



*caring
for you*



Mercy Health caring for:

people in hospital, at home
and in residential aged care



elders with a lifetime of experience

clients in mental
health programs
parents and babies
from all walks of life



our people

carers and volunteers

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Patients, residents, clients, carers and family are at the centre of everything we do.

Care first

Our guiding principle at Mercy Health is “care first”.

This means we put caring for people above all else.

We are compassionate and responsive to all who entrust us with their care.

Mercy Health is a Catholic provider which cares for people from all faiths and cultures.

We employ people who come from all around the world.

We are connected through our values so we can work as a team to care for people day and night.

Our values of compassion, hospitality, respect, innovation, stewardship and teamwork guide us in all that we do.

This report is a snapshot of the different ways we care for you. It covers health, aged and community programs and some new ideas to provide better care.

What is quality care?

A “quality” experience is very personal. It is different for each person, depending on their needs and wants.

One of the best ways we can cater for people’s differences is to have a clear vision of what quality care looks like to us and what it looks like to the people we care for.

Consistent with our Christian heritage we start with the idea that patients, residents, clients, carers and family are at the centre of everything we do.

Then we look at ways we can deliver care that is in keeping with our values and industry standards.

We make these our everyday practices so that all of our people know what is expected of them when they care for others.

To keep each other on track we record, measure and evaluate the work we do. In this way we can see what is working, what is not working and how we can improve our performance.

This process is documented in Mercy Health’s Clinical Governance Framework, which guides the way we behave in all of the services we provide.



Being seen and heard: Consumer participation

Your opinions matter because you are at the centre of everything we do.

There are formal and informal ways you can give us feedback about your needs and your experiences at Mercy Health. Your views assist us in the way we plan, deliver, evaluate and improve our health services.

In 2012 the Mercy Health Community Advisory Committee

was established to give input on our services. An early achievement was the creation of a Community Engagement Plan which outlines key priorities and our commitment to community participation.

In 2013 a new Community Advisory Group was established

for Werribee Mercy Hospital to gain input from local consumers and carers.

The members of the Community Advisory Group come from a range of backgrounds and provide valuable understanding and links to local communities.



Meet *Ms Say Htoo Eh Moero,* **Community Advisory Group, Werribee Mercy Hospital**

Ms Say Htoo Eh Moero came to Australia as a refugee 13 years ago and faced many challenges adapting to life in Australia. Today she is a case worker at the Wyndham Community and Education Centre in the south western region of Melbourne. Say Htoo Eh is able to assist new residents adjust to life in Australia after their experiences in refugee camps along the Thai-Burma border or in Sudan.

Her passion and commitment stems from her own experience and understanding of the needs of people who have faced similar challenges.

Say Htoo Eh's job as a case worker ranges from providing practical assistance to providing emotional support. It is challenging work as many refugees suffer physical and mental health problems from living in refugee camps.

Say Htoo Eh received the Case Worker of the Year Award at the inaugural Migration and Settlement Awards in Canberra in March 2013.

As a member of the Community Advisory Group, Say Htoo Eh is keen to provide a bridge between different cultural groups and Werribee Mercy Hospital.

Writing clearly and simply

It is important that the information we give to people is easy to understand so they can make informed decisions and understand how to participate in their treatment and care.

To assist the process of creating information for the public, a Community Information Advisors Program was created during the year.

A group of volunteers has been recruited into the program to review publications and give feedback on how print materials can be improved. Mercy Health currently has over 30 reviewers from diverse backgrounds and interests: from disability care to culturally specific care.

Advisors can give feedback through face-to-face meetings, surveys, questionnaires, information displays or written statements.

Publications that have been reviewed in one or more of these ways get the “community reviewed” tick.



Feedback on the 2011-12 Quality and Care A Year in Review

We ask patients, clients, carers and other members of the community to give feedback on Mercy Health's *Quality and Care A Year in Review* before and after it is published. This includes discussion groups with people who use our services and input from our Community Advisory Committee and Community Information Advisors.

The feedback on last year's review was positive.

People liked the:

- Design
- Stories
- Data
- Benchmarks

They said they became more aware of the services provided by Mercy Health and our commitment to improving the quality of care we provide.

Suggestions on how to improve the review, such as providing more practical case studies, have been integrated into this year's review.

How the review is distributed

Copies are placed in:

- Reception areas and waiting rooms in our hospitals and clinics
- Residential aged care homes
- Home care service offices
- Information packs

The review is also given to some healthcare providers like GPs. Copies are sent to the Department of Health and other agencies who fund our services. For people who prefer to read an electronic copy, a PDF of the review is available online at mercyhealth.com.au.

You are at the centre of care

Mercy Health is committed to care that respects and values all people.

We aim to deliver care that is respectful of and responsive to the needs and values of the people we serve. This includes listening, encouraging and supporting participation in decision making by patients, residents, carers and families.

Patient centred care in hospitals

The Victorian Government monitors the level of satisfaction adult patients feel about the care and services they experience in public hospitals. This public

health information is used to assist hospitals improve the care they provide. Patients are asked to rate their satisfaction, with a rating of five being “excellent”.

According to the Victorian Patient Satisfaction Monitor, Mercy

Hospital for Women and Werribee Mercy Hospital have both performed well on the following five indicators:

- The opportunity to ask questions about your condition or treatment
- The way staff involved you in decisions about your care
- The willingness of hospital staff to listen to your healthcare problems
- Your cultural or religious needs respected by the hospital
- Your personal safety

All of these indicators are vital in delivering patient centred care.

Person centred care in aged care

Mercy Health cares for older people in 11 residential aged care homes in Victoria and southern New South Wales.

