

# Our Voice



Mercy Health

Care first

THE GROUPWIDE NEWSLETTER OF MERCY HEALTH  
WINTER 2017



## Up, up and away

Our bucket list  
project takes flight

## Healing steps

A walking group for  
the newly bereaved

## A world away

Reflections from  
a refugee camp





The Walk and Talk Bereavement Group  
meets weekly in Williamstown.



# Friendships born from loss

Daily injections, incessant medication reminders and a calendar overflowing with medical appointments: this is the life of someone caring for a loved one with a terminal illness. But what happens after they die?

It was a desire to go beyond the 'medical model' of hospital appointments and medications that inspired Mercy Health Palliative Care Bereavement Coordinator Colleen Kannegiesser to initiate the Walk and Talk Bereavement Group three years ago.

Mercy Palliative Care Sunshine has about 520 patients on its program at any one time; 25-30 people die each week and there are as many new referrals.

People who have recently lost a loved one are invited to information sessions, which funnel into the Walk and Talk Bereavement Group.

Run twice a year over two months, the weekly support group has proven a godsend for participants including Eddie Grbic and Shirley Mayne.

"At first I felt at ease when my wife passed away because she wasn't suffering anymore," Eddie reflects.

"But after a couple of months it started getting to me; how lonely the house was and how hard the past few months had been.

"Before my wife got sick I had never heard about palliative care, but when things became worse I thought we'd give it a try. From day one, it changed everything."

"With this group, I can open up in ways I wouldn't anywhere else," Shirley says.

"They understand what I'm going through; that I can't just jump in the car to go to the lake because I used to walk there with Ian and I can't face it on my own."

Shirley's beloved husband of over five decades passed away from an aggressive brain tumour in October.

She says the best advice she has taken from palliative care is this: there is no time limit on grieving.

"Ian's family visited yesterday and we had a lovely time, but when they left I fell into a heap, I cried and cried," Shirley recalls.

Mercy Health Pastoral Carer Noleen Foehn who facilitates the group says she encourages participants to share these experiences when they meet, so she can offer support through the walk and coffee.

The group walks slowly, mingling, chatting and enjoying the fresh air before ducking into a café for coffee or lunch.

"It gets people out of their homes into a non-threatening environment," Colleen says. "You can walk and talk with nature and life around you."

Eddie's passionate and effervescent wife Jelena died from cancer on 5 October 2016, leaving behind a grieving family.

But for Eddie, as for Shirley who lost her husband Ian, the walking group provides a completely different outlet to family support.



Walking group participants  
Eddie Grbic and Shirley Mayne.





# *The sky's the limit*



Mercy Place Montrose residents Tony Hopkins and Eileen McNabb preparing for their Tiger Moth flight.

Glowing with joy, four Mercy Place Montrose residents took to the skies in a vintage plane on Saturday 13 May as part of a program to help them fulfil their 'bucket list'.





The Mercy Health 'bucket list' project gets the thumbs up from Tony.

**T**he residents, ranging in age from 70 to 82, travelled to Yering to enjoy thrilling Tiger Moth flights over the stunning Yarra Valley.

Resident Tony Hopkins is 82 years young and has fond memories of watching his younger brother take flying lessons in a Tiger Moth.

"My brother worked at an aircraft factory in Belfast so he received his flying lessons half price," Tony said.

"I would always watch his lessons and I'm excited that I'll finally be able to experience flying in a Tiger Moth."

One of Tony's fellow flyers was Eileen McNabb, 77, who had been counting down the days to her Tiger Moth adventure.

"I've flown in many small planes over the years but never a plane with so much history," Eileen said.

"I love the idea of being able to fly in an aircraft which has been built with so much care and pride."

The Tiger Moth flights were made possible thanks to Mercy Health's Innovation Grants, which were given to each of Mercy Health's 22 residential aged care homes.

Lifestyle and Volunteer Manager Karren Gooding said the idea of the bucket list project is to encourage residents to maintain the same hopes and dreams they had before moving into residential aged care.

"We want our residents to think of residential aged care as the next stage in their journey, where they can continue living a high quality of life," Ms Gooding explained.

"We're not just focused on big ticket items either: it could be as simple as taking a resident

**"I've flown in many small planes over the years but never a plane with so much history"**

fishing, to the MCG for a football game or going on a ferry. We know our residents have a variety of interests and it's great to see them having a good time."

Other bucket list initiatives have included the installation of a large naughts and crosses game in the courtyard at Mercy Place Colac (Vic), development of a tropical terrace garden at Mercy Place Westcourt (QLD), and purchase of an adult tricycle at Mercy Place Mandurah (WA) for enhanced community participation.





