

For tomorrow, today.

# Annual Report

It all begins with =

OUR MISSION &



OUR VALUES

- > Hospitality
- > Compassion
- > Respect
- > Justice
- > Excellence

results in

PEOPLE who



CARE



about your HEALTH & will give you

2016-17

Support with our

KNOWLEDGE



Expertise

We are

FORWARD THINKERS

Analytics



robotics

our plan for the

FUTURE

Today

RESEARCH LEADS TO



Change

growth

TRANSFORMATION

Inspiration

which leads to




we invest in

Technology



SURGERY



# FOR TOMORROW, TODAY.



ST JOHN OF GOD Health Care



ESTABLISHED IN **1895**  
IN WESTERN AUSTRALIA  
BY THE SISTERS OF  
ST JOHN OF GOD



EMPLOYED  
**13,315**  
CAREGIVERS



AUSTRALIA'S **LARGEST**  
CATHOLIC NOT-FOR-PROFIT  
PRIVATE HOSPITAL GROUP



**TREATED 352,981**  
OVERNIGHT AND SAME DAY  
PATIENTS, AND **DELIVERED**  
**12,585** BABIES



REVENUE OF  
MORE THAN  
**\$1.6 BILLION**

Cover Photo:  
Inaugural Chief Medical Information  
Officer, Alexius Julian.



COMMITTED **\$66 MILLION**, INCLUDING PARTNERSHIP FUNDING, TO SOCIAL JUSTICE INITIATIVES REACHING OUT TO PEOPLE EXPERIENCING DISADVANTAGE



HOME NURSING SERVICES IN VICTORIA AND WESTERN AUSTRALIA DELIVERED **113,000 EPISODES OF CARE**



**23 FACILITIES** COMPRISING **3,208 BEDS** LOCATED IN WESTERN AUSTRALIA, VICTORIA, NEW SOUTH WALES AND NEW ZEALAND

**3rd**

AUSTRALIA'S **THIRD LARGEST** PRIVATE HOSPITAL OPERATOR



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# OVERVIEW

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# FOREWORD

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In April 2017, Pope Francis gave an address to a group gathered in Vancouver for a TED conference on the theme ‘The Future You’, from his home in the Vatican City.

Speaking as part of a session that focused on *Health, Life and Love*, he contemplated what the future might look like for humanity.

He reminded us that “the future is made of ‘yous’, it is made of encounters, because life flows through our relations with others”.

This view of the future is what inspires us at St John of God Health Care. It has long been our view that in healthcare, every encounter matters.

This is important because healthcare is becoming increasingly complex and the rate of change is rapid.

Breakthroughs in science and technology, and the ability to analyse vast tracts of data in epidemiological studies, mean healthcare providers can alleviate suffering and provide healing in ways previously not possible.

Technology enables us to do things that were once unthinkable – provide a diagnosis via telemedicine to someone hundreds of miles away from their caregiver; undertake precision surgery; use artificial intelligence to assist in diagnosis or simply be more efficient in information-sharing, record-keeping and patient or doctor communication.

These advancements are exciting and for many people they provide hope where once there was none.

They provide us with challenges and opportunities as a healthcare provider. The increasing complexity in delivering high quality care means that we have to be at the leading edge of technology. We need to be transformational and innovative in how we use our resources so that we can invest in the future and play a leading role in the research and development that is necessary for a top quality provider in today’s Australia.

This is why the theme of this year’s Annual Report is *For tomorrow, today*.

It provides an update on what was achieved in the 2017 financial year, but reflects a forward looking focus and a recognition that the future depends on what we do now.

As a Catholic provider, our focus is people-centred and our goal is to use technology and innovation to help us continue our work of compassionate care. As we contemplate the future, we can see it providing greater opportunities for us to help support the needs of those seeking our care and support.

As Pope Francis said while speaking to his audience in Vancouver:

*“the future does have a name and its name is Hope.”*



A handwritten signature in black ink, appearing to read 'E. Skira'.

**Eva Skira**  
Chairman of Trustees

Patients and their loved ones can expect the highest quality of care, compassion and respect from our caregiver team.



# HIGHLIGHTS



## **HOSPITAL SERVICES**

The full year impact of our St John of God Midland Public and Private Hospitals and our Hawkesbury District Health Service contract led to an 8.7% growth in total patient separations. Overnight separations were up 9.1%, due to public overnight separations growing 85%.

Saw a 40.1% increase on number of people attending one of our five emergency departments from 2015-16.

Grew day patient procedure by 7.4%. Had a 3.9% growth in obstetric deliveries and we delivered more than 12,500 babies in 2016-17.

## **COMMUNITY SERVICES**

Undertook 27% more counselling services (up to 32,931) and had a 27.7% increase in client numbers (up to 4,831).

Accommodated 77,634 bed nights in supported accommodation for people with intellectual disability, homeless youth and chronic mental illness (p44).

## **PATHOLOGY**

Successfully completed the sale of our pathology division to Australian Clinical Labs and acquired a minority shareholding in Australian Clinical Labs, which has a long term contract to provide high quality pathology services to St John of God Health Care hospitals.

## **HOME NURSING**

Undertook 113,000 episodes of care; upgraded mobile phones with tablet devices to allow for clearer visualisation of patient information and treatment orders, which will greatly assist in our goal of a total Electronic Medical Record (EMR) in the future.

## **TRAINING AND EDUCATION**

Partnered with 26 universities and 32 Registered Training Organisations to provide undergraduate clinical placement opportunities for nursing, medical and allied health students from all over Australia (p62-63).

## **NURSING AND MIDWIFERY EDUCATION**

Received over 4,000 registrations for interest in our Pathways to Practice graduate nursing program in Western Australia and recruited 29 graduate nurses who will have the opportunity to rotate to different divisions and across specialities (p63).

## **MEDICAL EDUCATION**

Continued to support the Specialist Training Program initiative introduced by the Federal Government by providing clinical supervision and education throughout a range of specialities (p62).

## **MISSION**

Commenced implementation of Mission Management Model Review (p66).

## **FORMATION**

About 540 senior leaders and managers participated in formal formation programs including a reviewed Mission Mentoring program and the pilot of a new Developing a Culture of Ethical Practice program.

About 3,500 frontline caregivers participated in formation programs, with many undertaking the Many Faces, One Story series (p68).

## **INFORMATION SERVICES**

Reviewed our Information Services function which led to the creation of a new leadership role, a Group Director of Information Services, who will oversee the development of a new operation model for information technology that transforms and meets our strategic business needs and priorities (p34-35).

## **RESEARCH**

Increased our research activity with 172 research studies approved, more than double the number approved in 2014, thereby achieving a key organisational goal (p56).

## **FINANCIAL PERFORMANCE**

Achieved revenue of more than \$1.6 billion in 2016-17, a healthy increase of 7.3% on 2015-16 (p21-22).

## **REDEVELOPMENTS**

Completed a \$41 million redevelopment at St John of God Bendigo Hospital and a \$21 million upgrade and expansion of cardiac services at St John of God Geelong Hospital.

Progressed construction of \$120 million greenfield development for a new St John of God Berwick Hospital, jointly owned with Generation Healthcare REIT. Scheduled for completion in late 2017 (p32-33).

## **WORKFORCE**

Following a number of comprehensive reviews, announced internal restructures that will help St John of God Health Care better meet community need in a rapidly digitalising environment.

Total number of caregivers as at June 30, 2017 across the group was 13,315. The sale of St John of God Pathology involved the transfer of 1,157 caregivers to Australian Clinical Labs in November 2016. In May 111 staff were welcomed to St John of God Accord from Marillac Limited, acquired from the Daughters of Charity (p68).

## **OCCUPATIONAL HEALTH, SAFETY AND WELLNESS**

Introduced 'insights reporting' to better understand causal factors around incidents. Insights reporting will be further enhanced by information captured in a new incident management system, Riskman, to be implemented in 2018.

Saw a significant decrease in time lost due to injury, with a 37% decrease in time away from work, attributed to proactive early intervention and a stay at work focus (p71).

## **GOVERNANCE AND STEWARDSHIP**

Made significant progress on Procedural Areas Transformation Project, focusing on creating holistic value, managed by the Transformation Support Team (p34, 40).

Implemented Group Property Management strategy.

## **PATIENT SAFETY**

Established the patient safety strategy focusing on five key clinical priority areas – obstetrics and midwifery, mental health and surgical safety systems.

Established organisation-wide obstetrics and midwifery committee and mental health community of practice.

Completed the rollout of remote foetal heart monitoring across the organisation (p50).

## **ACCREDITATION**

During 2016-2017, seven of divisions underwent organisation-wide accreditation to National Safety and Quality Health Service (NSQHS) Standards (Standards 1-10) - St John of God Bendigo, Berwick, Bunbury, Geraldton, Mt Lawley, Midland and Subiaco Hospitals.

In addition, Midland Public Hospital was accredited against Mental Health Standards, and Health Choices achieved full accreditation to Australian Council on Healthcare Standards EQUiP6.

Many of our divisions achieving multiple "met with merit" criteria. St John of God Subiaco Hospital achieved 27 such criteria (p48).

## **SOCIAL JUSTICE AND ADVOCACY**

Launched new Innovate Reconciliation Action Plan that will increase our capacity to be an employer of choice for Aboriginal and Torres Strait Islander people and focus our contribution to the health, culture and service provision for Aboriginal and Torres Strait Islander communities.

The Disability Access and Inclusion Plan (DAIP) now 80% complete. Job interviews for 149 applicants registered with a disability employment service resulted in employment for 12 caregivers with a known disability (p78).

## **HERITAGE**

A new electronic database for the St John of God Health Care Heritage Collection piloted at Mt Lawley and Bendigo Hospitals. The Sisters of St John of God divested a substantial collection of health-related items to John of God Health Care (p82).

## **ARTS AND HEALTH**

A national partnership with Musica Viva led to a significant increase in music therapy in our hospitals and research into its impact and effectiveness, the results of which were presented at three international conferences (p82).

## **AWARDS**

St John of God Health Care Group Manager Pastoral Services, Eleanor Roderick awarded Catholic Health Australia's Excellence in Pastoral Care Award for 2016; Hawkesbury District Health Service's Counselling team awarded Mental Health Commission of New South Wales' 2016 Mental Health Matters Award for their project, Filling the Hawkesbury Gap; St John of God Richmond Hospital Professor of Psychiatry in perinatal mental health, Professor Bryanne Barnett was awarded with the prestigious 2016 RANZCP College Citation for her work in perinatal psychiatry; St John of God Subiaco Hospital Director Clinical Trials, Professor Steve Webb was awarded the Chancellor's Award from The University of Western Australia for his sustained and outstanding contribution in the field of research (p54-55).

# OUR STRATEGIC PRIORITIES 2015-2019

Our Strategic Priorities 2015–2019 builds on and amplifies the strategies and expectations outlined by the Trustees in *Our Vision 2015–2019* and assist us to achieve the outcomes identified.



**1. TO BE A RECOGNISED LEADER IN THE AUSTRALIAN HEALTH SECTOR FOR THE PROVISION OF HIGH QUALITY HEALTHCARE**



**2. TO SIGNIFICANTLY INCREASE OUR INVESTMENT IN INFORMATION, ANALYTICS AND TECHNOLOGY**



**3. INCREASED AGILITY IN RESPONDING TO CHANGES IN OUR ENVIRONMENT AND IN IMPLEMENTING OUR PLANS**



**4. DEEPER PARTNERING WITH KEY STAKEHOLDERS**



**5. CAPITAL OPTIMISATION**



All caregivers are key  
to the success of St John  
of God Health Care's  
strategic priorities.

# OUR ORGANISATION

St John of God Health Care is a ministry of the Catholic Church.

As a leading provider of high quality healthcare services that include hospitals, home nursing, disability and outreach services throughout Australia, New Zealand and the wider Asia-Pacific region, we strive to serve the common good and provide holistic, ethical care and support for the individual.

As a not-for-profit group, we return all surpluses to the communities we serve by updating and expanding our facilities and technology, developing new services, investing in people and providing social outreach services to people experiencing disadvantage.

Inspired by the religious women and men who founded our organisation, our services reflect a generosity of spirit that calls us to enthusiastically go beyond what might be expected. We stand in solidarity with people in their joy and suffering to deliver our services with a human touch.



## VISION, MISSION AND VALUES

### Vision

Our Vision for St John of God Health Care is that we live and proclaim the healing touch of God's love. We invite people to discover the richness and fullness of their lives, give them a reason to hope, and a greater sense of their own dignity.

### Mission

Our Mission is to continue the healing mission of Jesus Christ through the provision of services that promote life to the full by enhancing the physical, emotional, intellectual, social and spiritual dimensions of being human.

### Values

Our Values that guide us are:

#### Hospitality

A welcoming openness to all; to the familiar and the mystery of self, people, ideas, experiences, nature and to God.

#### Compassion

Feeling with others in their discomfort or suffering, striving to understand the other's experience with a willingness to reach out in solidarity.

#### Respect

The attitude which treasures the unique dignity of every person, and recognises the sacredness of all creation.

#### Justice

A balanced and fair relationship with self, our neighbour, all of creation and with God.

#### Excellence

Giving the optimum standard of care and service within the scope of available resources.

Our culture is informed by Gospel values where the innate dignity of each person is valued and upheld.



St John of God Health Care hospitals provide a welcoming openness to all.

## SERVICE ETHOS

Service is central to how we bring the Mission to life at St John of God Health Care. Our development programs aim to support and develop our caregivers in providing distinctive service.

The key tenets of our Service Ethos are:

- › Our Mission inspires our service – we are continuing a great story of service entrusted to us by our founders.
- › Relationships are central – every encounter is an opportunity and can have far-reaching effects.
- › The way we work together as a community, in our own teams and with other teams, is integral in our effectiveness.
- › Governance and management of resources are key to our success.
- › Feedback and evaluation about how well we are doing is crucial.

## OUR SYMBOL

The pomegranate symbol represents our heritage – as the original symbol of the Sisters of St John of God – and our vision for the future. The cross is the symbol of Christianity, reminding us of Jesus' suffering and our call to follow in His footsteps. Our five Values are reflected in the five seeds of the pomegranate, which is open to allow the seeds to scatter, providing new life and symbolising the generosity of self-giving to people in need.



## FOUNDING STORY

Saint John of God devoted his life to alleviating human suffering, and comforted the afflicted, sick and dying. He was particularly passionate about combating the great injustices experienced by people disadvantaged through illness or destitution.

The Congregation of the Sisters of St John of God was founded in Wexford, Ireland, in 1871. Word of their skill in healthcare spread rapidly and in 1895 eight Sisters were asked by Perth's Bishop, Matthew Gibney, to travel to the Western Australian goldfields to care for the typhoid stricken. The Sisters went on to establish hospitals, pathology and social outreach services.

The Brothers of St John of God, or the Hospitaller Order of St John of God, came to Australia from Ireland in 1947 to care for people experiencing disadvantage. They began ministries in New South Wales, Victoria and New Zealand, focusing initially on helping those with learning difficulties and intellectual disability, then on psychiatric care and child and family social services.

St John of God Health Care today reflects the wisdom and inspiration of those Sisters and Brothers, as well as the many others who have contributed to our organisation, including the Sisters of St Joseph of the Apparition, various Mercy congregations, the Missionary Sisters of the Sacred Heart, the Sisters of the Franciscan Missionaries of the Divine Motherhood, and the secular traditions of those parts of our ministry sourced outside the Catholic sector.

## STRUCTURE

St John of God Health Care is a wholly owned and controlled entity of St John of God Australia Ltd, a civil and canon law entity established in 2004 to sponsor the ministry previously sponsored by the Sisters of St John of God. The Sisters are members of St John of God Australia Ltd together with the majority of the dioceses in which we operate, as well as the Hospitaller Order of St John of God. This collaboration ensures a structure of sound and continuing governance and stewardship.

The non-executive Trustees of St John of God Health Care appoint members of the Board. The Board provides direction and guidance to the Group Chief Executive Officer and through him the Group Management Committee, which oversees performance in our five key result areas.

## KEY RESULT AREAS

Our key result areas inform our annual Group Business Plan. Further detail on these result areas and our progress against our 2016-17 Group Business Plan can be found in our strategic update (p26-30) and throughout the Annual Report.

# CHAIRMAN'S REPORT

In 2016-17, St John of God Health Care continued to invest in expanding our services and facilities for the benefit of the communities we serve. As expected and foreshadowed in last year's report, this was against a challenging financial backdrop.

An election and change of government in Western Australia, slower growth rates within the healthcare industry, increasing competition, and reduced price increases from health funds made 2016-17 a challenging year. While revenue growth was strong this was mostly in our low margin public hospitals, and we achieved lower than budgeted earnings at year-end.

Our response to this challenging outlook is to ensure disciplined cost management while continuing to invest prudently in services, technology and facilities that will allow us to deliver the high quality care expected of us.

## CAPITAL DEVELOPMENTS

St John of God Health Care has an ongoing growth strategy based on responding to community need and continually invests in the upgrade and redevelopment of our facilities in the regions we serve.

In 2016-17, the Board was delighted with the progress of the group's capital projects. These included the completion of a \$41 million redevelopment at our Bendigo Hospital, a \$21 million redevelopment at our Geelong hospital that will provide enhanced intensive care and cardiac services, an upgrade of facilities at our

Mt Lawley hospital, and the completion of ward refurbishment at St John of God Murdoch hospital.

We are particularly pleased that the 190 bed greenfield development at the new St John of God Berwick Hospital in partnership with Generation Healthcare REIT is progressing on time and to budget. This facility, which is co-located with Casey Hospital, will bring significant additional services to the rapidly growing corridor of southeast Melbourne and will open in January 2018.

Acting CEO Marillac, Silvana Gugliandolo with client Sophia Glibatsas on the day the service transferred to St John of God Health Care.



## **PUBLIC HEALTH**

St John of God Health Care has two Public Private Partnerships with government, St John of God Midland Public Hospital (WA) and the other at Hawkesbury District Health Service (NSW). While St John of God Health Care has a long history of partnering with state and federal governments to provide health and disability services, 2016-17 was our first full year of operation for these two significant hospital contracts.

## **COMMUNITY SERVICES**

A review of our social outreach program governance framework was completed in the first half of 2016-17 and led to the establishment of a directorate of Community Services bringing together St John of God Health Care's disability and Social Outreach services, and reporting directly to the Group CEO.

The report also recommended changes to our social outreach model that will result in greater transparency and reporting, improved management and governance of social outreach with centralised oversight, and better funding allocation and budgeting processes in line with strategy.

The Board is also pleased to see the expansion of activity in the disability sector with the transfer of Marillac Services from the Daughters of Charity to St John of God Health Care in May.

We are committed to continuing this ministry and expanding it into the future. St John of God Health Care is now one of the largest disability service providers in Victoria, and has the scale, capability and financial strength to operate successfully under the National Disability Insurance Scheme through the provision of high quality, individualised support to our clients.

## **SOCIAL JUSTICE**

Our current Disability Access and Inclusion Plan (DAIP) is 80% completed, with the Disability Reference Group working on the next phase of the plan. Greater integration of people with a disability into our workforce continues to be a priority at St John of God Health Care and we made good progress in 2016-17.

In August 2016, we entered into a three-year partnership with Reconciliation WA, with a view to them supporting our WA divisions to achieve the required outcomes of our Reconciliation Action Plan.

We followed this in June 2017 with the launch of a new three-year Innovate Reconciliation Plan, which supports the creation of a culturally sensitive and supportive model of employment for Aboriginal and Torres Strait Islander people. This plan will increase divisional capacity over time to become an employer of choice for Aboriginal and Torres Strait Islander people and contribute to greater engagement with the Aboriginal and Torres Strait Islander communities in health, culture and service provision.

## **CHANGES TO BOARD**

During the year we were delighted to welcome back Jack de Groot to the St John of God Health Care Board. Jack has outstanding experience in Catholic leadership and governance across a range of sectors.

## **YEAR AHEAD**

As befits an organisation with more than 125 years of caring for the community, we have a long-term outlook and our focus is on the future and ensuring our ongoing sustainability while we respond to the immediate challenges of the changing external environment, and community demand.

Our goals for the year ahead include successful completion and opening of the new St John of God Berwick Hospital, overseeing the optimal operation of our public hospitals and ensuring that we continue to develop strong partnerships with all our stakeholders.

I would like to thank our Group CEO Dr Michael Stanford, my fellow Board members and all the caregivers, doctors, allied health professionals and volunteers for their dedication and hard work in continuing the Ministry of St John of God Health Care.



**Tony Howarth AO**  
Chairman

# GROUP CEO'S REPORT

2016-17 was a very significant year for us, it being the first full year of our Midland Public and Private Hospitals and the first full year of our responsibility for the Hawkesbury District Health Service. The addition of these two hospitals to the group in November has fundamentally changed us and we are delighted to have such close connectivity and accountability to local populations in these jurisdictions.

The advent of the two public hospitals, the sale of our pathology division, the acquisition of a disability service and various internal reviews led to some important structural changes to set us up in the optimal way for the next stage of our growth and development.

## **OPERATIONAL PERFORMANCE**

We treated 145,406 overnight and 207,575 day separations, up 9.1% and 8.4% respectively on the prior year. In part, this was due to 133,281 people (40.1% up on prior year) attending one or other of our five emergency departments (two public, three private). Emergency department activity is the main driver of public hospital separations.

Our Community Services undertook 27% more counselling services (up to 32,931) and had a 27.7% increase in client numbers (up to 4,831). It also accommodated 77,634 bed nights in our supported accommodation for people with intellectual disability, homeless youth and chronic mental illness.

## **FINANCIAL STEWARDSHIP**

As a result of the additional activity, our revenue rose a healthy 7.3% to \$1,687.1 million. Most of this revenue growth was in our low margin public hospitals however so that our earnings (EBITDA) margin dropped from 7.3% to 6.9%.

Despite our \$146.7 million capital investment, of which \$105.2 million pertained to facility redevelopments, careful management of cashflow enabled us to only increase debt by \$21.2 million to \$333.2 million. Our most significant capital redevelopments were at our St John of God Bendigo Hospital (\$41 million expansion and refurbishment), St John of God Geelong Hospital ICU/CCU (\$21 million) and the new greenfield 190 bed St John of God Berwick Hospital (to be completed in October 2017 and commissioned in January 2018).

## **PATIENT SAFETY AND QUALITY**

As part of our Strategic Priorities we aim to have zero preventable harm. Significant effort was applied to our major clinical risk areas of obstetrics and mental health with both areas performing well ahead of national benchmarks. Other areas of focus related to wrong site surgery avoidance

and pathology specimen transfer. Our patient safety efforts will be assisted by the implementation of the RiskMan incident system, due to be installed in the middle of 2017-2018.

## **OCCUPATIONAL HEALTH AND SAFETY**

Our continuing focus on OHS has seen improvement but we still have a long way to go to achieve our goal of zero preventable harm. Our Lost Time Injury Frequency Rate (LTIFR) of 9.34 was a 4.2% improvement on prior year.

## **MERGERS AND ACQUISITIONS**

In October 2016 we effected the sale of our Pathology division to Crescent Capital Partners in return for cash plus shares in Australian Clinical Laboratories (Clinical Labs), Australia's third largest pathology operator. I am delighted to represent St John of God Health Care on the Board of Clinical Labs and see firsthand the capability and focus of the Clinical Labs Board and management to making it a leading pathology business. Clinical Labs provides pathology services to St John of God Health Care under a long-term contract.

Primarily in response to the implementation of the National Disability Insurance Scheme (NDIS), the Daughters of Charity transferred their Marillac services in southern Melbourne to our St John of God Accord division. The transfer took place in May leading to St John of God Accord being the third largest disability services provider in Victoria.

## **INTERNAL RESTRUCTURING TO BEST SUPPORT STRATEGIES**

Following a comprehensive review of our Mission Management Model, we have implemented some important changes including a group approach to formation of caregivers and the appointment of Regional Directors of Mission Integration to best support our hospitals. We believe this clearly sets us up to be the benchmark in this area of work within the Australian church sector. We were delighted to recruit Marcelle Mogg to the Group Director Mission Integration role in November 2016.

Before embarking on our strategic objective of a group wide Clinical Information System (CIS) we contracted Accenture to help us develop an optimal Information Services operating model. This body of work will bear fruit following the appointment of Jenny Levy as our transformational Group Director Information Services. The ISOM has clarified the capabilities and resources needed to support our Strategic Priorities, including with regard to high quality care, analytics, agility, partnering and capital optimisation.

A review of our social outreach governance by Azure Consulting led to a new Group Management Committee role of Executive Director of Community Services with Kevin Taylor having responsibility for our St John of God Accord division (intellectual disability), Social Outreach division and oversight of our New Zealand division (St John of God Hauora Trust). We will continue to pursue significant

growth in each of these community services areas. In the case of Social Outreach these services would not otherwise be provided were it not for our financial support.

In WA we collapsed the two previous senior executive roles into a single Executive Director of WA Hospitals and I was pleased to appoint John Fogarty to the role in January 2017. This has already led to improved coordination and strategy development amongst our seven Western Australian hospitals.

## **INDUSTRY DYNAMICS**

No government or health fund has enough resources to fund all the health needs and wants of their citizens/members. This has resulted in us moving into a phase of lower price increases, requiring us to improve productivity and invest in relevant supportive technology.

The broader economic environment in Australia has led to a small decrease in the number of people with private health insurance and a marked slowing in the growth of chargeable patients across the sector.

The public sector has deliberately become a more significant competitor, further impacting patient numbers.

