



Mercy Health

Care first



Mercy Hospitals
Victoria Ltd

2018/19 **REPORT OF OPERATIONS**

CELEBRATING
100 YEARS
of **MERCY HEALTHCARE**
1 9 2 0 – 2 0 2 0



1920



1920
100
YEARS
of MERCY
HEALTHCARE
2020



Mercy Health
Care first

When the Sisters of Mercy first entered the field of healthcare in Victoria it was in the wake of World War I and amid the deadly influenza epidemic of 1919. Spurred by the experience and with a growing Melbourne in need of better health services, the Sisters opened St Benedict's Hospital in Malvern in 1920.

CONTENTS

Welcome	3
Introduction	4
Financial commentary	5
Mercy Hospitals Victoria Ltd	6
Our services	7
Mercy Health Strategic Framework 2018–22	8
Organisational structure	9
Governance	10
Board	11
Executive	15
Health Services Leadership Team	19
Statement of Priorities 2018/19	23
Performance priorities	31
Activity and funding	36
Workforce	37
Reporting procedures	39
Attestations	42
Year in review	43

Cover: Mercy Health Breastmilk Bank donor Linette and baby Marcella; Minister for Health and Ambulance Services the Hon Jenny Mikakos MP with Mercy Health Group Chief Executive Officer Adjunct Professor Stephen Cornelissen and Mercy Health Chair Ms Virginia Bourke at Mercy Hospital for Women; and Djirri Djirri Dance Group dancers at Werribee Mercy Hospital NAIDOC Week 2019 celebrations.

WELCOME

Welcome to the Mercy Hospitals Victoria Ltd Report of Operations for 2018/19, which has been written in accordance with the Financial Management Act 1994.

Welcome to the Mercy Hospitals Victoria Ltd Report of Operations for 2018/19, which has been written in accordance with the Financial Management Act 1994.

This year, Mercy Health celebrates a quarter of a century of serving the Wyndham community. Now in its 25th year, Werribee Mercy Hospital is continuing to expand to meet the changing needs of a rapidly growing community. In August 2018, Mercy Health along with the Honourable Jill Hennessy MP and Catholic Archbishop of Melbourne Peter Comensoli, opened the Werribee Mercy Hospital Stage 1C expansion. In October, with Treasurer Tim Pallas, we officially opened the expansion of the Clare Moore Building for mental health. These expansions, along with a new paediatric ward opening in 2019, increase Mercy Health’s capacity to serve the Wyndham community and we thank the State Government of Victoria for continuing to partner with us to achieve this.

Innovation, creativity and partnerships with government and community are integral to our mission of bringing God’s mercy to those in need. Mercy Health seeks to maximise the public value of our services by working with other providers and stakeholders to improve health outcomes across the board. Examples in 2018/19 include the expansion of the Mercy Health Breastmilk Bank; continued roll-out and acknowledgment of the Obstetric Triage Decision Aid; and ever-growing recognition of Mercy Perinatal, in partnership with the University of Melbourne, as a leading light in perinatal research, education and clinical care.

Without a doubt, 2018/19 has been one of our most rewarding and most challenging years. With the magnificent benefits that expansion brings, Mercy Health was also faced with incredible pressures on increasing demand, the costs of building additional

services and the impacts of funding formula changes. While these issues have created unprecedented financial challenges, we remain grateful to the State Government of Victoria for their commitment in working through this with us. As passionate and conscientious stewards of our Victorian health services, Mercy Health also acknowledges and thanks the Victorian people and all those who choose to partner with us in their healthcare. Finally, none of what we do would be possible without the all-encompassing support of those who choose to work for Mercy Health, joining us to serve those in need.



Adjunct Professor Stephen Cornelissen

Group Chief Executive Officer





Ms Virginia Bourke

Chair



INTRODUCTION

This year, Mercy Hospitals Victoria Ltd continued to provide safe and high-quality services to the people seeking our care.

In August, we opened the doors to the \$93 million stage 1C expansion of the Werribee Mercy Hospital, representing a major milestone in the history of the hospital. With enhanced surgical, medical and intensive care services, the hospital has improved its capacity and capability to care for people living within the rapidly growing City of Wyndham.

There were many important achievements across our other services and facilities and our staff are to be commended for their unrelenting commitment to delivering the best possible experiences and outcomes for the people in our care.

In June, after nine years, we farewelled Dr Linda Mellors, Chief Executive Health Services. Linda was an outstanding leader who led with compassion and worked tirelessly to develop and grow our services. She has left a strong legacy at Mercy Hospitals Victoria Ltd.

The work of Mercy Hospitals Victoria Ltd is frequently delivered in partnership with a range of externally-based organisations and agencies and I would like to extend our gratitude to these partners for their engagement and contribution. We also thank the Victorian Government for its ongoing support.



Ms Clare Grieveson
*Interim Chief
Executive Health
Services*



Minister for Health and Ambulance Services the Hon Jenny Mikakos MP (centre) with Mercy Health Group Chief Executive Officer Adjunct Professor Stephen Cornelissen, Mercy Health Chair Ms Virginia Bourke, Rachel and Thomas Broomfield and baby Emily at Mercy Hospital for Women

FINANCIAL RESULTS

Operating result	2019 \$000	2018 \$000	2017 \$000	2016 \$000	2015 \$000
Total revenue	418,690	411,984	359,916	312,912	281,911
Total expenses	428,670	361,521	332,337	301,299	279,031
Net result from transactions	-9,980	50,463	27,579	11,613	2,880
Total other economic flows	-4,574	-134	1,498	-817	-892
Net result	-14,554	50,329	29,077	10,796	1,988
Total assets	228,332	220,744	147,830	119,302	101,336
Total liabilities	112,698	90,556	67,971	68,520	61,350
Net assets/Total equity	115,634	130,188	79,859	50,782	39,986

NB: The Operating result is the result for which the health service is monitored in its Statement of Priorities.

	2019 \$000	2018 \$000
Net operating result*	-5,966	-280
<i>Capital and specific items</i>		
Capital purpose items	9,909	58,449
Specific income	0	0
Assets provided free of charge	0	0
Assets received free of charge	0	0
Expenditure for capital purpose	0	0
Depreciation and amortisation	13,923	-7,706
Impairment of non-financial assets	0	0
Finance costs (other)	0	0
Net result from transactions	-9,980	50,463

*The Net operating result is the result which the health service is monitored against in its Statement of Priorities

The 2019 financial year was a particularly challenging one for Mercy Hospitals Victoria Ltd (MHVL) from an operating result perspective, with MHVL incurring a substantial Comprehensive Loss for the year of \$14.5 million. The Loss result for the 2019 financial year includes Long Service Leave revaluation adjustments of negative \$4.5 million.

Significant operational costs were incurred to commission new acute services at Werribee Mercy Hospital (WMH) and a material increase in presentations and ambulance arrivals in the WMH Emergency Department negatively impacted on our

ability to achieve targets. Increases in costs, particularly in payroll for nursing and medical staff, also resulted in substantial expenditure ahead of budget. Revenue flows for services delivered at Mercy Hospital for Women were \$7.5 million lower than projected due to a reduction in birth numbers, lower than budgeted nursery occupancy and other associated funding issues.

There were no events subsequent to balance date that are expected to have a significant effect on the operations of MHVL in subsequent years.

MERCY HOSPITALS VICTORIA LTD

Mercy Hospitals Victoria Ltd (formerly Mercy Public Hospitals Inc) is a Denominational Hospital per Schedule 2 of the *Health Services Act 1988* (Vic).

Mercy Hospitals Victoria Ltd forms part of Mercy Health, a Catholic not-for-profit organisation which provides a range of health, aged and community care services to communities in Victoria, the Australian Capital Territory, New South Wales, Western Australia and Queensland. Mercy Health works closely with government to identify and respond to current and emerging health needs in our communities. We acknowledge the generous support offered by the Victorian Government over the past 12 months.

The relevant ministers for the reporting period were:

- The Hon Jill Hennessy, Minister for Health and Minister for Ambulance Services
1/07/2018 – 29/11/2018
- The Hon Jenny Mikakos, Minister for Health and Minister for Ambulance Services
29/11/2018 – 30/06/2019
- The Hon Martin Foley, Minister for Mental Health
1/07/2018 – 30/06/2019

The predominant objectives for which Mercy Hospitals Victoria Ltd was established are:

1. to carry on or assist in the carrying on of the charitable activities of the Sisters of Mercy in connection with hospital, healthcare and related services.

2. to operate:

- Mercy Hospital for Women, Heidelberg
- Werribee Mercy Hospital
- other hospitals, health and related services, as determined by the Company.

3. to educate and train:

- medical, nursing, social welfare and pastoral care students at undergraduate, intern and postgraduate level
- others engaged in hospital, healthcare and related services on a paid or voluntary basis.

The Company will operate at all times as part of the mission of the Catholic Church in conformity with canon law and in conformity with the ethical framework of the Institute of Sisters of Mercy of Australia and Papua New Guinea.

Central to our mission is providing care for those in need, irrespective of religion, faith, beliefs or background.

OUR SERVICES

Mercy Hospitals Victoria Ltd provides acute and subacute hospital care, mental health programs, specialist women's and newborns' health, early parenting education and support, and palliative care services.

Mercy Hospital for Women

Based in Heidelberg, Victoria, Mercy Hospital for Women offers obstetric, gynaecological and neonatal services and has one of only four neonatal intensive care units in Victoria. The Neonatal Intensive Care Unit is co-located with the Special Care Nursery and collectively they care for some of Victoria's most unwell babies. Mercy Hospital for Women provides maternity services, neonatology and paediatrics, perioperative services, gynaecology, women's health and associated health, support and diagnostic services. It is a major teaching hospital and specialist referral centre with the medical, nursing, midwifery and allied health expertise to treat the most complex obstetric, neonatal and gynaecological cases.

Werribee Mercy Hospital

Werribee Mercy Hospital is a general hospital providing surgical, medical, emergency, intensive care, maternity, newborn, renal dialysis, mental health, subacute, rehabilitation and palliative care services in the south western region of Melbourne. The hospital also provides a range of home-based support services including Hospital in the Home and Midwifery in the Home.

Mercy Health O'Connell Family Centre

Mercy Health O'Connell Family Centre is focused on the needs of vulnerable families and young children. The residential, day and community programs provide child-focused parenting skills to promote safe child development. The centre is increasing its support for vulnerable families including families with mental health issues. Services include:

- residential, day and community programs
- Cradle to Kinder program (home-based education and support)
- Play Steps program.

Mercy Mental Health

Mercy Mental Health supports people in south west metropolitan Melbourne with severe and complex mental illnesses by providing acute and community-based care.

Services are available to adults through acute inpatient programs, residential rehabilitation programs and crisis and community recovery-focused treatment programs. Mercy Mental Health also offers inpatient and community specialist perinatal mental health services to women and infants in western Victoria.

Mercy Palliative Care

While not officially part of Mercy Hospitals Victoria Ltd, Mercy Palliative Care is integrated into Mercy Health's service delivery through inpatient palliative care services at Werribee Mercy Hospital and through home-based palliative care services for people living in the western metropolitan region. Counselling, nursing and medical services, allied therapies, grief counselling and pastoral care services provide continuity of care to patients, their families and carers.

MERCY HEALTH STRATEGIC FRAMEWORK 2018–22

The *Mercy Health Strategic Framework 2018–22* provides the structure for which strategic decisions are made within Mercy Health. Our mission – to bring God’s mercy to those in need – defines what we do while our values of compassion, hospitality, respect, innovation, stewardship and teamwork speak to how we do it.

The *Mercy Health Strategic Framework 2018–22* is grounded in our Catholic heritage while recognising contemporary influences on our organisation. The Framework articulates five broad goals and associated objectives.

Care first

- We will respond to the needs of our community in person-centred approaches.
- We will care for, and about, marginalised and disadvantaged groups.
- We will empower people and partner with them to make informed decisions and choices.

Leading through service excellence and innovation

- We will provide safe, mission-driven, high-quality and expert services and care.
- We will use research, evidence and teaching to continue building on our expertise and improving our services.
- We will invest in technology and innovation to improve the outcomes of those for whom we care.

