



Mercy Health Albury

If the walls of Mercy Health Albury could talk, they'd tell an inspiring tale of mutual giving. In 2004 the hospital faced an uncertain future due to funding cuts. The local community responded in force by launching the Mercy Million Building Appeal, raising more than \$1.5 million to refurbish their iconic healthcare provider.

This outpouring of support inadvertently launched another act of generosity: Mercy Health Albury's own annual fundraising activities led by their staff Health & Wellbeing Committee.

"It's one of the main reasons we feel it's important to give back to our community," confirms Rita Kidd, Administration Officer and Committee Coordinator. "In the past three years we've had a Christmas in July Kris Kringle donation drive to benefit local charities that preferably get limited or no funding and rely on donations.

"In 2012 we chose the Carevan Albury which provides meals to the needy and homeless in our local area, collecting nonperishable food items for them. Then in 2013, we supported the Albury Wodonga Pet Rescue by donating dog and cat food, toys, leads and much more.

"This year, as the numbers of homeless people in our area continue to rise, we chose St Matthew's Church in Albury which offers them food and

shelter. Our staff and volunteers gave blankets, tinned food items, toiletries and personal care items."

The Committee's compassionate gifts don't just benefit their loyal community. "It's a great feeling that we, as an organisation, can help in a small way," Rita remarks. "The generosity of our staff is overwhelming and inspires us to continue this tradition every year to help those in need.

"Our next goal is to start an organisational Kris Kringle tov donation for local children's charities. We're sure that will be well supported too given the generosity everyone has shown to date."

It's something that has a real emotional impact on the residents; they can see how much planning and energy goes into it"



Christmas can be a joyful time to celebrate and relax with loved ones, but can also deepen loneliness when time and distance keep them apart. That's when the contributions of our volunteer community really come to the fore, and nowhere more joyously than at Mercy Place Rice Village.

Volunteer group Friends of Rice Village kick off festivities each year with a Christmas fair held in late November, an opportunity to reminisce about the past year with residents and staff.

The celebrations start in earnest from early December. "We decorate the facility in time for the Christmas lunches for the Independent Living Units, hostel and nursing home," says Sharon Carrato, Lifestyle Coordinator. "They're beautiful; they have entertainers, everyone gets chocolates and Santa comes dressed up (that's usually Bob Price, one of our longest-serving Friends of Rice Village).

"Throughout December we run Christmas-themed activities like craft. This year we might create a decoration featuring photos of each resident with a Christmas hat and scarf on. We have carols sung by the residents' choir and run activities around how Christmas is celebrated in other countries, complete with foods like shortbreads and puddings. Families are always welcome to join in; one of the staff members' granddaughters comes here every year dressed up in her Christmas outfit and gives everyone a chocolate."

Christmas spirit at Mercy Place Rice Village Back row: volunteer Keith Smith and Friends of Rice Village President Bob Price (aka Santa). Front row: Volunteer Barb Smith and Lifestyle

Coordinator Sharon Carrato.

As the big day approaches volunteers Keith and Barb Smith organise a special Christmas lights excursion. "It's something that has a real emotional impact on the residents; they can see how much planning and energy goes into it," Sharon says. "Keith and Barb research where the lights are going to be and work out a safe route for the bus. When it pulls up at the last house, Keith appears dressed as Santa and hands out chocolates. We make sure everyone who wants to go has a chance to see the lights."

While staff take a brief but well-earned break over the holiday period, volunteers keep the Christmas cheer alive. "The volunteers come in over the break to visit isolated residents," Sharon says. "We all make sure everyone knows they're not alone."

Donations given by generous Mercy Health Albury staff were gratefully received by Albury Wodonga Pet Rescue and Carevan Albury

To Rita and all in the Transitional Aged Care Unit at Mercy Health Albury,

A BIG thank you from all the rescue dogs, pups, cats and kittens at Albury Wodonga Animal Rescue.

Warm Regards,

Dallas Sargeant President

Dear Staff.

The Carevan Foundation would like to thank you all for your recent generous donation of grocery items raised from your Christmas in July event. It is very encouraging to receive this kind of support from our Community and we are very grateful to you.

Your assistance has helped us in our bid to feed, house and educate the homeless, the disadvantaged and young people in need in rural, regional and remote Australia.

Please accept this certificate in appreciation for your contribution to the Carevan Foundation.

