



Mercy Health

Care first



Mercy Hospitals
Victoria Ltd

2021-22

REPORT OF OPERATIONS



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Cover: Werribee Mercy Hospital Intensive Care Unit staff during the COVID-19 pandemic; Mercy Hospital for Women midwife Siobhan with patient Nicole; Mercy Hospital for Women midwife Jessica with baby Bea Frances

Back cover: Werribee Mercy Hospital staff (L-R) Shuqin, Kim and James

Opposite: Kavitha and Andy, whose triplets Amira, Amelia and Ariana, were born at Mercy Hospital for Women

WELCOME

“We should be shining lamps, giving light to all around us,” wrote the founder of the Sisters of Mercy Catherine McAuley.

Mercy Health (which operates Mercy Hospitals Victoria Ltd) had reason to celebrate many achievements and milestones throughout the year. We are proud of and grateful to our staff, who, despite the continuing COVID-19 pandemic, continue to advance Mercy Health’s mission of bringing God’s mercy to those in need and put *care first* every single day.

Mercy Health participated in the National Safety and Quality Health Service Standards Accreditation during lockdown in August 2021 and received full accreditation, with nil ‘Not Mets’ or recommendations for both National Accreditation and Mercy Health O’Connell Family Centre Accreditation. Our staff were highly praised by the surveyors for the safe, high-quality care provided.

In August 2021, Werribee Mercy Hospital (WMH) celebrated 30 years since the turning of the first sod. Over this time, WMH has continued to expand and serve the growing Wyndham region. This will continue in the future with the expansion of the Emergency Department (ED) and a temporary 24-bed Short Stay Unit to help us manage demand for services until the new ED is built. We are also optimistic about future redevelopment of the entire site with a business case currently being developed to advocate for this.

Mercy Health is committed to genuine and meaningful reconciliation with Aboriginal and Torres Strait Islander Peoples. In August 2021, we launched our Innovate Reconciliation Action Plan (RAP) April 2021–April 2023. This is our second RAP and it builds on the

work undertaken in our previous Reflect RAP. These important documents detail our commitment and progress towards creating more culturally safe and welcoming hospitals and services. As the new provider of the Early Parenting Centre (EPC) in the City of Whittlesea, which has one of the highest representations of Aboriginal and Torres Strait Islanders’ mothers and children, Mercy Health is also committed to working with the local Aboriginal and Torres Strait Islander community to develop a culturally safe and welcoming site and services with building beginning soon.

We would like to acknowledge and thank Adjunct Professor Stephen Cornelissen, whom we farewelled as Mercy Health Group Chief Executive Officer in May 2022. During Stephen’s tenure, Mercy Health has experienced a period of immense change including the expansion of WMH, the establishment of Mercy Perinatal and the establishment of the Mercy Health Breastmilk Bank and we thank him for his contribution and legacy.

Finally, we would like to thank the State Government of Victoria for its ongoing support, our partners for their contribution to allow us to care and most importantly all Victorians and their families who trust and choose us to partner with them in their care.

In accordance with the Financial Management Act 1994, we are pleased to present the Report of Operations for Mercy Hospitals Victoria Ltd for the year ending 30 June 2022, as at 15 August 2022.



Mr Matthew Posar
*Interim Group Chief
Executive Officer*

A handwritten signature in black ink, appearing to read 'Matthew Posar', written over a light grey background.



Ms Virginia Bourke
Chair

A handwritten signature in black ink, appearing to read 'Virginia Bourke', written in a cursive style over a light grey background.

INTRODUCTION

This year continued to be a challenging one for Mercy Health and other health services needing to respond to the ongoing challenges of the COVID-19 pandemic, resulting in an unprecedented system-wide Code Brown in early 2022.

Even during the difficult times, we had cause for pride and celebration. Mercy Health achieved full accreditation against the National Safety and Quality Health Service Standards, undertaking the audit during lockdown and demonstrating great adaptability in providing virtual formats for surveyors. We installed a new Short Stay Unit at Werribee Mercy Hospital (WMH), secured \$110 million for the expansion of the WMH Emergency Department, launched services such as GEM@Home (Geriatric Evaluation and Management) and Neonatal Hospital in the Home (HITH), trialled new care pathways, launched our second Reconciliation Action Plan and WMH was announced as one of eight Rapid Access Hubs to facilitate elective surgery catch-up.

I would like to thank Associate Professor David Allen, former Mercy Health Chief Medical Officer, who retired in December, 2021. I am grateful to David for his significant contribution over many years. I, and the Mercy Health team, wish David all the best for the future. Adjunct Professor Jeff Kirwan has taken on

the role of Chief Medical Officer, and I look forward to working with Jeff.

I recognise that these achievements rely on a team of people within and external to our organisation, and I thank them all for their support. I would like to thank our staff for their dedication and commitment, our partners and the Victorian Government for its ongoing support.



**Professor
Jason Payne**
*Chief Executive
Health Services*

A handwritten signature in black ink that reads "J. Payne".

Werribee Mercy Hospital Special Care Unit midwives Jenny (L) and Claire (R) with mum Danielle and baby Flynn



FINANCIAL COMMENTARY

OPERATING RESULT*	2021-22 \$000	2020-21 \$000	2019-20 \$000	2018-19 \$000	2017-18 \$000
Total revenue	532,932	478,330	447,109	418,690	411,984
Total expenses	543,162	490,267	459,560	428,670	361,521
Net result from transactions	-10,230	-11,937	-12,451	-9,980	50,463
Total other economic flows	4,279	5,572	-1,399	-4,574	-134
Net result	-5,951	-6,365	-13,850	-14,554	50,329
Total assets	239,339	217,463	220,161	228,332	220,744
Total liabilities	149,871	122,044	118,307	112,698	90,556
Net assets/Total equity	89,468	95,419	101,784	115,634	130,188

* The Operating result is the result for which the health service is monitored in its Statement of Priorities

	2021-22 \$000
Net operating result *	127
Capital purpose income	6,124
Specific income	4,279
COVID-19 State Supply Arrangements – Assets received free of charge or for nil consideration under the State Supply	0
State supply items consumed up to 30 June 2022	0
Assets provided free of charge	0
Assets received free of charge	0
Expenditure for capital purpose	0
Depreciation and amortisation	16,481
Impairment of non-financial assets	0
Finance costs (other)	0
Net result from transactions	-5,951

The COVID-19 global pandemic environment continues to impose significant pressure on the financial performance of Mercy Hospitals Victoria Ltd (MHVL), and 2022 was another challenging year. MHVL incurred a Comprehensive Loss for the year of \$6 million.

The loss result for the 2022 financial year includes Long Service Leave revaluation adjustments of positive \$4.3 million and depreciation expenses of \$16.5 million,

which are partially offset by capital and interest revenue of \$6.3 million, culminating in MHVL being in line with our Statement of Priorities (SoP) target.

Our continuing response to the pandemic resulted in operational expenses being substantially over budget, as well as curtailing our ability to reduce operational expenditure in other operating areas. It also continues to have a material negative impact on

our ability to achieve acute inpatient targets due to the cancellation of elective surgery, impact on Emergency Department performance and acute medical admissions across the year, with those impacts felt at both Werribee Mercy Hospital and Mercy Hospital for Women.

Throughout the financial year, additional funding provided by the Department of Health to support COVID-19 expenses and to support MHVL in achieving its Statement of Priorities (SoP) financial projections meant that SoP targets were met in this area.

MERCY HOSPITALS VICTORIA LTD

Mercy Hospitals Victoria Ltd is a company limited by guarantee and a charity registered by the Australian Charities and Not-for-profits Commission. It is a Denominational Hospital as set out in Schedule 2 of the *Health Services Act 1988* (Vic).

Mercy Hospitals Victoria Ltd (MHVL) 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 Martin Foley MP, Minister for Health, Minister for Ambulance Services, Minister for Equality (1 July 2021 to 27 June 2022)
- The Hon Mary-Anne Thomas MP, Minister for Health, Minister for Ambulance Services (27 June 2022 to 30 June 2022)
- The Hon James Merlino MP, Minister for Mental Health (1 July 2021 to 27 June 2022)
- The Hon Gabrielle Williams MP, Minister for Mental Health, Minister for Treaty and First Persons (27 June 2022 to 30 June 2022)

The predominant objectives for which MHVL (the Company) was established are:

1. to carry on or assist in the carrying on of the charitable activities of Mercy Ministry Companions (a lay civil and canonical entity established to carry on the work 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 theological framework of Mercy Ministry Companions.

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 (MHW) is a tertiary hospital based in Heidelberg, Victoria offering obstetric, gynaecological and neonatal services. 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. The facility also provides perinatal medicine, perioperative services, women's health 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. MHW is part of the North-East Metro Health Service Partnership.