# *In the heart of the home*



L-R: Lydia and Ersilia cooking up a storm  
in the Mercy Place Lathlain kitchen.



Variety is the spice of life, so they say, and residents at Mercy Place Lathlain (WA) are experiencing ample culinary variety thanks to an innovative program initiated by family members.

The 'cooking for the community' initiative sees the family members of residents take it in turns each month to cook a traditional dish for the home.

To date, a number of Italian, Indian and Nepalese meals have been lovingly made by relatives and staff with favourites including ravioli and curry.

Ersilia and Lydia, whose father Giovanni "Jack" Viececi lives at the home, learnt to cook as children by observing and helping their mother. The sisters chose lasagne as their traditional Italian meal to share with residents.

"We love to make Italian food, so we made a traditional lasagne when it was our turn to cook and everyone loved it — they even came back for seconds," Lydia says.

"It was a really great experience and good fun; everyone is beautiful here and very friendly," Ersilia adds. "The idea of bringing families in to cook for residents is just a lovely thing to do; we'll definitely be doing it again."

Mercy Place Lathlain Service Manager Surabh Nair says family members have relished identifying recipes, preparing shopping lists and rolling up their sleeves in the home's kitchen to prepare traditional dishes for residents.

"We pride ourselves on the nourishing and healthy food we prepare at Mercy Place

Lathlain, and these traditional home-cooked meals which have been lovingly prepared by the families of some of our residents has been a wonderful addition to our menu," Surabh reflects.

"In many ways, the kitchen is the heart of the home and it's often the place for families to gather, so we think it's very fitting that family members are spending time in it to create some beautiful meals from their homelands.

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It has been heartwarming to see the pleasure on their faces as they've tried different tastes and flavours — sometimes for the first time”

"We've had residents who originally hail from India loving lasagne and ravioli, and other residents who spent their childhood in Italy trying Indian curries. It has been heartwarming to see the pleasure on their faces as they've tried different tastes and flavours — sometimes for the first time.

"The staff have also embraced the initiative and we've found it to be a really wonderful way of building our little community here at Mercy Place Lathlain, and also strengthening the relationships our residents have with both other residents and their families."





# Life's still a circus at 74

A new virtual reality program provided by Mercy Health Home & Community Care is proving a huge hit with clients searching for fun and engaging experiences.

**T**hrough the fog of dementia, Stan Elliott's recollection isn't what it used to be. But one powerful memory — starring on the trapeze in the circus — came flooding back the day Stan tried Mercy Health's new virtual reality glasses.

"I used to be a catcher on the trapeze with the Flying Ashtons," Stan recalls. "I started as a circus hand when I was 13 and went on to look after the animals; I was chased up a tree by an elephant once. Then as I got a bit older, a young Merv Ashton asked if I wanted to go on the trapeze."

It was a highlight of Stan's life. At 74, his days of flying trapeze are well and truly over, but he was thrilled to discover he could fly again by simply putting on a set of virtual reality glasses and selecting Cirque du Soleil. Through the new virtual reality

program, Stan also visited Korumburra where he first lived after migrating from England in 1950.

"It really took me back," Stan says. "I was telling [my care worker] Andrew the name of the butcher, what the town used to look like and who lived on which street. I'm so happy he showed me."

Stan says the virtual reality program is a great initiative that could be used more widely, particularly for people with dementia or difficulty with memory recall. "It reminds you of things and keeps your mind occupied," he notes.

Stan's wife Robyn says it's a welcome addition to his Home Care Package, which already covers cleaning, gardening and respite. While Robyn unwinds over a weekly game of tennis, she's happy in the knowledge

that Stan is enjoying exciting trips from the comfort and safety of their living room.

Mercy Health Community Care Worker Andrew Smith says the virtual reality glasses were a great fit for Stan, who is quite adventurous and loves a challenge.

"After getting to know more about him and his comfort levels, I decided that Stan may enjoy a bit of a thrill," Andrew says.

"I decided to offer him a 3D virtual reality rollercoaster experience. At first, Stan just laughed and smiled. Then he began to repeat, 'This is awesome'. Stan has become my most enthusiastic and adventurous participant. It's a real joy to see the satisfaction and thrill that he receives from the virtual reality experiences."



