

Our Voice



Mercy Health

Care first

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Closing the circle

Mercy Health
returns to its roots
in Western Australia

Same song, different cities

What binds WA and the
southern states? The answers
may surprise you

Life goes on in Eden

The quiet revolution in caring for
our community's elders



Hand in hand on the journey home



Offering pastoral care is a privilege
– Sr Carmel Wringe and Teresa Rose

Pastoral care is not always an easy calling. But for two remarkable Mercy Residential Aged Care staff in Western Australia it's both a passion and a privilege.

Sister Carmel Wringe can barely recall a time when the Mercy ministry was not part of her life. "I've been with Mercy more than 50 years," she says. "I was a boarder at St Brigid's College in Lesmurdie as my family were farmers in the southwest of Western Australia. Then I entered the St Brigid's Convent of Mercy, West Perth Congregation, as a novice before teaching for many years. I moved into aged care when we needed someone to supervise in one of our facilities."

Such a deep immersion in Mercy's Western Australian story allows Sr Carmel a rare, perhaps even unique, insight into the changing needs of the community her congregation has served for so many years. It was not so long ago that 'pastoral care' – a tenet ingrained in the Mercy ministry from the beginning but never given a name – was a new concept in caring professions. But as recognition grew that caring for the vulnerable, whether children, the poor, the ill or the aged, meant more than tending to physical wellbeing, the Sisters have embraced the new vision of their centuries-old philosophy with customary passion.

"After I had spent some years in a supervisory role, the Executive Officer said she'd like to see pastoral care introduced because at that stage it wasn't offered in any low-care facilities," Sr Carmel continues.

"It was interesting to see it grow because people had no understanding of what pastoral care was. We also envisaged challenges in working across St Brigid's three sites in Craigie, Lesmurdie and Edgewater. But it was also exciting because I could create my own job, working with the residents and families I knew."

So began a new journey into an aspect of care for which compassion is perhaps the first and most important qualification. It is one which Sr Carmel has in abundance and which finds its expression in both practical and spiritual support.

"I run weekly prayer groups and services, including Memorial Services within the facility for staff, residents and family," Sr Carmel explains. "These are very important to enable the residents to share thoughts and prayers. Even though there's no pressure on them to be there, they're very good at attending. I have also conducted funerals for people from non-Catholic backgrounds. Their family may say 'You knew my mother; you've looked after her for years now and I want the Funeral Celebrant to be someone who knew her.'"

Sr Carmel's passion for guiding residents through their final journeys is increasingly valuable as palliative care becomes a focus for the St Brigid's homes. It's an area in which Mercy Health's new relationship with the Sisters of Mercy WA can provide welcome support, drawing on decades of experience in end-of-life care. "We're looking forward to opportunities to network with Mercy Health in other states," Sr Carmel confirms.

"As we move into palliative care I'm spending more time sitting by bedsides. Today I received a message that our 101-year-old Sister had gone to hospital; she had told us she doesn't want to be alone."

Yet even Sr Carmel's energy and commitment can't enable her to be in multiple locations at once. Enter Teresa Rose, St Brigid's new Pastoral Care Associate and Sr Carmel's partner in ensuring the growing numbers of residents who need pastoral care are never without it.

"In the last few days of his life I promised him 'I'll walk this journey with you' and I was very privileged to be there when he took his final breath."

"I'd been working as Lifestyle Coordinator for about nine years," Teresa says. "Earlier this year the pastoral care needs had become too many for one person to meet across three sites, so I was given the opportunity to share the role with Sr Carmel. I had completed Unit 1 of Clinical Pastoral Education last year and had enrolled in a second unit, so the timing was good."

"One of the reasons I decided this was the area for me was that in a sense, I was already performing that role in my lifestyle work. Pastoral care is about being with people and listening to them."

However it's the contrasts between roles that Teresa finds rewarding. "I really enjoy the one-on-one time with residents. In pastoral care you have more time to give whatever each resident needs, whether that's an ear to listen, a prayer or just to talk about the weather. We may need to spend time with someone in hospital or with their family. We're more or less on call 24 hours a day."