Werribee Mercy Hospital (WMH) is a rapidly expanding general hospital providing comprehensive care in the south-western region of Melbourne. The hospital provides surgical, medical, emergency, intensive care, maternity, newborn, renal dialysis, paediatrics, mental health, subacute, rehabilitation and palliative care services. The hospital also provides a range of home-based support services including Hospital in the Home and Midwifery in the Home. WMH is part of the West Metro Health Service Partnership.

Mercy Health O'Connell Family Centre (OFC) is an early parenting centre based in Canterbury, Victoria. It focuses 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) and the Play Steps program.

Mercy Health will also be the provider of early parenting services at the new Whittlesea Early Parenting Centre which has been allocated land and is in the planning stages.

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 is a 24-hour service, which provides in-home support and assistance with all aspects of care relating to a patient in the advanced stages of their disease. While not officially part of Mercy Hospitals Victoria Ltd, Mercy Palliative Care is integrated into Mercy Health's service delivery. Service delivery is through a dedicated 12-bed inpatient palliative care service at WMH 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

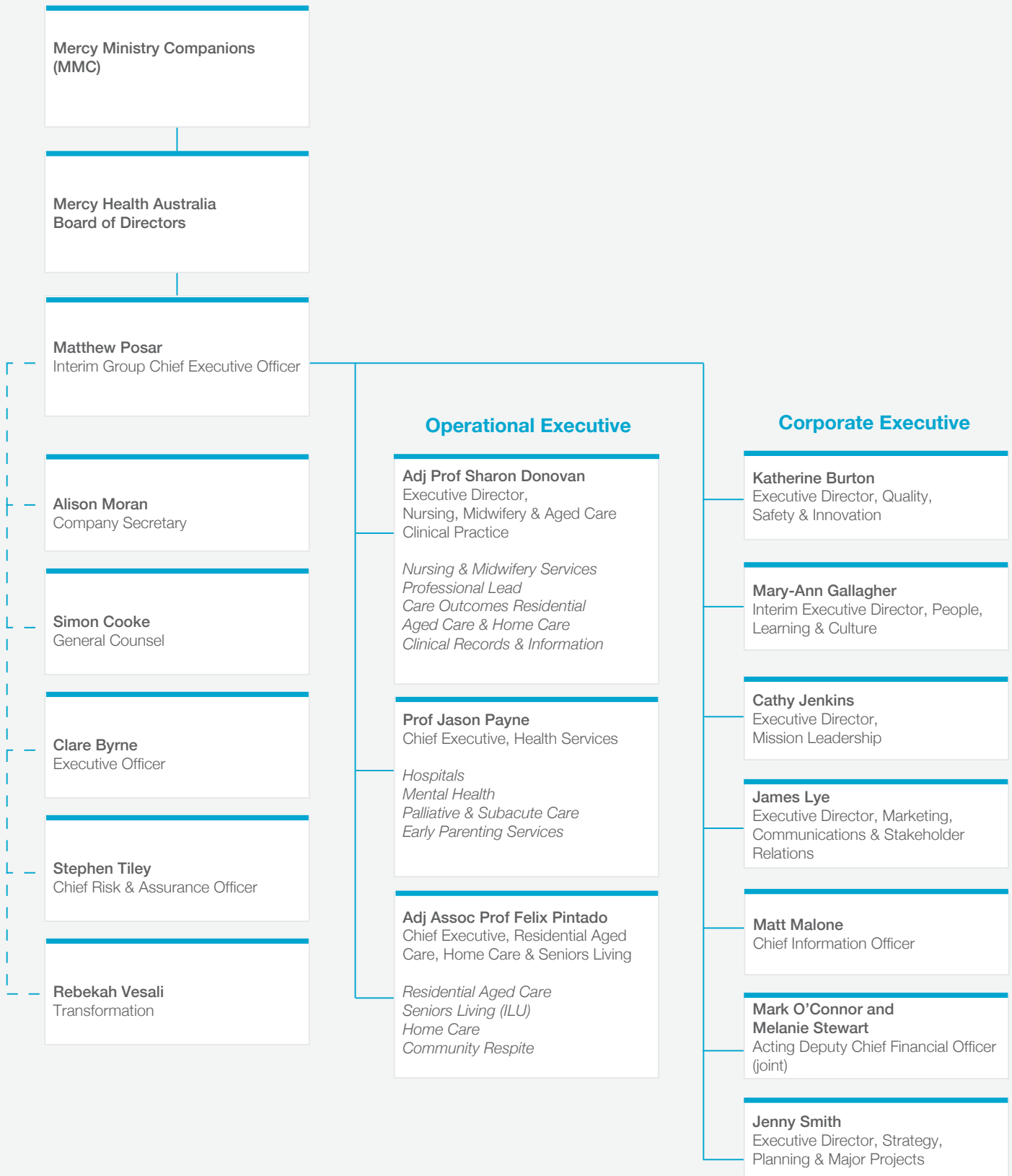
- We will pursue opportunities that provide diversification and growth of our services.
- We will operate with financial diligence and use contemporary business disciplines to ensure sustainability.
- We will act responsibly and care about environmental sustainability.

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 has been put into action through annual business plans that detail strategic initiatives that realise our mission.

ORGANISATIONAL STRUCTURE



GOVERNANCE

Mercy Hospitals Victoria Ltd Board

Ms Virginia Bourke (Chair)
Ms Jo Barker
Mr John Corcoran AM (Deputy Chair)
Mr Martin Day
Ms Penelope Eden
Ms Jane Edge (commenced term November 2021)
Adjunct Clinical Associate Professor Ian Haines
Sr Berice Livermore RSM
Mr Tim O'Leary
Adjunct Professor Susan Pascoe AM
Adjunct Professor Francis Sullivan AO

Company Secretary

Ms Alison Moran

The Board is supported by five committees.

Finance, Audit and Risk Committee

Ms Jo Barker (Chair)
Mr John Corcoran AM
Mr Martin Day
Ms Sandy Lawson
Mr Tony Ryan

Ethics Committee

Mr Martin Day (Chair)
Dr Frances Baker RSM
Adjunct Professor Stephen Cornelissen (concluded term May 2022)
Mr Diarmid Davine
Dr Genevieve Green
Ms Cathy Jenkins (commenced term September 2021)
Ms Mary Klasen
Reverend Kevin McGovern
Dr Carol Ong RSM
Professor Jason Payne
Adjunct Associate Professor Felix Pintado
Associate Professor Michael Rasmussen (commenced term August 2021)
Adjunct Professor Francis Sullivan AO
Mr Michael Taylor (concluded term March 2022)

Quality Committee

Adjunct Clinical Associate Professor Ian Haines (Chair)
Mrs Kate Birrell OAM
Ms Polly Caldwell (concluded term January 2022)
Dr Jacqueline Collett
Ms Penelope Eden (commenced term January 2022)
Dr Michelle Goh RSM
Sr Berice Livermore RSM
Mr Marcel Mihulka
Ms Sally Moore

Human Research Ethics Committee

Mr Tim O'Leary (Chair)
Dr Fiona Brownfoot
Mr Diarmid Davine
Mr James Dwyer
Professor Christine East
Dr Philip Henschke
Associate Professor Lisa Hui
Ms Margaret Joss
Ms Kathryn McNulty
Dr Kathy McMahon
Mr Tim Norton
Dr Carol Ong (commenced term May 2022)
Emeritus Professor Margaret O'Connor AM (concluded term October 2021)
Professor David O'Neal
Professor Jason Payne
Dr Josephine Power
Dr Neelofar Rehman
Dr Andrew Watkins

Corporate Governance Remuneration and Nomination Committee

Ms Virginia Bourke (Chair)
Mr John Corcoran AM
Adjunct Professor Susan Pascoe AM

BOARD

Ms Virginia Bourke BA, LLB(Hons), MA, FAICD

Chair

Virginia joined the Mercy Health Boards in 2016 and was subsequently appointed Chair of Mercy Health in 2018. She chairs the Mercy Health Corporate Governance, Remuneration and Nomination Committee and previously served a term as a Director of Mercy Health from 2008–2014.

Virginia is the Chair of St John Ambulance Victoria and a Director of Mater Group, Catholic Health Australia, St John Ambulance Australia and Caritas Australia. She holds advisory roles with PM Glynn Institute (Australian Catholic University) and the Institute of Sisters of Mercy of Australia and Papua New Guinea (ISMAPNG).

Virginia is a lawyer and consultant with experience in private practice and senior in-house counsel positions for over 25 years. She is currently a consultant with the national health and aged care industry team at MinterEllison Lawyers.

"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 warm relationships with those around her. I believe one of the strengths of our Boards 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."

Ms Jo Barker B Comm, ACA, GAICD

Jo joined the Mercy Health Boards and the Mercy Health Finance, Audit and Risk Committee in 2015, and provides valuable business knowledge and insight. Jo was appointed Chair of the Mercy Health Finance, Audit and Risk Committee in 2021.

Jo is a partner within EY's Strategy and Transaction team (SaT) in Melbourne.

