A ray of hope for the tiniest babies

Our researchers offer hope of predicting premature birth

Dawning of a new day

We celebrate the launch of our Reconciliation Action Plan

Heavenly harps

Music brings joy and transcendence to aged care
They come in seven days a week to get me in and out of bed and shower; they do all the dressings; get me dressed; get me into the wheelchair; then they come back at night to get me back into bed. They also give me exercises to do to stay strong.

“They work in with us too; if we’ve overlooked an appointment and need to be somewhere, they’ll offer to come in earlier to help me get ready. If Heather’s running a bit late getting home they’ll often just stay and chat. They never say ‘I’ve got to go now’ if there’s a reason to stay.

“Anything you ask them to do, it’s always ‘Yeah, we can do that!’ That’s great in my book.”

Heather says the support is life changing for her too.

“It’s been fantastic. Ken originally said he didn’t want me doing his care all the time, so having the girls here is good for both of us.”

“They’re very supportive and watchful. Because we’ve had the same team for a long time, if they notice even a small change, for example in Ken’s skin, they get straight onto it.”

While the physical support makes a huge difference, it’s the less tangible benefits that keep Ken smiling.

“Sally and Katie are part of our lives. Even when they’re leaving, they’ll come into the lounge room — and we could have the whole family here — and say hooroo to everyone. It keeps a smile on my face.

“I don’t let this get me down; I just keep on going. I’m one of the lucky ones: I’m still here!"
First light illuminates a majestic gum tree, symbol of renewal and connection to roots, on the cover of Mercy Health’s first Health Services Reconciliation Action Plan (RAP). Launched in February, the plan sets out practical and measurable steps towards improving health outcomes and cultural safety for Aboriginal and Torres Strait Islander Peoples.

“It feels like it’s been a long journey to get to this point, and there is still a lot of work ahead,” Mercy Hospital for Women Manager of Aboriginal Programs Marika Jackomos said. “I really want to acknowledge my wonderful team, and the RAP Committee who worked together to achieve this step forward.”

The mood of hope and unity was strong at the event, with speakers echoing each other’s vision of a brighter future for all Australians. A moving performance from renowned musician Kutcha Edwards closed this celebration of resilience, creativity and connection.

“This is a most significant event in the history of Mercy Health. In almost any comparator used to measure health and wellbeing, Aboriginal and Torres Strait Islander Peoples remain severely disadvantaged. It is my hope that together, we can use this Plan to make a real difference.”

Mercy Health Group Chief Executive Officer Stephen Cornelissen

“I’m honoured to have been asked to provide the art for the RAP. There’s a real Mercy connection in my family – my two nieces were born here.

“I wanted to paint a sunrise, to represent a new day dawning for our People. It marks a new era for Mercy Health as it contributes to closing the opportunity gap between Aboriginal and non-Aboriginal people.

“I paint a lot of cockatoos; one reason is the story my nan tells me of my great grandfather who would climb to the top of the gum trees, pick the baby cockatoos and teach them to speak English so he could sell them back in the town to provide for his family... the cockatoos represent that they’re at one with their environment; they’re at peace. My hope is that these painted birds will fly around the Mercy hospitals in spirit and bring peace.”

Lyn-Al Young, artist, Gunnai and Wiradjuri woman

“As you reflect on Lyn-Al’s painting, reflect on how, in the great young leaders like Lyn-Al and Marika, and in organisations such as yours continuing to create culturally safe places, there’s nothing but hope and opportunity for our People.”

Richard Young, Lyn-Al’s father, Gunnai man

“We come from families where our People were scared to walk into places like this. That’s why our Elders saw a need to have places that we could walk into and doctors who have a continuing knowledge of their responsibilities to our families and our People.”

Musician Kutcha Edwards, Mutti Mutti man

“I wanted to paint a sunrise, to represent a new day dawning for our People.”

“Dawning of a New Day

Read the full story behind Lyn-Al’s painting and see how our RAP will unfold over the coming year: visit the Aboriginal Programs page at mercyhealth.com.au

Mercy Hospital
We have already seen the garden have a positive effect on the residents.

A sensory sanctuary for Shepparton

Twilight in the garden is a magical time for Mercy Place Shepparton resident Joan Hardner.