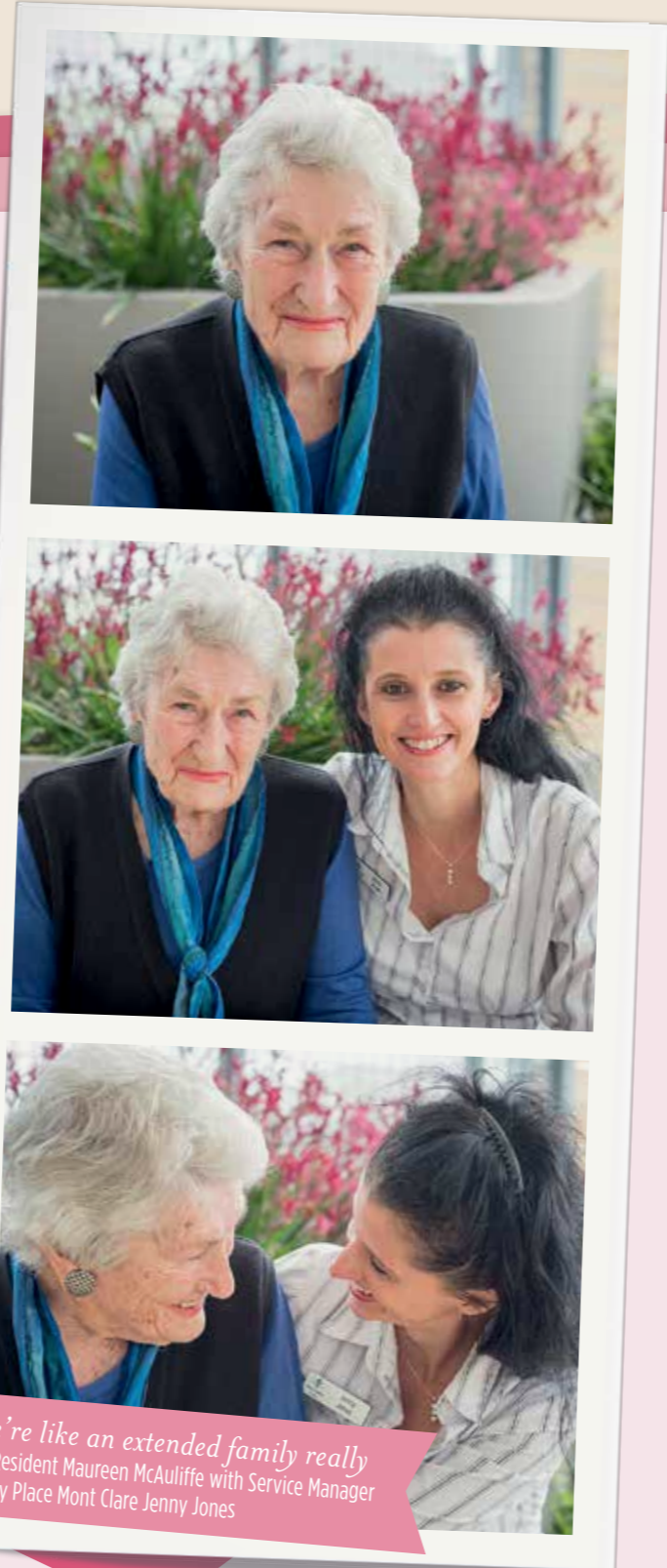
Despite the all-encompassing nature of their work and the stamina it requires, both Sr Carmel and Teresa can illustrate without hesitation why it has become their passion.

"I think of a lady who had been with us for thirteen years," recalls Sr Carmel. "She'd moved through the residential units into the hostel, and we nursed her to the end. The Parish Priest couldn't make it to her service so I was asked to perform it. It really touched me because we'd looked after this lady for so many years, then had the privilege of carrying out the last act of love on this Earth for her."

"One thing that makes me feel that this is what I'm meant to be doing springs immediately to mind," Teresa adds. "We had a resident whom I had known for many years through my lifestyle role. In the last few days of his life I promised him 'I'll walk this journey with you' and I was very privileged to be there when he took his final breath. This is what pastoral care is: a privilege. He was very frightened of being on his own and I was able to help him with this fear by my presence."

"The rest of the staff at the facility were also absolutely wonderful in helping me meet that need; he was never alone over those last few days. Our Mercy ethos was very apparent in that whole experience."

A day in the life Mont Clare



We're like an extended family really
— Resident Maureen McAuliffe with Service Manager
Mercy Place Mont Clare Jenny Jones

What's it really like to live in one of Mercy Health WA's residential aged care facilities? We spoke to Mercy Place Mont Clare resident Maureen McAuliffe and Service Manager Jenny Jones to get the inside story.

Maureen McAuliffe

Resident, mother of five, grandmother of 18, qualified nurse, avid reader, treasured Mont Clare elder

I moved into Mont Clare just over two years ago. I had been living alone after my husband passed away. I was a trained nurse; I moved to Perth from Queensland to do my medical certificate, then met my husband. So I've been in Claremont for many years and raised my family here.

My children found Mont Clare and recommended it. When my sons said 'We've looked around and there's nothing else like it' that was enough to convince me.

My days are usually quite full. Apart from having a staff member come to my room in the morning and sit where they can see me in the shower in case I fall, which I asked them to do, I go off and do what I need to do.

The staff are just fantastic, they're the best thing about this place — I tell everyone that. They're an extension of my family really.