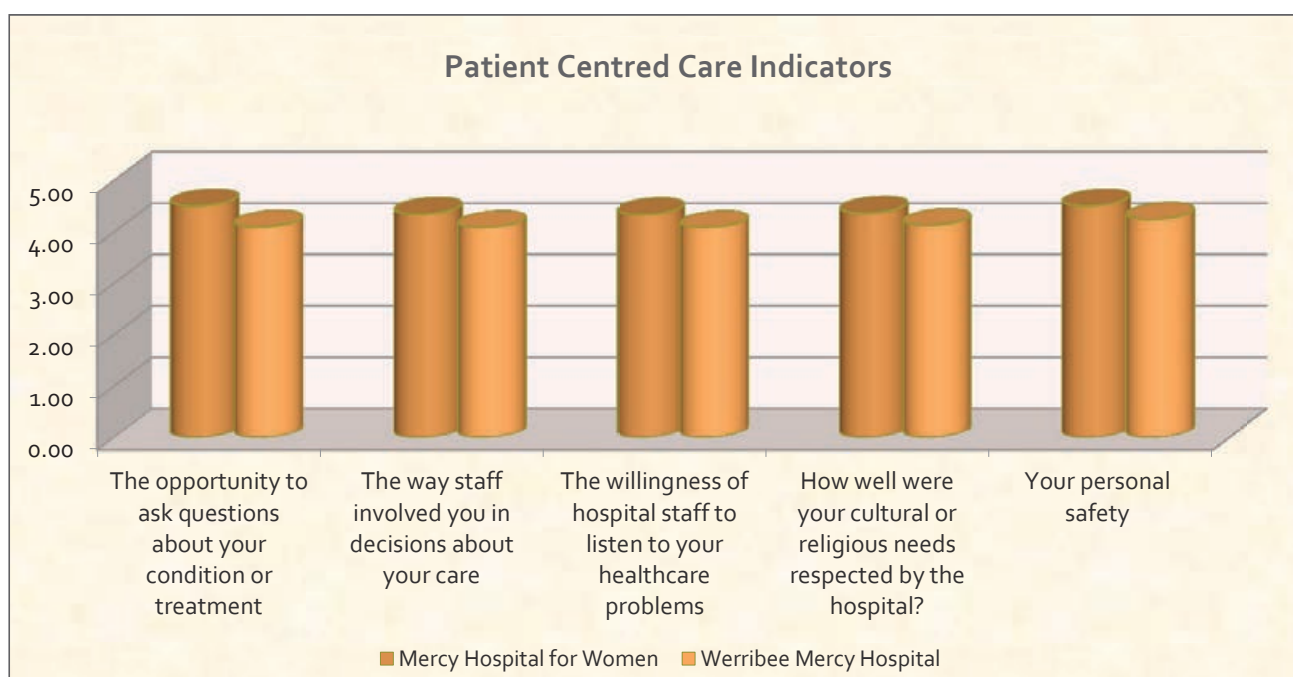
Our philosophy of compassionate care is brought to life in each of our aged care homes as we:

- Value each person and their life story knowing this is what makes them who they are today
- Welcome people into a home like environment where they feel safe, comfortable and valued
- Partner with residents and families to nurture individual health, emotional, social and spiritual wellbeing
- Encourage independence and support people to live their lives to their fullest potential

Each day we aim to provide residents with the opportunity to have the best day possible.



We care for the whole person.



(Source: Victorian Patient Satisfaction Monitor June 2013)

Resident rights survey

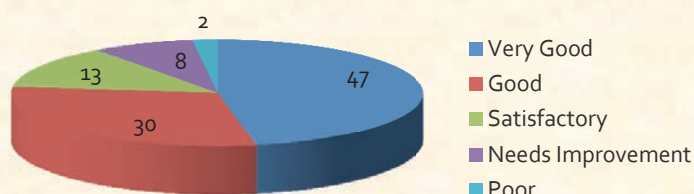
Getting feedback from residents is an important way to improve quality of care.

In February 2013 a “resident rights” survey was undertaken for the first time across all of Mercy Health’s residential aged care homes. This involved surveying a number of residents and their representatives to find out their level of satisfaction on topics such as quality of care; respect for privacy, dignity and the right to make decisions; and the complaints process. Of the 142 residents who were contacted, 95 responded.

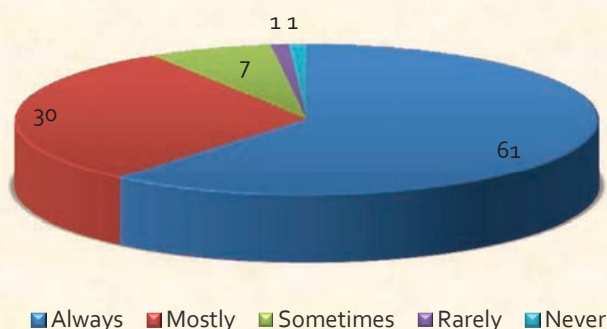
These findings have been shared with staff and residents and have been used to plan further improvements.

To monitor the impact of any new strategies, the survey is now undertaken twice a year. Results will be reported in next year’s *Quality and Care A Year in Review*.

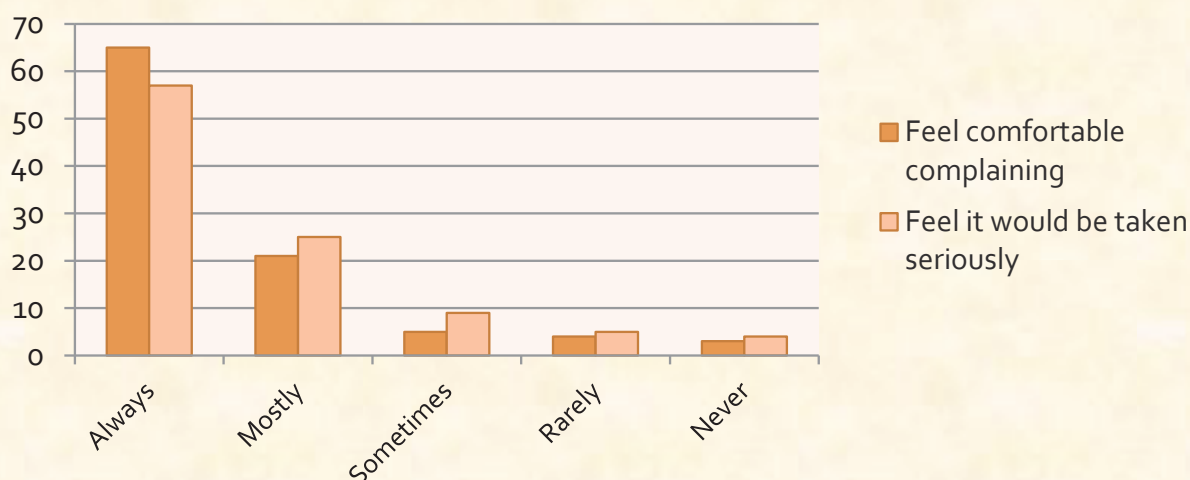
Quality of Care by Mercy Health Staff



Privacy, Dignity and Decision Making Rights Respected



% Satisfaction with Complaints Process





Mercy Place Rice Village has introduced a buddy program to welcome new residents and make them feel welcome.

“Buddy Program”

Moving home is a challenging and emotional time for everyone. For older people and their families it can be particularly difficult.

In Geelong, Victoria, Mercy Place Rice Village is home to more than 180 people. The Village caters for a wide range of needs through independent living units, serviced apartments and residential aged care.

To help new residents settle in and make them feel welcome, staff have introduced a buddy program.

The program assists new residents to feel part of the

community and enables them to integrate into their new environment and lifestyle.

Residents with various interests and suitable people skills are recruited for the program and are supported in their role by the Lifestyle Coordinator.

