luthra and Hayley Roberts, Monash University BMedSc (Hons) students, Prof Gerraty found that the saccadic eye movements which compensate for the impaired vestibular nerve function occur progressively earlier in the days following vestibular neuritis, possibly a mechanism of early compensation for the disabling effects of acute vestibular injury.

## Epworth Musculoskeletal Research Centre

Senior investigator: Prof Richard de Steiger

The highlight of the research year for the Department of Surgery is the award of an NHMRC Project Grant for 2015–2017. This is a successful cross-institutional and multidisciplinary collaboration between Professor John Hamilton, Dr Andrew Cook of the University of Melbourne and Professor Richard de Steiger, Epworth HealthCare, the University of Melbourne. The grant title is 'Towards a rational strategy for osteoarthritis therapy. An examination of GM-CSF Blockage in an animal model'. Previous research between the chief investigators has established a mechanism for analysing synovial tissue samples from patients undergoing treatment for osteoarthritis. This grant will expand on these initial findings.

## Population health

Senior investigator: Prof Richard de Steiger

Professor de Steiger continues to collaborate with the University of Melbourne Epi Centre in Population Health studies and has expanded the research to include international collaborators, including Norway, Finland, Sweden and Denmark. This research will help identify disparities relating to healthcare and also help to predict the need for joint replacement surgery which has important implications for health policy. It includes:

- comparison of lifetime risk of primary total hip and knee replacement surgery between Australia, Denmark, Finland, Norway and Sweden
- projected burden of primary total hip and knee joint replacement
- trends and adverse outcomes associated with hip arthroscopy in Australia: a population-based analysis of hospital admissions from 2000 to 2012.

## Outcomes of joint replacement

Senior investigator: Prof Richard de Steiger

In his role as deputy director of the Australian Orthopaedic Association National Joint Replacement Registry, Professor de Steiger continues research into improving the outcomes of joint replacement. Studies published on the 'Evaluation of Computer Navigation for Total Knee Replacement' and the 'Use of Cross Linked Polyethylene in Total Knee Replacement' have led to two major publications. He has been invited as a guest speaker to the prestigious British Orthopaedic Association as a result of this work and it is hoped that the studies will result in a reduction in the rate of revision in younger patients undergoing total knee replacement surgery.

## Longitudinal head injury outcome

Senior investigator: Prof Jennie Ponsford

Traumatic brain injury is the leading cause of acquired disability in young people, resulting in a complex range of physical, cognitive, behavioural and emotional changes. The elucidation of the long-term problems experienced by those who sustain traumatic brain injury owes much to the Longitudinal Head Injury Outcome Study, which has been conducted at Epworth Richmond (formerly Bethesda) since 1995.

After recruitment as inpatients, all patients admitted to Epworth Richmond and Epworth Camberwell with head injuries are routinely invited to attend a follow-up clinic at one, two, three, five, ten and 20 years post-injury. They are interviewed by a rehabilitation physician or research unit clinician and complete questionnaires documenting their level of mobility, functional independence, living situation, relationship status, vocational activities, neurological, cognitive, behavioural and emotional problems experienced as well as drug and alcohol use. The study has provided comprehensive information regarding the difficulties experienced by these individuals and their families over long periods of time after injury. Findings have been published in more than 70 international peer-reviewed journal articles, and in more than 110 national and international conference presentations. This is one of the most comprehensive longitudinal databases worldwide.

## Independent review of ISCRR's 2011-2015 Neurotrauma Research Program, funded by the Transport Accident Commission (TAC)

Senior investigator: Prof Jennie Ponsford

MERRC is leading two of the nine projects listed to make major savings to TAC and have major global impacts, namely the Longitudinal Head Injury Outcome Study and the study of early therapy following traumatic brain injury. The post-traumatic amnesia treatment study is a real team effort at Epworth. It is a fine example of our translational research and the positive impact it is having on our relationship with TAC.



### Mobile solution for diabetes monitoring and self-care

Senior investigator: Prof Nilmini Wickramasinghe

This project with collaborators in Canada involves designing and developing a unique pervasive mobile solution for superior management and monitoring of diabetes, greatly assisting diabetes self-care. This is a global project with trials contemporaneously taking place in Canada, China, Germany, the US and India, as well as a small trial at Epworth HealthCare. Key members of the research team include Professors Doug Vogel, Raj Gururajan, Elliot Sloan and Dr John Zelcer (Epworth). Funding for this ongoing project has come from various sources including North American funders, local sponsors in India and China, Scholler Foundation, ATN-DAAD, Perpetual Trust and seed funding from Epworth.

### The 'Intelligence continuum' and healthcare technology

Senior investigator: Prof Nilmini Wickramasinghe

Professor Wickramasinghe and Dr Jonathan Schaffer of the Cleveland Clinic in the US have developed a unique conceptual model, 'the Intelligence continuum', which provides a systematic approach to extracting and leveraging the knowledge and intelligence residing across various healthcare domains. They are now coupling this with models to assess the business value of technology for healthcare contexts and are being assisted by Mr Peter Haddad with this stream of the research. The work has been well received at the leading international health informatics conferences including HIMSS (Healthcare Information and Management Systems Society) Asia Pacific 2014, AMIA (American Medical Informatics Association) 2014, 2015 and Med Info 2015.

### Language translation at the point of intake in healthcare

Senior investigator: Prof Nilmini Wickramasinghe

Professor Wickramasinghe is working with clinicians at NorthWestern Memorial hospital and Arias Information Solutions in Chicago, US. They have developed a unique technology solution to provide language translation at the point of intake and registration. This solution is being tested at NorthWestern Hospital and The University of Michigan and more trials are being planned. This solution has been recognised by the state of Illinois as the most innovative technology solution to address a healthcare need. This is now being looked at with members of the health informatics unit here at Epworth HealthCare to trial this solution in various Australian healthcare contexts.

### Discovery of epidermal stem cells

Senior investigator: Prof Rod Sinclair

Hair follicle stem cells are located in a niche at the proximal end of the arrector pili muscle (APM). The team has investigated whether stem cells in the interfollicular epidermis are similarly associated with the distal ends of the APM. The location of epidermal stem cells was determined by immunofluorescent staining for the markers, cytokeratin 15 (K15), melanoma-associated chondroitin sulfate (MCSP) and  $\alpha 6$  integrin. Quantification of co-localisation showed that 97.9% of K15-positive cells, 83.1% of MCSP-positive cells and 74.2% of  $\alpha 6$  integrin-positive cells were located in the vicinity of an APM tip. Associations between the positions of stem cell markers and APM tips were statistically significant. The three stem cell markers also showed significant co-localisation with each other.



## ERI AWARD RECIPIENTS 2014/15

### RESEARCH FUNDING AWARDS

This is the fifth year of the Epworth Research Institute (ERI) grant awards, made possible through a 'research' corpus generated from funds donated to the Epworth Medical Foundation. In 2014/15, we received 30 applications for funding from Epworth HealthCare researchers, the highest number yet. The research committee of the ERI, chaired by Professor John Catford, convened to assess and rank the applications. The ERI Board approved the support of a total of 14 ERI grants, with a total level of funding support of \$405,000.

In line with a new initiative started last year, seven of the Epworth Research Institute grants have been named in honour of influential Epworth clinicians, recognising each honouree's contribution to Epworth's growth and development during critical periods in the organisation's history.

At the Epworth Research Week Dinner, two new honourees were acknowledged — Professor Jack Cade, an intensivist who initiated the first Epworth intensive care unit, and Dr Murray Johns, a sleep physician who developed the internationally recognised Epworth Sleepiness Scale.

### Congratulations to the following ERI grant recipients for 2014/15:

#### PROFESSOR BRIAN BUXTON RESEARCH GRANT

⇒

**Dr Ameera Deen** — Colorectal Fellow, Epworth Eastern/Epworth Richmond

*Effects of surgical humidification in minimally invasive and open abdominal surgery*

#### ASSOCIATE PROFESSOR JOE TJANDRA RESEARCH GRANT

⇒

**Dr Phil Smart** — Colorectal Surgeon, Epworth Eastern

*How can key tools and technologies of today's information age be designed, developed and adopted to support clinical decision-making in the context of rectal cancer surgery*

#### MR KINGSLEY MILLS RESEARCH GRANT

⇒

**Dr Nicole Tan** — Anaesthetics, Epworth Healthcare

*A prospective, randomised, double-blind, placebo-controlled, parallel-group, two-arm superiority trial to determine the efficacy of local infiltration analgesia for anterior total hip replacement*

#### DR GRAEME SLOMAN RESEARCH GRANT

⇒

**Dr Neda Haghghi** — Epworth Radiation Oncology, Epworth Richmond

*Pilot study to investigate whether SBRT in the preoperative setting is technically feasible and clinically safe*

#### PROFESSOR PRISCILLA KINCAID-SMITH RESEARCH GRANT

⇒

**Associate Professor Nathan Lawrentschuk** — Urology, Epworth Freemasons

*Oligometastatic prostate cancer: Imaging with Gallium PSMA PET-CT and management of suspected metastases in men undergoing primary prostate treatment*

#### DR MURRAY JOHNS RESEARCH GRANT

**Professor Mark Frydenberg** — Epworth Prostate Centre, Richmond

*Examining the outcomes of Australian men managed with Active Surveillance (AS) for low risk localised prostate cancer*

#### PROFESSOR JACK CADE RESEARCH GRANT

⇒

**Professor Mari Botti** — Epworth Deakin Centre for Clinical Nursing Research, Epworth Richmond

*Translation of evidence into pain management practices in acute care environments*

### EPWORTH RESEARCH INSTITUTE SMALL GRANTS

**Ms Delia Naughton** — Occupational Therapist, Epworth Camberwell

*The effectiveness of SaeboFlex therapy versus conventional therapy to improve hand function in clients after stroke*

**Dr Paul Paddle** — Epworth ENT/Health Information Management

*The development of a hospital secure messaging & communication platform*

**Ms Sara Aldous** — Physiotherapy, Epworth Rehabilitation

*Return to sport, social and leisure activities following traumatic brain injury (TBI)*

**Mrs Megan Banky** — Physiotherapy, Epworth Rehabilitation

*A preliminary validation of the Microsoft Kinect and Smartphone system to establish the ecological validity of the Modified Tardieu scale as a clinical measure of lower limb spasticity for walking following injury to the central nervous system*

**Dr Addie Wootten** — Clinical and Allied Health Research; Epworth Prostate Centre

*Outcomes of penile prosthesis implant following radical prostatectomy*

**Mr Daniel Hamilton** — Epworth Radiation Oncology, Epworth Richmond

*Calypso Phantom Study*

**Dr Frances Wise** — Epworth Monash Rehabilitation Medicine Unit, Richmond

*Establish the impact of health literacy on patient rehabilitation outcomes following hip or knee joint replacements*

## EPWORTH RESEARCH INSTITUTE POSTER AWARDS

BEST NEW RESEARCHER POSTER:

**Ms Natalie Grima**

(PhD student with Professor Jennie Ponsford)

*Circadian melatonin rhythms and sleep dysfunction following traumatic brain injury*

BEST EXPERIENCED RESEARCHER POSTER:

**Associate Professor Gavin Williams**

*The distribution of positive work and power generation amongst the lower-limb joints during the stance phase of walking normalises following recovery from traumatic brain injury*

## EPWORTH RESEARCH INSTITUTE ACHIEVEMENT AWARDS

This year saw the instigation of the Epworth Research Institute Achievement Awards. These are to recognise the contribution of Epworth researchers in a variety of categories. The winners of the inaugural awards were announced at the Epworth Research Week dinner in June and received their awards from the Chair of the ERI Board, Ms Janet Latchford. We congratulate these four recipients of these new recognition awards.

**Epworth Early Career Researcher of the year — Dr Nicole Tan**

Dr Tan is an anaesthetist who is active in clinical research and is the Epworth principal investigator on two multicentre, national clinical trials (BALANCED, looking at anaesthetic depth, and RELIEF, using restrictive versus liberal fluid therapy in abdominal surgery) in perioperative/anaesthesia. These trials are currently actively recruiting at Epworth. Furthermore, Dr Tan was announced as the winner of the Mr Kingsley Mills Research Grant at the Epworth Research Week dinner, receiving an Epworth Research Institute large grant.

**Epworth Research Leader of the Year — Professor John Olver AM**

Professor Olver was made a Member of the Order of Australia (OAM) in 2014 for significant service to medicine, particularly the treatment and rehabilitation of acquired brain injuries. He is leading an active research group and is mentoring a number of junior colleagues. In the 2015 ERI grant applications a member of his research team was principal investigator and four of the five research grant applications submitted were recommended for funding by the Epworth Research Institute Board.

**Epworth Clinical Trial of the Year — A/Professor Tony Walton**

Trial title: CoreValve® International Clinical Study: Percutaneous Aortic Valve Replacement (PAVR) with the Medtronic CoreValve® System (MCS) Australia/New Zealand Study

Eighty patients were recruited into the CoreValve Study between 22 March 2010 and 21 October 2013 at Epworth HealthCare (584 patients in total have been recruited thus far in Australia and New Zealand). Twenty-one patients continue in their two-year follow-up period, with the last patient visit scheduled for October 2015. This clinical trial has been given excellent publicity for Epworth and benefitted from strong recruitment, with Dr Walton and Epworth being the second-best recruiting site for the Corevalve site worldwide.

**Epworth External Research Funding of the Year — Professor Richard de Steiger**

Professor de Steiger was part of a team of three chief investigators that was awarded an NHMRC Project Grant for 2015–2017 entitled, 'Towards a rational strategy for osteoarthritis therapy'. (Grant application 1085240.) The amount of funding awarded was \$910,084 over three years, in which a significant proportion of the funding will come to Epworth HealthCare, including the appointment of a research scientist to be based at Hoddle Street. This funding solidifies a very successful collaboration between Prof de Steiger and Professor John Hamilton of the University of Melbourne, who is one of Australia's leading immunologists researching inflammation and related diseases.

## Honouring our partners in research

- Recognising the valuable contributions made from collaborations with research partners, in late 2014 Epworth HealthCare established the Epworth Honorary Research Affiliates. Since its inception, the group has welcomed 20 affiliates and the recognition of these important and productive collaborative efforts is only expected to grow.