That's very important to me as my daughter lives in Melbourne which I've found quite difficult. But they bend over backwards to try to make up for that.

My four boys are here though and the staff know them all by name. When they come in to visit, Nancy in the kitchen will ask 'Do you want a cup of tea?' and they'll say 'Yes, one sugar'. She'll say 'I know how you have it!' When the boys come in for dinner the staff will set up a little table for us to eat together as a family.

The staff talked to me before I came in about my interests. But I wouldn't say I have hobbies; I've brought up five children, they're my hobbies! I do play a lot of bingo and I read a lot which I've always enjoyed. We have lots of other activities; Scrabble (we play lots of Scrabble); entertainers come in; we have outings for lunch, coffee, barbecues. We might go down to Fremantle for a picnic in the park. The lifestyle coordinator also organises movies which is great — mind you if he doesn't pick a good one we tell him about it!

We also have happy hour every few weeks so we can have a drink while someone gives a talk. It's very social.

I'm 88; I say to everyone, 'If you get old like me, come here!' It's a good place to be. It's my home.

Jenny Jones

Service Manager, passionate aged care professional, friend of Maureen

From before each resident actually moves in, it's very much about having close and continuous communication between residents, staff and family. As soon as people walk into this facility and I take them on a tour, the feedback they give is that's why they love Mont Clare. It's very homelike.

I've been in the aged care industry 22 years, including for some magnificent, big-name facilities and I feel we really take it to the next level here. We do that by acknowledging who the resident is and how they live their life and trying to incorporate that into how we operate.

It's about the resident's life story. I often say to families, 'Don't think when your father comes into aged care that all of a sudden he's going to play bingo if he's never played it before in his life.' If he's always been introverted he's not going to come in here and be different. The only time we may encourage someone to do more is if their family says 'This is not who mum or dad was, they've totally changed'; we will work to bring them back to who they are.

Every resident becomes part of our family here as do their relatives. I have an open door policy. We like to stay in regular contact with family, like Maureen's daughter in Melbourne who I speak to by

phone quite frequently. We also have resident/relative meetings; it's very open, everyone can come. Everything can be discussed. I think that's key to the quality of the relationships we have here.

There are no visiting hours, people come and go as they please. We're also very much into spontaneity, so if a resident says they feel like doing a particular activity we'll do our best to make that happen. If staff have a spare five minutes they'll actively engage with the residents rather than stare at a computer screen. That's from kitchen hands to servery staff, carers and cleaners.

Many residents want to participate in the day-to-day running of the facility. We have small kitchens in open plan areas so they may choose to do the washing up. A couple of residents love doing laundry so they have a ritual where they fold laundry in the morning and afternoon.

Another aspect that sets us apart is recognising a lot of people who come into aged care are very fond of animals. So we have two resident cats. One of our residents brought her own cat, Astrid, after we discussed it with her family. Her daughter said 'Mum loves cats and we'd like to adopt one for her from the cat haven.' So we worked out the finer details together and made it happen.

Then we have Ziggy who was also brought in by a resident. Sadly the resident passed away but by then Ziggy was loved by all the

“
The staff are just fantastic, they're the best thing about this place — I tell everyone that.”

residents and staff. The resident's family offered to take her away but we all said 'She's a staff member and part of the family!'

We also have dogs visiting regularly. I've got a lady on the wait list who would like to move her miniature poodle in with her so that's being discussed too.

It is a different way of thinking about aged care. Medically if there's a problem, everyone's going to fix that straight away. But we give equal weight to who the resident is as an individual. Even our language is different here; we don't say 'you're being admitted' we say 'you're moving in.'

Some people ask 'Where's your dementia wing?'. We don't ever segregate or identify residents according to their diagnosis. That's another thing I'm really proud of here.

It's literally 24/7. If I didn't personally believe in our philosophy I wouldn't be here. The staff and residents know they can call me any time of day.



Forever young



You are who you are, at 9 or 90. This is the key to the life and work of Perth aged care pioneers Rhonda and Nita Peploe.

The colourfully named Phoebe Murgatroid was one of Nita Peploe's first friends. When Nita was six weeks old her mother Rhonda returned to her role as proprietor and manager of Lathlain Aged Care, now one of Mercy Health's new facilities in Perth's inner city. Juggling a newborn and her demanding workload, Rhonda found an unexpected ally in 92-year-old resident Phoebe.

"She used to say to me 'You feed her and I'll take her' and as I was so busy I agreed," Rhonda recalls. "Phoebe would cradle her in bed and I'd pick her up when I went home. You couldn't do that today, but it built a wonderful relationship between this baby and this elderly lady. Phoebe felt connected to Nita but also to the Lathlain community. She was helping me and I was helping her. That illustrates our approach to

aged care; residents want to give back, they want to feel human and that they're still making a contribution."