The program has been working for new residents in a number of ways. It has helped people feel accepted, has reduced loneliness and anxiety, has increased trust and has given families peace of mind. The program has also created opportunities for residents to make friends and gives the “buddy” a greater sense of purpose.

In 2012 the program received a Better Practice Award from the Aged Care Standards & Accreditation Agency.

Seeing things differently

Mercy Place Montrose in Victoria provides residential aged care for 109 people; 28 of whom are living with dementia.

Providing responsive and respectful care for people living with dementia can create many challenges, particularly because many current residential facilities have not been designed to care for their needs.

To overcome some design limitations at Mercy Place

Montrose, staff have come up with an innovative solution.

The entry/exit door to the area of the home catering for people living with dementia had glass panels to improve visibility for staff. However, these panels limited residents' freedom of movement as the door was locked for safety.

Staff members could see that a number of residents were at the door getting anxious as they watched people moving around freely on the other side, but could not open the door themselves. So they came up with an innovative solution. They found two local artists who volunteered their time to paint murals that camouflage the door but still provide visibility for staff. By cleverly integrating the artwork for residents and visibility for staff, this solution has been a real win-win.

The learnings from this great initiative can easily be adapted by other aged care homes.

It is well recognised that the number of people with dementia will increase significantly in the future. According to Alzheimer's Australia there are over 321,600 Australians living with dementia and more than 50 per cent of residents in Australian Government subsidised aged care facilities have dementia.

The mural has had a positive impact not just for residents, but also staff and visitors.

Residents are less anxious, confused or frustrated as they no longer see the mural as a door but as a pleasant image to be enjoyed.

Staff members no longer see residents in distress and the workplace is more productive. They can focus on interacting with residents positively rather than having to calm their anxiety.



The mural at Mercy Place Montrose is pleasing to residents, staff and visitors alike.



Respect and care are universal languages.

Respecting difference

We are committed to providing care for people from all faiths and cultures.

Following a review in 2012-13, the Mercy Health Cultural Diversity Committee was replaced by the Mercy Health Diversity and Equity Committee.

The new committee operates at a strategic level and is responsible for developing, implementing and monitoring the strategy for gender equality,

cultural responsiveness and community participation. It provides regular updates to Mercy Health's Executive Group and the Mercy Health Community Advisory Committee.

In this way we can confirm our commitment to respecting difference at all levels of our organisation.

We treat all people equally.

In a snapshot...

People	Mercy Hospital for Women	Werribee Mercy Hospital	Mercy Mental Health Services
Who were born overseas	26% of patients	35% of patients	30% of patients
Who came from different countries	155 countries	152 countries	83 countries
Who speak a language other than English at home	17% 96 languages	7% 88 languages	11% 46 languages
Who need an interpreter	6% of all patients	3% of all patients	Not available at this stage
Who need an interpreter and have used an interpreter	96% of outpatients 81% of inpatients	74% of outpatients 14% of inpatients	841 services provided in 32 languages



We care for people who come from 180 countries, speak 100 languages and follow 70 religions.

Patient information is provided in 50 different languages, which includes internal and external translations.

Interpreter services

It is important to provide professional interpreters to assist communication between health professionals and patients who have limited English. Through interpreter services, accurate information can be given and

received, patients can give informed consent and their rights can be upheld.

We are committed to meeting the language needs of all patients and their families and the challenges that arise for different groups. One example

is the significant shortage of interpreters in various languages, especially in new and emerging communities. Some community members only speak rare dialects, which makes it even more challenging to meet people's language needs.

A review is now being conducted at Werribee Mercy Hospital to identify ways to improve access to and use of professional interpreters.

Education classes presented in other languages

For many years antenatal education in English, Chinese and Vietnamese languages has been offered at Mercy Hospital for Women to prepare parents for labour, birth and early parenthood.

This year, the Multicultural Services Unit and the Antenatal Education Department began education classes for Arabic speaking families.

Arabic speaking patients are the second largest non-English speaking group attending the hospital. Following a review of the classes, patients and family members reported that they were delighted to attend these sessions.

A highly regarded service

The Multicultural Services Unit at Mercy Hospital for Women is highly regarded for its innovation. The Unit is regularly invited to comment on cultural diversity and responsiveness in healthcare, locally and nationally.

This includes:

- A keynote address on cultural issues in relation to infant safe sleeping at a statewide forum organised by the Victorian Child Safety Commissioner
- Participation in the National Summit on Female Genital Mutilation by invitation from the Federal Minister for Health

- Active participation in the Migrant and Refugee Working Group. The group is contributing to the National Antenatal Care Guidelines which are being developed by the Federal Department of Health and Ageing.

Training staff in cultural diversity and equity

We are committed to employing staff from a diverse range of backgrounds and experiences. Our inclusive, values based organisation respects and values individual differences.

All Mercy Health staff have access to diversity and equity training through our online e-learning resources. This compulsory learning module was developed

"As a male I don't know anything about this topic. I learned so much in a short period. Our interpreter has been of great value. Although my English is good, there is no way I could translate all the woman topics and phrases and words to my wife. My wife has understood everything. She feels confident and empowered because of this."

Young husband

"Culturally, Middle Eastern and North African mums rely on other experienced family members to educate and support them throughout their journey of pregnancy and child birth. Antenatal education is the perfect substitute. However, the idea of attending parent education classes can be unfamiliar to expecting women. That is why the Multicultural Services Unit worked hand in hand with the Antenatal Education Department to promote this valuable service to Arabic speaking couples while preserving cultural sensitivity."

**Ms Naira Riad,
Arabic interpreter**

"Culture plays a major role in the way a woman prepares for her birthing experience. Each culture has its own attitudes, values and beliefs surrounding pregnancy and birth. Group learning lets people ask questions and hear comments from other participants. Learning in a supportive environment with people from the same culture and background has the potential to increase participants' confidence in asking questions, and building supportive contacts and friendships with other group members. It can also reduce anxiety and fear of the unknown."

**Ms Rosemary Nuttall,
Mercy Health Educator**

*What people
had to say...*



Our inclusive, values based organisation respects and values individual differences.

for all new staff members and current staff are required to complete the diversity and equity training. Currently 42 per cent of our employees have completed this new training module. Our aim is for all existing employees to complete the training by 31 December 2013 and for all new employees to complete training within three months of starting in their new role.

At Mercy Hospital for Women new staff orientation includes an introduction to multicultural services

and how we provide culturally responsive care.

Workshops and seminars are also offered on specific topics so that staff have access to up-to-date information so they can provide appropriate care.

Talk about incontinence: A problem in anyone's language

As part of World Continence Week 2013, which targeted culturally and linguistically diverse communities, Mercy Hospital for Women took an interactive

approach to raise awareness of this important issue.