Differences made through partnerships

- We will collaborate and innovate with others to improve outcomes for the communities we serve.
- We will plan for, respond to and advocate for the current and emerging needs of our communities.
- We will work with the Church, government and others to extend our reach to our global community.

A growing, resilient and sustainable organisation

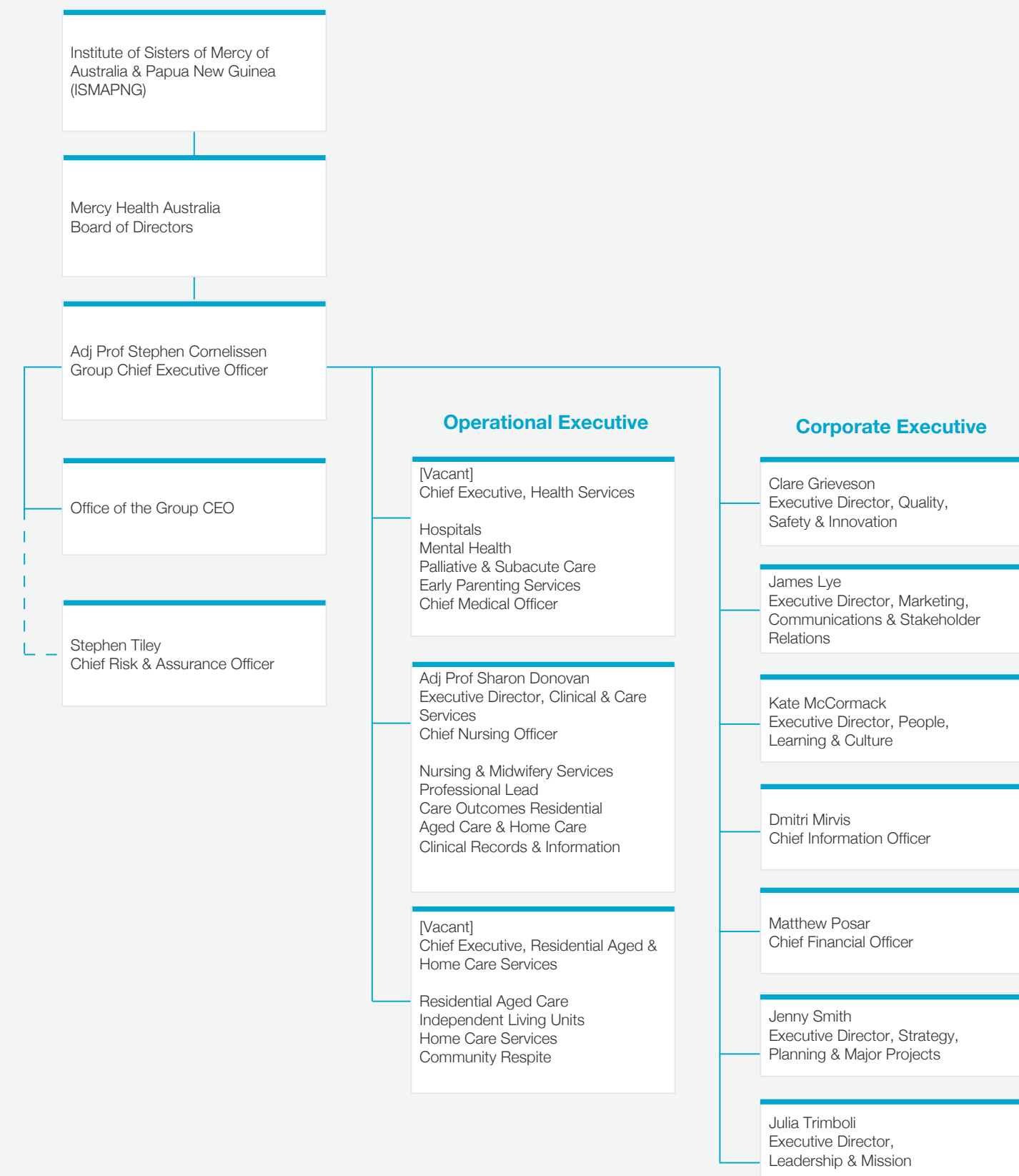
- We will pursue opportunities that provide diversification and growth of our services.
- We will operate with financial diligence and use contemporary business disciplines to ensure sustainability.
- We will act responsibly and care about environmental sustainability.

Strong mission-driven culture and vibrant workforce

- We will embody our values in everything we do and form our people to bring life to our mission.
- We will advance our commitment to an inclusive, flexible and safe workplace.
- We will foster continual learning, development and leadership.

The Framework is supported by the *Mercy Health Long Term Operational Plan 2018–22* and will be monitored against a range of success indicators. It will be put into action through annual business plans that will detail strategic initiatives that realise our mission.

ORGANISATIONAL STRUCTURE



GOVERNANCE

Mercy Hospitals Victoria Ltd Board

Mr Julien O’Connell AM (Chairman)
(concluded term 27 November 2018)

Ms Jo Barker

Ms Margaret Bounader

Ms Virginia Bourke (appointed Chair 27 November 2018)

Mr John Corcoran AM

Mr Martin Day

Adjunct Clinical Associate Professor Ian Haines

Sr Berice Livermore RSM
(commenced term 27 November 2018)

Mr Tim O’Leary

Adjunct Professor Susan Pascoe AM

Ms Agnes Sheehan (concluded term 27 November 2018)

Sr Joan Wilson RSM (concluded term 27 November 2018)

The Board is supported by five committees:

Finance, Audit and Risk Committee

Mr John Corcoran AM (Chair)

Ms Jo Barker

Mr Martin Day

Mr Tony Ryan

Mr Bruno Secatore

Ethics Committee

Mr Martin Day (Chair)

Dr Frances Baker RSM

Adjunct Professor Stephen Cornelissen

Mr Diarmid Davine

Reverend Dr Hoa Dinh SJ (concluded term May 2019)

Dr Genevieve Green

Sr Trudy Keur RSM (concluded term March 2019)

Ms Mary Klasen

Dr Linda Mellors (concluded term May 2019)

Reverend Emeritus Associate Professor Cormac Nagle OFM

Dr Carol Ong RSM

Mr Michael Taylor

Ms Julia Trimboli

Dr Bernadette White

Quality Committee

Adjunct Clinical Associate Professor Ian Haines (Chair)

Ms Kate Birrell

Ms Virginia Bourke

Ms Polly Caldow

Dr Jacqueline Collett

Dr Michelle Goh RSM

Mr Marcel Mihulka

Ms Sally Moore

Emeritus Professor Margaret O’Connor AM
(concluded term August 2018)

Human Research Ethics Committee

Mr Tim O’Leary (Chair)

Mr Matthew Baker (concluded term April 2019)

Dr Fiona Brownfoot

Mr Diarmid Davine

Ms Simonne Dax

Reverend Dr Hoa Dinh SJ

Mr James Dwyer

Prof Christine East (commenced term May 2019)

Dr Richard Hiscock (commenced term May 2019)

A/Professor Lisa Hui (commenced term 4 Dec 2018)

Ms Margaret Joss

Professor Susan McDonald (concluded term Dec 2018)

Reverend Emeritus Associate Professor Cormac Nagle OFM

Professor Margaret O’Connor
(commenced term October 2018)

Professor David O’Neal

Professor Michael Permezel

Ms Susan Phillips (concluded term December 2018)

Professor Peter Rendell

Ms Julia Trimboli (concluded term June 2019)

Dr Andrew Watkins

Corporate Governance Remuneration and Nomination Committee

Mr Julien O’Connell AM (Chairman) (concluded term 27 November 2018)

Ms Virginia Bourke (appointed Chair 27 Nov 2018)

Mr John Corcoran AM (commenced term Feb 2019)

Adjunct Professor Susan Pascoe AM (commenced term December 2018)

Mr John Moore (concluded term 27 November 2018)

BOARD

Ms Virginia Bourke, Chair

Virginia was appointed as a Director of the Mercy Health Boards in 2016, and was subsequently appointed Chair of Mercy Health in 2018. Virginia is a lawyer and consultant in private practice with a breadth of corporate governance and commercial experience. She has served as a director of several not-for-profit organisations including a term as a director of Mercy Health from 2008–14. She is currently Chairman of St John Ambulance Victoria and is a Director of St John Ambulance Australia.

Virginia has broad legal experience previously working as General Counsel for the Institute of Sisters of Mercy of Australia and Papua New Guinea and as Special Counsel in the Employment Law group at Minter Ellison Lawyers. Virginia brings a community perspective to her board roles based on her long involvement with local parish and school organisations.

“I am proud to be part of the Mercy story. For me there is immense appeal in the story of Catherine McAuley: a visionary, yet practical woman, whose leadership style was based on the warm relationships with those around her. I believe one of the strengths of our Board is the diversity of its members, particularly its gender diversity. I aim to contribute not only my professional skills, but my real-life experience and my perspective as a woman involved in many aspects of community life.”

Mr Julien O’Connell AM

Mr Julien O’Connell AM, Chairman (concluded term as Board Director in November 2018)

Julien was appointed as a Director of the Mercy Health Boards and to the Boards’ Finance & Audit Committee in 2005, and was subsequently appointed Chairman of Mercy Health in 2008. He has a diverse

background and qualifications in accounting, insurance, risk management and marketing, as well as being a Fellow of the Australian Institute of Company Directors. Julien is also Director or Chairman on a number of boards including the Catholic Archdiocese of Melbourne Finance Council. He is a member of the State Government Council of Board Chairs, supports Enterprise Ireland (Irish Government Trade Body) as Trade Attache in Victoria, and is Pro Chancellor – Australian Catholic University. Julien’s term as Chairman of the Mercy Health Board concluded in November 2018. Julien was subsequently appointed Chairman of the Mercy Health Foundation.

“With the support of our Boards and management team we remain focused on the sustainable delivery of our services so we can be available to those in need, including the marginalised, and always address the issues of our time.”

Ms Jo Barker

Jo is a Partner within Ernst & Young’s Transaction Advisory team in Melbourne. She has over 20 years of transaction experience in Australia, Asia Pacific and the UK, helping private and public companies achieve long-term competitive advantage by advising on the management of all aspects of their capital agenda including divestments, acquisitions, IPOs, mergers and demergers. She also serves as the Oceania Consumer Markets Leader for Transactions and sits on the Executive leadership team. Jo joined the Mercy Health Boards and the Boards’ Finance, Audit and Risk Committee in 2015 and provides valuable business knowledge and insight.

“I hope that my commercial experience and diverse perspective are a valuable addition to the existing strong board and management capability.”

Ms Margaret Bounader

Margaret joined the Mercy Health Boards in 2011. She has more than 20 years’ experience working in international trade and investment. During her career with Austrade, Margaret worked with companies from SMEs to large multinationals across all industry sectors, helping them win business in overseas markets. Margaret previously spent 10 years working overseas as Trade Commissioner in South Africa, Nigeria, Singapore and Malaysia. Margaret is a co-founder of the Women in Global Business program and was previously a member of the City of Melbourne’s Enterprise Melbourne Advisory Board. Margaret joined the Mercy Health Foundation Board in 2013 and is currently Deputy Chair. She is also a member of the Victorian Chapter of the Australian Catholic University.

“I am inspired by Mercy Health’s strong emphasis on care and treating every person with dignity and compassion at every stage of life.”

Mr Martin Day

Martin joined the Mercy Health Boards in 2016. He has since joined the Boards’ Finance, Audit and Risk Committee and chairs the Ethics Committee. Before joining the Mercy Health Boards, Martin was Chief Executive Officer of the Private Hospitals Division of St Vincent’s Health Australia, which included eight leading private hospitals in Melbourne, Sydney, Brisbane and Toowoomba. Martin has held senior executive roles in the health service industry for over two decades, in both Australian and international acute healthcare markets including South East Asia and the Pacific. He also has 14 years of corporate governance experience in the not-for-profit sector, including healthcare and, more recently, industry superannuation.

Martin’s qualifications include: Associate Diploma of Valuations and Real Estate Management, RMIT; Master of Business Administration, Deakin University, Victoria (MBA); Fellow of Australian Institute of Company Directors (FAICD) and Graduate of Australian Institute of Superannuation Trustees (GAIST Adv). His industry experience includes risk management, clinical governance, workforce development, financial management, operational management, stakeholder

engagement, public/private partnerships (PPP) and social accountability. Martin is also a director of Prime Super, an industry superannuation fund, and Cabrini Health Limited.