“

At 74, Stan's days of flying trapeze are well and truly over, but he can fly again by putting on a set of virtual reality glasses”







# A letter from the field

Midwife Jacinta Knell has worked at Werribee Mercy Hospital for 14 years. In that time, Mercy Health has supported Jacinta through two periods of volunteering her skill and expertise in war-torn South Sudan, as well as assignments in Indonesia, northern Nigeria and north-east Pakistan. Here, she writes from a refugee camp in Maban, a county in Upper Nile State.

In the few months since I left Australia in January, I've experienced summer, winter, and a dry season. In preparation for my role with Medair, I attended a lot of briefings in Switzerland, Kenya and South Sudan. I've met so many new people since arriving in Maban; I'm trying to learn two or three

names every couple of days. I've been learning some Juba Arabic, and I can ask women a few simple questions and elicit answers that I mostly understand. My attempts to ask questions in Arabic usually bring about lots of giggles, which is an amazing ice breaker.

This is a very different assignment for me — it's mainly about education and capacity building. I'm working in a primary healthcare clinic and we have detailed referral criteria. The previous three assignments I've done have been in the referral hospital. However, for a clinic of its size, we do a lot of births. On night duty recently we had five babies in one hour, with only two birthing beds and just two midwives on duty. So, I've been able to catch some babies.

We've had a couple of training sessions with the midwife assistants, who are traditional birth attendants employed by Medair. We discussed danger signs to watch out for during labour, after the birth and in newborns, and we also discussed infection prevention, protective equipment, handwashing and antenatal care. We did a training session for the traditional birth attendants on the health risks associated with female genital mutilation, which is widely practised in the community. We've also discussed the health benefits of child spacing with the camp umdas (leaders).

The base where we live is a 25-minute drive from the refugee camp where we work. There are two people to a tukul (mud hut), which heat up during the day and don't cool down



Women at the Yusuf Batil refugee camp Medair clinics.



Jacinta Knell working in the reproductive health clinic in Yusuf Batil refugee camp.



overnight, so sleep can be an issue. The dust is pervasive and gets everywhere, especially when it's windy. I've pulled small twigs out of my hair on some days. There are pit latrines and shower cubicles. Bucket showers are the order of the day — it's amazing how little water you actually need to get clean! I try to have a shower early, otherwise the cubicles (which are made of corrugated iron and are in full sun) get so warm that it defeats the whole purpose of a wash.

We only have a few expat staff, from Brazil, South Africa, the Netherlands, Kenya and Australia. Most are from South Sudan or Maban itself. The refugees here are pretty much all from the Sudan, having fled Blue Nile State in the past five years. The four refugee camps are Doro (about 52,000 refugees), Yusuf Batil (about 41,000), Gendrassa (about 18,000), and Kaya (about 25,000). Medair works in Yusif Batil camp, providing all the water and health services. Medair is handing over their activities at the end of the year because Maban is now relatively stable.



“For a clinic of its size, we do a lot of births. On night duty recently we had five babies in one hour, with only two birthing beds and just two midwives on duty”

It's been interesting talking with South Sudanese staff members about their country and hopes for peace in the light of the current conflict. Many of them have strong faith in God and hope for

His intervention. They also understand the need for perspectives to change; they see themselves as something bigger, a nation where everyone can work together to bring the nation forward.





# Thanking a tireless trio

In the growing constellation of Mercy Perinatal supporters, three stars sparkle brightly.

**M**ercy Health Foundation Autumn Ball Committee Members Alex Tighe, Susie Tilley and Taff Hamilton's tireless fundraising and awareness raising contributed to a spectacular night.

The women successfully sourced dozens of items for the silent auction, which raised almost \$20,000 to help bring women and their babies safely home.

It is a harrowing fact that in Australia, one in 130 pregnancies ends in stillbirth. And around the world, a baby dies of prematurity every 30 seconds.

The great vision of Mercy Perinatal — to dramatically improve survival rates for women and babies around the world — is close to the heart of all three women.

Alex's son Jack was premature and died at birth in October 2012. His devastating death was followed by three unexplained and heartbreaking miscarriages.

"When we lost Jack, it felt to me like the biggest news story of the day," Alex recalls.

"But then I realised there were thousands of people going through the same experience; I was so shocked by the statistics.

"In this age of technology, how can stillbirth and prematurity just be a matter of bad luck?"

It was Mercy Perinatal co-founder Professor Sue Walker who helped Alex and her husband safely deliver their baby girl Isabelle.

Alex, a busy lawyer and now mother of three, wanted to give back to Sue and the team for helping bring their little girl into their lives.

She started a running group called Full Termers which has already raised over \$9,000 for Mercy Perinatal, and joining the Ball Committee was a no-brainer.