“Love that time when the sun is going down in the west and everything turns a different colour,” Joan says. “I love to sit in the garden and just enjoy it.”

Now, Joan and her fellow residents can bask in the twilight in a special new sanctuary: Mercy Place Shepparton’s new Ursula Frayne Sensory Garden designed especially for residents with dementia.

The garden, officially opened on 22 February, was made possible by a $5000 donation from the Shepparton Club, a $6000 donation from the Shepparton Lions Club and a $17,000 donation from Mercy Health Foundation. The home is also awaiting approval of a $6000 grant from Lions Clubs Australia.

The unique outdoor experience strives to stimulate all five senses — sight, sound, smell, taste and touch — and features outdoor musical instruments, textured garden furniture, bright colours and scents from an array of plants and flowers.

Joan, a keen gardener, was thrilled to help choose plants for the garden. She also loves the quirky additions to the garden including an old-fashioned red phone booth which could double as a Tardis.

“The garden is full of surprises, when I saw it I couldn’t believe it — especially the Dr Who box!” Joan reflects.

Mercy Health Group Chief Executive Officer Stephen Cornelissen says the garden is a fantastic community achievement and will significantly benefit current and future residents at the home.

“Mercy Health is committed to providing the best and most innovative practices that improve the health and wellbeing outcomes for our residents,” Stephen says.

“We have sensory gardens in 10 of our aged care homes across Australia and they have all been embraced by staff, residents and their friends and families.”

Mercy Place Shepparton Lifestyle Coordinator Nicole Raditsas says the response from residents has been overwhelming.

“The sensory garden is a fantastic initiative and we’ve had many residents take an active role in planting flowers and being part of the garden’s development,” Nicole says.

“We’ve already seen the garden have a positive effect on residents — it promotes calmness and independence, helps with memory recall and can be very beneficial for their physical and emotional wellbeing.”
Beloved Melbourne philanthropist Betty Amsden AO passed away in February. Her generous donation to Mercy Health Foundation enabled the purchase of 18 reverie harps for Mercy Health aged care homes.

In spring, Betty joined a roomful of Mercy Health residential aged care pastoral care associates to hear from Peter Roberts, music thanatologist and creator of the reverie harp.

A hushed calm came over the room as Peter began to strum. An enchanting, ethereal sound emerged, unscripted and free-flowing.

“Music is a necessity in aged care,” Betty said, after Peter’s performance.

“It is just so wonderful that something like this can help someone at a time when they need it most.”

Four Mercy Health aged care homes already had reverie harps; the additional 18 were delivered in January and are already being used to support emotional and spiritual care for residents, families and staff.

Peter came up with the idea for a reverie harp at the bedside of a man with motor neurone disease who was in a psychiatric hospital. He had an awkward homemade instrument that was terribly out of tune.

“I wanted to give him something beautiful,” Peter says.

Peter designed the reverie harps to be smooth, delightful, and easy to hold and caress. He lovingly crafts each mahogany harp at his home workshop with help from his wife, Jeanette, and a cabinet maker.

“What’s special about the harp is you don’t need lessons; anyone can play,” Peter says.

“The sound it produces is very calming. You can hold and play it even in bed.”

The use of reverie harps draws on the field of music thanatology: the practice of playing music at the bedside of critically ill and dying patients to address their physical, spiritual and emotional needs.

Music is a necessity in aged care.

Heavenly harps
Vale Betty Amsden AO

Mercy Health is sad to farewell a wonderful and giving woman who leaves behind a legacy of heavenly music in our residential aged care homes.

Her smile is radiant and unforgettable and when she shares it, the world is a better place. Sometimes the smile is buried beneath frustration and confusion, but when it breaks through it is simply beautiful. Her hands are busy — folding, pleating, smoothing and fiddling with the rug that lies upon her lap. Hands that for 90 plus years have gripped, held, wiped, bathed, brushed, baked, cleaned, sewn, folded, cared, prayed, nourished and cradled. A lifetime of doing — hard to stop.

As I approach on this particular day the hands are busy as usual, and her face a picture of concentration. I play a few notes on the reverie harp and I immediately have her attention, as she looks up with intrigue to the source of the captivating music. I strum again and the smile starts to break through, so I position the harp on her lap and gently place her hands across the strings. The hands are still — relaxed. So I start to pluck and strum and the room is immediately illuminated by that unforgettable smile. And then I hear her word — the same word over and over and over again:“Beautiful! Beautiful! Beautiful!”

