



A REASON TO HOPE



Our distinctive vocation in Christian healthcare is not so much to heal better or more efficiently than anyone else; it is to bring comfort to people by giving them an experience that will strengthen their confidence in life. The ultimate goal of our care is to give those who are ill, through our care, a reason to hope.
Cardinal Bernadin, 1995



Annual Report 2010/11



Foreword by the Chairman of Trustees

In 1995, the late Cardinal Bernadin, then Archbishop of Chicago, wrote a defining Pastoral Letter on Health Care – ‘A Sign of Hope’ – which drew on some of his own insights as a patient with pancreatic cancer experiencing the “chaos that accompanies illness”.

“Our distinctive vocation in Christian healthcare is not so much to heal better or more efficiently than anyone else; it is to bring comfort to people by giving them an experience that will strengthen their confidence in life,” Cardinal Bernadin wrote. “The ultimate goal of our care is to give those who are ill, through our care, a reason to hope.”

At St John of God Health Care we are inspired by this same motivation in all our services. We aim to go beyond safety and quality to provide an experience for people that honours their dignity, is compassionate and affirming and leaves them with a reason to hope.

This is our theme for this year's report. These pages are filled with examples of the way we strive to deliver holistic care and support to the people and communities we serve. It is testament to the dedication of our caregivers and their faithfulness to our healing Mission.

I hope you find it rewarding learning about our distinctive vocation.



Clive Macknay
Chairman of Trustees



Contents

At a glance	02	People	57
Organisation	03	Directors of Mission	58
Vision, Mission and Values	04	Workforce	59
Founding Story	05	Service Ethos	60
Structure	05	Workforce Planning	60
Key Result Areas	05	Equal Opportunity	63
Sustainability	06	Caregiver Satisfaction	63
Year in Summary	07	Work-Life Balance	63
Overview 2010/11	08	Industrial Relations	64
Chairman's Report	10	Caregiver Benefits	65
CEO's Report	12	Occupational Health and Safety	66
Finance Overview	14	Learning and Organisational Development	69
Stewardship	15	Community	73
Strategic Update	18	Community Relations Framework	74
Services	21	Social Justice	74
Location Map	22	Community Participation	76
National	24	Environment	79
International	26	Group Environmental Sustainability Strategy	80
Western Australia	27	Environmental Data Monitoring	81
Victoria	33	Water and Energy Audits	81
New South Wales	42	Environmental Activities	82
New Zealand	44	Case Study – Murdoch Solar Panels	83
Excellence in Care	45	Looking Ahead	84
Accreditation	46	Governance	85
Satisfaction Surveys	46	Organisation Chart	86
Clinical Risk Management	47	Structure	87
Information Technology	49	Governance	87
Nursing and Midwifery Standards	49	Biographies	91
Palliative Care	49	Glossary	98
Pastoral Services	50	Index	100
Awarding Excellence	51	Contact us	102
Research	53		
Research Approvals	54		
Research Highlights	55		

At a glance

Origins

- Established in 1895 in Western Australia by the Sisters of St John of God and merged services with those of the Hospitaller Order of St John of God (p5) in 2007.
- As a not-for-profit ministry of the Catholic Church, we return all profits to the communities we serve by:
 - updating and expanding facilities and technology;
 - growing existing, and developing and acquiring new services; and
 - providing Social Outreach and Advocacy services to people experiencing disadvantage or poor health.

Leading healthcare provider

- Australia's third largest private hospital operator.
- Australia's fourth largest – and largest not for profit – pathology operator.
- Australia's third largest Catholic healthcare group.

Operations

- Hospitals, pathology, home nursing and Social Outreach and Advocacy services in Australia, New Zealand, East Timor and the wider Asia-Pacific region (p21-44).
- Employs 9,535 caregivers, as we call our staff (p57).
- Recruits 1,388 volunteers, who give so generously of their time and expertise (p77).
- Revenue of \$943m.

Our 13 hospitals (2,030 beds) recorded 216,099 inpatient and day patient admissions, and our 9 maternity hospitals delivered 8,595 babies.

Service delivery

- Our 13 hospitals (2,030 beds) recorded 216,099 inpatient and day patient admissions, and our 9 maternity units delivered 8,595 babies (p17).
- We provided 1,897,798 pathology episodes.
- Our home nursing services (p25) provided 84,976 episodes of care.

Social Outreach and Advocacy services

- We committed \$40.5 million, including partnership funding, to our Social Outreach and Advocacy services, which reach out to people experiencing disadvantage to improve health and wellbeing (p75).

Donations and bequests

- Our Foundation (p77), hospitals and auxiliaries received \$3.7m towards major capital appeals, equipment and facility upgrades, Social Outreach and Advocacy services, and our increasing commitment to research (p53).



ORGANISATION



In this section

Vision, Mission and Values
Founding Story
Structure

Key Result Areas
Sustainability

Hospitality, one of our five Values, guides us in delivering our Mission. The caregiver pictured above, at our Richmond hospital Medical Centre, is one of many caregivers greeting patients and visitors at reception.

Organisation

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

As a leading provider of healthcare services, including hospitals, pathology, home nursing and outreach services throughout Australia, New Zealand and the wider Asia-Pacific region, we strive to serve the common good through the provision of holistic, ethical and person-centred care and support.

As a not-for-profit group, we return all profits to the communities we serve by updating and expanding our facilities and technology, developing new services and acquiring new services, and providing Social Outreach and Advocacy services to people experiencing disadvantage to improve health and wellbeing.

Inspired by the example of the religious women and men who founded our organisation, our service reflects a generosity of spirit that calls us to enthusiastically go beyond what might be expected. We stand in solidarity with people in their joys and their suffering as we continue to bring the human touch into the high tech world of medicine.

Vision, Mission and Values

Our Vision

To live and proclaim the healing touch of God's love where 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.

Our Mission

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

Our Values

Our Values guide us in delivering our Mission.

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.

A nurse takes the blood pressure of a patient at our Subiaco hospital's Bendat Family Comprehensive Cancer Centre.



To live and proclaim the healing touch of God's love where 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 – Our Vision.

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 comforting the afflicted, sick and dying. He was particularly passionate about combating the great injustices heaped upon people experiencing disadvantage 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 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 these Sisters and Brothers, as well as many others who contributed to our organisation, including the Sisters of 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 operated by the Sisters of St John of God. The Sisters remain members of St John of God Australia Ltd together with the Dioceses in which we operate, as well as with 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 (p87). The Board provides direction and guidance to the Group Chief Executive Officer and through him the Group Management Committee (p87), which oversees performance in our five key result areas.

Key Result Areas

These result areas (p18) inform our annual operational plans:

- 1/ **Culture** (p57,73)
- 2/ **Excellence in care** (p45)
- 3/ **Excellence in governance and management of resources** (p85)
- 4/ **Formation, education and leadership** (p69)
- 5/ **Social justice** (p74)



We believe that integrating sustainability into all that we do – but particularly across financial, workforce, community and environmental contexts – is critical to our ability to support the health and wellbeing of individuals and communities now and well into the future.

Sustainability

As an organisation approaching its 117th year, St John of God Health Care operates firmly on the premise of sustainability.

We aspire, through principles, policies and practices, to meet the current needs of our staff, patients and clients, and the communities we serve, without compromising our ability to continue doing so well into the future. The concept of stewardship is central to our understanding of leadership. In our tradition, stewardship is about an understanding that everything we possess – our heritage, our values, our culture, our resources – is held in trust. We have received these from prior generations and we hold them in trust for future generations. As ethical stewards we concern ourselves with fidelity to that trust.

Sustainability therefore is enshrined in our Mission, which is to continue the healing mission of Jesus Christ through the provision of services that promote life to the full by enhancing the physical, intellectual, social and spiritual dimensions of being human.

We implement our Mission by:

- Establishing models of healthcare and other services which reflect the healing ministry of Jesus Christ and give hope to all people with whom we relate.
- Developing a person-centred culture.
- Relating to each other and to planet earth in ways that are mutually transforming.
- Being good stewards of our resources, both human and physical.
- Promoting social justice and the common good.
- Giving witness of a believing, serving ministry of the Catholic Church.

We believe that integrating sustainability into all that we do – but particularly across financial, workforce, community and environmental contexts – is critical to our ability to support the health and wellbeing of individuals and communities now and well into the future.

Our sustainability matrix at right is designed to help readers identify the key areas in our report where we believe we are making a difference to the long term sustainability of our organisation, as well as health service delivery in the communities we serve.

Sustainability Matrix

Financial sustainability

Financial performance	14
Economic stewardship	16
Governance	85
Service performance	24-44

Workforce sustainability

Culture	58,63
Service Ethos	60
Workforce planning	60
Industrial relations	64
Caregiver benefits	65
Occupational Health and Safety	66
Learning and development	69

Community sustainability

Community relations	74
Social justice	74
Social Outreach and Advocacy	75
Patients and caregivers facing hardship	76
Donations and bequests	77

Environmental sustainability

Strategy	80
Data monitoring	81
Water and energy audits	81
Key activities	82

YEAR IN SUMMARY



In this section

Overview 2010/11
Chairman's Report
CEO's Report

Finance Overview
Stewardship
Strategic Update

Charting growth and development is as important for organisations as it will be for the family of this newborn baby at our Geraldton hospital.

Overview 2010/11

This overview provides a snapshot of some of our highlights and challenges in 2010/11.

Financial performance

- Achieved revenue of \$943m, a 5% increase on the previous year, with hospital revenue increasing 7% and pathology revenue 1% (p15).
- Earnings Before Interest, Tax, Depreciation and Amortisation (EBITDA) were \$76.1m, a decrease of 13.6%, largely as a result of a one-off \$12m acquisition gain in 2009/10 (p15).

Services

- Hospitals increased inpatient (95,303 separations) and day patient (120,796 separations) work, representing an increase of 3.5% and 8.1% respectively. Procedures (138,890) increased by 1.3%. These increases reflect growth through redevelopment and expansion of our hospital facilities (p16).
- Births decreased by 4.6% to 8,595, primarily due to the ongoing shortage of obstetricians and the increasing numbers of patients opting to use the public sector as a result of the changing economic climate (p17).

- Approved four major capital redevelopments and expansions for our hospitals at Murdoch (\$234m), Geelong (\$56.3m), Bunbury (\$35.9m), and Burwood (\$14.8m).
- Shortlisted by the Western Australian Government (with one other healthcare group) to present a proposal to design, build and operate the \$360m Midland Health Campus (p10).
- Christchurch services – Halswell and Waipuna – continued providing services to residents and clients despite damage to buildings and disruption to utilities caused by three major earthquakes and aftershocks. The services also volunteered time and resources to support vulnerable people and communities in Christchurch (p44).

Excellence in care

- Our Ballarat, Warrnambool and Subiaco hospitals achieved excellent results in their Australian Council on Healthcare Standards accreditation surveys. Ballarat received an Outstanding Achievement for water and energy conservation, Warrnambool received 16 Extensive Achievements out of 45 criteria, and Subiaco received 5 Extensive Achievements out of 14 criteria (p46).

Our rehabilitation services, including at our Bendigo hospital, are helping patients recover from illness and surgery so they can achieve maximum independence and quality of life.



Our Ballarat, Warrnambool and Subiaco hospitals achieved excellent results in their Australian Council on Healthcare Standards accreditation surveys.

- Received top quartile results in the independent, nationally benchmarked Press Ganey surveys for inpatient, day surgery, emergency department and doctor satisfaction, our best ever performance (p46).
- Services and caregivers were recognised in a wide range of external awards for excellence (p51).

Research

- Continued to strengthen research endeavours – primarily in the areas of oncology, nursing, and mental health – with 58 new research studies approved by our Ethics Committee (p54).
- The St John of God Health Care Ethics Committee received certification from the National Health and Medical Research Council, enabling it to review internal and external research proposals.
- Established a Nursing Midwifery and Allied Health Research Council to facilitate and enhance research (p56).

People

- Increased doctor training, with 266 medical students from six universities rotating through our hospitals. Of our 51 specialists in training, 27 are funded through the Commonwealth Government's Specialist Training Program (p61).
- Trained more undergraduate nurses, providing 29,962 student days (up from 26,402 the previous year) and increased the number of graduate nurse program placements from 140 to 183 (p61).
- Finalised an Indigenous Employment Policy and the only national healthcare provider to sign the Australian Employment Covenant's 50,000 Sustainable Indigenous Jobs campaign (p63).
- Developed and launched a Disability Access and Inclusion Plan to improve our ability to include and respond to the needs of people with a disability (p63).
- Launched a new uniform across our hospitals, pathology and home nursing services (p65).
- Launched a five year Occupational Health and Safety (OHS) Strategy to provide direction and guidance, as we strive to achieve best practice OHS management and performance within the health sector (p66).

Community

- This year, we committed \$40.5 million, including partnership funding, to our Social Outreach and Advocacy services, which reach out to people experiencing disadvantage to improve health and wellbeing (p75). This was a 10.2% increase on last year and is the largest proportion of our expenditure on social justice initiatives, which totalled \$42 million this year (p16).
- Developed a Community Relations Framework to help increase the scale and scope of our community activities and improve community and social wellbeing (p74).
- Received \$3.7 million in donations and bequests to help us expand and develop services and our research program (p77).

Environment

- Launched our Group Environmental Sustainability Strategy 2011-2015 which will strengthen our work to date in this area (p80).
- In October 2010, became one of the first in the health sector to report green house gas emissions, energy consumption and energy production to the Commonwealth Government under the National Greenhouse and Energy Reporting Act 2007. We will now use this information as baseline data to compare energy consumption year on year (p81).

The St John of God Health Care Ethics Committee received certification from the National Health and Medical Research Council, enabling it to review internal and external research proposals.



Chairman's Report

What we do is invariably linked back to our Vision and Mission. This includes the strong governance and sustainable management of resources that allows us to maximise our ministry and provide holistic care and support to the people and communities we serve.

Last year, we developed and launched our Strategic Plan 2010-2014, which clarified our areas of focus over the next five years to ensure we could grow with our communities, continuing to meet their needs now and well into the future. This year, our strong governance has once again enabled us to achieve a year of growth; delivering more services to more people in more places, and ensuring that more people experience and benefit from our distinctive healing mission.

We also continued to plan and provide for the future; approving major capital developments (p13) totalling \$340.7 million; developing our bid to build and operate the 307-bed Midland Health Campus, a public-private partnership with the Western Australian Government; and concluding a series of five-year strategic plans in key areas such as Occupational Health and Safety (p66) and Environmental Sustainability (p80).

Increasing public health provision

In our Strategic Plan 2010-2014, we identified that as well as pursuing private sector growth, we wished to increase our pursuit of public sector opportunities. The Catholic sector in Australia has a great tradition of providing public hospital care going back as far as 1850 with St Vincent's in Sydney. Indeed, St John of God Health Care ran a public hospital in Goulburn, New South Wales, until 2004.

We already receive \$80 million annually of Commonwealth and State Government funding to deliver public services and programs, including: to help public hospitals reduce their waiting lists; to provide clinical services in palliative care, oncology and renal dialysis; to care for veterans funded by the Department of Veterans Affairs; to provide Home and Community Care nursing; to provide disability support and other Social Outreach (p75) services; to provide medical education (p61); and for capital grants, such as those recently received by our hospitals at Bunbury (p27) and Murdoch (p29).

We believe that increasing our provision of public healthcare services is in line with our Vision and Mission and desire to provide holistic services to all people, including those that are materially poor or marginalised. It is also good governance. By enhancing and diversifying our service provision, we strengthen our overall group-wide capabilities and increase our capacity to respond to changes in the external environment.

We were delighted when the Western Australian Government announced in January that we were one of two healthcare groups – and the only not-for-profit group – shortlisted to design, build and operate the new \$360 million Midland Health Campus. We are currently working on the more detailed Request for Proposal, which is due by 13 October 2011.



We believe that increasing our provision of public healthcare services is in line with our Vision and Mission and desire to provide holistic services to all people, including those that are materially poor or marginalised.

Caregiver safety and environmental sustainability

While all progressive organisations seek to provide an environment that is nurturing, safe and environmentally sustainable, St John of God Health Care's commitment is intrinsically linked to, and enshrined in, our Catholic heritage and our Vision, Mission and Values. This year, the Board approved two important and overarching five-year strategies to strengthen and guide our approach to caregiver safety and environmental sustainability.

Our Occupational Health and Safety (OHS) Strategy (p66) aims to help us achieve best practice OHS management and performance within the healthcare sector. Aside from our compliance and legislative requirements, it is critical that as an organisation committed to the safety, health and wellbeing of patients, that we are equally committed to that of our caregivers. We want our caregivers to work in a safe and healthy environment and return home to their loved ones in the same state of health as they left them.

Allowing harm to our caregiver is unconscionable and is also not good management. By improving our OHS performance we can reduce Workers' Compensation Insurance premiums which, when coupled with redressing lost productivity due to injury, significantly increases our capacity to provide more care. In addition, health workforce shortages (p60) and an ageing workforce necessitate a proactive approach to preventing injuries.

Our commitment to environmental sustainability, like that to OHS, is reflected in Our Vision document which identifies concern for our environment as a key aspect of our Mission, which is dependent on good stewardship of resources and relating to each other and planet earth in ways that are mutually transforming. Our Group Environmental Sustainability Strategy (p80) aims to strengthen our good work to date in this area and commits to two organisational objectives: minimising the environmental impact of our activities via the ongoing development of systems and procedures to avoid pollution, reduce environmental harm and conserve natural resources; and being recognised as a responsible corporate citizen.

Our OHS and environmental professional networks have put a lot of hard work and thought into these excellent strategies and the Board is looking forward to monitoring the progress of implementation plans and seeing the results.

With thanks

An enormous amount of work went into developing – and will continue in implementing – our Group Environmental Sustainability Strategy and our Occupational Health and Safety Strategy. Similarly, management and caregivers have committed tremendous energy, expertise and resourcefulness in preparing plans for facility and service development and expansion. All this on top of delivering another year of high quality, distinctive care to the patients, clients and communities we serve.

On behalf of the Board, I would like to sincerely thank caregivers, management, doctors, Trustees and our many partners for all their efforts this year. Each of you plays an important role in implementing our Mission and ensuring that we are relating to each other and to planet earth in ways that are mutually transforming.



Tony Howarth AO
Chairman



CEO's Report

The fast paced and complex world of healthcare demands constant review and change, which means each year seems to be busier and more demanding than the last. This year has been no exception.

I commend managers and caregivers across the group for their hard work and dedication to the multiple important projects that have stretched resources and required careful management in tandem with their normal day to day responsibilities. Much of our new work this year has related to preparing for major projects or activities, such as our comprehensive bid documentation for the Midland Health Campus, a planned public-private partnership in Perth (p10), and major redevelopments at our hospitals at Murdoch, Geelong, Bunbury and Burwood.

Healthcare is a capital intensive sector requiring continual upgrading and updating of facilities and equipment to reflect enhanced models of care and to ensure adequate capacity for growing populations. In addition to \$212m committed to hospital redevelopments over the last five years, we have worked hard during the year on the detailed planning of a further \$341m of Board approved expenditure on redevelopments to be completed in the next three years. Funding these much needed redevelopments requires us to stay focused on operational performance and good stewardship of the resources available to us.

Largely as a result of increased activity, our revenue grew by 5.3% during the year. Due to a combination of the one off \$12m acquisition gain of the St John of God Foundation in the prior year, our increasing commitment of funds to support our Social Justice program (up 11.5% from \$12.7m to \$14.2m), and to enhancing our role as a Catholic Church ministry through growth in Mission

and Pastoral Services activities (expenditure up 9% from \$6.4m to \$7.0m), our Net Result declined from \$39.8m to \$26.9m. Our hospitals and Health Choices division improved operating margins whilst those for Pathology and New Zealand declined.

Hospital growth

Through inpatient separations increasing 3.5% and day patient separations increasing 8.1%, our hospital revenue increased 6.7% to \$793.3m. Our hospital separations have increased 43% in the last five years, reflecting significant growth through redevelopments, expansions and acquisitions. During the year, our surgical procedures increased 1.3%, with inpatient procedure growth of 3.7% but a fall in day surgical procedures of 0.6%. Our births fell 4.6% due to a combination of obstetrician workforce shortages, especially in regional areas, and the increasing number of patients opting to use the public sector as a result of the changing economic climate (p16,17).

Home nursing growth

It was particularly pleasing to see our home nursing division, St John of God Health Choices, only in its second full year of operation, increase episodes of care 257% to 84,976. This dramatic increase was primarily due to our acquisition of M&M Healthpower in Melbourne in May 2010 and growth of services affiliated with our Subiaco, Murdoch and Bendigo hospitals. The team at St John of God Health Choices is bringing our distinctive, Mission and Values based care to a wider group of people throughout the community (p25).

Pathology maintains its position

During the year, the biggest impact on our Pathology division was the Commonwealth Government's deregulation of collection centres. As we had hoped, this brought opportunities to grow our outpatient services by opening 16 more collection centres, up 14% from 111 to 127. However, our competitors aggressively sought to



increase market share by opening an astonishing number of new centres, driving up costs across the industry. We were pleased to have increased revenue by 1.2% overall, notwithstanding the loss of a key private hospital contract in Western Australia in July 2010 (p24).

An operational review during the year re-committed us to providing an independent, high quality, value-adding pathology service. We have a natural growth path for inpatient work via our hospital growth and are delighted to have strong, long term relationships with our referring doctors, collection centre landlords and the public hospitals we service in Victoria.

Patient and doctor satisfaction

As a key part of our commitment to best practice, we use the independent Press Ganey surveys to measure the satisfaction of our patients and doctors. This year, we achieved our best ever aggregate results, achieving top quartile as a group in all four measures: Doctor Satisfaction (99th centile), Day Surgery Patient Satisfaction (90th centile), Emergency Department Patient Satisfaction (88th centile) and Inpatient Satisfaction (77th centile).

Whilst results across the group were excellent, it is particularly noteworthy that three of our hospitals (Ballarat, Geelong and Subiaco), achieved top quartile performance in each survey undertaken. The results (p46) are a resounding endorsement by patients and doctors of caregivers' ability to provide distinctive, holistic, patient-centred care within our excellent and well-equipped hospitals.

Hope in adversity

This year, our caregivers and services experienced the ravages of natural disasters – fires in Western Australia, floods in Victoria and New South Wales, and most significantly the devastation wrought by Christchurch's earthquakes.

These events affected caregivers personally and impacted on our services, particularly in Christchurch. The wider St John of God Health Care community certainly brought the theme of this year's Annual Report – 'A Reason to Hope' – to life as they reached out to colleagues in New Zealand, helping in many ways, including by travelling to Christchurch (p76) to voluntarily help staff and residents at Halswell. In turn, caregivers at our Halswell and Waipuna services in Christchurch reached out to their stricken communities and, despite their own hardship, supported those who most needed help (p44).

Year ahead

There will be much building activity this year as four of our hospitals undergo major redevelopments. In Perth, we are investing \$234m in expanding our Murdoch hospital (p29), Western Australia's largest ever private health sector investment, which will add 165 beds, eight theatres, a 10,000 sqm medical clinic and a cancer centre. Regional Western Australians will enjoy high quality healthcare services closer to home with the \$36m expansion of our Bunbury (p27) hospital, which includes a cancer centre, coronary care unit, angiography service and expanded renal dialysis unit. In Victoria, our Geelong hospital (p38) will gain 64 new beds, an emergency department (our third) and a state of the art rehabilitation service in its \$56m redevelopment; and in New South Wales, a \$15m redevelopment of our Burwood hospital (p42) will increase its ability to provide much needed psychiatric and drug and alcohol services.

We are also hoping for success in responding to the WA Government's Request for Proposal to design, build and operate the new Midland Health Campus in Perth, and will eagerly await the Government's announcement of its decision, which is expected in early 2012.

As part of our ongoing quest to achieve best practice in all that we do, we will be working hard in 2011/12 to implement the various five year Group Strategic Plans approved this year, including plans for Information Technology, Occupational Health and Safety, Pastoral Services and Environmental Sustainability.

A reason to hope

Through the combined activities of our hospitals, home nursing, pathology, and Social Outreach and Advocacy Services we have more than two million patient and client contacts per annum. The combined efforts of our caregivers and doctors, working in close partnership with our many key stakeholders, enables us to bring healing and hope to the communities we serve. In the year ahead we intend to build on our strengths, implement our strategies and provide innovative healthcare services and solutions for people in need of our support.

I thank our caregivers, doctors, Board, Trustees and our many partners for their contribution to St John of God Health Care, but more importantly to the lives of the people we serve.



Dr Michael Stanford
Group Chief Executive Officer



Finance Overview

Consolidated statement of comprehensive income

For the year ended 30 June 2011	FY 2010/11 \$M	FY 2009/10 \$M
Revenue		
Hospital income from ordinary activities	793.3	743.7
Pathology income from ordinary activities	110.2	108.8
Other income	39.3	42.6
Total revenue for the period	942.8	895.1
Expenses		
Employment costs	497.2	461.3
Medical consumables and supplies expenses	240.0	226.8
Other expenses from ordinary activities	129.5	118.9
Total expenses for the period	866.7	807.0
EBITDA	76.1	88.1
Interest, Depreciation and Amortisation	49.2	48.3
Net surplus for the period	26.9	39.8

Consolidated statement of financial position

As at 30 June 2011	FY 2010/11 \$M	FY 2009/10 \$M
Current Assets	136.9	134.4
Non-Current Assets		
Property, Plant & Equipment	557.6	555.1
Other	52.5	41.9
Total Assets	747.0	731.4
Current Liabilities*		
Borrowings	102.0	0.0
Other	183.9	161.0
Non-Current Liabilities		
Borrowings	0.0	87.0
Other	50.1	99.6
Total Liabilities	336.0	347.6
Net Assets	411.0	383.8
Equity	411.0	383.8

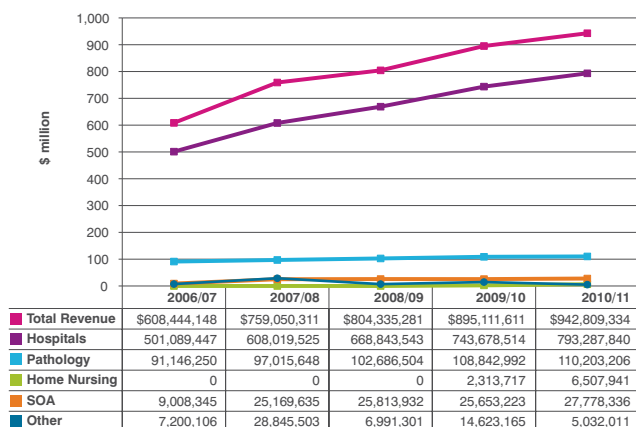
* The increase in current liabilities is primarily due to St John of God Health Care's debt facility being classified as a current liability as it expires on 31 January 2012. The facility will be renegotiated prior to the current one expiring.

Consolidated cashflow statement

For the year ended 30 June 2011	FY 2010/11 \$M	FY 2009/10 \$M
Net Cash Inflows from Operating Activities	92.5	78.8
Net Cash Outflows from Investing Activities	(57.1)	(49.6)
Net Cash Flow (used in) / from Financing Activities	(40.0)	(14.8)
Net increase / (decrease) in Cash and Cash Equivalents	(4.6)	14.4
Cash and Cash Equivalents at the beginning of the year	22.7	8.3
Cash and Cash Equivalents at the end of the year	18.1	22.7

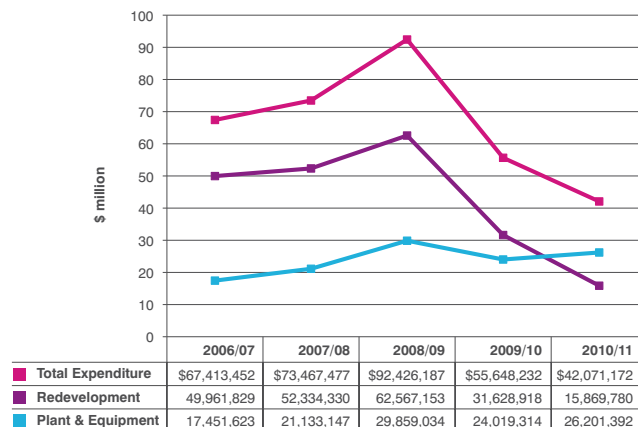
Stewardship

Revenue



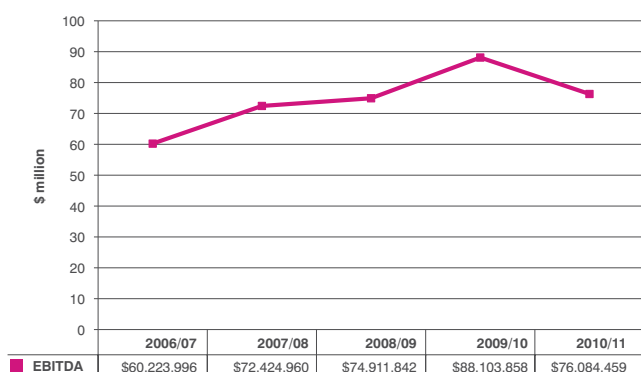
We achieved revenue of \$943m, a 5% increase on the previous year, with hospital and pathology revenue growing by 7% and 1% respectively. Home nursing, our newest division, grew 181% in 2010/11, largely due to an acquisition in May 2010. Over the last five years, we have averaged revenue growth of 11% per annum.

Capital Expenditure



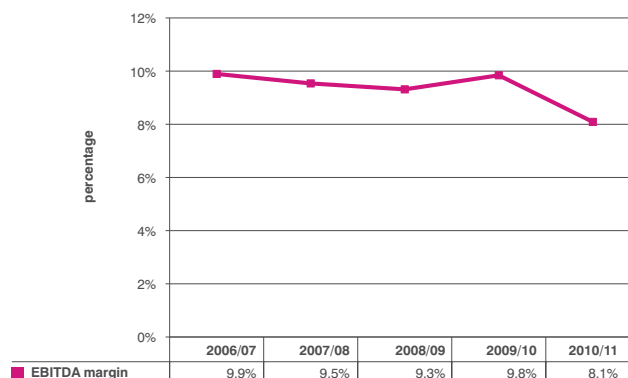
During the year a total of \$42m was spent on capital, comprising \$16m on development and expansions at our hospitals, and \$26m in replacement capital, information technology, plant and equipment. A total of \$212m has been spent on redevelopments and expansions over the past five years, with a further \$341m committed for major redevelopments at four of our hospitals over the next three years.