One such Honorary Research Affiliate is Dr Lemai Nguyen, who holds an appointment as a senior lecturer with the Department of Information Systems and Business Analytics at Deakin University. Dr Nguyen has taken sabbatical leave from Deakin to undertake collaborative research with Deakin-Epworth Professors Nilmini Wickramasinghe and Mari Botti, and has been based at the Epworth Hoddle Street precinct during her academic study leave.

Dr Nguyen, who has been associated with Epworth since 2012, is working on several projects concurrently in the field of health informatics, which she describes as “using information technology in healthcare — an intersection between medicine/healthcare and IT”.



Dr Lemai Nguyen

“Major projects I’m working on are around understanding how best to introduce and use health information systems,” continues Dr Nguyen, “in particular nursing information systems and other systems that will be used by surgeons as well, so there are different systems, for care delivery and provision.”

An important component of Dr Nguyen’s studies is evaluating the efficacy and value of such systems, once in use.

“It’s not just how to assimilate the system within care provision, but also to evaluate impact of the technology on clinicians, and on Epworth in terms of operational and strategic benefits,” says Dr Nguyen.

Data analytics, she says, is a massive trend at the moment, and another area that Dr Nguyen and the Epworth team are investigating.

“Using information technology in healthcare — an intersection between medicine/healthcare and IT”

“Everyone’s talking about data: generating data with systems and records, what do we do with the data and what it tells you. Then it is whether — and how — we can do predictive analytics to forecast what is likely to happen in the future, and recommend what the best course of action is.”

Working with Epworth till the end of the year, Dr Nguyen says being recognised as an affiliate has given depth to her experience, attending orientation just as any new Epworth employee would, even filling out her ‘Epworth passport’ to learn about the organisation and its values.

“This is my third sabbatical; prior to this I’ve been with other organisations but not all of them had that formal process to make you feel like you’re part of the culture,” she says.

“I was very impressed with all of the steps that Epworth has done to welcome me, including the e-learning and completing the Epworth passport. At first I thought, it’s a formality, but after participating in the process, I actually found it to be really interesting and motivating.”



## Providing patient RELIEF

- For millions of patients worldwide facing major abdominal surgery, a new international trial in which Epworth HealthCare is participating may result in reduced complications and improved recovery time.

RELIEF — a randomised, parallel-group, controlled trial — looks at the effects of a restrictive fluid versus liberal fluid regimen for adults undergoing abdominal surgery, and its effects on disability and mortality following patients for up to one year. In February 2015, Epworth Richmond — the only private hospital in Australia actively recruiting for the trial — had the honour of recruiting the 1000th patient overall for the global trial.

Dr Nicole Tan, site principal investigator, was involved in the trial start-up at Epworth, which included applying for Human Research Ethics Committee approval and training research coordinators Donna McCallum and Althea Barr in the study protocol. Recruitment began at Epworth Richmond in November 2014.

Dr Tan says the trial investigates a particularly important issue with the potential to significantly improve patients' lives.

“Patients undergoing major surgery are given intravenous fluids; however the ideal amount is still unknown,” explains Dr Tan. “Worldwide, doctors have variable approaches to the amount of intravenous fluid given to patients to maintain their blood pressure, compensate for fluid losses and avoid complications of too much or too little fluid.

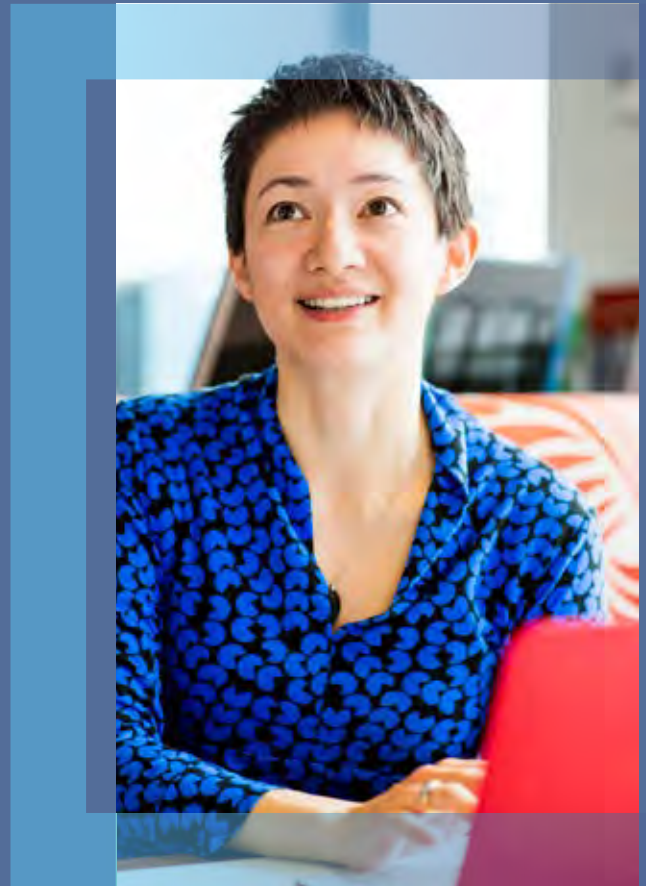
“Previous small trials have shown contradictory results, but there appears to be some evidence that giving less fluid — a restrictive fluid regimen — rather than more — a liberal fluid regimen — results in fewer postoperative complications.

“This large, randomised international trial of 2800 patients aims to provide definitive evidence to answer this question.”

This is the first large perioperative trial at Epworth to involve the teams in admissions, operating theatres, post-anaesthetic recovery and intensive units, the surgical wards and Epworth's Clinical Trials and Research Centre.

Dr Tan, who works alongside anaesthetists and surgeons, is responsible for recruiting patients and liaising with the parent research team, ensuring good research practices are maintained throughout the process.

“Clinical outcomes research demands interdisciplinary teamwork and cooperation, and the degree of support from staff, doctors and the patients has been a delight to experience”



Dr Nicole Tan

She says it's been a challenging process, but “well worth the effort”, and has provided a framework for subsequent trials of this nature, such as BALANCED and RECOVER.

“It is extremely rewarding to be involved in this type of research, where trials are designed to find answers to specific, important clinical questions,” says Dr Tan. “Clinical outcomes research demands interdisciplinary teamwork and cooperation, and the degree of support from staff, doctors and the patients has been a delight to experience.”

### Epworth Prostate Centre

The Australian Prostate Cancer Research Centre at Epworth is one of three integrated centres established by the federal Department of Health (DoH) in 2013. The centre has consolidated its programs and advanced its research to a higher level, as evidenced by a number of important research papers published within the last 12 months, including a report on tracking the origins and drivers of subclonal metastatic expansion in prostate cancer, published in *Nature Communications*.

The Epworth Prostate Centre has continued to build upon its international profile, as demonstrated by its position in a number of international genomics consortia. Further, the centre has had excellent success in using the DoH funding as leverage for gaining additional project funding, with eight competitive grants successfully obtained during the past year. These grants are being used to expand the breadth and depth of research projects established with the DoH funding.

The centre's weekly multidisciplinary team (MDT) meeting hosts more than 25 health experts and research scientists from various specialties to discuss the optimal management of individual prostate cancer patients. Personalised treatment plans are established for each patient, with reference to disease state, psychological and emotional needs, and trial suitability, including sequencing-based Phase I studies. The centre's Translational Research Clinic operates alongside the MDT meetings and provides advanced prostate cancer

patients with access to a range of specialised support services, including a nurse, psychologist and general practitioner all with prostate cancer expertise.

### Ovarian Cancer Research Foundation at Epworth

This initiative is a collaboration between Epworth HealthCare and the Ovarian Cancer Research Foundation (OCRF). Significant strides have been made in understanding epithelial ovarian cancer, which is the most lethal of all gynaecological malignancies, with ~70% five-year mortality. The development of recurrent, platinum-resistant disease is common, and emerging therapies (eg. PARP inhibitors, anti-VEGF antibodies) have delivered mixed results in clinical trials.

The OCRF collaboration has been recognised in three scientific papers where Epworth is involved and a research laboratory in the Hoddle Street precinct has been set in the past 12 months.

Significant progress has been made in consolidating a biobank of ovarian cancer biopsies, along with some very promising research findings using an inhibitor of a serine protease known as sitagliptin. This has been established in a mouse model of ovarian cancer, with the intention of starting a clinical trial in ovarian cancer patients in the coming months. Sitagliptin is an FDA-approved medication for the treatment of type II diabetes and has few side effects, so its application to ovarian cancer is very exciting and holds great promise.



### Professor of Surgery Richard De Steiger receives NHMRC grant

Professor Richard de Steiger is part of a team that has been awarded a significant grant from the National Health and Medical Research Council (NHMRC) for its project 'Towards a rational strategy for osteoarthritis therapy'.

Osteoarthritis is the most common form of arthritis and causes disability and chronic pain. There is a real need for effective therapy to adequately deal with disease progression and pain before the patients gets to the joint replacement stage.

The project team is headed by Professor John Hamilton of the University of Melbourne, and includes Dr Andrew Cook and Prof de Steiger. The grant — \$910,000 over five years — will expand research begun by Prof Hamilton into an inflammatory cytokine, that is increased in the synovial tissue of patients with osteoarthritis. An animal model has shown that suppression of this inflammatory mediator with a targeted therapeutic antibody rapidly abolished existing arthritic pain and suppressed disease development.

Epworth HealthCare patients undergoing total knee replacement for osteoarthritis will be offered the chance to participate in the trial and synovial tissue will be collected along with tissue from control patients.

### TAC spotlights Epworth research projects

Research projects being undertaken by Epworth through MERRC (Monash-Epworth Rehabilitation Research Centre) are attracting attention and promising major savings to the Transport Accident Commission (TAC).

The two studies, part of the neurotrauma research program funded by ISCR (Institute for Safety, Compensation and Recovery Research), a research institute funded by the TAC, focus on tracking and improving the outcomes of traumatic brain injury patients. The studies were selected as part of a review process, justifying the existence of ISCR going forward, for their significant impact either in terms of worldwide recognition or in terms of reducing costs and predicting outcomes for patients.

One of the projects, a longitudinal study, has been in place since the late 1980s, with funding from the TAC for the past 20 years. Covering such a long period delivers comprehensive findings on TBI patients over a significant amount of time.

Director of MERRC Professor Jennie Ponsford, who is leading both projects, says the longitudinal study aims to identify the functional difficulties experienced by TBI patients throughout their recovery journeys. Their current database holds more than 2440 patients.

"We follow up all the head injury patients at one, two, three, five, ten and now 20 years after injury," she says. "We look at whether they're getting back to work or study, whether they need any help with their daily activities, what sort of relationships they form and their psychological adjustment, as well.

"It's a big, collaborative study and we've created a large body of research which has informed the rehabilitation community around the world," she says.

The second project to gain attention is an intervention study, focusing on early treatment during PTA — post-traumatic amnesia. This is a phase that affects traumatic brain injury patients after injury in which they experience a period of disorientation and confusion, with the inability to lay down new memories.

The study aims to better understand the process of assessing patients in PTA and evaluate the effectiveness of therapy during this period.

"It's the first time we've really worked with therapists doing experimental therapy in the context of our everyday work," says Prof Ponsford. "At Epworth it's quite exciting for the head injury team to have achieved that.

"It's promoting us as a centre of excellence — that's what all our research is designed to do."

### Epworth researcher receives prestigious award

Dr Gershon Spitz, a member of the research steering committee formed by the Transport Accident Commission and the Monash-Epworth Rehabilitation Research Centre, has been awarded a prestigious Brain Foundation Award for his research 'Return of memory after Traumatic Brain Injury'. Dr Spitz accepted the award from the NSW Governor, Dame Marie Bashir AD, CVO in Sydney.

Dr Spitz has conducted research in the field of traumatic brain injury for over five years. His PhD project used novel MRI techniques, such as diffusion tensor imaging and susceptibility-weighted imaging, to examine the neuro-anatomical correlates of cognitive impairments following traumatic brain injury.

Dr Spitz has published over ten peer-reviewed papers in leading rehabilitation, neurotrauma, and psychology journals. Dr Spitz has continued to actively write publications, mentor students within his research group, and supervise honours and doctoral research students. He works closely with Professor Jennie Ponsford, Director of the Monash-Epworth Rehabilitation Research Centre.

### Introducing the Epworth Knowledge Bank

Each year Epworth HealthCare produces numerous publications covering the range of exciting work being undertaken across the organisation. The Epworth Knowledge Bank (EKB), launched in June this year, was created to ensure these materials are readily available to our staff and clinicians, as well as the wider medical community and the general public.

The EKB is an online digital repository, which is an electronic database holding all Epworth publications in one location, used to store Epworth's knowledge assets.

The materials available are categorised into two areas: academic/clinical and corporate, are searchable by author, date, title and subject, and are accessible across the intranet and internet.

The EKB publications include journal articles, book chapters, reports, conference papers, theses and dissertations, and recordings such as Grand Rounds and teaching clips.

Since the EKB was launched, its profile has grown both within Epworth and amongst our peer clinicians and researchers around the world. We have had hits from the US, UK, Canada, Germany, Belgium, Netherlands, Finland, China and Japan.

Back home, the benefits for our staff have been reflected in comments such as "I can see what great work we are doing", and "now I know who to contact for help with my paper". As EKB grows, it will become a tremendous knowledge asset for our clinical, education and research activities.

### Varian partnership promotes research excellence

On Friday 24 April, Epworth HealthCare and Varian Medical Systems signed a memorandum of understanding (MoU), solidifying the relationship between the two parties and recognising Epworth's international standing as a research group.

The agreement sees Varian committing funding for the next five years to be used exclusively by Epworth in conducting research in cancer and other non-malignant conditions where radiation therapy can be beneficial. The research applications will be administered by Varian's Global Research group, and a competitive review process will be undertaken for their approval to fund the work.

The fund will underwrite some of the future research to be performed at Epworth, including Epworth Radiation Oncology Research Centre, where high-end technologies used in clinical trials are hoped to have a material impact on patient outcomes. The global support of a vendor such as Varian Medical Systems provides the patients of Epworth early and preferred access to new technology, international collaboration opportunities and now funding to support this critical research work.