She has over 25 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.

Jo also serves as the Oceania Consumer Markets Service Leader and sits on the SaT Leadership team.

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

Mr John Corcoran AM BEc, LLB

John has been on the Mercy Health Boards since 2011 and was appointed Deputy Chair in 2019. He is a member of the Mercy Health Finance, Audit and Risk Committee and a member of the Mercy Health Corporate Governance, Remuneration and Nomination Committee. 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 and executive partner of Russell Kennedy, and now serves as a Principal of the firm.

John was a recipient in 2001 of the Centenary Medal for services to Australian society and to the law. John is Chairman of Legal Practitioners' Liability Committee, and was on the Legal Service Board from 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 London Board Member of the International Bar Association, 2009–12. John was named in Best Lawyers' 2013 and 2019 Lawyer of the Year Award in Retirement Villages and Senior Living Law. John was awarded an Order of Australia (AM) in the 2017 Australia Day Honours.

"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."

Mr Martin Day Associate Dip Valuations and Real Estate Management, MBA, FAICD, GAIST Adv

Martin joined the Mercy Health Boards in 2016. He is Chair of the Mercy Health Ethics Committee and a member of the Finance, Audit and Risk Committee. Prior to this, 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 held senior executive roles in the health service industry for 23 years, in both Australian and international acute healthcare markets, including South East Asia and the Pacific. He also has 20 years of corporate governance experience in the not-for-profit sector, including healthcare and, for the past eight years, industry superannuation.

Martin's qualifications include: Associate Diploma of Valuations and Real Estate Management, RMIT; Master

of Business Administration, Deakin University, Victoria; Fellow of Australian Institute of Company Directors; and Graduate of the Australian Institute of Superannuation Trustees. His industry experience includes risk management, clinical governance, workforce development, financial management, operational management, stakeholder engagement, public/private partnerships and social accountability. Martin is also a Director of Prime Super and Adeney Private Hospital Pty Ltd. Prime is an industry superannuation fund serving the primary industry, rural and regional, health and education sectors. Adeney is a new private hospital in Melbourne being developed by a joint venture including Medibank Private and 42 specialist doctors.

"I am inspired by the founding Sister of Mercy, 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 compassion 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."

Ms Penelope Eden LLB, Cert. Nursing

Penelope joined the Mercy Health Boards in May 2021. Penelope brings her broad expertise across health and aged care, mental health, youth and child health, and disability services to the Mercy Health Boards, having advised operators across the sector for over 20 years as a legal practitioner. Penelope is a partner at law firm MinterEllison, where she leads the firm's national aged care and human services practice. Penelope is passionate about the work she does and her contribution to the sector.

Penelope's background as a clinician and longstanding engagement in the health and human services sectors gives her a unique understanding of the complex regulatory and operational environment within which Mercy Health operates. She advises on the regulatory, contractual and broader commercial risks and opportunities in the rapidly changing human services sector. Penelope is widely regarded as an industry expert and has been consistently recognised in *Best Lawyers in Australia* and *Doyle's Guide* in the categories of Health and Aged Care, Medical Negligence, Personal Injuries and Insurance Law.

"I was educated by the Sisters of Mercy and feel a strong connection to the Mercy values. I am passionate about the work I do across the health and human services sector and hope to contribute in some way

to the important work of Mercy Health within our community. I feel privileged to be part of such an experienced and committed Board and management team."

Jane Edge MBA (Exec), Adv Cert Exec Coaching

Jane joined the Mercy Health Boards on 1 November 2021. Jane draws on over 25 years' experience in high impact roles delivering social change. She has a unique blend of senior executive/CEO/Board experience across strategic and operational management.

Jane is the CEO of Australia's largest disability-focused international development organisation, CBM Australia, where she leads catalytic, collaborative and innovative approaches that see millions of lives transformed each year in a growing movement to end the cycle of poverty and disability. Jane also serves on the Board of the Australian Council for International Development as Vice-President Finance and has held a range of governance roles locally and internationally.

Jane's early career was in journalism and communications, followed by executive management roles and organisational change/executive coaching consulting across a variety of industries. Jane has a Master of Business Administration (Executive) and Advanced Certificate in Executive Coaching.

"As a passionate change-maker motivated by my faith, I'm innately drawn to Catherine McAuley's servant leadership, advocacy and practical action for the poor. Her vision for the world is even more compelling today and I'm thrilled to serve alongside Mercy Board colleagues and executive staff, all of whom are so committed to stewarding Catherine's legacy and the Mercy values."

Adjunct Clinical Associate Professor Ian Haines MBBS Hons, FRACP, FACHPM

Ian joined the Mercy Health Boards in 2016 and is Chair of the Mercy Health Quality Committee. Ian has more than 30 years of 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. He 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 American Society of Clinical Oncology, Clinical Oncology Society of Australia and the Ethics Subcommittee of the Medical Oncology Group of Australia. Ian is also the founder and a director of Melbourne Oncology Group, a private sector oncology specialist group.

"I am fortunate to have worked at Cabrini for 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 thus far, 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."

Sr Berice Livermore RSM RN, MN, B Hlth Admin, Dip Theol

Berice joined the Mercy Health Boards in November 2018 and joined the Mercy Health Quality Committee in 2020. 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, Chair of the Institute Finance Committee, Chair of Catherine McAuley Services Ltd and Chair of St Joseph's Cowper Ltd. She is currently Chair of The Corporation of the Trustees of the Sisters of Perpetual Adoration of the Blessed Sacrament Ltd ATF The Sisters of Perpetual Adoration Trust.

"As a Sister of Mercy I am grateful for my membership of the Boards of Mercy Health. It provides me with the opportunity to witness and be inspired by the strong commitment to the Mission of Mercy of my fellow directors and staff of this important organisation in the lives of the Sisters of Mercy."

Mr Tim O'Leary BA Hons, Grad Dip Applied Philosophy

Tim joined the Mercy Health Boards in 2016 and is Chair 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 Stewardship for the Catholic Archdiocese of Melbourne. In this role he is responsible for the business, financial and governance aspects of the Archdiocese.

Tim is a Member of Council at Newman College (University of Melbourne) and a Board member of the Melbourne Archdiocesan Catholic Schools. 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 BA, Dip Ed, Grad Dip Special Ed, M Ed Admin (Hons), FAICD, FIPAA, FACE

Susan was appointed to the Mercy Health Boards in March 2018 and is a member of the Mercy Health Corporate Governance Remuneration and Nomination Committee. She is President and Chair of the Australian Council for International Development (ACFID), Chair of Catholic Emergency Relief Australia (CERA), Chair of the Community Director's Council and co-Chair of the Charities Crisis Cabinet. Susan is a member of the Vatican's Commission of Methodology preparing for the Synod of Bishops in 2023. She was a member of the Australian Catholic Bishops Conference Safeguarding Steering Committee, and its Governance Review Project Team from 2019 to April 2020.

Susan was the inaugural Commissioner for the Australian Charities and Not-for-profits Commission (ACNC) 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. Currently, Susan is chairing a Taskforce for the Victorian Government on Social Services Reform.

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 colleagues over the years. I have deep respect for their commitment to those who are experiencing vulnerability and marginalisation, and to their professional approach to their ministry and missionary endeavours. I am honoured to have some role in continuing the work of Catherine McAuley here in Australia."

Adjunct Professor Francis Sullivan AO BA, Dip Ed, MA

Francis was appointed to the Mercy Health Boards in November 2019. He is committed to equity and justice and has been highly successful in bringing a social conscience to the political debate on health and aged care issues. In 2020, Francis was appointed an Officer of the Order of Australia for his distinguished service to the community, particularly through social justice and legislative reform initiatives, and to health and aged care.

Francis is Chairman of the Board of the Mater Group and prior to this was Chief Executive Officer at the Truth, Justice and Healing Council and Secretary General of the Australian Medical Association.

He spent 14 years as the Chief Executive Officer of Catholic Health Australia, speaking for 73 private and public hospitals and more than 500 aged care services across Australia. Prior to that, Francis was senior advisor to the Minister for Health in Western Australia.

Francis has a masters degree in theology from Loyola University in Chicago and a bachelor degree in politics from Curtin University in Western Australia. Early in 2008, the Australian Catholic University awarded Francis an honorary doctorate for his work in public

health advocacy. He is also an Adjunct Professor at the Australian Catholic University.

"I have been fortunate to see close hand the exceptional way in which the Sisters of Mercy have risen to the contemporary challenges of health and aged care in our community. Their resolve to continue a gospel-based ministry in highly competitive and exacting environments plus their unswerving dedication to the disadvantaged and marginalised not only inspire me but beckon me to join in the unfolding story of Mercy Health today."