These industry changes are making us much more cautious about investments in bricks and mortar so we are coming to the end of our capital cycle.

## **THE YEAR AHEAD**

We will be focusing on completing our remaining Board approved capital projects, particularly our new St John of God Berwick Hospital.

To support our IS Operating Model implementation we are significantly increasing our investment in information and communications technology (ICT). We will develop a new digital strategy and go to the market for a CIS/Electronic Medical Record at the end of 2017-2018.

Further opportunities to grow our service range and capability in disability services will be grasped as the NDIS roll out gathers pace.

Financial stewardship will receive more internal focus due to the flatter market, greater competition and our need to significantly invest in ICT.

I thank my Group Management Committee and all the caregivers, doctors, allied health practitioners, volunteers, donors and consumer representatives who each year continue to devote themselves to the care and support of our patients and clients at St John of God Health Care. I also thank the Board and Trustees for their enthusiastic and capable support and oversight.



*Michael Stanford*

**Dr Michael Stanford**  
Group Chief Executive Officer

# STEWARDSHIP

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Hydrotherapy rehabilitation programs are overseen by experienced physiotherapists at St John of God Warrnambool Hospital's rehabilitation centre.

# FINANCE OVERVIEW

## Consolidated Statement of Comprehensive Income

FOR THE YEAR ENDED 30 JUNE 2017	2016-17 \$M	2015-16 \$M
<b>Revenue</b>		
Hospital income from ordinary activities	1,576.2	1,372.1
Pathology income from ordinary activities	37.9	132.9
Other income	73.0	67.2
<b>Total revenue for the period</b>	<b>1,687.1</b>	<b>1,572.2</b>
<b>Expenses</b>		
Employment costs	945.5	877.6
Medical consumables and supply expenses	397.4	372.9
Other expenses from ordinary activities	228.3	207.1
<b>Total expenses for the period</b>	<b>1,571.2</b>	<b>1,457.6</b>
<b>EBITDA</b>	<b>115.9</b>	<b>114.6</b>
Interest, depreciation and amortisation	82.0	77.1
<b>Net surplus for the period</b>	<b>33.9</b>	<b>37.5</b>

## Consolidated Statement of Financial Position

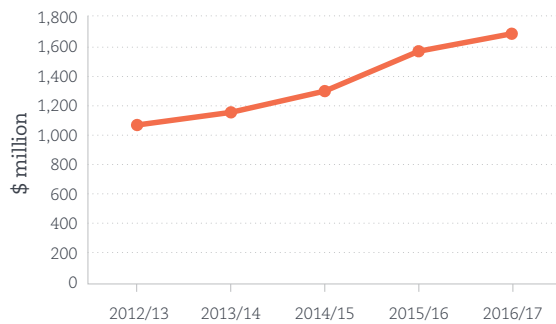
AS AT 30 JUNE 2017	2016-17 \$M	2015-16 \$M
<b>Current Assets</b>	<b>232.8</b>	<b>262.7</b>
<b>Non-Current Assets</b>		
Property, Plant & Equipment	1,076.6	1,000.4
Other	83.8	50.5
<b>Total Assets</b>	<b>1,393.2</b>	<b>1,313.5</b>
<b>Current Liabilities</b>	<b>308.6</b>	<b>289.2</b>
<b>Non-Current Liabilities</b>		
Borrowings	333.2	312.0
Other	41.0	42.3
<b>Total Liabilities</b>	<b>682.8</b>	<b>643.5</b>
<b>Net Assets</b>	<b>710.4</b>	<b>670.0</b>
<b>Equity</b>	<b>710.4</b>	<b>670.0</b>

## Consolidated Statement of Cash Flows

FOR THE YEAR ENDED 30 JUNE 2017	2016-17 \$M	2015-16 \$M
<b>Net Cash Inflows from Operating Activities</b>	<b>98.5</b>	<b>100.3</b>
<b>Net Cash Outflows from Investing Activities</b>	<b>(123.2)</b>	<b>(123.1)</b>
<b>Net Cash Flow / from Financing Activities</b>	<b>18.3</b>	<b>31.8</b>
<b>Net increase / (decrease) in Cash and Cash Equivalents</b>	<b>(6.4)</b>	<b>9.0</b>
Cash and Cash Equivalents at the beginning of the year	40.0	31.0
<b>Cash and Cash Equivalents at the end of the year</b>	<b>33.6</b>	<b>40.0</b>

# STEWARDSHIP

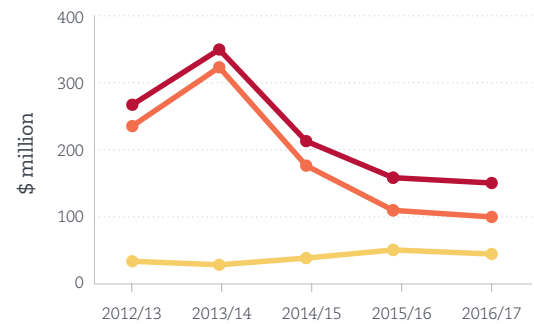
## Total Revenue



● Total Revenue (\$m)	1,070.1	1,156.7	1,301.8	1,572.2	1,687.1
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Our total revenue for the year rose by a healthy 7.3%, notwithstanding the sale of our pathology division to Crescent Capital Partners in October 2016. The rise in revenue in large part resulted from the full year impact of our St John of God Midland Public and Private Hospitals, opened in November 2015, and our Hawkesbury District Health Service contract, taken over in November 2015.

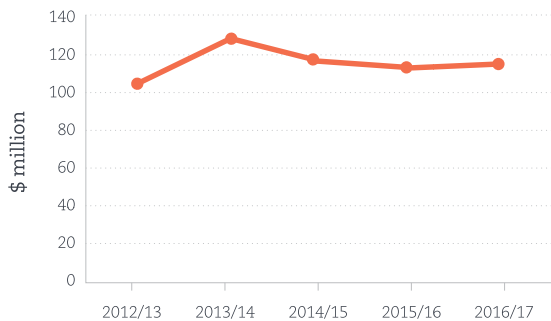
## Capital Expenditure



● Total Expenditure (\$m)	268.0	351.3	213.2	158.1	146.7
● Facility Development (\$m)	235.9	324.5	176.3	108.9	105.2
● Plant & Equipment (\$m)	32.1	26.8	36.9	49.2	41.5

Hospitals are capital intensive, through upgrades and expansions where demand warrants. Facility development expenditure this year was equivalent to last year as we move toward the end of the current capital expenditure cycle. Major capital development projects in Victoria were at St John of God Berwick Hospital (new 190-bed hospital), St John of God Geelong Hospital (new 20-bed ICU/CCU and refurbishment), St John of God Bendigo Hospital (additional 40 beds and refurbishment) and in WA were at St John of God Murdoch and Mt Lawley Hospitals (both refurbishments).

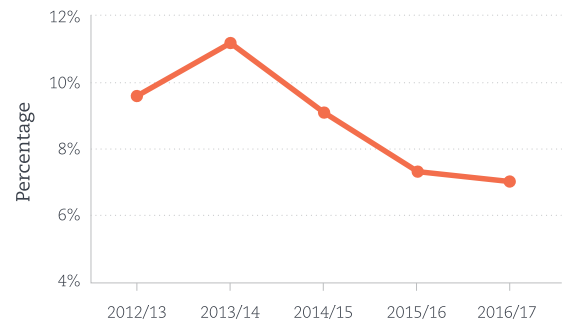
## Earnings Before Interest, Tax, Depreciation and Amortisation (EBITDA)



● EBITDA (\$m)	103.0	129.0	117.9	114.6	115.9
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Whilst EBITDA increased by \$1.3 million to \$115.9 million, this was a disappointing result which emphasised the difficulties of achieving strong financial performance at public hospitals, the time it takes to get greenfield hospitals fully functioning in all their aspects, and the downturn in the private hospital sector in terms of activity and revenue growth.

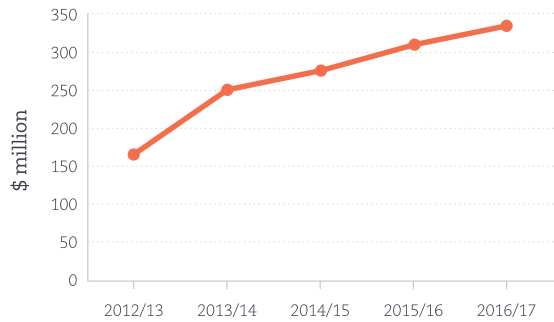
## Earnings Before Interest, Tax, Depreciation and Amortisation (EBITDA) percentage



● EBITDA percentage	9.6%	11.2%	9.1%	7.3%	6.9%
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While our EBITDA was relatively flat compared with last year, our revenue grew significantly, primarily through low margin growth in public hospital revenue. Our public hospital revenue was 107.9% higher than prior year whereas our private hospital revenue grew by 3.7%. As a result of the low margin high growth in public revenue, our EBITDA margin dropped to 6.9%.

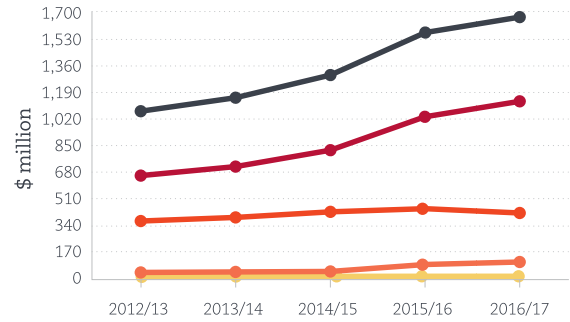
## Bank Debt



Year	Bank debt total at year end (\$m)
2012/13	165.4
2013/14	250.8
2014/15	276.2
2015/16	312.0
2016/17	333.2

Due to ongoing very significant capital investment of \$147 million in a year that achieved EBITDA of \$116 million, we increased our bank debt level by \$21.2 million. Managing our cash flow, bank debt and gearing in a private hospital environment that has changed from high to low growth will be a major focus in 2017-18 and beyond.

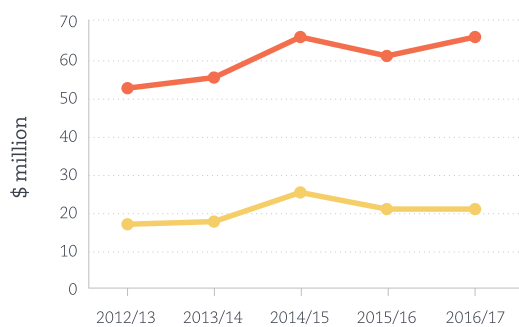
## Operational Revenue – Geographic Analysis



Year	Total (\$m)	WA (\$m)	Victoria (\$m)	NSW (\$m)	New Zealand (\$m)
2012/13	1,070.1	657.6	366.5	37.2	8.8
2013/14	1,156.7	715.3	389.7	40.5	11.2
2014/15	1,301.8	820.5	425.5	43.5	12.3
2015/16	1,572.2	1,026.5	444.9	88.1	12.7
2016/17	1,687.1	1,140.4	417.9	115.7	13.1

The changes in our geographic segment revenue have arisen through the sale of our pathology division (affecting Victoria more than WA) and the full year impact of St John of God Midland Private and Public Hospitals in WA and Hawkesbury District Health Service in NSW. As a result of these changes, WA has risen (by 11.1%) to be 67.6% of revenue, NSW has risen significantly (by 31.3%) to be 6.9% of revenue and Victoria has fallen (by 6.1%) to be 24.8% of revenue.

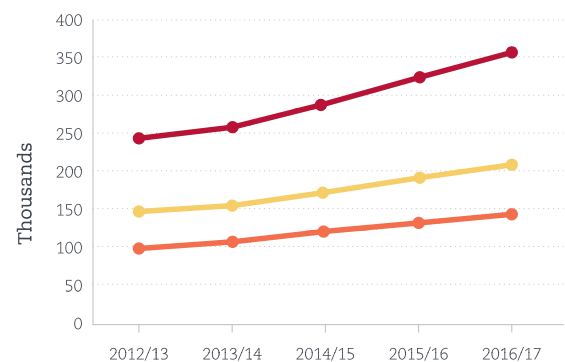
## Social Justice Expenditure



Year	Total Expenditure (\$m)	SJGHC Contribution (\$m)
2012/13	53.1	17.2
2013/14	55.9	17.9
2014/15	66.6	25.6
2015/16	61.5	21.2
2016/17	66.0	21.2

Our total expenditure on social justice initiatives rose by 7.3% (\$4.5 million) in part due to the acquisition of the Marillac Services from the Daughters of Charity in Melbourne in May. Our commitment of St John of God Health Care funds to social justice initiatives remained at a very significant level (\$21.2 million), representing 1.3% of total revenue.

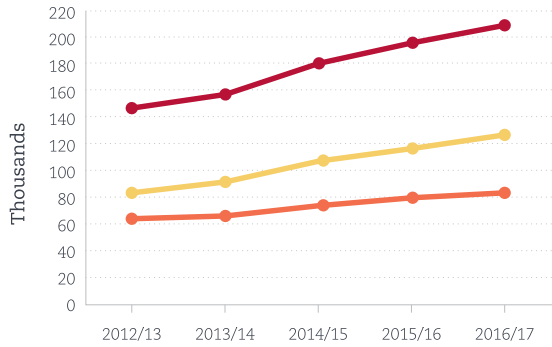
## Separations



Year	Total Separations	Overnight	Same Day
2012/13	244,190	99,404	144,786
2013/14	258,921	101,703	157,218
2014/15	289,147	114,392	174,755
2015/16	324,831	133,294	191,537
2016/17	352,981	145,406	207,575

The full-year impact of our St John of God Midland Private and Public Hospitals and our Hawkesbury District Health Service contract led to an 8.7% growth in total patient separations. Overnight separations were up 9.1%, due to public overnight separations growing 85% (from 15,197 to 28,178). Private overnight separations dropped by 0.7%. Our day separations grew 8.4% with our public separations up 104% and private separations up 2.8%. Our private separations' growth was well below long term trend, reflecting changes in industry dynamics nationally.

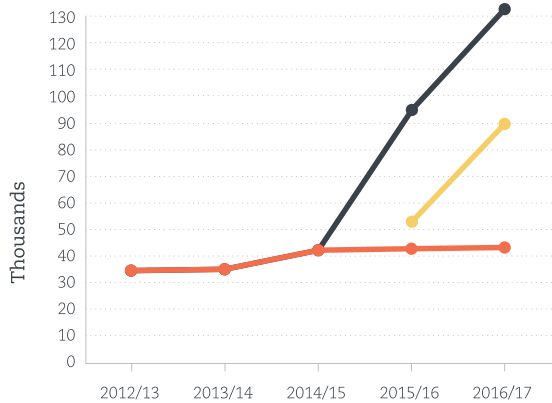
Procedures



● Total Procedures	147,361	157,691	181,159	196,697	207,937
● Overnight	63,910	65,999	73,770	79,759	82,389
● Same Day	83,451	91,692	107,389	116,938	125,548

Overnight patient procedures grew 3.3%, much lower than separations growth of 8.7% because our public hospitals have a much lower proportion of procedures for overnight patients (29% of public overnight separations have procedures as compared with 63% of private overnight separations). Day patient procedure growth was 7.4%. An equivalent proportion of private and public same day patients have procedures (61% private, 60% public).

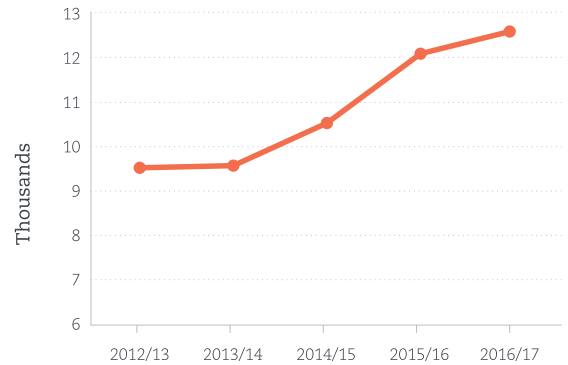
Emergency Department Presentations



● Total	34,514	35,012	42,210	95,129	133,281
● Private Hospitals ED	34,514	35,012	42,210	42,706	42,775
● Public Hospitals ED	-	-	-	52,423	90,506

Our five emergency departments, of which two are publicly funded and three privately funded, dramatically increased their activity in 2016/17 due to the full-year impact of St John of God Midland Private and Public Hospitals and Hawkesbury District Health Service. Total presentations were up 40.1%, reflecting our public hospital increase of 72.6% and private hospital increase of 0.2%. St John of God Midland Public Hospital is, within 18 months of opening, one of the busiest public emergency departments in Australia, having had 66,619 presentations during the year.

Obstetric Deliveries



● Births	9,530	9,579	10,543	12,113	12,585
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As one of Australia's leading providers of obstetrics services, it was pleasing to see 3.9% growth in obstetric deliveries. However growth in our private hospitals, consistent with industry statistics, was negative 7.3% whereas growth in our public hospitals was 94.1% in part due to the full-year impact of St John of God Midland Private and Public Hospitals and Hawkesbury District Health Service.



Participants on the Mana Wahine Adventure Therapy Programme, St John of God Waipuna, New Zealand.

# STRATEGIC UPDATE

In 2016-17 St John of God Health Care took a new approach to annual planning and reporting.

One of the outcomes is a focus on a smaller number of strategically significant initiatives in a Group Business Plan, which replaces the previous Group Operational Plan. We map these against our Strategic Priorities and the five key result areas identified in Our Vision.

Divisional and business-as-usual (BAU) planning capture additional important initiatives.

This update summarises progress in the 2016-17 Group Business Plan. Progress has been recorded using the following symbols:

✓ Achieved → Good progress made ✦ Not achieved or delayed

## CONSOLIDATED STATEMENT OF COMPREHENSIVE INCOME

ACTIONS		PROGRESS
Implement the agreed 2016-17 initiatives identified in the Mission Management Model Review	→	<ul style="list-style-type: none"> <li>› New Group Director Mission Integration appointed in Dec 2016.</li> <li>› Implemented new Mission structure.</li> <li>› Implemented six of the 12 items for implementation endorsed by Board and Trustees, with two others partially implemented.</li> </ul>

### 2017-18 focus:

- › Develop and commence implementation of a comprehensive formation program for all levels of the organisation.

## GOOD TO GREAT LEADING AND DELIVERING EXCEPTIONAL CARE (RENAMED PATIENT SAFETY STRATEGY)

ACTIONS		PROGRESS
Establish effective clinical governance structures pertaining to maternity and mental health at both group and relevant divisions	✓	<ul style="list-style-type: none"> <li>› Established organisation wide Obstetric and Midwifery Steering Committee.</li> <li>› Completed organisation-wide deployment of K2 Guardian™ to all birth suite rooms</li> <li>› Established Mental Health Community of Practice with group-wide representation from across the three states</li> </ul>
Implement agreed group-wide policy initiatives to address high risk areas	→	Range of reviews of high risk areas completed.
Develop and embed relevant education and training programs targeted at high risk clinical activity	✓	Commenced mandatory Fetal Surveillance Education Program (FSEP) training for all midwifery caregivers with training completed by 286 midwives at 30th June.

ACTIONS		PROGRESS
Develop standard data sets to measure and monitor performance across St John of God Health Care	→	Developed the following standard data sets for inclusion in routine reporting of the patient safety strategy report: <ul style="list-style-type: none"> <li>&gt; perinatal/maternal death and serious adverse events</li> <li>&gt; mental health adverse events</li> <li>&gt; surgical specimens related incidents</li> <li>&gt; surgical count related incidents.</li> </ul>
Review technology solutions to assist clinical decision-making and to reduce error.	✓	A guide to the K2 system has been developed and circulated to relevant divisions. Enhancements to the system to include audit capability of remote trace viewing and additional viewing for obstetricians are completed. Obstetric and Midwifery Steering Committee reviewed the INFANT system.

#### 2017-18 focus:

##### Obstetric and Midwifery Safety:

- > Introduce a standard obstetrician credentialing requirement
- > Introduce relevant ongoing training and education for obstetricians and midwives and determine an appropriate training program for the management of obstetric emergencies

##### Mental health:

- > Develop a standardised process for the management of anti-ligature audits/plans across mental health divisions

- > Review current triage assessment processes across private mental health divisions

##### Deteriorating Patient:

- > Review divisional governance relating to deteriorating patient management and monitoring

##### Safe Surgical Specimen Transfer:

- > Complete roll out of standardised surgical specimen transfer process

##### Safe Surgical Instrumentation Count:

- > Finalise revision of surgical count policy

## OHS AND WELLNESS GOOD TO GREAT STRATEGY

ACTIONS		PROGRESS
Develop and implement a one-on-one coaching program for CEOs/DMC about early intervention and RCA reports	✓	Completed and training provided
Introduce prevention strategies/use of occupational physician	✓	A national occupational physician group (OSH Group) appointed in March 2017 and currently providing professional guidance at recruitment stage of employment.
Structure review	✓	Review of Group Services OHS & Wellness team completed with roles and responsibilities aligned to the Workforce Strategic Plan objectives including appointment of Occupational Violence Project Manager

#### 2017-18 focus:

- > Review OHS Committees to raise the approach to best practice standards and improve effectiveness
- > Review e-learning materials for all caregivers

- > Continue the Occupational Violence in Healthcare project to better understand and manage the risks to our caregivers.
- > Finalise and implement a group-wide approach to best practice pre-employment screening/assessment.

## PROCEDURAL AREAS TRANSFORMATION PROGRAM

ACTIONS		PROGRESS
Commence implementation of approved initiatives at St John of God Murdoch Hospital	→	<ul style="list-style-type: none"> <li>› Clinical Command Centre opened</li> <li>› VMO app in development</li> <li>› Procurement completed for technology platform for new patient portal and customer relationship management system (CRM)</li> <li>› Vendors selected for IT components of other projects</li> </ul>
Implement initiatives at other hospitals as agreed.	→	<ul style="list-style-type: none"> <li>› NPS rollout across all divisions in progress.</li> <li>› Other initiatives ongoing, as per project plans.</li> </ul>

### 2017-18 focus:

- › Implement specialist recruitment retention and partnerships (St John of God Murdoch and Subiaco Hospitals)
- › Implement Clinical Command Centre (CCC) (St John of God Murdoch and Subiaco Hospitals)
- › Implement surgeons' preference cards (St John of God Murdoch and Subiaco Hospitals)
- › Implement patient centric admissions (St John of God Murdoch Hospital).

## REVIEW OF LEARNING AND DEVELOPMENT (LOD) APPROACH AND REQUIREMENTS

ACTIONS		PROGRESS
Complete the LOD review	✓	Review completed and endorsed by Group Management Committee.
Implement approved recommendations by June 2017	✓	Standard Programs completed. Relevant appointments made. Divisional structures finalised.

### 2017-18 focus:

- › Ongoing activity incorporated into BAU planning.

## CLINICAL INFORMATION SYSTEM (CIS) IMPLEMENTATION

ACTIONS		PROGRESS
Implement new Clinical Information System	◆	Deferred to 2017-18 pending appointment of Group Director Information Services

### 2017-18 focus:

- › Develop the business case for Board approval including identification of benefits for patients, caregivers and doctors/VMOs
- › Complete pre-tender work (end Q2) with tender release in early 2018.

## HEALTH RECORD FORMS STANDARDISATION PROJECT (HRFSP)

ACTIONS		PROGRESS
Complete implementation of Phase 1 forms by 2016-17 quarter 1	✓	Completed
Complete standardisation and implementation of Phase 2 forms by the end 2016-17 quarter 2	→	Ongoing

### 2017-18 focus:

- › Ongoing activity incorporated into BAU planning.

## SCANNED HEALTH RECORD SYSTEM ROLL OUT

ACTIONS		PROGRESS
Scanned Health Record System implementation at St John of God Murdoch and Ballarat Hospitals	→	Implementation at St John of God Ballarat Hospital underway. Further implementation on hold, pending benefits assessment
Secure approval for implementation plan for other hospitals	◆	On hold, as per above.
Undertake a feasibility study to strengthen capability and collaboration of St John of God hospital coding functions	◆	Oh hold, as per above.

### 2017-18 focus:

- › St John of God Ballarat Hospital progressing, remaining activity incorporated into BAU planning.

## BUSINESS ANALYTICS AND REPORTING TRANSFORMATION (BART)

ACTIONS		PROGRESS
Complete construct phase	✓	Completed and approval in principle received.
Commence implementation – initiatives to be determined at the gateway review.	◆	Executive level KPI suite and proposed next steps endorsed by GCEO. Major structural elements of business intelligence & analytics strategy deferred pending appointment of Chief Analytics Officer.

### 2017-18 focus:

- › Review and finalise the Business Intelligence & Analytics Strategy (including Operating Model & Capability Plan; Information Platform Architecture and Data Governance Framework) and associated business case.
- › Develop a high level implementation plan for both the Business Intelligence and Analytics Strategy and Performance Reporting.

## PAYROLL AND ROSTERING, TIME AND ATTENDANCE SYSTEM PROJECT

ACTIONS		PROGRESS
Define business user requirements and current/future capacity/capability	✓	Confirmed as a Transformation program in February 2017, the program comprises three core streams: clinical workforce optimisation, rostering time and attendance and payroll optimisation. A diagnose phases has commenced with completion expected in Q2 2018.
Identify product (including scope of system) to be implemented	→	Pending completion of diagnose phase.
Complete business case and achieve funding approval for implementation in FY18.	→	Pending completion of diagnose phase.