Currently, Epworth Radiation Oncology (ERO) houses a suite of Varian technology, including stereotactic-capable linear accelerators TrueBeam STx and Novalis Tx systems; and Real-Time Position Management™ (RPM) and Calypso® 4D localisation systems.

In addition to currently used techniques, ERO is also exploring new and innovative ways of using existing Varian technologies for future research projects. Some examples that are currently being investigated include the use of stereotactic irradiation to treat essential and Parkinsonian tremor; and the use of Calypso® in the localisation and treatment of breast, renal and pancreatic cancers.







# Research Week success

- Always a highlight in Epworth HealthCare’s event calendar, this year’s Research Week was held from 15–19 June 2015, and offered an exciting program of events to showcase Epworth’s research projects, with the annual Research Dinner held on Thursday 18 June at the Melbourne Cricket Ground.

The Epworth Research Institute promotes and funds health-related research across Epworth, with the goal of discovering new and better ways to treat our patients and offer them access to leading-edge research.

The Research Week program kicked off on Monday 15 June with an opening session hosted by Group Chief Executive Alan Kinkade. The first official talk of the day was led by keynote speaker Dr Scott Johnson, director, research and strategic collaborations from Varian Medical Systems. The theme of Dr Johnson’s talk was ‘Next Generation of Research’.

Later in the day, the first poster viewing session was held, where attendees were able to view the 43 research posters that were submitted this year — our biggest number yet. Research staff were on hand to discuss their projects and answer any questions about their research.

Professor Mari Botti, Chair in Nursing, presented the Nursing Research Symposium on the Tuesday discussing a systematic approach to the management of postoperative pain. She was joined by Susan Hunter and Joanne McDonall, PhD students.

The Wednesday saw a busy day of events, with three sessions scheduled across the morning. The Cardiac Services

Research Forum was led by Professor Andrew Tonkin, head of the Cardiovascular Research Unit at Monash University, covering the topic of ‘Frontiers in lipid management’.

Later that morning an invite-only session was held for Epworth Medical Foundation benefactors, led by A/Professor Gavin Williams, physiotherapist at Epworth Richmond. Oncologists Dr Ross Jennens and Dr Jason Lickliter gave the Research Grand Round on ‘Translational research in oncology’.

On the Thursday Dr Peter Farnbach spoke about mental health research in a session held at Epworth Camberwell, presenting ‘Minimal invasive brain stimulation with a focus on TMS’. That evening, the Research Week Dinner was held at the Melbourne Cricket Ground with a presentation of the Epworth Research Grants for 2015, and keynote speaker Sir Gustav Nossal, FAA Professor Emeritus, the University of Melbourne, speaking on why it is important for Epworth to conduct research.

Finishing off the week, ‘Resources to support your research’ saw a team of Epworth speakers present a Q&A session on how to conduct your research at Epworth and what resources are available to help facilitate the research.

## Epworth Research Institute Research Dinner

The Epworth Research Institute Dinner was held on Thursday 18 June at the Melbourne Cricket Ground’s Olympic Room, attended by invited guests including ERI grant applicants, poster presenters, award honourees and Epworth Research Week invited speakers.

Keynote speaker for the evening was Sir Gustav Nossal, FAA Professor Emeritus, the University of Melbourne.

“Gustav absolutely stole the night and left everyone quite inspired,” says Gerlinda Amor, research governance officer at Epworth Research Institute. “The dinner was a resounding success with poster and grant winners thrilled to accept their awards.”

Epworth’s Professor John Catford started off the ceremony, introducing the Epworth Research Institute grant awards, named after influential Epworth clinicians. Two new honourees

were announced this year — Dr Murray Johns and Professor Jack Cade — introduced by Professor Richard Gerraty and Dr Julian Hunt-Smith, respectively.

This year also saw the announcement of a new series of Achievement Awards for research at Epworth, given at the end of the awards announcements at the dinner. These included the Epworth Early Career Researcher of the Year awarded to Dr Niki Tan, the Epworth Research Leader of the Year awarded to Professor John Olver, the Clinical Trial of the Year awarded to Associate Professor Tony Walton and the Epworth External Research Funding Award to Professor Richard de Steiger.

Congratulations to all recipients. See the full list of recipients on page 74.



Research posters on display at Research Week



Group Chief Executive Alan Kinkade with Professor Sir Gustav Nossal



## FOCUS ON EDUCATION

Supporting our team  
to be their best.

### Education initiatives across our sites

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

#### Epworth Richmond Nursing Education

For the 2015 academic year, Epworth Richmond Nursing Education continues to support nurses to undertake postgraduate study in order to meet additional workforce requirements. Our orthopaedic program, offered in conjunction with Australian Catholic University (ACU), was accessed by registered nurses from The Austin Hospital and St Vincent's. We joined the ACU/Royal Melbourne Hospital neuroscience program for the 2015 academic year to enhance our neuroscience team in preparation for the extension of this service with the redevelopment at Epworth Richmond. Oncology and palliative care postgraduate studies is also now being offered in conjunction with the University of Melbourne.

The Introduction to Specialty Practice Program, extended beyond critical care areas in 2014, is now open to participants across Epworth and, as a result, we have doubled the number of intakes to meet the increasing demand.

Epworth Richmond education also continues to collaborate with the simulation team to provide interprofessional education on critical emergency procedures for the Critical Care and Anaesthetic Institutes and critically care-trained nursing staff at Epworth.

#### Epworth Rehabilitation and Mental Health

The rehabilitation and mental health division supports its staff to be their best by receiving 299 applications from nursing, allied health, administration and hospitality staff in 2014/15. In total more than \$51,000 and 3205 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 1000 hours.

With a large number of staff either undertaking or considering postgraduate studies a research group was developed to promote collaboration between Epworth staff involved in research and quality projects and assist navigation through varying stages of the research process.





The division continued to support graduate nurses during their transition into the workforce, with 20 graduates rotating across all four of Epworth's rehabilitation sites and into mental health for the first time in 2015.

#### Epworth Freemasons

At all levels of education from undergraduate, graduate and postgraduate studies including nursing and allied health, Epworth Freemasons has continued to support and develop staff over the 2014/15 financial year. Throughout the 2014/15 period Epworth Freemasons has supported 20 registered nurses, 13 registered midwives and seven enrolled nurses through their graduate programs. Epworth Freemasons this year has commenced 12-month perioperative rotations.

This year we partnered with Latrobe University for the postgraduate midwifery course. Epworth Freemasons continues to promote opportunities for simulation through the EMER (Epworth Maternity Emergency Response) program run for midwives that collaborates with clinical education and the Freemasons maternity education team.

Several of our staff are completing the Introduction to Speciality Nursing course in the areas of intensive care and oncology to develop their skills and knowledge and transition into postgraduate studies.

#### Epworth Eastern

Epworth Eastern has maintained its strong association with Deakin University for both the perioperative and critical care courses. Staff have continued to undertake the Postgraduate Certificate of Nursing Practice (cancer and palliative care stream) with the University of Melbourne, and for the first time we have staff undertaking orthopaedic postgraduate studies with Australian Catholic University (ACU).

For staff development, this year has seen the introduction of monthly Insitu Deteriorating Patient Simulations in all wards and departments — including across all areas for nightshift. Run by our intensive care unit (ICU) educator with the support of the simulation team, these have been very well received by all staff and have assisted in equipping staff to provide high-quality healthcare to all our patients.

Epworth Eastern continues to support the increasing numbers of nursing students completing their undergraduate placement requirements, as well as those transitioning into the workforce from undergraduate training. 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.

Recruitment into graduate programs for both registered and enrolled nurses in 2014 and 2015 has continued to attract and exceed expectations in both numbers and quality of candidates. This is a testament to the strong commitment Epworth — and Epworth Eastern — provides in the support and development of its future workforce.

### GP Liaison: connecting GPs with Epworth

Epworth HealthCare's GP Liaison Unit was established in 2000 to provide a high-quality Royal Australian College of General Practitioners (RACGP) accredited education program for general practitioners (GPs), improve communication between Epworth and GPs and raise awareness of the services and medical expertise available at Epworth. This leads to improved health outcomes for patients and in turn builds loyalty and brand recognition, with the aim of increasing referrals to our specialists and admissions to Epworth.

Epworth's GP continuing professional development (CPD) education programs are tailored specifically to the educational needs of GPs. The topics are selected by GPs themselves through regular questionnaires which help identify learning gaps in the GP community.

Appropriate Epworth specialists are then selected to provide high-quality and up-to-date education. All education meetings are accredited by the RACGP.

By participating in Epworth's comprehensive 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, all leading to enhanced patient care.

In 2014/15 the GP Liaison Unit delivered 96 education meetings to 2079 GPs using a variety of educational modalities, which provided 250 specialists across the Epworth group with promotional opportunities. These educational activities include:

- GP clinic lunches
- GP evening meetings
- Lunch and Learn webinars
- RACGP accredited CPR training
- Full day Category 1 education days.

General practitioners have assessed Epworth's GP education activities as relevant and high standard as part of the GP needs assessment survey conducted in August 2014. A total of 1200 GPs were surveyed with the data being used to identify priority topics for the Epworth 2015 GP education program and to improve communications with GPs.

### Technology connects us to GPs

This year the GP Liaison team implemented ways to use digital technology to better connect GPs with Epworth HealthCare.

Feedback through Epworth's 2014 GP Needs Assessment and GP Advisory Group highlighted a demand for more clinically relevant information in a format that was timely and easily accessible.

In response, the team launched a new website — GP Update (epworthgp.org.au). The site is an interactive and informative resource for GPs in metro Melbourne, regional Victoria and beyond. It provides GPs with access to clinically relevant articles, education resources and an opportunity to discuss clinical issues with their peers and Epworth specialists.

Since launching earlier this year, website visitor rates have increased by 50 per cent each month, and clinical articles consistently rank as the top visited pages.

GP Liaison also uses its electronic newsletter and social media channels to further connect with GPs.

### We celebrate our talented graduates

In January 2015 Epworth HealthCare held a graduation ceremony for 136 enrolled nurses, registered nurses and midwives who participated in graduate programs in 2014.

Highlights of the ceremony included a graduate from each division giving a personal story of their graduate year, and the announcement of the winners of the Epworth HealthCare awards for Graduate Enrolled Nurse of the Year, Graduate Registered Nurse of the Year and Graduate Midwife of the Year.

Divisional winners received \$200 while the overall winner in each category received \$500 from sponsor First State Super towards their ongoing continuous professional development.

#### Divisional Graduate Enrolled Nurse of the Year winners:

<b>Krystal Farkas</b>	Epworth Eastern
<b>Lesley Bowen</b>	Epworth Freemasons
<b>Kai Hamilton</b>	Epworth Richmond

#### Overall Graduate Enrolled Nurse of the Year:

<b>Krystal Farkas</b>	Epworth Eastern
-----------------------	-----------------

#### Divisional Graduate Registered Nurse of the Year winners:

<b>Anna Imbesi</b>	Epworth Eastern
<b>Helen Marinakis</b>	Epworth Freemasons
<b>Elle Pirrie</b>	Epworth Richmond
<b>Lauren Richardson</b>	Epworth Rehabilitation

#### Overall Graduate Registered Nurse of the Year:

<b>Elle Pirrie</b>	Epworth Richmond
--------------------	------------------

#### Graduate Midwife of the Year:

<b>Sarah McCluskey</b>	Epworth Freemasons
------------------------	--------------------

# Perfecting the patient experience

- **Getting back to basics — it's a theme that resonated with Epworth excellence coaches Jeynelle Broatch and Jill Chapman when they attended two conferences in the US this year on enhancing the patient experience.**

Jeynelle and Jill, who work in Epworth Rehabilitation, won scholarships through the Epworth Medical Foundation, and requested that they use their funds to attend a Studer conference in Washington, DC. When they found out they could also join a Cleveland Clinic conference that was free for international delegates, they looked at that as a happy bonus.

“The timing worked out really well — we were on a win there,” says Jeynelle. “It was very much what we wanted to see anyway, so it worked out great.”

Attending both the Studer and Cleveland conferences meant Jeynelle and Jill were exposed to two different approaches to enhancing and improving patient care, with valuable take-homes from both.

“The Cleveland conference was more about ‘why’ in terms of patient experience — why health professionals work in this area and what that means for the patient’s outcome,” explains Jeynelle, “and the Studer conference was about how to achieve that kind of culture.”

Presenters used personal experience to demonstrate their messages, something that was “really powerful for the audience”, says Jeynelle. And a key message that really hit home was just how much some of the most basic patient care techniques had been neglected over time across the industry.

“A lot of speakers mentioned the importance of touch and the importance of smiling — really basic things that take no extra time, effort or money,” says Jeynelle. “It’s a simple change in behaviour that’s required from staff, and that’s something that can be implemented straight away across the board without real difficulty.”

Practical tips were on offer to support this move: “basic things, like when you are talking to a patient, sit down,” says Jill, “because the perception is that you have been there longer if you sit and talk to them.”

These were lessons that reinforced the importance placed on the patient experience, something Epworth makes a leading priority.

“It’s almost a given that patients expect a high standard of care, good diagnostics, skilled and qualified surgeons,” says Jill. “But now they look beyond that. Now it’s around the experience — the care and compassion.”



Jill Chapman (left) and Jeynelle Broatch

These were lessons that reinforced the importance placed on the patient experience, something Epworth makes a leading priority

## Webinars provide GPs online education

Epworth's GP Liaison webinar series educates GPs on their lunch break. The webinars, introduced in 2014 and extended from monthly to fortnightly in early 2015, have proved increasingly popular as GPs embrace online education.

The one-hour sessions titled 'Lunch and Learn' run from 1-2pm and enable GPs to log on from the comfort of their office or home to listen and participate in an interactive, virtual education sessions with leading Epworth specialists.

Epworth's GP education programs are specifically tailored to the educational needs of GPs, and topics are selected by GPs themselves through regular questionnaires which help to identify learning gaps in the GP community.

Appropriate Epworth HealthCare specialists are then selected to provide high-quality and up-to-date education.

All education meetings are accredited by the Royal Australian College of General Practitioners (RACGP) and each webinar carries two (Cat 2) CPD points.