Activities included:

- Lunchtime staff pelvic floor muscles exercise class
- Promotional language display
- Information stall on “increasing fibre in traditional cultural dishes”
- Educational in-service training for medical staff, midwives, nurses and allied health professionals

This initiative won the first prize in the World Continence Week promotion competition.

Congratulations to...

Ms Suong Nguyen, Childbirth Educator, Vietnamese and Chinese Program at Mercy Hospital for Women who received the 2012 Victorian Multicultural Award for Excellence for her work with migrant women at Mercy Hospital for Women.

In 2013, Ms Saveuy Mangala, Environmental Services Supervisor at Mercy Hospital for Women was inducted into the Victorian Refugee Recognition Record for her outstanding work in the community to support refugees in settling in and adapting to living in Australia.



We partner with residents, patients and carers to provide care for each individual.

Being ethical and responsible

At Mercy Health we understand that no person or system is perfect.

It is a reality that mistakes can, and do, happen when dealing with human beings. Therefore, we use every experience, every step, every situation as an opportunity to learn from experience and minimise the risk of mistakes happening.

We have processes that assist us to be accountable and responsible. We are also guided by the following principles when we make decisions about the care we provide.

- Partnerships are made with patients, residents, clients and their carers. They are at the centre of, and are involved in, decision making. Care provided is easy to get when needed and respects and responds to individual needs, choices and values.

Our values of compassion, hospitality, respect, innovation, stewardship and teamwork guide us in all that we do.

- Up-to-date knowledge and evidence is used to guide decisions about care. Data is collected, analysed and fed back to create improvement.
- Safety is a central feature of how our healthcare services are run, how staff work and how funding is organised.

A culture of continuous improvement exists which is focused on learning and improving, rather than on blaming. Formal open disclosure processes are in place. Clinical risk management is part of our organisational wide risk management program.

Our Serious Incident Review Committees respond to serious adverse patient outcomes and high risk near miss events. The committees oversee the investigation process and ensure effective recommendations are implemented.

Continual improvements in care

We use every opportunity we can to learn from each other so we can serve people better.

One example of excellent teamwork is the feedback Mercy Health O'Connell Family Centre received from the Australian Council on Healthcare Standards (ACHS) in its periodic review in 2012.

ACHS commended the Centre on the high quality services it provides to families. Their clinical governance was assessed as sound and supported by evidence based clinical practice. The surveyors noted a strong commitment by staff to quality improvement which led to many measurable improvements in its services. The assessment commented on the very positive and inclusive culture where staff work as a team, are supported and recognised, and professional development is encouraged.

The assessors were particularly impressed by the follow up phone calls staff make to discharged families to make sure they were managing well.

They were also impressed by the warm environment staff provide for clients and families.

The Centre also recorded a strong result for its considerable

focus on providing families with quality parenting pathways through programs such as Cradle to Kinder, Play Steps and Baby Play.



Each child is at the centre of care. Their wellbeing, development and safety are the primary focus while care is provided to the whole family.

Caring for carers

Meeting the needs of patients and carers is an important aspect of palliative care services. Carers are increasingly recognised as key partners in the palliative care team and unfortunately their needs are not always fully met.

To assist in the ongoing improvement of care for patients and carers, Mercy Palliative Care in Victoria has been selected to participate in the Support for Carers continuous quality improvement collaborative project by the National Standard Assessment Program.

The aim of the project is to make sure:

- The needs of carers of palliative care patients are identified
- An action plan is developed and implemented so that carers are supported in a way that promotes their health, wellbeing and personal aspirations
- A monitoring tool is used to assist in measuring any changes in the quality of care Mercy Palliative Care provides, not only for patients but also for their carers

In response to the project the number of carers receiving a

holistic assessment from a health professional has increased. The number of referrals to Allied Health Services to provide psychological and personal care has also increased, ensuring the needs of carers are being met.

Caring for the whole person

As a Catholic organisation, Mercy Health greatly values the spiritual, religious and personal dimensions of each person.

Pastoral care has long been established in healthcare, but is fairly recent in aged care. Today, every Mercy Health residential



Photo courtesy of Ms Linda Espile

Carers are supported in a way that promotes their health, wellbeing and personal aspirations.



A Reverie Harp is a unique instrument that anyone can play. It is used to bring comfort, peace and relaxation to people in our care.

aged care home has a part time Pastoral Care Associate. These professionals offer respectful and compassionate listening; opportunities for people to tell their stories, hopes and fears; resources to promote inner strength; and rituals to deal with the ageing process.

Ongoing support and training for our Pastoral Care Associates is an important aspect of our care for staff and of our commitment to continued improvement and innovation.

At one of our pastoral workshops Mr Peter Roberts, a member of the pastoral care team at St John of God Hospital in Geelong, inspired our Pastoral Care Associates to start using a Reverie Harp in their pastoral care.

A Reverie Harp is a unique instrument that anyone can play. "It is tuned in such a way that by just gently stroking your fingers across the strings it will make soothing sounds," says Peter. "It is small enough to be hand held or placed on a cushion or on someone's knee."

"The therapeutic benefits of the Reverie Harp are far reaching. Music has the ability to reach

across boundaries of language and, from a therapeutic perspective, it has proven to be a great tool for interaction, relaxation and confidence building."

All of our residential aged care homes now have a Reverie Harp. Pastoral Care Associates and others play the harp to bring comfort, peace and relaxation to the people in our care.

Pastoral care recognises that all people attempt to make meaning of their experience and the spiritual and personal dimension of their life.

Pastoral care is available to all people regardless of culture or beliefs.

A culture of continual learning

Staff training is an important aspect of quality improvement at Mercy Health.

Five mandatory training modules have been set up online so they can be accessed by staff at any time and from any facility. The modules include orientation, diversity and equity, work health and safety, infection control and emergency procedures.

All new staff are required to complete the online training and current staff are required to complete the modules once a year. In addition to the mandatory competencies, departments and facilities

provide ongoing professional development and training tailored for staff as needed.

To increase current levels of participation, strategies are being developed to ensure staff complete their training as required and participation rates are reported to the CEO and Executive on a monthly basis.

New document management system

Policies, procedures, guidelines and protocols are used to guide our staff in all areas of their work and the care they provide.

To make sure staff are accessing the latest version of all these important documents, Mercy

Health implemented a new document management system. This online system gives staff quick, simple access to up-to-date information.

The system is based on best practice document management principles, including ease of access, reliability and security.

An innovative function includes email alerts and reminders to the person who is responsible for keeping a document up to date.

Processes for developing and reviewing documents have also been reviewed to improve efficiency, consistency and reliability.

The new system went live in August 2013 and has been well received by staff.

Mercy Health Training Institute is a registered training organisation that provides nationally recognised qualifications and non-accredited training to meet individual and industry requirements. Mercy Health staff are encouraged to continue developing professionally and students are provided with work placements at Mercy Health facilities.