Thank you, your assistance is greatly appreciated

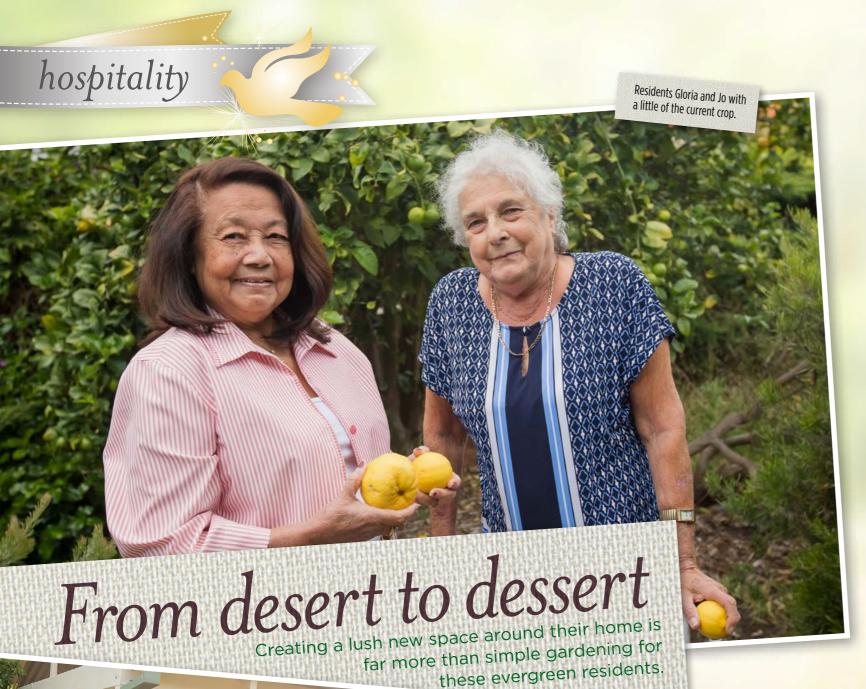
Kind Regards.

Jodie Thomas Chief Executive Officer

Carevan Foundation







rs Green Fingers, Madame Worm Farm and Mr Baker: no, these are not characters from a fairytale but three residents of St Brigid's Villa Maria Independent Living Units and members of the home's 'Village Green' committee.

They are magicians nonetheless, transforming bare earth around the units into a bountiful oasis of fruits and vegetables ready to be baked, bottled and shared with fellow residents, staff and the local community alike.

"This area was formerly nicknamed 'the desert'!" Trish 'Madame Worm Farm' West enthuses about the gardens and veggie patch now growing under the Village Green's tender

loving care. "Bev (Mrs Green Fingers) our close neighbour, started the veggie patch on extra ground that we have at the back of our units. Bev is a wonderful gardener and looks after our end of the village. We've had to start on a small scale, so some of our produce has been in large pots. So it's very much in its infancy, as is the worm farm which was a present to me for my birthday."

"We've had some potatoes, lettuces and carrots already," adds Marguerite Rye, Village Green president. "We're also growing citrus fruits like lemons and mandarins but they haven't fruited yet. It's not going to sustain the whole village at the moment but we've may have found some more room in the grounds where we could grow more and get other people interested in looking after it. Now that we've got the ball rolling..."

The veggie patches, worm farm and central green area with resident-designed gazebo gave the committee freedom to create a shared resource for the enjoyment of residents and visitors. Modest though the harvest may be right now, it is already finding its way into meals and recipes, recalling the tradition of European community 'allotments'. Just as those spaces were a focus of local life and work, so the Villa Maria versions give residents an opportunity to keep creating, contributing - and even discovering new passions.

"I never had an interest in gardening until I came here," Trish admits. "But it's absolutely been magic to put something in the ground and watch it grow and then be able to eat it!

"That's one of the greatest things, when you dig it up out of the ground it's so satisfying instead of buying it off a supermarket shelf," Marguerite agrees. "They come up so quickly!

"Our fourth committee member, Helge (Mr Baker) is an exprofessional pastry cook, who had his own shop. He makes baked goods like biscuits, cakes and tarts for residents' gatherings and functions. He's a good person to know! And once the fruit trees start to produce he hopes to use the results in his recipes."