GP Education Coordinator Fiona Scoullar runs the webinars and says the popularity of the series reflects GPs' desire to have access to convenient, compelling educational programs.

"The online education has greatly extended the reach of the program with GPs participating, with some from as far away as Western Australia, South Australia and New South Wales. Many of the GPs participating in the online program are new to the industry, and we hope that by providing online education to these GPs we will be able to introduce them to VMOs who work at Epworth, thereby influencing their referral patterns."

During a webinar, interaction is encouraged between the presenter and attendees in the form of a real-time Q&A forum. There is also functionality for polls and surveys during the presentation. For those who can't attend at the scheduled time, webinars are recorded and added to a library of on-demand education that GPs can access at their convenience.

Feedback from attendees and presenters using the service has been overwhelmingly positive.

Orthopaedic surgeon Mr Austin Vo presented a webinar on the topic of common shoulder problems, and says he was pleased with his experience.

"I really enjoyed the opportunity to present my webinar and believe it has helped improve general practitioners' knowledge. It has potentially also generated patient referrals," Mr Vo says.

## Providing best practice in oncology care

After the success of the breast cancer rehabilitation pilot program, established in 2013, Epworth's Catherine Carracher and Jo Goodridge decided they would like to expand the service to other areas.

Catherine and Jo, pain and oncology services manager and allied health manager for Epworth Rehabilitation respectively, received the Susan Harris scholarship through the Epworth Medical Foundation, undertaking a study tour in the US and UK in April looking at best practice for oncology rehabilitation.

"Survivorship programs are relatively new in the rehabilitation setting," says Catherine. "A lot more hospitals are starting to look at how the patient pathway can be completed within their own environment, and Epworth is no different."

On their tour Catherine and Jo visited acute and rehabilitation facilities to check out existing programs that offer patients a service beyond their initial oncology treatment and cater to their ongoing needs in recovery.

"It opened our eyes to the full spectrum of patient care available," says Catherine. "We've had patients saying, 'hang on a minute, I've finished treatment but I'm still not well, I've still got fatigue and I can't go back to work'. They're quite lost and feel abandoned," explains Catherine.

Oncology rehabilitation programs address those needs, providing patients with guidance on diet, exercise, physical changes, managing fatigue, and even 'prehabilitation' — educating patients about what to expect early on in their journey, something that Catherine and Jo took away from their trip as an idea worth exploring here at Epworth.

"We're fortunate to have all Epworth acute hospitals offering oncology treatment whether it be surgical or adjuvant therapy, so we've really got a ready-made patient pathway that we can tap into and extend," says Catherine. "It's quite exciting to look at concepts thinking there's not a lot we'd need to make these happen."

"The scholarship provided us with the evidence to say we're on the right track and it gave us the opportunity to work with other hospitals in order to set up research partnerships in the future."

## 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:

- 'Reasonable Cardiology' Cardiac Sciences Clinical Institute Symposium
- Robotic-Assisted Partial Nephrectomy Workshop 2015
- Fifth Epworth Clinical Institute of Obstetrics & Gynaecology Symposium
- Perioperative Medicine Symposium.

## Grand Rounds

Under the guidance of Professor Richard Gerraty, Epworth Victor Smorgon Chair of Medicine — Monash University, the 2014/15 Grand Rounds calendar saw a wide range of presentations from both Epworth and guest speakers. Monthly research presentations continued in 2014/15, keeping the broader Epworth community informed about clinical trials and support available for conducting research at Epworth. Epworth Hawthorn and Epworth Cliveden began joining Grand Rounds via videoconference, expanding the Grand Rounds' audience beyond Epworth Richmond, Epworth Eastern and Epworth Freemasons. It is important to acknowledge the contribution of all presenters in 2014/15 to the continued success of Grand Rounds.

## Clinical education and simulation

### Harvard leaders visit Epworth for simulation course

On 3–6 February 2015, The Institute for Medical Simulation (IMS) Harvard, along with Epworth Clinical Education and Simulation, presented a four-day course for educators who teach clinical, behavioural and cognitive skills using health professional simulation.

The course drew from the disciplines of aviation, healthcare, psychology, experiential learning and organisational behaviour to explore a variety of simulation-based teaching methods. The methods are applicable across the health-profession educational spectrum, including undergraduate and graduate medical, nursing and allied health domains.

Topics included:

- Building a challenging and safe learning environment
- Utilising effective debriefing techniques and avoiding ineffective ones
- Preparing, building, conducting and debriefing high-fidelity simulation scenarios.

The course was facilitated by the international team from the Centre for Medical Simulation, Harvard, and directed by Dr Dan Raemer, senior director of clinical programming, Centre for Medical Education, and Associate Professor of the Harvard anaesthesia department. Dr Walter Eppich, Associate Professor of paediatric and medical education at the Children's Hospital of Chicago, also led the course.

There was a diverse group of participants including Epworth staff, neonatologists, emergency physicians, anaesthetists, nurses and allied health participants. Epworth Board members and executives were represented at a welcome reception for the visiting faculty and participants on the first evening.

Participants said the intensive program was extremely valuable.

Dr Ron Sultana, director of emergency medicine at Epworth Richmond, says: "It was an interactive program that continuously built on each session to culminate into a final day of putting all the skills together by creating, participating and evaluating our own scenarios and sessions.

"The skills learnt are not only applicable to the simulation environment for education and patient safety but also in day-to-day clinical and administrative roles."

The international faculty congratulated Tess Vawser, director of clinical education and simulation, and the simulation team on creating a successful course environment.

Epworth is exploring opportunities to enhance its relationship with the CMS and its faculty, and is establishing an annual event to further our knowledge of simulation methodology.

## Epworth values its partnerships with education providers including:

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

## Our students — key statistics

### Increase in clinical placement student days:

	2011	2012	2013	2014	2015	% Increase 2011–2015
<b>Nursing</b>	5,016	6,930	14,187	18,815	20,363	306%
<b>Medicine</b>	1,956	2,641	4,303	4,265	4,246	117%
<b>Allied Health</b>	1,947	1,947	2,630	2,582	2,645	36%
<b>Total</b>	<b>8,919</b>	<b>11,518</b>	<b>21,120</b>	<b>25,662</b>	<b>27,254</b>	<b>206%</b>
<b>% Increase</b>		<b>29.1%</b>	<b>83.4%</b>	<b>21.5%</b>	<b>6.2%</b>	

## Wealth of lessons for Epworth nurses

- Epworth nursing staff visited the prestigious Cleveland Clinic in the US in March 2015 as part of a two-week development experience, funded by donations from the Epworth Medical Foundation.

The trip saw eight nurses from across our sites along with Sheila Daly, director of clinical and site services at Epworth Brighton, head to Cleveland to participate in a two-week leadership and observational experience specifically designed for Epworth. Each nurse learned about the Cleveland philosophy and spent time in the unit or area of their interest with the goal of delivering a comprehensive quality improvement project, once back at Epworth. The focus of the project will be based on what they learned from their experience.

The nurses met and worked closely with Cleveland staff to understand how they function to provide clinical excellence. Sheila says she was impressed with the hospital experience as a whole and she was interested to see so many similarities with Epworth. The Cleveland model mirrored very closely Epworth Excellence, she says.

Epworth Richmond's Amy Bellomo and Marnie Price say they were excited to learn from a globally recognised, high-profile name in healthcare. "They've got such a world-class reputation, so we wanted to know how we could bring that back to our hospital," says Amy.

Both found, however, it wasn't so much the big picture that gave clues as to the clinic's success, but the smaller touches in everyday patient care that really stood out.

"They had lots of little ideas that work really well," says Amy, "especially the way they communicate with the patients. Even in the bathrooms, if the cleaner had cleaned the bathroom they left a little card with their name on it — little things like that."

"Service recovery, that's something that they do really well," adds Marnie. "They teach their grads from the get-go exact wording and how to talk to a patient so a situation like a complaint doesn't escalate. They reduce their complaints a lot by doing that, which I really like."

After hearing from the course attendees, Cleveland Clinic staff were, in turn, impressed by Epworth's model of care.

"By the end of the two weeks, they were saying we are quite an innovative hospital and we're quite up to date with everything that they're doing as well," says Amy.

"They are Epworth, just on a bigger scale," says Marnie.

"I think that we're definitely on par with what the Cleveland Clinic does. We don't have the resources that it does, but in terms of moving forward and looking at what the patient experience is and how nurses deliver care, I think we should be proud of what we've achieved."



Epworth nurses at the Cleveland Clinic

## Students at Epworth are offered a wide range of disciplines in which to study

Medicine	Speech pathology
Nursing	Exercise physiology
Physiotherapy	Dietetics
Midwifery	Paramedicine
Occupational therapy	

## Nursing undergraduate students

With over 20,000 placement days offered to undergraduate nursing students from 13 different education providers, Epworth facilitates many different models of clinical placement. Some students may be here for a 'block' placement for three to four weeks, while others may adopt a more flexible placement model where students will cover 20 placement days over one semester. Our fellowship students from both the Collaborative Clinical Education Epworth and Deakin (CCEED) and Nursing Education Collaboration Holmesglen Epworth (NECHE) programs return for all of their placements throughout their training.

## CCEED and NECHE Fellowship Programs

The Collaborative Clinical Education Epworth and Deakin (CCEED) and Nursing Education Collaboration Holmesglen Epworth (NECHE) programs are popular and sought-after fellowship programs which enable students to spend three years undertaking their placements at Epworth. Students celebrated the completion of their respective fellowships during ceremonies held in December.

## Medical students

The medical undergraduate program has cohorts of third-year and final-year medical students from both Monash University and the University of Melbourne undertaking their placements at various sites across Epworth. These students do rotations across general medicine, general surgery, cardiology and respiratory medicine, gastroenterology/renal/urology, women's health rotations, emergency and intensive care.

## Doctors in training

Epworth has a significant Doctor in Training program with 29 posts coordinated by the academic and medical portfolio. Fourteen of those registrar posts are partly supported with \$100,000 per annum grants from the Specialist Training Program (STP) that contribute to ensuring registrars are available to discipline groups at Epworth Richmond, Epworth Eastern, Epworth Freemasons, Epworth Brighton and Epworth Hawthorn.

These disciplines include oncology, orthopaedics, general surgery, general medicine, emergency medicine, intensive care and rehabilitation. Most posts are employed by Epworth and there are eight posts which rotate from large public health services to provide private health experience to registrars as they continue through their program. These rotational registrars strengthen the relationships between Epworth and Eastern Health, Monash Health, St Vincent's and the Royal Women's Hospital.

## Expo promotes Epworth's nursing opportunities

On 18 April 2015, the Nursing Expo was held at the Melbourne Convention and Exhibition Centre.

More than 3,500 people attended to learn about what Epworth HealthCare has to offer with its registered nurse, enrolled nurse and midwifery graduate programs, postgraduate programs and general employment opportunities.

The Epworth stand was busy throughout the day, with excited visitors taking the time to stop and talk to staff and current graduates to gain a feel for the excellent opportunities we have to offer.

The success of the day would not have been possible without the tremendous work of the education teams and graduates from across all divisions who so generously gave their time and enthusiasm to proudly promote Epworth.

## Library services

The Epworth library continues to integrate with the clinical, research and education activities across the group. Our highest value services are literature searches and article supply, and output has increased by 45% in the last 12 months. In addition we have published seven new online Resource Guides which aggregate subscribed and free books, journals and websites, and enable our clinicians to access best and current evidence in order to deliver the best patient care. In June the library launched the Epworth Knowledge Bank which captures the intellectual output of Epworth, and will help to showcase our work to our peers and a wider health audience. Librarians continue to visit all sites to support and train staff in the use of information tools, and to learn how we can customise our services such as placing key textbooks in wards and departments. We continue to work closely with the Epworth Medical Foundation to purchase books, and are looking forward to delivering our high value services to Epworth Richmond's Lee Wing and Epworth Geelong in the near future.

## OUR COMMITMENT TO QUALITY AND RISK MANAGEMENT

We take pride in  
delivering quality outcomes  
and reducing risk to our staff,  
patients and visitors.

### Our performance measured against the ACSQHC National Standards

Each month Epworth undertakes a review of its performance against one of the Australian Commission on Safety and Quality in Health Care (ACSQHC) National Standards. To date eight standards have been reviewed; below is a brief description of Epworth's performance against these. The remaining standards are still under review.

#### NS 1 – Governance for Safety and Quality in Health Service Organisations

Governance for Safety and Quality in Health Service Organisations was also reviewed as part of the Periodic Review. The final report from ACHS indicated that Epworth satisfactorily met each of the required actions, with some being awarded a met with merit rating. Given these results and the commentary in the final report, the focus for the coming year will be to maintain and build on current processes.

#### NS 2 – Partnering with Consumers

This standard was reviewed in October 2014 when Epworth undertook the Periodic Review phase of the Australian Council on Healthcare Standards (ACHS) Accreditation cycle. The final report from ACHS indicated that Epworth satisfactorily met all four core actions including all nine

developmental actions. Comments from the report supported Epworth's commitment to involving consumers meaningfully in healthcare delivery and evaluation.

#### NS 3 – Preventing and Controlling Healthcare Associated Infections

The role of healthcare workers is essential in the prevention of infection. Improvements have been achieved with all staff members participating in organisational processes, safety systems and improvement initiatives.

Infection control has a program in place that is changed yearly on review of the previous year's results. This year we have shown improvements in hand hygiene compliance and flu immunisation uptake rates, and to date our surgical site infection rates remain lower than the combined rate for other hospitals. Validation of these results can be seen in the continued reduction of our cases of *Staphylococcus aureus* bacteraemia which have decreased from 17 in 2011/2012, to 13 in 2013 and to 11 in 2014.

Infection Control reviews all aspects of its program continually, using internal and external benchmarking and a robust program of networking across state hospitals including site visits. Decisions for change to the program components are implemented only with strong evidence-based research and economic rationalisation.





#### NS 5 – Patient Identification and Procedure Matching

The risk of incorrectly identifying a patient and their required procedure remains high across the healthcare industry. At Epworth we have robust systems and processes aligned with National Standard 5 in place to ensure this risk is minimised.