“I am inspired by the Foundress of the Sisters of Mercy, the Venerable Catherine McAuley, and her successors, who have dedicated their lives to improving the wellbeing of those who are less fortunate than others, vulnerable and in need of compassionate and holistic care. These works are now largely provided by laypersons who, like the Sisters of Mercy, have a very strong vocation and actively embrace the mission, vision and values of Mercy Health.”

Mr John Corcoran AM

John has a Bachelor of Laws (Monash) and Bachelor of Economics (Monash) as well as being an Accredited Specialist in Business Law (Law Institute of Victoria). He is a former Chairman of Russell Kennedy, and now serves as a Principal. John is a recipient of the Centenary Medal for services to Australian society and to the law. He is Chairman of the Legal Practitioners’ Liability Committee and was on the Legal Service Board between 2005–10 and again in 2013. He was Law Council of Australia President in 2009, Law Institute of Victoria President from 2001–02, and a Board Member of the International Bar Association, 2009–12. John was named the Retirement Villages and Senior Living Law ‘Lawyer of the Year’ in 2013 and 2020. He was also recognised by Best Lawyers in 2012 – 2020 for expertise in Retirement Villages and Senior Living Law. He was awarded an Order of Australia in the 2017 Australia Day Honours. John has been on the Mercy Health Boards since 2011 and is Chairman of the Boards’ Finance, Audit and Risk Committee and a member of the Boards’ Corporate Governance, Remuneration and Nomination Committee.

“I enjoy being associated with such a diverse organisation that provides care and support to so many members of our community. I hope that my experience and input at Board level can help our dedicated staff in carrying out the Mercy mission. The vision and Catholic ethos of the Sisters of Mercy inspire us to continue the good work of our predecessors.”

Adjunct Clinical Associate Prof Ian Haines

Ian joined the Mercy Health Boards and the Quality Committee as Chairman in September 2016. He has more than 30 years’ experience as a medical oncologist and has a special interest in medical ethics, palliative care and health equity, as a participant in professional, government, non-government and community work in all three areas. Ian is also active in community health, lecturing to diverse groups on cancer treatments and palliative care topics and he regularly writes articles and reviews for local and international journals. He is an advisor to medical panels, legal firms and government superannuation funds.

Ian is an Adjunct Clinical Associate Professor in the Department of Medicine, Monash University at The Alfred and Cabrini hospitals, where he has particular research interests in treatment of early prostate cancer, palliative care and end-of-life care, alternative therapies for cancer and relations between physicians and industry. He is a member of the End of Life Care Committee at Cabrini Health, member of the American Society of Clinical Oncology, Clinical Oncology Society of Australia, and the Ethics subcommittee of the Medical Oncology Group of Australia.

“I have been fortunate to have worked at Cabrini for about 30 years and have a deep respect and admiration for the many devoted and wonderful people that work in the Catholic healthcare sector. In my time at Mercy Health, I have been impressed by the calibre of the people and the organisation and its strong commitment to mission and the care of the less fortunate in our community. I look forward to contributing to the vision and growth of Mercy Health.”

Mr Tim O’Leary

Tim joined the Mercy Health Boards in 2017 and is Chairman of the Mercy Health Human Research Ethics Committee. Tim is an experienced corporate affairs executive having worked in the oil, banking and telecommunications industries. He is currently Executive Director Rural Affairs & Chief Sustainability Officer at Telstra. In this role he is responsible for rural affairs, strategic community and reputational initiatives, corporate responsibility and Telstra’s environment strategy. Tim is a Member of Council at Newman College (University of Melbourne) and a Board member of the Telstra Foundation. He is also a former Board member of eMotion 21, a small community arts

organisation catering for the needs of young people with Down Syndrome. Tim has an Honours degree in Arts and a Graduate Diploma in Philosophy from the University of Melbourne.

“I welcome the opportunity to support and serve the ministry of Mercy Health. It is a privilege to be part of a Catholic organisation providing compassionate and responsive care to all people, but especially the vulnerable and disadvantaged, at all stages of life.”

Adjunct Professor Susan Pascoe AM

Susan was appointed to the Mercy Health Boards in March 2018. She is President and Chair of the Australian Council for International Development (ACFID) and Chair of the Community Director’s Council. She is a Trustee of St John of God Health, and is Principal of Kadisha Enterprises and a Director of BaxterLawley.

Susan was the inaugural Commissioner for the Australian Charities and Not-for-profits Commission from 2012-17 and subsequently co-chaired a review of early childhood education in Australia. From 2006-11, Susan was Commissioner of the State Services Authority in Victoria. In 2009, she was appointed as one of three commissioners for the Royal Commission into Victoria’s Black Saturday bushfires.

Susan’s earlier career was in education. She served as President of the Australian College of Educators, Chief Executive Officer of the Victorian Curriculum and Assessment Authority and Chief Executive of the Catholic Education Commission of Victoria. Susan chaired the Australian National Commission for UNESCO and has chaired or served on a number of education, health and government boards.

In 2007, Susan was appointed Member of the Order of Australia for service to education. In 2016, she was awarded the Leadership in Government Award for her outstanding contribution to public administration in Australia.

“I was educated by Mercy Sisters in primary school, and have worked with a number of Mercy women as education colleagues as well. I have deep respect for their commitment to the poor and marginalised, and to their professional approach to their missionary endeavours. I’m honoured to have some role in continuing the work of Catherine McAuley here in Australia.”

Ms Agnes Sheehan

Concluded term 27 November 2018

Agnes has served on the Mercy Health Boards since 2009. She has held a number of senior executive positions in the information and communications technology industry over the past 20 years, leading highly engaged teams to deliver organisational integration, transformation and growth, primarily within large enterprise, government and not-for-profit organisations. Agnes led five substantial business units at Telstra over 13 years, including her most recent roles as Director of Enterprise Mobility and Director of Connectivity and Network Sales. Prior to Telstra, Agnes was the Regional Director Asia Pacific for Ericsson Enterprise and also worked for an aerospace industry start-up owned by GE and Lufthansa. She is a graduate of the Australian Institute of Company Directors and holds a Bachelor Degree in Business Studies and a Diploma in Public Relations.

“I consider it a great privilege to serve an organisation that constantly advocates for those in need, that is not afraid to challenge, and whose leadership and staff live the mission of ‘care first’ every day, relentlessly building an enduring passion and capacity to serve the people in our care and the wider community.”

Sr Joan Wilson RSM

Concluded term 27 November 2018

Sr Joan trained as a primary school teacher and has taught and held the position of Principal of parish primary schools across Victoria over a 30-year period. As Deputy Chair, School Services, of the Catholic Education Office of Melbourne she was responsible for selecting and appointing principals and orientating and mentoring new principals. Sr Joan maintains her involvement with Catholic education as a member of several school and education-related boards and committees. Sr Joan managed the Convent of Mercy Hostel from 2007–10 and continues to care for a

number of Sisters of Mercy in aged care. In 2011, she joined the Mercy Health Boards and in 2014 celebrated her golden jubilee as a Sister of Mercy. Sr Joan’s governance roles have spanned various Mercy ministries. She was a member of the Sisters of Mercy Melbourne Congregation leadership team from 2000–05 and a member of Mercy Secondary Education Inc and MacKillop Family Services.

“As a Sister of Mercy, I am able to contribute to the ongoing ministry of Mercy in partnership with all those who govern, manage and work in our care services.”

Sr Berice Livermore RSM

Berice joined the Mercy Health Boards in November 2018. A Religious Sister of Mercy, Berice has various qualifications including a Bachelor of Health Administration, as well as extensive experience administering non-profit organisations, particularly in healthcare.

Berice is a consultant to many religious congregations, assisting them in their financial management, governance, and planning of strategies for meeting the demands of caring for the elderly among them.

Berice has been a Sisters of Mercy Congregation Leader and Community Leader, and Chair of the Institute Finance Committee. She is currently a member of the Board of Mercy Works Ltd and chairs Catherine McAuley Services Ltd, and the Sisters of Perpetual Adoration Finance Committee.

“As a Sister of Mercy, membership of the Mercy Health Board provides me with the opportunity to be part of a dynamic team who desire to continue and strengthen the Mission of Mercy. Together we will speak the word mercy, the living and active word of mercy, as a collective response to those whom we serve, especially those in our communities feeling vulnerable.”

Adjunct Professor Stephen Cornelissen BN, MHA, GradCert Lead&Cath Cult, PGDip Strat&Inn (Oxf)

Group Chief Executive Officer

Stephen is an experienced healthcare executive who has worked in a range of roles and assumed the role of Group Chief Executive Officer, Mercy Health on 1 July 2011.

During Stephen’s tenure, Mercy Health has grown to one of Australia’s top 70 private companies, providing health, aged and home care services in Victoria, New South Wales, Queensland, Western Australia and the Australian Capital Territory.

Stephen is committed to, and passionate about, providing and advancing relevant and sustainable models of care and support, particularly for those who are disadvantaged or facing adversity. For his commitment to advancing the health and aged care sector, Stephen holds an Adjunct Professor title with the Australian Catholic University and is a Pay Equity Ambassador with the Workplace Gender Equity Agency.

Prior to joining Mercy Health, Stephen held several senior executive roles in New Zealand and South Australia, having worked at provider and state policy and funding levels of the health system.

Stephen is a Non-Executive Director of Aged & Community Services Australia (ACSA), Paramedics Australasia (Community Director) and the Global Ageing Network (formerly IASHA).

Stephen has academic qualifications from a number of universities in Australia and the University of Oxford, and with graduate qualifications is a Fellow of the Australian Institute of Company Directors. In 2016, *The CEO Magazine* awarded Stephen CEO of the Year and Health & Pharmaceuticals Executive of the Year.

Dr Linda Mellors BA, BSc (Hons), PhD (Med), Grad Cert HSM, GAICD

Chief Executive – Health Services (concluded term 17 June 2019)

Linda was appointed Chief Executive (formerly Executive Director) of Health Services in August 2013. She was responsible for the oversight of Mercy Hospital for Women, Werribee Mercy Hospital, Mercy Mental Health, Mercy Palliative Care and Mercy Health O’Connell Family Centre as well as hospital services in New South Wales. Linda joined Mercy Health in 2009 as Director Performance, Planning and Strategy for Health Services and has held titles including Executive Director Mercy Hospital for Women and Mercy Health O’Connell Family Centre, and Executive Director Mercy Public Hospitals Inc.

Linda was appointed Chief Operating Officer, Mercy Health in June 2018, which brought Mercy Health’s residential aged care, home care services, and retirement villages into Linda’s operational portfolio, in addition to her Chief Executive – Health Services role.

Linda was co-Chair of the Chief Executive Officer forum from January 2018 to June 2019, which is a meeting between all Victorian metropolitan chief executive officers and senior representatives from the Department of Health and Human Services.

Linda was a member of the Catholic Health Australia Health Policy Committee, Chair of North Eastern Melbourne Integrated Cancer Service (NEMICS) Governance Committee and member of various sector committees. Linda held executive roles in the Victorian public health sector for more than 15 years and is passionate about improving access to excellent and contemporary health services. Linda completed the Williamson Community Leadership Program in 2012 and was named Catholic Health Australia Emerging Leader in 2013.

Linda left Mercy Health on 17 June for a position in the private sector.

Ms Julia Trimboli MA (Th), M Arts (Bioethics)

Executive Director, Leadership and Mission

Julia was appointed to the position of Executive Director, Leadership and Mission in June 2015 and is responsible for guiding Mercy Health’s leadership team in empowering our mission.

Julia also brings extensive experience in mission leadership roles, which includes Catholic Health Australia, Calvary Community Care and Cabrini Health. Julia has a deep commitment to, and sound knowledge of, Catholic health provision and what that means for mission from community, public and private health perspectives.

Julia is Executive Sponsor for the Board Ethics Committee and the Senior Management Environment Committee, and chairs the Voluntary Assisted Dying Working Party. She is a member of many external committees including the Catholic Health Australia Voluntary Assisted Dying Implementation Taskforce and the Catholic Health Australia Mission Identity Committee.