Being safe

Implementing effective systems across our services means the care we provide is not only compassionate and respectful, but safe and efficient.

Infection control

Mercy Health is committed to systems and practices that minimise risk for patients, residents and staff. Infection prevention and control is central to providing high quality healthcare and a safe environment for all.

Hand hygiene

Hand hygiene generally refers to the use of soap and water or a hand sanitation gel by healthcare workers to clean their hands at key moments.

The Mercy Health compliance rate is based on audits that involve observing hand hygiene moments.

There are five hand hygiene moments:

- Before touching a patient
- Before a procedure
- After a procedure
- After touching a patient
- After touching a patient's surroundings

All patients are encouraged to ask if staff have cleaned their hands before they provide care.

The number of hand hygiene moments observed varies based on the size of the facility. As an example, Werribee Mercy Hospital (a large community hospital) had 1,065 observed hand hygiene moments whereas Mercy Health Albury (a small subacute hospital) had 264 observations for the same assessment period. See chart top right.

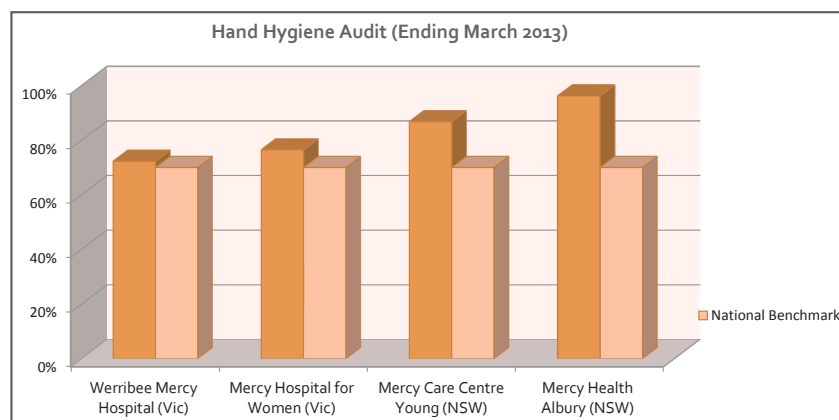
We continually work to improve our compliance through training, ongoing monitoring and by placing hand sanitation gel around each facility. This encourages staff and visitors to clean their hands before coming in contact with patients and residents.

Staphylococcus Aureus Bacteraemia (SAB)

SAB is a bloodstream infection caused by one type of bacteria that patients sometimes develop during the course of medical care or treatment provided by hospitals.

Although commonly found on the skin or in the nose or throats of healthy people, SAB can cause serious health complications for some patients.

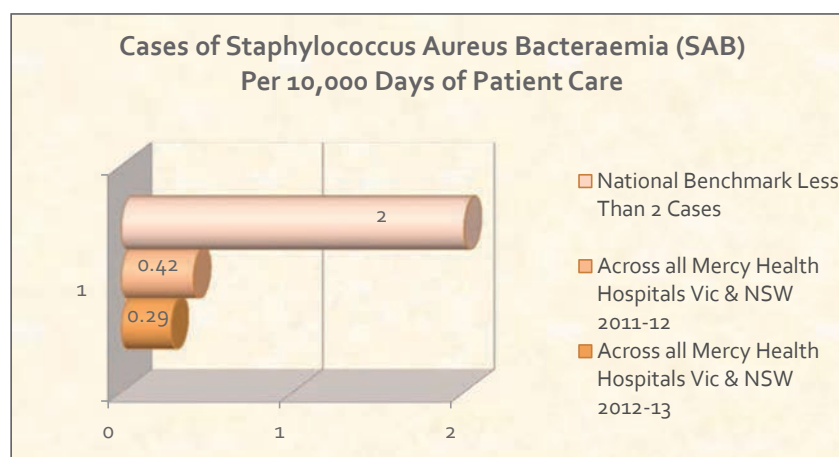
The main factors that affect the rate of SAB within hospitals include the size of the hospital and the proportion of vulnerable patients within each hospital. See chart middle right.



The compliance rates for hand hygiene across Mercy Health's hospitals are above benchmark.

The number of healthcare associated SAB bloodstream infections across Mercy Health hospitals were four cases for 126,564 days of patient care in one year.

This is well below the national benchmark of less than two cases per 10,000 days of patient care.



Medication errors

Medication is a common form of treatment in hospitals, residential aged care, in home and community care.

But, as with any treatment, there are some risks involved.

Medication incidents include adverse drug reactions, medication pharmacy errors and documentation errors.

All incidents are reviewed for opportunities to improve and more detailed reviews are conducted when an event is serious.

In 2012-13, Mercy Health's public hospitals reported 354 medication related incidents which represented 2.6 incidents per 1,000 bed days. Of these incidents four were regarded as serious. Two related to a wrong medication being administered, but neither patient experienced harm. Two related to an adverse drug reaction, which could not have been predicted. Again neither patient experienced any harm.

In 2013 Werribee Mercy Hospital and Mercy Hospital for Women combined their medication committees. The new committee is reviewing all medication practices to ensure consistency and best practice across the organisation.

All medication errors are further reviewed by Mercy Health's Pharmacy Advisory Group and reported to the Clinical Safety and Quality and Risk Committee and Clinical Governance Committee to prevent recurrence and improve practice.

Incidence of pressure injuries

Pressure injuries are a common problem in aged care facilities.

A pressure injury, sometimes referred to as a bed sore, is an area of skin and underlying tissue that has been damaged due to constant pressure.

People at risk are those who have to stay in bed for a long time or be in a chair or wheelchair due to illness or limited mobility. Pressure injuries can be prevented through screening, assessment and implementation of appropriate care plans.

Quality improvement to reduce risk of pressure injuries

Werribee Mercy Hospital has replaced 77 beds and pressure relieving mattresses to improve patient comfort and reduce the risk of pressure injuries for patients. This strategy is part of the ongoing commitment by Mercy Health to renew equipment and has also achieved health and safety outcomes for staff.

Falls and falls related injuries

Falls and fall related injuries are an important safety issue for hospitals and residential aged care homes. The risk increases with factors such as illness and unsteadiness, adapting to new environments, taking new medication and a history of falls.

Minimising the risk of falls and fall related injuries, while ensuring that patients remain mobile, is an important safety and quality of care issue.

While we cannot prevent every fall we aim to prevent falls and minimise the consequences

where possible. To do this we use risk assessments, incident reporting, staff training and auditing, and adapting the physical environment to reduce the number of falls and the severity of injuries experienced if patients fall.