Robust auditing systems monitor compliance, identify trends and allow for the correction of processes and practices, and the improvement in staff education and awareness. Ongoing vigilance and active work by the Standard 5 committee is required to ensure continued improvements are achieved.

#### NS 6 – Clinical Handover

Clinical Handover has broad application and ready cross-links with other National Standards. Clinical Handover remains as a high risk Standard due to the inherent nature of potential error in human interactions. A range of strategies are in place to reduce and manage this risk. These include documentation of nursing bedside handover, improved

discharge documentation, compliance audits through weekly bedside clinical audits as well as Press Ganey patient satisfaction survey results.

The group clinical handover committee will continue to monitor and refine handover procedures to ensure optimal client safety and quality.

#### NS 7 – Blood and Blood Products

An increased awareness of the value of blood and blood products is helping to raise the profile that blood is a living tissue vital for transplants and that wastage of this valuable resource can be reduced and prevented.

Epworth has commenced producing valuable data which will enable us to track which doctors and which specialties are using blood and blood products. Our goal is to change practice for the use of blood and blood products through awareness and education of our medical staff. Epworth Pathology partner with us and provide resourcing to pursue this project.

### NS 9 – Recognising and Responding to Clinical Deterioration in Acute Healthcare

Ensuring that patients who deteriorate receive appropriate and timely care is a key safety and quality challenge at Epworth. A range of systems have been introduced to better manage clinical deterioration to ensure our patients do not experience preventable adverse events due to their deterioration not being identified or properly managed.

The Standard 9 recognising and responding to clinical deterioration committee focuses on education and support for all staff to ensure that effective assessment, early intervention and timely escalation of care is always provided to achieve optimal patient outcomes. End of life care management will also be a focus for 2016 and beyond to ensure the delivery systems we have in place work alongside those for recognising and responding to clinical deterioration.

### NS 10 – Preventing Falls and Harm from Falls

An increase in reporting of falls in 2014 indicates an improving safety culture at Epworth. A decrease in falls with harm rate also indicates improvements in the implementation of preventative strategies, compliance with hourly rounding and the introduction of bedside clinical handover enabling patients to be involved in their care plan.

To sustain the reduction in falls and falls with harm the group falls and divisional falls committees are fostering the commitment of all staff to a 'no harm culture' at Epworth.

### Periodic Review highlights our leading approach to care

On Friday 24 October the accreditation final summation for Periodic Review was presented to Epworth staff by the Australian Council on Healthcare Standards survey team.

The 133 actions from National Standards 1, 2 and 3 and mandatory actions from EQulP Standards 11–15 were reviewed and all were assessed as being achieved.

A report was received that articulates what each surveyor evidenced through the scheduled meetings, department visits and evidence folder reviews. All actions were passed, with 128 receiving a 'satisfactorily met' rating and the other five a higher rating of 'met with merit'. The 'met with merit' areas were:

- board governance
- reporting of safety and quality throughout the organisation
- risk management framework
- quality management systems
- nursing care guides.

Additionally, all 17 recommendations from the previous accreditation survey in 2012 were closed. This is a fantastic achievement of which all staff should be extremely proud.

The feedback from the survey team was very complimentary and this is a testament to the commitment and passion Epworth staff show in their everyday work. The survey team commented on the innovation and creativity of the organisation, the obvious patient-centred care and the robust audit and feedback process in place.

We are now well positioned for the next organisation-wide survey in 2016 where 367 actions will be reviewed in all 15 standards.

### Keeping our patients safe from falls

Patient safety indicators are used across all healthcare organisations to measure how well we perform in the delivery of patient care. Falls is one indicator that is constantly monitored to measure our effectiveness in achieving our goal of reducing the amount of patient falls. While some falls cause no injury, others can cause serious harm particularly in the older person.

We monitor the total number of falls involving patients and the number of falls where harm has occurred and measure ourselves against national benchmarks. Our results for this indicator continue to improve with results lower than these benchmarks. The average total falls rate per 1000 bed days for Epworth is 2.6, an improvement from the 2013/2014 rate of 2.7 and lower than the national benchmark of 2.8. Of greater significance is our achievement for falls with harm. The national benchmark is 0.63 per thousand bed days. In 2013/2014 we achieved a rate of 0.32 and this year 0.30.

So what do these outstanding results indicate? The initiatives and preventative strategies that we use work in keeping patients safe. They include:

- hourly rounding and patient safety conversations ensuring patients understand their potential risk of falls
- risk assessment tools
- focus months where awareness activities occur to highlight the importance of falls prevention with our staff.

### Extending our care to paediatric patients

At Epworth, paediatric services are provided at multiple sites, including Epworth Richmond, Epworth Eastern, Epworth Freemasons and Epworth Cliveden. Most paediatric presentations are for elective surgical procedures — Epworth Richmond also admits paediatric patients to the allergy clinic for food challenges and provides paediatric medical services in the emergency department.

In April 2015, a paediatric focus fortnight was held across all divisions to raise staff awareness of the unique, age-appropriate care requirements for paediatric patients and their families. This involved educating staff on many new initiatives, such as the implementation of the Victorian Children's Tool for Observation and Response. This Victorian Department of Health initiative has specifically been designed to facilitate early identification and appropriate escalation of care for paediatric patients.

Staff were provided with educational resources, such as paediatric nursing care guides, videos and library resources to enhance their knowledge of best practice in paediatric care. They participated in practical training sessions, including clinical scenarios involving paediatric basic life support. Staff were also introduced to a new paediatric medication chart specifically designed to facilitate weight-appropriate medication prescribing and administration. Collectively these paediatric patient safety and quality initiatives should ultimately minimise clinical risk and facilitate optimal clinical outcomes.

To enhance the paediatric patient's hospital journey, an Epworth activity book and a stationery kit were introduced. The activity book has been specifically designed for young children to provide diversional activities, such as colouring and word games. These books have assisted to allay children's anxiety about being in hospital, entertain them and make their hospital experience more enjoyable.

### Staff health is a priority

Each year Epworth undertakes a flu vaccination campaign with the goal of achieving an 80% vaccination rate overall. In 2014/15 we exceeded this target with a rate of 83% — with some departments reaching 100%. This is a significant achievement and reflects our commitment to maintaining the safest possible environment for our patients, staff.

Community immunity, or herd immunity as it's also known, describes a form of indirect protection from infectious disease that occurs when a large percentage of a population has become immune to an infection, thereby providing a measure of protection for individuals who are not. By encouraging all our staff to be immunised, we can work towards a level of protection for everyone, especially our patients who trust us to provide complete, safe care.

### Our commitment to reducing risk

Epworth's Risk Management Team realised a number of significant achievements during the 2014/15 financial year, including:

- The Board Audit and Compliance Committee monitoring all group-wide enterprise risks, with in-depth detailed analysis undertaken by the risk management team for each risk to ensure the presence of an appropriate and robust control environment.
- During the October 2014 National Accreditation Periodic Review, Epworth achieved a 'Met with Merit' for the Risk Management and Risk Management Framework aspects of the review.
- The Board of Management approved Epworth's new risk appetite and associated risk appetite matrix. The previous risk appetite review was undertaken in February 2012. The 2015 Risk Appetite review was undertaken by the risk team with input from and consultation with executive and Board standing committees.

Over the past two years, the National Standards of Quality and Safety in Health Care group working parties and focus months have been utilised to assist 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:

- governance
- partnering with consumers
- infection control
- medication safety
- patient identification and procedure matching
- clinical handover
- blood and blood product management
- prevention and management of pressure injuries
- deteriorating patient
- falls prevention.

The RiskMan database continues to be utilised across the group for the reporting and documentation of incidents and hazards and for the management of risks identified on the enterprise risk register. The Medico-legal, Legislative Compliance and Bedside Audit modules that were added to the RiskMan suite of facilities in 2014/15 are operational and are being utilised to improve management and monitoring in these areas.

### Clinical Point Prevalence 2015

Each year Epworth undertakes a clinical point prevalence audit to establish the overall clinical risk and level of compliance to protocols at a point in time. This year a team of 42 staff were educated to conduct the audit in May and 795 patients were interviewed in one day and their medical records reviewed.

There was little difference in the demographic and risk profile between this and previous years. English remains as the predominant language with 92% of patients. Non-English speaking patients make up the remaining 8% with the majority of languages spoken being Italian, Greek and Chinese.

The audit highlighted improvements in the documentation of key risk assessments including pressure injury, falls risk and documentation of intravenous cannulations. The management of the deteriorating patients continues to be well done and this was supported by the recent introduction of the national observation chart across the organisation.

The action plan generated from this audit has since been completed with changes including an update to the medical record form and ongoing staff education on the importance of risk screening and documentation.

## CARING FOR OUR COMMUNITY

Since Epworth was first established in 1920, our aim has always been to have a positive impact on the communities we serve.

### Our corporate social responsibility

Our commitment to local communities, and Epworth's position as a global healthcare leader, has seen us over the years develop and support a vast number of programs and new initiatives to help and support patients.

To better measure the reach and impact of our corporate social responsibility activities, we commissioned a study for the 2014/15 financial year. The study found that more than \$15.7 million of benefit was contributed to our communities in areas including education, research, support for disadvantaged patients, donations, volunteering and pro-bono work.

A couple of our highlights in the past year include the \$6.5 million contribution towards the education of our team and future medical professionals and staff, through a range of leadership programs and scholarships available for staff members, as well as education programs for GPs.

Our \$5.7 million contribution to research allows us to continue our position as a sector leader in medical research, improving the lives of current and future patients through close collaboration between research and clinical practice.

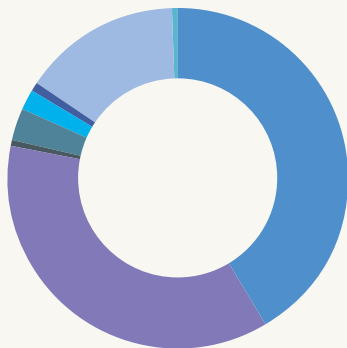
While we consider corporate social responsibility a top-level organisational priority, it is also firmly embedded in our staff culture and the actions of our 4500 staff reflect this on a daily basis.

As a not-for profit group we are in a privileged position to be able to reinvest surplus into our hospitals, ultimately leading to improvements in patient care. This ensures we continue to provide an exemplary level of service and care to our patients, staying at the forefront of medical developments and exploring the latest treatment options available.

The year ahead will see many of our programs develop further and this is an exciting opportunity to strengthen the foundations that our organisation is built on.

A further summary of the community value we offered in 2014/15 is presented within the graph, right.





Epworth HealthCare: community value 2014/15

- |                             |                                    |
|-----------------------------|------------------------------------|
| ● Education<br>\$6,550,106  | ● Additional services<br>\$313,000 |
| ● Research<br>\$5,750,072   | ● Materials donation<br>\$130,000  |
| ● Relationships<br>\$85,800 | ● Volunteer program<br>\$2,350,000 |
| ● Discounts<br>\$499,208    | ● Other<br>\$73,777                |

## A gift from Epworth

- When Prasad Kankanamalage first noticed his daughter Maheesha's face starting to fill out, he thought the 15-year-old was going to look like his adult sisters, back in Sri Lanka. After the swelling took a lopsided nature, he sought medical advice and was eventually given the bad news that the swelling was a tumour.

Oral and Maxillofacial Surgeon Professor Andrew Heggie has operated on many disadvantaged young patients, so he knew Maheesha needed surgery without delay. He saw the tumour double in size during the time he conducted pre-surgery tests and waited for the results.

With the support of Epworth Richmond's executive director, Nicole Waldron, Prof Heggie brought in Anaesthetist Dr Graham Cannon and Registrar Dr Nu Dastaran to do the surgery pro bono in Epworth Richmond's main theatre on 10 February. The tumour was removed, a plate inserted and Maheesha's jaw was stabilised for further reconstructive surgery in future.

Prof Heggie and his team also offered a generous gift to 17-year-old Bradley Bola from Papua New Guinea who underwent major surgery at Epworth Richmond in November 2014.

Bradley was born in 1996 with Crouzon's Syndrome — a disease where some bones of the skull and face fuse and therefore do not grow normally during foetal development.

Bradley was first brought to Melbourne by Rotary Oceania Medical Aid for Children (ROMAC) for treatment in 1998 and then again in 2007. During this second visit, Prof Heggie performed major craniofacial reconstruction at the Royal Children's Hospital, to enlarge and realign Bradley's skull and facial bones.

Together the generosity of many has once again helped transform the lives of Maheesha and Bradley from enormous hardship to an optimistic future

The surgery took approximately six hours and Bradley's mother Nellie stayed with him in his room for four days and afterward with hosts from Rotary for four weeks.

Not only does Prof Heggie's team happily offer their services pro bono, but he also has a knack of gathering support from others around him. His ongoing appreciation is to the management, wonderful theatre and ward staff at Epworth Richmond, and from external pathology provider St John of God.

Together the generosity of many has once again helped transform the lives of Maheesha and Bradley from enormous hardship to an optimistic future.



Maheesha Kankanamalage

## Magpies partnership hits goals

- For trauma patients the journey through rehabilitation can be a long and challenging process. The Epworth HealthCare-Collingwood Football Club partnership, continuing to thrive in its 11th year, was established to engage long-term rehabilitation patients and their families in social activity and communication.

The program acts as a diversion for patients from their injuries and hospitalisation and has involved a number of Collingwood players since its inception. Alan Toovey, Collingwood player since 2007, has been a representative in the program for over four years and has engaged with trauma patients and their families as a popular ambassador for the club.

Alan says his visits to Epworth provide a chance for patients to simply have a bit of time out, chatting about their recovery or offering an insight to their footy allegiance.

“Most people in Melbourne are either footy fans or their families are, and they either love or hate Collingwood so there’s always something to talk about,” says Alan.

As well as visiting patients in the wards, Alan often joins in with physiotherapy in the Epworth rehab gyms.

“I get down to the gyms and join the different groups that they have running, or I just join in and help break up the normal routine, either kicking a footy around or running around cones or going up and down the ladders.

“It’s great to be able to come in and help people that are working pretty hard — they’ve had bad accidents or been quite ill, and it’s good to help them out a bit.”

Patient Tania Davey, an inpatient at Epworth Hawthorn, was beyond excited to meet Alan during one of his ward rounds.