Channelling a lifetime's worth of experience into their new community is a key part of the Village Green's attraction for its members. "I was chased around the village when I first arrived by people saying 'We need someone new for the committee with new ideas," Trish says. "I like helping people and it just seemed a natural progression to join the committee. I felt that I have time now that I'm not working to be as helpful as possible."

"I was in the committee for some years, had a break then was asked to come back," adds Marguerite. "There's a lot more we'd like to do. I just love doing the charity side of it, it's a bit of a passion for me."

"Marguerite is really good at trouble shooting," Trish says. "We recently ran a very successful charity event, Christmas in July. Because the veggie patch was still bedding down she went to Woolworths and the manager was happy to give us \$60 to spend on groceries."

"We also had donations from someone in the village (a large ham) and we raised \$600 for Camp Quality," Margeurite adds. "A representative from Camp Quality came down and had lunch with us, then sent us a really lovely letter to thank us."

66

But it's absolutely been magic to put something in the ground and watch it grow and then be able to eat it!"

The committee is looking forward to getting more of Villa Maria's residents involved in nurturing the gardens – and community spirit. They hope to fundraise for their own garden supplies to keep the cycle of mutual reward turning. "When people offer us goods or help we use it in our work to pass it on," Marguerite confirms, "so others can benefit as well as us."



Village Green committee members Marguerite

and Trish with fellow residents Mike and George in the garden pergola.



A bridge to understanding

Beneath the vibrant colours, scents and sounds of Melbourne's diverse western region lie stories of immense personal sacrifice — and transcendence.

huy Dinh has heard many of these stories. In her 18 years as Trans-cultural Clinician/ Case Manager at Saltwater Clinic she has become a trusted partner with local communities, helping them navigate cultural and linguistic barriers to better mental health. All too often, the pain of their mental health experiences is worsened by the trauma, loss and grief they have endured. It's complex but deeply rewarding territory.

"I have three main roles here," Thuy explains. "The first is direct case management and clinical support for clients from culturally and linguistically diverse [CALD] backgrounds. The second is to help my colleagues understand Vietnamese and other cultures so they can offer people culturally sensitive and effective support on their journey to recovery. My third role is as a mental health knowledge and cultural bridge between the mainstream and Asian communities. For example if someone from the Vietnamese

or Chinese community needs help to understand Victoria's mental health system I can assist them."

Thuy's work at both an individual and community level not only offers clinical support but equips communities to better manage mental health issues themselves.

"One of my key roles is to provide community education," Thuy confirms. "That includes workshops for CALD communities, education sessions for carers and families and information for the general public on how to access mental healthcare.

"In recent years I've presented a talk series on Vietnamese SBS radio about mental health. Each 10-18 week series covered topics like anxiety, depression and psychosis, so that could reach the homes of carers and, families and hard-to-reach people in the community.

"I've also formed partnerships with other Vietnamese mental health workers in western Melbourne. Together we run regular activities for children of parents with mental illness, a three-day camp for families, clients and carers and a school holiday family outing.

"We also run a relationship night once a year for couples where one partner has a mental illness. It's a dinner with a quest speaker: we explore how to improve improve family relationships and have fun together. And we run a women's group which brings clients and carers together to share and learn from each others' experiences. Over the years we've found group participants have had a lower hospital readmission rate."

Thuy's role is especially valuable in reaching out to the most vulnerable in our society. "We see many people from refugee backgrounds or who are seeking asylum," she confirms. "They often carry the trauma of their earlier experiences. So they

might have multiple diagnoses which are often extreme. On top of these they may face isolation, unstable accommodation, unemployment, drug and alcohol problems and other negative ways of coping. Feelings of shame and stigma can mean they keep their problems inside the community or family before coming to us for help."

It would be easy to lose hope under so much hardship, yet Thuy can testify to how the right support can help people transcend suffering to find health and hope.

"I found in the first few years I worked here the Vietnamese community faced similar problems with meeting their basic needs and trying to resettle into their new homeland. Many were not aware of the mental health services available.

"Over time I've noticed improved awareness and access of mental health services by the community. They know where to seek help and what their rights are. Families are now better able

to recognise and react to early warning signs thanks to improved mental health literacy."

Thuy Dinh

at Saltwater Clinic

Trans-cultural Clinician/Case Manager

I've watched our staff

become highly skilled in working with people from

emerging communities"

Thuy attributes much of the progress in mental health made by the region's CALD communities to Saltwater's team of dedicated trans-cultural clinicians and collaboration between services.