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



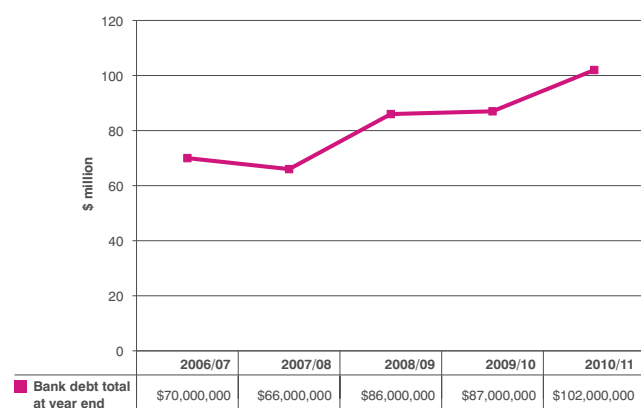
EBITDA of \$76.1m in 2010/11 represented a decrease of 13.6% on 2009/10, largely as a result of a one-off \$12m acquisition gain – the St John of God Foundation - in 2009/10. Excluding this acquisition gain, EBITDA was effectively unchanged, having grown 26.3% over the last five years due to volume growth and improved operational efficiencies.

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



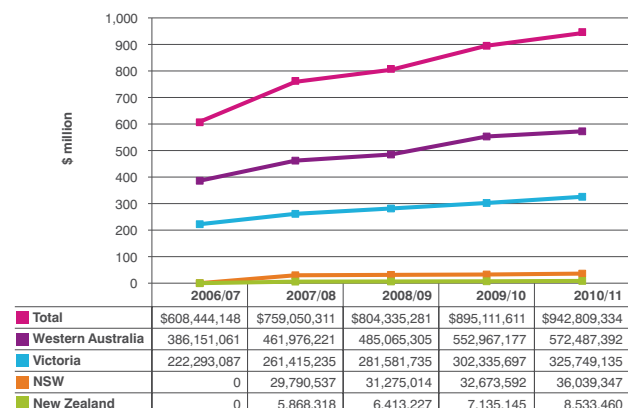
Our operating margin of 8.1% was significantly down on the prior year and well below our average of 9.3% over the last five years. Aside from the one-off impact of the \$12m acquisition gain in 2009/10, hospital margins and home nursing margins increased slightly on the prior year, but pathology margins declined in response to the changed regulatory environment for collection centres (p12).

Bank Debt



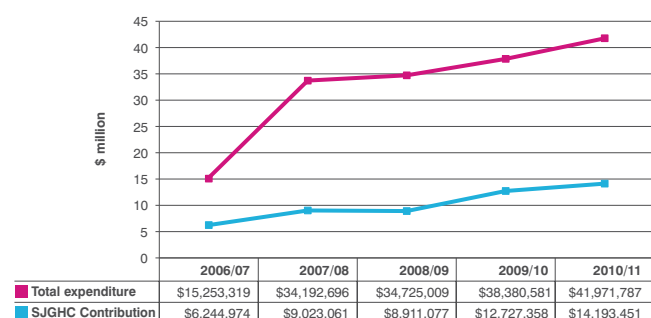
We fund our operations out of cash flow generated and from bank borrowings. Having spent \$42m on capital and repaying \$48m of Congregational debt in 2010/11, our interest bearing bank debt was \$102m at June 2011, up \$15m from the previous year. Improved cashflow management enabled such a relatively small increase in bank debt.

Operating Revenue - Geographic Analysis



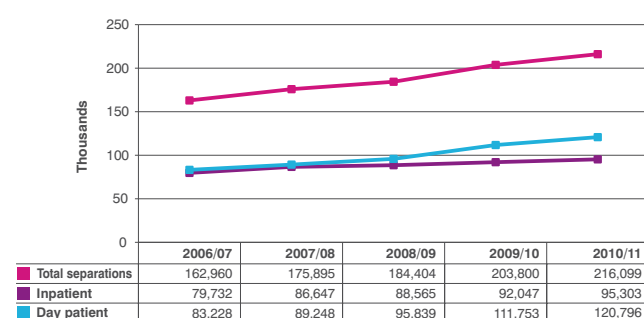
Victoria and New South Wales grew as a proportion of revenue, up 0.8% and 0.1% from the prior year, with WA our major area of activity, declining from 61.8% to 60.7% of total revenue.

Social Justice Expenditure



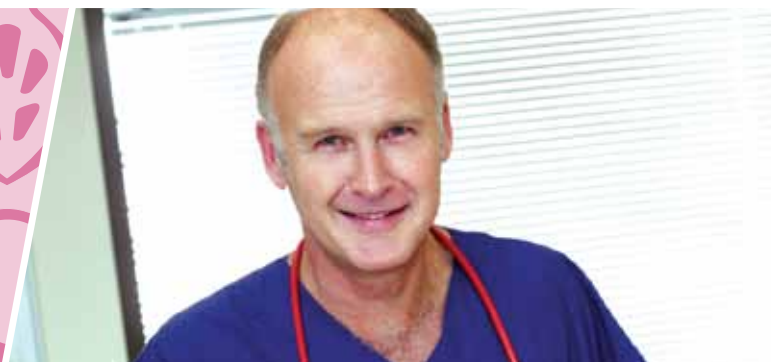
The \$42m (including partnership funding) committed to social justice initiatives, including Social Outreach and Advocacy services (p74), in 2010/11 represents an increase of 9.4% over the prior year, and is consistent with our strategy of moving towards 2% of eligible revenue being committed from our own funds to this area. Total social justice expenditure over the past five years has been \$164m. St John of God Health Care's contribution has increased 127% over five years.

Separations

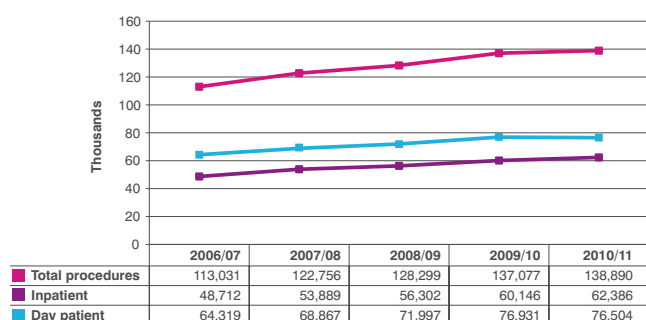


We achieved strong growth of 3.5% in inpatients, consistent with average growth of 3.9% over the last five years. Day patient growth of 8.1% is consistent with 9% growth over the last five years. Day patients include non surgical work such as chemotherapy and dialysis.

Our employed and accredited doctors are treating more inpatients and day patients at our 13 hospitals, with total separations increasing to 216,099 this year.

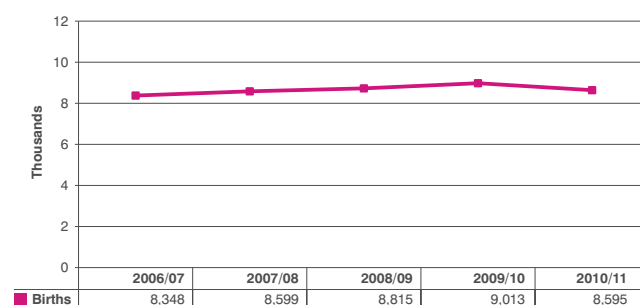


Procedures



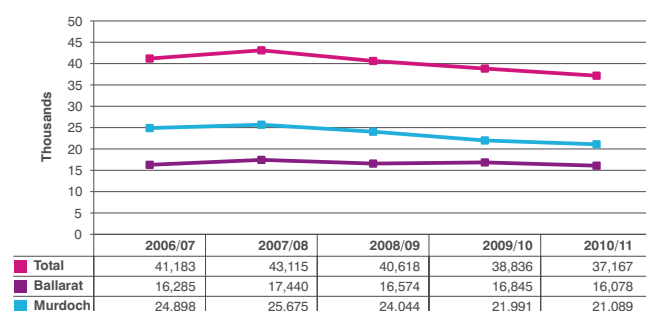
We experienced a 1.3% increase in the number of procedures in 2010/11, largely due to a 3.7% increase from inpatients. Day procedures fell by 0.6% although they have increased 18.9% over five years.

Obstetric Deliveries



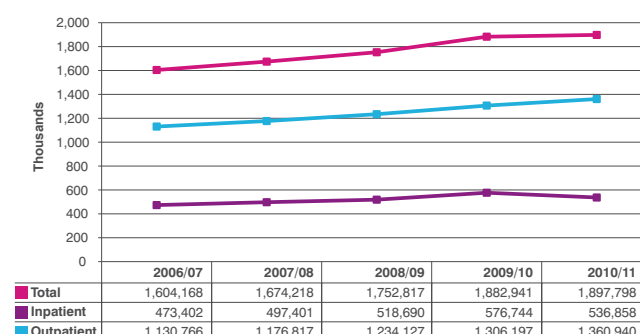
The number of births in 2010/11 decreased by 4.6% from 2009/10 in contrast to the average increase since 2006/07 of 2.3%. This has been primarily due to the ongoing shortage of obstetricians and the increasing numbers of patients opting to use the public sector as a result of the changing economic climate.

Emergency Presentations



Our two emergency departments continue to provide an important community service, but experienced decreased presentations in 2010/11, with Ballarat decreasing 4.6% and Murdoch 4.1%. Whilst total presentations were down 4.3%, inpatient admissions from our emergency departments were up 2.5%.

Pathology Episodes



Pathology activity grew by 0.8% on last year's episodes, with a 4.2% increase in outpatient and a 6.9% decrease in inpatient episodes. The decrease in inpatient episodes is due to the expiry of a major private hospital contract in July 2010. There has been an overall 18% increase in the number of episodes since 2006/07, reflecting the increased capacity of our hospitals and outpatient demand.

We experienced a 1.3% increase in the number of procedures in 2010/11, largely due to a 3.7% increase from inpatients.

Strategic Update

This section summarises progress, divided according to our key result areas (p5) against our 2010/11 Group Operational Plan, as well as indicating our focus for 2011/12. The Plan is developed with input from divisions

and reflects actions requiring group effort. Outcomes generally affect multiple divisions or a significant component of our operations. We have recorded our progress using the following symbols:

✓ Achieved → Good progress made ♦ Not achieved or delayed

Culture

Actions	Progress	2011/12 Focus
Finalise 5-year group-wide Occupational Health and Safety (OHS) strategy to improve performance (p66).	✓ Finalised in January 2011, with implementation commenced.	• Develop group-wide OHS Caregiver Engagement Plan and implement year-1 Strategy initiatives. • Develop evaluation tools for Community Relations Framework. • Assess disability access and inclusion measures across the group. • Finalise and implement Reconciliation Action Plan.
Develop Community Relations Framework (p74) to help our hospitals increase community engagement.	✓ Framework launched in January 2011. All hospitals now have plans in place or in final stages of development.	
Enhance philanthropic activities by completing integration of the St John of God Foundation (p77), developing a bequest model and incorporating fundraising into facility redevelopments.	✓ Foundation integrated, bequest model developed, and Murdoch, Geelong and Burwood have started planning fundraising campaigns to support their redevelopments.	
Conduct fundraising feasibility study to support research (p53) strategy for our Perth hospitals and Pathology.	♦ To be progressed subsequent to appointing Executive Director of Research in 2011/12.	
Better recognise the heritage of the Sisters and Brothers of St John of God.	→ Doctors' history book in draft, with launch in 2011/12, and discussions started with Brothers on developing their heritage story.	
Finalise Disability Action Plan and seek ratification by Australian Human Rights Commission (p63).	✓ Plan finalised, with ratification process started.	
Develop Reconciliation Action Plan and finalise Indigenous Employment Policy (p63)	→ Indigenous Employment Policy finalised. Reconciliation Action Plan still under development. Signatory to the Australian Employment Covenant's 50,000 Sustainable Indigenous Jobs campaign.	

Excellence in care

Actions	Progress	2011/12 Focus
Develop and pilot Nursing and Midwifery Standards of Excellence (p49).	✓ Standards developed and pilot started at Berwick, Subiaco, Warrnambool and Burwood.	- Complete pilot and evaluate Nursing and Midwifery Standards of Excellence in piloted hospitals. - Develop Pastoral Services Quality Improvement Plan and develop IT/data systems to support Pastoral Services. - Finalise and implement Doctor Recruitment Model for Victorian and NSW hospitals. - Review and develop nursing skill mix strategy and implement divisional action plans to achieve targets.
Approve and implement research strategy for our Perth hospitals and pathology, and establish Nursing, Midwifery and Allied Health Research Council (p56).	✓ Strategy partially implemented and Council established.	
Proposals to be completed for Board approval of major hospital redevelopments at Bunbury, Murdoch, Geelong, Bendigo and Burwood.	✓ Board approval for Bunbury, Murdoch, Geelong and Burwood redevelopments, with Bendigo proposal receiving in principle support from the Board.	
Implement year-1 actions of 5-year Pastoral Services Strategy (p50).	➔ Majority of Year-1 actions implemented with work continuing.	
Finalise strategy for specialist rehabilitation service development in Perth.	➔ Planning underway for service development; land acquisition options being finalised.	
Revise By-Laws to include allied health practitioners and specific mental health by-laws.	➔ Draft circulated for consultation, expected to be finalised by September 2011.	
Finalise Paediatrics Review and develop implementation plan.	✓ Review finalised, with Reference Group considering final recommendations.	

Excellence in governance and management of resources

Actions	Progress	2011/12 Focus
Implement Project Advantage initiatives, through better contracting, to make savings.	✓ Project Advantage initiatives achieved savings of \$3.4m this year, above budget of \$2.6m.	- Continue implementing Project Advantage initiatives to achieve savings. - Develop proposals to expand Information Systems' infrastructure - Enhance casemix management through activity-based costing and establish Health Insurance Contract Committee meetings. - Implement year-1 initiatives of Group Environmental Sustainability Strategy. - Develop strategy and implementation plan arising from Operating Theatres Review.
Develop five year strategic plans for each operating division.	✓ All strategic plans completed and endorsed.	
Implement year-1 actions from Information Systems (IS) Strategic Plan and finalise Major IS Project Policy and Governance Manual.	✓ Data centres migrated from external to internal; initial scoping to implement wireless access across all hospitals approved; preliminary reviews of medical record scanning systems and casemix management systems conducted; Manual approved.	
Develop strategy and implementation plan for activity-based costing.	➔ Strategy and implementation plan underway.	
Develop and endorse Group Environmental Sustainability Strategy (p80).	✓ Strategy endorsed and year-1 implementation to begin in 2011/12.	
Complete Operating Theatres Review and develop strategy and implementation plan.	➔ Review completed and strategies now being developed for key review recommendations.	



Formation, education and leadership

Actions	Progress	2011/12 Focus
Develop initiatives to increase our share of Commonwealth funding for registrars and clinical supervision (p61). Obtain WA Government commitment to fund intern positions for 2012.	➔ Improved structures to support training and supervision of interns, with 20 applications lodged for 82 new positions in 2012. Negotiations continuing with WA Government.	Implement Emerging Leaders Program to support and develop caregivers with leadership aspirations and potential.
Increase enrolments in Australian Catholic University's Graduate Certificate of Leadership and Catholic Culture (p72).	✓ 18 managers enrolled in 2011 Graduate Certificate.	
Develop reporting measures for caregiver development.	✓ Key reporting measures developed.	
Develop model to facilitate Outstanding Achievement results from Australian Council on Healthcare Standards (p46) in relation to formation, education and leadership.	✓ Model developed and will review success as divisions implement and undertake accreditation.	
Develop Emerging Leaders program.	✓ Program developed and being piloted, with participants selected, in 2011/12.	

Social justice

Actions	Progress	2011/12 Focus
Implement year 2 initiatives of Social Outreach and Advocacy (SOA) Strategy (p75).	✓ Key initiatives have been implemented and others are on track.	- Establish early-intervention services for young people with mental health issues. - Implement model to increase engagement of doctors in SOA services. - Approve and implement year-1 initiatives of Group Disability Strategy.
Complete integration of Horizon House (p26) service from the St John of God Foundation.	✓ Transfer of Horizon House from Foundation completed on 1 July 2011.	
Identify existing and new opportunities for doctor engagement in SOA services.	✓ Partnerships developed with Rural Health WA, Rafiki and Operation Rainbow to deliver rural and international health; doctors involved in NSW SOA service expansion; and Doctor Engagement Model developed.	
Finalise group policies in key social justice areas.	➔ Patient Concessions Policy and Caregivers Facing Hardship Policy (p76) approved, and Community Responsibility Policy awaiting approval.	
Approve Group Disability Strategy.	➔ Work continuing on scoping Strategy.	

SERVICES



In this section

Location Map
National
International

Western Australia
Victoria
New South Wales

New Zealand

With hospitals, home nursing, pathology and Social Outreach and Advocacy services across Australia and New Zealand, this Enrolled Nurse at our Warrnambool hospital is part of a wider team of 9,535 caregivers.



Our Locations

WESTERN AUSTRALIA

1 Perth

- Head Office
- St John of God Foundation (p77)

Hospitals and home nursing

- St John of God Hospital Subiaco (p31)
- St John of God Hospital Murdoch (p29)
- St John of God Murdoch Community Hospice (p29)
- St John of God Health Choices (p25)

Social Outreach and Advocacy services

- Drug and Alcohol Withdrawal Network
- Horizon House (two houses) (p26)
- St John of God Murdoch Ferns House (p30)
- St John of God Raphael Centre Subiaco (p32)

2 Bunbury

Hospital

- St John of God Hospital Bunbury (p27)

Social Outreach and Advocacy services

- South West Community Drug Service Team

3 Geraldton

Hospital

- St John of God Hospital Geraldton (p28)

Social Outreach and Advocacy services

- Horizon House (p25)

4 North and Mid West

Social Outreach and Advocacy services

- Strong Family, Strong Culture (p26)
- Horizon House Broome (p26)

5 Statewide

Pathology

- 6 laboratories and 55 collection centres (p24)

VICTORIA

6 Melbourne

Hospitals and home nursing

- St John of God Hospital Berwick (p37)
- St John of God Nepean Rehabilitation Hospital (p39)
- St John of God Pinelodge Clinic (p40)
- St John of God Health Choices (p25)

Social Outreach and Advocacy services

- St John of God Accord (p33)
- St John of God Raphael Centre Berwick (p37)

7 Ballarat

Hospital and home nursing

- St John of God Hospital Ballarat (p34)
- St John of God Health Choices (p25)

Social Outreach and Advocacy services

- St John of God Bloomsbury House
- St John of God Pomegranate House
- St John of God Raphael House (p35)

8 Bendigo

Hospital and home nursing

- St John of God Hospital Bendigo (p36)
- St John of God Health Choices (p25)

Social Outreach and Advocacy services

- Horizon House (p26)

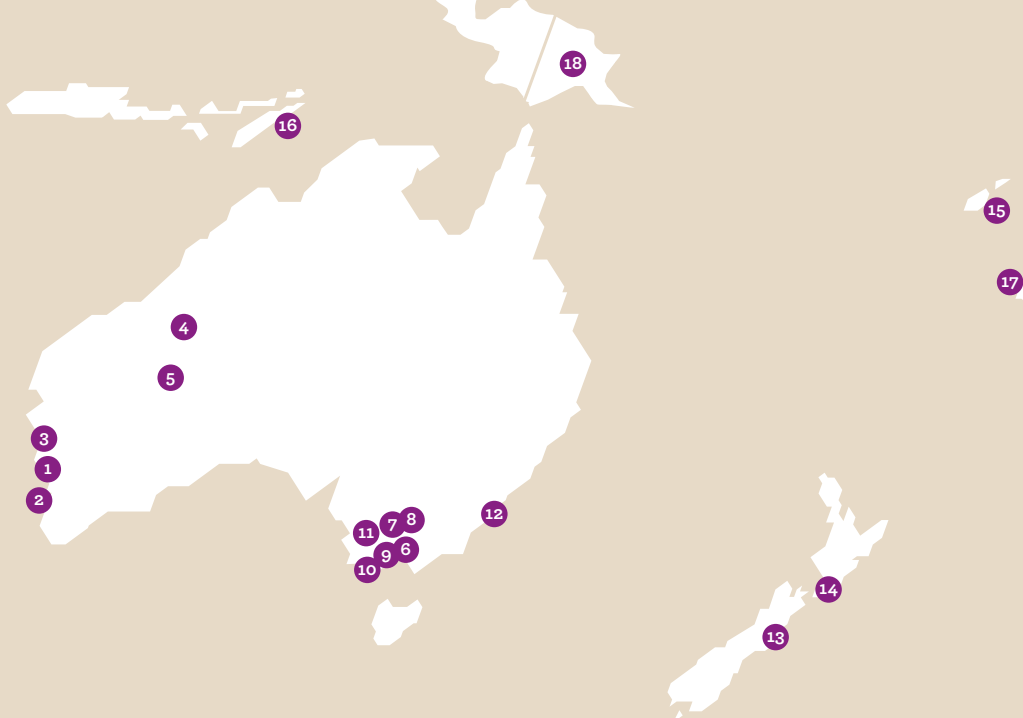
9 Geelong

Hospital and home nursing

- St John of God Hospital Geelong (p38)
- St John of God Health Choices (p25)

Social Outreach and Advocacy services

- Horizon House (p26)
- St John of God Raphael Centre Geelong (p38)



10 Warrnambool

Hospital and home nursing

- St John of God Hospital Warrnambool (p41)
- St John of God Health Choices (p25)

Social Outreach and Advocacy services

- Horizon House (p26)
- St John of God Raphael Centre South West Victoria (p41)

11 Statewide

Pathology

- 17 laboratories and 72 collection centres (p24)

NEW SOUTH WALES

12 Sydney

Hospitals

- St John of God Hospital Burwood (p42)
- St John of God Hospital Richmond (p43)

Social Outreach and Advocacy services

- Casa Venegas (p42)
- St John of God Raphael Centre Blacktown (p43)

NEW ZEALAND

13 Christchurch

Supported residential facility for people with a disability

- St John of God Halswell (p44)

Social Outreach and Advocacy services

- St John of God Waipuna (p44)

14 Wellington

Supported residential facility for people with a disability

- St John of God Wellington (p44)

ASIA PACIFIC

Social Outreach and Advocacy services

15 Fiji

- Nursing (p43)

16 East Timor

- Pathology, nursing, primary health (p26)

17 Tonga

- Tonga Twinning Project (p35)

18 Papua New Guinea

- Drug and Alcohol Services (p26,40)

Full contact details for our Head Office and services can be found on page 102.



Australia – National St John of God Pathology

Established 1940s in Western Australia and 1968 in Victoria

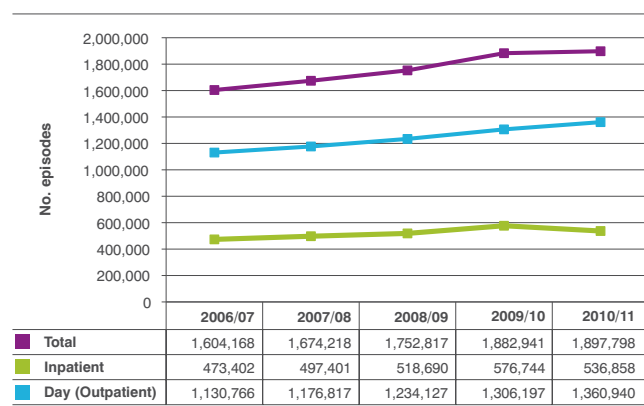
Locations 23 laboratories and 127 collection centres throughout WA and Victoria

Chief Executive Officer Mr Graham Armstrong

Staff 1,161

Performance Snapshot

Pathology Episodes



Services

- Opened 12 new collection centres across WA and Victoria, providing further growth opportunities and better outcomes for medical practitioners and patients.
- Five laboratories were reassessed by the National Association of Testing Authorities (NATA) and received reaccreditation under the triennial accreditation system (px). Our laboratory in Collingwood, Victoria, received two commendations for its high level of staff skill and its quality assurance program.
- Introduced two new tests: Rapid PCR (Polymerase Chain Reaction) tests for the detection of Chicken Pox and a PCR test for rapid detection of herpes simplex virus. The introduction of these new tests greatly improved turn around times for test results to referring medical practitioners.
- Refurbished our core laboratories at Geelong in Victoria, and Osborne Park in Western Australia, so we could expand and redesign our workflow processes.
- Introduced 'front end' automation into Specimen Reception where samples are checked and sorted for testing by machine. This replaced a manual process and has improved efficiency and accuracy, sorting up to 1,200 specimen tubes per hour.
- New software enabled real time auditing of data entry, assisting us interpret pathology results, including linking with historical patient data.

- The loss of a key 500-bed private hospital contract in Perth in July 2010, led to a reduction in referrals; primarily inpatients with some impact on outpatient numbers as well. The satellite laboratory at the private hospital also had to be decommissioned.

People

- Our Scientist-In-Charge Haematology, Sue Strutt, and our National Quality Manager, Milana Ranieri, were invited to lecture undergraduate Biomedical Science degree courses at Curtin and Notre Dame Universities, WA, in 2011.
- Created two new pathology registrar positions to help reduce the widespread shortage of pathologists in Australia. We are committed to providing more training places in laboratories and hospitals to ensure people can specialise as pathologists.
- Ten caregivers in Victoria and nine in WA started a Diploma of Management for new managers and team leaders (p70).

Community

- Provided assistance to Ruah Refuge, which provides temporary accommodation for victims of domestic violence in Perth. Caregivers raised funds, collected toys, clothing and household goods, and held working bees to renovate units, patio and garden areas at the refuge.
- Continued providing laboratory support, training and information technology programs to our National Pathology Development program in East Timor (p26).
- A group of 14 caregivers have volunteered at Geelong's Uniting Church Soup Kitchen one night each week, for the past two years, providing evening meals for up to 100 homeless people.

Year Ahead

- Significant planned upgrades to information technology across our practices in WA and Victoria to ensure we continue to provide quality diagnostic services to the community and hospitals.
- Continued roll out of community collection centres as part of growth strategies in a deregulated environment.
- Merging our Myers Street and Ryrie Street core laboratories into a single location in Geelong to improve efficiencies and service levels for referring general practitioners.

Australia – National St John of God Health Choices

Established 2009

Locations 6 locations in Victoria and
2 locations in Western Australia

Chief Executive Officer Mr Steve Hall

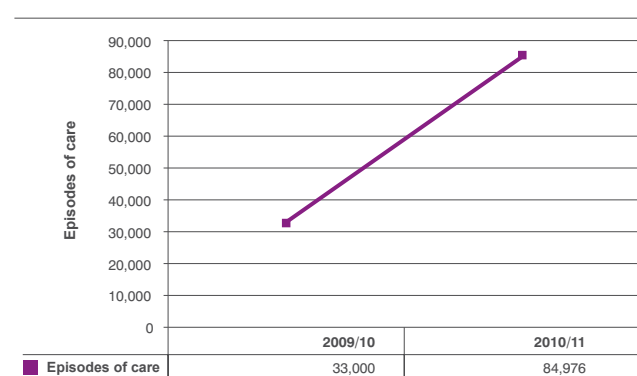
Staff 115

Services Hospital in the home, post acute care, community nursing, personal care.



Performance Snapshot

Episodes of Care



Services

- In our second full year of operation, episodes of care increased by 257% to 84,976 visits, primarily because of the acquisition of M&M Healthpower in Melbourne in May 2010 and growth of our services at Subiaco and Murdoch in WA, and in Bendigo, Victoria.
- Successfully integrated M&M Healthpower, which enabled us to provide home nursing and personal care services across Melbourne.
- Gained the internationally recognised quality accreditation standard ISO 9001 (International Standardisation Organisation) triennial recertification, which assures services that enhance customer satisfaction and meet statutory and regulatory requirements.
- Developed a 5-year strategic plan setting the direction for Health Choices and the growth of home nursing services.
- Established a satellite site for Health Choices at our Murdoch hospital, extending our services to the City of Mandurah, south of Perth.
- Consolidated our Melbourne operations office and corporate services into a single office in South Melbourne.
- At Warrnambool we started an Enhanced Discharge Planning Program following up frail and medically unwell veterans for 14 days after discharge. This includes a home nursing visit and telephone calls, and is aimed at reducing or preventing hospital readmission.
- In partnership with Medibank Private we started a trial in Melbourne aimed at better managing chronic disease via home based telemonitoring.

People

- In the independent Press Ganey (p63) staff satisfaction survey, we ranked 17th out of 141 surveyed private and public healthcare services, with caregiver satisfaction higher than 88 percent of all services surveyed.
- Appointed an Occupational Health and Safety (OHS) Coordinator and established an OHS Committee.
- Established an awards program for caregivers recognising excellence in demonstrating our Values.
- Developed training and learning packages specific to Health Choices, including staff orientation, mandatory learning and OHS.
- A continuing challenge is increasing our workforce to meet the needs of a rapidly expanding service. We are currently reviewing a range of recruitment and retention strategies.

Community

- As a new division, we formed a committee to develop social justice initiatives into the future.

Year Ahead

- Expand the Enhanced Discharge Planning service to other hospital locations.
- Increase Hospital in the Home activity at Ballarat and other sites to increase the choice for clients between hospital admission and being cared for at home.
- Increase our acute services and develop our community aged care capability to ensure we are meeting the needs of stakeholders, including hospitals, funders, doctors, government and the community.
- Appoint a Quality Coordinator and participate for the first time in the Australian Council on Healthcare Standards EQUiP accreditation program (p46).
- Replace our current multiple information technology systems with a single patient management system so we can better manage patient appointments, staff rosters, schedules and billings for all our sites.



Australia – International Group Social Outreach and Advocacy Services

Established 2002

Locations Western Australia, Victoria, East Timor

Group Director Ms Anne Russell-Brown

Staff 62

Services In addition to overseeing group-wide strategy for growth of Social Outreach and Advocacy services operated by divisions, we directly manage services in the areas of Early Years (Strong Family, Strong Culture), Young People (Horizon House) and International Health (development programs in East Timor and Papua New Guinea).

Social Outreach and Advocacy services are one of four areas included in our social justice vision (p74) and reach out to people experiencing disadvantage to improve health and wellbeing.

Our focus is on services in two areas – early years (0-4) and young people (12-25) – and on early intervention and capacity building. We also have international health programs in the Asia-Pacific region.

Early Years (0-4)

- Strong Family, Strong Culture: A comprehensive review highlighted training and service developments to deliver improved outcomes in our Aboriginal maternal and child health service.

Young People (15-25)

- Horizon House (supported accommodation for young people, aged 16-22, who would otherwise be without a home): Opened our first transitional home (in Warrnambool, Victoria) and our first home for young Aboriginal people (in Broome, WA). We supported 73 residents in nine homes this year.

International Health

- Nursing Development Program – East Timor: We completed the first year of our five-year commitment to building capacity amongst Timorese Nurses in Dili.
- Pathology Development Program – East Timor: A new memorandum of understanding with the Ministry of Health in Dili will see the continuation of this 6-year-old program which is improving the country's pathology practices.
- Primary Health – East Timor: Administration staff at the Bakhita Community Clinic, in the remote district of Ermera, improved skills through several training initiatives this year. A five-year plan to improve health outcomes through professional development at the clinic was developed.