At the heart of Rhonda's story is the symbiotic bond between young and elderly, staff and

“It just shows that normality is what all people crave.”

residents. This is Rhonda and Nita's view of aged care in miniature, an approach shaped over four decades of devoted service and advocacy for Perth's elders. "I was a

perioperative nurse when my husband bought the Lathlain home," Rhonda says. "But from the minute I walked in I realised caring for the aged was a good fit for me."

Aged care was soon in Nita's blood too. "I spent my childhood watching Rhonda's great work ethic and that has definitely rubbed off on me," Nita confirms. "I recall running around new developments at Mandurah and all the joys that came with that, sandpits, half-built buildings. Aged care was pretty much our entire lives — it's an all-consuming industry."

Perhaps unsurprisingly, in 2009 Nita left a successful legal career in London to return to her roots. "When I came back to Perth I could see it was getting increasingly busy for mum," Nita says. "It felt very



natural to come back into aged care. You are the sum of your life experience so it was very comfortable for me."

It's equally unsurprising that the Peploes have embraced the opportunity to transfer their legacy of caring for Perth's elders to Mercy Health. From 1 September 2014, this exciting milestone in Mercy Health's history brings together our southern and western states' dedicated aged care leaders who, while geographically distant, share a tradition of keeping residents at the centre of care.

"Our thinking and how we treat people are very closely aligned," Nita remarks. "Knowing we're both focused on the human side of care is very reassuring."

Respect for residents as individuals who continue to live meaningful lives shapes every day in the Lathlain, Mandurah and Claremont homes. Spaces and situations

abound in which to spend time with contemporaries and staff and meet new people of all ages. It's a vision of aged care in which life genuinely goes on — and family remains at its centre.

"There are staff still working in our facilities who remember me as a child so it really has been an extended family," Nita confirms. "We lived next door to Lathlain so I recall being babysat by the laundress and forming wonderful relationships with residents and staff. I remember the kitchen staff made special sandwiches for me and residents taught me how to play patience."

The benefits of the Peploes' person-centred approach flow equally between residents, families and caregivers.

"I feel so privileged to have been exposed from early childhood to so many different people in that environment," Nita says. "And I'm sure it was good for the residents to have a child around. We see the great benefits now when we have playgroups and

babies here. For the residents it can bring back memories of when they were young."

Nurturing a living, mutually supportive community creates precious moments in which age, time and illness melt away. "One of our nurses wanted to return to work after giving birth," Rhonda remembers. "So we gave her night duty. We had a resident in her nineties with dementia who used to call out at night. Our nurse would go in and sit with the resident while she breastfed her baby to try to calm her down.

"One night she put her son on the bed next to the resident to change his nappy. This lady, who had stopped speaking coherently due to her confusion, turned to her and said 'You be careful he doesn't fall off the bed. I remember when my son was that little.' So you should never assume the person within is lost, irrespective of age or illness.

"It just shows that normality is what all people crave."



Life goes on in Eden

A quiet revolution in aged care is underway, and our Perth facilities are at its forefront.

Eden is a name that conjures visions of nature in perfect balance. It speaks of an environment that nurtures the people at its centre, in which they are free to live exactly as they want to live.

It is no accident that this is the name chosen for a growing movement in residential aged care which restores the resident to the place of respected elder and centre of their community. The Eden Alternative is a set of principles that grounds aged care in a person-centred model, meaning how each resident lives is directed by them — just as it has always been.

Founder of our new Lathlain, Mandurah and Mont Clare facilities Rhonda Peploe may even have pre-empted the global movement by a good decade.

“We were doing Eden, without realising it at the time,” Rhonda says of her Lathlain facility’s enlightened approach to aged care in the early 1970s. “Although we took care of clinical issues, we emphasised social interaction between residents, staff and families. So we focused on the individual and have built on that over the years.”

The Eden model identifies three main barriers to living well in the elderly: loneliness, helplessness and boredom. Its 10 principles seek to combat these by reconnecting residents with aspects of their former lives that many fear losing when they enter residential aged care. First among these is control: over how they live, who they interact with, what they do with their time.

This defining goal is supported by a vibrant living environment which offers loving companionship, contact with animals and children, the opportunity to give as well as receive care and engagement in meaningful activities. What this means in practice is dictated by the needs of each resident — an approach that dovetails perfectly with Mercy Health’s own centuries-old tradition of person-centred care.

“What’s central to both care philosophies is being able to live a life around companionship, spontaneity and being an active participant and contributor in one’s life,” Anita Ghose, State Manager Western Australia, confirms. “That means empowering people to direct and have input into their lifestyle

“They shouldn’t have to stop all their enjoyment, their memories and preferences because they’ve moved into a facility.”