Ms Alison Moran LL B (Hons), BA, Grad Dip ACG, FGIA Company Secretary

Alison joined Mercy Health in September 2020 and is appointed as Company Secretary to each of the companies governed by the Mercy Health Boards. Alison attends all Board meetings and meetings of the Corporate Governance, Remuneration and Nominations Committee, and provides governance advice and support to the Mercy Health Board Chair, the Board as a whole and the Group Chief Executive Officer. Alison is an experienced corporate governance professional and lawyer, having enjoyed a long career at major commercial law firm, Corrs Chambers Westgarth, in both client-facing, commercial law roles and internal legal and governance roles, including as the firm's General Counsel. Prior to joining Mercy Health, Alison was Company Secretary of Cabrini Health, a leading private Catholic healthcare service in Melbourne. Alison holds a Bachelor of Laws (Hons.) and a Bachelor of Arts from the University of Melbourne and a Graduate Diploma of Applied Corporate Governance and is a Fellow of the Governance Institute of Australia.

"I feel privileged to work with such a talented Board committed to furthering the work of Catherine McAuley, and draw inspiration from the values of compassion and stewardship in particular in making my own contribution to Mercy Health's good governance."

EXECUTIVE

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

Group Chief Executive Officer (concluded term May 2022)

Stephen is an experienced healthcare executive who 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 HESTA and held similar roles with Aged and Community Services Australia (ACSA) and the Global Ageing Network (formerly IASHA) until the conclusion of his term at Mercy Health.

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.

Mr Matthew Posar BBus (Accounting and Finance), Grad Diploma (Investment), CA

Interim Group Chief Executive Officer (commenced term May 2022)

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.

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

Chief Executive, Health Services

Jason was appointed Chief Executive Health Services in October 2019. This role has operational accountability for Public Health Services which span Victoria and southern NSW. Services in the portfolio comprise of two main public hospital campuses, Mercy Hospital for Women and Werribee Mercy Hospital, as well as Mercy Mental Health, Mercy Palliative Care, Mercy Health O'Connell Family Centre and hospital services in New South Wales. Prior to this, Jason was the Chief Operating Officer, Health Services, a position he had held since December 2018.

Jason brings a wealth of experience to this role with a clinical background in nursing and more than 28 years' experience in the Victorian public health sector across a variety of care settings. Previously he has worked at the

Department of Health and Human Services and across a broad range of roles at Austin Health including the Executive Director Clinical Operations and Ambulatory Services and the inaugural Director of Cancer and Neurosciences at the Olivia Newton-John Cancer Wellness & Research Centre.

Jason holds two academic appointments; Professor of Enterprise at the University of Melbourne, Faculty of Medicine, Dentistry and Health Services (Nursing) and Adjunct Professor at the University of Notre Dame, School of Medicine.

Jason believes strong consumer engagement is critical to improving patient care and outcomes and is passionate about working with our consumers to achieve this.

Ms Katherine Burton BS App Science (Medical Radiations), MBA, GCLACC, GAICD

Executive Director, Quality, Safety and Innovation (commenced term November 2021)

Katherine was appointed to the position of Director, Quality and Innovation Health Services in January 2019 and appointed to Executive Director Quality, Safety and Innovation in 2021.

Katherine is responsible for leading and directing the quality systems and processes that support the provision of high-quality, safe and person-centred care, and the safety and wellbeing of our staff.

With a clinical background in nuclear medicine, Katherine has more than 20 years' experience in the health industry, holding various senior management and executive roles in quality and safety, and operations across major tertiary and specialist health services. She also has extensive strategic project management experience with expertise in clinical governance, risk management, change management and process redesign.

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

Executive Director, Nursing, Midwifery and Aged Care Clinical Practice

Sharon was appointed to Mercy Health — Health Services in February 2018 as Executive Director Nursing and Midwifery for the public hospitals in Victoria and NSW. In 2019, her role was expanded to provide

clinical practice and professional leadership in Mercy Aged Care Services. In March 2020, she was appointed Mercy Health Incident Commander COVID-19 and remains Executive Lead.

Sharon has more than 20 years' experience at executive level in public and private health services including Ballarat Health Services, Alfred Health and Epworth Healthcare. She has also had experience as CEO in a large multi-site aged care business and is a current Board Director at Assisi Aged Care. Sharon has expertise in clinical and corporate governance, clinical and corporate risk management, university partnership development, change management and process redesign. She has a strong interest in improving the patient/resident experience and in supporting nursing and midwifery leadership to deliver this experience.

Sharon is a Registered Nurse and Registered Midwife with a Bachelor of Nursing, Postgraduate Midwifery Certificate and a Masters of Business Administration specialising in human resource management. She is a member of the Australian Institute of Company Directors, has received awards for leadership and has public and private Board experience.

Ms Mary-Anne Gallagher BSc, Grad Dip Appl Psych, MAPS, CAHRI, LV Fellow, MSc MPOD, MAICD

Executive Director, People, Learning and Culture (commenced term May 2022)

Mary-Anne joined Mercy Health as Executive Director, People, Learning and Culture in May 2022. Mary-Anne has worked across six sectors, most recently in private not-for-profit healthcare where she established and led a human resources function. Mary-Anne has worked in both private and public healthcare settings and enjoys the healthcare context.

Mary-Anne is a registered psychologist and completed her Masters in Positive Organisation Development from Case Western University in Ohio, USA. Mary-Anne enjoys working collaboratively and being part of a team. Authenticity and compassion are core values for Mary-Anne as a leader.

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

*Executive Director, Quality, Safety and Innovation
(concluded term August 2021)*

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. 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 Aged Care and was a member of the Board Finance and Risk Management Committee at McAuley Community Services for Women until September 2021.

Ms Karen Horner BA (Social Sciences),
GDipLabRelLaw

*Executive Director, People, Learning and Culture
(concluded term June 2022)*

Karen held a number a senior positions within the People, Learning and Culture team before her appointment in January 2020 to the position of Executive Director, People, Learning and Culture.

During her professional career Karen has held senior roles, most recently with the Catholic Archdiocese of Melbourne but also in a range of not-for-profit organisations including an automobile club, healthcare, multicultural education services and an employer association as well as roles in the for-profit sector in logistics and financial services.

Ms Cathy Jenkins BA, Grad Dip RE, Grad
Dip Education, B Theol, M Leadership

*Executive Director, Mission Leadership (commenced
term August 2021)*

Cathy Jenkins joined Mercy Health as Executive Director, Mission Leadership in August 2021. Bringing qualifications in Arts, Theology and Leadership she has a background in both education and publishing. Cathy has worked in a variety of environments — schools, the corporate world, as a system leader in education in the Archdiocese of Melbourne and the Diocese of Sandhurst, and as a leader of mission and evangelisation for the Archdiocese of Melbourne. Cathy believes that organisations such as Mercy Health are contemporary centres of Catholic life and is committed to continuing to build on the rich environment which supports and enables the Mercy healing ministry to flourish. It is in the ordinariness of how we care for each other that the mercy of God is made visible.

In addition to an active involvement in parish life, Cathy is a member of the Sandhurst Catholic Early Childhood Education and Care Board and the Diocese of Sale Catholic Education Board. She has also been actively involved in the work of the Plenary Council as a member of a writing group and a Member for the two assemblies.

Mr James Lye B Bus (Communication),
AAICD

*Executive Director, Marketing, Communications and
Stakeholder Relations*

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

James provides leadership to Mercy Health on marketing strategy, communications and media, government and public policy engagement, stakeholder relations and has designed and led our communications response to the pandemic.

James has advised on public policy and marketing in 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 strategy team for a global professional services firm.

James has a special interest in the role of creativity and design thinking in strategy, marketing and public policy. He is an Executive Fellow of the Australian and New Zealand School of Government.

Mr Matt Malone

Chief Information Officer

Matt was appointed to the position of Chief Information Officer in July 2020 and is responsible for the technology strategy, cyber security and privacy and for developing, implementing and supporting the information systems, functions and infrastructure of Mercy Health.

Matt has an extensive background in technology leadership roles at a number of health organisations including Healthscope, EBOS, Symbion, Mayne and Faulding Pharmaceuticals. He has a strong interest in digital health and organisation improvement through technology adoption.

Matt is currently a board member of the Deakin University Cyber Security Executive Advisory Board and a member of the GS1 Healthcare User Group.

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 and 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.

HEALTH SERVICES LEADERSHIP TEAM

Ms Jessica Casey BBus (HR and Marketing), AdvDip HRM

Group General Manager, Human Resources

Jess was appointed to the position of General Manager, Human Resources (Residential Aged Care, Home Care and Seniors Living) in March 2020. In November 2021 she was promoted to Group General Manager HR now encompassing Health Services.

Jess has more than 18 years' experience in human resources with more than 10 years in health and aged care. She was previously General Manager, Human Resources at BlueCross Aged Care (seven years) and has held human resource management roles with Calvary Health Care, Sigma and Aspen Pharmaceuticals, Carlton United Breweries and The Marriott Group.

As a member of the Health Services and Aged Care leadership teams, Jess is responsible for providing value-adding human resource support and advice across Health Services, Residential Aged Care, Home Care and Seniors Living.