### 2017-18 focus:

- › Onboard Project team members and mobilise team structure / operating rhythm
- › Stream 1 – Rostering Time & Attendance
  - Develop functional, technical, and business requirements for proposed systems
  - Conduct a tender process, select vendor(s), and secure capital investment
  - Configure and test system(s) for Divisional launch by FY19
  - Finalise Divisional preparation and roll out plan
- › Stream 2 – Payroll Optimisation
  - Implement consolidation and workflow optimisation initiatives
  - Evaluate and validate payroll system for integration with the RTA



St John of God Murdoch Hospital caregivers welcome the immediacy of feedback from their patients using the NPS feedback mechanism.

# NEW INITIATIVES FOR 2017-18



## **Implementation of the Information Services operating model (ISOM)**

### **2017-18 focus:**

- › Define the structure, roles and responsibilities to drive the innovation journey for St John of God Health Care
- › Realign the structure and investment to uplift capability in IS to better achieve the organisation's objectives
- › Revise the governance model to better implement, support and maintain programs of work
- › Develop an approach to delivery to achieve multi-speed capability
- › Leverage our scale by reviewing and standardising contracts across the organisation
- › Strengthen collaboration through a more integrated approach in the delivery of IS projects.

## **Develop and implement digital strategy**

### **2017-18 focus:**

- › Development the St John of God Health Care Digital Strategy and commence implementation, including:
  - The strategic narrative, digital vision and five year innovation roadmap
  - Enterprise Architecture vision and capability requirements
  - Delivery roadmap and initiatives, including recommended program delivery structure
  - Recreate St John of God Health Care intranet in line with best practice web design and user experience practices
  - Implement doctors app (refer PTAP)
  - Implement patient portal (refer PTAP)

## **Finalise implementation of Riskman Incident Feedback Management System**

### **2017-18 focus:**

- › Complete design, configuration and User Acceptance Testing (UAT) of the incident, complaints and 'root cause analysis'
- › Complete implementation of the three modules (pilot in Q2, balance of the group in Q3).

## **Develop and implement a revised procurement model**

### **2017-18 focus:**

- › Determine the requirements for a strategic procurement model
- › Undertake "current state" review and gap analysis and develop a revised strategic procurement model
- › Develop comprehensive 10-year strategic capital procurement plan
- › Implement the agreed 2017-18 initiatives

## **Customer insight strategy (incl Patient NPS)**

### **2017-18 focus:**

- › Develop a customer insight strategy and implement the agreed 2017-18 initiatives
- › Develop and implement a coordinated "real time" patient feedback program (eg NPS)
- › Develop and implement a St John of God Health Care brand strategy

# BUILDING HEALTHY COMMUNITIES

St John of God Health Care continues to invest in redevelopments at our existing hospitals to provide for expanded services and improvements to overall patient and caregiver experience.

Our building projects are a significant aspect of our commitment to strengthening the communities in which we operate. By providing new and innovative services, we can deliver our distinctive, quality care to more people.

## **ST JOHN OF GOD BENDIGO HOSPITAL**

### **Redevelopment 2014-2017**

- › St John of God Bendigo Hospital continued its \$41 million redevelopment project that is extending the existing three levels of the hospital and adding 46 new beds. The project is also delivering a new operating theatre, refurbishment of 69 existing rooms, façade and front reception, as well as upgraded parking facilities.
- › The project was completed during the year with the formal commissioning activities and blessing ceremony occurring in June 2017.

## **ST JOHN OF GOD BERWICK HOSPITAL**

### **Greenfield development 2015-2018**

- › Construction of the new facility jointly owned with Generation Healthcare REIT commenced in January 2016.
- › The new facility will increase the capacity of St John of God Berwick Hospital from 74 beds to 190 and from four theatres to six, with potential to increase to more than 300 beds in future developments.
- › The existing St John of God Berwick Hospital will undergo its own redevelopment to provide additional services when the new facility is completed.
- › Construction of the new facility is on schedule for completion in late 2017 with commissioning activities programmed to have the facility open for patients in January 2018.

## **ST JOHN OF GOD GEELONG HOSPITAL**

### **Redevelopment 2015-2017**

- › St John of God Geelong Hospital continued its \$21 million project to upgrade and expand its facilities to provide for enhanced cardiac services.
- › The project includes a new eight-bed intensive care unit with capacity to expand to 12 beds, as well as refurbishment of the existing critical care unit.

## **ST JOHN OF GOD MT LAWLEY HOSPITAL**

### **Post acquisition upgrade 2015-2017**

- › St John of God Mt Lawley Hospital continued its redevelopment to upgrade various areas of the facility post the transfer from MercyCare in May 2014.
- › Upgrade works in theatre areas and the central sterile supply department were completed in late 2015 and early 2016, with upgrades to the medical records area commencing in July 2016.



## **ST JOHN OF GOD MURDOCH HOSPITAL**

Redevelopment: 2011-2014  
(stage one), 2014-2018 (stages  
two and three)

- › Stage two of the three-stage redevelopment project continued during the year with the completion of three of the six ward refurbishments as well as the completion of the chapel and foyer upgrades.

## **ST JOHN OF GOD SUBIACO HOSPITAL**

Early stage redevelopment  
2016-2017

- › St John of God Subiaco Hospital commenced master planning activities toward its next major redevelopment project. Early stage enabling works have been completed, which included the relocation of tenants and demolition of St John of God House. The target date for finalisation of planning and a formal redevelopment Board submission is late 2017-18.

## **ST JOHN OF GOD HAUORA TRUST – ST JOHN OF GOD KARORI**

Redevelopment 2017-2018

- › Remediation of part of the Karori site in Wellington, New Zealand, to strengthen the overall structure and meet seismic requirements for buildings in the area.
- › Works will also include a minor reconfiguration of the facility to improve operational efficiency and an expansion of three beds to capitalise on demand for services.

Our new St John of God Berwick Hospital is changing the skyline of the outer Melbourne suburbs.

# FOR TOMORROW, TODAY



The healthcare industry is facing unprecedented growth and change in Australia and around the world. St John of God Health Care is not immune and in response we have developed a transformational capability, much of which requires the uptake of new technology that will better inform our delivery of high quality healthcare.

We are delivering complex, impactful, high value programs of work that contribute to the achievement of Our Strategic Priorities 2015 – 2019.

The programs focus on service quality, caregiver satisfaction, the operational performance of our services and our reputation as a recognised leader in the Australian health sector.

In response to strategic priority two: To significantly increase our investment in information, analytics and technology, the announcement was made in February to appoint a transformational leader for the Information Services function to establish a new Information Services operating model.

## **PROCEDURAL AREAS TRANSFORMATION PROGRAM**

This program will deliver innovative changes within procedural areas at St John of God Subiaco and Murdoch Hospitals.

The program is delivering St John of God Health Care's first Clinical Command Centre at St John of God Murdoch Hospital, providing a central hub to coordinate and streamline

activities within theatres to improve performance and experience for patients, doctors and caregivers. A second Clinical Command Centre will be implemented at St John of God Subiaco Hospital in the second half of 2017.

An online admissions system that streamlines patient interactions with our hospitals will improve patient experience by reducing the number of forms and visits required before attending a hospital for treatment.

Surgical preference cards that set out the required supplies for each procedure based on the surgeon's requirements are being digitised, allowing more accurate and reliable preparation for procedures and improvement in stock management.

A mobile app, currently under development, will provide pathology and radiology results, operating list details and patient locations, thereby improving clinicians' access to patient information.

## **BUSINESS ANALYTICS AND REPORTING TRANSFORMATION PROGRAM (BART)**

Program BART is focused on improving the way St John of God Health Care utilises data and information. Our vision is to create a culture where data and information is routinely used to provide insight and foresight, leading to significantly improved decision-making and outcomes for our patients.

Achieving this will require establishment of a new business analytics function, introduction of new technologies, a data governance framework, a data-driven culture and a suite of key performance indicators to measure and benchmark the organisation's performance.

Initiatives already implemented include Tableau Server to support a more visual display of data and a finalised suite of executive key performance indicators, measuring culture, service and stewardship with a shift toward patient outcome measures.

## **PROJECT CAMILLUS**

Project Camillus focuses on the implementation of a rostering, time and attendance system across all Australian services.

The vision for the project is to create a sustainable workforce that is empowered with the tools to deliver both effective and efficient high quality care capable of meeting future demands and expectations.

Two streams of work – rostering, and payroll, time and attendance – are focused on preparing for a successful group-wide implementation.

## **CAREGIVER NET PROMOTER SCORE (CAREGIVER NPS)**

Net promoter score (NPS) is a quick and easy satisfaction survey method that asks participants to rate, on a scale of 1 to 10, how likely it is that they would recommend something to their friends and family.

We routinely use this method for our caregiver, specialist and patient satisfaction surveys to assess our performance and impact of our initiatives to determine where improvements can be made.

St John of God Subiaco and Murdoch Hospitals now issue NPS satisfaction surveys to caregivers, specialists and patients via SMS technology, reaching groups who do not have computer access. This facilitates timely feedback that enables improvements to be enacted on a more regular basis. NPS satisfaction surveys for patients will be rolled out more broadly across the group in 2017-18.

## **DISCHARGE SUMMARY APP**

Currently live at St John of God Bunbury Hospital, the discharge summary web app was developed to allow the hospital to send high quality discharge summaries to general practitioners and to the patients' online MyHealth Records.

Coders are able to easily code patient billing from digital records instead of hand written documents and have visibility over discharge summaries requiring follow-up and clinician approval for billing to commence. St John of God Bunbury Hospital has processed 1,416 discharge summaries since the app went live in September 2016.

## **COMPLIANCE NOTIFICATION FOR CAREGIVERS**

A web app has been developed through a partnership between Human Resources and the Information Services Business Intelligence teams to notify and remind caregivers when their mandatory compliance requirements, such as Working with Children, Nurse and Midwifery Registration, need renewal.

## **ENTERPRISE DATA WAREHOUSE**

The development and implementation of an Enterprise Data Warehouse has created a central data repository from a number of core applications and disparate systems allowing a wide range of visualisation tools to surface our corporate data from a single source of truth. It is a necessary first step to leverage data and analytics capabilities in order to deliver better care for our patients.

## **ENTERPRISE MONITORING COMMAND**

The enterprise monitoring command system allows us to view the status of all of our core information services infrastructure and applications on a single dashboard. It provides automated incident creation and alerting, via SMS notifications to information services support teams in the event of critical service failures.

Before the introduction of this platform, we relied on caregivers to report incidents, which delayed resolution, particularly for issues arising after hours. With this new system in place, we are often in a position to rectify incidents before caregivers know they have occurred.

## **CYBERSECURITY**

Over the past 12 months, the organisation has improved its readiness for cyberattack. In adopting a framework from the Centre for Internet Security, we identified a number of opportunities to enhance our protection. As part of that process, we recently underwent an assessment of our information technology infrastructure maturity, conducted by Cisco. St John of God Health Care ranked first in cybersecurity preparedness for healthcare in Australia and New Zealand and in the top quartile for our technological maturity overall.

# SERVICES

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- 38 Location map
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- 43 Eastern Hospitals
- 44 Community Services



# OUR LOCATIONS

## WESTERN AUSTRALIA

### 1. Perth

- › Head office
- › Hospitals:
  - St John of God Midland Public and Private Hospitals
  - St John of God Mt Lawley Hospital
  - St John of God Murdoch Hospital, including Murdoch Community Hospice
  - St John of God Subiaco Hospital
- › Social Outreach:
  - Drug and Alcohol Withdrawal Network
  - Horizon Houses
  - Murdoch Community Mental Health
  - Raphael Services
- › St John of God Foundation
- › St John of God Health Choices (home nursing)

### 2. Bunbury

- › St John of God Bunbury Hospital
- › St John of God Busselton Day Hospital
- › Social Outreach:
  - Horizon House
  - South West Community Drug Service Team
- › South West Cancer Accommodation Centre

### 3. Geraldton

- › St John of God Geraldton Hospital
- › Horizon House

### 4. North and Mid West

- › Horizon House Broome

## VICTORIA

### 5. Melbourne

- › St John of Accord
- › Hospitals:
  - St John of God Berwick Hospital, including Specialist Centre
  - St John of God Frankston Rehabilitation Hospital
  - St John of God Pinelodge Clinic
- › St John of God Health Choices (home nursing)
- › Raphael Services Berwick

### 6. Ballarat

- › St John of God Ballarat Hospital
- › Social Outreach
  - Pomegranate House
  - Raphael Services Ballarat

### 7. Bendigo

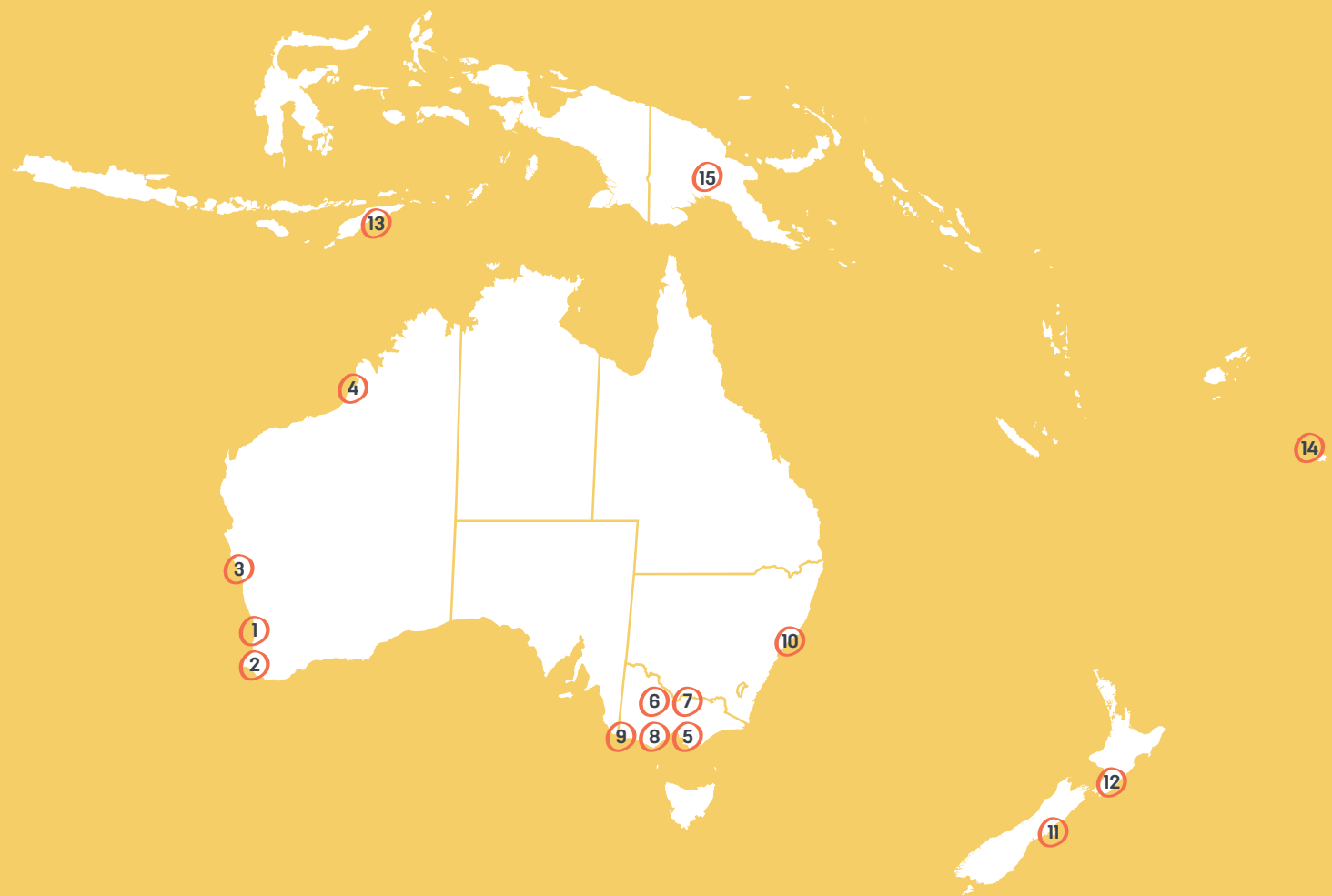
- › St John of God Bendigo Hospital
- › Social Outreach
  - Horizon House
  - Raphael Services Bendigo
- › St John of God Health Choices (home nursing)

### 8. Geelong

- › St John of God Geelong Hospital, including Specialist Centre
- › Social Outreach
  - Horizon House
  - Raphael Services Geelong
- › St John of God Health Choices (home nursing)

### 9. Warrnambool

- › St John of God Warrnambool Hospital
- › Horizon House
- › St John of God Health Choices (home nursing)



## NEW SOUTH WALES

### 10. Sydney

- › Hospitals:
  - Hawkesbury District Health Service
  - St John of God Burwood Hospital
  - St John of God Richmond Hospital
- › Social Outreach
  - Casa Venegas
  - Raphael Services Blacktown

## NEW ZEALAND (ST JOHN OF GOD HAUORA TRUST)

### 11. Christchurch

- › Community, Youth and Child Services
  - St John of God Waipuna
- › Health and Ability Services
  - St John of God Addington
  - St John of God Halswell
  - St John of God Selwyn

### 12. Wellington

- › Health and Ability Services
  - St John of God Karori

## ASIA PACIFIC

- › Social Outreach services

### 13. Timor-Leste

- › Nursing Development Program
- › Pathology Development Program
- › Primary Health

### 14. Tonga

- › Tonga Twinning Program

### 15. Papua New Guinea

- › Primary Health

# WESTERN HOSPITALS

St John of God Health Care hospitals in Western Australia made further progress during the financial year toward the strategic vision to create a cohesive, united, collaborative network of hospitals delivering outstanding care to the community.

This included the implementation of a new regional structure announced in February 2017 and the development of a standardised divisional structure, for which implementation has almost been finalised. In addition, monthly CEO forums commenced and further work is being carried out to develop a metro Perth Clinical Services Plan.

These initiatives were undertaken while adapting and responding to the current downturn in the private health sector through: effective cost management, increased service and activity growth, maintaining a positive, patient- focused culture, developing middle management capability, embedding strong patient and caregiver safety and quality culture, and embracing and embedding new information technology and digital opportunities.

At St John of God Subiaco Hospital, stage 1 of the redevelopment program, including the demolition of St John of God House, was completed. Planning for stage 2 will commence in 2017-18.

Research and development into lung cancer and lung disease received another wonderful boost with a \$500,000 donation from philanthropist and businessman Jack Bendat.

In June 2017, Professor Shirley Bowen was appointed Chief Executive Officer for St John of God Subiaco Hospital.

At St John of God Murdoch Hospital, an important initiative was the opening of the St John of God Mandurah Consulting Suites, giving the Peel

community local access to specialists and a broad range of services and specialties, including urology, orthopaedics, gastroenterology and ophthalmology.

The program of strengthening relations with general practitioners continued through the General Practitioner Education Program, and the expectation is that this will expand in the next year with additional events such as education sessions, clinical workshops and case studies.

The Procedural Areas Transformation Program, which aims to improve patient experience, support specialists in their work and create efficiencies, commenced implementation. A program, designed to link the hospital's Mission, Values and Service Ethos with person-centred care, was launched with the intention of rolling it out for the whole hospital.

Murdoch Community Mental Health's transition to the newly established Social Outreach division will provide opportunities to focus on the role of St John of God Health Care in the community mental health arena, and to coordinate and resource our practice of social outreach to those who are disadvantaged and marginalised.

There were some important leadership changes. Ben Edwards was appointed Chief Executive Officer of St John of God Murdoch Hospital after John Fogarty left to take on the role of Executive Director, Western Australia Hospitals.

At Midland Public and Private Hospitals, The Lions Eye Institute Midland Eye Service was established to assist Aboriginal people with eye care. Social outreach funding provided an Optical Coherence Tomography Unit to facilitate early assessment of eye conditions.

St John of God Midland Public Hospital also took responsibility for the management of Moort Boodjari Mia, an Aboriginal-led maternity program that assists Aboriginal women who are expecting a baby.

St John of God Mt Lawley Hospital's \$17 million redevelopment continued and the Specialist Rehabilitation Service expanded to meet growth in demand. The service has continued to run at close to full capacity since this expansion.

St John of God Geraldton Hospital and the WA Country Health Service continued their collaboration in developing a plan to provide health services to the Mid West region.

In the South West region, St John of God Bunbury Hospital introduced a renal dialysis treatment management system that enables patients to transfer clinical and treatment data through their own personal health record via smart card when treated at either our hospital or Fiona Stanley Hospital. St John of God Bunbury Hospital also introduced an electronic discharge system that has improved communication to patients, referring general practitioners and specialists.

AT ST JOHN OF GOD SUBIACO HOSPITAL, STAGE 1 OF THE REDEVELOPMENT PROGRAM WAS **COMPLETED**



ST JOHN OF GOD BUNBURY HOSPITAL PROVIDED **35,710 KILOMETRES** OF TRAVEL FOR SOUTH WEST RESIDENTS TO TRAVEL FROM HOME TO BUNBURY FOR CANCER SERVICES



THE PROCEDURAL AREAS TRANSFORMATION PROGRAM **COMMENCED IMPLEMENTATION** AT ST JOHN OF GOD SUBIACO AND MURDOCH HOSPITALS



ST JOHN OF GOD GERALDTON HOSPITAL AND THE WA COUNTRY HEALTH SERVICE CONTINUED THEIR COLLABORATION IN DEVELOPING A PLAN TO PROVIDE HEALTH SERVICES TO THE **MID-WEST REGION**

RESEARCH AND DEVELOPMENT INTO LUNG CANCER AND LUNG DISEASE RECEIVED A **\$500,000 DONATION**



AT ST JOHN OF GOD MURDOCH HOSPITAL, AN IMPORTANT INITIATIVE WAS THE OPENING OF THE ST JOHN OF GOD **MANDURAH CONSULTING SUITES**



AT ST JOHN OF GOD MIDLAND PUBLIC AND PRIVATE HOSPITALS, THE LIONS EYE INSTITUTE MIDLAND EYE SERVICE WAS ESTABLISHED TO **ASSIST ABORIGINAL PEOPLE WITH EYE CARE**



ST JOHN OF GOD MT LAWLEY HOSPITAL'S **\$17 MILLION** REDEVELOPMENT CONTINUED

ST JOHN OF GOD BURWOOD HOSPITAL MADE PROGRESS WITH THE COMPLETION OF THE **MODELS OF CARE PROJECT**



ST JOHN OF GOD BALLARAT HOSPITAL'S INPATIENT REHABILITATION UNIT WAS EXTENDED TO **30 DEDICATED BEDS**



ST JOHN OF GOD GEELONG HOSPITAL COMPLETED A **\$21 MILLION** REDEVELOPMENT



ST JOHN OF GOD BERWICK HOSPITAL PURCHASED A **MAKO ROBOT** ENABLING SURGEONS TO DELIVER ROBOT-GUIDED JOINT REPLACEMENT SURGERY

IN NSW, HAWKESBURY DISTRICT HEALTH SERVICE LAUNCHED THE COMMUNITY'S FIRST **SLEEP STUDY CLINIC**



ST JOHN OF GOD FRANKSTON REHABILITATION HOSPITAL COMMENCED A **\$9.7 MILLION** REFURBISHMENT



ST JOHN OF GOD BENDIGO HOSPITAL COMPLETED A **\$41 MILLION** REDEVELOPMENT



THE NEW ST JOHN OF GOD BERWICK HOSPITAL IS EXPECTED TO OPEN IN **EARLY 2018** AND WILL BRING A NEW LEVEL OF HEALTHCARE AND SERVICES TO THE REGION

# EASTERN HOSPITALS

Momentum in St John of God Health Care hospitals in the eastern states continued the group's progress toward achieving its strategic aim of being a recognised leader in the Australian health sector for the provision of high quality healthcare.

Increased investment in technology and new investment in facilities contributed to the ongoing focus on achieving our strategic priorities, with a strong emphasis on positioning St John of God Health Care as a leader in health and hospital care in regional Victoria.

The year marked the achievement of several important milestones in Victoria. St John of God Bendigo Hospital completed a \$41 million redevelopment, which has delivered a new three-storey wing, two new integrated operating theatres, a large theatre recovery, new sterilising department, and refurbishment of all existing bedrooms, front entrance, atrium and the Day Procedure Unit, as well as a free car park with flat and easy access into the hospital.

In addition, rehabilitation and geriatric inpatient services at St John of God Bendigo Hospital expanded by 34 beds.

At St John of God Geelong Hospital, a \$21 million redevelopment included a cardiac care unit, intensive care unit, operating theatre, cardiovascular interventional laboratory and education and research facility, while at St John of God Ballarat Hospital, the inpatient rehabilitation unit was extended to 30 dedicated beds.

The new St John of God Berwick Hospital, which is expected to open early in 2018, will bring a new level of healthcare and services to the region. The hospital will have 190 beds, six

operating theatres, two procedure rooms, a cardiovascular interventional laboratory, six birthing suites, 350 basement car parks and the first intensive care unit and cardiac care unit in the region.

The new hospital will enable the existing Gibb Street facility to be redeveloped as a rehabilitation hospital with an expected opening date in late 2018.

St John of God Berwick Hospital's commitment to technological innovation was demonstrated by the purchase of a Mako Robot, which will enable surgeons to deliver robot-guided joint replacement surgery.

At St John of God Frankston Rehabilitation Hospital, works commenced on a \$9.7 million refurbishment, which will deliver new and improved accommodation and amenities for patients. With an expected completion date in early 2018, the development will deliver an increased number of single rooms, refurbishment of all patient rooms, improved front entrance access for patients and vehicles, and a new café, lounge area, three additional consulting rooms, chapel and adjoining multipurpose meeting room.