Falls in our residential aged care homes

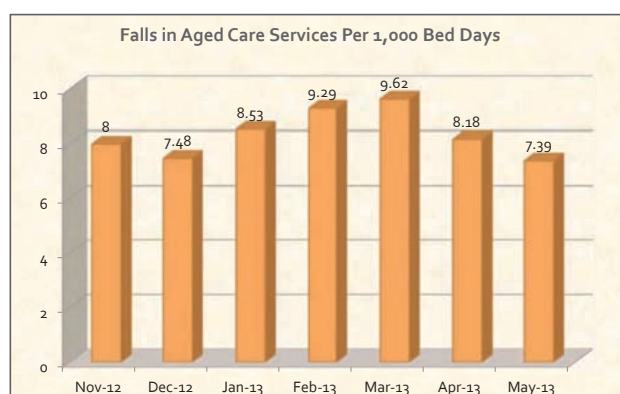
The number of falls across our residential aged care homes is less than the industry threshold of 10 falls per 1,000 bed days. See graph below.

Care first indicators

To improve care in our residential aged care homes a range of clinical and lifestyles indicators have been established and are regularly measured and monitored by staff.

Clinical indicators include falls, infections, medication, pressure injuries, weight loss and urinary tract infections.

Lifestyle indicators include participation in lifestyle activities, resident and family meetings within eight weeks of each resident settling in, and response time to requests for maintenance of equipment.



Falls per 1,000 bed days in Mercy Health residential aged care homes.

Any significant changes to these indicators are investigated to identify potential causes. Strategies are then developed to ensure we meet residents' physical and social needs.

Falls

Reducing the risk of falls and minimising any injuries caused by falls is essential in residential aged care.

Each of our aged care homes collects a number of care first indicators, including falls, to assist in care management. Indicators are not definitive measures of quality of care and service, rather they note potential issues. Where a home continually gets less than optimal indicator results an improvement activity will be actioned. An example from Mercy Place Albury in New

South Wales demonstrates how the falls indicator showed that for January to April 2013 the rate of falls was higher than the industry average (4-10 falls per 1,000 bed days). Improvement actions were then put in place, which included increased physiotherapy reviews, medication reviews by GPs and completion of a Falls Investigation Tool for each fall. The outcome was that the falls rate fell to within the accepted range in May and this was sustained in June.

See chart below.



Moderate Risk



High Risk



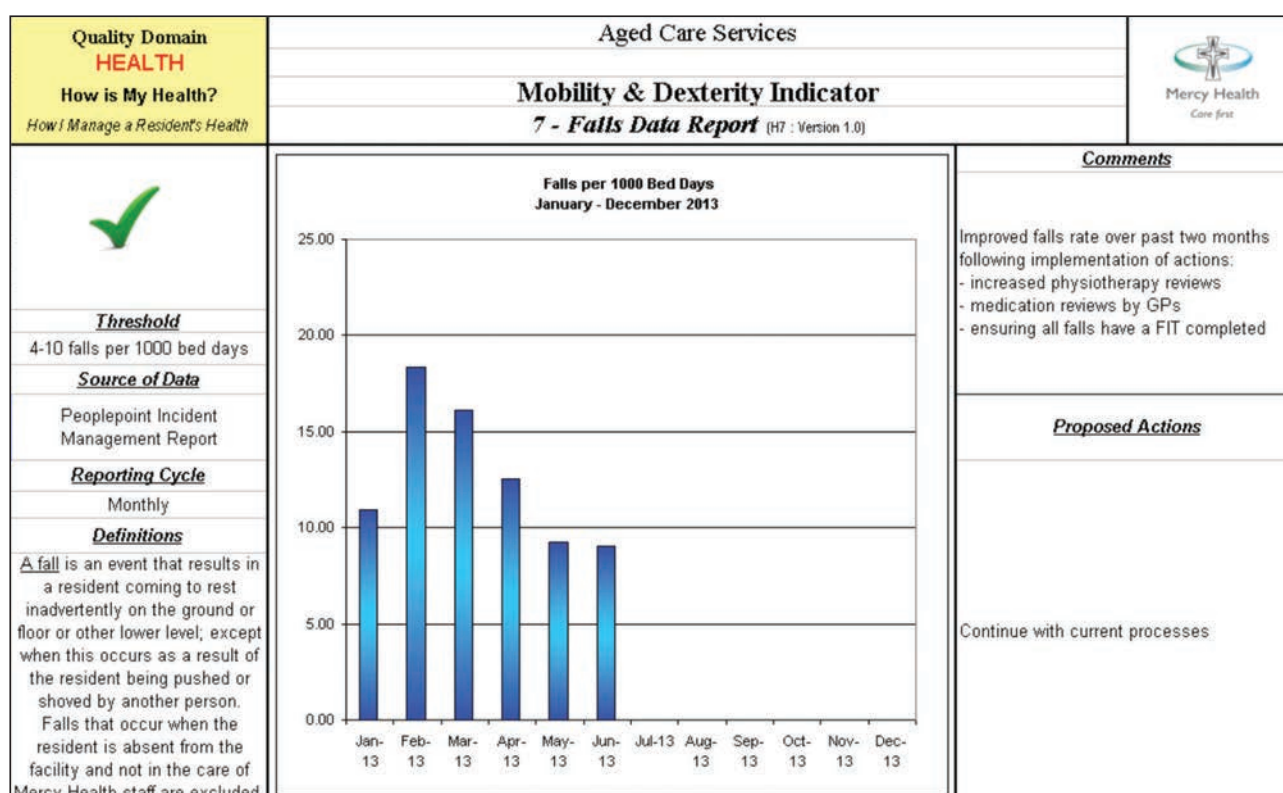
Wanderer

Alert flags

Our residential aged care homes have introduced an innovative strategy to discreetly identify those residents who have been assessed as having an increased risk of falls.

Alert flags are placed on room signage, mobility aids and handover documents as a visual prompt for staff while preserving the privacy and dignity of residents.

See diagram below.





From the smallest details to the more prominent design features in the Maternity Services Unit at Werribee Mercy Hospital, we have created a place for care, hospitality and respect that truly celebrates new life.

Caring for our communities

Access to appropriate healthcare facilities is an important aspect of providing quality services.

The western region of Melbourne is the fastest growing in Victoria. It is predicted the region will accommodate more than 40 per cent of metropolitan growth over the next 40 years, with the population set to exceed 1.1 million in 2021.

The main catchment areas for Werribee Mercy Hospital are Wyndham and Melton, which are two of the fastest growing local government areas in the country. Together they have the fastest population growth in the age group of 30 to 54 years. With the rise in this demographic 2012-13 saw over 3,900 babies

born in the City of Wyndham alone, which is approximately 11 babies a day.

Additionally, Melbourne's west has a higher than average incidence of cardiovascular disease, diabetes and other related health issues putting considerable pressure on already stretched health services.

The demand for health services in the west will continue to grow rapidly given the substantial increase in population and the increase in chronic disease. In response Werribee Mercy Hospital has developed a master plan to expand its services over

the next decade. This includes maternity, mental health and community rehabilitation services, an integrated care centre as well as a clinical learning centre to provide accommodation and training facilities for students.