“I’ve been waiting three months to see Alan so I’m absolutely rapt to have met him. It’s so great that he’s doing this and it really made my morning. I’m a massive Collingwood fan,” adds Tania.

As part of the partnership, some of Epworth’s trauma patients and therapists were invited to the 2015 Collingwood President’s Lunch earlier this year, hosted by Eddie McGuire. The lunch was held in the Lighthouse room at Etihad Stadium where our patients, their partners and staff enjoyed a three-course meal, prior to premium seating at the Collingwood vs West Coast match.

“I get down to the gyms and join the different groups that they have running, or I just join in and help break up the normal routine”

A short film was also screened during the event which featured Epworth patient Ben Watt’s journey through rehabilitation. Ben is one of our long-term ABI patients, and an avid Collingwood supporter. The video was filmed at Epworth Richmond Rehabilitation and the Westpac Centre and highlights the work that Alan has done with Ben and other trauma patients from Epworth Rehabilitation.

*[View the video, Ben’s brave journey’ on the news page of Epworth.org.au.](#)*



Tania Davey meets Collingwood Football Club player Alan Toovey

### Looking good and feeling better

2015 sees the Look Good Feel Better (LGFB) program celebrate its 25th birthday, and as one way of marking the great community service it provides, Channel Nine came to film a typical workshop held at the Epworth Freemasons Victoria Parade site in May.

LGFB provides a free service that boosts the self-esteem and confidence of people having treatment for cancer, helping them manage the appearance-related effects of their illness.

Since its inception, a host of volunteers have demonstrated presentation hints and makeup tricks to more than 118,000 people around Australia. Open to women, men and teens who are undergoing chemotherapy, radiation or other cancer treatment, LGFB is supported generously by Australian makeup companies who provide each participant with free skincare and cosmetics to use throughout the workshop and to take home.

Epworth HealthCare is a proud supporter of this wonderful program and hosts workshops at several sites, donating morning tea and refreshments for the participants, their friends and the volunteers. In June, Epworth Freemasons was honoured to receive the LGFB 2015 State Venue of the Year Award, in recognition of the service provided for the program, including venue, catering and car parking for attendees.

Each year there are more than 1000 two-and-a-half-hour workshops held at 180 venues around Australia. Participants are shown practical and creative ways to deal with impending hair loss — and have the opportunity to try on wigs, headscarves and turbans to feel comfortable.

LGFB has many celebrity ambassadors including Patron Kerri-Anne Kennerley who underwent treatment for cancer in 2012.

### Epworth doctors' monkey business

On 16 April 2015, Epworth doctors donated their medical expertise to operate on a different species than their usual patient base.

**Orthopaedic Surgeon Mr Marinis Pirpiris joined Anaesthetist Dr Kevin Moriarty at Melbourne Zoo to help treat arthritis in the zoo's oldest orang-utan, Suma.**

Senior vet Dr Helen McCracken reported that Suma, also known as Kianni, turned 37 in June and was showing intermittent signs of arthritis-related pain since 2013.

"We had been closely monitoring her since then, and over a period of six months saw more frequent episodes of her looking uncomfortable. She was receiving daily pain relief medication orally, using a drug developed for human patients," Dr McCracken says.

Arthritis is a natural accompaniment to ageing in great apes just as it is in humans. Suma has had arthritis in both ankles and her jaw.

Dr Moriarty has been a volunteer at the zoo since 1978 when he attended the birth of Suma and her twin brother Bono — a traumatic birth — as twins are extremely rare in this species.

Epworth pain specialist Dr Saleem Khan, who has assisted with Suma's pain relief, encouraged Mr Pirpiris to share his arthritis expertise with the team at the zoo.

Dr McCracken noted that while zoo veterinarians work with more than 300 species of wildlife, the gorillas and orangutans share so much with humans that medical specialists are called in to advise on procedures involving great apes.

Mr Pirpiris says he felt incredibly lucky to be invited to share the skills he practises on humans with the animal world.

"I felt a sense of exhilaration to be able to help someone of a different species stay really functional."

### Giving a lift to those in need

The Patient Transport Service, established through the Epworth Medical Foundation in conjunction with Epworth Radiation Oncology, sees volunteer drivers work in shifts to pick up patients from their accommodation while staying in Melbourne, and drive them to Epworth Richmond and Epworth Freemasons for radiation therapy treatment.

Driver Lyn Eadie, who has been with the service for two years, currently volunteers her time for about three days a week. Lyn says the driving position was a natural fit, as she was seeking something constructive to do with her time after retiring from work as an occupational therapist (OT) in mental health for 45 years. Years prior, Lyn had a knee replacement at Epworth and valued the work of the OTs that looked after her so much that she wanted to give back to Epworth through volunteering. Lyn says she gets just as much out of the service as the patients.

"Building relationships with patients is the part that's most fulfilling," says Lyn. "You really form a bond with them, driving them about 10km each way to the hospital and back, and you can be an additional support person, in a way."



Patients who are using the service for the first time can feel disoriented and nervous, says Lyn, who helps makes them feel more relaxed by having a good chat on the journey.

Lyn drives a car for the service that was gifted to the Epworth Medical Foundation in the will of a former Epworth patient. She'll pick up a group of different patients, most often from Ryder-Cheshire in Ivanhoe, Victoria, and as the group travels they'll share stories about their own treatment and lives outside of hospital. Lyn says it's this sense of camaraderie that really makes a difference for patients.

If space permits, patients' partners are often invited along for the ride — especially for first-timers — and Lyn says that other members of the group will even volunteer to use public transport instead, to make room for a loved-one.

Being involved in the service is a reward in itself, says Lyn, though she does admit to receiving the occasional bit of extra compensation.

"I must say, I have been invited back to a few homes for tea and have definitely been given a good supply of chocolates!"

### Epworth Eastern winter appeal

In the chilly depths of winter, Epworth Eastern staff rummaged through their wardrobes and cupboards for gently used goods to donate to the hospital's winter appeal, held during June. Staff were encouraged to donate warm winter clothing, jumpers, coats, blankets or non-perishable food items to two worthy causes.

There was a fantastic response with lots of boxes of donations collected in departments across the hospital, with goods going to the following deserving causes:

**UnitingCare Harrison Services**, which supports children, youth and families in crisis and ongoing need, and has a Youth Homelessness team which deals with young people who are alone and facing homelessness.

**Boroondara Community Outreach Program**, which helps adults who have experienced or are experiencing mental illness or issues of social isolation.

The response from staff was impressive and the donations were very much appreciated.



Participants at an LGFB workshop (photo courtesy of LGFB)



## A lasting and precious memento

- During the course of their duties, staff often observe the difficulties experienced by the family and friends of palliative care patients and how important the preservation of memories becomes for loved ones. This feedback led to the development of a memory book project, initiated by Epworth Freemasons Pastoral Care Coordinator Gillian Carmichael, with support from the Epworth Medical Foundation and Business Development Manager Rachel Weston.

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 a lasting memento. Working on the project together can alleviate the sense of helplessness and fear often felt at this time 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.

Since their introduction in November 2014, memory books have been produced across all the Epworth sites and the response from both families and patients has been extremely positive.

“Being able to record conversations about holidays and happy memories with photos is therapeutic for families,” says Gillian. One family used their book as a piece of memorabilia at their loved one’s funeral, recalls Gillian. Another family expressed how well the books balance the needs of people with varying faiths and belief systems.

“Grandparents losing an adult child said it was a great idea and so helpful to have a hospital activity for not only grandchildren losing their parent but for all who came to visit,” says Gillian.

Other hospitals including Cabrini, Bethlehem and the Royal Melbourne Hospital have expressed interest in the books as well, wanting to adapt the idea for their own sites.

“Being able to record conversations about holidays and happy memories with photos is therapeutic for families”

The books are designed with specially chosen symbols which add a depth of meaning to the final product. The dandelion represents a gift to a loved one providing happiness and a promise of faithfulness; the magpie is a symbol of family and the unwavering desire to protect it; the peacock symbolises eternal vision across the past, present and future; and the seasons signify the way life mirrors the changing stages in nature.





# EPWORTH MEDICAL FOUNDATION

We are immensely grateful to  
the generous donors who support  
the work that we do.

In the last 12 months, Epworth HealthCare has undertaken some extraordinary work. We have continued our commitment to truly world-leading research, developed world-class clinical and surgical facilities and given unparalleled opportunities to our staff and doctors to undertake global best-practice education and experience, so that Epworth can continue to provide the very best care to each and every one of our patients.

Philanthropy is critical to Epworth's goal of becoming a truly world-leading research and teaching hospital.

Having the best equipment, located in the best facilities, with care provided by the very best people, and early-access to the best research, is how the best care is given. And this is what philanthropy allows us to achieve.

This year philanthropy has enabled us to build a world-leading hybrid operating theatre; provide specialists groundbreaking stereotactic radiation technology to treat up to ten brain tumours at the one time; and helped to award more than 100 staff scholarships to ensure our staff, their colleagues and, ultimately, their patients, will benefit from the world's most advanced research, technologies and practices.

This year the Epworth Medical Foundation raised a total of \$19 million thanks to the individuals, companies, associations and trusts who value and support our work. In the next few pages you will read how these funds have helped us to develop world-class facilities, foster groundbreaking research, provide cutting-edge medical technology and equipment, and support an ongoing commitment to education, all of which enhance our commitment to provide treatment and care with the greatest compassion.





### Counsel and governance

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)

Dr Philip Williams AM (Deputy Chair)

Ms Cathi Biddick

Ms Evelyn Danos

A/Prof Ron Dick

Mr Brad Harris

Mr Keith Irvine

Mr Alan R Kinkade

Mr Stephen Newton AO

Mr David Rosback AM

Mr Bruce Siney

### World-leading hybrid theatre at Epworth

Thanks to the extraordinary generosity of our supporters, Epworth HealthCare is building one of the most advanced operating theatres in the world. The new Biplane Hybrid Theatre will be equipped with the latest imaging and screening technology, allowing patients to be diagnosed and treated for the most complex conditions within the one space. The high-tech theatre provides increased efficiencies ultimately leading to better outcomes for our patients. Located in the new Lee Wing at Epworth Richmond, it will be used to treat patients who have suffered stroke, aneurysm, brain tumour, cardiovascular disease and other complex neurological and cardiovascular conditions.

### Cutting-edge cardiac catheter equipment

The cardiac catheter laboratory at Epworth Eastern is now equipped with new imaging equipment funded entirely by donations. The Siemens Artis Q is able to map blood vessels using three-dimensional technology and overlay previous studies providing informed imaging. Using less than half the radiation of previous machines, the new technology is safer and more accurate, reducing the risk of complications.

### New ultrasound technology at Epworth Eastern

Surgeons, nurses and anaesthetists at Epworth Eastern are using new ultrasound technology made available through donated funds. The new X-Porte ultrasound machine incorporates beam-forming technology to deliver pinpoint precision of the image, with significantly enhanced resolution on other technology. The technology will be used by surgeons for liver resection, breast surgery, partial nephrectomies, trans-oesophageal and endoscopic probes and inserting intravenous lines.

### Better surgical vision with a Leica microscope

The donor-funded Leica M525 F50 microscope at Epworth Freemasons enables surgeons to perform 'free flap' surgery on patients requiring reconstructive surgery. 'Free flap' surgery is when a section of tissue is detached from its blood supply, moved to another part of the body and reattached to a new blood supply using microsurgery. The Leica microscope facilitates this procedure by providing surgeons with greater visibility and depth-of-range. This technology will be used during breast reconstruction as well as head, neck and uro-gynaecological surgery.

### Getting patients back behind the wheel

Patients undergoing driver re-education as part of their rehabilitation program now have a new Ultra 2 Driver Simulator that mimics real-life driving situations. The Ultra 2 is one of the first of its kind in Australia, and was purchased using funds donated by a former patient. It provides patients with realistic simulation of electronic vehicle control, cruise control, navigational aids and warning devices. Most patients in the Driver Education Program have suffered traumatic brain injuries that cause cognitive and physical impairments. Others are referred following amputations, strokes, diagnoses of multiple sclerosis, and symptoms of dementia or Alzheimer's disease. For many, driving is a critical step in regaining their independence on their road to recovery.

### Equipment to help ventilate when difficulties arise

Life-saving Difficult Airway Trolleys, designed by Epworth's own anaesthetists and perioperative staff, are now being distributed to our hospitals. When patients are critically injured or under anaesthetic, they need help with oxygenation. Ordinarily, this help is given via 'tracheal intubation' which involves placing a tube in the patient's windpipe to open the airway to ventilate the lungs.

However, about 15 per cent of all patients in Australia are considered difficult to intubate. And when intubation fails, the situation can rapidly become life-threatening. The new Difficult Airway Trolleys funded by donors enable staff to quickly, efficiently and systematically respond to difficult intubation, with a four-staged response depending on the patients' needs.



### Educating our staff on the latest techniques

Thanks to generous donors and sponsors to the Epworth Medical Foundation, Epworth provides one of the most extensive educational scholarship programs in the country. The program provides unique opportunities for Epworth staff to attend a conference, undertake an investigation or complete a tertiary qualification. The growth in the program this year is a direct response to patients' satisfaction with the care they have received and their wish to support Epworth and its staff.

This year we awarded 60 scholarships to staff across all divisions and all levels of the organisation. Some successful recipients will use the scholarship to travel to the US or the UK to investigate best practice approaches in other hospitals and bring their learning back to Epworth. Others will attend conferences in their area of speciality, conduct research projects to identify and implement best practice approaches or undertake further studies to continue to develop themselves in their current and future roles at Epworth providing improved safety and patient care.

In addition, eight leading Epworth nursing staff attended the prestigious Cleveland Clinic in the US as part of a two-week professional development experience. All of these scholarships were funded entirely by donations.

### Epworth Research Institute

Epworth HealthCare has a long-standing reputation for innovation and is often among the first in Victoria and Australia to bring new treatments and technologies to our patients. We are proud to announce that Epworth is once again leading the way in exciting new treatments, using equipment and technology funded by philanthropy.