In addition, the hospital started a collaboration with the University of Melbourne to collect cardiac rehabilitation outcome data to improve cardiac-related outcomes at a state level.

In NSW, Hawkesbury District Health Service launched the community's first sleep study clinic under the specialist care of a respiratory and sleep medicine physician. The service also introduced new surgical oncology services providing patients with local access to specialist breast, endocrine and soft tissue tumour surgery. The Living Cancer Trust Chemotherapy Service opened in April 2017.

St John of God Burwood Hospital made progress with the completion of the Models of Care project, which has revised each clinical program to ensure a direct match to the National Mental Health Recovery Framework and the organisation's Mission. Pex survey results showed 95% of patients would recommend St John of God Burwood Hospital to a family member or friend.

# COMMUNITY SERVICES

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The decision to combine perinatal infant mental health, homeless youth, mental health, international health and disability through our new Community Services area demonstrates our commitment to the communities we serve.

The Community Services structure allows us to leverage our scale and expand services to people in need in Western Australia, Victoria, New South Wales and Timor-Leste.

A total of \$66 million, provided by St John of God Health Care and other sources, is now allocated to Community Services each year. This is expected to increase to more than \$69 million in the next financial year.

Our St John of God Accord disability services, and Casa Venegas and Horizon House services have provided more than 77,000 bed nights' accommodation. Our perinatal infant mental health (Raphael Services) and three community mental health services have provided nearly 33,000 counselling and support services. Our international health initiative in Timor-Leste has trained more than 600 nurses at the National Hospital in Dili and delivered more than 150,000 pathology tests.

St John of God Accord disability services in Victoria have expanded due to an increase in referrals stemming from the implementation of the new National Disability Insurance Scheme. Additionally, Marillac Ltd, which transferred to St John of God Health Care from the Daughters of Charity in

May 2017, will provide care for more than 130 people in accommodation care and more than 820 clients associated with individual, day and specialised care and respite services. Marillac Ltd, operated by St John of God Accord, will expand our service offering employment services for people with a disability.

Social Outreach has continued its vital work supporting the health and wellbeing of disadvantaged communities in Australia and Timor-Leste, providing its services for free or at minimal cost.

In the three areas of early intervention, prevention and capacity building, Social Outreach's influence grew in all areas. This included nearly 2,000 new parents being provided with counselling sessions and more than 120 families attending therapeutic sessions around Australia.

In addition, more than 160 young vulnerable people in the critical age group from 16 to 22, were assisted with long term accommodation, and Horizon House continued to provide individualised support to enable young people to access tertiary education or employment.

In community mental health, our capacity to meet the increasing

demand for services continued to grow through specific initiatives, programs and training. For instance, mental health and wellbeing support was provided to more than 1,600 clients.

The International Health Program in Timor-Leste developed the capacity of the local workforce through a successful introduction of a Health Managers Program, executive development and Mission formation for St John of God Health Care caregivers and Timorese hospital staff.

The St John of God Hauora Trust in New Zealand continued to fulfil its wide-ranging mandate to provide long-term residential support for people aged 18-65 with physical and neurological disabilities, support accommodation, youth and social services and early childhood centre rehabilitation and therapy.

While continuing to deliver services to many areas of need, Hauora Trust's Community, Youth and Child Services received Ministry of Social Development accreditation for up to three years and a three-year contract with the Ministry of Vulnerable Children for intensive social work support and community development.

A TOTAL OF **\$66 MILLION** IS NOW ALLOCATED TO COMMUNITY SERVICES EACH YEAR



THIS IS EXPECTED TO INCREASE TO MORE THAN **\$69 MILLION** IN THE NEXT FINANCIAL YEAR



OUR ACCORD DISABILITY SERVICES, AND CASA VENEGAS AND HORIZON HOUSE SERVICES HAVE PROVIDED MORE THAN **77,000 BED NIGHTS' ACCOMMODATION**



IN THE THREE AREAS OF EARLY INTERVENTION, PREVENTION AND CAPACITY BUILDING, SOCIAL OUTREACH'S INFLUENCE **GREW IN ALL AREAS**

IN COMMUNITY MENTAL HEALTH, OUR CAPACITY TO MEET THE **INCREASING DEMAND** FOR SERVICES CONTINUED TO GROW



THE INTERNATIONAL HEALTH PROGRAM IN TIMOR-LESTE DEVELOPED THE **CAPACITY OF THE LOCAL WORKFORCE**



THE ST JOHN OF GOD HAUORA TRUST IN NEW ZEALAND CONTINUED TO FULFIL ITS WIDE-RANGING MANDATE TO PROVIDE **LONG-TERM RESIDENTIAL SUPPORT** FOR PEOPLE AGED 18-65 WITH PHYSICAL AND NEUROLOGICAL DISABILITIES

# EXCELLENCE

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# EXCELLENCE IN CARE

Excellence in care is fundamental to St John of God Health Care's Mission. It is a guiding principle of our Vision and embraced in our number one strategic priority 'To be a recognised leader in the Australian health sector for the provision of high quality care.'

Commitment to excellence in healthcare is an aspiration that requires safe, effective, appropriate and responsive care from engaged and competent caregivers and accredited health practitioners.

## ACCREDITATION

### Hospitals

Accreditation of our hospitals provides important validation of how we compare against health industry standards of care. During 2016-17, seven of our hospitals underwent organisation-wide accreditation to National Safety and Quality Health Service (NSQHS) Standards (Standards 1-10) - St John of God Bendigo, Berwick, Bunbury, Geraldton, Mt Lawley, Midland and Subiaco Hospitals. In addition, St John of God Midland Public Hospital was accredited against Mental Health Standards, and St John of God Health Choices achieved full accreditation to Australian Council on Healthcare Standards EQUiP6.

Many of our hospitals achieved multiple 'met with merit' criteria. St John of God Subiaco Hospital achieved 27 such criteria.

### New Zealand

St John of God Hauora Trust is an accredited provider of services with a diverse range of government agencies including the Ministry of Social Development, Ministry of Health, Ministry of Education, and Oranga Tamariki (Ministry for Vulnerable Children) as well as the Department of Corrections and Accident Compensation Corporation.

## PATIENT SATISFACTION AND EXPERIENCE

We use the Press Ganey Annual Patient Satisfaction Survey to assess and evaluate how patients feel about their care experience with us. This year, many of our hospitals showed outstanding achievements across inpatient, day surgery and emergency department areas in relation to patient satisfaction:

- › Overall, St John of God Health Care was positioned in the 75th percentile against private peers.
- › Seven of our 12 acute private hospitals achieved better than the 75th percentile rank against their private peers: St John of God Bendigo, Subiaco, Ballarat, Warrnambool, Bunbury, Berwick Hospitals and lastly St John of God Geelong Hospital, which scored "best in class".

In relation to patient experience, four hospitals achieved a top quartile ranking against all Australian hospitals surveyed: St John of God Bunbury, Geraldton, Bendigo and Geelong Hospitals. St John of God Midland Public Hospital achieved "best in class" and was ranked at the 99th percentile compared to all public hospital peers.

St John of God Bunbury, Geraldton and Bendigo Hospitals achieved top quartile ranking against Magnet hospitals internationally. Magnet Recognition is a US-based organisational credential awarded to exceptional healthcare organisations that meet American Nurses Credentialing Center (ANCC) standards for quality patient care, nursing excellence, and innovations in professional nursing practice.

St John of God Health Care was positioned at the 80th percentile of the all-private health systems benchmark for day patient satisfaction, an improvement from the 67th percentile in 2015. Four hospitals achieved top quartile rankings against their peer group: St John of God Geelong, Ballarat, Bunbury and Warrnambool Hospitals.

St John of God Health Care has five emergency departments and was ranked at the 88th and 80th percentile compared to all health system and private emergency facility benchmarks respectively. St John of God Geelong, Ballarat and Murdoch Hospitals achieved top quartile benchmarks against their private peer emergency facilities.

Net promoter score, a quick and easy satisfaction measure that asks participants to rate on a scale of 1 to 10 how likely it is that they would recommend something to their friends and family, was rolled out to patients for the first time at St John of God Health Care, commencing at St John of God Murdoch Hospital. This method allows patients to provide feedback on their experience in our facilities in close-to-real time, allowing us to understand what is working well as well as providing opportunity for more immediate continuous improvement. Net promoter score measures will be rolled out to all St John of God Health Care services by the end of 2017-18.



St John of God Health Care Maternity Reference Group Coordinator and winner of Catholic Health Australia's Emerging Leader Award, Zoe Islip assisting parents with first bath.

## **DOCTOR SATISFACTION SURVEYS**

Doctor engagement and satisfaction analysis is conducted annually across St John of God Health Care.

In 2016, the organisation achieved a ranking of 58th percentile against externally benchmarked private peers, an improvement from 49th percentile in 2015.

Seven hospitals recorded results within the top 75th percentile ranking: St John of God Bendigo, Geelong, Subiaco, Warrnambool, Bunbury, Frankston Rehabilitation Hospital and Ballarat Hospitals, with St John of God Subiaco and Geelong Hospitals both rated "best in class" at the top percentile.

In 2016, 45.6% of doctors considered themselves "dedicated partners", a very good result when compared with the private not-for-profit benchmark (34.8%) and the national benchmark (35.1%).

## **CLINICAL RISK MANAGEMENT**

Over the past 12 months, St John of God Health Care has progressed implementation of an electronic clinical incident management system, which will assist our hospitals in identifying key risks and help us to develop strategies to further improve patient safety and experience.

St John of God Health Care has an open disclosure policy. This means we have an open discussion with patients if an incident occurs while they are being cared for by us that results in harm. To strengthen our effectiveness in communicating with patients, the Cognitive Institute Open Disclosure Expert Training program was rolled out across the organisation. The training program provided Australian Open Disclosure Framework guidance, advanced communication skills training and included simulated scenarios.

Improving clinical risk support to hospitals, through analysis, reports and resources to better manage clinical risk, is a key growth area identified for 2017-18.

## **INFECTION CONTROL**

In 2016-17 our group compliance rate for hospitals exceeded 83.3%, which is higher than the Australian Commission on Safety and Quality in Health Care's National benchmark of 80%.

We benchmark rates of hospital-acquired staphylococcus aureus bacteraemia (SAB) – the most common bacteria causing serious bloodstream infection – against other acute hospitals on the MyHospitals website. Our hospitals recorded a rate of 0.54 SAB cases per 10,000 patient-care days, which is significantly better than the national benchmark of no more than two cases per 10,000 patient-care days.

## **CLINICAL PRACTICE**

### **Post-fall management guidelines**

St John of God Health Care reviewed and revised the approach to monitoring and managing patients who have had a fall resulting in admission to hospital or a fall while in our care.

A cross-hospital working group undertook a literature and document review to identify existing practice on post-fall management in Australia and internationally, resulting in more robust post-fall management guidelines focused on risk reduction.

### **Pressure injury project**

Work continued on initiatives to reduce the risk of pressure injury for patients in our care.

Collaboration among clinicians across several disciplines, hospitals and departments facilitated the development of a pressure injury clinical guideline, revised patient education and information, and a St John of God Health Care caregiver online education module. All these initiatives reflect current best practice.

### **Blood and blood product clinical guidelines**

The Blood and Blood Product Reference Group is currently developing and standardising blood policy and documentation requirements across our hospitals together with new clinical guidelines for blood administration.

In 2016, hospitals in Victoria and Western Australia introduced the national system - BloodSTAR - to manage authorisation of and access to immunoglobulin products for patient treatments. It has been an important change to clinical practice that provides efficiencies and stewardship of this blood product, enhancing outcomes for both patients and communities.

## **PATIENT SAFETY STRATEGY**

Obstetric, mental health and surgical safety initiatives were implemented as part of the patient safety strategy for 2016-17.

### **Obstetrics**

As part of the Obstetric and Midwifery Strategy, key achievements supporting patient safety this year, included:

- › Establishment of an organisation-wide Obstetric and Midwifery Steering Committee. The committee brings together obstetricians, neonatologists, paediatricians and midwives from across three States where we provide obstetric and midwifery care. The committee plays a key role in identifying opportunities for improvement and clinical engagement in implementing quality improvement initiatives.
- › Completion of an organisation-wide deployment of K2 Guardian™ to all birth suite rooms. This provides continuous electronic fetal monitoring with remote viewing capability. The system allows obstetricians to remotely monitor fetal well-being in real time, which enables collaborative decision making with midwifery caregivers providing clinical care at the bedside. As a large-scale change management project involving technology and vendors, capital and people, the project was delivered on budget, on time and with positive feedback from all involved.

- › Introduction and coordination of the RANZCOG Fetal Surveillance Education Program (FSEP) in liaison with hospital midwifery managers and educators. In 2016-17 411 midwives participated in the FSEP.

### **Mental health**

A Mental Health Community of Practice was established with group-wide representation from across the three States in which St John of God Health Care provides mental health care. The key focus to date has included policy and practice review in client triage and admission processes, review of client outcome measurement systems, and various client safety initiatives, including environmental safety.

### **Surgical safety**

Work was undertaken to improve surgical safety, including surgical instrument count, specimen transfer, checklist compliance and instrument tracking.

## **INNOVATION**

In 2017, a new program called Bigger, Better, Brighter was introduced to showcase excellence in nursing and midwifery practice at St John of God Health Care. Nominations are received from across the organisation, focusing on projects and activities that have increased our reach, improved the safety, quality, efficiency and effectiveness of our care, and enriched patient, client, family, doctor, caregiver or other health professional experiences.

## **PASTORAL SERVICES**

Pastoral services are a distinguishing and defining feature of our Catholic Ministry and a means of expressing our holistic care approach.

Our pastoral practitioners have formal training to enable them to relate compassionately and skillfully to patients, family members and carers faced with significant events, such as illness, disability and death.

Pastoral services are available to all, regardless of culture, religion or spiritual orientation, including those with no belief systems.

During the year, our focus was to establish a contemporary pastoral services model at Hawkesbury District Health Service, St John of God Midland Hospitals and St John of God Accord to meet the specific needs of these services and their communities.

The St John of God Midland Public Hospital Pastoral Services team successfully integrated their practice within the traditional models of patient care, with key initiatives including having pastoral practitioners in multidisciplinary team meetings, education sessions presented by the Pastoral Services Manager to various caregiver cohorts and presentations during orientation programs for all new caregivers.

At Hawkesbury District Health Service, a new pastoral coordinator was appointed and education sessions on the role of pastoral services were conducted for caregivers.

Pastoral services have been embedded within St John of God Accord and provide support to clients referred from 22 of St John of God Accord's 25 shared support accommodation sites, as well as assisting with the transition of new clients into our day support services.

By 2019, Pastoral Services aims to be recognised as a leader in the development of best practice and contemporary pastoral care, which responds to the needs of individuals and the communities we serve. We will continue to focus on professional development, best practice and research and service development.



Work was undertaken to improve surgical safety as part of the patient safety strategy for 2016-17.



Project lead for the Clinical Command Centre project at St John of God Murdoch Hospital, Ben Talbot stands before digital dashboards that are able to follow each patient's surgical journey.

# NEW 'COMMAND CENTRE' IMPROVES PATIENT JOURNEY THROUGH SURGERY

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St John of God Health Care launched new 'clinical command' technology in its St John of God Murdoch Hospital operating theatres in June that resulted in less waiting time in patient holding areas and freed up the theatre team to spend more time on patient care.

Increased efficiency in theatres is expected to lead to greater theatre utilisation by visiting medical officers.

From a new 'Clinical Command Centre' a patient's whereabouts in their journey through theatres is highly visible and trackable on large digital screens; from the time the patient is admitted to hospital, through being prepared for surgery, to surgery performed, being monitored post-surgery and then on to the hospital ward.

The newly created position of 'Perioperative Flow Manager' literally ensures that patients continue to 'flow' through the surgical journey from a commanding view of digital dashboards that fill a wall in the 'Clinical Command Centre'.

With this perspective, the Flow Manager is able to troubleshoot any blockages in the flow and staff up or down accordingly.

Doctors and caregivers can also view activity levels on digital screens installed in operating theatres and at other points in the hospital, which gives them greater visibility of their individual workload and a means of communication with patients to help ease any anxiety.

Visual cues indicate that patients are prepared for surgery well ahead of turning up in theatre. Individual patients are represented on the time-lapse screen moving from grey, to white and green when they are ready to go for

the operation. If there are changes or delays the patient displays as yellow or red, which alerts staff to take action.

As is the nature of hospitals, emergency situations and last-minute theatre bookings arise and the Flow Manager has the oversight to be able to add these to the schedule to minimise the impact on activity overall and communicate with all impacted areas of theatres as quickly as possible.

Whereas once a half a dozen phone calls could be made around the hospital to track a single patient's progress, now every staff member involved can see where the patient is at any point in time by checking the Clinical Command Centre screens.

For anxiously waiting family, the ward staff can see where their loved one is located and give updates on when they will arrive back into their hospital room.

The new system will provide advanced analytics on theatre utilisation and allow the hospital to continually improve service delivery for the benefit of patients, staff and doctors. It will deliver greater efficiencies, quality improvements and increased utilisation by surgeons.

The successful implementation of the Clinical Command Centre at St John of God Murdoch Hospital will see this new technology rolled-out across St John of God Health Care's hospitals surgical facilities.

# AWARDING EXCELLENCE 2016-17

At St John of God Health Care, we encourage participation in external awards to benchmark our performance and recognise the professionalism of our people and the services we deliver. These individual, divisional and group achievements ultimately serve to strengthen the communities in which we all participate.

Recipient	Award	Awarded by
<b>St John of God Health Care</b>		
Eleanor Roderick	Excellence in Pastoral Care, the 2016 CHA Awards	Catholic Health Australia
<b>St John of God Ballarat Hospital</b>		
Angela Langdon	Finalist in the Nurse or Midwife of the year category, HESTA Australian Nursing & Midwifery Awards	HESTA
2 West Nursing Unit	Finalist in the Team Excellence category, HESTA Australian Nursing & Midwifery Awards	HESTA
	Finalist in Best Learning Organisation category, National Training Excellence Awards	Australian Institute of Training and Development
Raphael Services	Finalist in Health and Wellbeing Business Award category, Federation Business School Commerce Ballarat Business Excellence Awards	Commerce Ballarat
<b>Hawkesbury District Health Service</b>		
Barry Adams	Local Volunteer of the Year Award 2016	National Australia Day Council
Counselling Team	Quality Improvement category, 2016 Mental Health Matters Award	Mental Health Commission of New South Wales
<b>St John of God Mt Lawley Hospital</b>		
Emma Cook	Finalist in Excellence in Midwifery category, WA Nursing and Midwifery Excellence Awards	Department of Health WA



St John of God Health Care Group Manager Pastoral Services, Eleanor Roderick proudly accepts her CHA award.

Recipient	Award	Awarded by
<b>St John of God Midland Public and Private Hospitals Hospital</b>		
Julie Rakic	Finalist in Excellence in Midwifery category, WA Nursing and Midwifery Excellence Awards	Department of Health WA
Dr James Fitzpatrick	Professions Award, 2017 Western Australian of the Year Awards	Department of Health WA
<b>St John of God Murdoch Hospital</b>		
Private Emergency Department	Finalist in the 2017 Press Ganey Success Story Awards	Press Ganey
Georgia Gazzone	Finalist in the Graduate of the Year category, WA Nursing and Midwifery Excellence Awards	Department of Health WA
Dr Gail Ross-Adjie	Finalist in the Excellence in Research category, WA Nursing and Midwifery Excellence Awards	Department of Health WA
<b>St John of God Richmond Hospital</b>		
Prof Bryanne Barnett	The College Citation	Royal Australian & New Zealand College of Psychiatrists
Wendy Slater	Certificate of Life Membership Award	Pharmaceutical Society of Australia
<b>St John of God Subiaco Hospital</b>		
Prof Steve Webb	Chancellor's Award	The University of Western Australia

# EXCELLENCE IN RESEARCH



At St John of God Health Care, research is fundamental to our goal to be recognised as a leader in the Australian health sector for the provision of high quality healthcare.

As part of a five year strategic focus (2015 -2019), St John of God Health Care aims to increase high quality research that delivers innovation and translates into improvements in health outcomes for our patients. To achieve this, we are committed to collaborative research with experts and pioneers in their field from academia, industry and clinical practice to inform the delivery of best practice healthcare using new protocols, technology and products that improve health outcomes.

## RESEARCH HIGHLIGHTS

We engage in collaborative multicentre research among our own hospitals (56%) and with other organisations within Australia and overseas (44%). Our research governance processes and ethics submission processes are continually refined to ensure the timely start-up of quality research projects.

A total of 172 research studies were approved in 2016-17, ranging from smaller quality improvement and evaluation projects through to larger clinical trials of new medications, devices and therapies.

In 2014, St John of God Health Care approved 73 research projects. This means we have already exceeded the goal we set in *Our Strategic Priorities 2015-2019* to double the volume of research.

Most of the research is in oncology (22%) covering various cancers, including breast, gynaecological, lung, skin, upper GI, and urological. Other strong areas of research include respiratory medicine, orthopaedics, nursing and gastroenterology.

St John of God Health Care seeks to be involved in clinical registries, where the collection of clinical data can be used to monitor care outcomes and improve healthcare practice and policy. During the year, we participated in three new registries, including *National Echo Database Australia (NEDA)*, *Australian Spine Registry Pilot* and the *Victorian Cardiac Rehabilitation Registry Project*.

In 2016-17 most of the research (40%) was conducted at St John of God Subiaco Hospital.

## KEY RESEARCH APPOINTMENTS

- › St John of God Subiaco Hospital appointed two new research fellows, Dr Ciara Daly working in oncology and Dr Phil Craven working in respiratory medicine.
- › St John of God Subiaco Hospital established a research management committee, chaired by Director Clinical Trials, Steve Webb, to grow and integrate research into all aspects of the hospital.
- › St John of God Murdoch Hospital appointed a Research Operations Manager, Dr Steve Edmondston.
- › St John of God Midland Public and Private Hospitals' Central Sterile Services Department Manager, Lee-Ann Spencer, was appointed a Member of the Federal Sterilizing Research Advisory Councils of Australia.
- › St John of God Bunbury Hospital commenced a Bariatric Research role.

Figure 1: Number of new St John of God Health Care research proposals per year

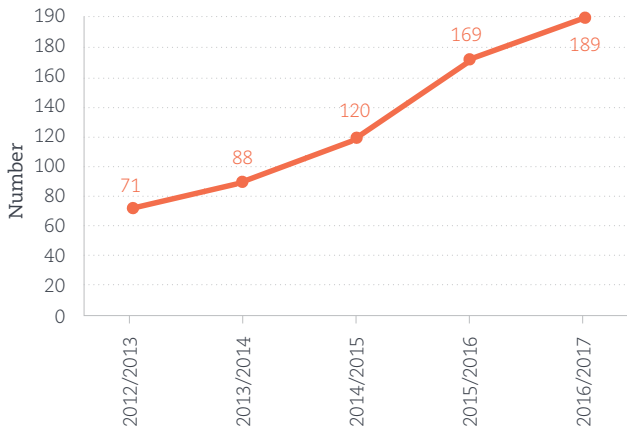


Figure 2: St John of God Health Care approved research studies per financial year

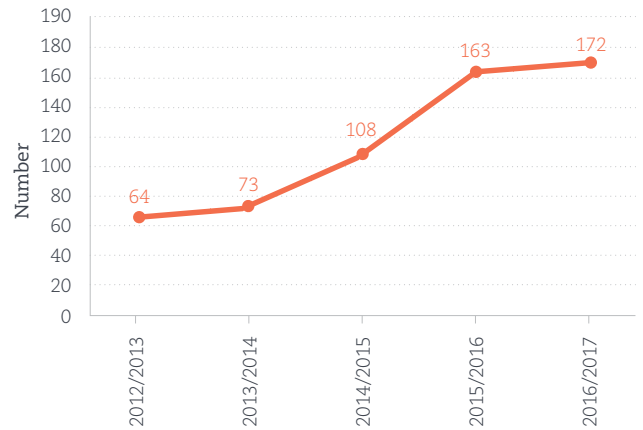


Figure 3: Research studies by division

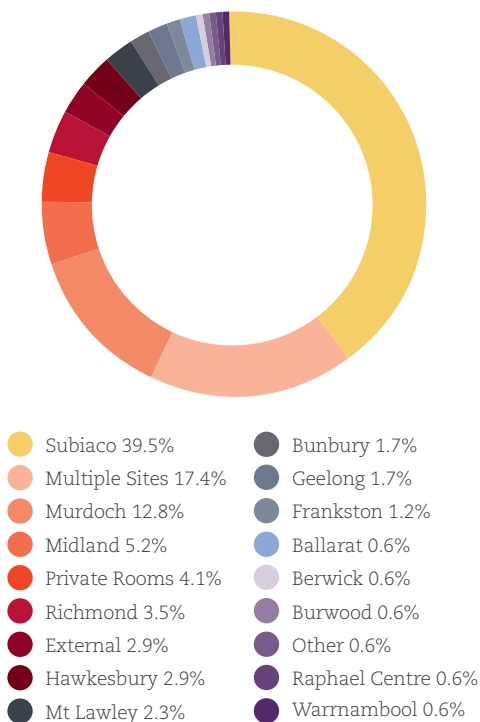
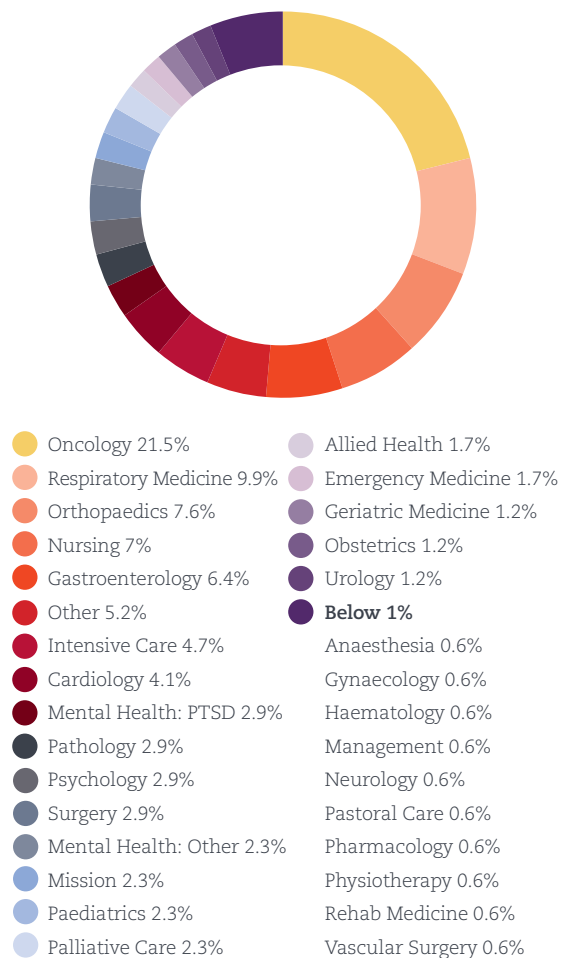


Figure 4: Research studies by specialty area



Head of Obstetrics and Gynaecology at St John of God Subiaco Hospital and President of the Federal Australian Medical Association, Dr Michael Gannon is a co-investigator on a maternal vaccine trial for respiratory syncytial virus (RSV).