In October 2012 the new Maternity Services Unit was officially opened. It includes 16 special care cots, a 24 bed maternity unit and refurbished delivery rooms. All rooms have ensuite bathrooms and a built in bath for the baby. Every cot in the Special Care Nursery has a space for privacy and for a parent to stay by their baby's side.

Empowering patients to improve their quality of life

Mercy Health Lymphoedema Services support approximately 3,500 people to manage this chronic condition. In the past year Mercy Health Lymphoedema Services

provided over 7,000 occasions of service to assess, educate, treat and support people with lymphoedema or who are at risk of developing lymphoedema.

A range of specialists and healthcare professionals work with patients to self manage their condition, empower them and offer choices about how

to live with lymphoedema. For many patients, lymphoedema is just one of the health issues that they have to manage. Therefore, access to community supports, ongoing treatment and reviews is central to their capacity to manage their day-to-day tasks and improve their quality of life.



Meet Ms Joann Formosa,

Para-equestrian

As part of Lymphoedema Awareness Month in March 2013, Mercy Health Lymphoedema Services hosted an Iced Tea Party. This event raised awareness of the early signs and symptoms of lymphoedema and helped to fund education and medical research to help sufferers of the condition.

During this event London Paralympian and patient of the clinic, Ms Joann Formosa delivered an inspiring speech about following personal dreams when living with lymphoedema. Joann spoke from personal experience as she has faced many challenges in own her life. Joann has spinal cord and nerve damage caused by a horse riding accident, which led her to develop secondary lymphoedema in her legs.

Determined to represent Australia in the 2012 London Paralympics, Joann was able to return to the sport she is so passionate about with support from Mercy Health Lymphoedema Services. After an intensive care program, Joann's dream came true when she represented Australia and won her first gold medal. Joann said, "I wanted to be in the top 10, but I really I wanted the gold. I knew what I wanted. I may not be good at walking, but I'm good at getting what I want."

Joann is a true inspiration to people living with this incurable condition. She has personally encouraged so many people to improve their quality of life and achieve their own personal goals.



The Young Mums Clinic provides obstetric care, education, personal, psychological and social support for young women attending Mercy Hospital for Women.

Connected and ongoing care

We are committed to innovation, flexibility and partnerships to provide ongoing care.

Young Mums

Through our Victorian hospitals we deliver more than 8,000 babies each year.

We recognise that women have different needs and they want the care that best suits their circumstances.

For mothers who are less than 20 years of age, the Young Mums Clinic at Mercy Hospital

for Women offers care for mothers and families before, during and after the birth of their babies.

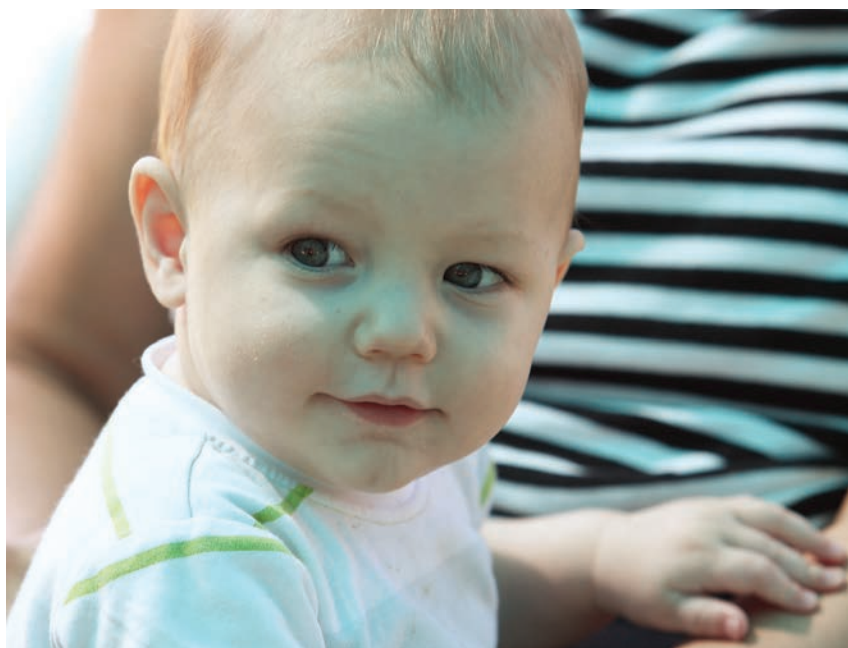
The Young Mums team provides antenatal classes, social work services, psychiatric services, obstetric care and general support from the time of referral until after their baby is born. Other support includes budgeting, housing, education options and counselling

addressing social impacts on health.

The Young Mums team is available to all young women attending Mercy Hospital for Women.

Early parenting

Becoming a new parent can be a very exciting experience, but for some women and families the journey can be very difficult.



The aim of Mercy Health O'Connell Family Centre is to set children and families up for life.

Personal challenges can impact on the health and wellbeing of the child, the mother or the whole family.

Mercy Health O'Connell Family Centre is a specialist early parenting centre supporting families of 0-4 year olds across Victoria. Services include residential, day and community programs, home based parenting education and support.

In December 2013 Mercy Health O'Connell Family Centre was surveyed by the Australian Council on Healthcare Standards. The report stated, "There are a number of projects which have improved quality across the service and the organisation including clinical based projects such as Cradle to Kinder, Play Steps and Baby Play..."

Services are provided by a multidisciplinary team of professionals including nurses, midwives, mothercraft nurses, early childhood workers, a psychiatrist and a psychologist.

In addition to the residential and community programs, there are group sessions, information and discussion sessions designed for "Making Parenting Easy" and a Father Zone which is a one day education and support program specifically for men.

The Centre also offers a weekly Dad's Night for fathers of children in the residential program. This program provides a "father friendly" environment so that men can share their experiences, explore parenting issues and strategies to enable them to feel more confident, take a more active role in caring for their children and supporting their partner.

Collaborative and innovative healthcare

The Mercy Mental Health Community Care Units provide clinical support in a residential setting for people experiencing mental illness.

According to the National Mental Health Commission people living with mental illness are also more likely to have poor physical health, including higher risk of diabetes and heart problems. Improving physical health and providing an integrated and collaborative approach to managing clients' overall health and wellbeing has therefore been identified as a priority and good practice by the Commission.

To support clients more holistically, the Mercy Mental Health team has developed and implemented an innovative eight week program in partnership with the Mental Illness Fellowship and Wyndham Council to encourage and support healthy and active living.