Julia provides guidance and leadership on mission and formation for the Mercy Health Board, Executive and senior leaders.

Ms Kate McCormack FAHRI, MBA (IRHR), GradDipHRM&IR, MBus(HRM&IR)

Executive Director, People, Learning and Culture

Kate has more than 20 years’ experience in human resources and holds a Master of Business in Industrial Relations and Human Resource Management from RMIT University/Grenoble Ecole de Management France. Kate has also undertaken study at the London Business School and Harvard University.

Kate is responsible for the development and implementation of the Group Human Resources strategy at Mercy Health and provides strategic advice to the Group Chief Executive Officer and wider Executive Group. Kate has embarked on a significant project to redesign the traditional role of the residential aged care worker, while collaborating with a tertiary provider to build and sustain the aged care workforce of the future.

Kate has been instrumental in developing and overseeing Mercy Health’s Workplace Gender Equality Agency Employer of Choice for Gender Equality strategy, a citation the organisation has been awarded since 2008. Kate was recognised in various industry award programs in 2017 for initiatives including Mercy Health’s Leadership Capability Framework and Thrive @ Mercy. Previously, Kate has also been the recipient of the HR Partners Award for Best HR Leader, HR Leaders Compass Awards, and the Diversity Leader for the Advancement of Women, EOWA Business Awards. Under Kate’s leadership, Mercy Health has won the Australian Business Awards Employer of Choice Award and 7th Asia Best Employer Brand Awards Best Use of Technology for Recruiting Award.

A regular speaker at national HR conferences, Kate is a member of the Australian Human Resources Institute Presidents forum and a Fellow of the Australian Human Resources Institute. Kate has previously served as a Board member of the Diversity Council Australia and simultaneously served on their Board HR committee and IT committee.

Mr Tony Goad BBus (Accountancy)

Executive Director, Finance and Corporate Services (concluded term December 2018)

Tony was appointed Executive Director Finance and Corporate Services for Mercy Health in June 2011 after serving as the Acting Chief Financial Officer for approximately nine months. He has more than 20 years’ experience in the health and aged care sectors through executive positions, including 11 years as an Associate Director of Paxton Partners, a healthcare consultancy firm, and four years as Chief Financial Officer and Chief Information Officer of the Southern Health Care Network.

Before working in health, Tony undertook various executive and consulting roles in banking and merchant banking. Over the past two decades he has held a number of Board and Governance appointments including 12 years as a member of the governing Council of the Victorian Institute of Forensic Mental Health (Forensicare); five years as a Director of the Mental Health Legal Centre (recently completed); and, since January 2018, as a Board Member of BBI-TAITE (The Australian Institute of Theological Education).

Ms Clare Grieveson BSc (Hons) (Lond), MHSM, GradCert Lead&Cath Cult, AFACHSM, GAICD

Interim Chief Executive – Health Services (commenced term 18 June)

Executive Director, Quality, Safety and Innovation

Clare assumed the role of Executive Director Quality, Safety and Innovation in February 2014. She is responsible for the overall leadership and direction of consumer experience, service improvement, work health and safety, WorkCover, emergency management, business continuity planning, quality compliance and quality improvement for Mercy Health. Clare has a clinical background in speech pathology and 25 years’ experience in the health industry, including senior management roles at Monash Health and service planning and performance roles at the Victorian Department of Health and Human Services. She is an Associate Fellow of the Australasian College of Health Service Management and Graduate of the Australian Institute of Company Directors. She is a Board Director of Assisi Centre Aged Care and a member of the Board Finance and Risk Management Committee at McAuley Community Services for Women.

Clare was appointed Interim Chief Executive – Health Services on 18 June.

Ms Jenny Smith BComp (CompSci, InfoSys, Acctg), CPA, MBA, GAICD

Executive Director Strategy, Planning and Major Projects

Jenny commenced with Mercy Health in October 2009 and has held a number of senior positions in both finance and strategy. Jenny was appointed as Executive Director Strategy, Planning & Major Projects in February 2018. Jenny is focused on ‘future beds’, providing oversight for strategy, service planning, capital development, commissioning and group property. With an ambitious growth agenda and a drive for excellence, Mercy Health is actively expanding and developing our future service offerings.

Jenny has more than 20 years’ experience working across a number of industries including mining and resources, media, airlines, telecommunications, financial services and consulting.

Mr James Lye B Bus(Communication), AAICD

Executive Director, Marketing, Communications and Stakeholder Relations

James joined Mercy Health in 2016 after 20 years in senior positions in government and in corporate and not-for-profit organisations across aged care, education, mining and resources, marketing and professional services.

As a senior government adviser, James has held portfolios including health, mental health, education and early childhood development, child protection, housing, ICT and biotechnology, emergency management and youth justice. He has been a member of the national government advisory team for a top-tier professional services firm. He is an Executive Fellow of the Australian and New Zealand School of Government.

James provides leadership to Mercy Health on government and public policy engagement, stakeholder relations, marketing, communications and media.

James has a special interest in the role of creativity and design in strategy and public policy.

Mr Dmitri Mirvis BSc

Chief Information Officer

Dmitri commenced as Chief Information Officer with Mercy Health in 2012. Dmitri is responsible for the leadership and direction of the Information and Communications Technology department for Mercy Health, overseeing and developing key strategic and transformational programs for the organisation.

Dmitri has more than 26 years’ experience in the IT industry including 14 years in senior positions with multinational organisations based in Asia and Australia. Dmitri has significant experience leading IT strategy, planning and business, and has held senior roles at Standard Chartered Bank and global commodities trading and supply chain business Noble Group.

HEALTH SERVICES LEADERSHIP TEAM

Mr Matthew Posar BBus, Grad Diploma (Investment), CA

Chief Financial Officer

Matthew assumed the role of Chief Financial Officer at Mercy Health in June 2018. His role involves oversight and direction of the finance and business services function of the organisation.

An accomplished senior Executive with considerable CFO and CEO experience, Matthew has a strong commercial background and demonstrated executive experience in ASX listed, private equity-backed companies and not-for-profit organisations. He has leadership experience in the fields of professional services, mining and health.

Prior to joining Mercy Health, Matthew was CFO and Head of Corporate Services of headspace, the National Youth Mental Health Foundation, from 2012 to January 2018. In addition to his CFO role, he also was the headspace Interim CEO from June 2016 to February 2017.

Matthew has a proven track record in delivering successful commercial and strategic outcomes, with expertise in all aspects of finance including accounting, treasury, government funding and risk management.

Ms Katherine Burton BAppSc(MedRad), MBA

Acting Executive Director, Quality, Safety and Innovation (term commenced June 2019)
Director, Quality and Innovation

Katherine was appointed to the position of Director Quality and Innovation in January 2019. Katherine is responsible for leading and directing the Health Services quality systems that support the provision of high quality, patient-centered and safe care. Katherine has a clinical background in nuclear medicine. She has more than 20 years’ experience in the health industry, holding various senior management and executive roles in quality and safety and operations across a broad range of health services. Katherine also has extensive strategic project management experience.

Katherine was appointed Acting Executive Director, Quality, Innovation and Service Improvement in June 2019.

Associate Professor David Allen MBChB, MMed(O&G), FCOG(SA), FRANZCOG, CGO, AFRACMA, PhD

Chief Medical Officer

David started working at the Mercy Hospital for Women in 1991 as a Fellow commencing his training in gynaecological oncology. In 1993-94 David spent 15 months in the Netherlands gaining further experience in gynaecological cancer surgery. David returned to Mercy Hospital for Women in April 1994 as a consultant in the Department of Gynaecological Oncology. In 1998 David was appointed Clinical Director Surgical Services. In 2007 he was appointed Chief Medical Officer/Gynaecological Oncologist, followed by a full-time appointment as Chief Medical Officer in late 2017, when David ceased clinical work at Mercy Hospital for Women.

David remains on national and state government committees and boards as well as a research foundation and national society boards.

Ms Filomena Ciavarella BAppSc(MedRad), GradDipBus

Director, Quality and Innovation (term concluded November 2018)

Filomena was appointed to the position of Director Quality and Innovation in September 2015, and was responsible for leading and directing the Health Services quality systems that support the provision of high-quality, patient-centred and safe care.

Filomena has a clinical background in nuclear medicine. She has more than 18 years’ experience in the health industry, holding various senior management roles in quality and safety across a broad range of health services.

Filomena left Mercy Health in November 2018 for an executive role in the public hospital sector.

Ms Helen Cull GradDip HR&IR, GradDip Business, GCLAC

Human Resources Manager

Helen has been a member of the People, Learning and Culture team at Mercy Health since 2009. She was appointed to the role of Human Resources Manager for Health Services in 2015. Responsible for operational and strategic human resources initiatives within Mercy Health’s Victorian and New South Wales health services, Helen provides advice to the Chief Executive Health Services, Director of Operations Health Services and Health Services senior management. Prior to working in the health sector, she held roles in a variety of industries including government enterprise, tertiary education and private business.

Adjunct Professor Sharon Donovan BN, Mid Cert, MBA, GAIDC

Executive Director, Nursing and Midwifery

Sharon commenced at Mercy Health in February 2018. She has operational responsibilities for nursing and midwifery education, infection control, environment and food services and health information services in our Victorian hospitals. She also has professional responsibility for nurses and midwives across Victorian and New South Wales hospitals and aged care homes around the country. Sharon has previous executive experience in metropolitan and regional public and private organisations and has been a Chief Executive in a large not-for-profit aged care business.

Ms Gillian Evans (RN, RM, MHA)

Program Director Women’s and Children’s Services

Gillian is responsible for the delivery of obstetric, gynaecology and neonatal services at Werribee Mercy Hospital and Mercy Hospital for Women; including one of four neonatal intensive care units in Melbourne and the Mercy Health Breastmilk Bank. She has more than 30 years’ experience in healthcare, including 15 years practising as a midwife before moving into healthcare management. Gillian is passionate about the provision of evidence-based quality care, ensuring safe birthing outcomes for women and babies. Gillian is the Executive sponsor for the Mercy Hospital for Women Community Advisory Group, the Medication Safety Committee and the Obstetric Triage Decision Aid project. She believes success is driven at a grassroots level, where her work involves building a positive workplace for all staff.

Ms Fiona Gray RN, CCRN, GDCM, MHA

Program Director, Medical, Subacute and Palliative Care Services

Fiona Gray was appointed Program Director, Medical, Subacute and Palliative Care Services in August 2016. She is responsible for a wide range of services including the emergency departments at Werribee Mercy Hospital and Mercy Hospital for Women; the acute medical wards, renal dialysis, Hospital in the Home and Intensive Care Unit at Werribee Mercy Hospital; inpatient and community palliative care; and Victorian and NSW subacute services. Fiona was previously Surgical Nurse Unit Manager at Werribee Mercy Hospital from 2005-12.

Fiona is a Registered Nurse with more than 30 years’ experience in Victoria’s public health services, mainly in intensive care nursing and leadership. This background provides the foundation of Fiona’s passion for providing the highest level of care to patients and families across the care continuum. She is particularly focused on managing acute and deteriorating patients, supporting quality end-of-life care and providing comprehensive care.

Ms Shannon Lang B. App. Sc. (OT)

Program Director, Mental Health Services

Shannon was appointed Program Director Mental Health Services in May 2018. She is jointly responsible for the leadership and direction of the Mental Health program.

Shannon has a clinical background as an Occupational Therapist and has more than 19 years’ experience in health, including 13 years at a senior leadership level within the public sector. Her leadership roles have encompassed child and youth mental health, adult mental health, allied health, ambulatory care and specialty medicine, in addition to strategy, planning and access.

Ms Melissa McDonald BSc, GradDipBA, MEnt

Program Director, Perioperative and Specialist Services

Melissa has worked in senior health management and executive roles in both the private and public healthcare sectors for over 20 years and joined Mercy Health in 2009. Melissa is currently Program Director, Perioperative and Specialist Services. Prior to this, she was Deputy Director of Nursing, Ambulatory Care and Surgical Services at Mercy Hospital for Women.

Melissa is passionate about mentoring managers and helping facilitate career pathways and professional development opportunities that ensure the highest standard of performance and the delivery of the best possible care for the communities we serve.