Ms Robynne Cooke RN, BA Nursing, Grad Dip Gerontology, MHSM, GAICD

Chief Operating Officer

Robynne commenced her role at Mercy Health in November 2020. Robynne's previous roles include Executive Director, Operations Western Sydney Local Health District, General Manager of Liverpool Hospital and senior executive positions in public health organisations in Melbourne.

Robynne has been a board member on both medical research and foundation boards and is a Graduate of the Australian Institute of Company Directors. Robynne's passion is to improve the patient experience across Health Services.

Adjunct Professor Jeffrey Kirwan MBChB, FRANZCP, Cert. POA, FRACMA

Chief Medical Officer (commenced term August 2021)

Jeffrey joined Mercy Health in August 2021. He graduated from Otago University Medical School and over the past 20 years has held combined medical administration and clinical positions in New

Zealand and Australia. As a Medical Administrator his interests include medical workforce development and engagement, service delivery, clinical governance, research and teaching and as a Consultant Psychiatrist they include cognitive and mood disorders as well as medical ethics.

Jeffrey is passionate about the integration of care across the primary and secondary health care continuum and has been closely involved with the HealthPathways initiative in both New Zealand and Melbourne.

Mr Mark O'Connor B Com (Hons)

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.

We also acknowledge the dedication and extraordinary contribution of our Health Services leaders, particularly during the challenging period of the COVID-19 pandemic:

Ms Natalie Ballan

Associate Professor Thomas Chan

Ms Tanya Darrer

Ms Gillian Evans

Ms Leanne Foster

Ms Donna Hansen-Vella

Ms Shannon Lang

Ms Maree Pane

Associate Professor Michael Rasmussen

Associate Professor Scott Simmons

Associate Professor Dean Stevenson

Mr Bradley Van Ooi

Mr Edward Wallace

STATEMENT OF PRIORITIES: OVERARCHING STRATEGY 2021-22

Strategic priorities

- ***Maintain your robust COVID-19 readiness and response, working with my department to ensure we rapidly respond to outbreaks, if and when they occur, which includes providing testing for your community and staff, where necessary and if required. This includes preparing to participate in, and assist with, the implementation of our COVID-19 vaccine immunisation program rollout, ensuring your local community's confidence in the program.***

Outcomes:

- Resources dedicated to ensure coordinated response to COVID-19.
- Ongoing appointment of infectious diseases physician facilitating provision of advice and expertise.
- N95 mask fit-testing currently completed for 90 per cent active staff.
- Ongoing personal protective equipment (PPE) training compliance rate 72 per cent for active staff.
- Established processes in place for surveillance testing as needed.
- Mercy Hospital for Women (MHW) acted as a streaming hospital for COVID-19-positive women.
- Mercy Health was successful in receiving the Department of Health, Health Care Worker Wellbeing Grant and continued the Mentally Healthy Workplace project. Funding enabled the appointment of a Wellbeing Lead and two Wellbeing Advisors to actively engage staff and to implement a range of initiatives including on site psychological support, mental health first aid training, telephone wellbeing check-ins and online webinars and programs to enhance individual and team wellbeing. More than 1,000 staff have engaged with the wellbeing initiatives during 2021-22.
- Werribee Mercy Hospital (WMH) vaccination clinic operated as required during 2021-22 providing vaccinations for staff and the public.

- ***Drive improvements in access to emergency services by reducing emergency department four-hour wait times, improving ambulance to health service handover times, and implementing strategies to reduce bed-blockage to enable improved whole of hospital system flow.***

Outcomes:

- Project Eight commenced, a program of work comprised of eight system pillars. The program seeks to sustainably improve access to WMH for our community and partners while maintaining safe, timely, patient-centred care by improving flow, throughput and discharge processes. Fourteen projects are underway aimed to improve discharge planning, bed management and alternative service provision options.
- Development of a new 24-bed Short Stay Unit at WMH.
- Successful in securing \$110 million funding for expansion of the WMH Emergency Department.

- ***Actively collaborate on the development and delivery of priorities within your Health Service Partnership, contribute to inclusive and consensus-based decision-making, support optimum utilisation of services, facilities and resources within the Partnership, and be collectively accountable for delivering against Partnership accountabilities as set out in the Health Service Partnership Policy and Guidelines.***

Outcomes:

- Mercy Health actively participated in two Health Service Partnerships (HSPs) due to the geographic spread with involvement in the West Metro HSP and the North East Metro HSP.
- The HSPs are directly commissioning surgical catch-up activity and Better@Home services. The partnerships are sharing novel service models relating to telehealth and rapid access clinics which may inform new or enhanced services in 2022-23.
- Meetings are being held with Austin Health and Warrigal Private Hospital (part of Ramsay Health Care) to bolster our partnership, with considerations for complementary services such as a Women's Health Hub as part of the MHW clinical services and master planning process.

■ ***Engage with your community to address the needs of patients, especially our vulnerable Victorians whose care has been delayed due to the pandemic and provide the necessary “catch-up” care to support them to get back on track. Work collaboratively with your Health Service Partnership to:***

- ***Implement the Better@Home initiative to enhance in-home and virtual models of patient care when it is safe, appropriate and consistent with patient preference.***
- ***Improve elective surgery performance and ensure that patients who have waited longer than clinically recommended for treatment have their needs addressed as a priority.***

Outcomes:

- The West Metro HSP commissioned a new service model for a six-bed substitution GEM@Home pilot that launched at WMH on 9 February 2022. The service model is under review and subject to a final recommendation this service may transition to an expanded Hospital in the Home (HITH) service.
- A model of care pathway for MHW and WMH HITH expansion has been developed and includes an increase of 16 beds.
- The Neonatal HITH service launched on 9 February 2022 and has now successfully delivered ‘hospital in the home’ care to more than 70 babies who would have otherwise required an inpatient hospital admission in the Special Care Nursery.
- Transitioning the ‘at-home services’ to business as usual has commenced with the development of a business case that supports another increase in the number and complexity of HITH Beds.
- The establishment of a Pelvic Pain Shared Ambulatory model of care at MHW is on track. This new model of care is anticipated to improve patient outcomes, experience and cost efficiency.
- WMH was identified as one of eight hospitals across Victoria to establish a Rapid Access Hub. The WMH Rapid Access Hub will provide four endoscopy procedural rooms that will result in improved access to thousands of patients across the West Metro HSP waiting for an endoscopic procedure, and is expected to open in March 2023.

- WMH has established strategic partnerships with a small number of private endoscopy providers in the Werribee Health Precinct to enable accelerated access to endoscopy care for patients on the WMH waiting list and also to release existing operating theatre stock to undertake additional elective surgery.
- Accessibility Action Plan 2019–22 in place.
- Ongoing involvement in the planning and design of the Early Parenting Centre (EPC) Project for the Whittlesea new build.
- Fitzroy Legal Service (FLS) commenced the Family Violence clinic at MHW in October 2021 with referrals made by Social Work or from the Perinatal Mental Health team. Over the past eight months, FLS has provided legal aid to around 50 women. The clinic commenced as a phone or digital meeting due to COVID-19, however moved to on-site service provision in April 2022. The clinic runs fortnightly and has run at capacity since commencement.
- A project was completed which facilitated COVID-19 vaccination for vulnerable women and girls who were accessing MHW. These cohorts included young mums, chemically dependent women, women who identified as Aboriginal and Torres Strait Islander, and victim survivors of family violence. Over the 20 weeks of the project, the case management model saw more than 80 consultations with vulnerable women in order to facilitate 33 COVID-19 vaccinations.
- Successful bid to the North Western Melbourne Public Health Network (NWM PHN) to run the Working Together for Kids pilot in Wyndham. The purpose of the project is to trial and evaluate how a school-based paediatric service can reduce the risk of adverse physical and mental health outcomes of socially disadvantaged primary school-aged children in Wyndham. The pilot will commence in July 2022.

- ***Address critical mental health demand pressures and support the implementation of mental health system reforms to embed integrated mental health and suicide prevention pathways for people with, or at risk of, mental illness or suicide through a whole-of-system approach as an active participant in your Health Service Partnership and through your Partnership's engagement with Regional Mental Health and Wellbeing Boards.***

Outcomes:

- Chief Executive Health Services actively participating in planning meetings with the North and West Metropolitan Transition Steering Committee to develop a coordinated response to service changes due to disaggregation. The Minister for Mental Health has confirmed that the Ursula Frayne Centre will be operated by Western Health from mid-2023, and Mercy Mental Health (MMH) is becoming the Area Mental Health and Wellbeing Service for Adults and Older Adults for the catchments of Wyndham and Hobsons Bay. MMH will continue to provide perinatal mental health services (state-wide/level 6) to the Western Region of Victoria.
- MMH business partners engaged in working groups advising the disaggregation process (Finance and Activity, Communications, Human Resources and Industrial Relations).
- MMH Project Management Office has been established to further support the transition and transformation of MMH.
- MMH Program Director and Clinical Services Director are members of the North and West Metropolitan Mental Health System Reform Project Control Group which informs the disaggregation along with numerous Department of Health Committees to drive the transformation.
- Created Mercy Health Steering Group — Royal Commission into Victoria's Mental Health Services (RCVMHS), chaired by the Mercy Health Chief Operating Officer.
- MMH Data Transformation Plan submitted.
- MMH Priority Area Transformation Plan to be submitted by July 2022.
- MMH commenced a range of initiatives, and has in place elements aligned with many of the RCVMHS recommendations. These include increasing the peer workforce and initiating several improvement projects, such as implementation of an evidence-informed project to improve services provided within our mental health rehabilitation bed-based programs.