## **NURSING AND MIDWIFERY RESEARCH**

The nursing research studies commenced throughout the year have focused on ongoing skills development and resilience in the workplace. There were also new research studies examining patient experiences and specific patient management issues relating to cognitive impairment and cancer.

Many of these studies are being undertaken by St John of God Health Care nursing caregivers - for some as part of their postgraduate studies (Masters and PhD degrees) and for others the research is being conducted in collaboration with local universities. For example, one of our nursing caregivers at St John of God Subiaco Hospital is examining resilience of nurses as part of her PhD research. It is expected that the findings of this study will contribute to establishing how the values of an organisation can foster resilience in nurses, and in turn support the retention of nurses within the organisation.

Another study, led by a nursing caregiver at St John of God Murdoch Hospital, aims to determine the incidence of falls and the development of pressure injuries in patients with cognitive impairment.

The Centre for Nursing and Midwifery Research at Murdoch Hospital has also embarked on the following studies:

- › Symptom burden among patients admitted to a Specialist Palliative Care Unit for end of life care: a Western Australian PCOC study.
- › Improving Whole Person Care: A mixed-method study which explores the role of the enrolled nurse within a team nursing model from the perspective of enrolled and registered nurses.

- › A cross-sectional study to establish: the supportive care and health literacy needs of cancer patients undergoing chemotherapy treatment in a private cancer centre (cancer survivorship); the experiences and needs of family carers, patients and healthcare professionals across Western Australian palliative care services; and gaps in service delivery.

## **PASTORAL SERVICES**

Building a research culture in pastoral services is important to determining the effect of caring for a person's emotional, spiritual and religious needs on improving their wellbeing and personal outcomes.

In 2016-17, a paper from St John of God Murdoch Hospital entitled 'How patients experience pastoral care in a tertiary hospital setting' was published in the *Journal of Pastoral Care & Counseling*, and St John of God Burwood submitted a paper to the *Health and Social Care Chaplaincy Journal* entitled 'Patients experience of pastoral care in a mental health hospital'.

In addition to this, St John of God Pinelodge Clinic has been conducting research to evaluate the group-based pastoral care program and expects to publish its findings in 2017-18.

St John of God Bendigo Hospital has been undertaking research on 'What Spirituality Means for People in Acute Health Care' as part of a larger study to develop and test an Australian model of evaluating the value of spiritual care for consumers, and has also undertaken a study of music therapy in a pastoral context.

At a group level, St John of God Health Care is undertaking a project across five sites – St John of God Pinelodge Clinic and St John of God Berwick, Bendigo, Frankston Rehabilitation and Murdoch Hospitals – to study the emotional and spiritual domains of whole person care, using a two-part mixed methods (qualitative and quantitative) research methodology.

## **ACUTE HOSPITALS**

### **St John of God Subiaco Hospital**

St John of God Subiaco Hospital is one of the most active hospitals in research, among both public and private hospitals in Western Australia.

Its vision is to be an academic hospital that provides the highest quality patient care, while conducting and integrating effective and efficient research.

### **Highlights**

- › Research Management Committee established comprising hospital executives and several lead investigators, and Professor Steve Webb nominated as the inaugural chair. The committee provides research leadership and ensures the management of research funds and delivery of quality patient care is in accordance with the Mission, philosophy and Values of St John of God Health Care.
- › The recently established Inflammatory Bowel Disease (IBD) Unit, led by Professor Ian Lawrance, now has four key projects underway, as well as involvement in eight international clinical trials. An IBD fellow has been appointed, the first in the private sector.
- › Colorectal Cancer Postdoctoral Research Fellow Dr Melanie McCoy was awarded a *Suzanne Cavanagh Early Career Investigator Grant* of \$34,279 by the Cancer Council WA for the project entitled 'Could immune checkpoint blockade improve response to chemoradiotherapy in locally advanced rectal cancer?'

- › The WA Thoracic Research Group was established this year from funds donated by the Bendat family. The group is led by renowned Respiratory Physician, Professor Eli Gabbay whose two main focus areas for the group is the WATRG Biospecimen Bank, which involves the collection and storage of donated specimens for future use in research, and ongoing research projects to improve patient care and outcomes in the respiratory and oncology fields. Two fellows were appointed to support the group.
- › The Anaesthesia and Pain Unit continued to be the top recruiting site in the world for the PADDI study and top recruiting site in Australia for BALANCED trial.
- › The hospital received funding to open a Breast Cancer Survivorship Clinic to help patients treated for breast cancer. It assists patients who are within one year post-chemotherapy and/or radiotherapy treatment and includes free wellness programs to help patients thrive.
- › Director Gynaecological Cancer Research Group, Dr Paul Cohen is the principal investigator for an international multicentre prospective randomised pilot study to compare excisional treatments for adenocarcinoma-in-situ of the uterine cervix. The Australia and New Zealand Gynaecological Oncology Group have funded this trial.
- › St John of God Subiaco Hospital has joined over 30 sites around the country, together with BioGrid Australia, to collect data on the presentation and disease course of metastatic colorectal cancer, surgical interventions for primary and metastatic disease, and prescription of systemic therapies, including how they are combined with biological drugs. This has provided much needed information regarding the multidisciplinary management and outcomes of this disease in routine clinical practice.
- › The Colorectal Cancer Research Group have successfully established laboratory methods for identifying multiple types of cells in the same tissue section. This allows the group to conduct further cutting-edge research into the immune response to colorectal cancer. The image entitled 'The World of Tumour Immunology' (below), which showcases this technique, won first prize in the 2017 Australasian Society of Immunology 'Snapshots of the immune system' national scientific photography competition.
- › Within orthopaedics, the first MAKO total knee replacement was performed in December 2016 and by the end of June 2017, 120 patients had received a total knee replacement using the Stryker MAKO robotic surgical arm. The MAKO Registry, which captures outcome data relating to knee replacements, is expected to be complete by 2018. Currently 125 patients have undergone partial knee replacements in this registry.
- › A number of clinical trial safety and compliance initiatives have been implemented that focus on training and teaching, including research investigator-initiated research study safety and risk mitigation programs, pre-audit programs, internationally accredited transcelerate Good Clinical Practice (GCP) and research ethics on-site training.

#### **St John of God Murdoch Hospital**

2016-17 has seen significant growth in research at St John of God Murdoch Hospital, reflecting the capacity of the hospital to support research, and the motivation of the principal investigators to incorporate research into their clinical practice.

#### **Highlights**

- › There has been significant growth in Oncology Clinical Trials, which support access to innovative treatments for some of the most common cancers. Current trials of immunotherapy and gene-directed therapies are delivering impressive results. Clinical trials promote important industry partnerships, and these collaborations are growing as the Murdoch Oncology Clinical Trials Unit has built a strong reputation for conducting high quality research.
- › Two orthopaedic research officers were appointed to support ten clinical trials. The focus of research is on patient-centred management and innovative approaches to evaluating patient outcomes. Professor Piers Yates was awarded the Johnson & Johnson Orthopaedic Fellowship to support orthopaedic surgery training and research.
- › The Intensive Care research group is hosting a number of multicentre clinical trials examining management of key clinical issues including patient nutrition, septic shock, oxygen therapy and early mobilisation.
- › A sponsored cardiology clinical trial commenced to evaluate a new left atrial implant designed to reduce the risk of thromboembolism in patients with atrial fibrillation.
- › The emergency medicine research team is initiating and collaborating in clinical trials in pain management and pre-hospital care. The team completed the CTPAINED study, which assists in developing a national standard for the use of CT pulmonary angiography in emergency departments.

## MENTAL HEALTH HOSPITALS

### St John of God Burwood Hospital

St John of God Burwood Hospital retains a strong focus on perinatal mental health research and clinical excellence through its Perinatal Women's Mental Health Unit under Prof Marie-Paule Austin, Chair of Perinatal and Women's Health.

In 2016-17, Professor Austin and her team co-authored four peer-reviewed publications and presented the findings at the International Marcé Society Conference in Melbourne in October 2016.

Other highlights include:

- › Completion of the first Australian study to report on post-discharge clinical and parenting outcomes for women admitted to the Mother and Baby Unit.
- › Continued leadership of the Perinatal Integrated Psychosocial Assessment (PIPA) project, in partnership with NSW Health. Results will inform maternity services' planning and guide efforts to maximise health system efficiency and sustainability.
- › Continued leadership of a national "big data" perinatal project, funded by the National Health and Medical Research Council, examining the impact of the 2009 National Perinatal Initiative. Results from this landmark research were cited in the '100 Positive Policies' Policy Agenda in August 2016. In addition, national data items for psychosocial assessment during pregnancy developed as core component of this project have been included in an agreed set of priority data items for improving national data collection (Australian Institute of Health and Welfare 2016).

### St John of God Richmond Hospital

St John of God Health Care, in partnership with the University of New South Wales and the Black Dog Institute, established a five year program of trauma and mental health clinical research (2014-2018). The foundation Professorial Chair of Trauma and Mental Health, Prof Zachary Steel, based at St John of God Richmond Hospital, was appointed in March 2014. He has been joined by a group of leading researchers including Dr David Berle, Dr Simon Rosenbaum, Dusan Hadzi-Pavlovic and Ruth Wells.

Since commencement, the Trauma and Mental Group have published more than 70 peer-reviewed research outputs, co-published new national guidelines for the management of post traumatic stress disorder among emergency service workers and presented at more than 50 international and national conferences and symposia. The group have attracted \$3.8 million in research funding since 2014 and are supporting a wide range of research projects in Australia and internationally, including among mothers and children in Timor-Leste and displaced Syrian refugees in Jordan.

During 2016-17, Dr Simon Rosenbaum and Dr David Berle were successful in obtaining competitive National Health and Medical Research Council Research Fellowships, with Dr Rosenbaum also being awarded a prestigious University of New South Wales Scientia Fellowship. Within Richmond Hospital, the group supported Kिरrily Gould to complete an open trial of the benefits of targeted exercise in helping patients with Alcohol Use Disorder manage the impact of cravings, which has established this as an effective alternative to medication. Andrew Chen has commenced a project examining the association between post traumatic stress disorder, measures of fitness and daily functioning, which will help extend a strong program of research into the role of physical activity in improving mental health.

A focus of the group's research program is also an investigation into the processes of change that occur for individuals attending the St John of God Richmond Hospital post traumatic stress disorder recovery program. This complements a broader program of research into the nature of psychological trauma that aims to improve treatments and outcomes for individuals experiencing this disorder.

### Arts and health research

St John of God Health Care continues to contribute to arts and health research, with three papers presented at international conferences:

- › *'The Impact and Effectiveness of the Creative Arts Project at St John of God Mt Lawley Hospital'*, at the 2016 International Congress on Innovation in Nursing.
- › *'Singing with your Baby: a feasible, acceptable and effective addition to the Burwood Mother and Baby Unit'*, at the 2016 International Marcé Society Conference and the 2016 International Arts and Health Conference.
- › *'Viva Voices: The impact and effectiveness of participatory music workshops at St John of God Frankston Rehabilitation Hospital'*, at the 2016 Australian Rehabilitation Nurses Conference.

Based on recommendations from St John of God Mt Lawley Hospital's Creative Arts Project, the *CARTWHEELS Mobile Arts Studio* has been successfully established across St John of God Mt Lawley and Geelong Hospitals in day oncology, medical oncology, mental health, palliative care, paediatric and rehabilitation units.

The *CARTWHEELS* program will expand to St John of God Bendigo and Berwick Hospitals next year.

# EXCELLENCE IN EDUCATION AND TRAINING

## **MEDICAL EDUCATION AND TRAINING**

St John of God Health Care continues to provide the highest standards of training and education opportunities for medical students and doctors-in-training in metropolitan and regional locations, as a fundamental contribution to a sustainable and highly skilled Australian medical workforce.

The organisation continues to support and participate in the Specialist Training Program (STP) in collaboration with specialist medical colleges, state and territory health departments, and public health services. The organisation continues to partner with universities across Australia and supports medical teaching for university undergraduates within many of our hospitals. We provide students with a wide range of learning opportunities within medical and surgical specialties including psychiatry, anaesthetics and emergency medicine.

Following a recent Commonwealth review of the current STP program, including the Emergency Medicine Program (EMP), and Emergency Department Private Sector Clinical Supervision Program (EDPSCS) components, there have been no new positions on offer over the past 12 months.

However, there is a commitment to continuing the STP Program for a further three years to 2020. St John of God Health Care applauds this decision, supports the program and looks forward to continuing to work with the Commonwealth, the Medical Colleges and various State Government agencies, to ensure the continued success of this important initiative.

In 2016-17, St John of God Health Care sold its pathology operations to Clinical Labs. This resulted in the transfer of eight training positions under the STP Program to Clinical Labs, resulting in a reduction of positions under St John of God Health Care. Over the period July to December 2017, and in line with government reforms, we expect that internal reviews may occur within our organisation, with the effect of some fluctuation to current positions.

## **NURSING AND MIDWIFERY**

### **Nurse Manager Program**

The Nurse Manager Program aims to support our caregivers in achieving clinical excellence in what is a complex role in our organisation.

The curriculum emphasises participation, teamwork and practical application of theory. Using a coaching approach, in combination with face-to-face workshops, it is designed to energise nurse managers to drive a culture of high engagement and a focus that will assist leaders to become more efficient.

The program is now supported by The University of Notre Dame and all graduates are awarded a Graduate Certificate in Nursing Leadership and Management.

Eleven caregivers were accepted into the program this year. Caregivers who were not accepted were offered coaching and have the option of applying for next year's program.

The Nurse Manager Program will be running in the East only in 2018 and back in Western Australia in 2019.

During the year, progress was made in providing nurse manager education in regional areas.

### **Paediatric Life Support education**

Since 2013, St John of God Health Care has run Paediatric Life Support training, a one day internationally accredited intermediate life support course focusing on the skills required to manage a critically ill or injured child in the first ten minutes after presentation.

This year, 240 caregivers completed the course, up from 180 the previous year.

The course aims to develop nurses' confidence in undertaking clinical assessments of paediatric patients, and enhance airway skills and resuscitation capabilities to improve patient outcomes.

## GRADUATE NURSE PROGRAM

Since 2015, St John of God Health Care has run a state-wide graduate nurse program in Western Australia called Pathways to Practice. The program offers graduates the opportunity to rotate to different hospitals and across specialties.

In 2016-17, we adopted a standardised approach to the end-of-program process to ensure a fair appointment process for graduates to permanent positions across all hospitals. Graduates will be able to apply for advertised positions before completing their program.

Plans to recruit graduates, who have completed their one-year program, into a coaching/ mentorship role for new graduates will be explored in 2017-18.

## PASTORAL SERVICES EDUCATION

The Graduate Certificate in Liberal Arts (Pastoral Placement) is offered by The University of Notre Dame Australia. The course involves the completion of four core units at 500 level - philosophy, pastoral theology foundations, ethical issues in professional life and a pastoral practicum placement. The pastoral practicum placement will be known as the Pastoral Supervised Immersion Experience, which will be an experiential learning program offered at all Western Australian and New South Wales services.

The Graduate Certificate in Liberal Arts (Pastoral Placement) offers the opportunity for:

- › Caregivers currently working in pastoral services to obtain a tertiary pastoral qualification
- › Building a recruitment pool to address succession planning
- › Recognising pastoral services as a professional calling.

### Graduate registered nurse places

2013	2014	2015	2016	2017
104	129	126	116	114

### Graduate enrolled nurse places

2013	2014	2015	2016	2017
35	69	66	73	89

### Registered nurse student days

2012	2013	2014	2015	2016
26,375	27,773	26,137	36,366	45,852

### Enrolled nurse student days

2012	2013	2014	2015	2016
7,885	7,701	9,293	8,403	12,755

This relationship with Notre Dame is a great example of our Mission in action, strengthening partnerships with the Church.

St John of God Burwood Hospital offers placements to seminarians from Good Shepherd Seminary, Homebush to assist in their formation for the priesthood, particularly in exposing them to working with people undergoing psychiatric treatment. The seminarians spend three hours per week over 12 weeks at the hospital.

We demonstrate leadership in areas such as:

- › Developing ways to measure the efficacy and effectiveness of pastoral provision
- › Contributing to research with a focus on optimising patient and family outcomes.

*Our graduate nurse program provides a supportive and caring environment for nurses starting out in their careers.*



# PEOPLE

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# PEOPLE



St John of God Health Care invites people from all faith traditions to be part of this Catholic healing ministry and to see their role as making a worthwhile contribution to themselves and their communities.

Reflecting this belief is our practice of referring to our staff as caregivers because, regardless of their role, every person contributes to the health and wellbeing of the people we serve.

Our aim is to continue the healing mission of Jesus Christ through services that promote life to the full. As our organisation grows and changes, we extend the education of all caregivers in relation to our Mission, Values and heritage, enhancing our culture of providing excellent, compassionate, Mission-inspired care.

## MISSION INTEGRATION

After an extensive review of the Mission Management Model, the Trustees handed down their recommendations for the integration of Mission across the organisation. Of significance was that the organisation enhance its commitment to its Mission through shifting its focus from mission leadership to mission integration. This change reflects a focus on the processes and culture of the organisation, through which the Mission and core Values of St John of God Health Care become part of the fabric of the health system.

The Director Mission Integration will support the sustainability of the system's Catholic identity across all services, and interact with the executive team as a resource to enable the integration of Mission into their areas of responsibility. Mission influence guides the strategic planning, finances, human resources policies, clinical care and all other aspects of the life of the health system.

Implementation of the Mission Management Model Review recommendations commenced with the appointment of Group Director Mission Integration. Other actions included the renaming of the Board Formation Committee to Board Mission Integration Committee, and review of its Terms of Reference. This committee has responsibility for the governance over implementation of the review recommendations.

A trial program, *Developing a Culture of Ethical Practice*, has been conducted across the organisation in the past year. Directors of Mission, facilitators and external content experts collaborated in the development of the program. Participants have responded favourably to the program, remarking that they have been able to incorporate what they have learned into the processes and decision-making of their work setting.

Other innovative approaches to Mission integration have included ongoing cultural alignment at St John of God Berwick and Bendigo Hospitals, Hawkesbury District Health Service and Hauora Trust.

In preparation for workforce increases at St John of God Berwick Hospital, caregivers produced a video focused on compassionate care. St John of God Bendigo Hospital also developed an educative video for use in orientation and formation sessions.

At Hawkesbury District Health Service, Mission integration combined aspects of the Reconciliation Action Plan, the arts and health strategy and the cultural alignment strategy, when local

Indigenous elders created the first piece of art for the new art hanging area in the hospital.

Mission integration focused on promoting our Catholic identity at St John of God Hauora Trust through a partnership with New Zealand artist Elizabeth Minato.

The focus for Mission integration in the year ahead includes:

- › Finalise the structure, roles and titles of those appointed to Mission leadership
- › Develop a cohesive, robust and standardised approach to Formation
- › Position descriptions at every level of the organisation to have explicit Mission KPIs
- › Establish the Mission Directorate
- › Enhance the commitment and understanding of every leader that the work of the organisation is undertaken as a ministry of the Church, to be held in trust every day
- › Reinvigorate the organisational culture of vitality and integrity
- › Review recruitment systems and processes to ensure leaders continue to be identified
- › Review role statements to include Mission accountabilities of each caregiver
- › Evaluate the effectiveness of formation programs.



↳ We refer to all of our employees as caregivers in recognition of the valuable contribution everyone makes to the health and wellbeing of those we serve.

## **FORMATION**

St John of God Health Care offers formal and informal opportunities for formation at every level of the organisation. Having assisted The University of Notre Dame Australia to develop the new Graduate Certificate in Catholic Leadership, St John of God Health Care caregivers have participated in the trial program. The initial response has been uniformly positive, which is very encouraging for both organisations.

During the year, about 540 senior leaders and managers participated in formal formation programs, including the reviewed Mission Mentoring program and the pilot of the new Developing a Culture of Ethical Practice.

About 3,500 frontline caregivers participated in formation programs, with many undertaking the Many Faces, One Story series.

## **WORKFORCE**

There was continued focus on the second year of our Workforce Strategic Plan, with notable achievements including:

- › Completion of the Learning and Organisational Development review and commencement on the associated redesign program
- › Development and implementation of an organisational approach to pre-employment assessment and fitness to work, including appointment of a single occupational physician service and online pre-employment medical booking processes
- › Enterprise agreement harmonisation resulting in a reduction from 25 to 15 agreements across the organisation
- › Significant workforce activity and analysis to support several transformation programs

- › Areas where achievement has been deferred to the next financial year:
- › Identification of an organisational rostering, time and attendance system
- › Strengthening partnerships with education providers relating to student placements
- › Creation of clinical and non-clinical career pathways.

The sale of St John of God Pathology was a key activity for the Group Workforce team and the Pathology-based human resources caregivers. It involved coordinating the transfer of 1,157 caregivers within Victoria and Western Australia, resulting in more than 95% of caregivers commencing employment with Australian Clinical Labs in November 2016.

Workforce activities have now commenced to transfer the 111 staff from the recently acquired Marillac Limited to St John of God Accord.

In addition, significant activities have been undertaken by the Recruitment and Human Resources, Industrial Relations and Payroll teams to support new structural changes.

## **WORKFORCE PROFILE**

The total number of caregivers as at 30 June 2017 across the group was 13,315 (8,023 full time equivalent). The workforce profile breakdown is 48.74% nurses, 19.36% patient care or support, 18.98% administration, 8.67% health professionals and 4.24% medical officers.

## **CAREGIVER SATISFACTION**

The organisation continues to place a strong focus on caregiver engagement and it measures this by the results of a confidential survey conducted by external surveyor Press Ganey every second year.

While we will continue to benchmark with other external healthcare organisations both nationally and internationally, we also monitor our performance against our own internal aspirational targets to ensure that all our caregivers benefit from working in a highly engaged environment.

This survey will be conducted in August 2017, with revised questions, and for the first time will include Hawkesbury District Health Service.

## **PARENTAL LEAVE**

The group parental leave policy has been revised. A total of 551 caregivers commenced parental leave in 2016-17 and of the caregivers due to return to work, 84% returned.

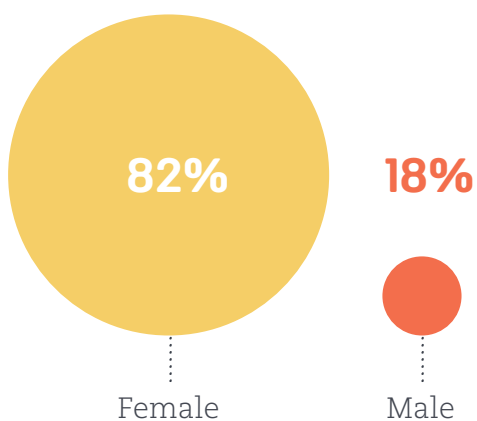
## **EQUAL OPPORTUNITY**

St John of God Health Care is an inclusive organisation and recognises the contribution of all caregivers based on skill, expertise and experience and not on gender, race, ethnic origin or sexual preference. In accordance with the requirements of the Workplace Gender Equality Act 2012, St John of God Health Care lodged its 2016-17 annual public report with the Workplace Gender Equality Agency.