"I've watched our staff become highly skilled in working with people from a emerging communities, including the Burmese and North African communities," she says proudly. "The main reasons I have stayed here so long are both my passion for mental health and great support from my colleagues and management team."

Respecting the integrity of every culture's beliefs is key to fostering trust and healing. "It's important to realise the mainstream Australian way of understanding mental illness is different to the Asian way. So I include cultural, religious and spiritual aspects in my work as well as help people develop awareness of their mental health.

'Recently I worked with a Vietnamese lady who kept stopping her medication; each time she needed hospital admission which is very traumatic. I met with her family and once the trust between her mother and I had built up, she admitted she had asked her daughter to stop taking medication and seek traditional help because the family was worried about the side effects. I brought the family together with the client's doctor to discuss why it was important to keep treating her illness, but also how they could implement cultural treatment. So we found a compromise.

"Another client came to me after her child had passed away. She had become deeply depressed. Her family believed she should stop thinking about her son so his spirit could be released. She could not cry, mourn or go to his grave because she had to prove to him that she was all right so he could move on.

"So we said 'You can come here and cry with us, you can talk to us about your child and show us his pictures.' She was really helped by that."

Mercy Health | 7 6 | Our Voice

innovation

Alullaby

Lucy Forrest's music may be one of the last sounds the children in her care hear. It's a gift that transcends language, culture and faith.

he sound is so subtle it could have been blown here on the wind. Its beauty unfurls slowly in the heart as much as the head. Lucy Forrest is playing her harp, as she does for many who need support but may never have imagined it could take this form.

"I think it's the unique sound the harp makes that drew me to it," says Lucy, music therapist with Mercy Palliative Care. "It's very sweet, gentle and soothing. Many describe it as 'transcendental'; it takes them to a completely different space."

While music's power is no revelation for Lucy, its application in her music therapy is breaking new ground. "I think I was playing music before I could walk and talk!" she says. "But there hasn't been a lot of research into music therapy for paediatric patients in palliative care. That's why my PhD study looks at how music and music therapy can benefit the children and their families, specifically those from diverse cultural backgrounds."

Lucy's lifelong joy in music shows its transformative power can be felt from an early age. There can be few more poignant examples than in her work with children facing life-threatening illness, "There are two aspects to my work: the music and the music therapy," Lucy explains. "A lot of what I do is teaching families how they might use music to support the child while they're sick and also to support siblings and parents. In music therapy I provide opportunities for fun, shared activities where families can't do the same things together anymore.

"So the child who used to kick the footy with dad perhaps can't do that now because of the illness and disability that comes with that. Music becomes an activity they can still share. It might include playing instruments, making up and singing songs, engaging in imaginative musical play or listening to relaxing music together."

It's this transcendent quality that makes music both a unique and highly effective therapy. "I work with a lot of children who are non-verbal, particularly those with neurological conditions," says Lucy. "So the work I do with them might be sensory stimulation and engagement, to help them interact and express themselves. Where they're not able to do that through speech, they often can through music."

That music can also transcend culture is clear not only in Lucy's study but in her experience of practising music therapy in Melbourne's diverse western region. "I've looked back at all my patients over my years with Mercy Palliative Care and I've rarely had two from the same cultural background," she notes. "Each family's engagement with palliative care and music is very individual."

Working with families from many cultures offers Lucy rich opportunities both to support and learn from them. "It's fascinating to discover how each community uses music for health and healing," she says. "Some cultures don't have a word to describe the concept of relaxation. You have to think about how to describe that using music. One lady said it was 'the lullaby for her heart' when I played my harp, that her heart rested. I thought 'what a beautiful analogy' - she was describing how music reduced her anxiety.

"If people have songs that are important to them I'll try and incorporate them in our sessions. Families often teach me lullabies or other songs in their own language. It's very rewarding as a musician but challenging too!

Those memories ... and the recordings where they can still hear the sound of the child's voice and can listen to it at any time are really vital"

Recently I sang in Danish for a mother who taught me songs from her homeland to sing to her little boy, and we'd sing those together."

The deepest reward is watching her work offer holistic comfort to each child. "Often children who enter end-of-life care have pain and other symptoms, so I work to support and relax them. It's less about actively engaging them, instead using receptive music therapy methods to bring them to a calmer, more comfortable place.