Spontaneity and social interaction are part of everyday life, as is Ziggy – our resident cat. Every day Thelma MacDonal (left) asks for ‘real’ work to do, so she folds napkins and works on reception.

right to the very end, so they can cherish the last years of their lives.

“The starting point is to understand the resident’s wishes and life experiences. From there we create a care plan that offers opportunities which are not directed by what the service thinks is best but by what that person wants.

“It might be that they have had an interest in woodwork all their life. So how do we empower them to continue that interest even though they’re in residential aged care? Another resident may have loved fishing all their life so we might take them down to the local jetty of an evening. We might create a men’s shed at the facility. Or if someone is passionate about their garden, they may be able to create a sensory garden within the facility. Some residents love birds, so we might create an aviary.

“These are the opportunities they’ve had all their lives. They shouldn’t have to stop all their enjoyment, their memories and preferences because they’ve moved into a facility.”

“There are clear parallels between our existing model of care and the Western Australian Eden approach,” agrees Voula

Yankoulas, Mercy Health’s Executive Director Residential Aged Care. “So Anita and I will roll out training in the Eden model across all our facilities nationally to reinforce our existing philosophy and ensure we all use the principles consistently.”

Eden Associate Karen Bahn, who is based in WA, makes it clear that while the principles produce a rich diversity of communities, they all have the same distinctive Eden quality.

“As far as the tangible benefits there’s a definite feel to an Eden facility,” Karen says. “You can look around and see instantly whether the residents are experiencing love or joy or companionship rather than sitting in front of a television ‘babysitter’.”

Karen’s passion for the Eden principles will help shape the training delivered to Mercy Health’s southern states.

“Creating an Eden culture has to involve staff, relatives and loved ones to be successful,” Karen notes. “It’s the staff who create the culture. So we invite them to train as ‘Eden champions’. What I’ve noticed after training staff to lead the way is a stronger sense of community, love, spontaneity and laughter.”

A free-flowing physical environment is also central to fostering an Eden culture.

“One of the tangible ways we’re applying the Eden principles is by removing nurses’ stations from each facility to make it easier for residents and staff to interact,” Voula says. “After seeing the positive difference that change has made in our Lathlain, Mandurah and Claremont facilities, we decided to replicate it in our southern states’ homes.”

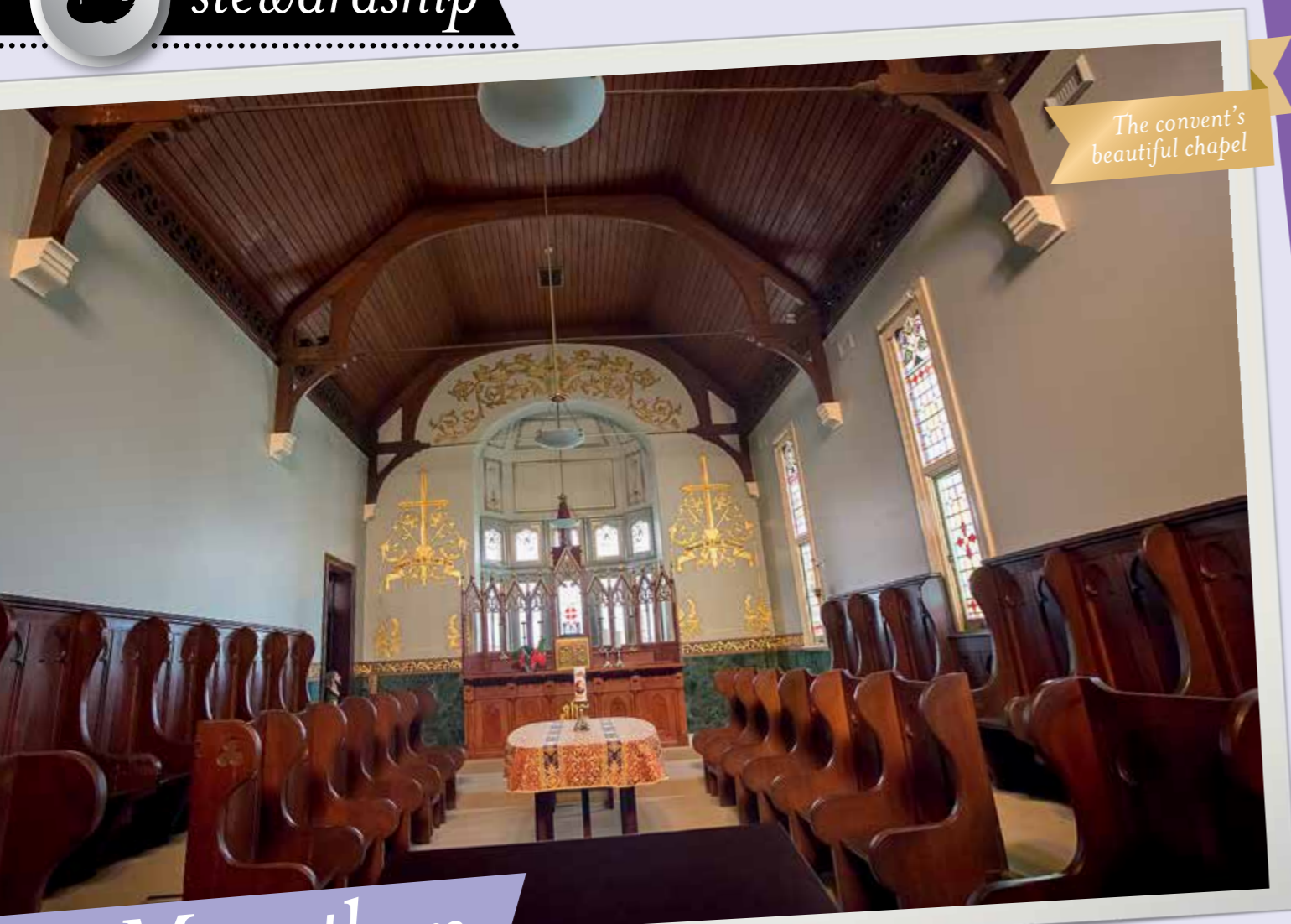
Rhonda is justifiably excited to watch their quiet revolution open a new chapter in Mercy Health’s aged care story.