People

- The recruitment of a Group Manager, Service Quality and Effectiveness will enable us to focus on governance, accountability and continuous improvement.
- Two perinatal and infant mental health project officers were appointed to coordinate new and expanded Raphael Centre services in Perth, Victoria and NSW.
- A research and evaluation position was created to guide a data collection pilot project incorporating Raphael Centres in Ballarat, Berwick and Blacktown to deliver consistency in service evaluation.
- New State Coordinator roles for Horizon House in WA and Victoria are managing care across all homes.
- All 18 Horizon House carers undertook in-depth residential training to improve the quality and standard of care provided.
- Four more nurses were recruited, doubling our National Nursing Development Program team in East Timor.
- Our Group Manager Early Years, Anna Roberts, was re-appointed Vice President of the Board of the WA Association of Mental Health and appointed to the WA Perinatal Mental Health Reference Group.
- Ms Roberts and Group Coordinator for Strong Family, Strong Culture, Cissy Cox, were appointed to the WA Aboriginal Child Health Project Interagency Steering Group.

Year Ahead

- Horizon House will develop new models of care provided through partnerships to accommodate a broader client group.
- Increase our expertise in youth mental health by building on partnerships with local headspace services and contributing additional mental health nurses to triage positions primarily at headspace.
- Pathology operations in East Timor will benefit from new biochemistry analysis equipment and two full-time scientists to train local pathologists.
- Employ a project officer to assist programs in Wewak, Papua New Guinea, which are operated by the Brothers of St John of God. The drug and alcohol, youth and primary healthcare programs will be further developed.

Australia – Western Australia St John of God Hospital Bunbury

Established 1927

Location Robertson Dve and Bussell Hwy, Bunbury

Chief Executive Officer Mr Mark Grime

Medical Advisory Chair Dr Peter Bairstow

Beds 126 **Staff** 494 **Accredited doctors** 224

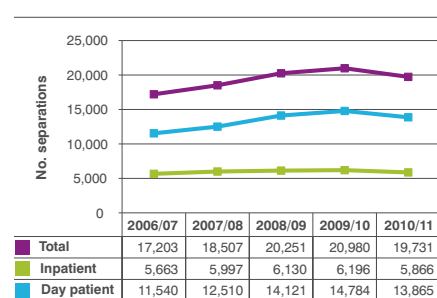
Theatre and procedure rooms 5 theatres

Services Dialysis, obstetrics, oncology, outpatients, palliative care, surgery, community drug and alcohol services.

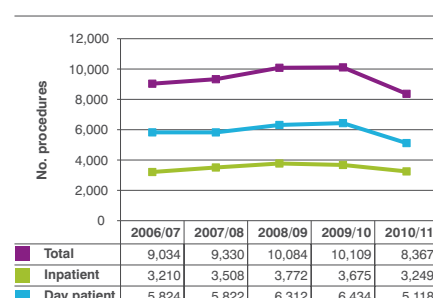


Performance Snapshot

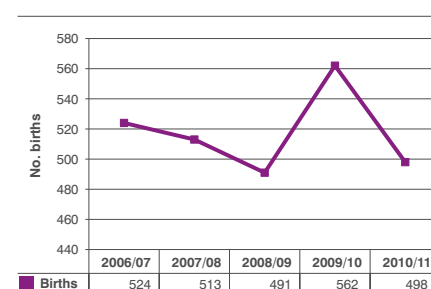
Separations



Procedures



Births



Services

- Board approval for a \$35.9 million expansion, including a Cancer Centre, Coronary Care Unit, Angiography Service, Renal Dialysis Unit and an accommodation and transport service for regional cancer patients. The cost is co-funded by the Commonwealth Government (\$25.9 million for the Cancer Centre and expanded Renal Dialysis Unit) and the State Government Royalties for Regions (\$5 million towards WA's first regional Coronary Care Unit).
- Our procedures and separations decreased this year due to a new day surgery opening in Bunbury.
- Planning started for the Comprehensive Cancer Centre and, in partnership with the Bethanie Group, the community-based accommodation and transport service.
- Participated in the WA Health Department's waitlist initiative, including 450 ophthalmology procedures, to improve access to health services for regional patients.
- Partnered with the WA Health Department to establish a Radiation Oncology service at the South West Health Campus.
- Incorporated public artworks, owned by Bunbury City Council, throughout the hospital to enhance the healing environment.
- Started two new services: a Regional Specialist Orthopaedic Private Practice and, in partnership with Rural Health West, a Medical Specialist Outreach Palliative Care service in Bunbury and Busselton.

People

- Expanded our Registrar training program (p61) to include Ophthalmology.

Community

- Established a new service to assist young people with eating disorders and another service to support Divisions of General Practice (a network of doctors designed to prevent isolation and encourage collaboration) increase their access to regional mental health services.
- Expanded our South West Community Drug Service, specifically in the area of Aboriginal health to include Tackling Smoking and Transition to Adulthood programs.
- Continued exploring partnerships to expand the provision of drug and alcohol rehabilitation, aboriginal health and mental health services.

Year Ahead

- Expand our regional primary healthcare services in partnership with the newly formed Medicare Local and other health organisations.
- Actively recruit and train specialist medical, nursing and other health professionals to support our new cancer and cardiac services.
- Explore demand for a community based rehabilitation service.
- Ongoing construction and service delivery planning for our expansion.



Australia – Western Australia St John of God Hospital Geraldton

Established 1935

Location 12 Hermitage Street, Geraldton

Chief Executive Officer Mr Chris Flynn

Medical Advisory Chair Dr Kim Pedlow

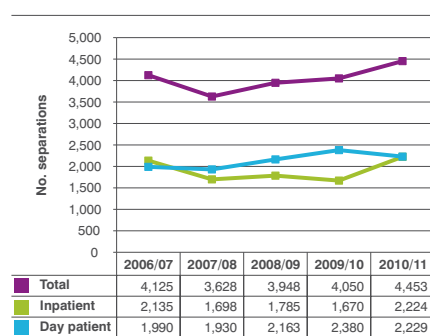
Beds 60 **Staff** 163 **Accredited doctors** 112

Theatre and procedure rooms 2 operating theatres,
1 procedure room

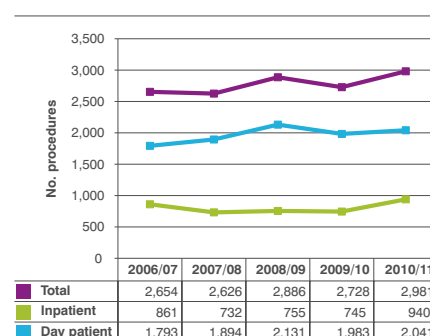
Services Chemotherapy, obstetrics, oncology, outpatients, paediatrics,
palliative care, surgery, and community mental health.

Performance Snapshot

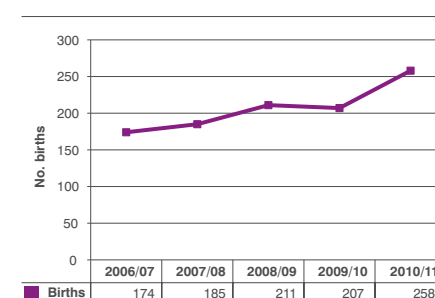
Separations



Procedures



Births



Services

- We proudly celebrated 75 years of providing healthcare services to people in the Midwest.
- Our Manna Meals Home service for the elderly continued to grow, increasing services by 40%.
- Received a \$270,000 Commonwealth Grant to upgrade our orthopaedic equipment with new trauma sets, drills, instruments, and high-definition, digital surgical equipment.
- In collaboration with Geraldton Radiology we installed a Magnetic Resonance Imaging machine on-site, the first in the Midwest. Previously, people had to travel 450 kilometres to Perth, which necessitated cost in time and travel, and disruption to family and community activities.
- Clinical practice initiatives included implementing team nursing, which recognises the strengths and skills each nurse brings to the team, and bedside hand over, which encourages patient and family participation in treatment, with patients reporting they feel more informed.
- Secured a contract with WA Country Health Service to deliver inpatient palliative care for the Midwest region.

People

- Succession planning within Pastoral Services (p50) led to the introduction of a 12-month traineeship and two caregivers pursuing a career in Pastoral Services.
- Three caregivers completed a Certificate 3 in Sterilisation, increasing their qualifications in this important area.
- Our focus on Occupational Health and Safety was rewarded with a zero serious lost time injury rate for 2010/11 (p66).

- Recruitment of Patient Care Attendants, who provide care under the supervision of Registered Nurses, allowing nurses to care for more complex clinical needs, met with very positive responses from caregivers and patients.
- Recruiting health professionals (p60) is even more of a challenge in rural areas and our region continues to struggle to recruit specialists, midwives and experienced theatre nurses. We are in the process of sponsoring overseas health professionals to meet need.

Community

- Operated two Anxiety and Depression Groups with 17 participants. Operated under the auspice of a psychiatrist, they demonstrated that early intervention and treatment enhances illness prevention and mental health promotion.
- In collaboration with Centacare, we built capacity in mothers with babies up to the age of 12 months by providing information and parenting classes.
- Provided soup for the Red Cross Soup Patrol and Sun City Soup Outreach three times a week, with soup distributed to people who are struggling financially or are socially isolated.

Year Ahead

- Work with the WA Country Health Service to secure service contracts to treat public patients and alleviate pressure on Geraldton Regional Hospital.
- Continue to develop and expand our team to treat higher acuity patients in medical, maternity and post operative areas.
- Work in partnership with WA Country Health Service to attract specialists to Geraldton. This will alleviate the need for patients to travel to Perth hospitals to receive treatment.

Australia – Western Australia St John of God Hospital Murdoch

Established 1994

Location 100 Murdoch Drive, Murdoch

Chief Executive Officer Mr Peter Mott

Medical Advisory Chair Dr Peter Bremner

Beds 363 Staff 1,439 Accredited doctors 711

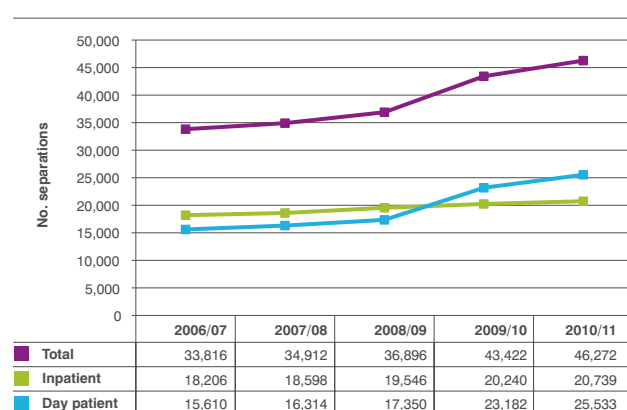
Theatre and procedure rooms 10 theatres, 4 endoscopy suites,
2 cardiac catheterisation laboratories

Services Chemotherapy, coronary care, emergency department, intensive care, neonatal intensive care, obstetrics, oncology, paediatrics, palliative care, surgery, and community mental health.

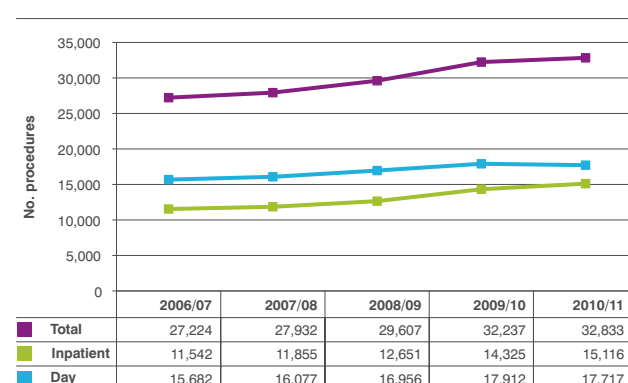


Performance Snapshot

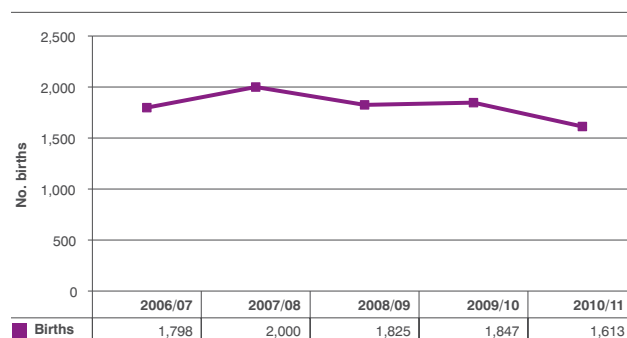
Separations



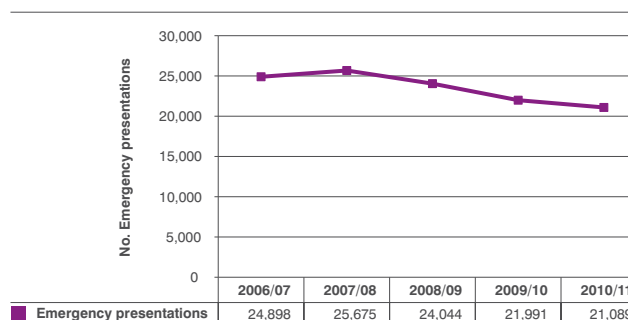
Procedures



Births



Emergency Presentations



Services

- Board approved a \$234 million redevelopment to begin in early 2012, WA's largest ever private health sector investment, increasing beds from 363 to 528 and enabling us to treat 25,000 more patients each year.
- Recognised as WA's top hospital for maternity care by new mothers in a national Medibank Private survey; and rated in the 99th percentile (in our hospital peer group) for satisfaction amongst our obstetricians in the 2011 Press Ganey Doctors' Satisfaction Survey (p46).
- Significant growth in Chemotherapy Clinic services, with almost double last year's activity at 6,781 presentations.
- Developed and piloted a new post-operative orthopaedic bowel protocol enabling better post-operative bowel management by reducing severe constipation. It has been adopted by WA hospitals, as well as other hospitals.

- Established a multi-disciplinary framework providing care for people experiencing or at risk of experiencing bereavement. Our Pastoral Services (p50) database captures information related to patient care interventions, both pre and post death, and assists in establishing quality improvement initiatives.

People

- Appointed Professor Leanne Monterosso as St John of God Health Care's first Chair in Nursing and Midwifery.
- Committed to raising the number of Enrolled Nurses to 30% of our nursing workforce to ensure sustainability in the light of nursing shortages (p60), with strategies including improved career pathways, training, education, support and targeted recruitment marketing.
- Introduced a Graduate Diploma in Clinical Nursing.



Our Murdoch hospital was recognised as Western Australia's top hospital for maternity care by new mothers in a national Medibank Private survey.

- Manager Learning and Organisational Development, Anissa Emeran, who manages the Graduate Certificate in Clinical Nursing Program, was appointed Adjunct Lecturer at the University of Notre Dame's School of Nursing and Midwifery.
- In our internal awards, Midwife Kris Jones received 2010 Preceptor of the Year for outstanding support of and guidance to graduate nurses and Registered Nurse Kiara Patching received 2010 Graduate Registered Nurse of the Year.
- Registered Nurse Jocelyn Arnold was chosen to travel to Rome for the canonisation of Mary MacKillop in October.
- Implemented an innovative approach to caregiver induction featuring online and face-to-face orientation.
- Continued to embed Service Ethos and build awareness of the importance of providing excellent care, including through Annual Competency Days, which ensure caregivers are up to date with procedures and Mission-related information.
- Our caregivers presented at local, national and international conferences, demonstrating our commitment to quality improvement and leadership within healthcare.

Community

- Caregivers raised more than \$22,000, with the hospital contributing an extra \$5,000, for our Charity of the Year, St Patrick's Community Support Centre, which provides accommodation and support to homeless men in Fremantle.
- Caregivers volunteered as telephone counsellors for Lifeline, answering 1,185 calls, while the hospital provided premises for the service.
- Relocated the Fremantle Counselling Centre to larger premises at St John of God Murdoch Ferns House. The counselling service saw 386 new clients and the 2011 Community Mental Health Client Satisfaction Survey found 88% of clients would recommend our services to others.
- Increased our contribution to the Red Cross Soup Kitchen's Fremantle soup van, providing 3,000 litres of soup and encouraging caregivers to volunteer in the van, which feeds 40 people a night.
- Facilitated Social Justice placements for University of Notre Dame medical students, as part of their compulsory social justice hours.
- Granted 246 hours of Community Support Leave (p76) to seven caregivers.

- Our You Name It program which we run with the City of Cockburn, was a finalist in the 2010 Australian Medical Association/Healthways, Healthier WA Award. A group of young Indigenous women created a Talking Couch with built-in recordings of their personal journeys, which is now in the Aboriginal People's Gallery in State Parliament.
- Received a grant from Community Arts Network WA for \$10,000 for art projects, which will encourage literacy in visual language for people with mental health issues, homeless people and primary school children in the Fremantle and Cockburn areas.

Year Ahead

- Establish a Professorial role in Emergency Medicine, assisted by \$1.3 million funding over three years from the Australian Government's More Doctors and Nurses for Emergency Departments initiative.
- Start construction of our \$234 million redevelopment, which includes eight theatres; a medical clinic; cancer centre; and state of the art clinical training, simulation and education centre to increase our clinical training capacity. Services will come on line progressively until work is finished in 2014.
- Enhance the safety and security of patients, caregivers and doctors by introducing restricted access to areas within the hospital including Theatres, Intensive Care Unit, Birthing Suites, Nursery and Maternity Ward.
- Develop a Graduate Diploma of Critical Care Nursing in partnership with the University of Notre Dame.
- Implement the Look@MyBaby service, which enables friends and family of new parents to meet a baby via secure live video from its cot to mobile phones and computers.
- Implement a comprehensive Community Relations Plan (p74) to improve engagement and relationships in the community.

Australia – Western Australia St John of God Hospital Subiaco

Established 1897

Location 12 Salvado Road, Subiaco

Chief Executive Officer Dr Shane Kelly

Medical Advisory Chair Mr Peter Woodland

Beds 555 Staff 2,139 Accredited doctors 976

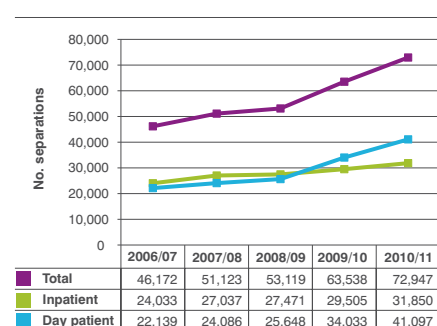
Theatre and procedure rooms 23 Operating Rooms, 4 Endoscopy Suites,
2 Cardiac and Vascular Interventional Labs

Services Chemotherapy, coronary care, intensive care, neonatal intensive care, obstetrics, oncology, paediatrics, palliative care, aged care, surgery, perinatal mental health and community drug and alcohol services.

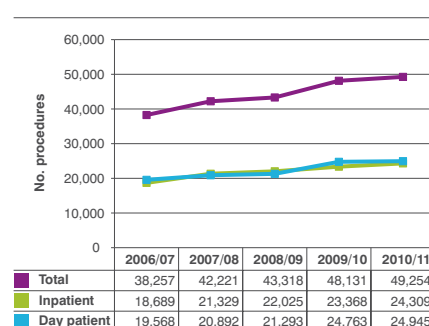


Performance Snapshot

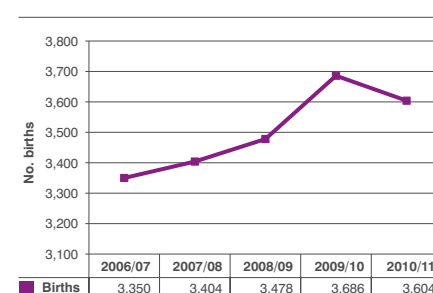
Separations



Procedures



Births



Services

- Five-year strategic plan developed, focusing on: medical and clinical research, clinical risk and patient safety, technological advances, commitment to excellence in surgical and medical services, provision of enhanced training and support for caregivers and medical/nursing students, development of a workforce strategy, development and implementation of an occupational health and safety cultural improvement strategy and review of our Social Outreach and Advocacy services' strategy.
- Achieved our highest mean score since 2004 in the annual independent Press Ganey Inpatient Satisfaction Survey (p46), scoring at the 78th percentile against private hospitals of comparable size. Our Day Surgery and Doctor results also improved, with day patients scoring us at the 78th percentile and doctors rating us at the 99th percentile, also against private hospitals of comparable size.
- Completed, in partnership with Curtin University, three research projects presented at the Fifth International Congress on Nursing Innovation (p55).
- Through our Clinical Trials Unit, conducted international-level research into the management of certain cancers, as well as extensive nursing research (p55).
- Introduced a new menu management system, providing personalised menus to patients and better meeting specific dietary requirements.

- Purchased a \$160,000 Endobronchial Ultrasound to help diagnose non-small cell lung carcinomas and detect inflammatory diseases.
- Launched our Social Media Strategy, including a Facebook Page and YouTube channel, opening up new communication channels with our patients, prospective and current caregivers, and the community.
- Developed a wireless network in major clinical areas, which gives doctors quick and easy access to the internet and their own systems.

People

- Developed and launched a new workforce brand: 'St John of God Hospital Subiaco – Be Part of Something Greater', with an associated advertising campaign – 'If your heart stands out you'll fit right in at Subi'. Created to celebrate our people and give us a competitive edge in recruitment and retention, the brand has proved successful in encouraging candidates who are a good fit with our Mission and Values.
- Developed and implemented an Occupational Health and Safety (OHS) Cultural Plan to ensure that OHS (p66) is a priority for all caregivers. This resulted in reduced injury rates (down to 7.41 per million work hours from 10.2) and worker's compensation claims (down to 42 from 46) this year compared to 2009/10, giving us a better than industry average performance.



St John of God Hospital Subiaco has 23 operating theatres staffed by specialist doctors, nurses and theatre technicians.

- The Nurse Manager and Clinical Nurse from our NeoNatal Unit presented at the Australian College of Neonatal Nurses Conference in Hobart in April 2011 on: introducing continuous positive airway pressure enabling us to better care for babies with respiratory distress; and on our Neonatal Outreach Service.
- Introduced the new position of Clinical Nurse Consultant Organ and Tissue Donation to support the Australian Government's campaign to encourage increased organ and tissue donation.

Community

- Our perinatal infant mental health service, Raphael Centre Subiaco, saw 352 clients this year, while our home-based Drug and Alcohol Withdrawal Network (DAWN) saw 365 clients.
- Started a partnership with DrugArm WA supporting transient and homeless young people, with caregivers providing information, informal counselling and referrals to young people, aged 12-25 years, from a mobile street van.
- Provided 367 hours of Community Support Leave (p76) to caregivers.
- Continued our partnership with the Centre for Aboriginal Medical and Dental Health, providing funding for six laptop computers, three diagnostic kits and a scholarship for an indigenous medical student to attend the Medical Education Conference in Tasmania.
- Fundraising initiatives for our Charity of Choice – St Vincent de Paul, including participation in the Winter Appeal, Christmas Appeal and Street Appeal – raised \$18,989, while departmental projects raised \$3,863 for Horizon House Wanneroo and the Queensland Flood Appeal.
- Provided \$86,500 to the Let's Talk Play Group, which helped 135 children with speech delay and hearing difficulties improve speech skills and confidence.
- Provided \$69,319 to Lifeline WA, and trained nine caregivers to provide telephone counselling support in a voluntary capacity.
- Provided \$436,625 in Patient Concessions (p76), in support of patients who are vulnerable, materially poor, powerless or marginalised, and who cannot readily access treatment elsewhere. Approximately 65-70% of these concessions were for public, chemotherapy patients. Other concessions were provided on a case-by-case basis to patients facing hardship.

Year Ahead

- Implement the Electro Foetal Monitoring Project, which enables remote, real time access by obstetricians to the Labour Ward to monitor mother and baby in utero.
- Introduce a pedestal bath with hoist in the Labour Ward. Baths are used for pain relief during labour and the hoist will provide safe lifting, in accordance with OHS standards, of mothers to and from the bath.
- Develop, in partnership with the University of Notre Dame, a satellite midwifery training centre onsite, including a simulation Delivery Suite.
- Expand the Labour Ward by adding another delivery suite, bringing our total number of suites to 12.
- Implement continuous surveying of all inpatients and day patients to enable more accurate identification of areas needing improvement.
- Develop a site master plan to incorporate a range of capital and infrastructure requirements required over the next five years.
- Establish and implement, in partnership with universities, the Pre-intern Model, which will involve final year medical students working one-on-one with Junior Medical Officers.
- Continue focus on increasing clinical trials and research (p55).
- Enhance clinical and non-clinical information systems, including by implementing an electronic chemotherapy chart and providing wireless connectivity across the hospital.

Australia – Victoria St John of God Accord

Established 1953

Locations 38 sites in Melbourne's north and east

Chief Executive Officer Mr Tony Hollamby

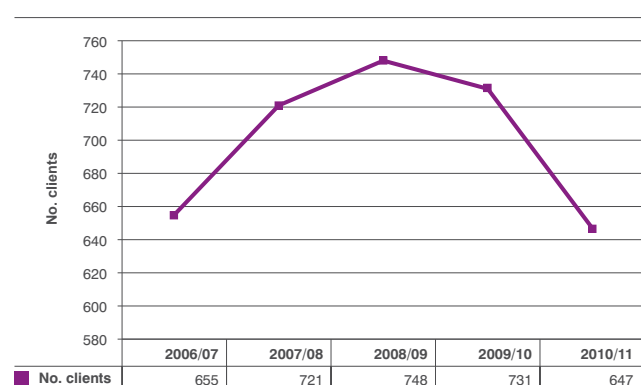
Staff 342

Services Disability services comprising shared supported accommodation and community engagement services incorporating day programs, individualised support arrangements, respite care and employment support.



Performance Snapshot

Clients Supported



Services

- Significant improvements at our western region day service included employing a new manager, developing a new service profile and increasing client involvement in designing programs.
- Began relocating our northern region day programs, from one site in Greensborough to community-based sites closer to where clients live. Although this will significantly improve opportunities for social inclusion, managing the transition has been challenging. We continue to work closely with all families to assist them in this transition.
- Assisted our eastern-region clients move from day programs to community-based activities that better met their needs.
- Formalised Divisional Management Committee Advisory Groups comprising family representatives to increase input from families into the way we deliver services.
- In a traditionally underfunded disability support sector, we continued refining structures and processes to improve financial strength and thereby the support of clients, their families and carers.
- Our four volunteer (p77) run opportunity shops raised \$171,500 for our services, up from \$101,000 the previous year.

People

- Focused on improving staff engagement, with progress reflected in improved staff satisfaction in the Press Ganey survey (p63), increasing from the 56th percentile in 2009 to the 60th percentile in 2011. Participation rates increased from 32% in 2009 to 41% in 2011.
- Implementing a Caregiver Wellbeing Strategy helped create a partnership between staff, management, and unions, and is resulting in a number of changes including the reconfiguration of hours worked in supported accommodation to deliver better work-life balance and other benefits.
- Remodelled our staff orientation program, incorporating online and in-house training, and created a new Employee Hand Book.
- Streamlined reporting structures to improve decision-making processes and service efficiency.

Community

- Our ongoing partnership with VALID Inc, an advocacy group for adults with intellectual disabilities and their families, helped include clients in advocacy and leadership development programs.
- Clients from our northern St Helena group volunteered their time to transport and sort goods donated to our four Opportunity Shops.

Year Ahead

- The proposed National Disability Insurance Scheme, which we support, will be tabled in Federal Parliament in late 2011, potentially leading to significant and enduring positive reform in disability support.
- In partnership with the Department of Human Services, we will develop a new model of support for ageing clients.
- Focus on successful tendering to the Department of Education, Employment and Workplace Relations for our YES Personnel employment services' contract. The format of new contracts in 2010/11 caused sector wide issues, which also explains why the number of clients we supported this year decreased from last year.



Australia – Victoria St John of God Hospital Ballarat

Established 1915

Location 101 Drummond Street North, Ballarat

Chief Executive Officer Mr John Fogarty

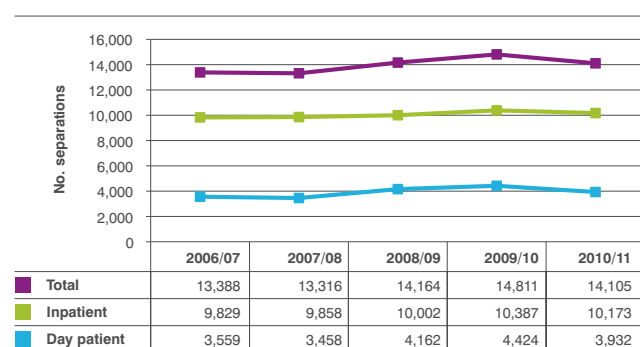
Medical Advisory Chair Mr David Deutscher

Beds 196 **Staff** 750 **Accredited doctors** 315

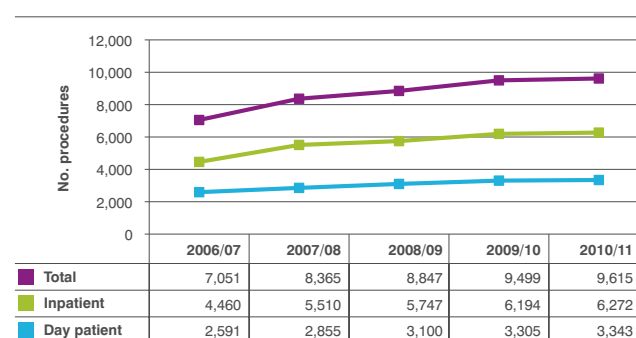
Theatre and procedure rooms 5 theatres, 1 endoscopy suite,
1 cardiac catheterisation laboratory

Performance Snapshot

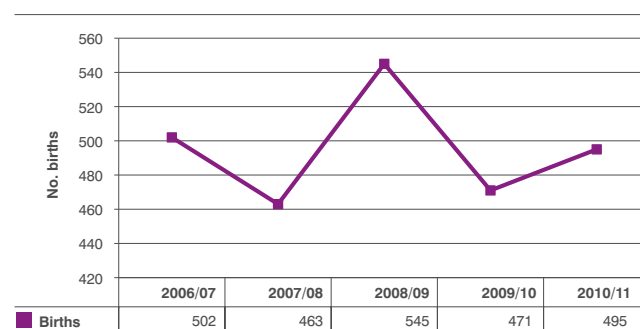
Separations



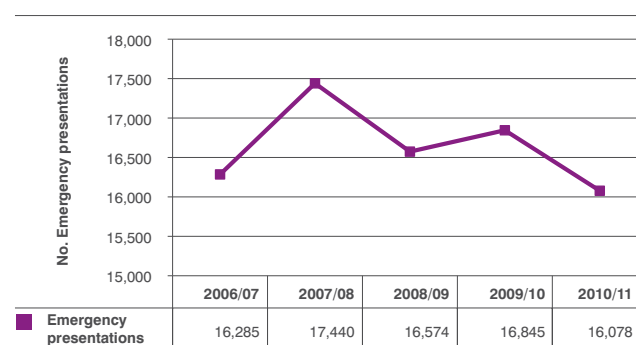
Procedures



Births



Emergency Presentations



Services

- Relocating our gymnasium to ground level enabled our Outpatient Rehabilitation Unit to operate from a single location and co-locate with the Occupational Health and Assessment Unit, enabling ease of access for outpatients.
- Started a medical training program (p61), in conjunction with the University of Notre Dame's Sydney School of Medicine, for 10 medical students.
- In collaboration with Ballarat Health Services, Austin Health and the Department of Health, we developed plans for a new Ballarat Integrated Cancer Centre.
- In June 2011, we opened 15 new beds to meet increased demand for our services.
- We recorded top quartile results in all areas of the annual Press Ganey Satisfaction Survey (p46), with doctors ranking us at the 78th percentile, up from the 63rd; inpatients in the 79th percentile, and day surgery patients at the 79th percentile, up from 70th.