- ***Embed the Aboriginal and Torres Strait Islander Cultural Safety Framework into your organisation and build a continuous quality improvement approach to improving cultural safety, underpinned by Aboriginal self-determination, to ensure delivery of culturally safe care to Aboriginal patients and families, and to provide culturally safe workplaces for Aboriginal employees.***

Outcomes:

- Innovate Reconciliation Action Plan 2021–23 launched in August 2021.
- Aboriginal Cultural Safety Plan developed and progress against plan reported annually.
- Aboriginal Cultural Awareness: E-Learning package available to all MHVL staff in MyCircuit LMS; 93.8 per cent of active employees have completed this training since launch.
- Aboriginal Cultural Journey Training with Strengthening Cultural Partnerships also available with 63 staff attending during the reporting period in addition to the online learning.

PERFORMANCE PRIORITIES

In 2021–22, Mercy Health was required to respond to the COVID-19 pandemic. In doing so we were unable to meet all targets as per the Statement of Priorities. COVID-19 resulted in delays to surgery, visitor restrictions and increased demand for services, with patient experience impacted.

High quality and safe care

Key performance measure	Target	Result
Infection prevention and control		
Compliance with the Hand Hygiene Australia program	85%	90%
Percentage of healthcare workers immunised for influenza	92%	53%
Patient experience		
Victorian Healthcare Experience Survey – percentage of positive patient experience responses Quarter 1	95%	92%
Victorian Healthcare Experience Survey – percentage of positive patient experience responses Quarter 2	95%	86%
Victorian Healthcare Experience Survey – percentage of positive patient experience responses Quarter 3	95%	82.8%
Percentage of mental health consumers reporting a ‘very good’ or ‘excellent’ experience of care in the last 3 months or less	80%	56%
Percentage of mental health consumers reporting they ‘usually’ or ‘always’ felt safe using this service	90%	82%
Healthcare associated infections (HAI's)		
Rate of patients with surgical site infection	No outliers	No outliers
Rate of patients with ICU central-line-associated bloodstream infection (CLABSI)	Nil	Nil
Rate of patients with SAB** per 10,000 occupied bed days	≤ 1	0.4

Key performance measure	Target	Result	
Mental Health		MMH Footscray	WMH
Percentage of closed community cases re-referred within six months: CAMHS, adults and aged persons	< 25%	NA	26.5%
Rate of seclusion events relating to an adult acute mental health admission per 1,000 occupied bed days	≤ 10	6.3%	8.9%
Percentage of adult acute mental health inpatients who have a post-discharge follow-up within seven days	88%	81.7%	79.3%
Percentage of adult acute mental health inpatients who are readmitted within 28 days of discharge	<14%	16.7%	13.9%

**SAB is Staphylococcus Aureus Bacteraemia

Key performance measure	Target	Result	
Maternity and Newborn		MHW	WMH
Rate of singleton term infants without birth anomalies with APGAR score <7 to 5 minutes	≤ 1.4%	0.9%	0.9%
Rate of severe fetal growth restriction (FGR) in singleton pregnancy undelivered by 40 weeks	≤ 28.6%	19.8%	23.9%
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%	54.5%	97.9%
Continuing Care		MHW	WMH
Functional independence gain from an episode of rehabilitation admission to discharge relative to length of stay	≥ 0.645	NA	0.824

Strong governance, leadership and culture

Key performance measure	Target	Result
Organisational culture		
People matter survey – Percentage of staff with an overall positive response to safety culture survey questions	62%	64%

Timely access to care

Key performance measure	Target	Result	
Emergency care		MHW	WMH
Percentage of patients transferred from ambulance to emergency department within 40 minutes	90%	97	68
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%	83	43
Percentage of emergency patients with a length of stay in the emergency department of less than four hours	81%	75	45
Number of patients with a length of stay in the emergency department greater than 24 hours	0	1	123
Mental Health		MHW	WMH
Percentage of mental health-related emergency department presentations with a length of stay of less than 4 hours	81%	27.40%	31.0%

Key performance measure	Target	Result
Elective surgery		
Number of patients on the elective surgery waiting list as at 30 June 2022	3,100	2980
Number of patients admitted from the elective surgery waiting list	3,700	3785
Percentage of urgency category 1 elective surgery patients admitted within 30 days	100%	100.0%
Percentage of urgency category 1, 2 and 3 elective surgery patients admitted within clinically recommended time	94%	71.0%
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	32.4%
Number of hospital-initiated postponements per 100 scheduled elective surgery admissions	≤ 7	9.9
Specialist clinics		
Percentage of urgent patients referred by a GP or external specialist who attended a first appointment within 30 days	100%	50.6%
Percentage of routine patients referred by GP or external specialist who attended a first appointment within 365 days	90%	90.0%

Effective financial management

Key performance indicator	Target	2021-22 Result
Operating result (\$m)	\$0	\$0.13
Average number of days to pay trade creditors	60 days	40
Average number of days to receive patient fee debtors	60 days	90
Adjusted current asset ratio	0.7 or 3% improvement from health service base target	0.91
Actual number of days available cash, measured on the last day of each month.	14 days	56 days
Variance between forecast and actual Net result from transactions (NRFT) for the current financial year ending 30 June.	Variance ≤ \$250,000	Variance > \$250,000

ACTIVITY AND FUNDING

Funding type	Activity
Consolidated Activity Funding	
Acute admitted, subacute admitted, emergency services, non-admitted NWAU	70,531.93
Acute Admitted	
National Bowel Cancer Screening Program NWAU	120.40
Acute admitted DVA	111.27
Acute admitted TAC	14.77
Acute Non-Admitted	
Genetic Services	0.00
Specialist Clinics	16,304.23
Subacute/Non-Acute, Admitted & Non-admitted	
Subacute WIES - DVA	35.26
Transition Care - Bed days	533.00
Transition Care - Home days	306.00
Mental Health and Drug Services	
Mental Health Ambulatory	61,095
Mental Health Inpatient - Available bed days	25,462
Mental Health Subacute	8,614
Primary Health	
Community Health / Primary Care Programs	609

Workforce

We confirm that employees have been correctly classified in workforce data collections.

Hospitals labour category	JUNE current month FTE		Average monthly FTE	
	2022	2021	2022	2021
Nursing	1484.02	1453.54	1468.16	1426.20
Administration and Clerical	292.13	274.19	287.77	275.64
Medical Support	64.40	60.36	65.71	59.66
Hotel and Allied Services	182.57	160.51	177.22	163.32
Medical Officers	27.14	25.65	27.56	28.51
Hospital Medical Officers	272.33	243.43	257.57	246.25
Sessional Clinicians	115.83	105.72	111.67	97.97
Ancillary Staff (Allied Health)	231.43	209.39	229.76	207.68

Occupational Health and Safety

Occupational health and safety statistics	2021-22	2020-21	2019-20
The number of reported hazards/incidents for the year per 100 FTE	51.81	54.33	45.3
The number of 'lost time' standard WorkCover claims for the year per 100 FTE	0.89	1.66	0.67
The average cost per WorkCover claim for the year ('000)	\$13,453	\$10,654	\$4,506

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 to facilitate a recovery at work.

While COVID-19 limitations in accessing treatment has been evident at times, Mercy Health maintains a 75 per cent return-to-work rate across all WorkSafe measures (16, 26, 52 and 104 week), supporting the processes and practises that have been in place since 2018.

Mercy Health's Safety Management System targets key metrics to ensure that incidents are reviewed and appropriate risk control measures are in place, workplace inspections are conducted and emergency systems such as fire response are tested.

Mercy Health's Staff Safety Plan 2019–22 is embedded across the organisation and ensures that staff safety and wellbeing is prioritised by providing staff with access to appropriate support and information, as well as raising awareness of the importance of mental and physical health. The activities of the plan have also focussed on improving the work environment and work practices.

Occupational Violence and Aggression management has focussed on the delivery of training. The training addresses prevention but also includes responding to and managing an incident, incident review and debriefing. A revised approach has also been embedded to manage Code Grey events.