"If a child is short of breath, the symptom itself is causing anxiety

> Lucy Forrest: "I love my job. It's a joy for me to share

> > music with people."

and physical tension. I create a musical structure to help regulate their breathing to a more settled rhythm and to physically relax them. Music that's supportive and familiar can also reduce their anxiety so it works at a number of different levels."

Lucy's work also offers a precious gift to parents at a time of unimaginable grief. "For parents the music is very special. It's useful not just when the child is with us but in bereavement care as well. Those memories from the music sessions and the recordings where they can still hear the sound of the child's voice are really vital."

Lucy has to pause when asked if her job is hard. "When a child is dying it can be very tough. The music takes them into a very intimate space. It brings up a lot of memories and feelings and you're sharing in that. It's a great privilege but it can also be immensely sad.

"But I love my job. It's also a lot of fun and a joy for me to share music with people. I think for me that's what it's really about. It's not just playing music but knowing you can make a difference to their day."

Raising the profile of music therapy

Lucy's innovative PhD study has won her the inaugural Palliative Care Research Network of Victoria (PCRNV) PhD Scholarship, an accolade that will help raise the profile of music therapy and its benefits. "It's great to have that recognition of the research I'm doing, to boost music therapy in paediatric palliative care and to have that supported."



stewardship

Babies, blokes, barbecues and bonding

Mercy Health O'Connell Family Centre knows many new dads are hungry for support — so they're bringing them together in a ground breaking new program

very Wednesday evening in Melbourne's leafy Mont Albert, a great Australian tradition is observed: a group of men stands around a smoking barbecue, turning the sausages and chatting. Look closer and you'll spot a few less traditional elements: the barbie hosts new fathers taking part in a residential family program at Mercy Health's O'Connell Family Centre (OFC); the chat might include admissions that adjusting to being a dad is far from easy.

Such insights are reluctantly given outside the safety of OFC's walls; the 'Babies, Blokes and BBQs' groups offer a rare sanctuary where paternal doubts and fears can be laid bare and worked through together. Participants are drawn from some of Victoria's most vulnerable families: those facing financial and social disadvantage and their all too common companions, family breakdown, alcohol or

drug abuse, emotional or physical violence. Extraordinary pressures magnify the challenges many men face in early fatherhood.

"The dads we see often describe a sense of disempowerment." explains Matthew Roberts, Psychiatrist at OFC and coconvenor of the fathers' group. "Many are first time fathers with young children, often babies. They may have negative feelings about what they've lost in becoming parents. They often talk about the conflict between work and home, feeling they can't do a good job at either. Some feel they're not as good at parenting as their partners, that they don't have the same rights to be involved and create relationships with their children.

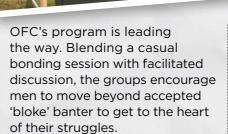
"Our groups tackle two issues: the effect on paternal mental health of maternal mental illness and the equal importance of fathers in the lives of their children. The idea is connection

and validation, but the validation comes from the connection. So while I can talk about attachment theory and fatherhood, it's important I don't get in the way of the dads bonding with each other. That seems to be the most powerful and enduring thing."

Resources abound to help new mothers navigate the first few months of parenthood. Yet the pivotal role - and needs - of the person supporting them are too often overlooked. While fathers under socioeconomic stress may feel these needs more keenly than others, supporting new dads is a community-wide cause.

"When we look for both dads' suffering and difficulties and also for the things they do well, we find both," Matthew says. "And it's possible to miss just how many dads are doing it tough and how good they are. when given the opportunity, at meeting the needs of their children in ways that are special to how fathers do things.

"It comes down to fairness: there isn't an equivalent for dads of the mothers' groups which are universal and so vital for mothers of babies and young children. There's basically nothing that's universal for dads. That needs to change."



"While we'd been running sessions for a while, we'd had trouble generating numbers so we looked at creating a different model," says Kirsty Evans, OFC's Manager/Director of Nursing. "So we now start with a play session where dads can just enjoy their children, then the men have a relaxed meal together, then a discussion with Matthew and our male early childcare worker Matt Hayes.

"After the groups we've held so far, we've had to almost drag the dads out still chatting. One group got together again the following night and bought pizzas so they could keep bonding and share contact details. Just having that opportunity to break down barriers in an informal setting clearly allowed them to feel comfortable enough to share their experiences."