As part of the program residents plan, prepare and cook healthy meals and share food in a supportive environment. They also attend the gym regularly to manage additional health issues such as weight gain, high blood pressure and high cholesterol. "Healthy living, both mentally and physically, has a great effect on your recovery. We set goals and make make plans that are based on you as an individual." *Resident, Mercy Mental Health Community Care Units*

Mercy Palliative Care

Our palliative care teams are committed to providing compassionate support to people with terminal illness, as well as their family and carers, during these emotional and stressful times.

Mercy Palliative Care offers services such as pain management, respite care and support to patients, family members and carers; nursing and medical services; counselling; pastoral care; bereavement support and

other therapies such as music therapy.

The care teams focus on quality of life when cure is no longer possible.

Approximately 60 volunteers provide additional support, companionship and respite and fill a valuable gap between staff and family support. Volunteers receive comprehensive training and ongoing support to assist them in their challenging and rewarding role.

Patients and families greatly appreciate the support provided

by volunteers. Often the little things can make a real difference in the support and care they receive.

Many volunteers are people who have supported a family member of their own during their end-of-life journey. They value the opportunity to support others during this time, knowing how difficult it can be.

In an average month, volunteers provide around 150 hours of support to palliative care patients and families.

Volunteers have said:

"To be with people at this time of their life is a sacred moment, a time of deep reflection, a challenge, a window into your own living, and a shared experience I will always treasure."

"I like to help people. Sitting with people when they are waiting at hospitals, we chat and become like friends. I don't see illness, I see the person. I am a keeper of secrets."

Palliative care volunteers honoured in Minister's award

On 15 May 2013, the Palliative Care Volunteer Equipment Delivery Team received the Minister for Health Volunteer Award for Metropolitan Team Achievement. This award highlights and celebrates volunteering and recognises the individuals and teams who demonstrate outstanding dedication and commitment to public healthcare in Victoria.

The Palliative Care Volunteer Equipment Delivery Team is responsible for the delivery and pick up of palliative care equipment to culturally and linguistically diverse families. Mercy Palliative Care lends wheelchairs and other equipment to assist patients and their carers. The service enables patients to remain in their own homes for longer and avoid hospitalisation. The team includes volunteers Mr Reno Attard, Mr Barrie Bowers, Mr Dan Gavaghan and Mr David Frost who have in excess of 54 years of combined service to Mercy Palliative Care.

"This particular volunteer role can be confronting," said Ms Shirley Lee, Volunteer Coordinator, Mercy Palliative Care. "Volunteers will often have to not only pick up equipment but also clean and maintain equipment during transportation. The support of our dedicated volunteers is essential to this service."



Ms Geraldine Walsh, Research Nurse and Dr Jim Holberton, Neonatologist are part of the Mercy Hospital for Women research team involved in the Australian Placental Transfusion Study.

Research and development

The needs of everyday people drive our research in women's and babies' health, mental health, palliative care and aged care services.

We support research throughout the organisation and encourage innovative projects so we can continually improve the care that patients receive here and around the world.

We thank all of our researchers, project partners, sponsors, donors and funders for their dedication and congratulate our researchers on their great achievements.

Mercy Pregnancy and Emotional Wellbeing Study

This study recruited approximately 300 first time mothers in 2012 and will follow them until their children are two years of age in the first phase of this project. The study will examine changes in women and babies across pregnancy, childbirth and in the early years of childhood and parenting. The research team will examine many

of the areas of most concern to new mothers such as breastfeeding, mother and baby sleeping patterns and how the relationship between a mother and her baby develops during pregnancy and when the baby is very young.

Australian Placental Transfusion Study

A team of researchers, midwives, doctors and patients at Mercy Hospital for Women are participating in the Australian Placental Transfusion Study – a project that could change the way premature babies are cared for at birth. It is standard practice today that when a baby is born its umbilical cord is clamped and cut and he or she is quickly held

up to the mother. For premature babies the process is fairly similar, though these babies can go on to develop a number of difficult conditions and health concerns. This study is very important as it may improve health outcomes for premature babies.

Tall Poppy

Dr Tu'uhevaha Kaitu'u-Lino is a Postdoctoral Fellow in the Translational Obstetrics Group at Mercy Hospital for Women. She received a National Health and Medical Research Council "New Investigator" grant (2013-15) to fund ongoing research into the biology of pre-eclampsia. Dr Kaitu'u-Lino also received the 2012 Tall Poppy Science Award for Medical Research into Women's Health.

You can read more in the *2012 Mercy Health Research and Development Report*. Go to mercyhealth.com.au.

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Your feedback

This report is one way of the ways you can give your feedback on Mercy Health's services and publications.

Please send comments or suggestions to:

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Richmond Vic 3121

Email: information@mercy.com.au

Web: http://mercyhealth.com.au/About_Us/Contact_Us/

Where we are located

Mercy Health cares for people in Victoria, southern New South Wales and the Australian Capital Territory.

Health services

Victoria

Mercy Hospital for Women,
Heidelberg: 03 8458 4444

Mercy Health Lymphoedema Services,
Heidelberg 03 8458 4949,
East Melbourne: 03 8458 4990

Mercy Health O'Connell Family Centre,
Canterbury: 03 8416 7600

Werribee Mercy Hospital, Werribee: 03 8754 3000

Mercy Mental Health, Saltwater Clinic,
Footscray: 03 9928 7444

Mercy Mental Health Triage Service: 1300 657 259

Mercy Palliative Care: 03 9364 9777

Mercy Grief Services: 03 9364 9838

New South Wales

Mercy Health Albury: 02 6042 1400

Mercy Care Centre Young: 02 6382 8444

Aged care

Victoria

Mercy Health Bethlehem Home for the Aged,
Bendigo: 03 5440 8200

Mercy Place Colac: 03 5233 5600

Mercy Place East Melbourne: 03 9413 1777

Mercy Place Montrose: 03 9724 6000

Mercy Place Parkville: 03 9385 9222

Mercy Place Rice Village, Geelong: 03 5241 3686

Mercy Place Shepparton: 03 5832 0900

Mercy Place Warrnambool: 03 5564 2800

Mercy Place Wyndham, Werribee: 03 8734 6500

New South Wales

Mercy Place Albury: 02 6024 9500

Mercy Place Mount St Joseph's,
Young: 02 6380 1300

Home and community care

Victoria

Mercy Home Care:
City of Melbourne: 03 9658 9733

Colac: 03 5233 5600

Geelong: 03 5240 7300

North West Metropolitan Melbourne: 03 9385 9444

South East Metropolitan Melbourne: 03 8530 6999

Australian Capital Territory

Mercy Home Care:
Canberra: 02 6228 9600

Training and education

Mercy Health Training Institute: 03 9261 2085

Support and administrative services

Mercy Health: 03 8416 7777

Mercy Health Foundation

Richmond: 03 8416 7766

Careers

For careers information at Mercy Health go to:
careers.mercy.com.au



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