Mr Mark O’Connor B Com (Melb), CA

General Manager, Health Services Finance

Mark joined Mercy Health in May 2011 and has been General Manager – Health Services Finance since March 2015. Mark’s qualifications include a Bachelor of Commerce and a Chartered Accountant. He has more than 20 years’ experience across a broad range of accounting functions and roles, including taxation, corporate governance, superannuation and financial reporting. Mark is responsible for the revenue, accounting, finance and business analytics services.

Ms Elizabeth Murdoch BA, B.Ap. Sc., Grad Dip HSM, Grad Cert HSM, AFACHSM, GAICD

Program Director, Ambulatory, Community and Allied Health Services (term concluded February 2019)

As Program Director, Ambulatory, Community and Allied Health Services, Liz is responsible for the effective and efficient delivery of specialist clinic outpatient services, the early parenting program at Mercy Health O’Connell Family Centre, medical imaging, Aboriginal Health programs, allied health services (therapy and sciences), pastoral care services and multicultural and interpreting services.

Liz joined Mercy Health in December 2012. With a background in health that spans over 25 years, Liz has significant industry experience which has equipped her with a deep knowledge of the healthcare sector. Liz has a strong interest in patient-centered care and partnering with patients, families and communities to deliver great outcomes for our patients.

Liz left Mercy Health in February 2019.

Ms Sharon Olivier BPod, LLM (Health & Medical Law), MBA

Executive Officer – Health Services

Sharon commenced as Executive Officer – Health Services in February 2016 and provides high-level support and advice to the Chief Executive – Health Services. She has 20+ years’ experience in public healthcare in a range of clinical and senior management roles across acute and sub-acute settings. Sharon’s understanding of the healthcare system is advanced and extends to the policy and funding mechanisms that underpin the wider system. This has been reinforced by Sharon’s experience working in the areas of health service performance, service planning and capital project management at the Victorian Department of Health and Human Services.

Professor David O’Neal MBBS, MD, FRACP

Clinical Director, Medicine, Subacute and Palliative Care Services

David joined Mercy Health in 1995. In addition to his administrative duties, he is directly involved with and committed to providing the best possible clinical care for patients admitted to Werribee Mercy Hospital.

David also works as a consultant endocrinologist with St Vincent’s Hospital Melbourne. He has appointments with the University of Melbourne, the University of Notre Dame and the University of Sydney where he is involved in undergraduate and postgraduate teaching. He heads a research team with the University of Melbourne with a focus on type 1 diabetes research.

Mr Jason Payne BN, GC-HLTHSM, DipBus, MC-ENT

Director of Operations – Health Services

Jason was appointed Director of Operations, Health Services on 10 December 2018 and has operational oversight of Mercy Hospital for Women, Werribee Mercy Hospital, Mercy Mental Health, Mercy Palliative Care and Mercy Health O’Connell Family Centre as well as hospital services in New South Wales.

Jason has a clinical background in nursing and 25 years’ experience in the public health sector across acute, subacute and ambulatory care. Previously he has worked at the Department of Health and Human Services and across a broad range of roles at Austin Health including as the inaugural Director of Cancer and Neurosciences for the Olivia Newton-John Centre.

Jason believes strong consumer engagement is critical for improving better patient care and outcomes and has a passion for working with our consumers to achieve this.

Dr Michael J Rasmussen MBBS, MRCOG, FRANZCOG

Clinical Services Director, Women’s and Children’s Services

Michael joined Mercy Hospital for Women as a Resident Medical Officer in 1985. After completing his Fellowship and three years overseas, he returned as a consultant Obstetrician Gynaecologist at Mercy in 1992. Michael occupied a number of roles within the RANZCOG state and federal bodies, and was awarded the President’s Medal in 2017. Michael retired from private obstetric practice in 2016, and now works full-time for Mercy Health at Mercy Hospital for Women and Werribee Mercy Hospital.

Clinical Associate Professor Scott Simmons BSc, BMBS, FANZCA, MBA

Clinical Services Director, Perioperative and Specialist Services

Scott has been a specialist anaesthetist for 25 years and Head of Anaesthesia at Mercy Hospital for Women from 2007-19. Currently, Scott is Clinical Services Director, Perioperative and Specialist Services Program. He was Chair of the Serious Incident Review Committee for seven years. Scott is a current Cochrane Collaboration author and reviewer and an editor for *Anaesthesia and Intensive Care*. His research interests are the use of ultrasound in obstetric anaesthesia, maternal critical care, communication for clinicians and understanding critical incidents in healthcare.

Associate Professor Dean Stevenson MBBCh, M.Med(Psych), FRANZCP

Clinical Services Director, Mental Health Services

Dean has been a Consultant Psychiatrist with Mercy Mental Health for 17 years with 14 of those years served as Clinical Services Director. He is jointly responsible for the leadership and direction of the Mental Health Program.

Dean has a medical background in psychiatry spanning three decades, having worked as a psychiatrist in Australia and his native country of South Africa. Dean has spent more than a decade in clinical governance and senior leadership roles.

Dean holds an academic post as Associate Professor at the University of Notre Dame Faculty of Medicine Sydney – Melbourne Clinical School.

Ms Erin Wilson Bsc Med Sc, BPhysio, MPH

Program Director, Ambulatory, Community and Allied Health Services

Erin is responsible for the effective and efficient delivery of specialist clinic outpatient services, Mercy Health O’Connell Family Centre, Medical Imaging, Aboriginal Programs, Allied Health services (therapy and sciences), Pastoral Care Services and Multicultural and Interpreting Services.

Erin joined Mercy Health in June 2019. She has over 15 years’ experience in leadership positions in clinical, management, policy and project roles across public hospital and private health settings.

Erin is passionate about providing safe, high-quality care through innovative, inter-professional service models that are co-designed with consumers. Erin has a strong interest in coaching to empower staff to achieve high standards of performance and a values-driven workplace culture.

Ms Katie Yeaman BN, Grad Cert (Renal)

Acting Director, Quality and Innovation

Katie joined Mercy Health in 2019 as Manager, Accreditation and Clinical Risk. Katie was appointed to the position of Acting Director Quality and Innovation in June 2019, and is responsible for leading the systems that support Mercy Health to provide patient-centred and safe care.

Katie has a clinical background in renal nursing. She has more than 15 years’ experience in public health, holding various senior roles across a range of health services.

STATEMENT OF PRIORITIES 2018/19

Goals	Strategies	Health service deliverables	Final progress
Better health A system geared to prevention as much as treatment Everyone understands their own health and risks Illness is detected and managed early Healthy neighbourhoods and communities encourage healthy lifestyles	Better health Reduce statewide risks Build healthy neighbourhoods Help people to stay healthy Target health gaps	 Progress the staged expansion of the Mercy Health Breastmilk Bank that will enable donated breastmilk to be collected and distributed at neonatal intensive care units at other Victorian tertiary women’s and children’s services. Implement the Strengthening Hospital Responses to Family Violence (SHRFV) initiative, including: <ul style="list-style-type: none">• embedding the SHRFV whole-of-hospital model for identifying and responding to family violence internally• implementing a Family Violence Workplace Support Program (part of the SHRFV model) to support staff experiencing family violence• implementing screening for family violence in antenatal settings.	<ul style="list-style-type: none">• Achieved.• Memorandum of Understanding signed with Monash Children’s Hospital and Royal Children’s Hospital (signing of Memorandum of Understanding with Royal Women’s Hospital is pending).• Monash Children’s Hospital commenced as a satellite site on 3 June 2019. <ul style="list-style-type: none">• Achieved.• SHRFV training for managers and staff rolled out and embedded in whole of hospital model.• Key procedures and resources to support clinical practice embedded in whole of hospital model. Further work to embed practice will be undertaken upon the release of the Multi-Agency Risk Assessment and Management Framework (MARAM) practice tools and guidelines.

Goals	Strategies	Health service deliverables	Final progress
Better access Care is always there when people need it More access to care in the home and community People are connected to the full range of care and support they need There is equal access to care	Better access Plan and invest Unlock innovation Provide easier access Ensure fair access	Improve hospital access for people living in the south west of Melbourne by: <ul style="list-style-type: none"> commissioning the Stage 1C expansion of Werribee Mercy Hospital finalising master planning options to facilitate future stages of development at Werribee Mercy Hospital. 	<ul style="list-style-type: none"> Achieved. Werribee Mercy Hospital Stage 1C expansion commissioned in August 2018 with additional capacity being progressively rolled out. We continue to work with DHHS and VHHSBA to advocate for the next stage of master planning at WMH.
		Progress options for relocation of the Mercy Health O’Connell Family Centre.	<ul style="list-style-type: none"> Achieved. Mercy Health O’Connell Family Centre Model of Care review completed and report finalised. Participated in consultations with DHHS and Deloitte in relation to the Victorian Early Parenting Centres Service Directions Report. We continue to work with DHHS, local government and primary care organisations in our endeavours to locate a suitable future site for the Mercy Health O’Connell Family Centre.
		Refresh and progress our Reconciliation Action Plan to ensure the Aboriginal community can equitably and safely access care that is culturally appropriate.	<ul style="list-style-type: none"> In progress. Reconciliation Action Plan Committee and the Aboriginal Reference group continue to meet to progress the work of delivering Mercy Health’s Innovate RAP, with endorsement to be sought from Reconciliation Australia. The draft Innovate RAP seeks to enhance engagement with Aboriginal and Torres Strait Islander communities in the design and delivery of our services; continue to improve consultation mechanisms; and improve cultural competence of our staff.

Goals	Strategies	Health service deliverables	Final progress
Better care Target zero avoidable harm Healthcare that focuses on outcomes Patients and carers are active partners in care Care fits together around people’s needs	Better care Put quality first Join up care Partner with patients Strengthen the workforce Embed evidence Ensure equal care	Enhance patient safety, quality improvement and professional learning through the implementation of a revised Mortality and Morbidity Review Framework. This includes implementation of all structures and processes necessary to support the new Framework.	<ul style="list-style-type: none"> Achieved. Revised Mortality and Morbidity Review Framework implemented and minimum standards for review developed.
		Continue to work with the State Government to progress MHVL’s bid for the implementation of an electronic medical record.	<ul style="list-style-type: none"> Achieved. Funding proposal submitted to DHHS for eMR-related initiatives. DHHS funding confirmed for implementation of scanning and single sign-on initiatives, and for integration with MyHealth Record. DHHS funding confirmed in response to 2017 business case for eMR implementation.
		Implement a Mercy Mental Health psychiatry training program for junior medical officers.	<ul style="list-style-type: none"> Achieved. Accreditation received to conduct stand-alone Royal Australia and New Zealand College of Psychiatrists (RANZCP) training program. In-house preparation course for RANZCP written examination conducted. Recruitment undertaken for first-year and transferring registrars for February 2020 intake.

Goals	Strategies	Health service deliverables	Final progress
		Continue to advance Mercy Perinatal as an international centre for perinatal care, research and education.	<ul style="list-style-type: none"> Achieved. ‘Improving Maternity Care’ workshop and ‘Medical Disorders in Pregnancy’ symposium held in July 2018. ‘Global Obstetric Update’ held November/December 2018 with international speakers and attendees. Regular ‘Fetal Medicine at Twilight’ webinars broadcast nationally and internationally. Continued involvement of Mercy Perinatal in a series of academic, research, teaching and training activities both nationally and internationally. Professor Sue Walker has continued her role as Academic Lead for the Women’s Health theme at Melbourne Academic Centre for Health.
		Join the Victorian Managed Insurance Authority ‘Incentivising Patient Safety’ program for maternity services.	<ul style="list-style-type: none"> Achieved. Requirements of the Victorian Managed Insurance Authority ‘Incentivising Patient Safety’ Program for maternity services successfully achieved.
		Implement Schwartz rounds to: <ul style="list-style-type: none"> support staff to talk about the social and emotional challenges of caring for patients create a safe environment for staff to share their experiences and support one another promote positive workplace behaviours. 	<ul style="list-style-type: none"> In progress. Implemented Cognitive Institute Speaking Up For Safety™ Program. Investigating licensing arrangements for Schwartz Rounds.