Services Chemotherapy, coronary care, emergency department, intensive care, obstetrics, oncology, outpatients, rehabilitation, surgery, perinatal infant mental health, community mental health, including dual diagnosis services for young people.



People

- Nine of our Registered Nurses completed St John of God Health Care's Advanced Clinical Nursing (p71) subject, with three now enrolled in postgraduate studies in advanced acute nursing. The Advanced Clinical Nursing subject is a collaborative of our Victorian hospitals to create pathways for post graduate studies and skill development in specialist areas.
- We are becoming increasingly involved in nursing education (p61) and provided 4,800 student placement days in the 2010 academic year.
- In collaboration with Australian Catholic University we implemented an innovative flexible placement model where students joined our clinical teams and worked across various shifts throughout the semester. This model provides students with increased exposure to a hospital environment enabling them to become familiar with teams and ward routines. This model is offered along with the traditional block model.

Community

- Opened Raphael House, a perinatal infant mental health service supporting families from the time of conception until children are five years of age.
- Signed a three year agreement with Vaiola Hospital, Tonga, to extend our continued clinical education and capacity building program.
- Three caregivers flew to Christchurch to assist at St John of God Halswell after the February earthquake (p76).

Year Ahead

- Evaluate the introduction or expansion of services, such as cardiac and rehabilitation, to other areas within our region, including via satellite centres, and explore new services such as private mental health.
- Evaluate establishing a residential withdrawal unit for alcohol and other drugs.
- Increase use of our cardiology, day surgery and oncology services.
- Workforce planning (p60) will remain a focus as we continue to train medical, nursing and allied health students. We hope to provide 5,000 student placement days in 2011.
- Fully implementing the Team Nursing Model of Care (p62) and Nursing and Midwifery Standards of Nursing Excellence (p49) will be a priority as we work towards balancing our skill mix to achieve a high quality, sustainable workforce.
- Develop initiatives to improve our safety performance, as well as participate in implementing the group-wide Occupational Health and Safety Strategy (p66).
- Review opportunities to undertake joint health promotion activities with other community stakeholders.
- Appoint an International Health Project Officer to oversee our international health programs, including those in Tonga and East Timor.



Left Caregivers from our Ballarat operating theatres. *Above* A patient uses exercise equipment in the hospital's rehabilitation gym.



Australia – Victoria St John of God Hospital Bendigo

Established 1961

Location 133-145 Lily Street, Bendigo

Chief Executive Officer Mr Michael Hogan

Medical Advisory Chair Dr Andrew Purcell

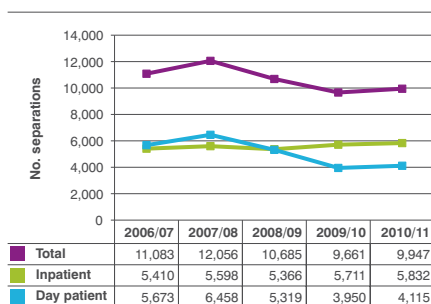
Beds 112 **Staff** 545 **Accredited doctors** 167

Theatre and procedure rooms 4 theatres, 1 endoscopy suite, 1 cardiac catheterisation laboratory

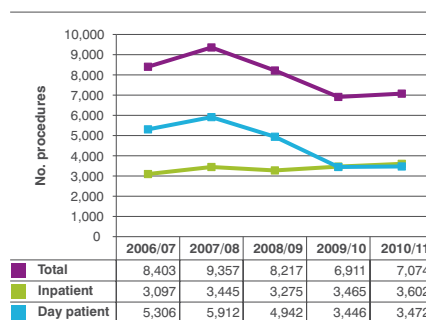
Services Chemotherapy, coronary care, intensive care, obstetrics, oncology, outpatients, rehabilitation and surgery.

Performance Snapshot

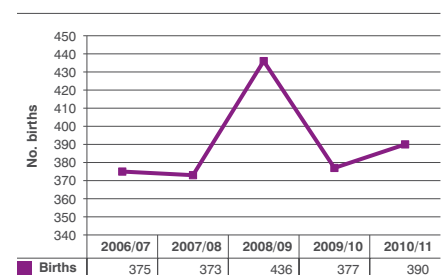
Separations



Procedures



Births



Services

- Established an outpatient oncology rehabilitation program for cancer patients, a coronary angioplasty service and a Chest Pain Centre.
- Occupancy levels in our Critical Care Unit were up 16% on last year, while admissions rose 10%.
- Introduced the Liverpool End of Life Care Pathway (p49), which ensures optimal patient comfort and family member support during the last 72 hours of life.
- Recruited a general surgeon, radiologist, and hospital medical officer.
- Our Occupational Therapy Department introduced a Home Assessment and Modification Service providing home safety assessments.
- In the annual Press Ganey Satisfaction Survey (p46), inpatients placed us in the 97th percentile and doctors placed us in the 93rd percentile against comparably-sized hospitals, while the annual Medibank Private Patient Satisfaction surveys placed us 3rd in Victoria for patient satisfaction and 2nd in Victoria for maternity satisfaction.

People

- By establishing a Team Nursing Model of Care (p62) in our Medical, Surgical and Rehabilitation Units we have improved caregiver morale, reduced overtime and increased patient satisfaction.
- The Occupational Health and Safety (p66) initiative 'Stop Plan Do' was introduced to reduce workplace injuries by raising awareness of risks, resulting in a 255% increase in

reporting of hazards, from 60 to 153. Short term lost-time injuries reduced by 33%, from 12 to 8, and risk assessments increased 314%, from 14 to 44.

- A new Health and Wellbeing Committee coordinated health checks for 100 caregivers and revised caregiver dining room menus.
- Our Maternity Nurse Unit Manager, Shirley Lechmere, received a 30-year valued service award.

Community

- Nurse Unit Manager, Marg Williams, flew to Christchurch to assist residents of St John of God Halswell after the February earthquake (p76).
- We provided free major bowel surgery to a Tanzanian girl brought to Australia by Moira Kelly's Children First Foundation.
- Exercise Physiologist Katie Sutton ran 135kms from Melbourne to Bendigo with four friends to raise \$10,000 for Horizon House (p26).
- Our Bendigo Biggest Winner competition, which encouraged 112 participants to lose a combined 281.6kgs and 821.4cms, raised \$4,617 for Diabetes Australia.

Year Ahead

- Planning continues for our proposed major redevelopment (p19) which includes a new multi-storey wing to increase bed capacity by up to 40 beds and two new operating theatres.
- A minor renovation adding five new patient beds, extending our day chemotherapy area and improving our kitchen facilities, will be completed by January 2012.

Australia – Victoria St John of God Hospital Berwick

Established 1939

Location Gibb Street, Berwick

Chief Executive Officer Ms Lisa Norman

Medical Advisory Chair Dr Mark Tarrant

Beds 66 Staff 269 Accredited doctors 290

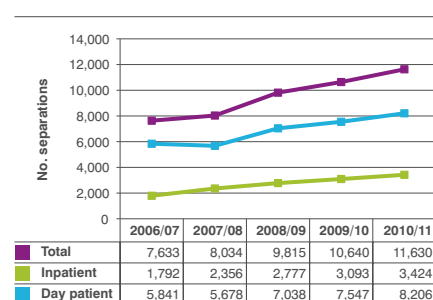
Theatre and procedure rooms 4 theatres

Services Obstetrics, medical, surgery, and perinatal infant mental health.

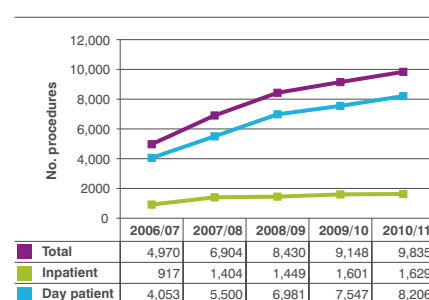


Performance Snapshot

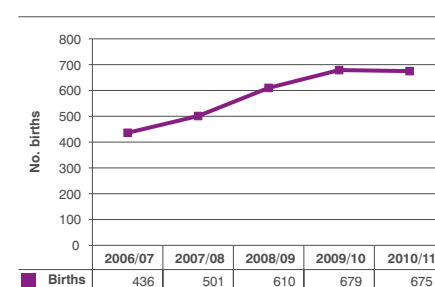
Separations



Procedures



Births



Services

- Increased orthopaedic services, with the addition of two new surgeons and new theatre equipment to enable all orthopaedic sub-specialties to operate onsite.
- Developed an orthopaedic marketing program, which included a website with information on facilities, surgeons and procedural videos, to raise the profile of our orthopaedic service amongst local doctors and the community.
- Opened a General Medicine Unit in response to increased patient numbers, including physicians, physiotherapists, occupational therapists, speech therapist, dietitian, social workers and nurses. The high standard of medical care and our good relationships with local Emergency Departments resulted in a 30% increase in admissions on last year.
- Opened a Sleep Studies Service, providing the only in-hospital service of its kind in the Casey region.

People

- Recruited two experienced Medical Unit Managers, Lisa Marchetti and Mandy Fidanza, to manage our new Medical Unit.
- Recruited 50 nurses and introduced an onsite Allied Health team including physiotherapy, occupational therapy, dietetics, social work and speech therapy.
- Recruited our first female Obstetrician Gynaecologist, Dr Poonam Arora, the seventh member of the obstetrics team.
- Accredited an extra 45 Medical Practitioners to treat patients at our hospital.

Community

- Our perinatal infant mental health service, Raphael Centre Berwick, saw 276 new patients and provided 1,521 consultations. Due to increased demand for services, two new positions were created: a Clinical Psychologist and a Mental Health Nurse Specialist. We received Commonwealth Government funding for a .5 Specialist Training Program (p61) position for a Psychiatrist Trainee in Perinatal and Infant Mental Health, beginning in 2012.
- Caregivers volunteered with the Vinnies Soup Van, assisting in food preparation and distribution, and donated non-perishable food.
- Provided marketing expertise and \$3,500 in prize money, principally for the St John of God Aria competition, to support the South Eastern Arts Festival, which attracted 700 entrants aged between four and 25.

Year Ahead

- Develop a Clinical Services Plan to provide direction on the type of healthcare services required in our region. This will inform a Master Plan for future service development, which will lead to stage one redevelopment plans for presentation to the Board in 2012.
- Thirteen caregivers and one doctor will visit Van Village in Vietnam in March 2012 to develop expertise in local healthcare providers and provide infection control initiatives in the school community.



Australia – Victoria St John of God Hospital Geelong

Established 1974

Location 80 Myers Street, Geelong

Chief Executive Officer Mr Stephen Roberts

Medical Advisory Chair Mr Peter Callan

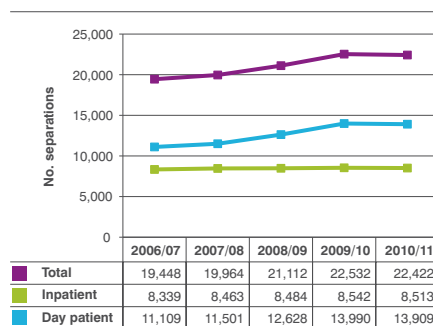
Beds 184 **Staff** 628 **Accredited doctors** 325

Theatre and procedure rooms 9 theatres, 1 cardiac catheterisation laboratory

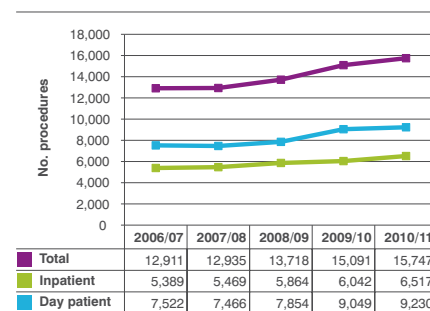
Services Chemotherapy, coronary care, intensive care, obstetrics, oncology, palliative care, surgery, perinatal infant mental health, and community youth mental health.

Performance Snapshot

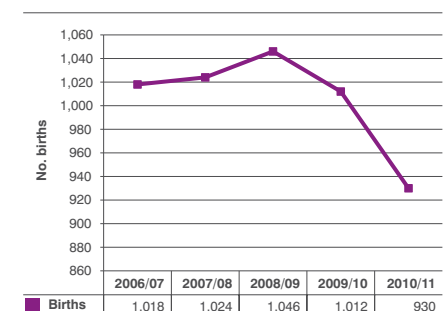
Separations



Procedures



Births



Services

- Board approved a \$56.3 million redevelopment, incorporating new rehabilitation and emergency services, 64 additional inpatient beds and three operating theatres.
- Opened our refurbished Special Care Nursery, which cares for 200 babies per year.
- Ranked at the top of over 100 day surgery services across Australia in the annual Press Ganey Satisfaction Survey. We were also ranked at the 89th percentile by inpatients, and at the 83rd percentile by doctors against hospitals of a comparable size.
- Upgraded 40 patient rooms.
- Secured a \$200,000 grant from Geelong Hospice Care for our palliative care services.
- A \$25,000 grant from Barwon Water enabled the replacement of 76 single flush toilets with smart flush toilets, providing an annual saving of 1 million litres of water.

People

- A 20% reduction in nurse agency use was achieved by developing a post graduate critical care program enabling nurses to enhance clinical skills and transition into a critical care environment.
- Developed a pastoral service traineeship program (p50) to start in 2011/12, which will address workforce shortages.
- Developed an Enrolled Nurse graduate program.
- Marketing Assistant Dianna Goodman was awarded Geelong Caregiver of the Year for consistently offering a positive example of our Mission and Values.

Community

- Our perinatal infant mental health service, Raphael Centre Geelong, saw 335 new clients, of which 50 were men. We also piloted another Supported Playgroup service in a small community comprising many vulnerable families.
- Granted 114 hours of Community Leave to six caregivers to travel to New Zealand and assist residents at St John of God Halswell following Christchurch's February earthquake (p76).
- Continued association with the local Anglican Church's community breakfast program for people in need. Over 50 caregivers volunteer on a roster to serve breakfast.

Year Ahead

- Start construction of our \$56.3 million redevelopment, which is due for completion in 2014.
- Commission a new operating theatre in our Specialist Centre to support our growing day surgery service.
- Complete the \$9.4 million refurbishment of our existing wards and engineering infrastructure.
- Pilot an identification management system to increase security between mother and baby.
- Finalise strategy for establishing a co-located Medical Centre to support our growth.
- Expand support of the Viqueque community in East Timor by sending a caregiver team to Dili to help increase skills and provide health education.
- Expand our dual diagnosis triage program with headspace and Barwon Youth, providing intervention services for young people aged 12-25.

Australia – Victoria St John of God Nepean Rehabilitation Hospital

Established 2000

Location 255-265 Cranbourne Road, Frankston

Chief Executive Officer Mrs Sally Faulkner

Medical Advisory Chair Dr Geoffrey Abbott

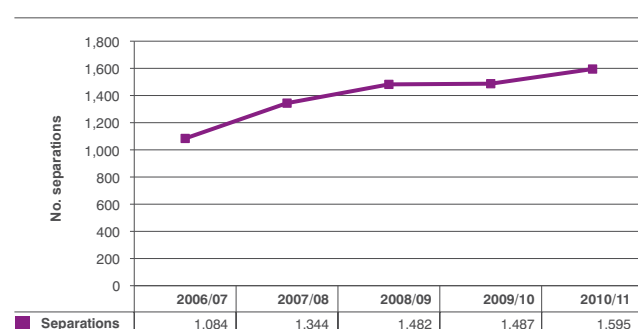
Beds 65 Staff 205 Accredited doctors 24

Services Tailored rehabilitation programs for stroke, neurological, orthopaedic, spinal injury, cardiac, pain management, reconditioning, oncology and pulmonary.



Performance Snapshot

Separations



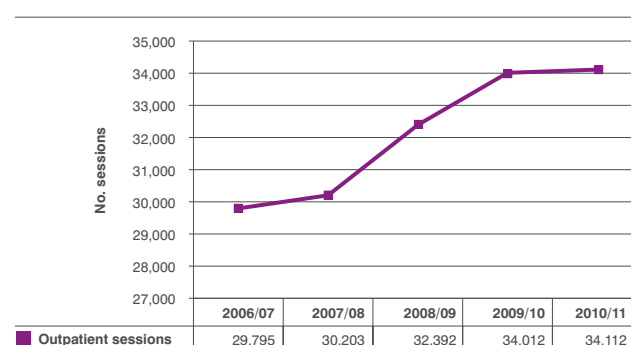
Services

- Completed a \$680,000 building upgrade, including access to balconies, a new facade and refurbished cardiac gymnasium.
- Completed capital works including a \$79,000 lift upgrade, installation of a \$71,805 air conditioning system and window shutter/shades for our hydrotherapy pool.
- Outpatient services continued to grow and, for the first time, we delivered over 3,000 sessions (actual, 3,416) in one month (March 2011).
- Our Press Ganey (p46) survey results placed us in the 99th percentile for inpatient satisfaction – the highest of all surveyed private specialist rehabilitation hospitals – and the 95th percentile for outpatient satisfaction.

People

- Reduced nurse agency use from 5% to 0.4% by increasing part-time and Nurse Bank nurses.
- Sponsored the Participatory Community Practice Award for final year occupational therapy students at Monash University.
- Supported Physiotherapist Rebecca Barden to attend the World Youth Day Conference in Madrid in August 2011, contributing to her travel expenses and assisting in fundraising activities for her pilgrimage.
- Associate Nurse Manager Chris McKenna voluntarily travelled to Christchurch, New Zealand, to assist residents at St John of God Halswell after the February earthquake (p76).

Outpatient Sessions



Community

- Partnered with Open Family Australia, providing \$60,000 to fund an outreach youth worker to assist homeless and at risk young people in Frankston (p74).
- Contributed \$60,000 to the Older Wiser Lifestyles program at Peninsula Health, which funds a nurse practitioner to case manage older adults with drug and alcohol issues.
- Provided 1,000 uninsured patients with free access to cardiac, pulmonary and oncology maintenance therapy groups, representing a \$20,000 commitment by us.
- Provided \$10,000 funding for a drug and alcohol education brochure for parents of year seven students in the Frankston-Mornington Peninsula region.
- Continued supporting the Frankston Churches Community Breakfast Program with supplies, such as eggs, bacon and juice, and two volunteer caregivers each month.

Year Ahead

- Continue developing a Master Plan for our site to facilitate future growth in line with demand for services.
- Explore options for satellite services on the Mornington Peninsula and other regional areas where rehabilitation services are unavailable.
- Establish a Wellness Program for our caregivers.
- Establish a tobacco free work site by 2012.
- Introduce an Assistant in Nursing Program, with a rehabilitation focus, to assist future workforce sustainability.



Australia – Victoria St John of God Pinelodge Clinic

Established 1980

Locations 1480 Heatherton Road, Dandenong

Chief Executive Officer Mr Graham Cadd

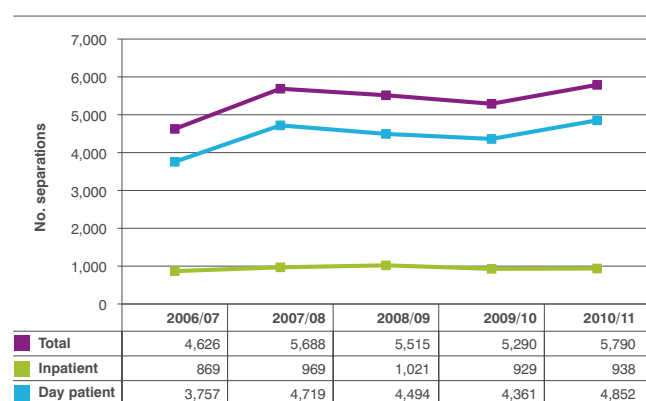
Medical Advisory Chair Dr Patrick Tolan

Beds 54 **Staff** 124 **Accredited doctors** 23

Services Inpatient acute psychiatry and drug and alcohol recovery, day patient programs, community outreach, private psychiatric and drug and alcohol consulting.

Performance Snapshot

Separations



Services

- A broad range of specialised therapy groups were introduced as part of our new day patient programs, including Mindfulness, Acceptance Commitment Therapy and Dialectical Behaviour Therapy groups. Because these groups are in high demand, with waiting lists of up to 25 people for each program, we plan to expand the number of sessions offered.
- Doubled the capacity of our Reflection Space – a quiet room for reflection and a meeting space for visitors and patients – to accommodate 12 people.
- Expanded car parking from 62 spaces to 106 to meet Council planning requirements.

People

- Recruited new, highly qualified caregivers to join our Allied Health team, which comprises psychologists, arts therapists, nurse therapists, a drug and alcohol counsellor, a social worker, a Tai Chi instructor and a massage therapist.

Community

- Continued partnership with Ermha Inc to provide the Origins service, a program assisting people with serious mental illness – from diverse cultural and linguistic backgrounds – to experience improved quality of life in areas including health and well-being; housing; relationship development, social skills; education, employment and training; and community participation.
- Established a partnership with the St John of God Brothers in Papua New Guinea who operate an Addictions Recovery Program in Wewak, which provides support and counselling, as well as education to schools, youth groups, prisons and community health centres. We provided three month observational placements for two Brothers so they could learn more about addictions and mental health services. Our Chief Executive Officer, Graham Cadd, and Pastoral Care Coordinator, Andrew Somerville, visited Wewak in November 2010 to develop our plan of assistance.
- Caregivers raised \$5,000 from raffles, casual clothes day and special morning tea/lunch days for our Charity of the Year – Cottage by the Sea – which provides seaside holidays for children and families in need.

Year Ahead

- Develop a Clinical Services Plan and Master Plan to build on existing services and ensure we can meet demand for mental health services from a rapidly expanding and changing community.
- A \$250,000 refurbishment of our specialist consulting suites will provide contemporary facilities for doctors and patients.
- We plan to recruit two more consultant psychiatrists to help support the needs of General Practitioners wanting to refer patients to psychiatrists.
- Increase patient activity levels through increased specialist day therapy programs.
- In response to mental health nurse shortages, we plan to recruit five senior mental health nurses and start training Enrolled Nurses in mental health. We have previously had to recruit from overseas and this is likely to continue because of local shortages.

Australia – Victoria St John of God Hospital Warrnambool

Established 1939

Location 136 Botanic Road, Warrnambool

Chief Executive Officer Mr Glyn Palmer

Medical Advisory Chair Mr Stephen Fischer

Beds 75 Staff 190 Accredited doctors 120

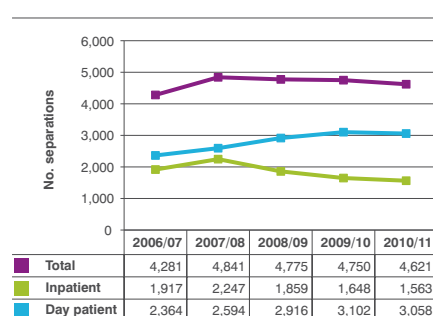
Theatre and procedure rooms 3 theatres

Services Chemotherapy, obstetrics, oncology, outpatients, psychiatric, rehabilitation, surgery, perinatal infant mental health, and community mental health.

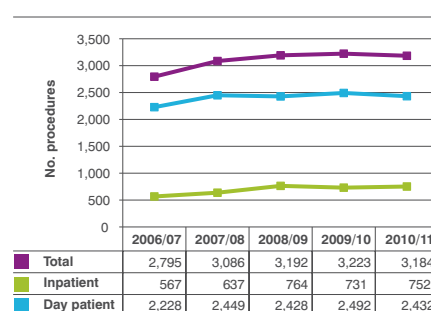


Performance Snapshot

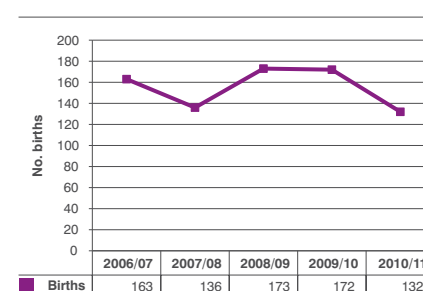
Separations



Procedures



Births



Services

- Business of the Year in the Powercor Warrnambool Business Excellence Awards, which promote excellence in business. Also awarded the Health and Wellbeing Award and highly commended in the Community/Government Enterprise category.
- Scored highly in all Press Ganey Surveys – inpatients rated us at the 96th percentile, and day surgery patients at the 93rd percentile for public and private hospitals, representing the highest ranking Australia-wide for a hospital of our size.
- Received ongoing Commonwealth Funding of \$361,200, through Medicare, for the Mental Health Nurse Incentive Program where mental health nurses work with GPs and local private psychiatrists to assist public and private patients. Inpatient admission rates among the Warrnambool clients have shrunk drastically, from 43% in 2008/09 to less than 5% in 2010/11. Since it began in February 2008, the program has assisted over 300 people in South West Victoria.
- Participation in the Deakin University Regional Medical School, with our Chief Executive Officer, Glyn Palmer, a member of the Greater Green Triangle Clinical School Community Advisory Board.

People

- Our Workforce and Quality Manager, Kim White, received a Catholic Health Australia scholarship for the 2011 Graduate Certificate in Leadership and Catholic Culture (p72).
- Our Clinical Pastoral Education Program (p50) facilitated by Pastoral Services Manager and Clinical Pastoral Education Supervisor, Bernadette Wurlod, delivered training to 13 people, who are now providing services within schools, healthcare providers, and parishes.

Community

- Our perinatal infant mental health service, Raphael Centre South West Victoria, saw 384 clients and expanded its services across the region, developing new partnerships with other organisations.
- Organised community and caregiver drives for donations of essential school items (which included a \$20,000 donation of new school uniforms), clothing and medical supplies for two East Timorese orphanages.
- Provided community service leave to Peri-operative Services Manager, Gill Wheaton, who assisted cardiologist Dr Noel Bayley to identify five East Timorese people as suitable candidates for cardiac surgery in Australia.
- Provided assistance to the Warrnambool Soup Kitchen for its Meals for the Homeless and Lonely. We provide soup on a weekly basis and caregivers serve food on a rotating roster.

Year Ahead

- Continue to strengthen our partnership with Deakin Medical School by offering rehabilitation experience to four fourth year students.
- Recruit two new resident ophthalmologists in late 2011 and a plastic surgeon in early 2012 to meet local need for resident specialists.
- Collaborate with the Warrnambool City Council and other agencies to develop the City of Warrnambool's Health and Wellbeing Plan.
- Partner with South West Health Care to develop a medical workforce and succession plan for the region.



Australia – New South Wales St John of God Hospital Burwood

Established 1958

Location 13 Grantham Street, Burwood

Chief Executive Officer Mr Ramon del Carmen

Medical Advisory Chair Dr Gary Galambos

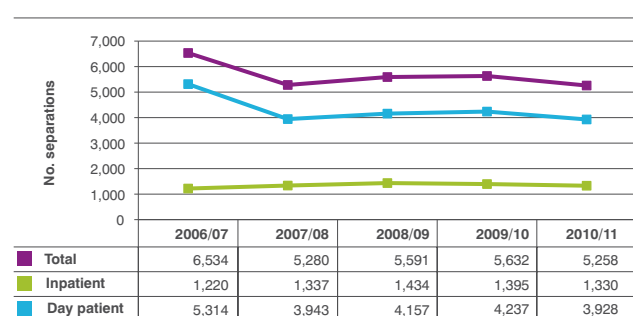
Beds 86 **Staff** 193 **Accredited doctors** 61

Theatre and procedure rooms ECT Suite

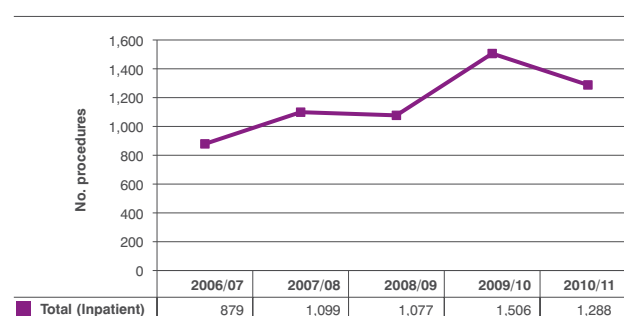
Services Inpatient, outpatient and day programs: alcohol and other drugs; perinatal women's mental health; personality and mood disorders; anxiety; depression; and psychotic disorders. Community homes for people with chronic mental health conditions who would otherwise be homeless.

Performance Snapshot

Separations



Electroconvulsive Therapy Procedures



Services

- Board approved our \$14.8 million redevelopment, including: 12-bed Parent-Infant Unit, hospital refurbishment, relocation of Counselling and Therapy Centre, increased garden areas, new Chapel, new gymnasium and additional parking.
- Purchased a \$34,000 state of the art electroconvulsive therapy machine.
- Extended our Alcohol and Other Drugs day programs from 6 to 10 weeks to better support day patients.
- Established new groups including: a Postnatal Depression Group helping mothers develop skills to overcome anxiety and depression; a Circle of Security Parenting Group offering parenting skills assistance; a Schema Support Group and a Hearing Voices Program for people suffering from Schizophrenia; and a Bipolar Mood Disorder day program.
- Established a Consumer Consultative Committee – comprised of caregivers, former patients and carers – to increase engagement with patients and their carers, and better understand their needs.

People

- Initiated a caregiver award program and held our inaugural Annual Nursing Excellence Award.
- Launched Burwood News, a monthly caregiver newsletter.
- Seven caregivers started the Diploma of Management (px).
- Director of Allied Health, Ian Smith, presented at the 27th International Congress of Applied Psychology in Melbourne.

- Professor Marie-Paule Austin presented at the 12th World Congress of the World Association for Infant Mental Health in Leipzig, Germany and the International Marce Society Conference in Pittsburgh, USA (px).

Community

- Commenced an Employment Program for Casa Venegas residents, teaching basic maintenance skills; and an After Care Program helping residents transition to independent living. Caregivers also raised more than \$8,000 for Casa Venegas, which provides long term accommodation for homeless people with chronic mental health conditions.
- Continued our partnership with the Central Sydney GP Practice Network to provide a Medicare bulk billed counselling service for disadvantaged pregnant women and new mothers with anxiety and depression.