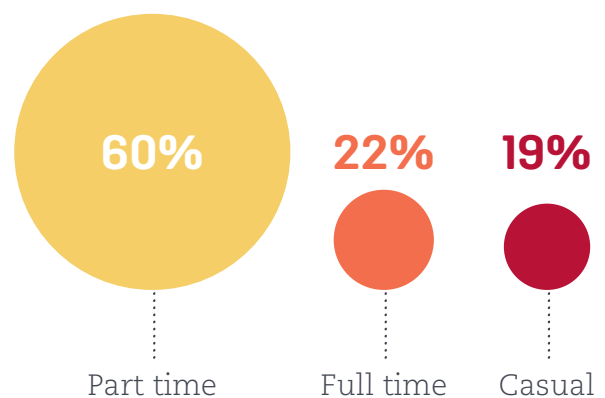
### Workforce numbers by division

Division	WA	VIC	NSW	Timor-Leste	New Zealand	Total
Accord		479				479
Ballarat		823				823
Bendigo		635				635
Berwick		436				436
Bunbury	593					593
Burwood			225			225
New Zealand					276	276
Frankston		219				219
Geelong		1037				1037
Geraldton	173					173
Group Services	455	133	8			596
Hawkesbury			582			582
Health Choices	54	75				129
Midland	1884					1884
Mt Lawley	585					585
Murdoch	1749					1749
Outreach Services Ltd	75	79	20	10		184
Pinelodge		170				170
Richmond			198			198
Subiaco	2156					2156
Warmambool		186				186
<b>Total</b>	<b>7724</b>	<b>4272</b>	<b>1033</b>	<b>10</b>	<b>276</b>	<b>13315</b>

### Workforce gender profile



### Employment status



### Reconciliation Action Plan

An objective of the organisation's Reconciliation Action Plan is to create employment opportunities for Aboriginal and Torres Strait Islander peoples. Over the past three years, we employed 68 Aboriginal and Torres Strait Islander caregivers, and 40 remain in roles across the organisation.

An Indigenous Internship program, in partnership with CareerTrackers, continued into its fourth year. During the past three years, we have placed 19 Aboriginal university interns within our hospitals and are looking forward to placing six interns (including four new students) in the summer of 2017-18.

### Disability Access and Inclusion Plan (DAIP)

The current DAIP is 80% complete, with the Disability Reference Group currently working on its next iteration.

Employment of people with disability continues to be a priority, with applicants registered with a Disability Employment Service considered for interview. In 2017, we received 149 applications via this process and employed 12 caregivers with a known disability. A new collaboration agreement was established between Berwick Hospital and its local Disability Employment Service, the fourth such agreement now in place across the organisation. While our agreements with Disability Employment Services are focused on creating employment opportunities for people with disability, they also ensure ongoing support for our new caregivers to be successful in their new roles.

Mental Health First Aid workshops were held to support caregivers gain an informed understanding of the nature and impact of mental health and develop expertise in making a pastoral response to those who exhibit or declare a mental health issue within the workplace or the community. A total of 131 managers across four sites completed the course and 61% of participants identified an immediate impact within their current work and

private life. The workshops rated a net promoter score of 65 in response to the question of how likely is it that they would recommend Mental Health First Aid to a friend or colleague.

A resource created in collaboration with people with disability is available on our intranet to assist caregivers with meeting the requirements of people with disability who are receiving care in our hospitals or other services.

## EMPLOYEE BENEFITS

We support the professional and personal lives of our caregivers through remuneration and non-financial benefits. Benefits in addition to career and educational opportunities include employee assistance programs, subsidised wellness programs and salary packaging opportunities.

The annual Employee Assistance Program utilisation for the past 12 months was 4%, assuming an average of 13,500 employees, which is below the industry benchmark.

We revised the group's salary packaging policy and 60% of eligible caregivers accessed salary packaging benefits in 2016/17.

## WORKFORCE PLANNING

Workforce planning activities remain a key focus of the Group Workforce team, supporting identification of and addressing opportunities and needs. Current areas of focus include workforce planning for the new St John of God Berwick Hospital where a net increase of 200 caregivers is required, finalisation of the integration of Marillac Limited and supporting workforce structural redesign across the organisation to align with activity levels and strategic priorities.

The Organisation's Workforce Analyst has undertaken significant work to develop and refine reports and tools to support leaders and managers to coordinate their workforce day to day and to forecast future needs.

Throughout the year, nine new reports were created, replacing 68 previous reports, making it easier for unit managers to access their workforce information in a concise and consistent manner.

The ongoing customisation and development of human resources managerial data and tools is a key activity for the upcoming year.

## INDUSTRIAL RELATIONS

By the end of the financial year all enterprise agreements in Western Australia were renegotiated, removing the many transitional instruments and reducing the overall number of agreements in Western Australia from 13 to five.

All processes have ensured that St John of God Health Care caregivers remain competitively paid within the wider health industry and have access to an attractive and comprehensive set of terms and conditions of employment. The industrial relations service will conduct communication sessions to ensure the flexibility of the agreements can be maximised.

The industrial relations service played a key role in ensuring the smooth transmission of St John of God Pathology to Australian Clinical Labs in October 2016. A dispute before the Fair Work Commission by the Medical Scientists Association of Victoria was dismissed, with the Commission finding that we comprehensively met our obligations toward our caregivers in the sale process. Relationships with unions across the country continue to be sound.

The industrial relations focus will turn to creating and maintaining ongoing engagement with unions away from the negotiation environment. Such activities aim to assist both parties to understand the drivers of change within the healthcare industry, enabling collaborative and cohesive solution development. There will also be an increased focus on ensuring managers are aware of parameters

within enterprise agreements that will enable them to organise work with maximum efficiency.

## **PAYROLL**

Our payroll service has started work on initiatives to create a highly functioning organisation-wide payroll department for all business stakeholders and caregivers. In the past 12 months it has developed a maturity model, optimised its caregivers and nearly completed centralising the organisation-wide payroll function in the town of Ballarat.

Looking ahead, the payroll service has developed an aspirational program and Project Camillus/Payroll Optimisation initiatives will dominate the payroll landscape. The intention of these transformational activities is to review and streamline all payroll business processes, including key dependencies from the operational and group services functions. Its aim is to replace time sheets with a rostering, time and attendance system, as well as develop other systems and refine processes to provide a scalable, consistent and agile service to the organisation

## **RECRUITMENT AND HUMAN RESOURCES**

Recruitment and Human Resources services, spurred by the ever-increasing volume of forms, commenced working with Group Finance and Information Services on a pilot program for electronic workflow. The pilot aims to ensure timely and complete submissions and reduce the use of paper-based processes.

To simplify and streamline bulk recruitment campaigns, an early screening tool was created to deliver a structured, transparent and consistent process for all candidates. A key tool in the new process is video that enables candidates to complete an interview in their own time, using a computer or mobile device. Managers then review a shareable record of the interview, with tracked comments and ratings. This

reduced first round screening times and increased the calibre of candidates progressing to interview. Two pilots have been successfully completed, with plans to roll out the system to other bulk recruitment drives.

Recruitment and Human Resources are working on a process to automate Working with Children licence reminders using an in-house-built system. The system sends personalised individual communications to caregivers through digital technology via SMS or email. We are looking to further leverage this technology for health practitioner registration renewal reminders and other compliance requirements.

## **OCCUPATIONAL HEALTH, SAFETY AND WELLNESS**

Last year we commenced our renewed focus on safety, with the theme of 'Good to Great'. The nucleus of this came from our Board Chairman, who provided a call to action to take our 2011-2015 OHS strategy forward.

Our leaders were supported in their primary aim to demonstrate great safety leadership. Group CEO, Dr Michael Stanford set the scene for administrative support areas by performing a 'rounding' of our group services office in Perth. The feedback by caregivers was positive. Other executive directors and CEOs led their own 'roundings' with great success.

We had our AS/NZS 4801 and OHSAS 18001 certification reconfirmed for another three years, further demonstrating our commitment to the safety of our workplace.

As part of our quality and continuous improvement action, we commenced a new audit program conducted by an internal audit team and an external auditor. The internal audit team is able to build its understanding of OHS initiatives in our services and has the capacity to share learnings across the group. The external auditor is then able to focus on key areas of improvement in our safety performance.


OHS teams across metropolitan Perth were reviewed, leading to the appointment of caregivers to 15 roles in four hospitals. The restructure and refocus of these roles will assist managers deliver the Good to Great strategy.

Our eLearning modules were updated to reflect our coaching and safety leadership. The updated training modules are Slips Trips and Falls, OHS for Managers and OHS for Caregivers.

An organisation-wide agreement was established with our Employee Assistance Program provider, Converge, who provide a national service. Each quarter we receive reports that provide an organisation-wide view of what services are utilised in supporting our caregivers to safely and anonymously manage their life balance.

As part of National Safety Month in October, our sites nominated innovative safety solutions and two finalists were selected. St John of God Murdoch Hospital was recognised for its internet-based contractor induction process to overcome issues associated with training, site induction status and verification, and ensuring minimum safety standards are adhered to by contractors and service providers.

Group Services in O'Connor were recognised for keeping their OHS skills current by establishing a routine, where each Monday morning a Standard Operating Procedure is selected from Group Supply's OHS Skills Matrix and is discussed openly with all caregivers with a demonstration on how to complete the task safely.



Jennifer Stratton Scholarship  
recipient, Glen Melbourne has  
a terrific bond with long-term  
Accord client, Sam Beke.

# MATESHIP AT WORK CAPTURES SCHOLARSHIP PRIZE

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St John of God Accord's Glen Melbourne is a humble guy, making a big difference to the lives of clients with disabilities and their families who come to St John of God Accord for respite, as well as the caregivers who work alongside him.

When Glen received the news he was the 2017 Jennifer Stratton Scholarship winner he was characteristically modest.

"You think you just do your job, you don't think you are even being noticed or that what you do will catch anyone's eye," Glen said.

The annual Jennifer Stratton Scholarship prize recognises a single caregiver for how they demonstrate the Vision, Mission and Values of St John of God Health Care in their everyday work.

Glen has been a respite team leader at St John of God Accord for 11 years "giving clients a home away from home for a short period of time and providing Mum and Dad with a break."

It was a huge career shift for Glen who'd come from building mud brick homes for a living.

"I'd never worked with people with disabilities before but thankfully I wasn't thrown into the deep end. I was given extensive training and transitioned to be introduced just nicely," Glen said.

"I've seen young clients grow into adults and it is amazing to reflect on being part of their lives for such a long journey.

"I've seen dramatic changes in them and developed strong relationships with their families, which is such an important element of our care.

"Professionally, the bond you develop with your clients is that of a carer but over long periods of their lives you can't help but develop a friendship – that's life. A mateship I'd call it! Ex-clients who now live independently will drop in for a quick coffee and to say g'day."

Glen credited his colleagues for demonstrating the values in action every day.

"It's a really stable working environment, which says something very positive about the program. Out of the seven staff, four have been here longer than I have.

"You do see positive changes in people's lives – it's very rewarding, that's why we have longevity.

"A respite house is created by its staff and the presentation of the facility – our people create the positive and consistent environment for our clients.

"It goes back to the Values of St John of God Health Care of always being hospitable and showing a lot of empathy," Glen said.

As the 2017 Jennifer Stratton Scholarship winner, Glen will join a pilgrimage to Spain and Ireland and retrace the steps of Saint John of God and the founding Sisters of St John of God.

## Monitoring performance

Over the past year, we introduced 'insights reporting' to better understand incident causal factors, workforce make up, incident duration, close out of investigation recommendations and the close out of solutions to manage hazards.

The year ahead will provide an opportunity to continue to develop insight reporting, along with information that will be provided through the introduction of a new incident management system, Riskman. The Riskman system has been tested for usability and delivery in preparation for implementation in 2018.

These initiatives will further support our key safety performance indicators in Lost Time Injury Frequency Rates (LTIFR).

	2016/17	2015/16	Variance %
Direct hours worked (million)	14.456	14.055	▲ 2.8%
Lost Time Incidents	135	137	▼ 1.5%
LTIFR	9.34	9.75#	▼ 4.2%
Days Lost	698	1124	▼ 37.9%

# 2015-16 revised figures following external audit

## Injury frequency rates

As part of the Good to Great strategy, we continue to encourage early reporting and intervention for injuries in the workplace. Following an external audit that we initiated, we saw an amendment to the 2015-16 LTIFR. This audit assisted the organisation to clarify reporting definitions.

With an increased focus on early reporting and increased early intervention, there was a slight reduction in the 2016-17 LTIFR: 135 caregivers suffered a lost time injury compared to 137 last year. There has been a significant decrease in time lost due to injury, with a 37.9% decrease in time away from work. We attribute this to our proactive early intervention processes and stay-at-work focus.

The other benefit from this strategy has been a continued positive impact on our Workers Compensation insurance premiums, which have decreased in Victoria by 45% in two years. We have also seen an improvement in New South Wales.

The year ahead will see us add a new measure to our safety rates – that being medical treatment injury frequency rate (MTIFR) – as well as a return-to-work measure to provide emphasis on stay-at-work programs.

## Manual handling

We undertook a review of all patient manual handling tasks across the organisation using the industry-leading methodology established by Louise O'Shea. This resulted in a reduction in standard manual handling tasks from 70 to 25. A plan has been developed to roll out and refresh the Louise O'Shea approach in Western Australia.

## Workplace wellness

St John of God Health Care has a well-established approach to Workplace Wellness. Our focus is on ensuring our caregivers care for themselves as they care for others. The health and wellbeing of our caregivers remains a key focus in our ongoing health, safety and wellness ambition.

A calendar of events established by Workplace Wellness included group-wide participation in RUOK? Day in September and Australia's Biggest Morning Tea, among other initiatives. A photo competition promoted wellbeing, with caregivers encouraged to submit images of 'What Does Wellbeing Mean to Me?'

Workplace Wellness worked with St John of God Ballarat Hospital to establish a Healthy Options Program to increase the availability of healthy food for caregivers and visitors to the hospital.

## LEARNING AND DEVELOPMENT

An extensive review of our learning and organisational development program was conducted by PricewaterhouseCoopers and a new operating model was endorsed in December 2016 to best meet the needs of the organisation into the future.

As part of the first stage of the Learning and Development redesign program, specific projects were prioritised to deliver:

- › A connected and coordinated Learning and Development function that is responsive to the realisation of the Strategic Priorities, emerging industry trends, community needs and the management of organisational risk.
- › Educational activities that deliver on required outcomes.
- › Improving program evaluation and utilising insightful reporting to support changes in delivery method and learner needs.

- › Improved consistency, standardisation, and delivery of core educational programs and activities across the group.
- › Agreed funding for Learning and Development to facilitate transparency and understanding return on expectations from caregivers and patients.

Key achievements include the introduction of an education framework for all commissioned programs so that they deliver results in terms of transferring learning into the workplace, changes in how we provide excellence and impact on patient outcomes.

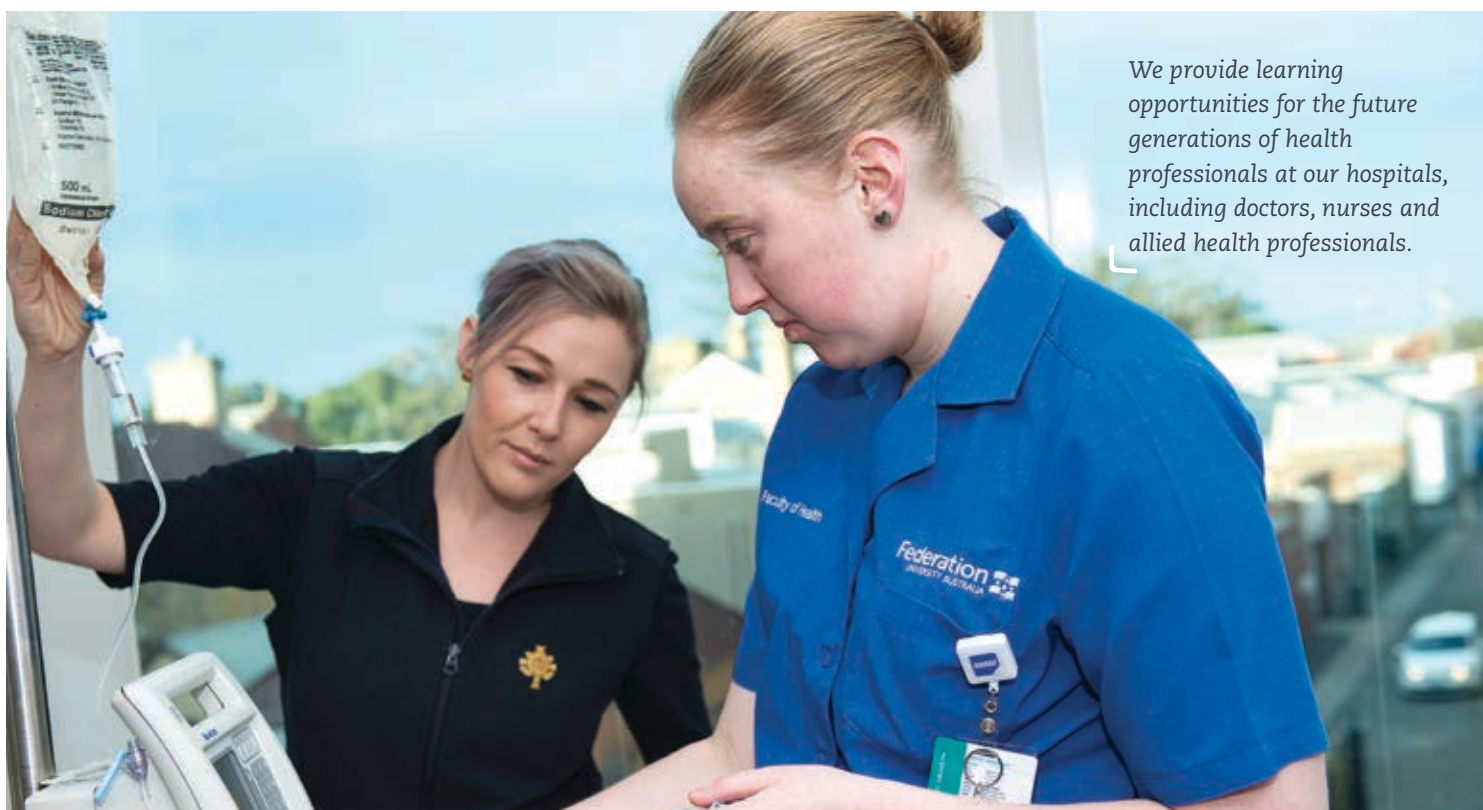
A registry of subject matter experts was established to support the development of educational program content. Over 60 caregivers applied to the registry, recognising the expertise and experience of our caregivers and the positive contribution to excellence in care.

A needs assessment framework was developed to identify gaps in skills, knowledge and behaviour against our risk strategy. This needs assessment process can help solve any problems identified.

## Leadership and management development

Development of our leaders and managers is a key priority in creating a strong culture committed to our Mission and Vision. A Leadership and Management Commissioner will be appointed to standardise and create pathways for leaders and managers at St John of God Health Care.

Two caregivers attended the Aspiring Leaders program with Leadership WA and one caregiver completed the Australian Institute of Company Directors course. During the year, 56 caregivers across Australia participated in the Diploma of Leadership and Management course. There were 53 caregivers taking the Coaching Approach and 89 the Crucial Conversations. Eight caregivers in Western Australia participated in the Energising the Nurse Manager program and Nurse Managers completing this program are awarded a Graduate Certificate in Nursing Leadership and Management from The University of Notre Dame in Fremantle.



*We provide learning opportunities for the future generations of health professionals at our hospitals, including doctors, nurses and allied health professionals.*

# COMMUNITY

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# COMMUNITY

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We have been part of life within our communities from the time our founding Sisters of St John of God arrived from Ireland in the late nineteenth century. To this day we extend the same compassion and support the Sisters brought to the vulnerable and marginalised within the cities and towns around Australia. Our people reach out to help in dealing with the new challenges of a modern, rapidly changing world.

We remain as committed to strengthening relationships and partnerships with our communities and extending our ministry to provide hope and dignity to all those we serve.

By pursuing a deeper partnership with community groups we can continue to deliver on our commitment to the highest quality of healthcare.

## SOCIAL JUSTICE

### Reconciliation

A new Innovate Reconciliation Action Plan was launched during the year. The new plan will support the creation of a model of employment for Aboriginal and Torres Strait Islander peoples, which will be culturally sensitive and supportive. When adopted by the whole organisation it will increase capacity to become an employer of choice for Aboriginal and Torres Strait Islander peoples. In addition, it will contribute to greater engagement with their communities in health, culture and service provision.

### Disability Access and Inclusion Plan

The current Disability and Access Inclusion Plan is 80% complete, with the Disability Reference Group working on the next phase of the plan. This year, highlights have included the introduction of Mental Health First Aid and further collaboration with local disability services. The plan is further highlighted in the People section of this report.

### Asylum Seeker Settlement Program

St John of God Health Care has signed a four-year Collaboration Agreement with Catholic Care, the social service agency of the Archdiocese of Melbourne and the Diocese of Sale to support them in doubling the capacity of their successful Asylum Seeker Settlement Program.

The program seeks to support individuals and families released from immigration detention centres into short-term housing within the Archdiocese of Melbourne. More stable and long-term accommodation is then identified through the program, in order to support individuals and families successfully settling into the community and building strong local relationships.

## SOCIAL OUTREACH

In February, following an external review of all services delivered by Social Outreach and our hospitals, changes were announced to the structure and governance of these services.

All Social Outreach activities now come under a single point of governance within a newly formed Social Outreach division. As part of this change, nine existing hospital-managed outreach initiatives were transferred to Social Outreach.

Social Outreach comprises services that would not otherwise operate without funding from St John of God Health Care. They aim to meet the needs of disadvantaged people within our communities, with a focus on areas of unmet need in health and wellbeing.

Social Outreach now consists of Youth and Accommodation Services (Horizon House and Casa Venegas), Early Years (Raphael Services), Community Mental Health Services (three services operating in Warrnambool, Ballarat and Fremantle) and International Health (Timor-Leste).

## Social Justice Expenditure

	Expenditure \$		SJGHC Contribution \$	
	2015/16	2016/17	2015/16	2016/17
Social Outreach (includes Accord & NZ)	59,475,312	64,446,794	19,216,520	19,766,624
Community Responsibility	1,677,134	948,752	1,618,815	877,873
Patient Concessions	314,098	387,227	314,098	387,227
Caregivers Facing Hardship	65,243	195,978	65,243	195,978
<b>Total</b>	<b>61,531,787</b>	<b>65,978,751</b>	<b>21,214,676</b>	<b>21,227,702</b>

Over the past year, we invested \$26.2 million delivering services to vulnerable and disadvantaged communities across three states along with Timor-Leste, in 36 separate locations.

As of 1 July 2017, Social Outreach employed 209 caregivers, including over 60 clinicians, who provided care and support to more than 3,800 clients.

Collectively Horizon House and Casa Venegas have 138 beds supporting infants, young people and adults at risk of homelessness. Over the past year these services provided almost 40,000 bed nights.

In addition, we delivered almost 33,000 counselling sessions through our community-based mental health services, including Raphael Services.

## COMMUNITY RESPONSIBILITY

We have a strong commitment to our community responsibility role of seeking to relieve disadvantage and hardship. We are motivated to identify and respond where there is unmet social justice need.

This includes support for community meals programs, educational support, provision of meeting places for community groups, donations to emergency funds for humanitarian assistance and financial support for agencies supporting disadvantaged people.

## PATIENT CONCESSIONS

Our Social Justice Patient Concessions Policy ensures we can respond to requests from caregivers, benevolent agencies, international aid agencies or hospital clinicians and management who have assessed a patient needs treatment not available elsewhere.

## CAREGIVERS FACING HARDSHIPS

We provide support for our caregivers during periods of personal crisis. Our Caregiver Hardship Policy allows us to offer many styles of support, including practical responses such as financial support or additional leave.

### Caregiver participation

Our caregivers are encouraged to participate in social justice activities through fundraising and volunteering. Caregivers can apply for Community Support Leave of four hours a month or one week a year to match equivalent personal leave to volunteer to help organisations addressing disadvantage.

## ENVIRONMENT

Our sites continued to implement initiatives to help reduce our impact on the environment.

These initiatives included:

- › Recycling programs for materials such as PVC (oxygen masks, tubes, IV packs etc.), theatre plastics, printer cartridges, batteries, cardboard and commingled products.
- › Electronic waste recycling was added this year at some sites, and staff at St John of God Burwood and Richmond Hospitals brought in personal e-waste for recycling.
- › St John of God Ballarat Hospital rolled out approximately 2,500 LED lights as part of the Energy Efficient Light replacement project.
- › Toilet flushes at St John of God Murdoch Hospital were replaced with an efficiency model.
- › Energy-efficient shower heads were installed in patient ensembles at Ballarat Hospital.
- › Introduction of Living Skills Program for St John of God Accord clients included composting and recycling.
- › Theatre cup holders were collected and donated to the Red Cross in East Perth for their soup patrols in Perth.
- › Kitchen waste is now being processed into fertilizer at St John of God Murdoch Hospital for hospital use or to be sold.



Participants in a singing program with Musica Viva at St John of God Burwood Hospital's Mother and Baby Unit confirm that music can have a positive impact on your mental health.

# PARTNERSHIP VALIDATES THE HEALING BENEFITS OF MUSIC

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A national Arts and Health partnership with Musica Viva has created new music services in our hospitals and through peer-reviewed research validated the positive impact the arts can have on the wellbeing of patients, caregivers and the broader community.

St John of God Health Care has a three-year partnership with Australia's oldest independent professional performing arts organisation, Musica Viva, to deliver arts and health programs at eight of our hospitals.

New research conducted during the partnership has demonstrated improved patient outcomes and a positive patient experience.