It truly was a beautiful moment in time.

Felicity Barker, Pastoral Care Associate, Mercy Place Warrnambool
First-time parents Danielle and James Maas hesitated in front of a rack of baby clothes before reaching for the smallest size they could find: 000000.

Even the ambulance ride to Heidelberg was traumatic, with the vehicle forced to pull over at the bottom of the Westgate Bridge when Zali’s oxygen levels plummeted.

“My heart was racing,” says James.

While Zali has continued to grow under the loving gaze of her proud parents, they are all too aware that their experience is one of the better ones.

Researchers from the University of Melbourne’s Department of Obstetrics and Gynaecology at Mercy Hospital for Women and the Royal Women’s Hospital hope the new test would mean fewer parents will have to experience early labour.

The researchers have teamed up with Carmentix, a Singapore-based company that will help develop the predictive test.

The test will most likely involve a vaginal swab, administered by a doctor or nurse. A sample of fluid taken from under the cervix would be tested for specific biomarkers.

“Preterm birth doesn’t discriminate,” Megan says. “The greatest burden is in the developing world, where access to antenatal care is limited, but it can happen to anyone.”

The research team has just begun recruiting 2500 more women from both Mercy Hospital for Women and the Royal Women’s Hospital to get closer to unlocking the puzzle.

“If the trial is successful, it will mark a new era in care for mothers and babies globally: one in which fewer size 000000s will be needed.

Mercy Hospital for Women researchers are on the brink of developing the world’s first simple test to accurately predict preterm labour.”

But when they showed a nurse at Mercy Hospital for Women Special Care Nursery, she just smiled gently. “She won’t fit into that for a little while yet,” the nurse said.

Baby Zali, born at 31 weeks and three days, weighing just 1.72kg, is among the one in 10 Australian babies that are born premature.

Prematurity is a leading cause of death in newborns, and can lead to long-term health challenges including chronic lung disease, impaired mental development, cerebral palsy, deafness and blindness.

Incredibly, one in every two cases of preterm birth will have no warning signs at all.

But Mercy Hospital for Women researchers are on the brink of developing the world’s first simple test to accurately predict preterm labour.

The test would mean the world to mums like Danielle, who held her newborn for just 20 seconds before St John of God Hospital’s staff took her to their Special Care Nursery.

“It was sad to have her whisked away so quickly,” Danielle recalls. “We had no time for skin-to-skin contact and it was three days before we could hold her again.”

Just hours old, Zali was transferred to Mercy Hospital for Women for specialist care.

Researchers from the University of Melbourne’s Department of Obstetrics and Gynaecology at Mercy Hospital for Women and the Royal Women’s Hospital hope the new test would mean fewer parents will have to experience early labour.

The researchers have teamed up with Carmentix, a Singapore-based company that will help develop the predictive test.

The test will most likely involve a vaginal swab, administered by a doctor or nurse. A sample of fluid taken from under the cervix would be tested for specific biomarkers.

“Thousands of women who have had premature babies have volunteered for this study because they realise while it may not benefit them personally, it could really help families in the future,” Megan says.

The test will most likely involve a vaginal swab, administered by a doctor or nurse. A sample of fluid taken from under the cervix would be tested for specific biomarkers.

“Preterm birth doesn’t discriminate,” Megan says. “The greatest burden is in the developing world, where access to antenatal care is limited, but it can happen to anyone.”

The research team has just begun recruiting 2500 more women from both Mercy Hospital for Women and the Royal Women’s Hospital to get closer to unlocking the puzzle.

“If the trial is successful, it will mark a new era in care for mothers and babies globally: one in which fewer size 000000s will be needed.

Mercy Hospital for Women researchers are on the brink of developing the world’s first simple test to accurately predict preterm labour.”
As a Mercy Hospital for Women doctor with a Masters in Environmental Science, Lisa was a natural choice to work with our Leadership & Mission team in responding to Pope Francis’ 2015 Encyclical Laudato Si, On the Care for Our Common Home. The Encyclical challenges Catholic organisations to help improve human health and welfare by tackling contributors to climate change.

“Our goal is to help guide and coordinate a Mercy approach to protecting the earth and the health of its inhabitants, especially those facing disadvantage” Lisa says.