### Parkinson's disease: no more tremor

Harrie Martens became Epworth Richmond's first deep brain stimulation (DBS) patient earlier this year, travelling from Western Australia to receive this innovative treatment for Parkinson's disease under the care of Epworth surgeons Mr Andrew Evans and Mr Girish Nair. DBS involves the surgical implantation of a medical device that delivers electrical stimulation to precisely target areas on each side of the brain. With the implant in place, tremors are controlled by a set voltage that can be raised or lowered in response to the patient's needs. Harrie says the procedure has given him a second lease on life. The tremor from his Parkinson's disease was once so acute that he couldn't do simple things, like write or use a computer. He can now do all of this and more.

### Faster, safer, easier kidney stone removal

Leading Epworth urologist Professor David Webb is using a new, micro-sized item of surgical equipment funded by donors, to perform a world-first procedure in the minimally invasive removal of kidney stones. The new equipment enables Prof Webb to remove the stones via a keyhole procedure of just two to three millimetres, and negates the need for a stent and follow-up surgery. "Sensibly speaking, this form of surgery should be the way of the future," David says. "Employing better technology is more cost effective and causes far less trauma for the patient."

### Safer, more accurate radiation therapy

One of the greatest challenges in radiotherapy is overcoming internal organ movement during treatment. Uncertainty about the precise location of the tumour at any moment means that radiation fields have to be expanded to ensure adequate dose delivery. This can result in undesirable irradiation of healthy tissue and side effects. Donors recently funded new technology for Epworth Radiation Oncology (ERO) known as Calypso that can track tumour movement continuously, in real time, during treatment. The clinicians at ERO are now undertaking an investigation — also funded by donations — that compares the accuracy of Calypso with standard imaging for complex movements. The results of this study may allow for reductions in the use of radiographic imaging, consequently reducing the potential side effects and increasing the efficiency of the treatment.

### Varian supports cancer research

Varian Medical Systems has committed to provide five years of funding for Epworth to conduct research into cancer and other non-malignant conditions where radiation therapy may be beneficial.

Varian's support will enable Epworth Radiation Oncology to treat patients on the Varian TrueBeam, a new linear accelerator that uses stereotactic radiotherapy to specifically target tumours.

"This state-of-the-art equipment enables our patients to have access to stereotactic radio-surgery for the first time," says Epworth Radiation Oncology Director Pat Bowden. "Radio-surgery enables eradication of certain tumours with highly targeted radiation beams that cause minimal or no side effects." More than 80 patients were treated on the TrueBeam in its first two weeks of operation.





### Radiation oncology trial

The EJ Whitten Foundation recently made a donation to help fund an important research trial at the Epworth Radiation Oncology Research Centre (ERORC), aimed at finding more effective ways to treat patients with prostate cancer. The trial, called ProSPER-82, investigates the use of a hydrogel that enables prostate cancer patients in whom the disease is entrenched to safely receive higher dosages of radiotherapy, providing a better cure rate and fewer side effects. This research is at the core of the EJ Whitten Foundation's mission. The Foundation was established in memory of the great EJ (Ted) Whitten OAM, a Western Bulldogs player who lost his battle with prostate cancer in 1995. Since its creation, the EJ Whitten Foundation has raised more than \$7 million for prostate cancer research and awareness. However, the Foundation's support of ERORC's ProSPER-82 research trial marks the first time it has provided funding for research involving radiation oncology.

### World-first study into post-traumatic amnesia

Epworth's Dr Gershon Spitz is undertaking a world-first study addressing the return of memory following traumatic brain injury (TBI). Dr Spitz's research is so important that he has been awarded a prestigious grant from the Brain Foundation, the first time that this award has been given to an Epworth researcher. Almost all individuals who sustain a TBI experience a phase of post-traumatic amnesia, during which they are confused, disoriented, and unable to form new memories. Dr Spitz is investigating impairments to specific aspects of memory during post-traumatic amnesia, as well as the relationship between memory difficulties and neural activity in the brain. This is the first study in the world to examine the cognitive function of TBI patients during post-traumatic amnesia, and his findings could form critical bases for future treatments and interventions.

### Epworth Richmond Redevelopment

With the support and vision of our community, Epworth is investing in the future, redeveloping and building new hospitals that are designed around patient services, equipped to meet the needs of patients today, and anticipating the needs of patients tomorrow. Building progress on Epworth's world-class redevelopment at Richmond is continuing on schedule, and planning is underway for the official opening of the Lee Wing, named in honour of Mr and Mrs P S Lee, who are great benefactors of our hospital. The Lee Wing will co-locate our critical care services, and open a new and larger Matthew and Audrey Voss Emergency Department alongside a 26-bed intensive care unit, a 39-bed acute and high-dependency cardiac unit, six new theatres, and three new levels of inpatient accommodation. The facade panels of the Lee Wing are now in place, bringing the exterior of this wing to life. This design will form the entire frontage of Erin Street once the redevelopment of Epworth Richmond is complete.

### Peace Garden open to cancer patients

Epworth Richmond's long-anticipated Peace Garden is now open for oncology patients and their families to enjoy. The Peace Garden was made possible by a donation from the Kids and Families Foundation on behalf of cancer patient the late Barbara Heine, and by the additional and heart-warming generosity of the hundreds of Epworth donors to whom we turned for help to see this project through. This multipurpose outdoor space now offers a peaceful retreat for patients away from the ward environment, an all-weather family area with kitchen facilities to cook and share meals with loved ones, a play area for children, and a comfortable area in which to receive treatments.



## Andy's road to recovery

- Andy Gillott says he cannot believe how small, repeated movements next to a mirror have helped correct his paralysed left hand. In the six weeks that followed major brain surgery, Andy went from limited function on his left side to riding a bike to his session at Epworth Rehabilitation Brighton.

His story is a tumultuous one. He experienced a seizure on 2 April 2014, which led to a diagnosis at The Alfred of a Stage 3 anaplastic astrocytoma. There followed hasty plans for surgery at the Royal Melbourne Hospital, after which he chose a rigorous inpatient rehabilitation program at Epworth Brighton — one that focused on physiotherapy, occupational and speech therapy.

“My goal was stability and balance — and I really did not expect to get to this stage so quickly,” he says, as he squeezes pegs while moving them from one rod to another, then picking up and holding small coloured balls. “I expected that this particular therapy might improve movement, but I did not anticipate it could actually help my function return,” Andy says.



The occupational therapy team at Epworth Brighton are very grateful for Andy's donation

Andy was awake during the brain surgery that successfully removed most of the tumour, so he remembers hearing the words “we've lost the left arm”. In the days that immediately followed, he plotted his rehabilitation journey with the same analytical expertise and skill of logic that he deploys in managing his large businesses. He set goals, mapped out his own recovery and put the shock diagnosis into perspective. He determined he would need time off from his next big project to manage this personal one, and to ensure his family could enjoy a different sort of journey alongside him.

“This clever little glove works by stretching out my hand with tensioners on the joints. I work against that to pick up the ball and that strengthens my movements,” explains Andy. “After wearing it at a therapy session, I could actually feel electrical pulses return to my hand; and when I went home I noticed I could capably hold vegetables firmly while I chopped them with the other hand.

“In essence, by pulling against the tensioners, the glove extends my fingers. With all the recent talk in the media about neuroplasticity, I understand that this process helped my brain's memory wake up, and then hold onto the sensations of strengthened movements and muscles being refined. It has been extremely helpful and I wanted other patients to be able to have the same opportunity to experience those same results.”

“After wearing it at a therapy session, I could actually feel electrical pulses return to my hand”

Andy was so impressed he donated four gloves to Epworth Rehabilitation Brighton and has one to use at home.

The lightweight glove was launched by Saebo at the end of 2014, after which thousands have been sold across six continents. It was created after 15 years of the company's experience in design of products for clients with minimal tone, with the purpose of improving motor recovery and functional independence.

### Oncology ward at Epworth Freemasons named

One of Epworth's most generous philanthropists, businessman Ross Raphael, has made a donation of \$1 million, through the Raphael Family Foundation, towards the oncology ward at Epworth Freemasons. Epworth is one of the largest cancer-service providers in Australia, and the 'Raphael Family Oncology Ward' named in honour of Mr Raphael's generosity, is one of the busiest wards in our hospital. Patients have access to state-of-the-art day oncology facilities, radiation oncology, the latest in chemotherapy and drug therapies and surgery. Through his generous and long-term support of the Epworth Medical Foundation, Mr Raphael has helped us continue to provide the best possible care for our patients.



Ross Raphael and Nurse Unit Manager Colleen O'Hara and her oncology nursing team

### A new Epworth facility supported in Geelong

This year, Epworth was privileged to receive a gift of \$250,000 from the Scobie and Claire Mackinnon Trust, to support the building of our new hospital at Geelong. Canadian-born Claire Mackinnon was a Hollywood star of the silent screen, who married Victorian grazier Donald (Scobie) Mackinnon in 1937 making headlines around the world. They both died in the 1970s, having made provision in their wills to establish the Scobie and Claire Mackinnon Trust to support a range of charitable causes, particularly those that benefit the Western District.

Epworth is truly grateful to the Mackinnons for their foresight and generosity in establishing such a trust, and to the trustees for awarding these funds to Epworth Geelong. We are proud to name the new intensive care unit in Geelong in honour of Scobie and Claire.

### Hot tips for women to age well at fundraising luncheon

The seventh annual Women in HealthCare luncheon was held at Zinc, waterside at Federation Square in October with a record attendance of over 400 guests.

Master of Ceremonies and specialist breast cancer surgeon Dr Chantel Thornton introduced the topic of ageing well, which included hints on how to slow the ageing process by maintaining a healthy balanced diet, drinking water and less alcohol, exercising routinely, managing stress levels appropriately and having regular health screenings.

Cosmetic plastic surgeon Dr Jane Paterson addressed the issue of breast health and breast reduction surgery to improve posture and lifestyle and specialist endocrine surgeon Associate Professor Julie Miller addressed the issue of bone health and primary hyperparathyroidism, a neglected but curable cause of osteoporosis.

The event was generously supported by Levantine Hill and Singapore Airlines which together with corporate sponsors and fundraising activities helped to raise \$50,000.

### Epworth Charity Golf Day raises record funds

The Epworth Medical Foundation held its annual Corporate Charity Golf Day on 23 March at the Metropolitan Golf Club with a full field of 120 players including corporate sponsors, Epworth doctors and executive staff.

Major sponsor of the tournament was Mr PS Lee of Footscray Markets and together with other corporate sponsors a record amount of over \$100,000 was raised to purchase an image intensifier for operating theatres at Epworth Eastern.

It was a fantastic day of sport, camaraderie and networking on and off the course where the Australian Masters was held in November 2014.

Group Chief Executive Alan Kinkade watched the teams tee-off and later thanked the sponsors for their support. Multigate Medical won the trophy this year with Princes Laundry and Bidvest taking second and third place.

### Men's Health Lunch success

The Epworth Medical Foundation held their third successful Men's Health Lunch in the Members' Dining Room at the Melbourne Cricket Ground on 7 May raising a record \$200,000 towards orthopaedic research and equipment.

3AW's John Burns was a very entertaining MC with this year's topic being joint health. More than 460 guests heard from sport and exercise physician Dr Peter Larkins together with orthopaedic surgeons Mr Tim Whitehead and Mr Andrew Tang. They spoke of the burden of joint disease worldwide as well as advanced methods of joint preservation and replacement.

Tim Ryan from major sponsor Hudsons Coffee drew the raffle on the day and feature sponsor Stryker put on a display of joint prostheses at the information desk where guests could also have their blood pressure checked and take home information about improving their general health.

### Challenge yourself

Epworth Charity Challenges offer a fantastic array of local and overseas adventures during which you can challenge yourself, make lifelong friendships with like-minded people and raise much-needed funds for equipment, research and education at Epworth.

This year the Epworth Medical Foundation organised a number of local and overseas charity challenges including trekking along the picturesque Great Ocean Walk; cycling alongside the Mekong River and ancient temples of Angkor Wat in Cambodia; taking the Buddhist pilgrimage trail on the Kii peninsula in Japan and traversing the historic Great Wall of China.

Each troupe of 20 or more returned with memorable experiences, having bonded through the effort of the challenge, the splendour of the environment and the joy of completion.

Funds raised from these events have helped to purchase an optical coherence tomography machine for diagnostic procedures in the cardiac catheter laboratories, fund groundbreaking research in the Epworth Radiation Oncology Research Centre and provide accommodation support to rural and regional cancer patients at Epworth.

Ten challenges are planned for the coming year with some enticing and exotic destinations in store.





## Epworth Goes to Rio

- Epworth's Gala Ball, 'Epworth Goes to Rio' was a bumper event with a record crowd of over 1300 and a record \$5.6 million raised for research at Epworth.

The black tie event held on 2 August 2014 at the Palladium Ballroom at Crown received \$2.3 million in pledges, with \$2.2 million of this donated by benefactors Audrey Voss and Greg Curzon-Siggers.

These two benefactors have grown to know Epworth through their experience at Epworth HealthCheck, Epworth Freemasons and Epworth Richmond.

Once again the special events committee, led by Chair Robyn Beddison OAM and supported by the Epworth Medical Foundation, did a fabulous job of organising the event with an amazing line-up of fundraising prizes including ten live auctions, over 200 silent auction items and a major raffle.

The evening was sponsored by major partner ConMed, associate sponsors ANZ, Brainlab, Brookfield Multiplex, Gallay Medical, Medownick, Rauland, Technology One and more than 40 sponsors of tables, auction items and event services.



Audrey Voss at the Epworth Goes to Rio Gala Ball



Greg Curzon-Siggers and Alan Kinkade, Group Chief Executive



## Honor roll

We are deeply humbled by the care and compassion our donors show to our patients through their thoughtful generosity. Their gifts truly change the way we are able to care for our patients, and enable us to go above and beyond for them.

Please join us in thanking those listed for the support they have given us during the past year. It is this generosity and the cumulative impact of all our donors that enables us to do what we do.

## THANK YOU TO OUR SUPPORTERS

The Epworth Medical Foundation is grateful to the following individuals, companies, associations and trusts that have supported our work throughout the year. In addition to those listed below are those who have asked to remain anonymous.