Research into the *Singing for Mother and Baby Health* program at St John of God Burwood Hospital's Mother and Baby Unit has shown it to be effective at enhancing maternal mood and relaxation.

A musician and nurse facilitate weekly one-hour singing sessions that help mothers to connect with their child and calm themselves and their infant.

The sessions give mothers the confidence to continue singing with their baby when they leave the hospital.

Patients at St John of God Frankston Rehabilitation Hospital sing and write songs with a musician.

Physicians have reported that some of their rehabilitation patients participating in the sessions have experienced less pain and have been able to reduce their pain medication.

The music programs, initially run as a pilot at St John of God Burwood and Frankston Rehabilitation Hospitals, have continued and are now part of the ongoing clinical service offered to patients.

The Musica Viva partnership also reaches into the communities where our hospitals are located to provide music education in schools. In turn, school groups have come into our hospitals to perform, building the confidence of students and connecting patients with their community.

The partnership between Musica Viva Australia and St John of God Health Care is growing and nurturing links between the arts and health. As leaders in our industries, we are aligned on delivering excellence, innovation and establishing creative, community solutions.

We also continue to benefit from the Energy Efficient Light Replacement project that was rolled out from 2012 to 2015 in which 32,353 light units were replaced with LED equivalents at a cost of \$3.25 million to reduce electricity consumption. This project has resulted in reducing CO2 emissions by 2,775 tonnes per annum - equivalent to taking 1,114 cars off the road or the energy consumption of 231 houses.

### Compliance

St John of God Health Care reported our Green House Gas emissions, energy consumption and energy production to the Commonwealth Government under the National Greenhouse and Energy Reporting Act of 2007 (NGER Act) for the seventh time in October 2016. For each site, over which we have operational control, there are 12 activities to report against.

These activities include consumption of Natural Gas, fuel, petroleum based greases, electricity, emissions from chiller plants and emissions from other gases. This information must be gathered and reported to the Clean Energy Regulator by 31 October each year.

Key reportable emissions data 2015-16:

- › Energy consumption – 557 terajoules.
- › Carbon emissions – 80,710 tonnes.

Final emissions data for 2016-17 is not yet available.

### HERITAGE

The St John of God Health Care Heritage Collection is a permanent, non-profit collection established to acquire, conserve, research, communicate and exhibit our tangible and intangible heritage.

Key achievements:

- › An electronic collection management system (CMS) has been implemented and piloted at St John of God Mt Lawley and Bendigo Hospitals, with more than 200 items now fully documented into the database.

- › Caregivers will be able to access the Heritage Collection through the CMS and the next stage (scheduled for 2018-19) is to make the collection accessible to the wider community through the internet.
- › The Sisters of St John of God reviewed their own heritage collection and divested a substantial collection of health-related items to St John of God Health Care. The collection contains a significant number of items representing aspects of healthcare and hospital life, including silverware and crockery, nurses' uniforms, medical and surgical equipment, as well as photographs, documents and ledgers.
- › The Group Heritage Coordinator has continued to support the organisation, the Mission directorate, Trustees and Marketing and Corporate Affairs by sharing aspects of our history and heritage.
- › St John of God Bendigo Hospital celebrated the 55th anniversary of its opening and 50th anniversary of the establishment of the hospital auxiliary with activities around the hospital and the creation of a short film of interviews with auxiliary members, local clergy and long-term caregivers. The film aired on the hospital's internal television channel in patient rooms.
- › Mt Lawley Hospital's 80th anniversary was celebrated over three days in April 2017 with displays and pop-up exhibitions around the hospital.

### ARTS AND HEALTH

Music has become an important contributor to patient and caregiver wellbeing. St John of God Burwood, Frankston Rehabilitation and Richmond Hospitals offer participative music workshops comprising singing, song writing and drumming. St John of God Accord and Berwick, Bendigo and Warrnambool Hospitals now employ registered music therapists. Community choirs regularly sing on wards at St John of God Ballarat,

Bendigo, Geelong, Geraldton, Mt Lawley and Subiaco Hospitals. All hospitals regularly engage local musicians to perform.

Collaboration with the University of Melbourne and Western Sydney University has enabled music therapy masters students to carry out their final three-month placement within St John of God Health Care facilities.

St John of God Health Care was gifted a Steinway grand piano through the Musica Viva Instrument Gifting Program, and this piano is now housed within the atrium of St John of God Midland Public and Private Hospitals. Weekly recitals are being held through the collaboration of Musica Viva and the Western Australian Academy of Performing Arts, Edith Cowan University, along with a community program with musicians from the hospital and broader community.

When St John of God Health Care appointed an Art Curator in 2012, the art database totalled 103 works. There are now more than 700 pieces in the organisation's Art Collection, mostly by emerging and established Western Australian artists.

Acquisition of pieces of art occurs through purchase, commission, donation/gift or loan – however the number and value of donated works now far outweighs purchases.

Future focus will seek inclusion of artists from local communities in the eastern region.

Art commissions were completed for St John of God Accord's Chapel, Waipuna's entrance, St John of God Murdoch Hospital's main entry, and St John of God Bendigo Hospital's atrium. St John of God Bendigo and Geraldton Hospitals and Hawkesbury District Health Service have established healing gardens and courtyards, providing spaces for reflection, relaxation and connection to nature.

Hawkesbury District Health Service launched an Art Gallery with works by artists from the local Aboriginal community. Exhibitions in other Eastern hospitals included: Stations

*Our volunteers play a vital role in the care we provide to patients, their families and visitors.*



of the Cross at Halswell, Annual Art Award at Bendigo Hospital and the Annual Veterans Day Art and Craft Exhibition at Richmond Hospital. Exhibitions were held in Western Australian metropolitan hospitals throughout the year.

St John of God Health Care continues to encourage other organisations to take up their leadership in arts and health. Recommendations from the WA Arts and Health Consortium are leading to the Western Australian Government establishing an Arts and Health Reference committee to develop policy and direction for arts and health in WA. The Consortium is also contributing to the Institute for Creative Health's Health Arts Action Leadership Project (HAALP) that will focus on inspiring, fostering and skilling new leaders in arts and health across Australia.

## **SPONSORSHIP**

St John of God Health Care is an active community participant in the suburbs, towns and cities in which we operate. We partner with organisations with similar aspirations and strategic goals. In 2016-17, we contributed \$876,978 to support a broad range of initiatives and organisations across a range of sectors.

### **Arts sponsorships**

As part of our commitment and recognition of the value the arts play in enhancing the wellbeing of individuals and communities, we continue to support the WA Youth Jazz Orchestra, Black Swan State Theatre, WA Youth Orchestras, Musica Viva and the Catholic Arts Office. We also sponsor the Black Swan Prize for Portraiture and are proud to be a major sponsor of The Mandorla Art Award, Australia's most significant thematic Christian art prize, for more than a decade.

### **Awards and leadership programs**

St John of God Health Care continue to support the WA Nursing and Midwifery Excellence Awards, which is an opportunity for the community

to commend and celebrate the exceptional care provided by nurses and midwives in the public and private sectors in Western Australia.

Our partnership with Leadership WA reflects our internal leadership ethos with a shared vision of enhancing leadership excellence and a respect for diversity, community service and commitment to ethical leadership.

## **VOLUNTEERS**

In this year 1,135 volunteers worked with us to ensure our patients and visitors were as comfortable as possible in our care. Volunteers generously give of their time and effort to support our services and our hospital auxiliaries that raise funds to purchase new hospital equipment.

## **ST JOHN OF GOD FOUNDATION**

St John of God Foundation is a not-for-profit registered charity that for the past 22 years, through community support, has provided funding to assist with clinical research, social outreach programs, purchasing sophisticated medical equipment and developing hospital infrastructure.

Last year, St John of God Health Care provided life-changing outcomes to more than 324,000 people across the country. With Australia's changing health environment and ageing population, demand for lifesaving healthcare continues to grow exponentially. As a result, service providers need to build capacity, refine best practices and boost proven programs to serve more people.

Clinical research plays a crucial role in delivering improved health outcomes, and St John of God Health Care is well positioned to spearhead this movement through the Foundation.

As a leader in the Australian health sector, St John of God Foundation contributes to translational research

projects and clinical trials in more than 25 key health areas, focusing on projects with the greatest potential to improve patient healthcare.

In the past 12 months, we have supported clinical research and sophisticated oncology trials that help our researchers discover revolutionary new treatments to improve outcomes for people with some of the most common cancers such as breast, melanoma, prostate, pancreas, colorectal and lung.

The St John of God Foundation's \$5 million capital campaign for the South West Coronary and Cancer Centre is delivering high quality cardiac and cancer investigation and treatment services for public and private patients in the South West, at one location. These services have and will continue to expand the hospital's capacity to meet the demands of our rapidly growing community and the healthcare needs of future generations.

St John of God Berwick Hospital provides healthcare services to the Casey Cardinia community and surrounding areas. Due to an increase in population, St John of God Foundation launched a capital campaign to raise \$5 million for a Comprehensive Cancer and Cardiac Care Centre that will give patients and their families access to specialised services, ensuring better health outcomes and quality of life.

In the last financial year, St John of God Foundation received over \$3 million through philanthropic donations and pledges toward revolutionary medical research, contemporary hospital infrastructure, clinical equipment and the delivery of critical social services.

The St John of God Foundation thanks our generous donors who have enabled us to continue providing the best possible care to patients and the community. A special thank you to the following supporters:

- › Michael & Irene Ajani
- › Berwick Mazda
- › Alan & Kylie Brierty
- › Geoff & Jan Brown
- › Brown Property Group
- › Bunbury Car Dealers
- › Carcione Group of Companies
- › John & Carmel Carney
- › Joseph & Caroline Caruso
- › City of Bunbury
- › City of Busselton
- › Collie Community Bank
- › Connie Craig
- › Donegal Nominees Pty Ltd
- › Harmon Family Trust
- › Iannello Family
- › Paul & Delane Kane
- › Jim Litis
- › Arthur & Elizabeth Makin
- › Charlie & Nan Martella
- › Massey Charitable Foundation
- › McCusker Charitable Foundation
- › Don Moyes
- › Nick Baldi Construction Pty Ltd
- › Nicholas O'Donohue
- › Walter & Vicki Pisciotta
- › Rosemary Norman Foundation
- › Tom & Therese Schreurs
- › Shire of Augusta Margaret River
- › Shire of Collie
- › Chris & Anthea Somas
- › Stocker Preston Real Estate
- › The Jack Family Charitable Trust
- › The Kailis Foundation
- › Lena & Brian Topp
- › Peter & Heather Tulloch
- › Wheatley Family Foundation

*The Palliative Paws program at St John of God Bunbury Hospital demonstrates St John of God Health Care's holistic approach to care.*



# GOVERNANCE

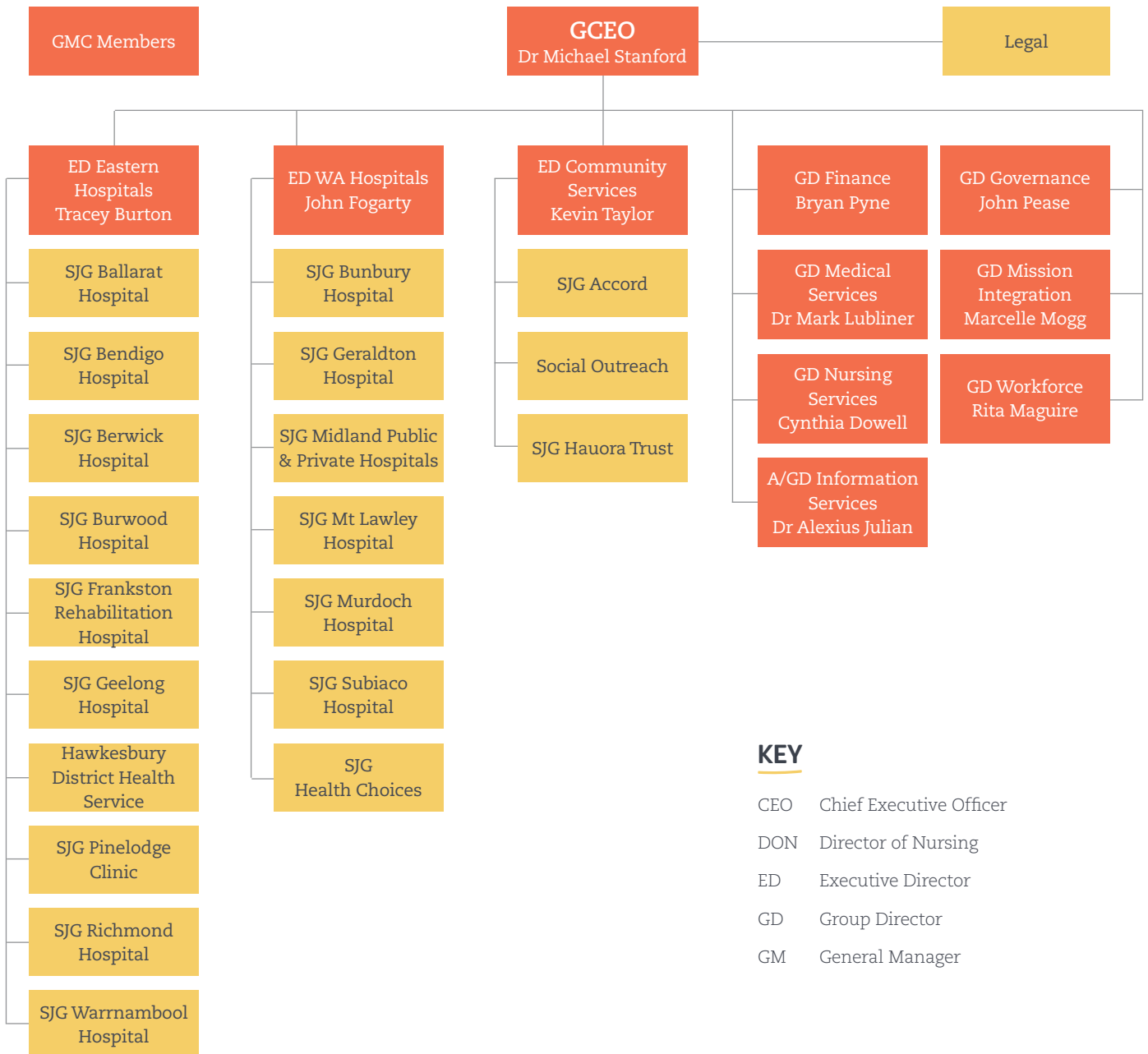
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# ORGANISATIONAL STRUCTURE



**KEY**

- CEO Chief Executive Officer
- DON Director of Nursing
- ED Executive Director
- GD Group Director
- GM General Manager

# GOVERNANCE

## **STRUCTURE**

St John of God Health Care Inc. is an incorporated association, the members of which are the directors of St John of God Australia Ltd, a civil and canon law entity established in 2004 to sponsor the ministry that was previously sponsored by the Sisters of St John of God. The Sisters are members of St John of God Australia Ltd and share sponsorship of the ministry with eight of the dioceses in which the group operates as well as the Hospitaller Order of St John of God. This collaboration ensures sound and continued governance and stewardship.

St John of God Health Care has a two-tiered governance structure comprising Trustees and a Board.

### **Trustees**

The Trustees (p92) are appointed by the members of St John of God Australia Ltd and have canonical responsibility for St John of God Health Care. They bring a wealth of skills and experience and exercise a range of authorities, including the appointment and evaluation of Board members and ensuring that our ministry remains faithful to its role within the Catholic Church. The Trustees meet 11 times a year.

The Trustees' Annual General Meeting was held on 6 October 2016. At the meeting, the Trustees received St John of God Health Care's 2015-16 Annual Report and its financial accounts for the year ended 30 June 2016. The Chair of the Board and the Group Chief Executive Officer provided an overview of the year and discussed plans for the 2016-17 year.

### **Board**

The Board (p95) is appointed by the Trustees, with members accountable to the Trustees for the organisation's ongoing stewardship and strategic development. Board members are selected for their varied and complementary skills and are drawn from a wide range of backgrounds.

In addition to attending six Board meetings each year, Board members this year attended a Risk and Strategy Workshop in November 2016, a Board retreat in November 2016 and formation workshops in July 2016 and March 2017.

### **Group Management Committee**

The Group Chief Executive Officer is appointed by the Board and, as the most senior operational appointment, is accountable to it for the organisation's day-to-day management across Australia, New Zealand and the Asia-Pacific region.

The Group Chief Executive Officer convenes and chairs a Group Management Committee (p96) comprising senior executives who provide assistance and advice on operational matters. The committee meets six times a year in person for two days at a time, and participates in various other workshops as required.

## **GOVERNANCE**

Governance is the system by which St John of God Health Care is directed and managed. It is the framework within which the healthcare group works to realise its Vision and fulfil its Mission. Governance influences how objectives are set and achieved, how risk is assessed and monitored and how performance is optimised.

St John of God Health Care governance structures are modelled on best practice and assist in ensuring innovation, development, prudent stewardship, accountability and control commensurate with the risks involved.

### **Good principles of governance**

St John of God Health Care applies principles of good corporate governance and associated good practice recommendations based on those promulgated by, among others, the Corporate Governance Council of the Australian Stock Exchange. The application of these principles is as follows:

#### ***Laying solid foundations for management and oversight***

The roles and responsibilities of the Trustees, Board and management are set out in the St John of God Health Care Inc. constitution. In addition, the Governance Authority Matrix addresses matters reserved for the Trustees, the Board and the Group Chief Executive Officer, while a Management Authority Matrix identifies matters for which the Group Chief Executive Officer, senior executives and the St John of God Hauora Trust Board (New Zealand) have delegated authority.

Appropriate mechanisms to monitor the performance and development of senior executives are in place with all senior executives assessed annually. In addition, senior executives participate in a 360-degree feedback process once every three years that assesses behaviour against a leadership profile, with feedback forming part of annual performance review and development conversations.

### **Structuring the Board to add value**

With the exception of the Group Chief Executive Officer, members of the Board, including its Chair, are non-executive directors. The Trustees, the senior level of the two-tier governance structure, regularly consider future nominations to the Board to ensure it is comprised of individuals with an appropriate skill mix.

Through a formal evaluation process, the Board considers its performance as a whole as well as that of its sub-committees and individual directors. In addition, the Trustees consider Board performance through the Board Development Committee. The Trustees also evaluate their own performance.

The Board has adopted an annual Board timetable that schedules regular presentations from senior managers, focused on key operational, strategic or Mission-related issues.

### **Promoting ethical and responsible decision making**

Our Vision 2015-2019 is the cornerstone document that guides us and includes the Vision, Mission and Values of the organisation, the key result areas for work to be undertaken and the guiding principles and defined outcomes to be achieved in each key result area. The *Our Vision 2015-2019* document has been widely promulgated among caregivers and utilised in the development of a new five-year strategic plan.

### **Safeguarding integrity in financial reporting**

The Audit and Risk Committee has a key role in safeguarding the integrity of financial reporting. As with all Board committees, it has written terms of reference. Its membership comprises three non-executive Board members. Dr Julie Caldecott chaired the committee throughout the year.

In addition to external audit, well-resourced and effective compliance, risk management and internal audit functions operate and report to the Audit and Risk Committee. Their focus is on the key risks faced by the organisation.

### **Recognising and managing risk**

A dedicated governance team has accountability for embedding and maturing the group's approach to enterprise risk management and compliance, as well as the internal audit function. The Group Director Governance reports quarterly to the Audit and Risk Committee on risk, compliance and audit matters and annually to the Board on the group's risk profile.

Ongoing assessment of the adequacy and effectiveness of risk management systems is also undertaken by the Board through its committees and various internal, external and regulatory agency reviews including the internal audit program.

The internal audit program operates in accordance with an internal audit charter and an annual internal audit plan. Areas of assurance are mapped against key risk areas as part of the annual internal audit planning process, ensuring targeted and effective reviews. Management responses to risk issues, and action plans to rectify identified or potential risks, are monitored to ensure effectiveness and appropriate implementation.

In addition, internal audits are undertaken in relation to specific areas of risk, both at a divisional and organisation-wide level.

Management also signs an annual representation letter providing the Board with assurance that its operations, including financial reports, are based on a sound system of risk management and internal control.

### **Remunerating fairly and responsibly**

The Board's Remuneration Committee has written terms of reference to ensure remuneration for senior managers is appropriate and that its relationship to performance is clear.

Remuneration for non-executive directors is set by the Trustees and is therefore clearly distinguished from the process for setting remuneration for the Group Chief Executive Officer (the only executive director on the Board) and senior executives, which

is set by the Board on advice from the Remuneration Committee.

## **BOARD MEETINGS AND COMMITTEES**

### **Board meetings**

Chaired by Tony Howarth, the Board comprises 10 members including the Group Chief Executive Officer. The Board is accountable to the Trustees for the ongoing stewardship and development of the organisation, including all aspects of its Mission, service delivery and financial performance.

### **Audit and Risk Committee**

Chaired by Dr Julie Caldecott, the Audit and Risk Committee comprises three non-executive board members and assists the Board to fulfil its fiduciary and corporate governance responsibilities by: overseeing the integrity and quality of financial information presented to the Board; overseeing the scope and quality of internal and external audit functions; monitoring the identification and management of risks; and monitoring compliance with statutory responsibilities. Ernst and Young continued to act as the external auditor and the internal audit function is performed by internal resources with support from PwC.

### **Finance and Investment Committee**

Chaired by Peter Prendiville, the Finance and Investment Committee comprises five Board members (four non-executive directors and the Group Chief Executive Officer), an independent investment expert and the Group Director Finance. The committee reviews financial performance, administers and manages surplus funds and also considers and makes recommendations on financial and investment matters.

### **Mission Integration Committee**

Chaired by Jack de Groot, the Mission Integration Committee comprises four Board members (three non-executive directors and the Group

Chief Executive Officer) and the Group Director Mission Integration, an external mission integration expert and the Group Manager Formation. The committee gives form and shape to Board members' understandings of St John of God Health Care as a ministry of the Catholic Church and also works to raise awareness of the lived expression of the Vision in the delivery of services.

#### Clinical Performance Committee

Chaired by Dr Rosanna Capolingua, the Clinical Performance Committee comprises four Board members, the Group Chief Executive Officer, the Group Director Medical Services, the Group Director Nursing, a clinical nurse, a medical doctor and a consumer representative. The primary purpose of the committee is to assist the Board in fulfilling its governance responsibilities in relation to the organisation's clinical performance, particularly with regard to patient safety and quality.

#### Remuneration Committee

Chaired by Tony Howarth, the Remuneration Committee comprises three non-executive Board members. It aims to ensure fair and responsible remuneration and takes advice from an independent remuneration consultant. It reviews the Group Chief Executive Officer's performance and makes recommendations to the Board on remuneration for this position and that of the senior executive group.

# BOARD ATTENDANCE

Board Attendance / Member	Governing Board		Audit & Risk Committee		Finance & Investment committee		Board Mission Integration Committee		Clinical Performance Committee		Remuneration committee	
	Eligible to attend	Attended	Eligible to attend	Attended	Eligible to attend	Attended	Eligible to attend	Attended	Eligible to attend	Attended	Eligible to attend	Attended
Tony Howarth	6	6			11	8	4	4			2	2
Mark Bahen	6	4			11	8	4	4			2	2
Dr Julie Caldecott	6	6	7	7								
Dr Rosanna Capolingua	6	6	7	5					4	3		
Justin Carroll	6	6			11	11					2	2
Hon Robert Knowles	6	5							4	2		
Dr Michael Levitt	6	6	7	7								
Peter Prendiville	6	5			11	10						
Dr Michael Stanford	6	6			11	10	4	4	4	3	2	1
Jack de Groot	4	4					3	3				
Bryan Pyne					11	10						

# TRUSTEES' BIOGRAPHIES

## MS EVA SKIRA

BA, MBA, FAICD, FAIM, SNR FFSIA, FGIA

*Chairman since 1 January 2014. Trustee since February 2012 and Deputy Chairman from 1 January 2013–1 January 2014.*

- › Career background in commerce and financial markets, gaining an MBA from the renowned IMD International in Switzerland.
- › Executive positions at Commonwealth Bank and Barclays de Zoete Wedd, followed by consulting in business, project management and strategic advice.
- › More than 20 years' experience as a director on boards in business, government, education and the not-for-profit sectors.
- › St John of God Health Care Board Member 1999-2008 and Deputy Chairperson 2008-2012.
- › Current Director Macmahon, RCR Tomlinson Ltd and WA Parks Foundation.

## REV DR JOSEPH PARKINSON

STL PhD

*Deputy Chairman since January 2014 - Appointed October 2009*

- › Ordained for the Archdiocese of Perth in 1981.
- › Postgraduate in Moral Theology from the Alphonsian Academy in Rome (STL) and The University of Notre Dame Australia in Fremantle WA (PhD).
- › Current Director of LJ Goody Bioethics Centre in Perth WA.

- › Concurrent appointments: Director of Catholic Health Australia; Honorary Fellow of Australian Catholic University; Member of WA Department of Health Reproductive Technology Council; Clinical Ethics Consultancy, Perth Children's Hospital; and St John of God Health Care Human Research and Clinical Ethics Committees.

## MR FRANK COOPER

AO B.Com (UWA) FCA FAICD

*Appointed January 2015*

- › Extensive business experience spanning more than 30 years and a long record of community service.
- › Member of the Senate of the University of Western Australia and Chair of its Strategic Resources Committee
- › Current director of Woodside Petroleum Limited and South 32 Limited and Chairman of the Insurance Commission of Western Australia.
- › Fellow of the Institute of Chartered Accountants in Australia and a Fellow of the Australian Institute of Company Directors.
- › Awarded an Officer of the Order of Australia in 2014 and Western Australian of the Year – Professions category in 2015.