"If we can make even a five per cent difference, we'll be saving hundreds of lives and protecting countless other parents from the pain we went through," Alex says.

Alex's sentiment was echoed by Susie, whose sons Jack and Oscar were born premature after developing a rare condition that required in-utero blood transfusions.

"You can feel very lonely when you're going through a horrendous time in hospital with sick babies," Susie reflects.

"But when you come out the other end, you understand just how lucky you are, and how many people there are supporting you.

"We can't thank Sue and the team enough for what they gave us: our two special little boys."

Susie's husband, radio personality Matt Tilley, has long supported Mercy Hospital for Women and has been an exceptional Master of Ceremonies for the Ball over many years. Like Alex, Susie is a busy mother of three, but she didn't think twice when asked to join the Committee.

"When something is so dear to you, you make time," she says.

Taff counts herself lucky to have not experienced problems with her own pregnancies; however like so many people she has been touched by perinatal complications.

In 1968, her brother was born with an oesophagus too short to allow food to his stomach, requiring surgery at just two days old.

"He had to be propped up, so they got a bucket and cut out the top half so his back could rest up against the bucket," Taff says.





Taff Hamilton



Alex Tighe running to support Mercy Perinatal.

“

Together,  
we can make  
a difference”

“That was the method of the time, but ultimately their dedication gave him a chance at life.”

All three women agreed that while not everyone is able to give financially to worthy causes, time and passion are just as valuable.

“Together, we can make a difference,” Alex says.

Mercy Health Foundation Executive Director Simon White expressed his gratitude to the tireless Committee volunteers.

“We are incredibly grateful to Alex, Susie and Taff for volunteering their time to help raise funds and awareness for such a good cause,” Simon says.

“It was a wonderful night, and one that was made possible by the hard work and support of so many people including the Mercy Perinatal team, sponsors, corporate partners, guests and volunteers.



Guests enjoying the silent auction at the Mercy Health Foundation Autumn Ball.

“By working together, we are doing everything we can to provide the best care for mothers and babies in the crucial first 300 days of life.”

**Help us advance care for at-risk mothers and babies in Australia and around the world by joining our staff monthly giving program or donating directly to Mercy Health Foundation. Call 03 8416 7766 or visit [www.mercyhealth.com.au/donate](http://www.mercyhealth.com.au/donate)**



Susie Tilley





IMAGE: L-R Jennifer Fielding, Jo Pappas, Aunty Rita (Bundina) Wirrpanda, Michelle Hawke and Alisia (Warluka) Wirrpanda.



# Wirrpanda Journey



A reflection from Senior Aboriginal Hospital Liaison Jo Pappas, Social Worker Michelle Hawke and Nangnak Baban Murrup Clinic Associate Midwife Nurse Unit Manager Jennifer Fielding.

On 26 October 2016, Alisia (Warluka) Wirrpanda and her mother Aunty Rita (Bundina) Wirrpanda were flown to Mercy Hospital for Women (MHW) via emergency medical flight. The family was airlifted from Gan Gan Gangan, a small, remote Aboriginal community about seven hours from Darwin. Alisia was 28 weeks pregnant and showing clear signs of premature birth.

Staff from Aboriginal Programs met the family at the MHW Emergency Department. They arrived with very little and had few family and friends in Melbourne. Alisia is fluent in her native language and found it difficult to use English all the time.

The Nangnak Baban Murrup team started this journey by advocating for Rita to stay with Alisia in hospital as her support person, escort and interpreter. Alisia was surrounded by strange people, a strange language and strange customs and amazed us with her ability to adapt to the hospital environment.

Alisia gave birth to her son Cain on 19 November, at 30 weeks. Cain was transferred to the Neonatal Intensive Care Unit (NICU) at birth. Alisia and Aunty Rita were discharged from MHW and relocated into Lions House accommodation, which enabled them to visit Cain every day. Aboriginal Programs and the Nangnak Baban Murrup team supported the family with transport and material aid.

It has been a wonderful journey for Aboriginal Programs, the Nangnak Baban Murrup team and MHW staff. Aunty Rita and Alisia shared a plethora

of knowledge with us, an experience we will never forget. Aunty Rita enriched our lives with her wicked sense of humour and they both shared their knowledge of traditional medicine and maternity care. They will share the story of their journey with Cain when they return to their community, and we hope this strengthens the connection between Gan Gan Gangan and MHW.

Aunty Rita was kind enough to paint two pictures for us. The first depicts their journey as daughter and mother coming together from the north and journeying to the south to await the birth of their son and grandson, and being supported by Mercy Health staff. The second is Cain's birth and his journey of being in the NICU.