Goals	Strategies	Health service deliverables	Final progress
		<p>Review organisational policies, procedures, communications and training to ensure diversity is recognised and supported across patients and staff.</p> <p>Remove barriers to service or employment for those facing discrimination and/or inequitable access.</p>	<ul style="list-style-type: none"> Achieved. Mercy Health Equity and Inclusion Hub updated. Policies and procedures updated in line with schedule for review. Celebrated events including Harmony Day, International Day Against Homophobia, Transphobia and Biphobia (IDAHOBIT) and National Reconciliation Week. Recruitment and selection training reviewed to include content on unconscious bias. Work experience program conducted for Aboriginal and Torres Strait Islander secondary students. Recruited to Aboriginal nursing cadetship position.
Specific 2018/19 priorities (mandatory)	Disability Action Plans Draft disability action plans are completed in 2018/19. <i>Note: Guidance on developing disability action plans can be found at https://providers.dhhs.vic.gov.au/disability-action-plans. Queries can be directed to the Office for Disability by phone on 1300 880 043 or by email at ofd@dhhs.vic.gov.au.</i>	Submit a draft Disability Action Plan to the Department of Health and Human Services by 30 June 2019.	<ul style="list-style-type: none"> Achieved. Draft Mercy Health Accessibility Action Plan developed and shared with DHHS.

Goals	Strategies	Health service deliverables	Final progress
	Volunteer engagement Ensure that the health service executives have appropriate measures to engage and recognise volunteers.	Undertake a review of the Health Services volunteer programs inclusive of orientation, on-boarding, education, off-boarding and recognition practices with the goal of improving the quality of the volunteering experience at Mercy Health.	<ul style="list-style-type: none"> • Achieved. • Review of Health Services volunteer programs undertaken and improvements being implemented in response to findings.
	Bullying and harassment Actively promote positive workplace behaviours and encourage reporting. Utilise staff surveys, incident reporting data, outcomes of investigations and claims to regularly monitor and identify risks related to bullying and harassment, in particular include as a regular item in Board and Executive meetings. Appropriately investigate all reports of bullying and harassment and ensure there is a feedback mechanism to staff involved and the broader health service staff.	Commence the process to implement a clinical safety and professional accountability program facilitated by the Cognitive Institute.	<ul style="list-style-type: none"> • Achieved. • License Agreement signed with Cognitive institute for the Speaking Up For Safety™ Program. • Board and Executive workshops delivered by Cognitive Institute. • EOI process for Speaking Up For Safety staff facilitators conducted. • Staff facilitators trained and accredited in delivering Speaking Up For Safety training.

Goals	Strategies	Health service deliverables	Final progress
	Occupational violence Ensure all staff who have contact with patients and visitors have undertaken core occupational violence training, annually. Ensure the department's occupational violence and aggression training principles are implemented.	Build upon Mercy Health's existing Occupational Violence Framework 2017 and continue to implement the Department of Health and Human Services' Code Grey Standards by way of strengthening the code grey response procedure, training and reporting.	<ul style="list-style-type: none"> • Achieved. • Code Grey Response Procedure developed and training implemented. • Learning Ladder expanded to include occupational violence and aggression awareness training for staff who work in medium risk environments. • Practice scenarios/drills conducted in key locations as part of training.
	Environmental sustainability Actively contribute to the development of the Victorian Government's policy to be net zero carbon by 2050 and improve environmental sustainability by identifying and implementing projects, including workforce education, to reduce material environmental impacts with particular consideration of procurement and waste management, and publicly reporting environmental performance data, including measureable targets related to reduction of clinical, sharps and landfill waste, water and energy use and improved recycling.	Improve environmental sustainability by: <ul style="list-style-type: none"> • appointing a Sustainability Officer to support sustainability projects and enhance staff education • embedding sustainability considerations in all procurement processes • delivering on our commitments under the Sustainability Victoria Take 2 Pledge • developing an approach to sustainability of healthcare models • continuing a range of sustainability projects to reduce waste and increase recycling. 	<ul style="list-style-type: none"> • Achieved. • Employed two staff members to lead sustainability work. • Meetings held with Procurement team and HPV to develop an environmentally sustainable approach to procurement. • New employee induction package updated to include information about Mercy Health's environmental sustainability initiatives. • Service planning work has incorporated environmental sustainability as a core component for new models of care. • New Laudato Si Strategy 2019-23 under development. • Completed pilot waste project in Mercy Hospital for Women operating theatres. • PVC recycling commenced.

PERFORMANCE PRIORITIES

Goals	Strategies	Health service deliverables	Final progress
	LGBTI Develop and promulgate service level policies and protocols, in partnership with LGBTI communities, to avoid discrimination against LGBTI patients, ensure appropriate data collection, and actively promote rights to free expression of gender and sexuality in healthcare settings. Where relevant, services should offer leading practice approaches to trans and intersex related interventions. <i>Note: deliverables should be in accordance with the DHHS Rainbow eQuality Guide (see at www2.health.vic.gov.au/about/populations/lgbti-health/rainbow-equality) and the Rainbow Tick Accreditation Guide (see at www.glhv.org.au)</i>	Work with existing and new Mercy Health LGBTIQ consumer advisors and the 'Whole Self @ Mercy' Steering Committee in ongoing review of organisational policies, communications and training to promote diversity and LGBTIQ inclusivity.	<ul style="list-style-type: none"> Achieved. Whole Self @ Mercy Hub updated. Celebrated events including Harmony Day, International Day Against Homophobia, Transphobia and Biphobia (IDAHOBIT) and National Reconciliation Week. Regular communications sent from the Group CEO to whole of organisation promoting inclusivity and diversity.

High quality and safe care

Key performance indicator	Target	2018-19 Result (30 June actual result)
Accreditation		
Accreditation against the National Safety and Quality Health Service Standards	Accredited	Accredited
Infection prevention and control		
Compliance with the Hand Hygiene Australia program	80%	85.6
Percentage of healthcare workers immunised for influenza	80%	84
Key performance indicator		
Victorian Healthcare Experience Survey – data submission	Full compliance	Full compliance
Victorian Healthcare Experience Survey – percentage of positive patient experience responses – Quarter 1	95% positive experience	87.8
Victorian Healthcare Experience Survey – percentage of positive patient experience responses – Quarter 2	95% positive experience	95.6
Victorian Healthcare Experience Survey – percentage of positive patient experience responses – Quarter 3	95% positive experience	96
Victorian Healthcare Experience Survey – percentage of very positive responses to questions on discharge care – Quarter 1	75% positive experience	67.8
Victorian Healthcare Experience Survey – percentage of very positive responses to questions on discharge care – Quarter 2	75% positive experience	77.3
Victorian Healthcare Experience Survey – percentage of very positive responses to questions on discharge care – Quarter 3	75% positive experience	77
Victorian Healthcare Experience Survey – patients' perception of cleanliness – Quarter 1	70%	65
Victorian Healthcare Experience Survey – patients' perception of cleanliness – Quarter 2	70%	78.2
Victorian Healthcare Experience Survey – patients' perception of cleanliness – Quarter 3	70%	85
Healthcare associated infections (HAI's)		
Number of patients with surgical site infection	No outliers	Achieved
Number of patients with ICU central-line-associated bloodstream infection (CLABSI)	Nil	Achieved
Rate of patients with SAB ¹ per occupied bed day	≤ 1/10,000	0.9

1. SAB is Staphylococcus Aureus Bacteraemia

Key performance indicator	Target	2018-19 Result (30 June actual result)	
Adverse events			
Sentinel events – root cause analysis (RCA) reporting	All RCA reports submitted within 30 business days	Achieved	
Mental Health			
Percentage of adult acute mental health inpatients who are readmitted within 28 days of discharge	14%	15%	
Rate of seclusion events relating to an adult acute mental health admission	≤ 15/1,000	13.1/1,000	
Percentage of adult acute mental health inpatients who have a post-discharge follow-up within seven days	80%	85%	
Maternity and Newborn			
		Mercy Hospital for Women	Werribee Mercy Hospital
Rate of singleton term infants without birth anomalies with APGAR score <7 to 5 minutes	≤ 1.4%	2%	0.56%
Rate of severe foetal growth restriction (FGR) in singleton pregnancy undelivered by 40 weeks	≤ 28.6%	13.9%	20%
Proportion of urgent maternity patients referred for obstetric care to a level 4, 5 or 6 maternity service who were booked for a specialist clinic appointment within 30 days of accepted referral	100%	89.9%	89.8%
Continuing Care			
Functional independence gain from an episode of rehabilitation admission to discharge relative to length of stay	≥ 0.645	0.69	

Strong governance, leadership and culture

Key performance indicator	Target	Result
Organisational culture		
People matter survey – percentage of staff with an overall positive response to safety and culture questions	80%	89%
People matter survey – percentage of staff with a positive response to the question, “I am encouraged by my colleagues to report any patient safety concerns I may have”	80%	95%
People matter survey – percentage of staff with a positive response to the question, “Patient care errors are handled appropriately in my work area”	80%	92%
People matter survey – percentage of staff with a positive response to the question, “My suggestions about patient safety would be acted upon if I expressed them to my manager”	80%	93%
People matter survey – percentage of staff with a positive response to the question, “The culture in my work area makes it easy to learn from the errors of others”	80%	88%
People matter survey – percentage of staff with a positive response to the question, “Management is driving us to be a safety-centred organisation”	80%	93%
People matter survey – percentage of staff with a positive response to the question, “This health service does a good job of training new and existing staff”	80%	81%
People matter survey – percentage of staff with a positive response to the question, “Trainees in my discipline are adequately supervised”	80%	82%
People matter survey – percentage of staff with a positive response to the question, “I would recommend a friend or relative to be treated as a patient here”	80%	90%

Timely access to care

Key performance indicator	Target	Mercy Hospital for Women	Werribee Mercy Hospital
Emergency care			
Percentage of patients transferred from ambulance to emergency department within 40 minutes	90%	99.40%	83.20%
Percentage of Triage Category 1 emergency patients seen immediately	100%	100%	100%
Percentage of Triage Category 1 to 5 emergency patients seen within clinically recommended time	80%	82%	64%
Percentage of emergency patients with a length of stay in the emergency department of less than four hours	81%	75.94%	61.96%
Number of patients with a length of stay in the emergency department greater than 24 hours	0	0	57

Key performance indicator	Target	Result
Elective surgery		
Percentage of urgency category 1 elective surgery patients admitted within 30 days	100%	100%
Percentage of urgency category 1, 2 and 3 elective surgery patients admitted within clinically recommended time	94%	95.55%
Percentage of patients on the waiting list who have waited longer than clinically recommended time for their respective triage category	5% or 15% proportional improvement from prior year	8.7%
Number of patients on the elective surgery waiting list ²	1,150	1,381
Number of hospital initiated postponements per 100 scheduled elective surgery admissions	≤ 7 /100	3.54%
Number of patients admitted from the elective surgery waiting list	5,865	5,722
Specialist clinics		
Percentage of urgent patients referred by a GP or external specialist who attended a first appointment within 30 days	100%	69.94%
Percentage of routine patients referred by GP or external specialist who attended a first appointment within 365 days	90%	96.93%

2. The target shown is the number of patients on the elective surgery waiting list as at 30 June 2019

Effective financial management

Key performance indicator	Target	Result
Finance		
Operating result (\$m)	0	-5,966
Average number of days to paying trade creditors	60 days	41
Average number of days to receiving patient fee debtors	60 days	47
Public and Private WIES ³ activity performance to target	100%	96%
Adjusted current asset ratio	0.7 or 3% improvement from health service base target	0.44
Forecast number of days a health service can maintain its operations with unrestricted available cash (based on end of year forecast)	14 days	28
Actual number of days a health service can maintain its operations with unrestricted available cash, measured on the last day of each month.	14 days	Achieved
Measures the accuracy of forecasting the Net result from transactions (NRFT) for the current financial year ending 30 June.	Variance ≤ \$250,000	-1.14m

3. WIES is a Weighted Inlier Equivalent Separation

Activity and funding

Funding type	2018/19 activity achievement
Acute Admitted	
WIES Public	42,296
WIES Private	2,753
WIES DVA	139.43
WIES TAC	9.77
Other Admitted	0
Acute Non-Admitted	
Specialist Clinics	105,259
Specialist Clinics – Private	20,913
Subacute & Non-Acute Admitted	
Subacute WIES – Rehabilitation Public	64.98
Subacute WIES – GEM Public	329.54
Subacute WIES – Palliative Care Public	305.91
Subacute WIES – Palliative Care Private	1.59
Subacute WIES – DVA	19.55
Transition Care – Bed days	1,863
Transition Care – Home days	1,045
Subacute Non-Admitted	
Health Independence Program – Public	13,793
Mental Health and Drug Services	
Mental Health Ambulatory	54,812
Mental Health Inpatient – Available bed days	22,914
Mental Health Service System Capacity	0
Mental Health Subacute	10,135
Primary Health	
Community Health / Primary Care Programs	776
Other	
Health Workforce	131.35

Information and Communication Technology (ICT) expenditure

The total ICT expenditure incurred during 2018/19 is \$13,365,488 (excluding GST) with the details shown below:

Business As Usual (BAU) ICT expenditure	Non-Business As Usual (non-BAU) ICT expenditure		
Total (excluding GST)	Total=Operational expenditure and Capital Expenditure (excluding GST) (a) + (b)	Operational expenditure (excluding GST) (a)	Capital expenditure (excluding GST) (b)
\$8.521 million	\$4.844 million	\$0 million	\$4.844 million

Consultancies

Details of consultancies (under \$10,000)
In 2018/19, there were two consultancies where the total fees payable to the consultants were less than \$10,000. The total expenditure incurred during 2018/19 in relation to these consultancies is \$10,600 (excl. GST).