### Associations

Cancer Unit Auxiliary Group  
Freemasons Victoria  
Friends of Epworth  
Freemasons Hospital Association  
Heartbeat Epworth  
Sorooptimist International of Melbourne

### Bequests

Joyce Lavinia Alexander  
Malcolm James Archer  
Florence Margaret Barnes  
Henry Ernest Bryant  
Joyce Edith Florence Franks  
William Harold Green  
Margaret Ross Mackenzie Griffin  
John Hope  
Marjorie Jackson  
Alma Johnson  
Emily Lamburd  
Bruce Lockwood  
Jean Lilian Paynter  
June Pamela Ponzoni  
Harry Leslie Richardson  
Barbara Whilton Shearer  
George Warren Thornton  
Henry Thomas Turner  
Secunda August Verhagen  
Thomas James Weller  
Leslie Williams  
Lily Winfield  
Thomas Wogan

### Corporations

Abbott Australasia  
ABD Group  
Advantage Salary Packaging  
Allens  
ANZ Banking Group  
Aon Risk Services  
Atlas Healthcare  
Aurecon  
Austsing International Development  
BankVic  
Baxter Healthcare  
Bidvest Australia  
Bizwear  
Bonacci Group  
Brainlab Australia Pty Ltd  
Brookfield Multiplex  
Built  
Cell Care Australia  
Commonwealth Bank of Australia  
ComMed Australia  
Deloitte Touche Tohmatsu  
Device Technologies Australia  
DI Office Design  
Dorevitch Pathology  
Edwards Life Sciences  
Embassy Print Solutions  
Emirates Leisure Retail (Aust)  
Ernst & Young Chartered Accountants  
First State Super  
Gadens Lawyers

Gallay Medical & Scientific  
GE Healthcare  
Generation Healthcare REIT  
Health Science Planning Consultants  
Healthcare Australia  
Jellis Craig (Clifton Hill)  
Johnson & Johnson Medical  
Johnstaff Projects  
Kane Constructions  
Lehr Consultants International  
Lifehealthcare  
Lima Orthopedics Australia  
Matrix Surgical  
Medacta International  
Medtronic Australasia  
Melba Fresh  
Melbourne Pathology  
Melcorp Property  
Mobilise IT Pty Ltd  
Morgan Stanley Smith Barney  
Multigate Medical Products  
Norman Disney Young  
OneView  
Orthosport Victoria  
Perpetual Private  
Philips Healthcare  
Princes Laundry  
ProAV  
Pure Projects  
Quest East Melbourne  
Rauland Australia

Safecorp Group  
 Sanofi-Aventis  
 Siemens Healthcare  
 Silver Thomas Hanley  
 Slade Pharmacy  
 Sporting Globe  
 St Jude Medical Australia  
 Stryker Australia  
 SVI Global  
 Technology One  
 UBS  
 Upstream Print Solutions  
 Urbis  
 Varian Medical Systems Australasia  
 Victorian Nurse Specialists  
 Vital Healthcare Australian Properties  
 Westpac Banking Corporation  
 Zimmer Pty Ltd

#### Endowments

Edward Broadhurst Memorial Charitable Fund  
 Estate of Ernest L Brown  
 Estate of G E Bradshaw  
 Cassidy Bequest Gift Fund  
 Kevin Stewart Cowell Trust  
 Allan Elkington Memorial Trust  
 Estate of G & H Foulkes  
 Henry Alexander Hamilton Charitable Trust  
 Frank & Doris Hodgson Trust  
 Estate of Ernest John Kebby  
 Ernest & Letitia Wears Memorial Fund

#### Trusts

Australian Food Allergy Foundation  
 Abercrombie Family Foundation  
 Annie Danks & Danks Trust  
 Annie Rose & Andrew Lazar Foundation  
 Bamford Family Foundation  
 Betty Lowe Memorial Trust

Brain Foundation  
 Costello Family Account  
 Douglas & Phillip Young Charitable Trust  
 E J Whitten Foundation  
 Edward Percy Oldham Gift  
 Eirene Lucas Foundation  
 Elaine Haworth Charitable Endowment  
 Eric & Elizabeth Gross Foundation  
 Estate of the late Olga Mabel Woolger  
 Evelyn Margaret Waterworth Endowment  
 F & E Bauer Foundation  
 Felice Rosemary Lloyd Trust  
 Freemasons Victoria Foundation  
 Fred & Vi Lean Charitable Trust  
 Goding Foundation  
 Gras Foundation Trust  
 H & K Johnston Family Foundation  
 Harbig Charitable Foundation  
 Harry Secomb Foundation  
 James & Linda Wang Foundation  
 JBWere Charitable Endowment Fund  
 Joe White Bequest  
 John & Margaret Schneider Foundation  
 L R Cazaly Trust  
 Landman Foundation  
 Lew Foundation  
 Lionel & Yvonne Spencer Foundation  
 Lord Mayor's Charitable Fund  
 Margaret Dawn Marks Charitable Trust Fund  
 Medical Research Foundation for Women & Babies  
 Naphtali Family Foundation  
 Opalgate Foundation  
 Ovarian Cancer Research Foundation  
 Pam & Alfred Lavey Trust  
 Reginald Marsden Charitable Trust  
 Rob & Glenda Thomas Endowment  
 Sara Lederman Charitable Foundation

Scanlon Foundation  
 Schapper Family Foundation  
 Scobie & Claire MacKinnon Trust  
 Sir Wilfred Brookes Charitable Foundation  
 Slome-Topol Family Charitable Trust  
 Sun Foundation  
 The Barbara Luree Parker Foundation  
 The Russell Medical Endowment  
 The Valda Klaric Foundation  
 W & H Toohey Charitable Foundation  
 Yulgilbar Foundation  
 Zig Inge Foundation

#### Gold Leaders

\$1M +

Susan Harris Foundation  
 Mrs A Voss

#### Silver Leaders

\$100,000 +

Mr & Mrs K & C Biddick  
 Mr G Curzon-Siggers  
 Mrs E Danos  
 Mrs C E Heath  
 Mrs R Heymanson  
 Mr E Jreissati KJGC & Mrs C Jreissati  
 Mr & Mrs J & B Laidlaw  
 Mr & Mrs PS Lee  
 Mr & Mrs R & J Mackenzie  
 Dr & Mrs A & L See

#### Bronze Leaders

\$50,000 +

Miss B Amsden AO  
 Dr & Mrs P & J Bowden  
 Mr & Mrs J & E Edmonds  
 Mr J Joel OAM & family  
 Mrs A Hill  
 Mrs M Macdonald

**Major Donors****\$25,000 +**

Mr J Coustley  
 Mr & Mrs J & W Duffield  
 Ms D Gibson AO  
 Mr & Mrs K & J Irvine  
 Dr P Lowe  
 Mr C McLaren  
 Mrs H Neilson  
 Mr & Mrs R & P Paton  
 Mr & Mrs R & C Randle  
 Mr A R Raphael  
 Mr I Stephan  
 Mr D Tricks

**Guardians****\$10,000 +**

Mr & Mrs T & V Browne  
 Mr & Mrs S & N Bulger  
 Mr R Cumberlandge  
 Dr M Dally  
 Prof R de Steiger  
 Mr C Dunn  
 Mr & Mrs M & S Edwards  
 Mrs P Farmer  
 Mr & Mrs P & M Gangemi  
 Ms J Hu  
 Miss K Jenkins  
 Mr & Mrs ID & MG Johnston  
 Mrs N Loughhead  
 Mr M Majtlis  
 Mr J McCague  
 Mr & Mrs G & A McGeary  
 Mr & Mrs I & A Muir  
 Mr B Myer AC  
 Mr D Nowell  
 Mr G O'Neill  
 Mr & Mrs R & J Pleydell  
 Mr M Rayner  
 Mr B Roohizadegan  
 Mr C Roussac

Ms S Silberberg  
 Dr G Sloman AM  
 Mr & Mrs K & A Thornton  
 Mr J Wall  
 Mr & Mrs B & F White  
 Mr A Wilson

**Contributors****\$5,000 +**

Mr R Beaconsfield  
 Mrs G Beazley  
 Prof P Brooks AM  
 Mr & Mrs J & M Carroll  
 Mr & Mrs T & H Cohen  
 Ms S DeWinter  
 Mrs P Fairweather  
 Mrs R Ferguson  
 Mr & Mrs J & R Fox-Croft  
 Mr M Fremder  
 Mr & Mrs J & A Georgopoulos  
 Mr J Gilder  
 Dr & Mrs M & J Gronow  
 Miss D M Hanson  
 Mr & Mrs L & M Heale  
 Mr G E Heeley  
 Mr P Hibbs  
 Mrs R M Hornung  
 Mr R Johnston  
 Mr A Kings  
 Dr J Kinnear  
 Mr & Mrs A M & R Kornhauser  
 Mr L Kornhauser  
 Mr P Krongold  
 Mr & Mrs S & C Laurie  
 Mrs N Lever  
 Mr G Maguire  
 Mr P Marriott  
 Prof G Metz AM  
 Mrs L Miller AM BEM  
 Mrs A Molan  
 Mr L M Morton

Rev Prof C Mostert  
 Mr B Nesbitt  
 Mr & Mrs E & A Oates  
 Mr M Pannay  
 Mr & Mrs J & S Parker  
 Rev & Mrs I & E Paxton  
 Mrs A Rattray  
 Mr L Reid  
 Mrs N Riley  
 Mr K Roche AO  
 Mr G Shalit & Ms M Faine  
 Mrs G Stott  
 Ms R Swart  
 Dr A Tang  
 Ms F Thomas  
 Mr & Mrs C & J Walter

**Supporters****\$2,000 +**

Dr Z Ansari  
 Mr & Mrs L & R Arthur  
 Miss J Bach  
 Mr K Bailey  
 Mrs B Beckingsale  
 Mr & Mrs R & M Black  
 Miss N Brown  
 Mr J Calvert-Jones AM  
 Mr E Cameron  
 Ms E A Camilleri  
 Mr & Mrs P & I Canet  
 Mr A Cappola  
 Mrs N Carrick  
 Mr C Carter OAM  
 Prof J Catford  
 Mr & Mrs W Chick  
 Mr G Cochrane  
 A/Prof A Cochrane  
 Mrs M Cohen  
 Mr & Mrs J & C Collingwood  
 Mr J Conroy  
 Mr D Cooper

Mr & Mrs G & E Crosthwaite	Mr C Kelly	Dr A Penberthy
Mrs M Crutch	Mr R Kingsley	Ms C Penrose
Ms M Dalton	Mr & Mrs A R & D Kinkade	Mr R Pettigrew
Mr J W Davies	Dr J Kinnear	Mr & Mrs S & M Politis
Miss H Davies	Mr S Lavin	Mr A Poolman
Dr P Desmond	Mrs E M Law-Smith	Miss N Rasmussen
A/Prof R Dick	Mr F Lee	Dr J Reddish OAM & Mrs J Reddish
Ms S Donovan	Mrs D Lee	Mr M Robinson AO & Mrs J Robinson
Mr G Dumbrell	Ms T Lye	Mrs M Ross AM
Mr R Dunne	Dr MacLennan	Mr J Rutherford
Ms K Edwards	Mrs B Martin	Mr & Mrs T & Y Samanpau
Mr & Mrs K & S Ehrenberg	Mrs B McGhee	Mrs I Sampieri
Dr C Giannellis	Mrs E McPherson	Dr R Scholes
Mr & Mrs J R & B Gilbert	Mr & Mrs D & A Mercer	Mr & Mrs T & L Scully
Mrs M Gilbertson	Mr & Mrs P Millar	Mr P Smith
Mr & Mrs A & C Gottliebsen	Miss S Mirnik	Mr & Mrs R & B Squire
Mr R Harrington	Mrs P Montgomery	Dr C Stambe
Mr I Harris & Mrs N Harris AM MBE	Mr H Morgan AC & Mrs E Morgan	Ms S Tallent
Mrs V Henderson	Mrs E Muir	Mrs A Vaughan
Mrs B Heskey	Mrs S Muir	Mr W Webb
Mrs M Holmes	Mr K Munro OAM	Mr D White
Mr W Ihle	Mr B Neate	Mr & Mrs J Wilson
Mr & Mrs G & R Ingall	Mr P Neil	Mr K I York
Ms H Jackson	Mrs B Neill	Mr P Yanghanns
Mrs L Jacobs	Mr S Newton AO	Dr & Mrs A & J Zimet
Dr J Johns AM	Dr M R Nicholls	
Mr J Karkar QC	Mr K O'Connor	
Mrs B Kefford	Mr & Mrs R & P Pederick	







**Epworth**



**EPWORTH HEALTHCARE**

89 Bridge Road  
Richmond VIC 3121  
Phone 03 9426 6666

**EPWORTH BRIGHTON**

85 Wilson Street  
Brighton VIC 3186  
Phone 03 9592 9144

**EPWORTH CAMBERWELL**

888 Toorak Road  
Camberwell VIC 3124  
Phone 03 9809 2444

**EPWORTH CLIVEDEN**

29 Simpson Street  
East Melbourne VIC 3002  
Phone 03 9419 7122

**EPWORTH EASTERN**

1 Arnold Street  
Box Hill VIC 3128  
Phone 03 8807 7100

**EPWORTH FREEMASONS**

166 Clarendon Street  
East Melbourne VIC 3002  
Phone 03 9483 3833

320 Victoria Parade  
East Melbourne VIC 3002  
Phone 03 9418 8188

**EPWORTH HAWTHORN**

50 Burwood Road  
Hawthorn VIC 3122  
Phone 03 9415 5777

**EPWORTH RICHMOND**

89 Bridge Road  
Richmond VIC 3121  
Phone 03 9426 6666

**EPWORTH**

**MEDICAL IMAGING**  
Epworth Camberwell  
Epworth Freemasons  
(Albert Street)

Epworth Freemasons  
Medical Centre

Epworth Richmond  
Phone 1800 MYXRAY

**EPWORTH PATHOLOGY**

Epworth Eastern  
Phone 03 9890 0889

Epworth Freemasons  
Phone 03 9419 0074

Epworth Richmond  
Phone 03 9429 2222

**EPWORTH RADIATION  
ONCOLOGY**

Epworth Freemasons  
Phone 03 9483 3331

Epworth Richmond  
Phone 03 9936 8277

**EPWORTH.ORG.AU**