“I think our philosophies are aligned; our goals and aims are a natural fit,” Rhonda remarks. “That’s why I believe Mercy Health has a leadership role to play in Australian aged care. I know we are all determined to see residents direct their own care. A lot of people in aged care think that is what they already do and recognise that’s what people need, but in practice it’s an ocean of change.

“I’m very much looking forward to seeing the Eden story’s next chapter unfold with Mercy Health. It’s such a privilege to be able to create positive change for our community’s elders.”



Residents’ lifelong interests dictate life at each facility



The convent's beautiful chapel

More than bricks and mortar

The Sisters of Mercy St Brigid's convent in Northbridge, Perth, has stood on its current site since 1896. Not only does the building continue to support its local community, it is also a physical reminder of Mercy's long history in Western Australia. In fact, Mercy's presence in WA significantly pre-dates even the convent: it was built a half century after Sister Ursula Frayne first planted the roots of the order in Australia by founding a congregation in Victoria Square in the Perth CBD in 1846.

The convent sits within a heritage-listed precinct which includes a church, parish hall, convent school and presbytery. This was the site on which the Sisters of Mercy established a school in 1888 before forming the West Perth congregation in 1896.

In its early life, the building grew gradually to accommodate the needs of a burgeoning community; the last major modifications were completed in 1926. Architecturally it is a gem, featuring an oratory, a beautiful

hammer-beamed trussed roof and leadlight panelled bay windows with gold-painted arches.

But it is not architecture that makes the building: it's the people and history within its walls that makes St Brigid's a Mercy landmark.

The convent was re-acquired by the Sisters in 1998, after 24 years of ownership by the Western Australian State Government. A community was quickly created in the upper floor of the building. Sister Jilyan Dingle moved in at that point and has lived there ever since.

"The convent has a beautiful atmosphere," said Sister Jilyan. "Visitors feel at peace because of the ambience the Sisters have created over the years."

Sister Jilyan describes herself as a custodian of the building. "I've kept an eye on the place," she says.

Soon after Sister Jilyan arrived, the convent became the administrative centre for three aged care services run by the Sisters of Mercy West Perth congregation. Those services are now managed by Mercy Health, and on 1 September 2014, Mercy Health will add three more aged care facilities — making the

convent the nerve centre of six Mercy-run Western Australian aged care services.

The Sisters have broadened their stewardship of Mercy's mission in Perth by sharing the building with others who serve the needs of the poor and the vulnerable. On top of generously leasing space to Mercy Health, they support Ruah Community Services who provide meals and a gathering place for the homeless from the back north-wing. The building also serves as the head office for The Big Issue in Western Australia, a direct financial supporter of the homeless, and state office for Catholic Super.

The Sisters' continuing leadership in caring for their community balances a bittersweet change that will take place in December, when the convent ceases to be a residential community.

"I have loved living here," says Sister Jilyan, "and there is real sadness in leaving. But at the same time, I am glad the building will continue to serve Mercy, and will be used well."

“The convent has a beautiful atmosphere, visitors feel at peace because of the ambience the Sisters have created over the years.”

Close to the convent, in the same heritage listed precinct, lies a stone cottage that was first used by the Sisters to run a school on the site way back in 1888. That cottage is now the home of the archives of the Institute of the Sisters of Mercy of Australia and Papua New Guinea, encapsulating a long and proud history.