Occupational Violence

Occupational violence statistics	2021-22
Workcover accepted claims with an occupational violence cause per 100 FTE	0.08
Number of accepted Workcover claims with lost time injury with an occupational violence cause per 1,000,000 hours worked	0.39
Number of occupational violence incidents reported	650
Number of occupational violence incidents reported per 100 FTE	25.27
Percentage of occupational violence incidents resulting in a staff injury, illness or condition	3.23%

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 ratings must be included. Code Grey reporting is not included, however, if an incident 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 2021-22.

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.

Consultancies

Details of consultancies (under \$10,000)

In 2021-22, there was 1 consultancy where the total fees payable to the consultants were less than \$10,000. The total expenditure incurred during 2021-22 in relation to these consultancies is \$6,916 (excl. GST).

Details of consultancies (valued at \$10,000 or greater)

In 2021-22, there were 4 consultancies where the total fees payable to the consultants were \$10,000 or greater. The total expenditure incurred during 2021-22 in relation to these consultancies is \$220,834 (excl. GST).

Consultancies over \$10,000

Consultant	Brief summary of project involved	Total approved project fee (excluding GST)	Expenditure 2021-22 (excluding GST)	Future expenditure committed (excluding GST)
BM Digital Health	EMT Business Case Refresh	\$96,795	\$96,795	\$0
AECOM Australia	HVAC Pandemic Upgrades	\$63,750	\$63,750	\$0
Pinnacle Group Australia	ED Mode of Care	\$32,269	\$32,269	\$0
Deloitte	Phase 1 Environmental Services Group Current State Analysis Review	\$28,020	\$28,020	\$0
Pinnacle Group Australia	HITH Expansion	\$6,916	\$6,916	\$0

Information and Communication Technology (ICT) expenditure

The total ICT expenditure incurred during 2021-22 is \$12,291,971 (excluding GST) with the details shown below.

Business as usual (BAU) ICT expenditure	Non-Business as usual (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)
\$11.424m	\$0.868m	\$0m	\$0.868m

REPORTING PROCEDURES

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 2022, MHVL received 783 applications; of which 783 were made by members of the public and none were made by a Member of Parliament.

Of the requests received by MHVL:

- access was granted in full for 586 requests
- access was granted in part for 58 requests
- one was denied access
- 16 applications were withdrawn
- none were not proceeded with
- 11 were not processed
- 64 had no documents
- 47 had not yet been finalised at 30 June 2022.

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 (\$30.10 at 30 June 2022). The fee may be waived in certain circumstances.

Freedom of Information fact sheets and an access request form are available on the 'Access to 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 (MHVL) 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 MHVL comply with current requirements of the Building Code of Australia and other applicable Australian standards, statutory authorities or codes of practice.

Public Interest Disclosures Act 2012

Mercy Hospitals Victoria Ltd (MHVL) is committed to the aims and objectives of the *Public Interest Disclosures Act 2012* (Vic).

MHVL does not tolerate detrimental action being taken against any person in relation to the making of a public interest disclosure or any other 'whistleblower' disclosure protected by law.

MHVL has developed procedures for the protection of persons from detrimental action being taken against

them by MHVL's officers and employees. These procedures include information about the welfare support MHVL will provide to a person who makes a disclosure.

The procedures are readily available to MHVL's officers and employees through Mercy Health's intranet. The procedure accessible to members of the public is available at <https://www.mercyhealth.com.au/legal-policy-information/whistleblowers/>. The Mercy Health website search function also points to the relevant procedure through the search terms of 'whistleblower', 'protected disclosure' and 'public interest disclosure'.

Carers Recognition Act 2012

Mercy Hospitals Victoria Ltd (MHVL) recognises, promotes and values the role of carers. MHVL 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
 - employed Mental Health Carer Consultant and Carer Peer Workers
 - weekly Mental Health Carer Support sessions
 - promotion of the Charter of Healthcare Rights.
- Ensuring that our staff have an awareness and understanding of the care relationship principles set out in the Act. For example:
 - induction and training programs offered by the organisation include discussion of the Act and the statement of principles therein
 - person-centred care initiatives such as Shared Decision Making include engagement with carers in documentation and training
 - REACH escalation program is in place to support carers to address care issues
 - mental health staff training includes carer participation training.
- Consideration of the carer relationships' principles set out in the Act when setting policies and providing services. For example:
 - availability of flexible working arrangements (as 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

- developing a satisfaction survey for distribution at assessment and review meetings between workers, carers and those receiving care
- the Carers Recognition Act 2012 is referenced in documents such as the Working with Families/ Carers in Mental Health Procedure.

Environmental performance

Mercy Health's *Caring for People and Planet* strategy 2020–25 is our organisation's best effort to address climate change and the associated global justice and sustainability challenges. The strategy summarises why and how Mercy Health, as a Catholic provider, must act, and how we can provide the best possible care, improve outcomes, and protect the world's limited resources now and in future years. The *Caring for People and Planet* strategy is focussed on three action areas: sustainable models of care; climate change; and ethical and social responsibility.

In 2021-22, we have developed and commenced implementation of our first *Caring for People and Planet* (CPP) Action Plan. A materiality assessment was conducted to ascertain focus projects. Initial activities related to the CPP Action Plan have focussed on activities related to climate change, including waste, energy, building design, sustainable and ethical purchasing, carbon literacy and numeracy, and systems for climate resilience. Within Health Services, a Sustainability Committee has been established to progress this work and foundational capacity building.

We have continued quantification of the full impact of our organisation's carbon footprint across Scope 1, 2 and 3 (including our supply chain). The Mercy Health Environmental Data Management System (EDMS) data set has been used to support this data analysis. This carbon accounting work will establish a robust baseline for historical emissions to serve as a reference point, and to permit tracking of progress to reduce our organisation's carbon footprint over time. Mercy Health as an organisation reports our emissions under NGER reporting requirements. Once we have established our full emission baseline, Mercy Health's pathway to achieve our Net Zero ambition will become clearer.

Greenhouse gas emissions

Total greenhouse gas emissions (tonnes CO ₂ e)	2021-22	2020-21	2019-20	2018-19
Scope 1	3,897	5,659	5,159	4,945
Scope 2	20,051	21,143	22,287	21,554
Total	23,948	26,803	27,446	26,500

Normalised greenhouse gas emissions	2021-22	2020-21	2019-20	2018-19
Emissions per unit of floor space (kgCO ₂ e/m ²)	456.68	511.11	523.39	505.33
Emissions per unit of Separations (kgCO ₂ e/Separations)	400.85	438.92	445.68	434.81
Emissions per unit of bed-day (LOS+Aged Care OBD) (kgCO ₂ e/OBD)	138.04	146.11	146.95	142.70

Stationary energy

Total stationary energy purchased by energy type (GJ)	2021-22	2020-21	2019-20	2018-19
Electricity	79,323	77,670	78,661	72,519
Natural Gas	75,625	69,737	78,999	86,526
Total	15,4948	147,862	157,700	159,187

Normalised stationary energy consumption	2021-22	2020-21	2019-20	2018-19
Energy per unit of floor space (GJ/m ²)	2.95	2.82	3.01	3.04
Energy per unit of Separations (GJ/Separations)	2.59	2.42	2.56	2.61
Energy per unit of bed day (LOS+Aged Care OBD) (GJ/OBD)	0.89	0.81	0.84	0.86

Water

Total water consumption by type (kL)	2021-22	2020-21	2019-20	2018-19
Class A Recycled Water	N/A	N/A	N/A	N/A
Potable Water	67,377	78,228	76,763	80,887
Reclaimed Water	N/A	N/A	N/A	N/A
Total	67,377	78,228	76,763	80,887

Normalised water consumption (Potable + Class A)	2021-22	2020-21	2019-20	2018-19
Water per unit of floor space (kL/m ²)	1.28	1.49	1.46	1.54
Water per unit of Separations (kL/Separations)	1.13	1.28	1.25	1.33
Water per unit of bed day (LOS+Aged Care OBD) (kL/OBD)	0.39	0.43	0.41	0.44

Waste and recycling

Waste	2021-22	2020-21	2019-20	2018-19
Total waste generated (kg clinical waste+kg general waste+kg recycling waste)	289,979	296,608	300,781	325,635
Total waste to landfill generated (kg clinical waste+kg general waste)	246,390	254,399	252,345	324,572
Total waste to landfill per patient treated ((kg clinical waste+kg general waste)/PPT)	0.82	0.82	0.81	1.05
Recycling rate % (kg recycling / (kg general waste+kg recycling))	18.67	17.14	18.51	0.53

Note: Historical environmental reporting data is subject to change as reporting processes improve and reporting scope expands.

Additional information available on request

In compliance with the requirements of FRD 22 Standard Disclosures in the Report of Operations, details in respect of the items listed below have been retained by Mercy Hospitals Victoria Ltd (MHVL) 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 MHVL about the activities of MHVL and how these can be obtained;
- (d) details of changes in prices, fees, charges, rates and levies charged by MHVL;
- (e) details of any major external reviews carried out on MHVL;
- (f) details of major research and development activities undertaken by MHVL;
- (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 MHVL to develop community awareness of MHVL 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 MHVL and details of time lost through industrial accidents and disputes;
- (k) a list of major committees sponsored by MHVL, 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.