Details of consultancies (valued at \$10,000 or greater)
In 2018/19, there were two consultancies where the total fees payable to the consultants were \$10,000 or greater. The total expenditure incurred during 2018/19 in relation to these consultancies is \$129,590 (excl. GST).

Consultant	Purpose of consultancy	Start date	End date	Total approved project fee (excl. GST)	Expenditure for 2018/19 (excl. GST)	Future expenditure (excl. GST)
D W Bowe & Associates	Neonatal Services – Stresswise	April 2018	November 2018	\$104,240	\$104,240	\$0
Habitat & More	Catering tender	May 2018	December 2018	\$48,100	\$25,350	\$0

Workforce

Hospital labour category	June current month FTE		Average monthly FTE	
	2018	2019	2018	2019
Nursing	1249.75	1392.81	1198.48	1337.65
Administration and clerical	255.93	267.81	255.74	263.74
Medical support	25.94	57.54	24.65	54.02
Hotel and allied services	168.71	161.84	167.55	159.62
Medical officers	29.08	31.93	26.75	31.42
Hospital medical officers	193.84	215.15	185.89	209.32
Sessional clinicians	78.83	94.44	77.54	87.7
Ancillary staff (allied health)	185.23	197.69	166.84	196.12

REPORTING PROCEDURES

Occupational health and safety

	2016/17	2017/18	2018/19
Incidents per 100 FTE	26	23.5	33.2
Lost time standard claims per 100 FTE	0.8	1.17	0.48
Average cost per claim	\$106,831	\$80,966	\$12,600

Data provided in previous Reports of Operations included lost time claims as the loss of five or more shifts. For 2018/19 all current and previous data is reported as the loss of one or more shifts.

There has been an increase in the number of incidents reported by staff for 2018/19 due to a Mercy Health campaign encouraging staff to proactively report hazards and near misses, as well as injuries. In 2018 there was also an increase in the number of occupational violence incidents and some equipment related incidents.

Mercy Health has continued to use an early intervention and recovery at work response to workplace injuries. Mercy Health promotes reporting injuries early for assessment, treatment and suitable work accommodations. This is reflected by a decrease in our lost time injuries. In 2018 this approach was awarded a WorkSafe Award in the *Leading Return to Work Practice by an Employer* category by WorkSafe

Occupational violence

Occupational violence statistics	2018/19
Workcover accepted claims with an occupational violence cause per 100 FTE	0.16
Number of accepted Workcover claims with lost time injury with an occupational violence cause per 1,000,000 hours worked	0.82
Number of occupational violence incidents reported	467
Number of occupational violence incidents reported per 100 FTE	18.86
Percentage of occupational violence incidents resulting in a staff injury, illness or condition	2.78

The following definitions apply:

Occupational violence – any incident where an employee is abused, threatened or assaulted in circumstances arising out of, or in the course of their employment.

Incident – an event or circumstance that could have resulted in, or did result in, harm to an employee. Incidents of all severity rating must be included. Code Grey reporting is not included, however, if an incident

Victoria. The decrease in the average cost per claim reflects our early reporting and culture of recovery at work, as our staff remain at work in 85 per cent of cases.

The Mercy Health Staff Safety Plan 2018–22 has been developed through a consultative process to respond to our current and emerging health and safety risks. The plan has been endorsed by the Mercy Health Board.

The five safety priorities ensure we build a positive safety culture that supports the physical and psychological health of our staff:

1. Caring for our staff
2. Building a systems approach to safety
3. Embedding a risk management approach
4. Improving our work environment
5. Promoting a culture of safe work practices

occurs during the course of a planned or unplanned Code Grey, the incident must be included.

Accepted Workcover claims – accepted Workcover claims that were lodged in 2018/19.

Lost time – is defined as greater than one day.

Injury, illness or condition – this includes all reported harm as a result of the incident, regardless of whether the employee required time off work or submitted a claim.

Freedom of information

The *Freedom of Information Act 1982* (Vic) (the Act) allows the public a right of access to documents held by Mercy Hospitals Victoria Ltd.

For the 12 months ending 30 June 2019, Mercy Hospitals Victoria Ltd received 536 applications; all of which were made by members of the public.

Of the requests received by Mercy Hospitals Victoria Ltd, access was granted in full for 409 requests and access was granted in part for 55 requests and access was denied in full for five requests. A total of 67 applications were withdrawn, not proceeded with, or had not been finalised at 30 June 2019.

Making a request

Access to documents may be obtained through written request to the Freedom of Information Manager, as detailed in section 17 of the Act. In summary, the requirements for making a request of Mercy Hospitals Victoria Ltd are:

- the application should be made in writing
- the application should identify as clearly as possible which type of document is being requested
- the application should be accompanied by the appropriate application fee (\$28.90 at 30 June 2019). The fee may be waived in certain circumstances.

Freedom of Information fact sheets and an access request form are available on the ‘Access your information’ section of the Mercy Health website at mercyhealth.com.au. Requests for documents in possession of Mercy Hospitals Victoria Ltd should be addressed to the relevant facility/service:

Mercy Hospital for Women/Mercy Health O’Connell Family Centre

Freedom of Information Officer
Health Information Services
163 Studley Rd
Heidelberg Vic 3084

Werribee Mercy Hospital

Freedom of Information Officer
Health Information Services
300 Princes Hwy
Werribee Vic 3030

Mercy Mental Health

Freedom of Information Officer
PO Box 2083
Footscray Vic 3011

Mercy Hospitals Victoria Ltd

Freedom of Information Officer
Level 2, 12 Shelley St
Richmond Vic 3121

Access charges may also apply once documents have been processed and a decision on access is made, for example photocopying and search and retrieval charges.

If an applicant is not satisfied with a decision made by Mercy Hospitals Victoria Ltd, they have the right to seek a review, under section 49A of the Act, by the Office of the Victorian Information Commissioner (OVIC) within 28 days of receiving a decision letter.

Further information regarding the operation and scope of Freedom of Information can be obtained from the Act, regulations made under the Act, and at ovic.vic.gov.au.

Building Act 1993

Mercy Hospitals Victoria Ltd ensures buildings, plant and equipment that it owns are maintained in accordance with the requirements of all relevant statutory authorities. All new building works performed by or on behalf of Mercy Hospitals Victoria Ltd comply with current requirements of the Building Code of Australia and other applicable Australian standards, statutory authorities or codes of practice.

Protected Disclosure Act 2012

Mercy Hospitals Victoria Ltd is committed to the aims and objectives of the *Protected Disclosure Act 2012* (Vic). We do not tolerate improper conduct by employees or officers, nor the taking of detrimental actions or reprisal against those who come forward to disclose such conduct.

Mercy Hospitals Victoria Ltd recognises the value of transparency and accountability in our administrative and management practices, and supports the making of disclosures that reveal corrupt conduct, conduct involving a substantial mismanagement of public resources, or conduct involving a substantial risk to public health or safety or the environment.

Mercy Hospitals Victoria Ltd will take all reasonable steps to protect people who make such disclosures from any detrimental action by way of reprisal for making the disclosure.

National Competition Policy

Mercy Hospitals Victoria Ltd adheres to competitive neutrality guidelines in the contracting process and reviews existing contracts where appropriate.

Carers Recognition Act 2012

Mercy Hospitals Victoria Ltd recognises, promotes and values the role of carers. Mercy Hospitals Victoria Ltd takes all practical measures to comply with its obligations under the Act, including:

- promotion of the principles of the Act to people in care relationships who receive our services and to the wider community – for example, support groups and information sessions run by the Mercy Palliative Care Program (the ‘Carer’s Own Information Sessions’ – for example; distributing printed material about the Act at community events or service points; providing links to state government resource materials on our website; providing digital and/ or printed information about the Act to our partner organisations)
- ensuring that our staff have an awareness and understanding of the care relationship principles set out in the Act (for example, developing and implementing a staff awareness strategy about the principles in the Act and what they mean for staff; induction and training programs offered by the organisation include discussion of the Act and the statement of principles therein)
- consideration of the carer relationships’ principles set out in the Act when setting policies and providing services – for example, availability of flexible working arrangements (per our Workplace Flexibility Policy and Procedure) for employees who are carers, such as reviewing our employment policies including flexible working arrangements and leave provisions to ensure these comply with the statement of principles in the Act; and developing a satisfaction survey for distribution at assessment and review meetings between workers, carers and those receiving care.

Environmental performance

In 2018/19, Mercy Health employed a Sustainability Officer and a Green Champions Support Officer (1.0 EFT combined). These roles are designed to integrate environmental sustainability in the organisation, specifically at Werribee Mercy Hospital and Mercy Hospital for Women which are our largest consumers and carbon emitters.

Mercy Health has also established environmental sustainability committees and working groups at the two sites, set up a network for Green Champions and implemented an Environmental Management Strategy.

Mercy Health has completed waste audits at Werribee Mercy Hospital and Mercy Hospital for Women. The learnings gained to date will frame the development of standardised and comprehensive waste management education.

In 2019/20 Mercy Health will divert electronic waste from landfill, recovering resources by recycling and expand PVC recycling to more clinical departments.

Additional information available on request

In compliance with the requirements of FRD 22H Standard Disclosures in the Report of Operations, details in respect of the items listed below have been retained by Mercy Hospitals Victoria Ltd and are available to the relevant Ministers, Members of Parliament and the public on request (subject to the Freedom of Information requirements, if applicable):

- (a) a statement of pecuniary interests of all relevant officers;
- (b) details of shares held by senior officers as nominee or held beneficially or in a statutory authority or subsidiary;
- (c) details of publications produced by Mercy Hospitals Victoria Ltd about the activities of Mercy Hospitals Victoria Ltd and where they can be obtained;
- (d) details of changes in prices, fees, charges, rates and levies charged by Mercy Hospitals Victoria Ltd;
- (e) details of any major external reviews carried out on Mercy Hospitals Victoria Ltd;
- (f) details of major research and development activities

undertaken by Mercy Hospitals Victoria Ltd that are not otherwise covered either in the Report of Operations or in a document that contains the financial statements and Report of Operations;

- (g) details of overseas visits undertaken including a summary of the objectives and outcomes of each visit;
- (h) details of major promotional, public relations and marketing activities undertaken by Mercy Hospitals Victoria Ltd to develop community awareness of Mercy Hospitals Victoria Ltd and its services;
- (i) details of assessments and measures undertaken to improve the occupational health and safety of employees;
- (j) general statement on industrial relations within Mercy Hospitals Victoria Ltd and details of time lost through industrial accidents and disputes, which is not otherwise detailed in the Report of Operations;
- (k) a list of major committees sponsored by Mercy Hospitals Victoria Ltd, the purposes of each committee and the extent to which those purposes have been achieved;
- (l) details of all consultancies and contractors including consultants/contractors engaged, services provided, and expenditure committed for each engagement.