"I find when I start with 'here are some good reasons to be involved with your children from the outset' you can almost see them sit up taller in their seats,"

Matthew says. "They've been carrying some kind of shame about the job they feel they're not doing. Seeing the difference in their body language is tremendously rewarding.

"Any reservations they've had are often gone by the end of the evening. They may say 'I wasn't sure about this' but by the end they're saying 'Why isn't there more like this available?"

This invaluable space has been created with support from the Inger Rice Foundation which funds programs to improve relationships between parents and young children. Their \$5,000 grant recognises that fathers' groups could transform the way dads view and fulfil their roles, with benefits for future generations. OFC's research into paternal mental health adds even more weight to their case for improved support for fathers.

"We've been measuring fathers' depression anxiety stress scale numbers and they back up what we see in the groups: while not as high as the mothers' scales show, they're still significant," Matthew confirms. "In maternal child health services we're universally screening mums for postnatal depression but we're not doing that for dads. So the

After the groups we've held so far, we've had to almost drag the dads out still chatting"

An opportunity to break down barriers Kirsty Evans and Matthew Roberts

problem of untreated mental ill health amongst dads may be a significant issue."

Realising you're not alone is key for anyone riding out the turbulence of early parenthood. But for OFC's dads, connectedness is even more critical.

"What we're trying to do is connect these fathers together so they can continue to support each other, and to join others together through social media and other avenues," Kirsty confirms.

It may look like an old-fashioned barbecue, but from its flames a new tradition is born.





he land-locked country of Nepal, located in the spectacular Himalayan region between India and China, is not a wealthy country — at least in material terms. Nepal is ranked 145 out of 187 on the Human Development Index (HDI), and unemployment and underemployment approaches 50% of the working-age population. Adult Illiteracy rates are also high, measuring at 65.9% in 2011.

While material wealth is no sure measure of happiness, opportunities for Nepalese children to choose how to spend their lives are extremely limited. Education is the key to improving their future, and it's for this reason that Mercy Health Acting Neonatal Clinic Support Nurse Melinda Arnold is heading to Nepal on an aid mission.

In November and December 2014 Melinda will accompany her husband Andy and a school group from Heritage College in Officer, Victoria to build and equip a new school library in Bhuvaneshwari, a small village one hour from the Nepalese capital of Kathmandu. The expedition, run by aid organisation Adventist Development and Relief Agency (ADRA), will have to hike part of the way into the remote region.

Melinda became aware of the project through her church in Narre Warren and felt a strong compulsion to take part.

"I've seen students return from previous Nepal trips with ADRA and witnessed first-hand how positive the experience has been, and how much it has affected them," Melinda says.

"The exposure prompts the kids to think beyond themselves; to think about what they can do for others and to appreciate how truly lucky they are. The change is really amazing." Melinda has never travelled to Nepal before, and her own experience of extreme poverty is limited; she fully expects to be challenged and moved by the experience. Caring for others, particularly children, is a long-term passion. Melinda has worked in neonatal intensive care for 12 years, the past four and half years of those at Mercy Hospital for Women.

"I initially worked for Mercy Health through an agency, but I was so impressed with the people and the collaborative culture of the organisation that I decided to apply for a permanent position. I love it here."

While Melinda and Andy do not have children of their own, they gain a great deal of satisfaction from mentoring young people.

"In reality, we're only two or three years younger than the students' parents — but because we're not their parents, the kids can really open up to us," she observes. "Andy in particular has mentored a number of teenagers, a stage when kids can sometimes go off track. More than a couple have credited Andy with helping them through difficult times."

And it seems that the kids who are going on this trip, at least, are certainly on the right track. "They're putting service to others above Schoolies' Week," says Melinda, "which is a pretty inspiring thing for a teenager to do, when you think about it."

Inspiring it is — and a wonderful example of mutual benefit through teamwork. It's clear that as beneficial as the project will be for the children of Nepal, it will also be an unforgettable experience for Melinda and the rest of the expedition team.

For more information on ADRA's aid work visit **www.adra.org.au**.



The exposure prompts the kids to think beyond themselves; to think about what they can do for others and to appreciate how truly lucky they are."



S r Kathleen Mullins brings a fresh perspective to Mercy Health's Community Advisory Committee (CAC).

A professed Sister of Mercy for 54 years, Sr Kathleen has spent the vast majority of her working life teaching young children throughout Victoria.