Year Ahead

- Start construction of our \$14.8 million redevelopment.
- Begin a three year Leadership Formation Program.
- Develop a Caregiver Health and Wellbeing Plan to improve the health, satisfaction and motivation of caregivers.
- Develop proposals for an Alcohol and Other Drugs consultation service for young adults in Western Sydney, in partnership with our Richmond Hospital, and one for a Raphael Centre in the inner west of Sydney.

Australia – New South Wales St John of God Hospital Richmond

Established 1952

Location 117 Grose Vale Road, North Richmond

Chief Executive Officer Ms Allison Campbell

Medical Advisory Chair Dr Mark Walker

Beds 88 **Staff** 197 **Accredited doctors** 31

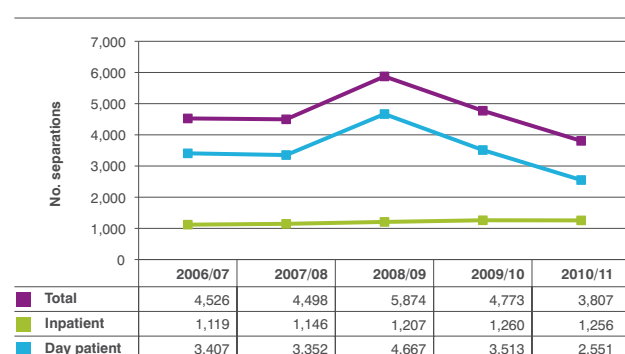
Theatre and procedure rooms ECT Suite

Services Inpatient, outpatient and day programs for the treatment of: alcohol and other drugs dependency; post traumatic stress disorder including Veterans' and Police Trauma Programs, personality and mood disorders; anxiety; depression; geriatric; mental health; and psychotic disorders. Community-based perinatal infant mental health.



Performance Snapshot

Separations



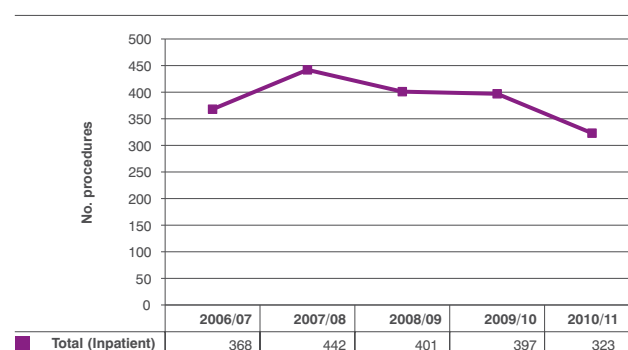
Services

- Despite increased competition from a new 60-bed facility nearby, patient bed days increased by 4.5% (1,095).
- Invested \$32,000 in the latest state of the art electroconvulsive therapy technology to enhance patient outcomes.
- Introduced online pathology reporting for doctors to expedite changes in treatment and pharmacological therapies.
- Extended opening hours in reception areas to increase access for patients and visitors.
- Increased our Clozapine Program uptake by 46% on previous year. Clozapine, a drug used to treat schizophrenia, requires close monitoring for side effects and this program means psychiatrists can monitor clients in their consulting rooms rather than sending them to a public hospital.
- Established a Consumer Consultative Committee, comprising caregivers, former patients and carers, to help advise on services, improvements and patient and carer needs.

People

- Created new role of Director of Allied Health to increase uptake of day programs and integrate therapy teams.
- Launched Richmond News, a monthly caregiver newsletter.
- Introduced a dedicated Director of Mission (p58) position.
- Recruited two psychiatrists for our Medical Centre to meet increased demand for services.

Electroconvulsive Therapy Procedures



- Discharge Coordinator, Sean FitzGerald, presented at the Mental Health Units Conference on discharge from the private sector to the community.
- Initiated a formal caregiver recognition award program to foster greater caregiver engagement.

Community

- Opened NSW's first Raphael Centre in Blacktown to address community need for perinatal and infant mental health services. The Centre also partnered with North West Slopes Division of GPs to provide an outreach perinatal mental health clinic in Tamworth and surrounding rural communities.
- Visited St Giles Hospital in Suva, Fiji to offer advice and support on mental health service provision.
- Funded pastoral practitioner Julie Peacock to provide two weeks of support to flood victims in the Lockyer Valley as part of the Queensland Flood Disaster Response.

Year Ahead

- Commence three-year Leadership Formation Program for managers and the executive team.
- Start redevelopment master planning for future growth, including a detailed service and business plan.
- Establish a committee to evaluate and review the 'patient journey' – from first enquiry for admission to post-discharge consultation – to improve patient care and service provision.
- Develop, in partnership with our Burwood hospital, a proposal for an Alcohol and Other Drugs consultation liaison service for young adults in western Sydney to meet community need for specialised treatment and interventions.



New Zealand St John of God Hauora Trust

Locations Two services in Christchurch – St John of God Halswell and St John of God Waipuna
One Service in Wellington – St John of God Wellington (pictured)
Acting Chief Executive Officer Ms Robyn Molony
Beds 101 (including 11 community beds) **Staff** 238

Services Halswell provides long-term residential support for people, aged 16-65, with physical and neurological disabilities; Wellington provides long-term residential support for physically disabled adults, aged 18 to 65; and Waipuna provides youth services and an Early Childhood Centre.

Services

Christchurch services – Halswell and Waipuna

- Despite three major earthquakes and continuing aftershocks from September 2010, we maintained services even with disruption to electricity, water and sewerage, and building damage. The allied health building at Halswell will be demolished, while our heritage listed Chapel will be closed for repairs for up to two years.
- Halswell's bed occupancy rate was 98% and it was awarded a new contract from the Ministry of Health to provide slow stream rehabilitation to help residents who may be able to return home or into community living settings.
- Waipuna received 624 new referrals and continued supporting the 150 young people referred in 2009/10.
- Waipuna expanded youth mental health and counselling programs, which now support 226 young people, as well as its antenatal group, which supports 46 young pregnant women aged between 15 and 18.
- Waipuna established two new programs: a father and child program, with eight participants graduating in June 2011; and a program which helped find accommodation for 30 vulnerable young people.

St John of God Wellington

- Purchased a wheelchair accessible van to enable residents to pursue sporting, educational and employment interests.
- Negotiated increased flexibility in funding contracts, making available therapy and one-on-one care for complex-needs residents.

People

- Our Christchurch caregivers showed extraordinary dedication and commitment in maintaining excellent care to our residents and clients this year. Many caregivers were facing personal hardship – through the loss of family or friends, damage to homes, disruption to schooling for children, and excessive traffic congestion and delays travelling to and from work – as a result of the widespread devastation wrought by the Christchurch earthquakes and aftershocks.
- Halswell caregivers welcomed 12 caregivers from Australia in March 2011 (p76), who travelled to Christchurch to assist in caring for residents after the February earthquake.

- Three caregivers from Waipuna presented the results of a program, which is successfully reconnecting young at risk men with their Maori culture and enhancing their leadership potential, at the 6th International Conference on Drugs and Young People: Making Connections in Melbourne.

Community

- All Trust services volunteered time and resources to support vulnerable people and communities in Christchurch in the wake of the earthquakes; including free counselling, basic necessities such as temporary accommodation, food and showers, childcare, community barbecues and free use of meeting rooms for other non-profit organisations.
- Two caregivers from St John of God Waipuna were appointed to the Christchurch Earthquake Response Team, working directly with families to provide practical support and coordinating advocacy efforts with social service and government agencies.
- St John of God Wellington began a Pay It Forward program with a local primary school, encouraging students to engage with residents and learn about the challenges of living with physical disability.

Year Ahead

- All Trust services remain committed to rebuilding Christchurch and enhancing the responsiveness of the city's social service sector to the needs of vulnerable communities.
- St John of God Waipuna will continue efforts to identify and provide practical support to people in need. This includes an expanded youth mental health program, advocacy for clients with insurance providers, and linking clients with appropriate housing.
- Waipuna will establish a new teen parents' neighbourhood support scheme and increase its youth mentoring services.
- In response to demand for residential disability beds and appropriate care following the earthquake, we will develop two new six-bedroom houses to provide long term supported living for young adults with physical disability in Rolleston, 20 kilometres from central Christchurch.
- Planning is underway for Halswell's new rehabilitation complex to replace the quake damaged building and also for a range of outpatient services such as mixed ability exercise and wellness programs.
- Wellington will work towards lifting occupancy from 31 to 36 residents.

EXCELLENCE IN CARE



In this section

Accreditation
Satisfaction Surveys
Clinical Risk Management

Information Technology
Nursing and Midwifery Standards
Palliative Care

Pastoral Services
Awarding Excellence

Nurses, like the one pictured above with a patient at our Ballarat hospital, enact our Mission each day as they care for patients and their families.

Excellence in Care

Accreditation

Each of our 13 Australian hospitals is accredited by the Australian Council on Healthcare Standards (ACHS) under its Evaluation and Quality Improvement Program (EQulP), which occurs on a rolling four-year cycle incorporating Periodic Review against 14 mandatory criteria and Organisation-wide Survey against all 45 criteria.

In 2010/11, Subiaco underwent Periodic Review, and Burwood, Richmond, Warrnambool and Ballarat underwent Organisation-wide Survey. All achieved full accreditation with the following highlights:

- Ballarat received an Outstanding Achievement for water and energy conservation;
- Subiaco received 5 Extensive Achievements out of 14 mandatory criteria; and
- Warrnambool received 16 Extensive Achievements out of 45 criteria.

St John of God Pathology (p24) laboratories are accredited by the National Association of Testing Authorities (NATA) and this year, five of its 23 laboratories (Berwick, Ballarat, and Collingwood in Victoria, and Osborne Park and Geraldton in WA) were reaccredited

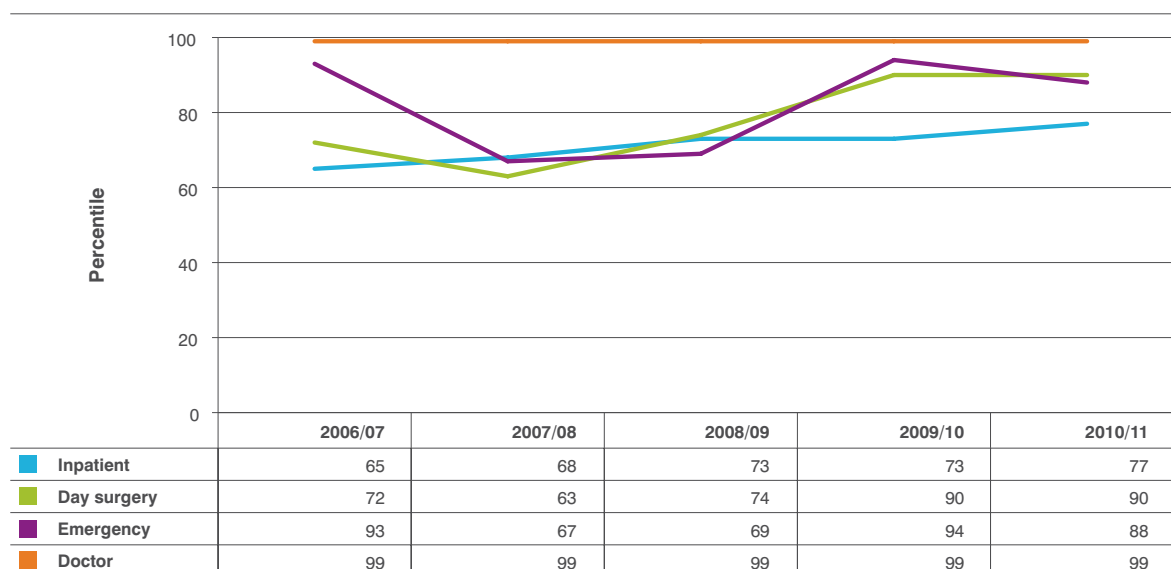
under the triennial accreditation system. The Collingwood laboratory received commendations for the skill and training of staff and for review of its Quality Assurance Program results. From 2011/12, our laboratories will be reassessed under NATA's Alternate Surveillance Program, which assesses different elements of our quality management system, encompassing all elements over a three-year period.

St John of God Halswell and St John of God Wellington (p44), our residential facilities for people with a disability in New Zealand, are certified by the New Zealand Ministry of Health and are fully compliant with the New Zealand Health and Disability Services Standards.

Satisfaction Surveys

St John of God Health Care achieved outstanding results in the independent and nationally benchmarked 2010/11 Press Ganey surveys. We achieved top quartile performance in each of the surveys; inpatient, day surgery, emergency department and doctor. This year's results are the best group performance since surveying began in 2003. All results graphed below are a comparison against all public and private systems or groups surveyed.

Satisfaction Surveys - Group Results



Each of our 13 Australian hospitals is accredited by the Australian Council on Healthcare Standards under its Evaluation and Quality Improvement Program.

Clinical Risk Management

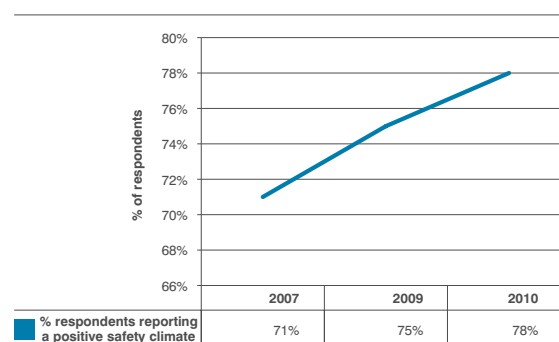
All healthcare providers are operating within an environment of increased scrutiny, particularly by government and funders, of patient safety and health outcomes. The Australian Commission for Safety and Quality in Health Care is committed to improving outcome measures and standards of care and has developed 10 draft standards by which an organisation's performance will be assessed. The standards will become mandatory from January 2013. Work is well underway for us to meet these standards and report against them.

Our clinical risk management program helps improve quality and safety in care by identifying circumstances that put patients at risk of harm and acting to prevent or control those risks. Highlights for our program in 2010/11 included:

- Fully implementing the **National Open Disclosure Standard** which provides a process for communicating with patients and families who have experienced an adverse event.
- Developing and implementing a new **Correct Person, Correct Procedure, Correct Site Policy**, which enforces multiple checking to minimise the possibility of 'wrong site' surgery errors, and includes regular audits to assess compliance.
- **Medication audits** – medication errors are among the most frequent hospital medical errors. With improved processes and regular audits, our performance continues to improve. Omission rates (omitting to give medication as and when due) per number of medication charts, prescribed medications and by prescribed doses fell by 5.8%, 0.4% and 0.7% respectively this year compared to our last audit in 2008.
- We now contribute to the Commonwealth Government's **My Hospitals website**, which provides the public with hospital demographic and performance data. Agreement with the Government on appropriate private hospital performance data is pending.

- **Safety Climate Survey** – this measures caregiver perceptions of our commitment to patient safety and has been conducted three times since 2007, with continuous improvement. Caregivers gave us an average rating of 4.35 (with 5 the highest rating) for our commitment to safety and 78% of respondents reported that we had a positive safety climate (see graph below).

Positive Safety Climate



- **Patient Safety DVD** – our clinical risk team and a consumer health representative are developing this to help educate patients that they are a partner in their care. It explains safety procedures and encourages patients to ask questions of the health professionals treating them. Due for launch in late 2011, it will be accessible via our website and within our hospitals.



Clinical reviews

Clinical reviews are important in ensuring our clinical services remain best practice and enhance clinical outcomes and a patient's overall experience. This year, we reviewed three major clinical areas:

1. **Maternity Services Review** follow-up audit – in 2008 we reviewed our maternity services focusing on workforce, infrastructure, systems and processes to standardise and improve care. A follow up audit in November 2010 demonstrated significant improvement. A suite of 14 maternity policies were introduced to standardise care, particularly for high risk pregnancies. A Maternity Services Reference Group convenes quarterly to monitor continuous improvement.
2. **Paediatric Review** – in late 2010 we audited our paediatric services against the Royal Australian College of Physicians (Paediatrics) 2008 Standards for Public and Private Facilities, which have four priority areas. While our hospitals are well equipped for the needs of younger patients, we are measuring and improving performance to ensure optimal compliance with the standards, including the Rights of Children.
3. **Operating Theatres Review** – as a major component of clinical services, ensuring optimal operating theatre performance is an ongoing focus. With nine of our hospitals performing surgery, this review facilitated greater collaboration and more efficient service delivery, for example by standardising, wherever possible, medical and surgical supplies. The review is ongoing as we strive to keep pace with rapid growth in patient demand and technological advances.

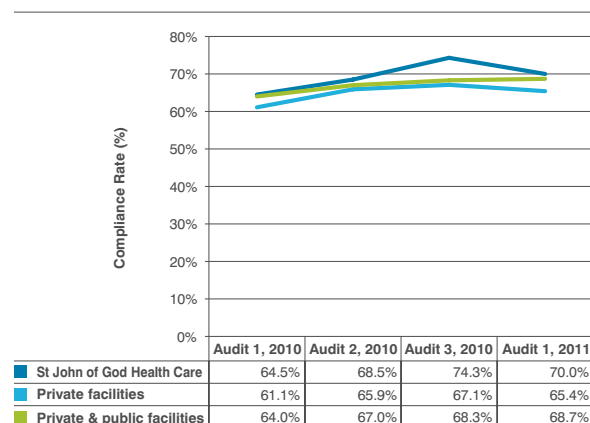
Infection control

Hand hygiene

Since 2010, we have participated in the National Hand Hygiene Australia Initiative to improve hand hygiene compliance by health workers and the general public – a vital aspect of preventing infection.

Our overall mean compliance rate is better than the private and national (combined private and public facilities) rate for each of the audit periods (see graph below). A key challenge is battling complacency, which in part may explain our reduced compliance rate this year. Our hand hygiene education programs continue as we strive to improve compliance. Our medical-surgical hospitals recently started benchmarking *Staphylococcus aureus* bacteraemia rates, which also measure the effectiveness of hand hygiene programs and will be reported against next year.

Mean Hand Hygiene Compliance Rates



A theatre technician at our Berwick hospital adjusts irrigation equipment during a procedure.



Information Technology

Our Information Services' team continues to work with clinicians on joint information technology projects designed to enhance patient outcomes.

This year, we developed and implemented a new perinatal database for our nine maternity hospitals, enabling us to standardise collection of perinatal data for Child Health Nurses, Health Departments, and the Australian Council on Healthcare Standards. The database is also ensuring the capture and reporting of key benchmarking data for comparison between our hospitals and other maternity facilities.

We also started work on developing an online preadmission form for patients to access via our website – www.sjog.org.au – for launch in 2011/12. This project is helping standardise preadmission information requirements between our 13 hospitals and will make preadmission easier for patients.

Nursing and Midwifery Standards of Excellence

Nurses and midwives are a critical link between our Mission and the people we serve. We seek to create and maintain a practice environment that is healthy and engaging and allows them to do their best work. This helps us deliver not just safe, high quality care but also an enriching experience for patients and their families, giving them a reason to hope and a greater sense of their own dignity.

This year, we developed Nursing and Midwifery Standards of Excellence to:

- Support the professional satisfaction of nurses and midwives
- Support quality and better patient outcomes
- Identify our nursing and midwifery services as the 'best place' to work
- Ensure our Mission is delivered through holistic nursing and midwifery care that provides a healing experience.

Seven standards reflect what is widely understood in nursing and midwifery literature as contributors to a healthy and positive work environment where person centred holistic care is at the forefront of decision making and clinical care.

Four divisions and 10 wards/units are participating in a 12-month trial of the standards, with pre and post test studies, approved by our Ethics Committee (p55), being conducted.

Palliative Care

When an illness cannot be cured, our focus is on helping patients have the best quality of life by addressing physical symptoms and supporting emotional, spiritual and social needs.

An organisation-wide Palliative Care Strategy embodies our holistic approach to palliative care as an integral component of our inpatient, outpatient and community services. We are building confidence and capacity to equip caregivers with the knowledge and skills to deal with and care for people at the end of life.

Our ultimate aim is to offer patients, with the support of their families and other carers, the opportunity to die with dignity and respect while minimising their pain and suffering.

Five of our hospitals – Bunbury, Murdoch, Geraldton, Bendigo and Warrnambool – have implemented the Liverpool End of Life Care Pathway (LCP), which prompts the healthcare team to implement 18 goals of care to ensure optimal patient comfort and family member support during the last 72 hours of life.

We also participate in the National Standards Assessment Program, which enables specialist palliative care services to undertake consistent self-assessment against Standards for Providing Quality Palliative Care for All Australians as part of their quality improvement activities.

Our Murdoch and Subiaco hospitals are among 20 specialist palliative care services in Australia participating, through information and idea sharing, in the National Collaborative improvement project, Assessment and Care Planning. The objective is to improve patient-centred assessment and care planning and ensure it is holistic, ongoing and responsive to the changing needs and wishes of the patient, their caregivers and family.

This year, we also established an area on our group-wide intranet, providing caregivers with a wide range of palliative care resources, such as forms, standards, national guides, and links to associations.



Pastoral service is integral to our Mission and is a significant element of our holistic approach, providing patients and families an opportunity to reflect on and engage in the spiritual and emotional dimensions of their healthcare.

Pastoral Services

Pastoral service is integral to our Mission and is a significant element of our holistic approach, providing patients and families an opportunity to reflect on and engage in the spiritual and emotional dimensions of their healthcare. In a Catholic healthcare setting the provision of such services is specific recognition of the spiritual dimension present in every person.

We have had an exciting year, commencing implementation of our Pastoral Services Strategic Plan 2010-2014. Our main areas of focus were on strengthening professional practice, formation and education, and data collection.

Some of our major achievements include:

- Representation on the Board of Spiritual Care Australia, the professional association for practitioners in chaplaincy, pastoral service and spiritual services.
- Our Murdoch hospital developing bereavement resource packages for carers, which have been introduced across all our hospitals. The packs include a range of resources, including contact details for external support services, to help people in the lead up to, and death of, a loved one.
- Addressing succession planning and strengthening the professional role of pastoral practitioners by:
 - Starting a pastoral practitioners pilot traineeship program at our Geraldton hospital, with two enrolled nurses participating.
 - Supporting two of our pastoral practitioners to undertake further studies as supervisors in Clinical Pastoral Education and one practitioner to undertake an advanced unit with the aim of pursuing supervisory training in the future.
- Our Pinelodge Clinic (p40) worked with the Brothers of St John of God, who are working in drug and alcohol services in Papua New Guinea, to help them develop culturally relevant and effective pastoral service models.

In the coming year, we plan to:

- Assist our nurses and midwives with more tools to better identify spiritual distress and ensure timely referral to Pastoral Services.
- Develop guidelines for the clinical supervision of pastoral practitioners.
- Increase awareness of the role of Pastoral Services in graduate nurse programs (p61).
- Establish, in collaboration with Spiritual Care Australia, a set of standards to guide practice.
- Recruit skilled pastoral practitioners qualified in both a pastoral sense and with a general understanding of the pertinent clinical details of patients.
- Develop strategies to measure the effectiveness of our Pastoral Services.

All our hospitals feature a Chapel, such as the one pictured at Ballarat, and quiet spaces for reflection.



Awarding Excellence

We actively encourage participation in external award programs as a way of validating and benchmarking

our performance. It is also an important indication to the community that our people excel in many areas of professional practice and Service Ethos (p60).

Recipient	Award	Awarded for
St John of God Health Care	Gold Award Australasian Reporting Awards	Excellence in reporting – Annual Report 2009/10
Tony Howarth Chairman of the Board St John of God Health Care	2010 WA Gold Medal Australian Institute of Company Directors	Exemplifying leadership values of excellence and integrity and encouraging highest ethical standards
St John of God Hospital Ballarat	Central Highlands Water Smart Water Management Award CGU Commerce Ballarat Business Excellence Awards	Achievement in sustainable water saving measures
St John of God Hospital Ballarat	Commerce Ballarat Sustainable Business Award CGU Commerce Ballarat Business Excellence Awards	Demonstrating social, economic and environmental responsibility
St John of God Hospital Berwick	State Silver Award (Victoria) Medibank Private Hospital Experience Survey	Patient satisfaction
Dr Janan Karatas Research Associate St John of God Hospital Burwood	Kinsman Family Scholarship \$50,000 Australian and New Zealand College of Psychiatry	A neuroimaging study exploring brain pathways involved in parenting behaviour in women with severe postnatal depression or bipolar disorder compared to healthy mothers
Youth Engagement Program St John of God Hospital Geelong	Outreach Healthcare Award Catholic Health Australia	Delivery of innovative services improving the health status of the vulnerable and marginalised
St Mary's Ward St John of God Hospital Murdoch	State Gold Award (Western Australia) Medibank Private Maternity Experience Index	Being Western Australia's top rated private hospital for maternity care
Gail Ross-Adjie Coordinator Nursing Clinical Practice, Policy and Research St John of God Hospital Murdoch	2011 Babe Norman Nursing and Midwifery \$30,000 Doctoral Scholarship Nurses Memorial Centre, Melbourne	Original, innovative and targeted research addressing significant health issues

continued over page...



Recipient	Award	Awarded for
Robyn Jenkinson Enrolled Nurse St John of God Hospital Murdoch	2010 Acute Care Metropolitan Enrolled Nurse of the Year WA Nursing and Midwifery Excellence Awards	Outstanding contribution to the nursing profession in Western Australia
Maria Ferreira Supervisor Central Sterilising Services Department St John of God Hospital Murdoch	Nita Perry Award Sterilisation Research and Advisory Council	Commitment to sterilisation services
Jessica Packard Midwife St John of God Hospital Murdoch	Excellence Award Australian College of Midwives	Outstanding course work in the Post Graduate Diploma of Midwifery
Jenny Ashton Pastoral Care Manager Anissa Emeran Learning and Organisational Development Manager Glenys Joplin Nurse Manager Operations St John of God Hospital Murdoch	Award of Excellence West Coast Institute of Technology	Outstanding course work in the Diploma of Management
Craig Hollingworth Scientist St John of God Pathology	Award of Excellence West Coast Institute of Technology	Outstanding course work in the Diploma of Management
Bill Blessing and Paul Horsey Gardeners St John of God Hospital Richmond	Best garden North Richmond and Kurrajong and Best Non-residential Garden Grand Champion Garden Award Hawkesbury Council Garden Competition	Best garden in Hawkesbury area
Simon Rosenbaum Exercise Physiologist St John of God Hospital Richmond	National Exercise Physiology Graduate of the Year Exercise and Sports Science Australia	Conducting research into effectiveness of exercise in the treatment of post traumatic stress disorder
St John of God Hospital Subiaco	State Silver Award 2011 WA Medibank Private Maternity Experience Survey	Providing excellence in maternity care
St John of God Hospital Warrnambool	2010 Powercor Warrnambool Business of the Year and 2010 Powercor Health and Wellbeing Award Warrnambool Business Excellence Awards	Recognising excellence in business

RESEARCH



In this section

Research Approvals
Research Highlights

Many of our researchers, including Professor Vince Caruso from St John of God Pathology, are involved in cancer research.

Research

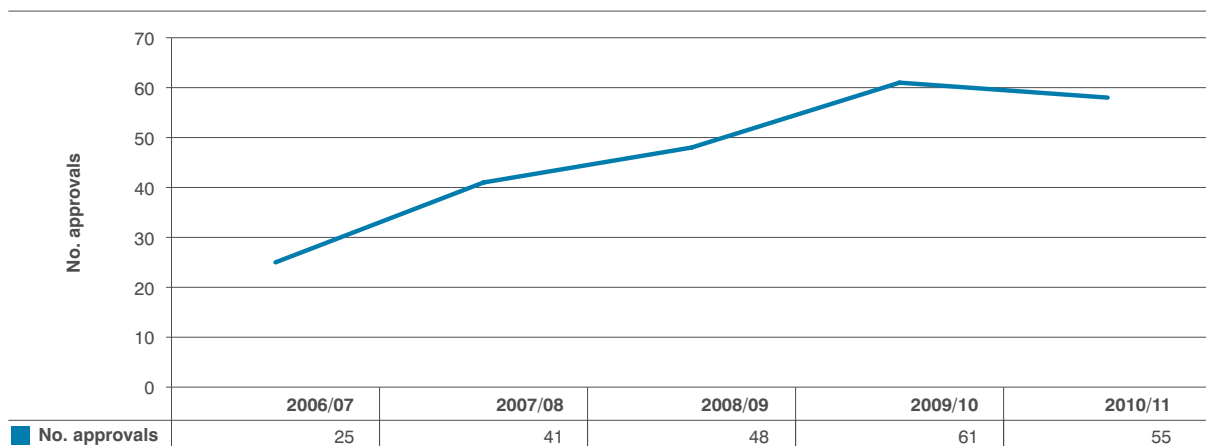
Research Approvals

The focus of St John of God Health Care's increasing research contribution is translational research, or research that moves from 'bench to bedside', particularly in the areas of oncology, nursing and mental health. At the heart of our research is our desire to improve outcomes for patients and their quality of life.

The majority of our research involves clinical trials, particularly multicentre, oncology trials investigating new medications and therapeutic combinations for cancer treatment. A significant number of these trials are supported by the Bendat Family Comprehensive Cancer Centre based at our Subiaco hospital (p31), as well as an expanding clinical trials unit at our Bunbury hospital (p27).

There has been an overall upward trend in our research activity over the past five years (see graph below), with 55 new research proposals approved in 2010/11.

Research Proposals Approved



St John of God Pathology is currently involved in 21 research projects, including with international collaborations.



There has been an overall upward trend in our research activity over the past five years, with 55 new research proposals approved in 2010/11.

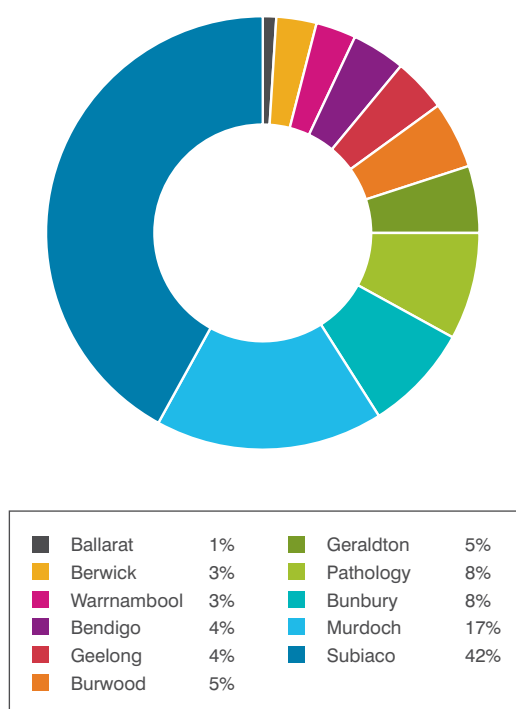
Of the 58 studies proposed and reviewed by the St John of God Health Care Ethics Committee, 55 were approved. Of these, 26 (47%) were multicentre clinical trials while 29 (53%) were exclusive to St John of God Health Care.