Gender Equality Act 2020

While Mercy Health is not considered a defined entity for the purposes of the Act, Mercy Health has a longstanding commitment to gender equality and has voluntarily participated and been recognised as an Employer of Choice by the Workplace Gender Equality Agency (WGEA) (or its equivalent) since 2008.

In 2022, Mercy Health is one of just four recipients in the Health and Social Assistance industry to receive the citation across Australia and looks forward to maintaining the citation in the years to come.

Mercy Health has a three-year Gender Equality Plan, based on the criteria set by WGEA, which sets annual targets aimed at addressing issues of equality.

Since 2021, Mercy Health has increased parental leave provisions regarding non-primary carers leave

from two to three weeks, as well as removed any eligibility timeframes for both paid and unpaid parental leave. Over this time, the proportion of women in management roles has also increased.

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 Victorian Department of Health circular on car parking fees and details of car parking fees and concession benefits can be viewed at mercyhealth.com.au

ATTESTATIONS

Data integrity

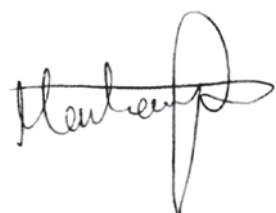
I, Matthew Posar, certify that Mercy Hospitals Victoria Ltd has put in place appropriate internal controls and processes to ensure that reported data accurately reflects actual performance. Mercy Hospitals Victoria Ltd has critically reviewed these controls and processes during the year.

Conflict of interest

I, Matthew Posar, 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 board meeting.

Integrity, fraud and corruption

I, Matthew Posar, 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.



Mr Matthew Posar
Interim Group Chief Executive Officer
15 August 2022

DISCLOSURE INDEX

The annual report of Mercy Hospitals Victoria Ltd is prepared in accordance with all relevant Victorian legislation. This index has been prepared to facilitate identification of the Department's compliance with statutory disclosure requirements.

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Other relevant reporting directives		
SD 5.2.3	Declaration in report of operations	2

YEAR IN REVIEW

Responding to COVID-19

The ongoing challenges of managing infections and new variants of COVID-19 in Victoria during 2021-22 continued to place pressure on our health services. Our service responded to an unprecedented system-wide Code Brown while maintaining a high level of clinical care. We reconfigured our clinical areas, redeployed staff, suspended meetings and redesigned the way care was provided to minimise the risk to our staff and our patients and maximise the care provided.

The fit-testing program continued for N95 masks with 90 per cent of staff currently fit-tested. We have supported COVID-19 vaccination, with Werribee Mercy Hospital operating as a vaccination hub for staff and the public for periods throughout the year.

Health Services Accreditation

The MHVL team participated in the National Safety and Quality Health Service Standards Accreditation during COVID-19 lockdown in Melbourne in August 2021. Undertaking national accreditation is challenging under normal circumstances, yet our staff participated while also managing COVID-19 restrictions, lockdown and significant staff furloughs due to potential COVID-19 exposure. Staff demonstrated a high degree of flexibility and adaptability with plans needing to be changed at short-notice. The team conducted virtual tours with the surveyors who were unable to attend on site and responded to numerous requests for information. The service achieved full accreditation status with nil 'Not Mets' or recommendations for both national accreditation and Mercy Health O'Connell Family Centre accreditation. Both groups of surveyors expressed high praise for the safe, high-quality care provided at our services and highlighted the evident commitment to care and patient wellbeing. The team undertook this work in very difficult circumstances and we are proud of the outcome and the high level of care staff provide every day.

Innovate Reconciliation Action Plan Launch

In August 2021, we launched the Reconciliation Action Plan (RAP): Innovate 2021-23 at a virtual event. During the launch, Auntie Di Kerr welcomed us to country and we heard from Yorta Yorta and Gunnai artist Dixon Patten; whose own story is entwined with Mercy Health and whose original artwork is featured in the RAP. Our second RAP builds on the work done in our Reflect RAP (2017-18), which set out to align our reconciliation actions with the mission and strategic objectives of our health services.

In this next stage, we want to deepen our understanding of the historical injustices and practices, and challenge our organisation to form a stronger moral and ethical connection with the actions that are required to achieve change. The launch was an inspiring event, which provided a snapshot of the work ahead in deepening our understanding of historical injustices and practices, and challenged our organisation to form a stronger moral and ethical connection with the actions that are required to achieve change.



Celebrating Werribee Mercy Hospital

In August 2021, Mercy Health celebrated 30 years since the turning of the first sod for Werribee Mercy Hospital (WMH) by Joan Kirner, then Premier of Victoria. It was a visionary day for everyone at Mercy Health, for Melbourne's west and for the local community, which had campaigned hard for the construction of a general public hospital in the emerging Wyndham region. We officially opened the hospital on 20 February 1994 and over the years the hospital has expanded.

WMH now has a growing paediatric service, our maternity service supports families in the west with more than 300 babies born each month and the Emergency Department treats more than 50,000 patients each year. We also provide adult mental health services across the south-west Melbourne metropolitan region. This year WMH received a new 24-bed Short Stay Unit and was successful in securing funding for the expansion of the Emergency Department.

Mercy Health will continue to advocate for a significant redevelopment of WMH to ensure it meets the needs of the fast-growing community and a business case has been developed for the redevelopment.



Mercy Health celebrated 30 years since the turning of the first sod for Werribee Mercy Hospital (WMH) by Joan Kirner, then Premier of Victoria



State Government MPs Sheena Watt (left) and Lily D'Ambrosio unveiled signage at Anchorage Drive, South Morang, for the new Early Parenting Centre in Whittlesea

Early Parenting Centre Whittlesea

Mercy Health moved a significant step closer to supporting young and vulnerable families in Melbourne's northern suburbs with the State Government's identification of land for building an Early Parenting Centre in the City of Whittlesea. Minister for Health Martin Foley, Minister for Energy Lily D'Ambrosio and MP Sheena Watt unveiled signage at Anchorage Drive, South Morang, in December 2021, with building planned to commence in 2022. With 10 residential units and four day-stay units, the centre will provide day-stay programs and longer residential-stay programs to improve the health, wellbeing and developmental outcomes for children aged four years old.

The City of Whittlesea has one of the highest representations of Aboriginal and Torres Strait Islanders' mothers and children, so one of the specific goals Mercy Health has set in the design of this centre is to make sure it is accessible and culturally safe for those families.

Mercy Perinatal

Mercy Perinatal has continued to attract national and international acclaim for its work and commitment to bringing mothers and babies safely home. Recognised as a centre for excellence in perinatal care, research and teaching, Mercy Perinatal brings together clinicians, academics and researchers who strive to improve outcomes for women and their babies. The team, with support from the University of Melbourne, has discovered that a diabetes drug, Metformin, may be a treatment for preeclampsia. The prestigious British Medical Journal published the groundbreaking results of a decade of research in laboratories at MHW and Tygerberg Hospital in Cape Town, South Africa. “No drug has been discovered that slows the disease from progressing to cause life-threatening injuries to the major organs of a mother — that is, until now,” says Professor Stephen Tong, Co-director Mercy Perinatal. The leading researcher for the trial of Metformin is Cape Town-based Associate Professor Cathy Cluver, who undertook a fellowship with the Mercy Perinatal team.

Multicultural Awards for Excellence

In December 2021, Mercy Health joined organisations around the world in marking International Human Rights Day with a particular focus on *Equality: Reducing inequalities, advancing human rights*. Mercy Health believes in the dignity and equal rights of every person, regardless of the language they speak, cultural background, age, gender, faith or ability.

Mercy Health provides more than 16,000 interpreting services a year through our Multicultural Services team and we provide culturally responsive services to support people from migrant and refugee backgrounds.

We are very proud of our Multicultural Services Manager Natalija Nesvadba, who received the Refugee Advocacy Award as part of the Victorian Multicultural Awards for Excellence.

Rotary National Australia Day — Community Heroes Award

Congratulations to WMH Emergency Department Associate Nurse Unit Manager Paula Guerin, Mercy Health Supply Chain Manager Panga Manoharan and former Mercy Health Infectious Diseases Physician Dr David Turner for receiving a Rotary National Australia Day — Community Heroes Award 2022 for their service to our community. The three recipients graciously accepted their awards but agreed that every one of their incredible colleagues was equally worthy of the special accolade.



(L-R) Multicultural Services Manager Natalija Nesvadba, receiving the Refugee Advocacy Award as part of the Victorian Multicultural Awards for Excellence, with the Hon. Ros Spence Minister for Multicultural Affairs and the Governor of Victoria Linda Dessau AC



Mercy Health

Care first



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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.