We will miss the Wirrpanda family tremendously. We wish them a safe journey home and for baby Cain to grow up to be a strong community man.





# The person at the other end



A founding member of the Mercy Hospital for Women (MHW) Consumer Advisory Group (CAG) and a recent addition to the Cancer Supportive Care Screening Steering Committee, Jane Power is a strong advocate for giving consumers a seat at the table. Here she shares her story with *Our Voice*.

**A**re you sitting down?" The specialist's tone was sombre. It was just days since Jane Power, then a fit and healthy 56-year-old, had undergone surgery to remove a cyst on one of her ovaries.

The specialist bore terrible news: Jane's pathology results showed she had ovarian cancer, and it was spreading.

"My world stopped turning," Jane recalls. "I felt like my body had let me down. I was really scared; my own mother died when I was five, and it was such a high priority for me to continue being a mum to my two adult children."

That phone call was the beginning of Jane's cancer journey. Her specialist referred her to Associate Professor Peter Grant, Gynaecological Oncologist at MHW.

"Peter and his team became my champions," recalls Jane, who underwent further surgery and six gruelling rounds of chemotherapy.

Six years after the initial diagnosis, Jane is now in remission and takes no day for granted. After chemotherapy, Jane's physical and emotional health was still fragile. But throughout that period she developed a passion for consumer advocacy that has gone from strength to strength.

Soon after her treatment ended, Jane applied to join the newly established MHW Consumer Advisory Group (CAG).

"I really wanted to make a difference for other women going through their cancer journeys," Jane says.

"Being able to contribute to outcomes and be involved in planning is so important, and as patients we have a unique perspective."

On the CAG, Jane's view is sought on a range of issues including quality standards, newly developed brochures, signage in the pathology collection centre and placement of hand hygiene stations.

Jane was also recently appointed as consumer representative to

“

I really wanted to make a difference for other women going through their cancer journey”

the Cancer Supportive Care Screening Steering Committee.

The Committee oversees screening for supportive care services for people with cancer and their families, which can include everything from physical and practical to spiritual needs.

A screening tool, effectively a 'stress thermometer', is offered at several points along the patient's cancer pathway.

"No matter what process staff are following, it's really important to remember there is always a person at the other end," Jane says.



# The next chapter

I am delighted to announce that as of 1 July, Southern Cross Care Victoria and Mercy Health will unite as a single organisation driven by a mission to provide exceptional care to those in need.

This momentous decision follows an extensive due diligence and consultation process involving our Boards, members and staff, and endorsement by the Knights of the Southern Cross Victoria and the Institute of Sisters of Mercy of Australia and Papua New Guinea.

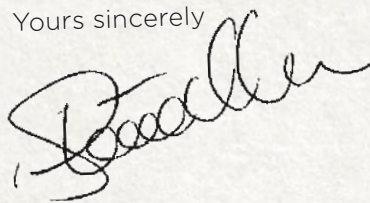
United, we will be the largest not-for-profit aged care provider in Victoria and within the 10 largest providers nationally. We will have about 2,000 Home Care Packages and 34 residential aged care homes supporting 2,000 people. The scale of our combined organisations will enable us to continue providing the very best compassionate and responsive

care within a changing aged care policy and funding environment.

Our individual and shared heritages will remain important and Mercy Health will continue to recognise the extraordinary contributions of the Knights of the Southern Cross Victoria in caring for elderly Victorians.

Our valued residents and clients continue to be our first priority. If you have any questions or concerns, please email us at [YourQuestions@mercy.com.au](mailto:YourQuestions@mercy.com.au).

Yours sincerely



**Stephen Cornelissen**

Group Chief Executive Officer  
Mercy Health

## Your feedback...

We hope you've enjoyed the winter edition of *Our Voice*, Mercy Health's groupwide newsletter.

Please send your feedback and stories via the details below:

**Mercy Health: Our Voice**

Level 2, 12 Shelley Street

Richmond VIC 3121

Phone: 03 8416 7816

Email: [ourvoice@mercy.com.au](mailto:ourvoice@mercy.com.au)

Mercy Health acknowledges Aboriginal and Torres Strait Islander Peoples as the first Australians. We acknowledge the diversity of Indigenous Australia. We respectfully recognise Elders both past and present. This report was produced on Wurundjeri Country.



*Our Voice* will be back in September with our spring edition. In the meantime you can keep up to date with current Mercy Health news at [mercyhealth.com.au](http://mercyhealth.com.au)

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