Perhaps it is fair to say that after sixteen years of residence, and custodianship of a fine building, Sister Jilyan has written her own chapter.



Sr Jilyan Dingle and Sr Eileen McVettie outside the historic St Brigid's Convent Northbridge (shown right)





Different cities, same song

What unites the Mercy Health team across the vast Australian landscape? The answer may seem obvious, but there's more to our shared story than meets the eye...

Although divided by a huge geographical distance, Mercy Health's Western Australian residential aged care communities share a common culture with those in the east. Of course, all Mercy Health communities — whether in WA, Victoria, New South Wales or the ACT — share the Mercy ethos of 'care first'.

But beyond that shared purpose, there is another unique and irresistible force that unites Perth and Melbourne...

...football!

Just like Victoria, WA has a long and proud footballing heritage. While most Victorians are aware of the West Coast Eagles and the Fremantle Dockers, many are unaware that WA has had its own local league since 1881. Indeed, the Western Australian Football League (the WAFL — pronounced "waffle") is almost as old as Victoria's first official league, which was formed in 1858.

Before West Coast entered the national competition in 1987 the WAFL was the most popular league in Western Australia, enjoying large crowds and sparking fierce local rivalries. And although the AFL is now the main game, the WAFL remains a keen point of interest for many Perth-based Mercy staff and residents.

Margaret Shilton, formerly Team Leader at Mercy Edgewater aged care facility (who now works for the Institute of the Sisters of Mercy Australia and Papua New Guinea), is a perfect example. Like her grandfather and father before her Margaret grew up supporting the Subiaco Lions (maroon and gold). Margaret vividly remembers going to the footy with her dad as a young child and cheering for the Lions from behind the goals at Subiaco Oval. To this day, Margaret still supports 'Subi' but is now a passionate West Coast Eagles supporter, too. "My sewing room now has as much to do with the Eagles as it does with sewing," jokes Margaret, "if not more!"

Mercy Edgewater lies in the north of Perth, not far from another Mercy community in nearby Craigie known as Mercyville. Both communities are in the home of reigning WAFL Premiers the Joondalup Falcons, officially the West Perth Football Club. The Falcons wear red and blue and are the oldest continuously existing football club in the WAFL, dating back to 1885.

Mercy Place Mont Clare lies deep in the heart of Claremont — home to the Claremont Tigers (blue and gold). They're one of the most successful WAFL clubs of recent years, winning back-to-back WAFL Premierships in 2011 and 2012. Claremont is close to Subiaco and the Claremont Tigers and Subiaco Lions are traditional rivals.

Inner-city Mercy Place Lathlain is home to the Perth Demons (red and black). Although a proud club, the Demons haven't won a flag since 1977. Mercy's other new addition — Mercy Place Mandurah — is in the catchment zone

for Peel Thunder (blue, teal and white). Peel is the newest team in the WAFL, formed in 1997.

Last but not least, Mercy Place Lesmurdie lies in the hills directly to the east of Perth. This region is proudly represented by the Swan Districts Football Club (black and white), the club where West Coast Eagles ruckman Nic Natanui first started out.

The footballing heritage of Perth and Melbourne unites the two cities far more than it divides them. More than a game, football represents a common passion, a similar history and a shared cultural understanding. It's a neat

metaphor for the mission of care and rich heritage that Mercy Health's western and southern states also share.

And it is quite something to think that if you heard a Mercy resident singing 'It's a Grand Old Flag' they could be on either side of the continent. One could be celebrating the Melbourne Demons, the other, the Joondalup Falcons: both clubs wear red and blue, and they share the same song.

And both, you can be sure, have been singing that song their entire lives.

“It is quite something to think that if you heard a Mercy resident singing 'It's a Grand Old Flag' they could be on either side of the continent.”



Margaret Shilton, formerly Service Manager Mercy Edgewater, in the sewing room that has become a shrine to both the Subiaco Lions and West Coast Eagles



In their own words

Anita Ghose State Manager Western Australia, Mercy Health

I'm a West Australian and very proud of what we have achieved as a state and sector in supporting older Australians. My background in health, aged care and community services is diverse and spans more than 20 years in senior executive roles across government, community and commercial sectors. That included working overseas in health and aged care which gives me a useful insight into opportunities for further development.

My passion for aged care began in the early 1990s as a clinician in major teaching hospitals and community services, and it remains just as strong today. Seeing the resilience of people in regional and remote Western Australia, the innovation and resourcefulness of staff in providing good service and the outcomes achieved continues to amaze me. For me, aged care is about recognising we are all ageing — it's a natural part of life's journey.