As in previous years, the majority of research related to oncology (15 studies), with pathology (seven studies), nursing (five studies) and mental health (four studies) comprising the next largest cohorts of research.

Our Subiaco hospital is the largest contributor to clinical trials (42%), with our next largest hospital, Murdoch contributing to 17% of studies. Eight other hospitals and our pathology service (see pie chart below) are also involved in research.

This year our Ethics Committee received certification from the National Health and Medical Research Council enabling it to review both internal and external research proposals.

Research proposals by site



This pie chart only includes research conducted through our Ethics Committee. Some of our hospitals are also involved in research projects auspiced under external research committees.

Research Highlights

St John of God Hospital Subiaco

The St John of God Hospital Subiaco Clinical Trials Unit has an excellent reputation nationally and internationally due to high quality data management, ethical conduct and ability to recruit patients. The data collected and reported has formed the groundwork for current oncological research.

The Unit commonly achieves top level study recruitment for trials affecting the management of certain cancers, such as the AMG102 Phase IB/II metastatic prostate study which examined the safety and efficacy of new drug AMG102 on patients with advanced prostate cancer, for whom treatment with hormonal treatments and chemotherapy had not been effective. Subiaco was the highest recruiting site internationally for the study.

Nursing research is also encouraged at Subiaco and this year the research model used for three research projects, completed in partnership with Curtin University, was presented to the 5th International Congress on Innovations in Nursing, held in Perth in May 2011. The projects were: Midnight versus 6am Removal of Indwelling Urethral Catheters in General Surgical Adult Patients; Nursing and Midwifery Research Priorities at a Private Hospital in Western Australia; and Does wearing GripSox™ reduce the incidence of falls in adult patients following unilateral total hip/knee replacement?

St John of God Hospital Murdoch

Our Murdoch hospital strengthened its commitment to research this year by:

- Preparing for the establishment of a professorial role in Emergency Medicine, assisted by \$1.3 million funding over three years from the Australian Government's More Doctors and Nurses for Emergency Departments initiative.
- Appointing, in association with Notre Dame University, Professor Leanne Monterosso as St John of God Health Care's first Chair in Nursing and Midwifery.
- Continuing to explore other academic positions to support research activities.



Graduate nurses reported positive integration experiences because of supportive managers and peers, an appreciation of team work, good role models and a caring family-like organisation.

St John of God Hospital Burwood

In its third year of operation, Burwood's Perinatal Women's Mental Health Unit, led by Chair of Perinatal and Women's Mental Health, Professor Marie-Paule Austin, increased its research activities by:

- Gaining \$1.79 million from the Canadian Institutes of Health Research for a four year study to examine the effects of the Queensland floods on pregnant women, their pregnancies, and their children's early development.
- Gaining \$250,000 from the Bupa Research Foundation to examine the pattern and impact of routine psychosocial screening of pregnant and postnatal women across Australia.
- Conducting a study examining the impact of maternal anxiety during pregnancy on infant behaviour regulation.
- Conducting studies exploring mental health and substance abuse in the perinatal period, and examining patterns of mental health across the perinatal period.
- Reviewing the impact of perinatal mental health assessment on maternal outcomes.
- Evaluating a Postnatal Risk Questionnaire.
- Reviewing the impact of mood disorder medication taken in pregnancy and exploring the impact of mood disorders on mother-baby attachment.

Professor Austin and her team have also been active in clinical service development, including developing a proposal for the expansion of the Parent-Infant Unit (p42), conference presentations and publications.

St John of God Pathology

Our Pathology laboratory research program currently has 21 active research projects, comprising 15 collaborations and six independent projects. International collaborators include the Sanford Burnham Institute in San Diego, The University Hospital in Oslo, The National University Hospital in Singapore and INSERM Institute in Paris.

We have been identified as key contributing institutions in five publications in the past year, in journals such as *Cell Cycle*, *Cell Death and Differentiation*; *The Medical Journal of Australia*; and *Breast Cancer Research*.

The laboratory is a core supporter of the St John of God Hospital Subiaco Clinical Trials Unit, enabling participation in numerous trials examining the effects of drugs on different categories of patients. This ensures we give the right doses of the right drugs to the right people, increasing the beneficial effects of treatments and reducing side effects.

Cognisant that the provision of laboratory services is a key factor in attracting new clinical trials, we have expanded our research to include neuroscience and dermatology. In the year ahead, we will also be looking at expanding our molecular research program.

Nursing and midwifery research

The establishment this year of the Nursing Midwifery and Allied Health Research Council resulted in a focused approach to research. Individual hospitals are participating in many clinical and professional studies and the Council is sharing findings and outcomes, which is particularly important when they have applicability across more than one of our hospitals.

The following research projects were approved or completed at the group level in 2010/11:

- **Assessing the St John of God Health Care Nursing and Midwifery Practice Environment** – a study designed to establish baseline and subsequent data for the piloting of our Nursing and Midwifery Standards of Excellence (p49). The study uses the Practice Environment Scale - Australia, a tool which helps measure the practice environment prior to the 12-month trial of the Standards and then at the end of the trial to identify any changes in the work environment as a result of the introduction of the Standards. The study is being conducted in conjunction with Australian Catholic University and St Vincent's Private Hospital Sydney.
- **Bowel Intervention Study** – this project, with preliminary results due in late 2011, aims to evaluate a bowel intervention protocol developed at our Murdoch hospital. It is a major study with significant implications for how we manage post-operative analgesia related constipation. The research is a quantitative study for the Doctor of Nursing award at the University of Notre Dame and the principal researcher has been awarded a \$30,000 grant by the Nurses Memorial Association.
- **Graduate Nurse Experiences during the St John of God Health Care Graduate Nurse Year** – this longitudinal study was conducted in conjunction with the School of Psychology, Deakin University, and investigated the experiences of graduate nurses (p61) during their first year of clinical practice at our hospitals, with 2008 and 2009 graduates participating. The research found overall high levels of satisfaction. Graduate nurses reported positive integration experiences because of supportive managers and peers, an appreciation of team work, good role models and a caring family-like organisation. They also reported strong organisational support, high levels of engagement with the job and a preference for remaining with St John of God Health Care in the long term.

PEOPLE



In this section

Directors of Mission
Workforce
Service Ethos
Workforce Planning

Equal Opportunity
Caregiver Satisfaction
Work-Life Balance
Industrial Relations

Caregiver Benefits
Occupational Health & Safety
Learning & Organisational Development

While the majority of our workforce comprises nurses and midwives, the next largest category is patient support, which comprises patient care assistants, cleaners, chefs and caterers. Pictured above are chefs and catering caregivers at our Burwood hospital.

People

Our Values – Hospitality, Compassion, Respect, Justice and Excellence – guide caregivers as they deliver service and work with one another as St John of God people.

Our culture is fundamentally centred on respecting and cherishing the innate dignity of each person. It is a culture reflecting the heritage and traditions of our founders (p5), embracing not only all who serve but forming the core of our everyday work serving others – patients, clients, residents, families and the wider community.

We use the term 'caregiver' to describe the majority of employees because each person, regardless of their role, contributes to the health and wellbeing of the people and communities we serve.

Directors of Mission

We employ Directors of Mission at each of our services to protect and enhance our culture. Directors of Mission provide leadership in promoting our Mission and Values and strengthening our Catholic identity, demonstrated through our:

- respect for human dignity
- holistic approaches to service
- concern for the common good
- just stewardship of resources
- unity of purpose with the local Catholic Church.

The role requires a grasp of both the complexity of services being delivered and the moral, ethical and social expectations on us as a Catholic organisation. The role is exercised through active participation on high level committees and in interacting and being present with caregivers at all levels. It requires a blend of personal faith commitment and high level organisational development skills.

Physiotherapists are important members of the multi-disciplinary rehabilitation team at our Warrnambool hospital.



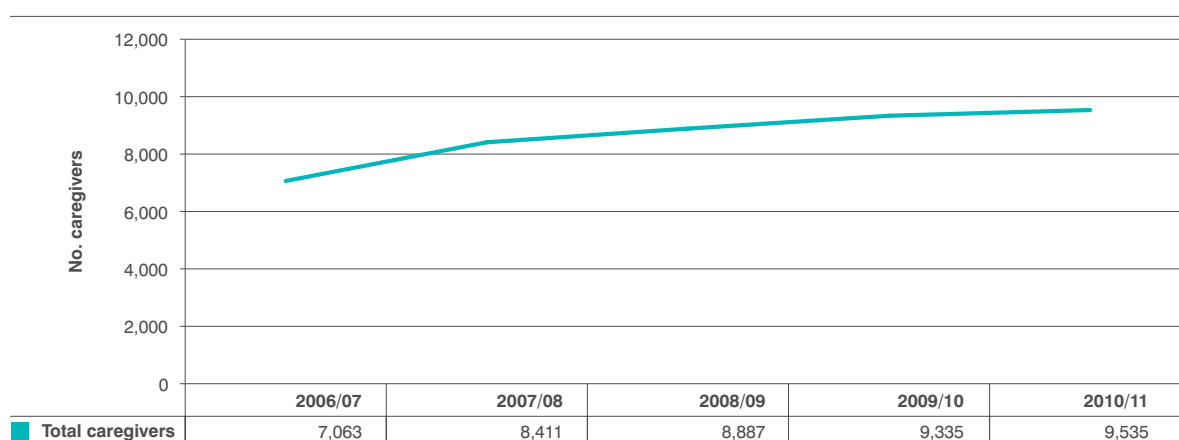
We employ 9,535 (6,279 full time equivalent) caregivers, the average age of which is 45, and the largest proportion of whom – 4,089 – are nurses and midwives.

Workforce

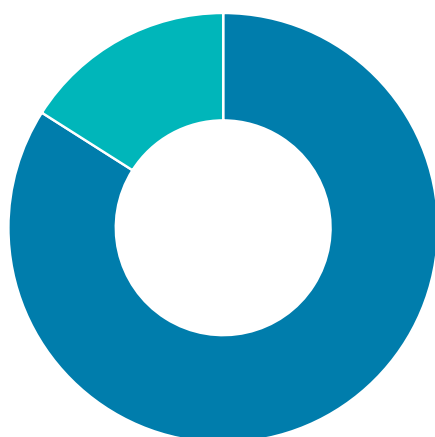
We employ 9,535 (6,279 full time equivalent) caregivers, the average age of which is 45, and the largest proportion of whom – 4,089 – are nurses and midwives.

In addition to the 296 doctors we directly employ, 3,379 private specialists are accredited to treat patients at our hospitals.

Workforce Numbers as at 30 June 2011



Workforce Gender Profile



Female	84% (8,004)
Male	16% (1,531)

Workforce Profile



Nursing	43%
Patient Support	22%
Administration	19%
Health Professionals/Medical Officers	16%

Our Workforce Profile chart above reflects caregiver categories. The health professionals category includes non-nursing health professionals such as pathologists, dietitians, physiotherapists, pharmacists and the majority of caregivers working in our Social Outreach and Advocacy services, such as counsellors and support

workers. Administration reflects administrative and non-clinical caregivers, such as ward clerks, supply officers, accountants, lawyers and human resource professionals, while patient support includes patient care assistants, cleaners and chefs.



Consultants

Where we don't have internal expertise, we contract consultants to assist. For example, we contract lawyers, financiers, auditors, architects, designers and builders, required when we are developing and expanding our facilities and services, or reviewing our operations. This year, we spent \$13.3m on consultants (\$8.8m last year), with the increase primarily reflecting the major redevelopments (p13) we are undertaking.

Service Ethos

Service is central to how we bring our Mission to life. Our development programs (p69) aim to support and develop caregivers in providing distinctive service.

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 to our effectiveness.
- Governance and management of resources is key to our success.
- Feedback and evaluation about how well we're doing is crucial.

These tenets are introduced to caregivers at orientation and integrated throughout the organisation, including through our award and recognition processes, performance appraisal conversations, and celebrations such as St John of God Day.

Our Directors of Mission work in partnership with colleagues to ensure feedback about our service, from satisfaction surveys and other sources (p46), informs our service delivery.

Workforce Planning

A shortage of doctors, nurses and midwives and a rapidly ageing population will place significant pressures on healthcare in coming years. Planning for future workforce needs is critical.

As a major provider of healthcare, we contribute to the work of Health Workforce Australia (HWA), an initiative of the Council of Australian Governments established to meet the future challenges of providing a health workforce responsive to the needs of the Australian community. HWA is developing policy and delivering programs across four main areas – workforce planning, policy and research; clinical education (p61); innovation and reform of the health workforce; and recruitment and retention of international health professionals. In June 2011, senior leaders attended nine HWA planning workshops to contribute ideas and experiences in relation to workforce issues.

Graduate nurses at our Bunbury hospital continue to develop their clinical skills.



Our commitment to doctor training continues to grow. Health Workforce Australia is engaging all healthcare providers in modelling the future healthcare workforce, with the ultimate aim to have entirely local graduates by 2025.

This year, we strengthened our planning for workforce needs now and into the future through the following:

Medical education and training

Private hospitals play an increasing role in training the next generation of doctors. Graduates from Australian medical schools will rise from 1,200 in 2003 to almost 3,000 in 2012, and we hope these new graduates will ultimately reduce the need to recruit overseas trained doctors, as well as assist in strengthening rural medical workforce numbers.

Our hospitals are involved in all levels of medical training from undergraduate to specialty training programs. As at February 2011, 266 medical students from six Australian university medical schools were rotating through our hospitals. In addition, we employ 52 Resident Medical Officers, as well as 51 Registrars undertaking vocational training, of which 27 are funded through the Commonwealth Government's Specialist Training Program. Our training covers a range of specialties including medicine, surgery, obstetrics, psychiatry, palliative care and pathology.

Our commitment to doctor training continues to grow. HWA is engaging all healthcare providers in modelling the future healthcare workforce, with the ultimate aim to have entirely local graduates by 2025.

Challenges include engaging with our already busy specialist doctors, many of whom act as teachers and supervisors of our medical students, junior doctors and specialist trainees. Our specialists maintain busy private practices and many also have significant public teaching commitments.

Nursing and midwifery education and training

We continue to develop the nursing workforce by providing clinical placements for undergraduate Registered Nurses (RNs) and pre-registration Enrolled Nurses (ENs).

We partnered with 13 Universities, and 13 TAFEs and Registered Training Organisations in 2011 to provide undergraduate, pre-registration, RN post-graduate and EN post-registration courses.

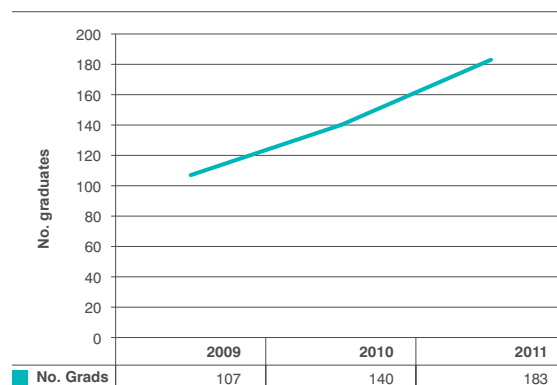
Undergraduate RN and EN Student Days

	2009	2010
RNs	22,022	23,666
ENs	4,380	6,296
Total	26,402	29,962

Graduate year programs

The number of graduates in our RN and EN programs has increased significantly over the past three years. The programs provide clinical experience and support, further education and development, and career progression in specialty areas.

Graduates in RN and EN programs



A Deakin University study into our 2009 graduate nurse year (p56) revealed 92% of our graduates remain with us after their graduate year, while 86% indicated an intention to remain in nursing long-term. In a profession plagued by attraction and retention issues – studies indicate 20% of graduates leave the profession permanently after their first year and one third leave within the first five years – the results indicate we provide a supportive environment for graduates during the difficult transition from student to Registered or Enrolled Nurse.



Health Workforce Australia clinical training grant

We anticipate further growth in RN student days over the next three years as a result of a Health Workforce Australia grant of \$1.2m to expand our clinical training capacity for 2011-2013.

Our Geelong, Warrnambool, Berwick, Nepean, and Pinelodge hospitals, as well as our home nursing division, Health Choices, formed a Catholic consortium with St Vincent's and Mercy Private Hospital, St Vincent's Public Hospital, Mercy Health and Australian Catholic University to obtain the grant. The proposal was based on providing a flexible clinical placement model, which differs from the traditional block model by providing a range of shift options across the entire semester. Students are able to self-roster around their study, family and other work commitments. The funding will be used to improve educational facilities for students and clinical education staff.

Enhancing patient centred models of care

In order to address the shortage of nurses and midwives, our Directors of Nursing introduced a predominantly team based model of care using a skill mix reflective of clinical need in each ward and unit. To assist implementation, a framework was designed, with tools such as a Workforce Prediction tool to help managers plan future staffing requirements.

Other initiatives in 2010/11

- Our largest hospital, Subiaco, which employs 2,139 caregivers, launched a new workforce brand, 'Be part of something greater'. The accompanying advertising campaign – 'if your heart makes you stand out, you'll fit right in' – is being used across varied mediums, including outdoor advertising and online via Facebook. It portrays the hospital's culture and spirit, reinforcing our holistic approach and community-minded focus.
- A new contract with a single nurse agency provider, Healthcare Australia, is expected to deliver benefits into the future. We currently spend \$6 million per year on agency nurses due to short notice sick leave and a general shortage of appropriately qualified nurses. This contract delivers a 5.9% cost saving over previous contracts and ensures our hospitals pay only for the level of nurse booked (with 24-hour booking notice) regardless of the level of nurse provided.
- In its first full year of operation, our online eRecruitment system, launched in March 2010, has streamlined recruitment processes and provided a wider selection of job applicants, with job seekers able to register for job alerts. As at 30 June 2011, we had 21,000 registered users and had advertised 1,320 jobs.
- Our divisions are managing our ageing workforce by providing flexible work options (p63), such as supporting transition to retirement and flexible use of long service leave accruals.

This year, our largest hospital, Subiaco, launched a workforce brand – 'Be part of something greater' – with an associated advertising campaign: 'If your heart makes you stand out, you'll fit right in'.



Equal Opportunity

Our comprehensive Conduct, Equity and Justice Policy articulates our commitment to equity and procedural fairness. We clearly define expected behaviours for caregivers to ensure everyone understands their rights and responsibilities in creating a harmonious workplace.

All caregivers are given information on equal opportunity at induction and every two years thereafter. Designated contact officers assist caregivers in managing difficult situations and external support is provided via our employee assistance programs (p65). The handling of any incident is reported on and reviewed centrally each year, with reports on bullying and harassment provided annually to the Board's Formation Committee (p89).

Major highlights in 2010/11 include:

- Finalisation of our Indigenous Employment Policy to maximise indigenous participation, not only by direct employment but also through initiatives such as work experience, sponsorship and scholarships.
- Being the only national healthcare provider among 280 employers to sign the Australian Employment Covenant's 50,000 Sustainable Indigenous Jobs campaign, which brings employers, the Australian Government and Indigenous people together to support Indigenous employees with pre-employment training, job placement and on-the-job mentoring. We plan to offer development pathways and employment in areas such as enrolled nursing and patient care.
- The development of a Disability Access and Inclusion Plan 2010-2014 to improve our ability to include and respond to the needs of people with a disability, whether they are caregivers, patients, clients, volunteers or the general public. We want a workplace inclusive of people with a disability.

In order to better profile our workforce, we plan to conduct a census of our workforce to ascertain information related to cultural background, English as a second language and disability. The results of the census will help us better inform our policies and practices as an inclusive employer.

Caregiver Satisfaction

We did not conduct a caregiver satisfaction survey this year. After piloting annual caregiver satisfaction surveys, conducted by the independent Press Ganey group in 2008 and 2009, we decided to return to biennial surveys as they provide a better opportunity to assess feedback, implement activities and programs and embed meaningful change prior to the next survey.

We are currently preparing for our next group-wide survey in September 2011 although our Accord service, which is on an earlier biennial cycle, conducted their survey in April (p33) and Health Choices (p25), as one of our newest divisions, conducted an interim survey in October 2010 to establish base line data.

For the first time, five of our hospitals will join Group Services in completing the survey online. Consistent with our focus on Occupational Health and Safety (p66), there will be a new set of questions about health, safety and wellbeing and we will be gauging the level of workplace support for people from minority groups. The results will be published in our 2011/12 Annual Report.

Work-Life Balance

Assisting our caregivers to balance their personal and working lives is fundamental to our culture (p58). Evidence of this is the fact that 70% of our workforce (excluding casuals) is part time, including 47% of our female line/unit managers.

Providing flexible work options through part time work



■ Part time 70% (5,835)
■ Full time 30% (2,451)

Flexible work options enable caregivers to vary their working arrangements, such as hours of work, work location, and the way work is organised. In line with this, we launched Flexible Work Options Guides this year – one for caregivers on presenting proposals and another for managers on considering and responding to proposals. The guides, supplemented by worksheets, are promoted and accessible via our intranet and HR departments.

This year, 158 women and 16 men were granted requests for part-time or flexible working arrangements.

Parental leave

The Federal Government's Paid Parental Scheme, which provides 18 weeks paid leave at the minimum wage rate (\$589.40 a week before tax), was introduced in July 2010. Coupled with our own generous paid parental leave scheme, our caregivers are receiving income for a minimum of 28 weeks of their parental leave plus any other additional accrued leave entitlements they wish to use.

In 2010/11:

- 453 caregivers, of whom 36 were men, started parental leave, while 385 caregivers returned from parental leave.
- Five caregivers used our purchased parental leave scheme, with pre-tax salary contributions to a deferred fund accessible during unpaid parental leave. The need to access the scheme has decreased because the Government scheme provides income in addition to our parental leave.

Industrial Relations

We are committed to the principle of subsidiarity and strongly support the right of our caregivers to join and seek representation from a union. We offer terms and conditions of employment that are just, competitive and mindful of trends and movement in the health sector.

The majority of our caregivers are nurses and midwives (43% or 4,089) and are covered by Enterprise Bargaining Agreements (EBA), which clearly set out structured pay levels for positions and respective annual increases. This year, we successfully negotiated one agreement that covers nurses at our Subiaco and Murdoch hospitals in Perth. This is consistent with our preferred approach of one single agreement setting out the terms and conditions of employment for people performing like functions across each state, as is currently the case in Victoria. We also successfully negotiated our first non-nursing EBA for caregivers in NSW.

We use the external Mercer job evaluation and remuneration framework for all management and specialist positions, which ensures objectivity and market relativities for comparable roles. Our non-Mercer and non-EBA positions, traditionally in head office administrative/professional roles, are reviewed at the same time as the annual Mercer remuneration review and considered against available external market data and other internal comparisons to ensure equity.

There were no days lost to industrial action in 2010/11.

Flexible work options enable caregivers to balance work and family.



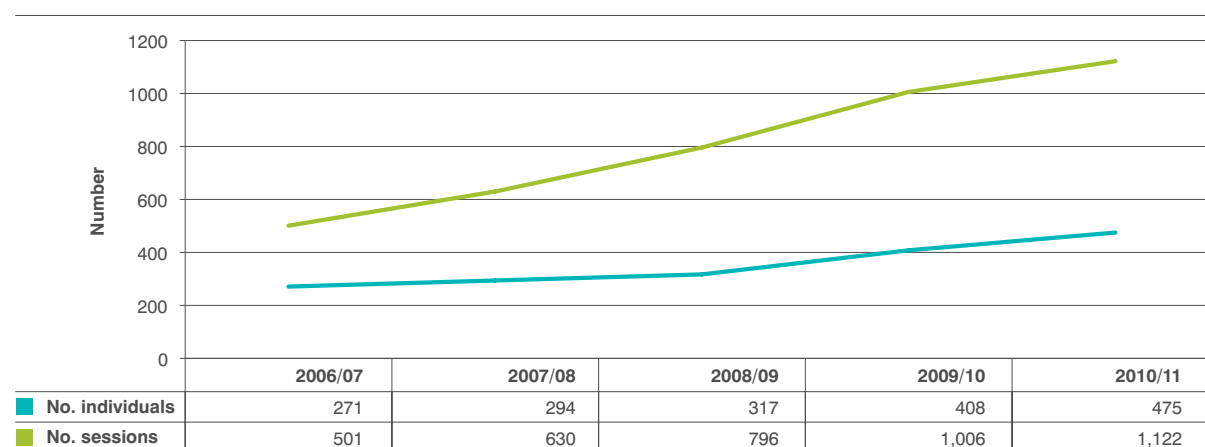
Assisting our caregivers to balance their personal and working lives is fundamental to our culture.

Caregiver Benefits

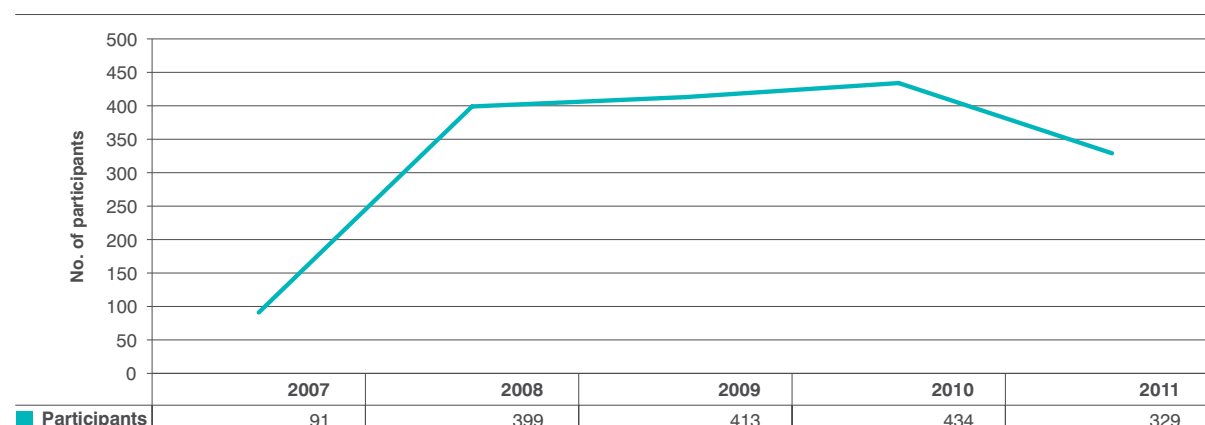
As an attractive and principled employer, we offer a substantial package of benefits to our caregivers including:

- **Salary packaging** – an optional benefit available to our caregivers due to our not-for-profit status. Caregivers forego part of their taxable income in return for us providing them with benefits of a similar value, resulting in a tax saving. In 2010/11, 5,730 of 8,214 eligible caregivers (70%) accessed this benefit.
- **Employee assistance program** – we provide access for caregivers and their immediate families to confidential counselling and support (see graph below). Increase in use is reflective of the increased workforce, with the percentage of people using the program remaining relatively steady at 5% compared to 4.6% the previous year.
- **Employer sponsored wellness activities** – we encourage and fund caregiver participation in a wide range of health, fitness and wellbeing activities. A major group-wide activity is the Global Corporate Challenge (see graph below), the world's largest corporate health initiative addressing health issues arising from long work days, sedentary occupations and little or no exercise. Participants aim for 10,000 steps per day as part of the 16-week challenge. As in previous years, we paid the \$99 entry fee (\$32,571 in total) for the 329 caregivers who signed up.
- **Uniforms** – this year we standardised our approach to uniforms, providing a full uniform rather than a uniform allowance, and rolled out a new, more modern uniform to caregivers. In February 2011, 6,171 packing boxes containing 30,000 new garments were distributed.

Employee Assistance Program Use



Global Corporate Challenge Participation



Occupational Health and Safety

The wellbeing of our caregivers, and providing a safe working environment, is integral to our Mission.

This year, our Board endorsed a new five year Occupational Health and Safety (OHS) Strategy which will provide direction and guidance as we strive to achieve best practice OHS management and performance within the health sector.

Our strategy

Our five year Strategy promotes a systems approach to improving and strengthening our OHS management and culture with a focus on leadership and caregiver participation.

The Strategy was developed after extensive consultation and research with input from key stakeholders in management, our OHS network and with an external organisation which performed a review of our systems.

The Strategy comprises five key initiatives, with each underpinning the next and providing the foundation for a holistic approach:

1. **Strengthening our OHS management system** – aligning with Australian and international standards; developing our incident management system; increasing caregiver and senior management knowledge of OHS; and focusing on areas such as managing hazards, workplace substances and contractors.
2. **Cultural change** – gaining caregiver perspectives and priorities on OHS and developing a caregiver engagement program.

3. **Targeting key injury areas** – focusing on a systems approach to prevent injuries associated with manual tasks, slips, trips and falls, and adverse behaviours such as aggression.
4. **Injury management** – developing standardised best practice approaches to care for injured caregivers.
5. **Workplace wellness** – promoting optimal health for our caregivers.

In early 2011/12, we are holding a Caregiver OHS Perception Survey to better inform Strategy implementation and identify caregiver priorities.

Monitoring performance

We are striving to achieve best practice in our participation and performance in external OHS audits. All Australian divisions were initially audited in 2008/09 by WSP Risk Solutions against all elements of Australia's National Self Insurance Audit tool (NAT), with an average score of 57.4%.

Our OHS practitioners are now trained in Lead Auditing for OHS Management Systems and form audit teams to test the veracity of divisional self audit scores. Our 2010/11 NAT score of 76% has demonstrated that we are making good progress towards improving overall OHS standards using the NAT benchmarks.

The health and safety performance of our Australian divisions is also monitored through key performance indicators which include both lag (retrospective) and lead (positive performance) OHS indicators (p67,68).

Our engineering and maintenance teams, like the one at our Bunbury hospital, ensure that facilities and equipment are in good order.



Caregiver engagement

Our group-wide OHS improvement program – focused on enhancing our processes, competencies and underlying culture – requires significant leadership and sustained effort.

Key areas of our engagement program include:

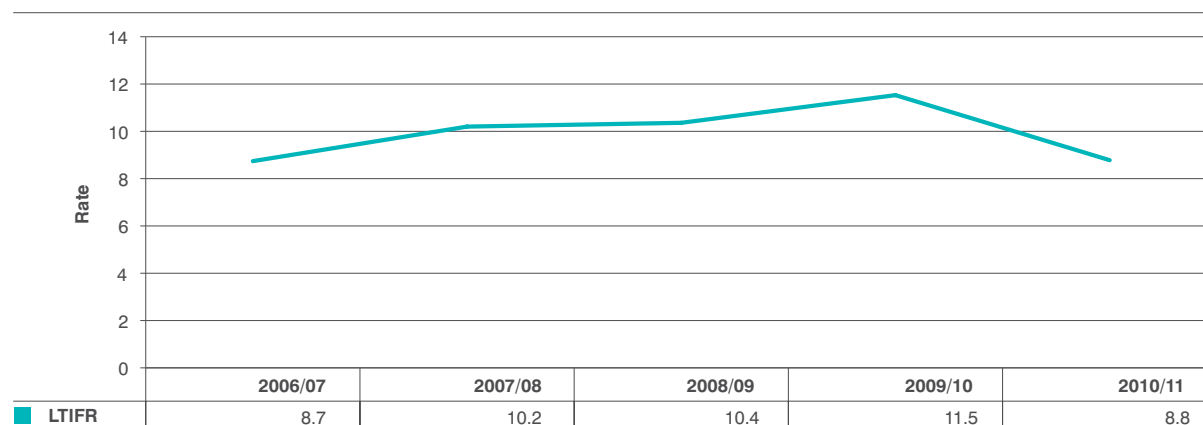
- Fostering a safety culture;
- Improving OHS knowledge and capability of all caregivers;
- Using technology for meaningful and accurate data analysis and reports;
- Developing collaborative relationships with other health service providers (p69) to identify best practice and opportunities for learning;

- Building resources to support our OHS requirements, now and into the future;
- Standardising our approach across the organisation;
- Using internal and external audits to measure performance (p66).