“In this country we’ve reached peak health — many of our problems are about over-consumption. The things we need to do to protect humans and the planet are now completely aligned.

“As a health service we need to appreciate the detrimental effect of climate change on people as well as the planet: war, lack of water and food, massive loss of species, mass displacement of people. 20% of the people on the planet have caused 80% of the damage; we have a moral as well as a health imperative to act.”

That conviction has taken Lisa to two Conferences of the Parties (COP) to the U.N. Convention on Climate Change: COP 21 in Paris in 2015 and COP 22 in Morocco in 2016.

“COP 21 was a milestone in the world’s efforts to launch a global response to climate change,” Lisa says. “It set out a framework and goals for international action, taking a bottom up rather than top-down approach. 196 countries committed to pursue efforts to limit the temperature increase to 1.5 degrees above pre-industrial levels. The concept of climate justice became a central framework.

“COP22 brought together 20,000 delegates from almost 200 countries to continue developing the work of the Paris Agreement. Catholic delegates were especially strident in calling on the international Catholic community to make major structural changes, including divesting their assets from fossil fuels, which are major culprits in global warming.”

Lisa returned to Mercy Health with a renewed conviction that “if we’re going to attempt to keep things close to 1.5 degrees, every one of us needs to understand and act.

“At a local level, during 2017 the Laudato Si Project is developing a range of programs to tackle waste and develop environmental action programs throughout the organisation. In fact, some locations have already taken up the challenge, which is fantastic to see.”

Plenary and human health are intimately and profoundly linked. Mercy Health clinician and Project Lead Laudato Si Dr Lisa Rasmussen wants all health services to not only make this link, but act on it — and tap into a global reimagining of health.

The greening of Mercy Health has begun with a waste reduction program that encourages staff to ‘reduce, reuse, recycle’: a direction brought to life by initiatives including the worm farm that now disposes of food scraps at the Richmond office.
Three VOCCAL members and three Post Discharge Support Workers were present at the training. Their family, friends, even total strangers, could all benefit from those six people having learnt these skills.

Consumer input still has a lot of potential to be tapped into at Mercy Health. There shouldn’t be any limits for consumers to help shape their services.

You are a founding member of the aptly named Voices of Consumer and Carer Advisory Link (VOCCAL). What motivated you to join the group?

A strong belief that consumer voices should be heard and acted upon, formed during my own journey. I feel in mental healthcare especially, the success and/or failure of any service is based upon how much input its consumers have into its day-to-day running.

I had my first manic episode at a work function. It forced me to reassess where I was in life: started to feel I should follow a more humanitarian path. I began volunteering at Orygen, the National Centre of Excellence in Youth Mental Health, as a peer support worker. Orygen embeds consumers within its service, and involves them in activities from hiring clinicians to co-facilitating groups and training. I saw that it’s critical for services to use consumers past and present in as many aspects of the service as they can to ensure the highest possible standard of care.

Eventually I decided to pursue a career in mental health, which led me to VOCCAL.

Tell us about the structure and role of VOCCAL

VOCCAL was formed to ensure consumers and carers can participate meaningfully in decisions about mental health policy, care and treatment, and the wellbeing of themselves and the community. It’s made up of equal numbers of Mercy Mental Health Consumer and Carer Consultants, and consumers and carers with lived experience of our services. We have six members, and bringing their perspectives together will serve to benefit not only the service but the community as a whole.

VOCCAL has been going for almost a year. What impact do you feel the group is having on our care and how can you see that evolving over time?

One of the earliest initiatives that came out of our meetings was offering mental health first aid training to assist a person who is developing or experiencing a mental health problem.

Three VOCCAL members and three Post Discharge Support Workers were present at the training. Their family, friends, even total strangers, could all benefit from those six people having learnt these skills.

Consumer input still has a lot of potential to be tapped into at Mercy Health. There shouldn’t be any limits for consumers to help shape their services.
Mercy Health is recruiting for our
COMMUNITY ADVISORY GROUPS.

Do you want to be more involved in our care?
Do you want to help represent the needs of patients and their families?
Do you have ideas to help improve our services?

Applications are now open for 2017.
Contact Bec Jolly on getinvolved@mercy.com.au or 03 8416 7872.