"I'm not from health, but I do have extensive life experience, and a strong history of community involvement that I bring to the role," says Sr Kathleen. "In Bendigo and Euroa I served as Principal of each region's Catholic primary school, and was also Chairperson of the Euroa community centre, The Exchange." Now re-branded as the Euroa Community Education

Centre (ECEC), The Exchange was established in 1975 as a place for community members to swap ideas and services. It continues provide vocational and community education and training.

Such a rich history of community leadership has more than qualified Sr Kathleen to contribute valuable insights to Mercy Health's CAC.

"Initially I served on the advisory committee at Mercy Place Rice Village, and then I was given an application form for the central Community Advisory Committee when it started in 2008," Sr Kathleen says.

As part of the CAC Sr Kathleen is one of a diverse group of

••••••••••••••••••••••••••••••••••••

community representatives providing feedback on Mercy Health publications either at bi-monthly meetings or by email between meetings.

"Everybody on the CAC has the opportunity for some input," Sr Kathleen says. "It gives you a voice and your opinion is taken on board. It is certainly a worthwhile involvement."

Become a Mercy Health Community Advisor

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





t is with a mixture of pride and gratitude that I look back at Mercy Health's advances in care over the past year. This year alone we have taken great strides in perinatal health and mental health research that are transforming the way we care for mothers and babies and for some of the most disadvantaged people in society. Our aged care services are also developing apace, with a return to our national founding story in Western Australia and an ever-growing focus on empowering people to continue enjoying the lifestyles they have always enjoyed.

None of this could have been achieved without you. The incredible support we continue to receive from within Mercy Health and from our community to achieve our mission is both humbling and inspiring. May I take this opportunity to warmly thank everyone who has contributed this year to keeping alive Catherine McAuley's towering legacy of caring for those who need it most. Together we have shown during this and every preceding year how we can transform lives now and into the future with compassion, hospitality, respect, innovation, stewardship and teamwork.

I know you share our determination to do even more in the coming year to offer our care to the many people for whom comfort and joy seem out of reach. There has arguably never been more need for compassionate care than today and we go forward with absolute commitment to bringing it to all members of our community.

I wish you, your family and loved ones a Christmas and New Year full of peace and happiness and hope you can enjoy a break from work, emerging refreshed and ready for 2015.

Adjunct Professor Stephen Cornelissen

Chief Executive Officer

Mercy Health | 15

You can help James spend his precious last days at home

Mercy Palliative Care offers physical, practical, emotional and spiritual support to terminally ill patients and their families.

More families need support every year. But we cannot reach them all without your help."

By donating to the Urgent Need Appeal, you will help people facing end-of-life spend their precious last days at home, surrounded by love.

James and Anna's* story

Anna is caring for her husband James, whose diagnosis is terminal, and James' five year old son.

Financially comfortable before James became sick, Anna now works just three hours a day, three days a week so she can spend precious time at home.

With all their savings used and many assets sold to pay the mounting medical and power bills, James now feels he is a burden for Anna and should go into hospital. But as Anna explains, while it's hard financially, she wants more than anything to grant James' last wish to die at home.

*Names have been changed to respect the family's privacy.



We need to do more

Right now we can help 93 families a year who are in hardship at the most heartbreaking time of their lives, but the number in need grows each year.

With your help we hope to reach to 200 families every year.

Make every last moment count:

To donate now complete the slip below, call 03 8416 7766 OR visit mercyhealth.com.au and click Support Us

Contact details YES, I will support the Urgent Need Appeal Please accept my gift of \$ Address O I enclose my/our cheque/money order (payable to Mercy Health Foundation) Postcode Debit my OMasterCard OVisa OAMEX Phone () Expiry date __ _ /_ _ CVV (3 digit) __ _ _ Please send me information on how I/we can: O host my own fundraiser O make a bequest to Mercy Health Cardholder's name Thank you for supporting Mercy Health Signature O Please do not add my/our name to your mailing list Mercy Health 1/2014 Level 2, 12 Shelley Street RICHMOND VIC 3121 T: 03 8416 7766 E: fundraising@mercy.com.au W: mercyhealth.com.au **ABN** 60 905 269 648 Donations over \$2 are tax deductible



We hope you've enjoyed the summer edition of Our Voice. In each issue 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. We love to receive your feedback and stories at ourvoice@mercy.com.au