Injury frequency rates

The Lost Time Injury Frequency Rate (LTIFR) – injury requiring between 1 and 10 days off work and which is the subject of an accepted Worker's Compensation claim – continues to be an important indicator of our progress in ensuring a safe and healthy working environment. Our long-term aim is to reduce LTIFR to zero.

Lost Time Injury Frequency Rate



Our OHS practitioners are now trained in Lead Auditing for OHS Management Systems and form audit teams to test the veracity of divisional self audit scores.

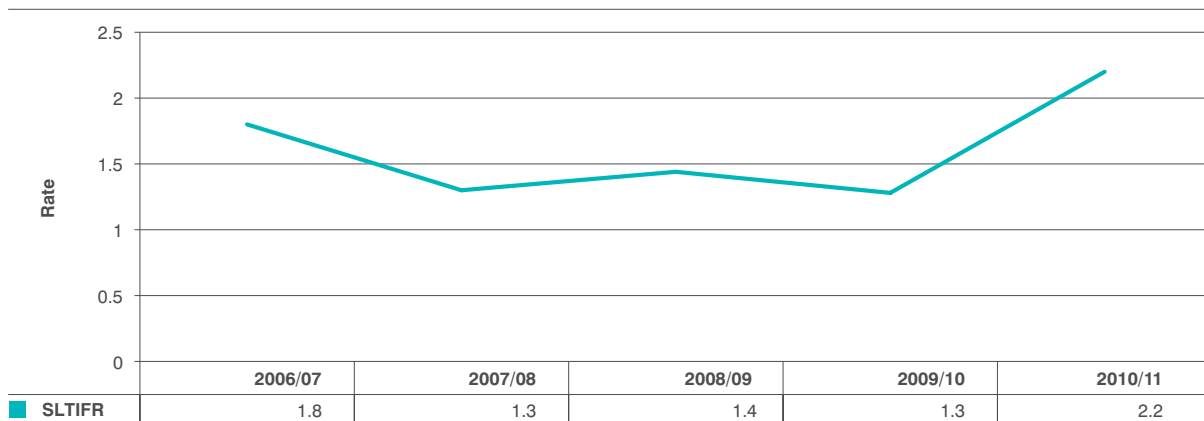


Our LTIFR this year dropped to 8.8, reflecting a decrease in injuries requiring 10 or less days off work, from 112 to 92. We believe our injury management program, which includes additional coordinators, an early intervention focus and facilitation of alternative duties, has resulted in this reduction.

By contrast, our indicator for Serious Lost Time Injuries – injuries requiring more than 10 days off work – has risen to 2.2, representing an increase of serious injuries from 13 in 2009/10 to 23 this year.

Our data continues to show that two thirds of injuries are associated with manual tasks and approximately one third from slips, trips and falls, with the majority of injuries resulting in strains and sprains. This data supports our key focus on manual task systems to reduce these types of injuries. Hazards identified and controlled for manual tasks will have a flow on effect in preventing or reducing injuries associated with slips, trips and falls.

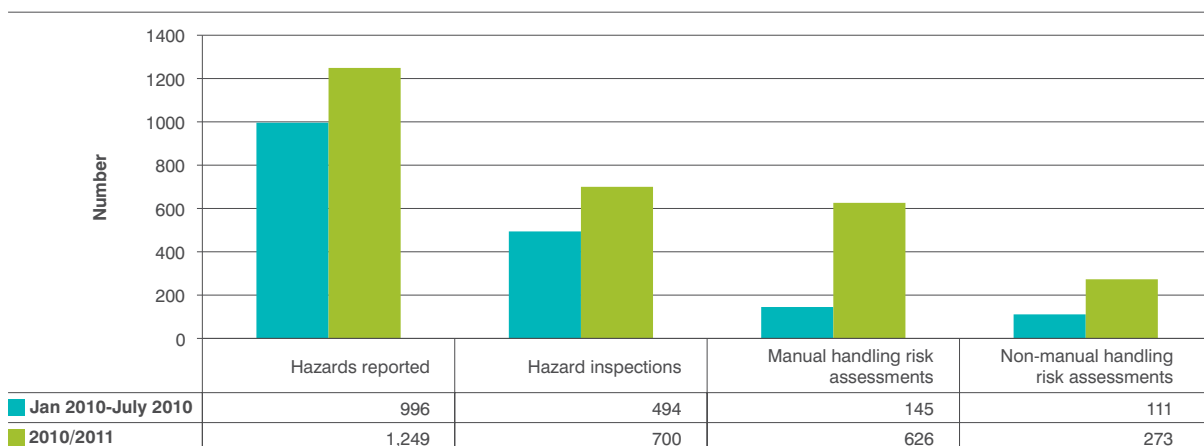
Serious Lost Time Injury Frequency Rates



Positive performance lead indicators

This is our first complete year of monitoring our positive OHS lead indicators. The results indicate that our

proactive strategies, including increasing caregiver knowledge and engagement in OHS issues to prevent workplace injuries and diseases, are working.



Manual tasks

Given the majority of our injuries arise from manual tasks (px), our focus this year was on conducting more risk assessments – 626 – and using machinery and equipment to reduce the need for manual or physical intervention. Each division has undertaken a manual handling/task equipment and machinery inventory to prepare for an audit ensuring suitable equipment is available.

Our Board has approved \$1 million to assist in purchasing manual task related equipment.

We continue to work hard to ensure our caregivers have the necessary skills and knowledge to complete manual tasks safely, and this year manual handling training met our target of 90%, with a group wide score of 90.7% up from 80.2% in 2009/10.

Collaborative benchmarking

The OHS subgroup of CHASAN (a collaborative comprising four Catholic healthcare groups – Mater, St Vincent's, Cabrini, Little Company of Mary – and Sydney Adventist, with 36,000 employees over 100 facilities) met regularly to exchange information and benchmark OHS performance. The subgroup has also started meeting with Ramsay Healthcare and Healthscope to increase information sharing, informal benchmarking and the promotion and improvement of health and safety within the health sector.

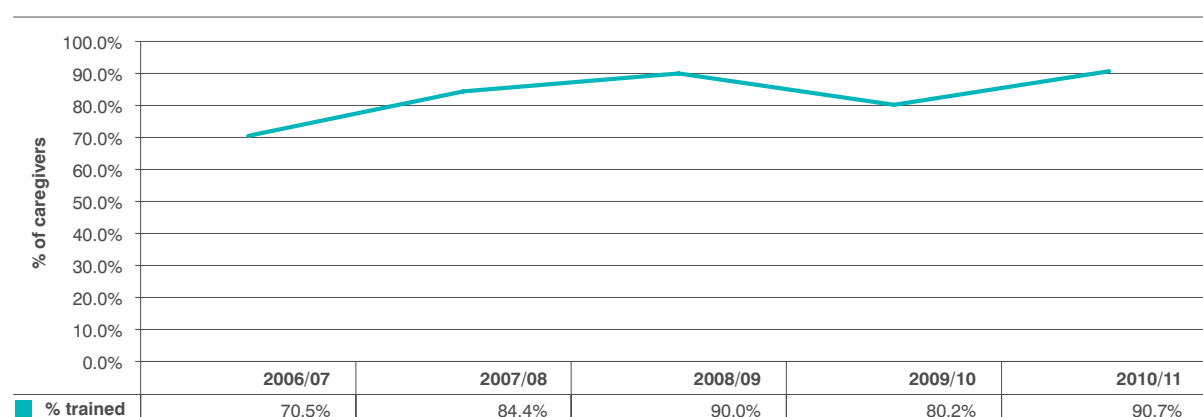
Learning and Organisational Development

St John of God Health Care is a learning organisation where:

- Leadership demonstrates a wholehearted commitment to the Mission.
- A model of servant leadership is visible at all levels.
- Formation is informed by and reflective of the faith basis of our organisation.
- Ongoing opportunities are provided to all caregivers to develop their skills and capacity.
- There is extensive leadership development and formation.
- The education of future doctors, nurses and other professionals is regarded as a core responsibility (p61).

Our Learning and Organisational Development (LOD) system comprises three core streams: Leadership and Management Development, Professional and Technical Development, and St John of God Development.

Manual Handling Training



development and performance review and development.

Leadership and management development

Our Leadership Profile, reviewed and evaluated regularly, forms the basis for recruitment and selection, in-house

Four key programs form the cornerstones of our leadership continuity and succession planning strategy.

Program	Number of participants				
	2006/07	2007/08	2008/09	2009/10	2010/11
Executive Development Program – for managers with senior leadership potential	N/A	11	13	11	N/A#
Diploma of Management – for new managers and team leaders	55	39	80	57	67
Mentoring Program – for current and aspiring managers (numbers represent mentors and mentees)	52	78	52	64	74
Workshops – one and two-day workshops across a range of subjects including communication, delegation, project management, team leadership, coaching	499	547	279	794	823

We are alternating our Executive Development Program with a new program for Emerging Leaders which aims to nurture and accelerate the development of 'high potential' caregivers early in their career.

Leadership and development programs are available to caregivers across the organisation.



We worked collaboratively with Chisholm Institute in Victoria to develop and implement Australia's first Vocational Graduate Certificate in Rehabilitation Nursing for ENs.

We encourage participation in external leadership development opportunities such as The CEO Institute and The Executive Connection, which help CEOs become better leaders; Leadership WA/VIC/NZ, which encourage community leadership; the Catherine McAuley Award, which develops women in leadership and service; and the Australian Business Arts Foundation's adviceBank and boardBank programs, which connect business volunteers with arts organisations. We currently have 12 caregivers participating in these programs.

Caregivers are encouraged to apply for financial assistance through the Sisters of St John of God Fellowship to support post secondary/tertiary external study that is personally and professionally valuable, and which enriches the organisation (see table below).

Professional and technical development

Professional and technical development remains a primary focus to equip clinical teams to deliver high quality patient care (p45) and support increasing numbers of undergraduate and graduate placements (p61).

This year's highlights, other than those listed under Workforce Planning on page 60, include:

- Trialed online orientation incorporating organisational information and health and safety issues, which caregivers can view before they start work at our Murdoch hospital.
- In collaboration with Latrobe University, our Ballarat, Bendigo and Geelong hospitals reviewed and strengthened the 2011 Advanced Clinical Nursing Program.
- Our Murdoch hospital established a Post Graduate Diploma in Critical Care in collaboration with Notre Dame University.
- Our Subiaco hospital, with 25 Registered Nurses (RNs) and Murdoch, with two RNs, participated in an inaugural Post Graduate Diploma in Clinical Nursing facilitated by the University of Notre Dame.

- Our Bendigo hospital supported two Enrolled Nurses (ENs) to complete their Diploma of Enrolled Nursing, which included medication and IV endorsement, and 10 Patient Service Assistants commenced their Certificate III in Health Services Assistance.
- Our Murdoch hospital, in collaboration with Challenger Institute of Technology, piloted an Advanced Diploma in Nursing specialising in Anaesthetics.
- We worked collaboratively with Chisholm Institute in Victoria to develop and implement Australia's first Vocational Graduate Certificate in Rehabilitation Nursing for ENs, with seven ENs enrolled in 2011.
- Our Clinical Pastoral Education Centre in Perth delivered one full time program and two part-time programs in pastoral services (p50) to 14 people, four of which were employed at St John of God Health Care. Since 2002, 91 people have graduated from the Centre. Part time pastoral service education programs were delivered from our Warrnambool (13 participants) and Ballarat hospitals (6 participants).

A range of programs continue to be available to relevant staff including Service Ethos, computer skills, food handling, Certificate III in Health Services, apprenticeships and traineeships.

In addition we provide:

- **Mandatory and essential training** – such as manual handling, fire safety, occupational health and safety, basic life support, equal opportunity, and bullying and harassment.
- **Minimum essential training** – such as infection control, electronic foetal monitoring and obstetric emergencies for midwives, blood administration, falls prevention, pressure ulcer management, and aggression management.

Sisters of St John of God Fellowships	2007	2008	2009	2010	2011
No. caregivers	140	151	176	225	221
Financial commitment	\$284,000	\$320,000	\$213,000	\$554,000	\$494,000



The aim is to uncover the skills, knowledge and conviction in our caregivers that will animate them to deliver services reflecting our healing Mission.

St John of God development

The sustainability of our Ministry is clearly dependent on an effective approach to the formation of our leaders and caregivers. There is a strong commitment to resourcing and participating in formation by our Board, senior management and caregivers.

Our Vision provides the foundation for our approach. The understandings, philosophies, values and tradition that underpin Our Vision are the focus. This includes our heritage and history, exploration of our Mission and Values, the Christian vision of the human person, Catholic social teaching, ethics, servant leadership and spirituality, including eco-spirituality.

The aim is to uncover the skills, knowledge and conviction in our caregivers that will animate them to deliver services reflecting our healing Mission.

We have a Leadership Formation Policy which creates an expectation that senior leaders and managers participate in formation each year. Participation records are maintained and our Chief Executive Officers are expected to demonstrate a minimum 90% compliance within their division.

Members of the Board commit to two half days and an overnight retreat (p87) during the year as well as their ongoing practice of meeting for Reflection for Action each month and involvement in Catholic Health Australia sponsored seminars and conferences.

Caregivers are offered formation to develop understanding of and support for our Mission and Service Ethos. This ranges from workshops through to retreats, reflections at meetings and reward and recognition initiatives.

There are two group-wide programs – Mission Mentoring and Ethics ACEs – for caregivers, and our senior executives participate in Pilgrimage and the Graduate Certificate in Leadership and Catholic Culture (see table below).

Program	Number of participants				
	2006/07	2007/08	2008/09	2009/10	2010/11
Ethics ACEs – supporting caregivers in resolving ethical concerns	18	58	39	40	41
Mission Mentoring – helping caregivers explore themes to deepen understanding of our Mission	150	160	137	122	105
Pilgrimage – an opportunity for senior executives to travel to Ireland and Spain and gain a richer understanding of our founding stories and the spirituality motivating our work	16	16	7	8	8
Graduate Certificate in Leadership and Catholic Culture – supports senior leaders in understanding more about leadership in Catholic organisations (provided through the Australian Catholic University)	N/A	21	19	17	23

COMMUNITY



In this section

Community Relations Framework
Social Justice
Community Participation

Inherent in social justice teachings are strong relationships with the community. Our Strong Family, Strong Culture program is building effective relationships within Aboriginal communities.

Community

Community Relations Framework

This year, we developed a Community Relations Framework, which will be implemented across the group from July 2011 to help increase the scale and scope of our community activities and improve community and social wellbeing. Strong community relationships were and continue to be a hallmark of our founders.

The Framework has three inter-linked elements:

1. **Community Connection** – strengthening links with the community that encourage active participation in community activities and engage community members with our organisation. This includes caregiver participation, volunteering and pro bono work, sponsorships (p77), corporate donations, hospital volunteering (p77), under and post graduate education (p61), environmental sustainability (p79).
2. **Social Service** – services provided for the benefit of the community with a charitable motivation, including our Social Outreach and Advocacy services, partnerships with other organisations, and social justice patient concessions (p76).

3. **Fundraising** – funds raised will increase our capacity to achieve our Vision by enhancing facilities, supporting research, and providing services to people experiencing disadvantage. This includes donations as well as specific fundraising campaigns. Our St John of God Foundation (p77) provides expert advice and guidance, and manages major campaigns for us.

Social Justice

As a ministry of the Catholic Church, we draw on a depth of wisdom gathered from the experience of the Christian community as it has responded to social justice issues throughout history.

We are committed to a vision of a just and compassionate society and we use our resources and our reputation in the community to reach out to people experiencing disadvantage with services and support to improve health and well being.

Inherent in social justice teachings are strong relationships with the community. We recognise that we do not and should not act in isolation from the community.

Our Nepean Rehabilitation Hospital partners with Open Family Australia to fund an outreach youth worker to assist homeless and at risk young people in Frankston.



We are committed to a vision of a just and compassionate society and we use our resources and our reputation in the community to reach out to people experiencing disadvantage with services and support to improve health and well being.

Our social justice vision includes four areas:

1. Social Outreach and Advocacy services.
2. Community Responsibility – providing financial or in-kind support for community initiatives which respond to social justice issues in the community and seek to relieve disadvantage and hardship.
3. Caregivers facing hardship – providing financial support for our own caregivers facing hardship.
4. Concessions for patients who are severely financially disadvantaged, are facing hardship and have a genuine and demonstrable need.

Our social justice vision is intrinsically linked to our Corporate Citizenship Model, which encompasses seven elements: valued health service provision; ethical behaviour and legal compliance; financial stewardship (p14) and governance (p85); attractive and principled employment; Social Outreach and Advocacy; environmental stewardship (p79); and community participation (p76).

The \$42m, including partnership funding, committed to social justice initiatives in 2010/11 (p16) represents an increase of 9.4% over the prior year, and is consistent with our strategy of moving towards 2% of eligible revenue being committed from our own funds to this area. Total social justice expenditure over the past five years is \$164m.

Social Outreach and Advocacy

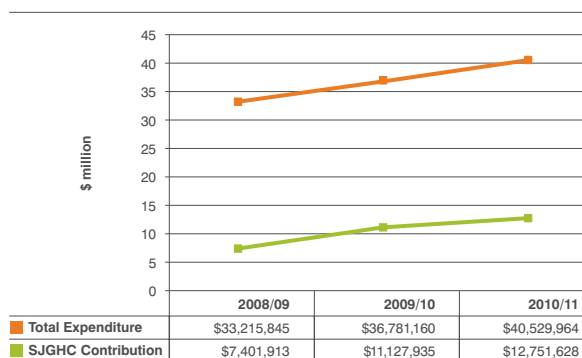
Our Social Outreach and Advocacy services reach out to people experiencing disadvantage to improve health and well being. Currently we provide significant care and relief throughout Australia, New Zealand and the Asia Pacific region. Our key focus is on the early years (0-4) and young people (12-25), with the aim of early intervention and capacity building.

Our services include Horizon House (p26), which supports young people experiencing disadvantage; Raphael Centres which provide perinatal support services for women and their families; a Strong Family Strong Culture program aiming to improve health and wellbeing in Aboriginal families across northern regional Western Australia; and an international health program supporting health services in East Timor, Papua New Guinea, Fiji and Tonga.

In 2010/11, we dedicated \$40.5 million – comprising our own funds (\$12.8 million) and those leveraged from State and Federal Governments and other partners (\$27.8 million) – to helping people in areas of identified need. This was a 10% increase on 2009/10.

Our financial contribution to Social Outreach and Advocacy services increased 15% this year, while partnership funding increased 8% on last year.

Social Outreach and Advocacy Expenditure



Community responsibility

A positive feature of our culture is the willingness of caregivers to reach out to individuals in need, or in support of the community agencies who serve them. Caregivers are very involved in these activities, often by contributing their own funds or volunteering their own time.

We define community responsibility as those actions we take where our motivation is philanthropic, where we are identifying and responding to areas of unmet social justice issues in the community, other than via our Social Outreach and Advocacy services, to seek to relieve disadvantage and hardship.

Throughout our divisional reports (p21-44) under the social justice heading there are many examples of our community responsibility initiatives, which are focused on the following key areas:

- Supporting community meals programs for people experiencing hardship
- Providing educational support for marginalised people



- Providing facilities for use by community groups providing a service for the common good of the community
- Donating to emergency relief appeals for humanitarian assistance.

This year, we expended \$806,129 to support community responsibility initiatives and we have budgeted to spend \$849,478 in 2011/12. Apart from our financial support of initiatives, we also provide – as do our caregivers – in kind support in the form of goods, resources or services.

Patients and caregivers facing hardship

This year, we took significant steps towards furthering our social justice vision by implementing two new policies demonstrating our commitment to patients and caregivers facing hardship.

Our 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 as requiring treatment not readily available elsewhere.

The policy helps us support people who are vulnerable, materially poor, powerless or marginalised, which is a fundamental and non-negotiable part of our ministry. For example, in July 2010, a nine-year-old Tanzanian girl named Asha with multiple congenital conditions received free, life-changing surgery at our Bendigo hospital. The surgery was performed by Associate Professor Beth Penington and supported by anaesthetist Dr Andrew Purcell, and her recovery was led by a skilled nursing team. The surgery was an important step towards a better life for this little girl and was made possible by our Patient Concessions Policy.

Our Caregiver Hardship Policy allows us to offer caregivers many types of support, including practical responses such as providing financial support, approving extended sick leave, or fundraising for specific causes. Our Christchurch caregivers were the first recipients of this policy after the devastating February 2011 earthquake, with each caregiver at our Halswell and Waipuna services (p44) given a \$100 grocery voucher.

In 2010/11, we committed \$635,694 to patient and staff concessions, with \$436,625 of this amount applied at our largest hospital, Subiaco.

Community Participation

Supporting caregiver contributions to community development

We support caregivers in their fundraising and volunteering to promote social justice and the common good. We provide Community Support Leave, which enables caregivers to provide voluntary services to organisations addressing disadvantage. Caregivers can apply for up to four hours per month or one week per year of paid leave to match equivalent personal leave.

In 2010/11, 29 caregivers used Community Support Leave, contributing their time, skills and experience to local community programs and internationally.

This year, we also fully supported 12 caregivers to travel to Christchurch, New Zealand, in the wake of the February earthquake to assist in caring for St John of God Halswell's long-term residents, who require a high level of care due to physical and neurological disabilities. Their presence enabled Halswell caregivers to take time off to deal with personal circumstances arising from the earthquake, including the loss of family members and friends, damage to homes, significant disruption to

This year, 12 Australian caregivers travelled to Christchurch to help support residents and caregivers at Halswell following the February earthquake.



Volunteers provide a vital contribution to our services, those we care for and their families and friends.

schooling for children, and excessive traffic congestion and delays commuting to and from work. It also meant Halswell could offer places to three additional residents whose facilities were damaged in the earthquake.

Our Workplace Giving Program enables caregivers to donate to charities via our payroll system, saving them maintaining donation receipts, providing a progressive tax benefit as they donate, and enabling eligible charities to receive income with reduced administrative costs. In 2010/11, \$17,123 was donated, with major beneficiaries being Caritas Australia and the Queensland Premier's Disaster Relief Appeal.

Sponsorships

Sponsoring organisations and activities aligned with our objectives and Mission strengthens and contributes to community life. Sponsorship may involve investing in or supporting community or government activities, the arts, a particular program or cause, an individual or a conference. Our investment is either financial, material or via the contribution of human resources.

In 2010/11, we expended \$129,000 in major group sponsorships, including:

- **Australian Centre for Health Research** – supporting research into health issues and influencing policy formulation to improve health delivery in Australia.
- **Leadership WA** – supporting the development of high potential leaders and leadership that is public spirited and includes community involvement.
- **Australian Business Arts Foundation** – promoting private sector support for the arts through partnering, volunteering and giving.
- **The Mandorla Art Award** – providing contemporary Christian religious art and encouraging young artists through a youth award.

In addition, our divisions sponsor organisations, events and individuals within their local communities.

Volunteers

We encourage community participation and engagement in our activities via an extensive network of volunteers, who give generously of their time and effort.

Volunteers provide a vital contribution to our services, those we care for and their families and friends. We hold events to thank and recognise volunteers and, as integral members of our workforce, they receive training in Service Ethos, Occupational Health and Safety, emergency procedures, bullying and harassment, infection control, confidentiality, grief and bereavement, and communication.

This year, 1,388 (1,327 in 2009/10) people volunteered in a variety of roles such as: meeting and greeting patients, serving in cafés and shops, fundraising, reading and companionship, 'buddies' in our gym and rehabilitation programs, running mobile libraries and kiosks, flower arranging, and general administration.

Highlights and new roles this year included: **Bendigo** – volunteers helped set up an archive for memorabilia for the hospital's 50th anniversary; **Subiaco** – recruited an extra 40 volunteers and volunteers raised \$13,680 via stalls for charities; **Burwood** – volunteers led a Music Appreciation group for patients; **Hauora Trust** – a group of young parents, and former clients of St John of God Waipuna, ran a literacy program for other young parents; **Murdoch** – appointed a full time Volunteer Coordinator to strengthen its volunteer program; **Geelong** – established a volunteer massage service for patients.

St John of God Foundation

The St John of God Foundation was established in 1994 to continue the Mission of the Sisters of St John of God by helping fund and support a wide range of social welfare, community and pastoral care programs, as well as continuing to improve care of the sick by supporting medical research and infrastructure.

People from all over Australia have helped the Foundation raise funds for vital projects including the Murdoch Community Hospice, the Bendat Family Comprehensive Cancer Centre, Horizon House youth accommodation and support, as well as a wide range of programs aimed at helping those most in need in our community.

In 2010/11, the Foundation concluded the very successful Capital Fundraising Campaign for the Bendat Family Comprehensive Cancer Centre based at Subiaco, which raised a total of \$20,007,203 between 2006 and 2011. The Foundation is now raising funds for the vital research work being undertaken at the Centre.



*In 2010/11, we received \$3.7 million in donations and bequests.
We are very grateful for this support and ensure funds are used as
their benefactor intended.*

In early 2011, the Foundation carried out a Feasibility Study for fundraising for the South West Coronary Care and Cancer Unit to be based at St John of God Hospital Bunbury (p27). The Board approved a proposal for the Foundation to conduct a Capital Fundraising Campaign for \$5 million to complement Federal and State Government grants.

The Foundation is also conducting a Feasibility Study for a Capital Fundraising Campaign for a proposed Cancer Unit to be based at St John of God Hospital Murdoch (p29).

St John of God Health Care receives donations and bequests:

- Unsolicited from individuals or patients, clients or their families in gratitude for services and care.
- Through auxiliaries, such as those at our Ballarat, Berwick and Geelong hospitals, where community members raise funds for equipment or refurbishments.
- Through fundraising campaigns for specific equipment or facility refurbishments, such as the Geelong Special Care Nursery Appeal (p38).

In 2010/11, we received \$3.7 million in donations and bequests.

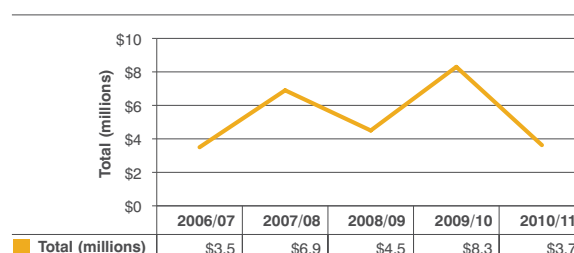
We are very grateful for this support and ensure funds are used as their benefactor intended, whether that is to buy equipment, improve facilities, fund research, or otherwise help extend and improve our services and care.

We received a number of donations of \$10,000 and over, including:

- St John of God Accord: Shared supported accommodation – \$10,000, Payten Trust
- St John of God Hospital Ballarat: Infant incubator and bladder scanner – \$42,000, Hospital Auxiliary
- St John of God Hospital Berwick: Hospital equipment – \$15,000, Mr Roland Briggs
- St John of God Hospital Bendigo: ECG machine and trolley – \$10,500, Hospital Auxiliary

- St John of God Hospital Bunbury: Installation of in-house video and Hearing Loop system in Chapel – \$10,000, Friends of St John of God
- St John of God Hospital Burwood: Care of the mentally ill, particularly the young – \$500,000, undisclosed
- St John of God Hospital Geelong: Special Care Nursery Appeal – \$40,000, Adroit Golf Day; \$40,000, Hospital Auxiliary; \$30,000, Percy Baxter Charitable Trust; \$20,000, Mr Harold Jennings; \$12,750, City of Greater Geelong; \$10,000, Bequest in memory of Patricia Cunningham
- St John of God Hospital Murdoch: Hospice Gift Fund – \$10,000, The Cultural Club
- St John of God Hospital Richmond: Care of the mentally ill, particularly the young – \$500,000, undisclosed
- St John of God Hospital Subiaco: Cancer services including the Bendat Family Comprehensive Cancer Centre and Colorectal Cancer Research – \$100,000, Hawaiian Management Group; \$100,000, SKG Radiology; \$60,000, Rifci Family Trust; \$25,000, Perth Radiation Oncology; \$25,000, Thinksmart; \$20,000, Hancock Medical Foundation; \$10,000, Mr Blasco D'Souza; \$10,000, Mr Bill Healy; \$10,000, McCusker Foundation; \$10,000, Bob and Elaine Reynolds
- St John of God Hospital Warrnambool: Future hospital redevelopment – \$56,000, undisclosed; travel and accommodation for Timorese patients receiving treatment in Australia – \$35,000, the general public through the East Timor Gift Fund; mental health services equipment – \$15,000, Hospital Auxiliary

Donations and Bequests



ENVIRONMENT



In this section

Group Environmental Sustainability Strategy
Environmental Data Monitoring
Water and Energy Audits

Environmental Activities
Case Study – Murdoch Solar Panels
Looking Ahead

Safeguarding our environment is as important as integrating its healing properties into our services, such as here at Casa Venegas in Sydney where we provide supported accommodation for people with mental health disorders who would otherwise be homeless.

Environment

In 2009, Pope Benedict released an encyclical – Caritas in Veritate (Charity in Truth) – in which he stated: *“The environment is God’s gift to everyone, and in our use of it we have a responsibility towards the poor, towards future generations and towards humanity as a whole.”*

These sentiments are reflected in many of our own documents. In *Our Vision 2010-2014*, our Trustees noted that our Mission will be implemented by, amongst other things, *“relating to each other and to planet earth in ways that are mutually transforming”*.

The importance of the environment is also reflected in our Values (p4) and our Service Ethos Model (p60), and is further reinforced as a key component of our Model of Corporate Citizenship (p60).

Our overall objectives are to:

- minimise the environmental impact of our activities through the ongoing development of systems and procedures to avoid pollution, reduce environmental harm and conserve natural resources; and
- provide environmental leadership by establishing and maintaining environmental programs highly regarded within the healthcare industry.

We have, over the past three years, greatly improved our environmental performance by increasing focus on and resourcing initiatives and activities designed to reduce our environmental footprint.

In July 2010, we established a Group Environmental Unit, comprising a Group Environmental Engineer and Environmental Assistant, to work on group-wide and divisional initiatives. The Unit ensures an integrated approach, shared learning, training and awareness, and policy direction. It also distributes a quarterly internal newsletter, *EnviroNews*, promoting environmental initiatives, *Go Green* tips and environmental events.