As service providers we need to remind ourselves that older Australians in our care are no different from you and I. They have dreams, aspirations and expectations. So we need to create opportunities for people as they age to live the kind of life they choose as far as possible. Everyone has a unique story and each person who receives services is an individual. It's really important that everything centres around the excitement

of life. That for me what it comes down to: the excitement of life and the opportunities that can create for each individual.

Positive ageing is about spiritual, physical, emotional, social and psychological wellbeing. I think sometimes care focuses on the health and deficit aspects rather than taking a holistic view.

Person-centred care is something I've been closely involved with for more than twenty years. Whether it is in acute care, a community based service or a residential facility, it's the cornerstone of good practice. We need to keep holding the mirror up to ourselves to check we are getting it right. It's an ongoing journey of progress, learning and discovery.

I joined Mercy Health in September 2014. What attracted me to this leadership role was Mercy Health's values. It's such an exciting opportunity to lead our growth and development in Western Australia. As a national entity we are well positioned to respond to the current and emerging needs of Australians.

One of the exciting things about Mercy Health's care footprint is that it enables us to provide



Anita Ghose, State Manager
Western Australia, Mercy Health

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seamless care for those in an acute care setting, through to residential aged care, home care, independent living and community. The expertise and wisdom within and across the organisation is shared and accessible.

I love working as part of a team within the Mercy Health 'family' and collaborating with our other ministries. It feels energising and I think the future for health and aged care with Mercy Health leading the way looks very promising.



Spotlight: Kevin Costa Community Advisor

Community involvement is nothing new to Kevin Costa. Kevin hails from Geelong, where he was a partner in the famous Costa family fruit and vegetable business. In 1995 Kevin retired to spend time with his youngest son Richard, who has been diagnosed with muscular dystrophy (MD). MD has hit the Costa family hard: Kevin's eldest son Matthew had passed away only three years earlier, at the age of 21.

Kevin used his early retirement to travel with Richard, exploring America. Sadly, in 2004 Richard also lost his battle with MD. Both Richard and Matthew had shown remarkable fortitude in coping with the disease. Both boys needed an electric wheelchair by the time they were eleven, yet this did not stop them from attending school, university, travelling overseas and accompanying Kevin to cheer on their beloved Cats at Kardinia Park.

Witnessing the courage of his two sons was a powerful motivator for Kevin as a volunteer coordinator at Mercy Place Rice Village, Geelong in 2004 — a role he holds to this day. And this involvement in turn led to Kevin's 2008 recruitment to Mercy Health's Consumer Advisory Council (CAC). The CAC was formed to give the community direct input into Mercy Health policies, procedures and communications — especially the information we give to patients, families and carers.

Kevin has a keen understanding of the CAC's value. "It's vital to communicate clearly, simply and warmly with patients, family and carers," he confirms. Kevin describes the CAC role as a 'contributor', ensuring Mercy documents are readable and accessible for consumers.

"The commitment is not at all onerous," says Kevin. "If anything, I believe the CAC could play an even stronger role in improving hospital publications."

Kevin's long-standing community service does not stop with the CAC. In 1995 he helped establish the St Joseph's Foundation which works on behalf of St Joseph's College, Geelong. Kevin currently sits on the Foundation's board as well as on the board of Anam Cara Geelong, a hospice service. Kevin is also an occasional guest speaker on Vision Radio, Belmont, which serves vision-impaired people.

For Kevin Costa the words "Care First" are no hollow motto. They have long been his way of life — and continue to be so.

Tell someone who cares: become a Mercy Health Community Advisor

Mercy Health is looking for more consumers, carers, families and community members to help us improve our services. We have various consumer roles ready to fill.

You can:

- join the Mercy Health Community Advisory Committee
- join the Werribee Community Advisory Group
- help us set up the Mercy Hospital for Women Community Advisory Group
- become a Community Information Advisor and help us create health information that is easier to read
- represent consumers and the community in other Mercy Health committees.

If you or someone you know is a current or past consumer or family member, or you simply want to help us improve our services, we'd love to hear from you!

Contact Bec Jolly on (03) 8416 7872 or rjolly@mercy.com.au to find out more.



Kevin Costa,
Community Advisor

Ways to give

Many of the stories you read in *Our Voice* have been made possible through the support of the Mercy Health Foundation and the generosity of our donors.

Your support makes a difference in the advancement and innovation of care for women, newborn babies, the elderly, sick and dying.

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Your feedback...

We hope you've enjoyed the winter edition of *Our Voice*, Mercy Health's groupwide newsletter. Through *Our Voice* we share the stories of our people and those we care for from across the organisation including aged care, health services, palliative care, mental health and home care.

Please send your feedback and stories to *Our Voice* via the details below:

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Richmond VIC 3121

Phone: 03 8416 7753

Email: ourvoice@mercy.com.au



Same
Our Voice will be back
in December with
our summer edition.
In the meantime you can
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