## SR ANNE DERWIN RSJ

BA, Dip Teaching, Grad Dip Religious Studies, M Ed, PhD (Honoris Causa)

*Appointed July 2015*

- › Early career in secondary education as teacher and Principal followed by leadership of the Sisters of St Joseph NSW Province from 1996-2002 and then Congregational Leader of the Sisters of St Joseph from 2008-2014.
- › Centre Director at St Joseph's Kincumber and Mary MacKillop Place North Sydney, President of Catholic Religious Australia from 2010-2012, Board Member of St John of God Health Care from 2004-2009, Chair St Anthony's Family Care 2004-2008 and Chair Good Grief 2015- 2017.
- › Current Board Chair Mary MacKillop Place.

## MRS MARY MCCOMISH

LLB (UWA), LLM (Lond)

*Appointed July 2013*

- › Retired lawyer.
- › Associate Professor of Law at The University of Notre Dame for 10 years.
- › Dean of Law at The University of Notre Dame from 2005 until her retirement in 2007.
- › Director of Daydawn Advocacy Centre from 2013-2016, an initiative of the Catholic Church in the Archdiocese of Perth on behalf of Indigenous people.
- › Trustee of MercyCare WA.

## MR JOHN (JACK) MOORE

MAICD

*Appointed July 2013*

- › Extensive business experience in marketing, advertising and public relations, including 28 years as principal of his own business providing services to a large range of companies.
- › Involved in financial/property governance for the Diocese of Sandhurst.
- › Board Member of Mercy Health and Aged Care in Victoria since 1996.
- › Represented the Diocese of Sandhurst as Member of St John of God Australia Limited from October 2010 until 30 June 2013.
- › Board Member of Mount Alvernia Hospital Bendigo (now St John of God Hospital Bendigo) from 1987-1996 and Chairman from 1990-1996.

## MR MARK MURPHY

LLB (UWA), BJuris (UWA), FLWA

*Appointed January 2014*

- › General Manager for the Australian Region of the Sisters of St John of God.
- › Previously General Counsel and Company Secretary St John of God Health Care.
- › Affiliate member of the Australian Institute of Company Directors, Member of the Law Society of WA, Member of the Australian Corporate Lawyers Association and an alumni of Leadership WA's Signature Leadership Program.

## MRS THERESE TEMBY

AO BSc, Grad Dip Educ, Grad Dip ILS

*Appointed October 2004*

- › Career began as a secondary school teacher in Western Australia, first in Government schools and then in the Catholic education system.
- › Contributed to state and national educational organisations through board membership and committee participation.
- › Former appointments include Director of Catholic Education WA from 1993-2003, Chair of the Curriculum Council of WA from 2004-2006 and Chair of the National Catholic Education Commission from 2008-2013.

*Left to right – Rev Dr Joseph Parkinson, Mr Mark Murphy, Mrs Therese Temby, Mr John (Jack) Moore, Ms Eva Skira (Chairman), Sr Anne Derwin, Mrs Mary McComish, Mr Frank Cooper.*



# BOARD BIOGRAPHIES

## MR TONY HOWARTH

AO, CitWA, Hon LLD WAust, SF Fin, FAICD

*Chairman since January 2004 – Appointed in May 2001*

- › Executive career in local and international banking and finance, with senior positions in regional and major banks, building societies and stockbrokers.
- › Chairman MMA Offshore Limited; non-executive director, Wesfarmers Ltd, BWP Management Pty Ltd, Alinta Energy and Viburnum Funds Pty Ltd; Chairman of Western Australian Rugby Union
- › Past Chairman Alinta Limited, Home Building Society Ltd, the Australian Chamber of Commerce and Industry, the International Chamber of Commerce of Australia, the Committee for Perth, and Deputy Chairman of Bank of Queensland Ltd and the University of Western Australia Senate.
- › Deputy Chair UWA Business School and Adjunct Professor (Fin. Mgt.) UWA Business School.

## MR MARK BAHEN

LLB

*Deputy Chairman since February 2012 – Appointed January 2008*

- › Former Partner of Clayton Utz Solicitors, practising in corporate and commercial law.
- › Headed the health service and agribusiness divisions of Clayton Utz's Perth office, providing legal services to St John of God Health Care for 10 years.
- › Chairman of Consolidated Pastoral Pty Ltd.

## DR MICHAEL STANFORD

CitWA, MB BS (UNSW), MBA (Macq U), Grad cert LCC (ACU), FAICD, FAFPHM, FAIM

*Group Chief Executive Officer*

- › Appointed Group CEO of St John of God Health Care in February 2002.
- › More than 30 years' experience in health care management – the last 23 years as Chief Executive Officer of large, complex, multi-campus healthcare organisations.
- › Non-executive director of Curtin University, Australian Clinical Labs and WA Chamber of Arts and Culture
- › 2010 WA Citizen of the Year Award winner in the industry and commerce category.
- › Under Dr Stanford's leadership, St John of God Health Care has significantly expanded its number of operating divisions, greatly diversified its range of services, increased five fold its size in terms of revenue, and become a recognised leader in the provision of high quality healthcare.

## DR ROSANNA CAPOLINGUA

MB BS FAMA FAICD

*Appointed January 2010*

- › Career built in general medical practice.
- › Involved in under graduate and post graduate medical education, professional development and ethics, serving on medical and National Health and Medical Research Council ethics committees.
- › Current positions: Chair of the WA Immunisation Strategy Committee, Deputy Chair of the WA North Metropolitan Area Health Service

and Chair of its Quality and Safety Committee, Member of the Alcohol and other Drugs Advisory Board of the Mental Health commission, Chair of AMA (WA) Services Pty Ltd, Medical Director of the AMA (WA) Youth Foundation, and a member of the Board of Governors of The University of Notre Dame, Australia.

- › Past Positions: Federal President of the Australian Medical Association, Chair of Governing Council Child and Adolescent Health Services, Chair of Australian Medical Publishing Company, Member Board of Medical Defence Australia, Member Board of UWA Raine Foundation, Chair of Healthway, Member Board of MercyCare, Australian Representative to the World Medical Association.

## DR JULIE CALDECOTT

MBBS, MBA

*Appointed January 2015*

- › More than 20 years' experience as a consultant to the public and private sectors, with a focus on consumer goods and health, for Boston Consulting Group (BCG) as a Director and Partner until 2011.
- › Trained as a medical practitioner prior to joining BCG and has an MBA from Melbourne Business School, University of Melbourne.
- › Director Victorian Major Transport Infrastructure Board and the Victorian Registrations and Qualifications Authority.
- › Previous board memberships include non-executive directorships at the Royal Children's Hospital, Melbourne, the Transport Accident Commission, Victoria and the Institute for Safety, Compensation and Recovery Research.



## DR MICHAEL LEVITT

MBBS FRACS

*Appointed January 2016*

- › Member of clinical staff at St John of God Subiaco Hospital since 1990, including Director of Medical Services from 2005 until 2013.
- › Long serving member of the St John of God Subiaco Hospital Medical Advisory Committee for 13 years, including four years as Chairman.
- › Member of clinical staff at Sir Charles Gairdner Hospital where he held various senior roles from 1990-2005.
- › Current Medical Co-Director at Osborne Park Hospital.
- › Member of the Medical Board of WA since 2015.

## HON ROBERT KNOWLES

AO MAICD

*Appointed November 2014*

- › Holds commercial directorships at Beyond Blue, Global Health Ltd, Drinkwise Australia Ltd, Silver Chain Group Ltd and IPG Ltd.
- › Member of the Victorian Parliament from 1976-1999 and responsible for a number of portfolios, including Minister for Health from 1996-1999 and Minister for Aged Care from 1996-1999.
- › Current Chair of the Royal Children's Hospital, Melbourne, and Commissioner of the National Mental Health Commission.

- › Awarded an Officer of the Order of Australia in 2007 for service to the community through a range of aged care, mental health, research and cultural activities and his work in the Victorian government.

## MR JUSTIN CARROLL

BCom, FCA

*Appointed January 2015*

- › Managing Partner of PwC Australia's Perth office and has more than 26 years' experience in the provision of external audit, due diligence and advisory services.
- › A Governor and Director of The University of Notre Dame Australia (UNDA) and chair of UNDA's Finance, Risk and Audit Committee.
- › Fellow of the Institute of Chartered Accountants, a registered Company Auditor and holds a Bachelor of Commerce in Accounting and Finance from the University of Western Australia.

## MR PETER PRENDIVILLE

B.COM

*Appointed May 2012*

- › Chairman of Prendiville Group, his family-owned and operated group of hotels which includes multi-award winning Sandalford Wines, Tradewinds Hotel, Pier 21 Resort, Norfolk Hotel in Fremantle, Karratha International Hotel, Mangrove Hotel, and the iconic Cottesloe Beach Hotel and Hotel Rottneest.

- › A Trustee, Director and Deputy Chancellor of The University of Notre Dame Australia, and has been involved with the university since its inception.

## MR JACK DE GROOT

BA

*Appointed November 2016*

- › CEO of St Vincent de Paul Society NSW, one of the largest Social Service Agencies in NSW specialising in homelessness and disability services.
- › More than 17 years' experience as a senior executive in the not-for-profit sector including 13 years as Chief Executive Officer of Caritas Australia, one the country's biggest international aid and development agencies.
- › Previously the Group Leader of Mission at St Vincent's Health Australia, the biggest not-for-profit provider of health and aged care services in Australia.
- › Chair Board of Jesuit Mission, Board Member Catholic Social Services Australia and a member of the Board of Governors of The University of Notre Dame, Australia.
- › Previous board memberships include St John of God Health Care, Uniya, One World Centre, Act for Peace, Companions Volunteer Communities, Edmund Rice Centre, Australian Catholic Social Justice Council, Catholic Social Services Victoria, and The Australian AIDS Fund.

*Left to right – Dr Michael Levitt, Dr Julie Caldecott, Hon Robert Knowles, Dr Michael Stanford (GCEO), Mr Peter Prendiville, Mr Tony Howarth (Chairman), Mr Justin Carroll, Mr Mark Bahen, Mr James McMahon, Dr Rosanna Capolingua, Mr Jack de Groot.*

# GROUP MANAGEMENT COMMITTEE BIOGRAPHIES



Left to right – Mr John Pease, Mrs Tracey Burton, Ms Marcelle Mogg, Dr Michael Stanford (GCEO), Mr Kevin Taylor, Dr Alexius Taylor Julian, Ms Cynthia Dowell, Mr Bryan Pyne, Mr John Fogarty, Ms Rita Maguire, Dr Mark Lubliner.

### DR MICHAEL STANFORD

CitWA, MB BS (UNSW), MBA (Macq U),  
Grad cert LCC (ACU), FAICD, FAFPHM,  
FAIM

*Group Chief Executive Officer*

- › Appointed Group CEO of St John of God Health Care in February 2002.
- › More than 30 years' experience in healthcare management – the last 23 years as Chief Executive Officer of large, complex, multi-campus healthcare organisations.
- › Non-executive director of Curtin University, Australian Clinical Labs and WA Chamber of Arts and Culture
- › 2010 WA Citizen of the Year Award winner in the industry and commerce category.
- › Under Dr Stanford's leadership, St John of God Health Care has significantly expanded its number of operating divisions, greatly diversified its range of services, increased five fold its size in terms of revenue, and become a recognised leader in the provision of high quality healthcare.

### MRS TRACEY BURTON

BHA, MBA, GAICD

*Executive Director Eastern Hospitals –  
Appointed October 2010*

- › More than 30 years' experience in the Australian health sector including leadership roles in public and private hospitals and within the Catholic healthcare sector across NSW, Queensland and Victoria.
- › Previous roles include: CEO St George Private Hospital, Ramsay Health Care; General Manager Corporate Services St Vincent's & Mater Health Sydney; Executive Director Mater Private Hospital, South Brisbane, and Project Manager and General Manager, Hawkesbury District Health Service.

### MS CYNTHIA DOWELL

BNurs, Prof Cert Health Systems  
Management

*Group Director Nursing Services –  
Appointed January 2016*

- › More than 20 years' experience in the healthcare industry including nursing and executive leadership roles.
- › Previous role as Chief Nursing Officer and Executive Director of Surgery and Specialist Services at Melbourne's St Vincent's Hospital.
- › Fellow of the Williamson Community Leadership Program.

### MR JOHN FOGARTY

Dip App Sc, B.Bus (Bus Admin), MBA,  
Grad Cert LCC, GAICD

*Executive Director, Western Australian  
Hospitals – Appointed January 2017*

- › Executive Director Perth Southern Hospitals; Chief Executive Officer, St John of God Murdoch Hospital – from September 2013 to January 2017
- › 30 years' experience in the Australian healthcare system across public, private for-profit and not-for-profit hospitals and the aged and community care industry.
- › Previously Chief Operating Officer, Mercy Health.
- › CEO St John of God Ballarat Hospital from 2004 to 2011
- › Director of St John of God Foundation Ltd

### DR MARK LUBLINER

B. Med Sci (Hons), MBBS, MBA,  
FRACMA, MAICD

*Group Director Medical Services –  
Appointed July 2012*

- › Extensive international medical care and health management experience, including strategic planning and service redesign, clinical governance, and enterprise risk management at The Alfred, Cabrini Health and South East London Strategic Health Authority.
- › Adjunct Associate Professor, Monash University.
- › Fellow, Williamson Community Leadership Program.
- › Australian Medical Council and ACHS Surveyor
- › Represents the private sector on various Commonwealth and State committees including Private Hospital Sector Committee for the Australian Commission on Safety and Quality in Health Care, and Victorian Consultative Council on Obstetric and Paediatric Mortality and Morbidity

### MS RITA MAGUIRE

GAICD

*Group Director Workforce - Appointed  
November 2012*

- › More than 20 years' experience in human resources management in the private and public sectors of the healthcare industry including Ramsay Health Care and independent consultancy.
- › Significant achievements as a senior executive including Australian Employer of the Year Award 2009 and Community and Health Services Industry Award 2009.

**DR ALEXIUS TAYLOR JULIAN**

MBBS (UWA)

*Acting Group Director Information Services & Chief Medical Information Officer (CMIO)*

- › Appointed as the Organisation's inaugural CMIO in April 2016, and commenced the acting position of GDIS in February 2017
- › Experience in the development and implementation of clinical and non-clinical ICT systems in public and private hospital environments.
- › Training and experience in medical leadership, service improvement methodology and project management
- › Maintains connection to clinicians via his continuing role as a locum surgical assistant
- › Previous roles include Medical Leadership Advisor for the WA Institute for Health Leadership, Clinical Lead for ICT Commissioning at Fiona Stanley Hospital, Doctor at public and private hospitals in WA.
- › Also serving as a Member of the Board for the Child and Adolescent Health Service of WA.

**MR BRYAN PYNE**

BBus, FCA

*Group Director Finance – Appointed October 2007*

- › 24 years' experience in finance including more than 18 years with St John of God Health Care.
- › Fellow of the Institute of Chartered Accountants.
- › Recipient of the 2010 40 under 40 Award (WA).
- › Member of The University of Notre Dame Finance Audit and Risk Committee.

**MR JOHN PEASE**

LLM (with distinction), FGIA

*Group Director Governance – Appointed October 2014*

- › Substantial experience leading teams of governance professionals in the areas of risk management, compliance, internal audit, legal services and company secretariat, across a number of highly regulated sectors including banking and finance, higher education and electricity networks.
- › Previous roles include eight years as Western Power's General Counsel and Company Secretary, in addition to a similar role at Murdoch University and BankWest, private legal practice, the courts' administration and government.
- › Completed a Master of Laws (with distinction) in 1998 from the University of Western Australia.

**MR KEVIN TAYLOR**

BSc, GAICD, Grad Cert CLC

*Executive Director Community Services – Appointed April 2008*

- › Management experience within the healthcare industry spanning more than 30 years.
- › Previously undertaken roles within St John of God Health Care as Chief Executive Officer, St John of God Pathology and Group Director Corporate Services
- › Externally recognised for his role in establishing nursing, pathology and rural health programs in Timor-Leste.
- › Board member of Mosaic Community Care and Ngarluma Tharndu Karrungu Maya Ltd and St John of God Hauora Trust

**MS MARCELLE MOGG**

MBA, B Soc Sc (Pastoral Studies), Dip App Sc (Nursing)

*Group Director Mission Integration – appointed November 2016*

- › 25 years' experience in the professional leadership and management of large-scale health and social service organisations in the Catholic not-for-profit sector.
- › Formerly CEO Catholic Social Services Australia and has held senior Mission and management positions with St Vincent's Health Australia
- › Completed a Masters of Business Administration in 2014 at the University of Melbourne following degrees in social sciences and nursing.
- › Commenced Masters in Spiritual Direction, Melbourne College of Divinity.

Left to right – St John of God Health Care Chairman of Trustees, Eva Skira, Bishop of Sandhurst, Leslie Tomlinson, St John of God Bendigo Hospital CEO Darren Rogers, Father Tony Shallue and GCEO Dr Michael Standford officially opened the St John of God Bendigo Hospital redevelopment with a blessing.



# GLOSSARY



## Accreditation

Independent, periodic evaluation of our Australian hospitals by the Australian Council on Healthcare Standards (ACHS); our New Zealand residential facilities by the New Zealand Ministry of Health; our New Zealand Community, Youth and Child Services by the New Zealand Ministries of Health, Education and Social Development, the Department of Corrections and the Canterbury District Health Board ; and our Australian pathology services by the National Association of Testing Authorities (NATA).

## Acute care

Treatment of a sudden episode of illness or injury.

## Arts and health

General term to describe the arts in relation to the impact it has on health and wellbeing.

## Australian Commission on Safety and Quality in Health Care (ACSQHC)

The Australian Government agency that leads and coordinates national improvements in safety and quality in healthcare across Australia.

## Australian Council on Healthcare Standards (ACHS)

The agency that inspects and evaluates Australia healthcare facilities to award accreditation.

## Balanced scorecard

A tool used by managers to monitor performance against a small number of financial and non-financial targets.

## Board

The second tier of St John of God Health Care's bicameral governing structure. Board members are appointed by the Trustees, with members accountable to the Trustees for the organisation's ongoing stewardship and strategic development.

## Brothers of St John of God

A congregation of Catholic Brothers who established psychiatric hospitals, residential schools and other care facilities and programmes for intellectually disabled and at risk people in Australia and New Zealand.

## Caregiver

A term used to describe the majority of employees at St John of God Health Care.

## Central Sterile Supply Department (CSSD)

A hospital department that sterilises medical equipment.

## Client

A person receiving a non-clinical service of St John of God Health Care.

## Clinical care/clinical services

The health service provided to a patient by a doctor, nurse or other health professional.

## Clinical Pastoral Education Program

An accredited education program on pastoral care offered by St John of God Health Care in Victoria and Western Australia.

## Clinical risk management

Improving quality and safety by identifying circumstances that put patients at risk of harm, and acting to prevent or control those risks.

## Collection centre

A centre offering pathology services.

## Comprehensive Cancer Centre

A centre incorporating all aspects of care associated with cancer diagnosis and treatment, which enables cancer patients and their families to receive treatment and support in one location.

## Coronary Care Unit (CCU)

A hospital unit specially staffed and equipped to treat patients with serious cardiac problems.

## Critical/Intensive Care Unit (CCU/ICU)

A hospital unit specially staffed and equipped to treat patients with sudden life-threatening conditions.

## Cultural alignment strategy

An approach to supporting new caregivers during their integration to St John of God Health Care culture and ethos, and to support existing caregivers to deal with significant change.

## Disability and Inclusion Plan (DAIP)

A strategic plan to improve the organisation's ability to include and respond to the needs of people with disability whether they are caregivers, patients, clients, volunteers or the general public.

**Disability Employment Services (DES)**

A Government run agency that assists job seekers with disability, injury or health condition to prepare for, find and keep a job.

**Discharge**

When an episode of care is completed and a patient leaves hospital.

**Division**

A major operating unit, such as a hospital, of St John of God Health Care.

**Eastern Region**

An internal expression referring to all St John of God Hospitals in Victoria and New South Wales.

**Episode/occasion of service**

Care provided by a healthcare facility or service that begins and finishes within a specific period.

**EquiP National Program**

A four-year accreditation program for healthcare organisations, administered in Australia by the Australian Council on Healthcare Standards, that comprises of the 10 mandatory National Safety and Quality Health Services Standards (NSQHS Standards) and five other standards that focus on the performance of non-clinical systems.

**Formation**

Formal education and activities for caregivers, that aims to grow their understanding of and commitment to the Mission.

**Group**

The collective of all divisions and services operated by St John of God Health Care.

**Holistic care**

Care that nurtures the physical, intellectual, social and spiritual aspects of wellbeing.

**Hospital in the Home (HITH)**

The provision of healthcare to patients in their home as a substitute for hospital accommodation.

**Inpatient**

A person admitted to a hospital for treatment, usually requiring at least one overnight stay in an acute bed.

**Intern**

A student or trainee who may or may not have finished study and who is working to gain experience or satisfy requirements for a qualification.

**Memorandum of Understanding**

A written agreement between two or more parties.

**Mission Management Model**

A framework to ensure St John of God Health Care remains faithful to its mission.

**Multicentre studies**

Research that takes place across more than one location.

**National Association of Testing Authorities, Australia (NATA)**

The national authority responsible for the accreditation of laboratories, inspection bodies and calibration services in Australia.

**National Safety and Quality Health Service Standards (NSQHS Standards)**

Ten mandatory national standards, developed by the Australian Commission on Safety and Quality in Health Care, that aim to improve the safety and quality of health service provision.

**Not-for-profit or non-profit organisation**

An organisation not operating for the profit or gain of individual members. Any profits made are returned to the operation of the organisation.

**Outpatient**

A patient/client receiving services from a hospital but not requiring admission as an inpatient.

**Overnight patient**

An inpatient who is admitted and discharged following at least one overnight stay.

**Palliative care**

The care provided to a patient who has an illness that cannot be cured, where the focus is on helping the patient have the best quality of life by addressing physical symptoms and supporting emotional, spiritual and social needs.

**Pastoral services**

The care of people's spiritual, religious and emotional needs.

**Pathology**

The diagnostic branch of medicine examining changes in cells and tissues that signal disease.

**Perinatal mental health**

Mental health issues arising around the time of birth, generally accepted to cover the period from conception to four years after birth.

**Perth Northern Hospitals**

An internal expression referring to a group of St John of God Hospitals in Western Australia, specifically St John of God Midland Public and Private Hospitals, St John of God Subiaco Hospital and St John of God Mt Lawley Hospital.

**Perth Southern and Regional Hospitals**

An internal expression referring to a group of St John of God Health Care hospitals in Western Australia, and in regional locations, specifically St John of God Murdoch Hospital, St John of God Geraldton Hospital and St John of God Bunbury Hospital.

*Sister Romanus supports a patient in the Chemotherapy Unit of St John of God Midland Public Hospital.*



**Press Ganey**

An independent company that conducts benchmarked satisfaction surveys.

**Procedure**

An activity performed on an individual with the object of improving health, treating disease or injury, or making a diagnosis.

**Public Private Partnership (PPP)**

A government service or private business venture funded and operated through a partnership of government and private sector company or companies, involving a contract between a public sector authority and a private party or parties.

**Reconciliation Action Plan (RAP)**

A plan designed to build stronger relationships and enhanced respect between Aboriginal and Torres Strait Islander peoples and other Australians.

**Registered Training Organisation**

An organisation or training provider registered by Australia Skills Quality Authority (ASQA), or in some cases a state regulator, to deliver vocational education and training services.

**Registrar**

A doctor training to be a specialist in a particular field of medicine, such as obstetrics or surgery.

**Resident Medical Officer**

A doctor-in-training who is training and working in general practice in a hospital.

**Root cause analysis**

A method of problem solving used to identify the root causes of faults or problems.

**Same day patient**

An inpatient who is admitted and discharged on the same day.

**Separation/discharge**

The completion of an episode of care.

**Service Ethos**

The ethos behind our service delivery to patients, clients, caregivers and others with whom we interact, guided by our Mission.

**Social justice**

A commitment to people who are vulnerable, materially poor, powerless, or marginalised, and a fundamental and non-negotiable part of our ministry.

**Social Outreach**

St John of God Health Care services that reach out to people experiencing disadvantage, to improve health and wellbeing.

**Sisters of St John of God**

A congregation of Catholic Sisters, originating in Ireland, who founded St John of God Health Care in Western Australia in 1895.

**Specialist Training Program**

An Australian Government initiative that helps fund accredited specialist training positions in settings beyond traditional public teaching hospitals.

**Stewardship**

Effective and sustainable use of resources.

**Sustainability**

The ability of an organisation to endure long term, particularly in terms of financial, workplace, environmental and community activities.

**Team nursing model of care**

A model of care that develops a skill mix reflective of clinical need in each ward and unit.

**Telehealth**

The delivery of health services via telecommunications technologies, such as videoconferencing and the internet, often for the purpose of supporting long-distance healthcare, education and health administration.

**Transformation**

Making fundamental changes to how business is conducted in response to a change in the internal or external environment, with a focus on creating holistic value.

**Trustees**

The first tier of St John of God Health Care's bicameral governance structure, with overall responsibility for St John of God Health Care.

**Workforce planning**

Strategies and actions designed to ensure there are sufficient staff to meet current and future demand.

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