Local Jobs First Projects

During 2018/19, no contracts that required disclosure under the *Local Jobs First Act 2003* were started or completed.

Safe Patient Care Act 2015

Mercy Hospitals Victoria Ltd has no matters to report in relation to its obligations under section 40 of the Safe Patient Care Act 2015.

Car parking

Mercy Hospitals Victoria Ltd complies with the Department of Health and Human Services hospital circular on car parking fees and details of car parking fees and concession benefits can be viewed at mercyhealth.com.au.

ATTESTATIONS

Data integrity

I, Stephen Cornelissen, certify that Mercy Hospitals Victoria Ltd has put in place appropriate internal controls and processes to ensure that reported data accurately reflects actual performance. Mercy Hospitals Victoria Ltd has critically reviewed these controls and processes during the year.

Conflict of interest

I, Stephen Cornelissen, certify that Mercy Hospitals Victoria Ltd has put in place appropriate internal controls and processes to ensure that it has complied with the requirements of hospital circular 07/2017 Compliance reporting in health portfolio entities (Revised) and has implemented a 'Conflict of Interest' policy consistent with the minimum accountabilities required by the VPSC. Declaration of private interest forms have been completed by all executive staff within Mercy Hospitals Victoria Ltd and members of the board, and all declared conflicts have been addressed and are being managed. Conflict of interest is a standard agenda item for declaration and documenting at each executive and board meeting.

Integrity, fraud and corruption

I, Stephen Cornelissen, certify that Mercy Hospitals Victoria Ltd has put in place appropriate internal controls and processes to ensure that Integrity, fraud and corruption risks have been reviewed and addressed at Mercy Hospitals Victoria Ltd during the year.

YEAR IN REVIEW



The new Werribee Mercy Hospital Intensive Care Unit team on opening day

Werribee Mercy Hospital Stage 1C expansion

The Stage 1C expansion of the Catherine McAuley Centre at Werribee Mercy Hospital officially opened its doors on 1 August 2018. This was a significant milestone, following years of planning to increase the hospital's capacity to respond to the healthcare needs of people living in the rapidly growing Wyndham region. The expansion was officially opened on 30 August 2018 with Minister for Health Jill Hennessy MP and Catholic Archbishop of Melbourne Peter Comensoli in attendance.

The new facilities have opened progressively, increasing the hospital's capacity to deliver surgical, medical and intensive care services as well as critical support functions pertaining to food services and supply. Our workforce expanded to support the new facilities and new models of care were implemented to enhance patient wellbeing in the carefully designed clinical spaces. Feedback from patients, visitors and staff has been extremely positive.

Planning for the implementation of dedicated paediatric beds at Werribee Mercy Hospital continues, with beds expected to open in August 2019.

Official opening of the Clare Moore Building at Werribee Mercy Hospital



Member for Werribee The Hon Tim Pallas with Sr Helen Monkivitch RSM AO and Chairman Julien O'Connell AM

The Clare Moore Building at Werribee Mercy Hospital was officially opened in October 2018 by the Victorian Treasurer and Member for Werribee Tim Pallas. While acute mental health inpatient services have been delivered in the building since late 2017, the occasion enabled formal acknowledgement of the efforts of the many people involved in bringing the facility to fruition. At the opening, Mercy Mental Health Clinical Services Director Associate Professor Dean Stevenson shared some of his own insights about mental healthcare provision over time, noting the advancements that have led to more respectful, inclusive and holistic care.

Mercy Mental Health – Royal Australia and New Zealand College of Psychiatrists training program

With funding support from the Department of Health and Human Services, Mercy Mental Health completed a feasibility study for the development and implementation of a junior medical workforce training model. This is an essential step towards attracting and retaining high-quality trainees and consultants in the field of mental health medicine. In 2018, Mercy Mental Health appointed a Director of Training (Junior Medical Staff) to lead the development of a training program. Provisional accreditation for a Royal Australia and New Zealand College of Psychiatrists training program has been confirmed and Mercy Mental Health will begin offering a training program from February 2020.

Accreditation of training in intensive care medicine at Werribee Mercy Hospital

The College of Intensive Care Medicine of Australia and New Zealand has endorsed Werribee Mercy Hospital's application for foundation training and confirmed the Intensive Care Unit's suitability for elective and basic components of intensive care training. This will advance the capability of Werribee Mercy Hospital and its staff in providing critical care services for the Wyndham population close to home.

Werribee Mercy Hospital accreditation by the Royal Australasian College of Physicians

Through the year, the Royal Australasian College of Physicians granted the Division of Medicine conditional accreditation as a Level 1 Teaching Hospital for Adult Internal Medicine Basic Training to February 2020. This accreditation represents an important step in the development of Internal Medicine at Werribee Mercy Hospital and enhances the hospital's ability to recruit junior medical staff to support the growing needs of the local community.

Victorian Stroke Telemedicine at Werribee Mercy Hospital

On 29 July 2018, Minister for Health Jill Hennessy MP visited Werribee Mercy Hospital to launch the Victorian Stroke Telemedicine (VST) program. This initiative enables clinicians to collaborate across organisational boundaries to deliver the best care possible to patients with stroke, irrespective of their location. Werribee Mercy Hospital operationalised the first high-definition telecommunication equipment necessary to support the initiative and continues to work with other hospitals in rural and regional Victoria in its use of this potentially life-saving technology and system of care.



A packed auditorium at the fourth Global Obstetric Update hosted by Mercy Perinatal, based at Mercy Hospital for Women in Heidelberg

Mercy Perinatal

Mercy Perinatal and the Maternal Fetal Medicine Unit at Mercy Hospital for Women has continued to attract national and international acclaim for its work in bringing mothers and babies safely home. A centre of excellence in perinatal care, research and teaching, Mercy Perinatal brings together clinicians, academics and researchers who passionately strive to improve outcomes for women and their babies.

In July 2018, Mercy Perinatal delivered two days of perinatal education and updates at the Improving Maternity Care Workshop and Medical Disorders in Pregnancy Symposium. The booked-out events focused on antenatal and intrapartum care, medical complications, critical care and advancements in obstetric medicine.

In November, another highly successful Global Obstetric Update was held in Melbourne. The event summarised best practice and international literature for clinicians. Bimonthly 'Fetal Medicine at Twilight' webinars also continued to be broadcast to clinicians across Australia and around the world.

In the University of Melbourne laboratories based at Mercy Hospital for Women, Mercy Perinatal staff continued groundbreaking research in the areas of stillbirth, ectopic pregnancy, preeclampsia and fetal growth restriction. A number of team members received National Health and Medical Research Council Chief Investigator Grants, underscoring the importance of the research underway.

Obstetric Triage Decision Aid – finalist in Victorian Public Healthcare Awards

The Obstetric Triage Decision Aid project supported by Better Care Victoria continued to have significant clinical benefits at both Mercy Hospital for Women and Werribee Mercy Hospital. The tool has resulted in pregnant and postpartum women receiving prompt assessment and treatment that reduces the likelihood of further deterioration.

In July 2018, the project team delivered a consultancy workshop at the Royal Australasian College of Surgeons in conjunction with Better Care Victoria and our insurer, the Victorian Managed Insurance Authority. The workshop provided an opportunity to share the results of the project and to discuss sector-wide interest and potential for the tool's wider implementation across the state.

The project garnered broad sector interest and through the year was presented at a number of national and international forums.

The Obstetric Triage Decision Aid Project was a finalist in the Victorian Public Healthcare Awards in the category of women's health. This further recognises the merits of the project and its benefits for women and babies.



Then Chief Executive Health Services Dr Linda Mellors, ED Nurse Unit Manager Mary McCarthy and Program Director Women's and Children's Services Gillian Evans

Mercy Health Breastmilk Bank expansion



Mercy Health Breastmilk Bank donor Hayley Jean Wilson and baby Bodhi at Mercy Hospital for Women

The expansion of the Mercy Health Breastmilk Bank is well underway. This will enable donated breastmilk to be collected and distributed at Victoria's other neonatal intensive care units at the Royal Women's Hospital, Royal Children's Hospital and Monash Health. We are grateful for the support and collaboration of these hospitals, along with the support of the Department of Health and Human Services and the Victorian Managed Insurance Authority, our insurer, to enable us to expand our services.

Each year, Victorian maternity and neonatal services care for hundreds of babies and their families where normal circumstances are interrupted by maternal illness, premature birth or the unexpected severe illness of a full term baby. For the mothers of these babies, establishing normal lactation can be extremely challenging and donor human milk is an alternative to mother's own milk.



Mercy Palliative Care's new 24/7 service supports people like Adrian and Gwyn Cervetto

24/7 community palliative care service

In 2018, Mercy Palliative Care launched a 24/7 community-based palliative care service that provides every palliative care patient with access to a palliative care nurse, accompanied by a personal care worker, at night. This specialised service provides patient-centred and holistic palliative care for patients and their carers in the home environment. The model was awarded the Outreach Health Care Award at the Catholic Health Australia (CHA) Gala Dinner in August.

Werribee Mercy Hospital Emergency Department Sepsis Project

The Werribee Mercy Hospital Emergency Department collaborated with the Safer Care Victoria Emergency Clinical Care Network on a project to improve the care of patients with sepsis presenting to the Emergency Department. Through implementation of a recognition tool, a sepsis bundle of care pathway and an online learning package, the project team improved clinician understanding and awareness of sepsis, and improved early recognition and management of sepsis.

Health Services Staff and Volunteer Service Awards

More than 400 Health Services employees were recognised in October 2018 for their contribution and commitment at Mercy Health's annual Staff and Volunteer Service Awards. Celebrations were held at Mercy Hospital for Women and Werribee Mercy Hospital marking service milestones up to 50 years. The spirit of Mercy is always alive at these events, and staff stories and reflections remind us of the integral part our staff play in shaping the experience of all those who come into contact with our services.

Workplace Gender Equality Agency Employer of Choice for Gender Equality and Breastfeeding Friendly Workplace

Mercy Health received the Workplace Gender Equality Agency (WGEA) Employer of Choice for Gender Equality citation for 2018/19. Mercy Health was one of only seven organisations in the healthcare and social assistance industries across the country to receive the citation. The citation is designed to encourage, recognise and promote an active commitment to achieving gender equality in Australian workplaces while recognising the historically disadvantaged position of women in the workplace.

Mercy Health was also re-accredited for the 13th consecutive year as a Breastfeeding Friendly Workplace (BFW) by the Australian Breastfeeding Association. The BFW accreditation recognises the policies and support we have in place that assist women who return to work and continue to breastfeed.

WorkSafe Victoria Awards

In October 2018, Mercy Health received a WorkSafe Victoria award in the Leading Return to Work Practice by an Employer category for its launch of a national early intervention and immediate response program to promote recovery at work and train managers to effectively support injured staff. With service provider Cogent Thinking, Mercy Health implemented a suite of initiatives to familiarise team members with workers compensation legislation and encourage prompt intervention by line managers for hazards and injuries.



Executive Director Quality, Safety and Innovation Clare Grieveson (currently Interim Chief Executive – Health Services), Group WorkCover Manager Danielle Sinclair, Dolores Hidic and Emily Glenn



Grand Rounds by the Principal Commissioner for Children and Young People

The Principal Commissioner for Children and Young People, Ms Liana Buchanan (pictured left) spoke at two well-attended Grand Rounds at Mercy Hospital for Women and Werribee Mercy Hospital in late 2018. Liana presented on the role of the Commission, her role as Commissioner, and how hospitals play a critical part in upholding child safety. She commended our efforts to advance work on the Child Safety Standards and Strengthening Hospital Responses to Family Violence.

CELEBRATING
100 YEARS
of **MERCY HEALTHCARE**
1 9 2 0 - 2 0 2 0



Triplets Gennaro, Carmine and Renato with mother Melinda and sister Gemma at Mercy Hospital for Women.



Mercy Health

Level 2, 12 Shelley Street
Richmond Victoria 3121
Phone +61 3 8416 7777
mercyhealth.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 past, present and emerging. This report was produced on Wurundjeri Country.