Group Environmental Sustainability Strategy 2011-2015

This year, we developed a *Group Environmental Sustainability Strategy 2011-2015* with four core strategies:

1. Foster an environmentally aware workplace culture
2. Strengthen management in Environmental Target Areas, such as utilities, waste and fleet management
3. Ensure appropriate resourcing
4. Improve measuring, monitoring and evaluation of environmental performance.

Our *Year One Implementation Plan 2011/12* includes detailed timelines, responsibilities and resource requirements and focuses on establishing strong foundations to build future initiatives.

Our Pinelodge Clinic composts organic kitchen waste, reducing landfill and giving the clinic’s gardens a boost.



In October 2010, we became one of the first in the health sector to report our green house gas emissions, energy consumption and energy production to the Commonwealth Government.

Environmental Data Monitoring

In 2010/11, we implemented environmental data management software, Energy Carbon Intelligence System (ECIS), which enables us to capture energy and water usage, satisfy reporting requirements under the *National Greenhouse and Energy Reporting Act 2007* and accurately measure our carbon footprint. From 1 July 2011, all our sites will also be entering waste data into ECIS, with the aim of improving waste segregation and decreasing waste.

Compliance

In October 2010, we became one of the first in the health sector to report our green house gas emissions, energy consumption and energy production to the Commonwealth Government under the *National Greenhouse and Energy Reporting Act 2007* (the Act).

Under the Act, every company in Australia generating over 350 terajoules of energy in 2009/10 was required to report emissions to the Greenhouse and Energy Data Officer by 31 October. We reported on 12 activities including consumption of natural gas, fuel, petroleum based greases, electricity, emissions from chiller plants and emissions from other gases. We also reported on the production of electricity at our Subiaco hospital, where we have a co-generation plant that makes electricity, which we consume on site, from gas.

Key reportable emissions data 2009/10:

- Energy consumption – 397 terajoules
- Carbon emissions – 64,109 tonnes
- Water use – 436,233 kilolitres

This energy consumption information will be the baseline data on which we compare energy consumption year on year.

This year, we also developed key performance indicators for 2011/12 onwards to measure and better understand our consumption of energy and water:

- Energy
 - Energy consumption in gigajoules per metre squared
 - Energy consumption in gigajoules per patient bed day (hospitals only)
- Water
 - Water consumption in kilolitres per metre squared
 - Water consumption in kilolitres per patient bed day (hospitals only)

We hope to see a significant decline in energy and water consumption as we implement initiatives in our Group Environmental Sustainability Strategy.

Water and Energy Audits

Energy and water audits are playing an important role in helping reduce our energy and water use. A Level 2 Energy and Water Audit identifies energy sources, the amount of energy and water supplied and what they are used for. It also identifies how and where savings can be made, and provides a statement of costs and potential savings.

The audits, which started in 2009, are making common recommendations including: replacing fluorescent tube lighting and halogen down lights with LED technology; placing Switch Off, Save Energy stickers on light switches; rain water harvesting for toilets; improving insulation; installing solar panels to generate electricity; and installing solar water pre-heat systems. Opportunities to reduce energy consumption in fan and pump motors have also been identified.

Once each division has been audited, they are examining recommendations and choosing the most appropriate energy and water saving initiatives.

By June 2011, audits had been completed at our four hospitals in WA, two hospitals in NSW and at four of our seven Victorian hospitals. The remaining audits will be conducted at our Ballarat, Berwick and Pinelodge hospitals in Victoria in the first half of 2011/12.



Environmental Activities

Some of our environmental activities this year included:

- Encouraging caregivers, as we rolled out our new uniform (p65), to donate superseded uniforms to hospitals in Kenya and to Rotary for distribution in other overseas areas of need. This has reduced landfill and helped meet the needs of health professionals in the developing world.
- Accord – installing one 5,000 and two 15,000 water tanks at two sites, with water used for vehicle washing and gardens.
- Bendigo – establishing a Growing Greener Group to implement environmental strategies, with 10 caregivers meeting monthly.
- Berwick – implementing new recycling programs including for fluorescent lights, batteries and kitchen cooking oil.
- Bunbury – increasing recycling as a percentage of general waste by 2% to almost 40%.
- Geelong – water consumption 50% below group average due to use of rainwater collected in 20,000 litre capacity water tanks, installation of hydromiser flow regulators, change to smart flush toilets and new batch washers in Central Sterilising Department.
- Geraldton – a new Reverse Osmosis Unit to soften and demineralise water to its sterilising department was connected to steam boilers, reducing the use of chemicals as well as water, electricity and gas consumption.
- Murdoch – providing iPads to Divisional Management Committee members saving approximately 47,000 pages of printed material per year. Other paper reduction measures included providing new graduates with documents and learning packages on thumb drives, saving approximately 6,000 pages of double-sided paper per year.
- NSW hospitals – despite increases in NSW energy prices, our Burwood and Richmond hospitals saved more than \$16,000 (748 gigajoules) in gas and electricity consumption from the previous year.
- Pinelodge – introducing the Biocup, which patients reuse throughout their hospital stay, resulted in a 95% decrease in cups used per day. Prior to the Biocup, 160 plastic drinking cups were used and sent to recycling each day. Now 8 bioplastic drinking cups are sent to an organic waste bin for composting.
- Subiaco – nominated as a finalist in the Western Australian Water Awards for its commitment to improved water management, effective WaterWise practices and initiatives in educating staff and the community.
- Warrnambool – installing two new hot water boilers that are 22% more efficient than the one replaced, and removing excess lighting, saving 2.5 mega-watts annually.

Our hospitals and services also took part in environmental events such as Earth Hour and World Environment Day, which were promoted to caregivers through displays, competitions, screensavers, intranet promotions and payslip messages.

Our gardeners, including at Bunbury, are contributing to initiatives reducing water use.



Case Study – Murdoch Solar Panels

Solar panels installed on St John of God Hospital Murdoch's roof will save money and reduce the hospital's carbon dioxide emissions by 230 tonnes per year.

Additional panels will be installed during the hospital's redevelopment (p29).

The hospital currently uses approximately 40,000 litres of water per day for hot water purposes, which is heated by gas-fired steam boilers. The new solar panels will reduce carbon dioxide emissions by 230 tonnes per year and result in savings of 13% in annual gas consumption.

The hospital has taken a pro-active and responsible approach to its environmental impact including through audits on energy, water and lighting to identify potential savings and efficiencies.

The hospital has also invested in new and efficient technologies, such as intelligent chiller controls and modern air-conditioning systems, and in the last 12 months has reduced energy consumption by 4.7% and water consumption by 14%.



Caregivers at Murdoch inspect the hospital's new roof-top solar panels.

Our hospitals and services also took part in environmental events such as Earth Hour and World Environment Day, which were promoted to caregivers through displays, competitions, screensavers, intranet promotions and payslip messages.



We are focused on environmentally sustainable and affordable building developments and renovations, with an emphasis on achieving a climate neutral status.

Looking Ahead

We will continue working on implementing our Group Environmental Sustainability Strategy and in 2011/12 have committed to activities including:

- **A fleet review** – 2% of our 285-strong vehicle fleet (operated by Pathology, Accord and Health Choices) has a 5-star rating (the best rating under the Green Vehicle Guide rating system), 53% a 4.5 to 4-star rating, and 45% with a 3.5 or less star rating. If our current fleet were all 4 star vehicles we could reduce our vehicle fleet carbon dioxide emissions by up to 15% each year. We are committed to revising our fleet composition, starting in 2011/12, with a target of 100% of our vehicle fleet to be at least 4-star rated by 2015 (excluding fleet vehicles for which 4 star rating models are not available). We will achieve this by replacing vehicles at their scheduled turnover date/distance.
- **Construction and renovation** – we are focused on environmentally sustainable and affordable building developments and renovations, with an emphasis on achieving a climate neutral status. We are implementing standards for ecologically sustainable design to apply for all redevelopments and renovations from December 2013. From July 2011, we will be using the green star rating tool as a guide for developing all new building projects and renovations and, where practicable, aiming for a 4 star green rating. To assist in achieving the maximum number of points possible, all major projects will have input from a green star certified architect.
- **Environmentally Preferred Purchasing Policy and Processes** – we will develop and implement these by 2012 to minimise the amount of waste generated. The scope will include products that are able to be used in sound waste management recycling programs and reducing excess packaging at time of purchase.

- **Waste management and recycling** – in managing waste we recognise the importance of “avoid, reduce, reuse and recycle”. Waste issues associated with the increasing use of single use disposable products has a significant impact on clinical waste, waste to landfill and cost to St John of God Health Care. We will be reviewing waste materials to improve recycling of products wherever feasible.
- **Group Environmental Fund** – this provides funding grants to divisions for environmental projects equal to the annual amount that St John of God Health Care would pay to purchase Verified Emission Reduction Units to offset its CO₂ emissions. In 2011/12, the fund has been set at \$1.2 million with priority given to water and energy initiatives targeting areas identified in our Level 2 Energy and Water audits as having the greatest potential for savings.

We believe that by implementing our Strategy we will start to see reductions in our energy and water consumption based on the baseline data collected in 2009/10 (p81).

GOVERNANCE



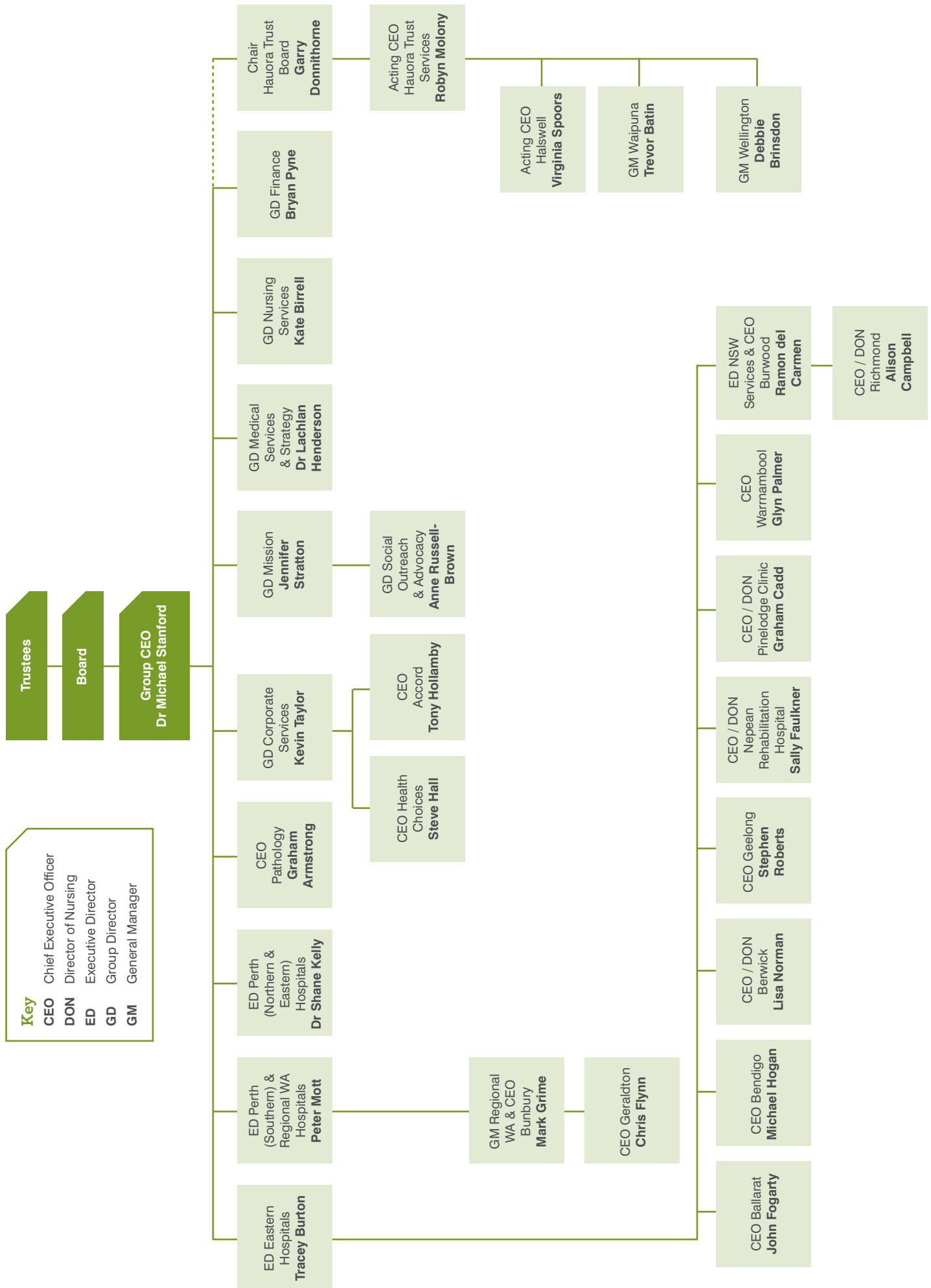
In this section

Organisation Chart
Structure

Governance
Biographies

We are committed to governance structures that assist in ensuring innovation, development, prudent stewardship and accountability. Pictured above is our Head Office in Perth, Western Australia.

Organisation Chart June 2011



Structure

St John of God Health Care Inc 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 that was previously run solely by the Sisters of St John of God. The Sisters remain members of St John of God Australia Ltd and share sponsorship of the ministry with 10 of the Dioceses in which we operate as well as the Hospitaller Order of St John of God. This collaboration establishes a structure ensuring sound and continuing governance and stewardship.

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

Trustees

The Trustees (p91), who are appointed by the members of St John of God Australia Ltd, have overall 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, to ensure 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 30 September 2010. At the meeting, the Trustees received St John of God Health Care's 2009/10 Annual Report and its financial accounts for the year ended 30 June. The Group Chief Executive Officer, Dr Michael Stanford, also provided a snapshot of the year and discussed what was planned for the 2010/11 year.

Board

The Board (p93) 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 11 Board meetings each year, Board members attended a Strategic Planning Workshop in August 2010, a Board Retreat in November 2010 and Formation Workshop in April 2011.

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 (p95) comprising senior executives who provide assistance and advice on operational matters. The committee meets 11 times a year.

Governance

Governance is the system by which St John of God Health Care is directed and managed. It is the framework within which we work to realise our Vision by fulfilling our Mission. It influences how our objectives are set and achieved, how we monitor and assess risk and how performance is optimised.

Our governance structures are modelled on best practice and assist in ensuring innovation, development, prudent stewardship, accountability and control commensurate with the risks involved.

Year in review

- Created a Governance Manual to strengthen governance practices and provide a reference tool for Trustees, Board and management.
- Created a Trustee Charter and a Board Charter outlining the roles, responsibilities and expectations of Trustees and Board members.
- Formalised terms of reference for the St John of God Australia Ltd members' committee to appoint Trustees.
- Reviewed and formalised Trustee policies dealing with: remuneration of Trustees and Directors; Board evaluation; Formation of Trustees and Directors; Appointment of Directors; Trustee contact with media; and Trustee contact with Directors and management.
- Created a new project specific Board Steering Committee for the Midland Project (p10).
- Created a new Trustee policy outlining their input into the appointment by the Board of a Group Chief Executive Officer.



- Reviewed the constitutions of the following controlled entities: St John of God Outreach Services Ltd (formerly known as St John of God Services Victoria) and St John of God Foundation Inc.
- Completed an annual review of the terms of reference of Board Committees to ensure they continue to meet the organisation's needs and reflect best practice standards of corporate governance.

Year ahead

- Undertake an evaluation of the Board in accordance with the Board Charter.
- Complete a review of the status of dormant controlled entities within the group.

Good principles of governance

We govern our organisation by applying principles of good corporate governance and associated good practice recommendations based on those promulgated by, amongst others, the Corporate Governance Council of the Australian Stock Exchange. Our application of those 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 our constitution. In addition, our Governance Authority Matrix sets out matters reserved for the Trustees and the Board, while a Management Authority Matrix sets out matters for which the Group Chief Executive Officer, senior executives and the Hauora Trust Board in 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 which assesses behaviour against our 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 our two-tier governance structure, regularly consider future nominations to the Board to ensure it is comprised of individuals with an appropriate skill mix.

In addition to ad hoc committees established from time to time in relation to specific projects, the Board has the following standing committees: Audit and Risk, Finance, Investment, Formation and Remuneration (p89).

In a biennial formal evaluation process, the Board considers its performance as a whole as well as that of its subcommittees and individual Directors. In addition, the Trustees consider Board performance through their Board Development Committee. The Trustees also evaluate their own performance.

Promoting ethical and responsible decision making – Our cornerstone document *Our Vision 2010–2014* guides us in all matters relating to governance, leadership, structures and performance. It states that these must be under constant review to ensure we remain faithful to our purpose and that actions are guided by Vision, Mission and Values. Our Vision describes how our Mission will be implemented, which is the basis of our Mission Discernment Framework informing all Board recommendations.

We also have strong formal policies setting out required standards of conduct for directors and key executives and protection for whistleblowers.

Safeguarding integrity in financial reporting – our Audit and Risk Committee (p89) has a key role in safeguarding the integrity of our financial reporting. Like all Board committees, it has written terms of reference. Its membership comprises four non-executive Board members and it is chaired by the Board's Deputy Chair, Eva Skira (p94).

In addition to external audit, a well resourced and effective internal audit function operates and reports to the Audit and Risk Committee. The focus of internal audit is on the key risks faced by the organisation. Further comment on internal audit is contained in the next principle on recognising and managing risk.

Recognising and managing risk – key strategic, operational, financial, and compliance risks are identified, assessed and controlled on an ongoing basis. Our risk profile is reviewed and updated on an annual basis, and identified risks are managed via a number of risk management systems. The overall approach and system is recorded in a Risk Management Policy.

Ongoing assessment of the adequacy and effectiveness of risk management systems is undertaken by the Board through its committees and via 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 our 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.

Management also sign an annual representation letter providing the Board with assurance that our operations, including our 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 managers is reasonable 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 11 members including the Group Chief Executive Officer, Dr Michael Stanford. 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 Eva Skira, this Committee comprises four 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 business risks; and monitoring compliance with statutory responsibilities. Ernst & Young is currently engaged as our external auditor and KPMG as our internal auditor.

Finance Committee – Chaired by Dalton Gooding, the Finance Committee comprises four Board members (three non-executive directors and the Group Chief Executive Officer) and the Group Director Finance. The committee reviews our financial performance, as well as considering and making recommendations on financial matters.

Investment Committee – Chaired by Dalton Gooding, this Committee has the same membership as the Finance Committee. The Committee administers and manages surplus funds. Its duties include establishing and monitoring an investment policy and evaluating our investment portfolio's performance.

Formation Committee – Chaired by Sr Ann McGlinn, this Committee comprises five Board members, including the Group Chief Executive Officer, and the Group Director Mission. The Committee gives form and shape to Board members' understanding of St John of God Health Care as a ministry of the Catholic Church and also works to raise awareness with them of the lived expression of our Vision in the delivery of our services.

Remuneration Committee – Chaired by Tony Howarth, this 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.



Chaired by Tony Howarth, the Board comprises 11 members including the Group Chief Executive Officer, Dr Michael Stanford. 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.

Board Attendance

Where a Director is not a member of a committee, the area in the table is shaded.

	Governing Board		Audit & Risk Committee		Finance Committee		Formation Committee		Investment 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	11 Chair	10			11	10			3	2	2 Chair	2
Mark Bahen	11	10			11	10	4	3	3	3		
Dr Tony Baker	11	10	6	4			4	4				
Jay Bonnington	11	11	6	6								
Rosanna Capolingua*	11	10			9	9			3	1		
Ivor Davies	11	11	6	6			4	4				
Dalton Gooding	11	9			11 Chair	10			3 Chair	3	2	2
Jack de Groot	11	8										
Sr Ann McGlinn	11	10					4 Chair	3				
Eva Skira	11	11	6 Chair	6							2	2
Dr Michael Stanford #	11	11			11	10	4	3	3	3		

* Rosanna Capolingua joined the Finance Committee in September 2010.

Dr Michael Stanford is the only executive member of the Board.



Biographies - Trustees

Resignations and appointments

Sr Pauline O'Connor, Fr Ian Waters and Sr Margaret Finlay's appointment terms concluded on 31 December 2010. There were no new appointments in 2010/11.

Mr Clive Macknay – BCom, CA, CPA

*Appointed Chairman February 2011,
Trustee since April 2009*

- Early career with international accounting firm in Perth, London and Singapore.
- Extensive business experience during 30 years as director and senior partner of a Perth-based accounting and financial services practice.
- Long association with St John of God Health Care: inaugural Governing Board member in 1990 and Chair from December 1999 until December 2004.

Professor Patrick Duignan – BA, H DipED(NUI), BEd, MEd Admin, PhD(AlTA) *Appointed January 2000*

- Distinguished national and international career in education and academia in Australia, Canada and Brunei. Academic positions include: Emeritus Professor, Australian Catholic University; National Director, Leading to Inspire; and Past President of the Australian Council for Educational Leaders.
- Special interest in effective leadership and management, with a focus on the public health sector and education.
- Internationally acclaimed speaker and widely published in national and international refereed publications.

- Awards: Australian Council of Educational Leaders – Nganakarrawa Award for excellence in educational leadership, Gold Medal recognising educators who have consistently contributed to the development of educational leadership, Distinguished Travelling Scholar, and Headley Beare Award for excellence in educational writing; Microsoft – Inaugural New Zealand Travelling Scholar Award; Professional Teachers Council NSW – Exceptional Service Award.

Mr Don Good – CA, BCom *Appointed January 2000*

- Chartered Accountant with international accounting firm in Perth and Sydney.
- Joined St John of God Hospital Subiaco as their accountant before becoming St John of God Health Care's first National Director of Finance.
- One of the first lay people to be appointed as a Trustee.
- Director of HESTA Superannuation Fund, 1989 – 2010, and past Chairman.
- Other appointments: Governor and Director of the University of Notre Dame Australia and Regional Administration Manager for the Sisters of St John of God.

Sr Isobel Moran – SJG, BSc(Hons), MB, BCh, BAO, FRACP *Appointed September 1996*

- Qualified and practised both as nurse and physician.
- Clinical and religious vocation took her to Ireland, Hong Kong and Pakistan.
- Special interest in the treatment and research of tuberculosis.

LEFT TO RIGHT Sr Isobel Moran, Mr Clive Macknay, Br Joseph Smith, Mr Don Good, Prof Michael Quinlan, Rev Dr Joseph Parkinson, Prof Patrick Duignan, Ms Therese Themby.

Our Trustees bring a wealth of skills and experience and exercise a range of authorities, including the appointment and evaluation of Board members, to ensure that our ministry remains faithful to its role within the Catholic Church.

- Experienced in leadership and governance in Catholic healthcare both within St John of God Health Care and in Catholic health services in general.
- Participated in the establishment of Catholic Health Australia, Australia's peak Catholic healthcare body, and remains committed to providing her skills, experience and enthusiasm to further the healing mission of Jesus Christ.

Rev Dr Joseph Parkinson – STL PhD

Appointed October 2009

- Director of the LJ Goody Bioethics Centre in WA and a regular contributor to public conversations on ethical issues in healthcare and related fields.
- Graduated in Moral Theology from the Alphonsian Academy in Rome and the University of Notre Dame Australia before holding a series of pastoral and academic positions in the Archdiocese of Perth.
- Current memberships: Department of Health WA Reproductive Technology Council, Clinical Ethics Consultancy of the Women and Children's Health Services WA, and St John of God Health Care and Mercy Care's ethics committees.

Professor Michael Quinlan – MBBS, MD, LLD, FRACP

Appointed October 2004

- Consultant physician with a long association with the Sisters of St John of God and St John of God Health Care.
- Former St John of God Health Care Governing Board Chair and former St John of God Foundation Board Chair.
- Clinical Professor of Medicine at the University of WA and a director of several institutes of medical research as well as philanthropic foundations.

- Other positions include: Chancellor, Professor of Medicine and a Foundation Trustee of the University of Notre Dame.

Br Joseph Smith – OH, Dip Teaching, Dip Counselling, Dip Leadership/Formation Appointed January 2008

- Trained in special education, with extensive healthcare experience leading the Hospitaller Order of St John of God's Australian and New Zealand hospitals.
- Held positions of leadership and formation within the Order (including two terms as Provincial) as well as Chair of the Trustees of Catholic Health Care.
- Directorships: former St John of God Health Care (12 years) and St Vincent's Health Australia, and current Catholic Health Australia.
- Provides spiritual companionship and mentoring for Catholic organisation leaders.
- Special interest in working with people living with mental illness on society's margins.

Therese Temby – BSc, Grad Dip Educ, Grad Dip ILS

Appointed October 2004

- Began her career 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.
- Appointments: former include Director of Catholic Education WA (10 years), Chair of the Curriculum Council of WA; and current include Chair of the National Catholic Education Commission.



Biographies - Board

Resignations and appointments

There were no resignations or appointments in 2010/11.

Chairman

Mr Tony Howarth – AO, CitWA, Hon LLD WAust, SF Fin, FAICD Appointed January 2004 (Member since May 2001)

- Executive career in local and international banking and finance, with senior positions in regional and major banks, building societies and stockbrokers.
- Chairman Mermaid Marine Australia Ltd; Non-executive Director, Wesfarmers Ltd and Alinta Energy; Member of industry and community organisations including: Chairman Committee for Perth; Director and Immediate Past President Australian Chamber of Commerce and Industry; Director Chamber of Commerce and Industry of WA and Western Australian Rugby Union; Member Rio Tinto WA Future Fund.
- Past Chairman Alinta Limited, Home Building Society Ltd & Deputy Chairman of Bank of Queensland Ltd.
- Member University of WA Senate, Chairman University Club, Deputy Chair UWA Business School, Adjunct Professor (Fin. Mgt.) UWA Business School.

Mr Mark Bahen – LLB Appointed January 2008

- Formerly 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 (10 years).
- Non Executive Director Consolidated Pastoral Pty Ltd.

Mr Tony Baker – MBBS, FRACS, MAICD

Appointed March 2005

- Consulting specialist in plastic surgery in public and private hospitals for 30 years.
- Emeritus Consultant at Princess Margaret Hospital for Children, Perth.
- Volunteer on overseas surgical missions to countries including Indonesia, Vietnam, the Philippines and Tanzania.
- Committed to training surgeons as an examiner with the Royal Australasian College of Surgeons and as Chairman of the National Board of Training in Plastic and Reconstructive Surgery.
- Served on the Board of Governors at the University of Notre Dame Australia.

Ms Jay Bonnington – BCom, MBA, FCPA, FAICD

Appointed October 2006

- Career as a Chartered Accountant in New Zealand before moving into senior financial roles for large corporations overseas and in Australia.
- Previously CFO/Finance Director for Yallourn Energy Ltd and National CEO of the Make-A-Wish Foundation Australia.
- Health experience includes Chair of Dental Health Services Victoria.
- Current directorships include: Port of Melbourne Corporation, and HESTA Superannuation. Community positions include: Metropolitan Fire & Emergency Services, The Queen's Fund, Prince Henry's Medical Research Institute, the Lord Mayor's Charitable Foundation, and a Member of Deakin University Council.

LEFT TO RIGHT Back – Mr Ivor Davies, Dr Michael Stanford, Mr Jack de Groot, Mr Tony Howarth, Mr Mark Bahen, Mr Dalton Gooding. **Front** – Sr Ann McGlenn, Dr Rosanna Capolingua, Ms Eva Skira, Ms Jay Bonnington, Dr Tony Baker.

Assoc Prof Rosanna Capolingua – MB BS

Appointed January 2010

- Career built in general medical practice.
- Past Federal President of the Australian Medical Association.
- Involved in medical education and professional development and ethics, serving on medical and Government ethics committees.
- Current positions: Chair of Healthway (WA Health Promotion Foundation), Chair of AMA (WA) Services Pty Ltd, Medical Director of the AMA (WA) Youth Foundation, member Council of MDA National, the UWA Raine Foundation and the Board of Governors of the University of Notre Dame, Australia.

Mr Ivor Davies – BHA, FAICD Appointed March 2000

- Led major Australian hospitals, including the Women's and Children's Health Care Network and the Royal Children's Hospital in Victoria and Princess Margaret Hospital for Children in Western Australia.
- Past Group Chief Executive Officer of St John of God Health Care.
- Director Bethanie Group Inc, a large WA-based aged care provider.

Mr Dalton Gooding – BA Bus, FCA

Appointed February 1998

- Previous partner of Ernst & Young for 14 years.
- Managing Partner of Gooding Partners Chartered Accountants, launched in 1998 and specialising in business, financial accounting and tax advice for high-net worth clients and large private companies.
- Holds non-executive director positions on a number of public and private company boards, including RAC Group, St Ives Group and Avita Medical Limited.

Mr Jack de Groot – BA, MAICD, MAIM

Appointed January 2010

- Chief Executive Officer of Catholic aid and development agency Caritas Australia.
- Vice President Finance of the Australian Council for International Development.
- Extensive experience in government relations, strategy and policy development, spearheading international aid projects and fundraising.

- Prior roles in the not-for-profit, Catholic education and Catholic health sectors.
- Board positions across: government advisory, industry, community and education sectors, including the University of Notre Dame.
- Adjunct Professor at the Australian Catholic University.
- Member of the Executive Committee of Caritas International.

Sr Ann McGlenn – SJG BS (Nursing)

Appointed April 2001

- Member of the Sisters of St John of God and member of the Regional Leadership team until 2013. Local Leader for the Sisters in the Perth area and the Kimberley.
- Worked as a nurse in rural areas, including in the Kimberly at the Derby Leprosarium, and in the Great Southern region.
- Special interest in community programs supporting women and children.

Ms Eva Skira – BA, MBA, FAICD, FAIM, SNR FFSIA

Appointed March 1999

- Career in commerce and financial markets, gaining her MBA from the renowned IMD International in Switzerland.
- Executive positions at Commonwealth Bank and Barclays de Zoete Wedd, consulting in business, project management and strategic advice.
- Non-executive positions on governance, regulatory and advisory boards in business, Government, education and the not-for-profit sectors.

Dr Michael Stanford – CitWA, MB BS, MBA, FAFPHM, FAICD, FAIM, Grad Cert LCC, Group Chief Executive Officer Appointed February 2002

- Nearly 30 years experience in public and private healthcare management, the majority in senior management roles.
- Previous CEO roles include: Australian Hospital Care Ltd, North Western Health, North Eastern Health Care Network, and Austin and Repatriation Medical Centre.
- Board memberships: Catholic Health Australia Inc, Curtin University of Technology, and the Royal Automobile Club of WA Holdings Pty Ltd.
- Councillor, WA Chapter of the Australia Business Arts Foundation.



Biographies – Group Management Committee

Resignations and appointments

The role of Executive Director Melbourne Services and Group Director Funder Relations, held by Mr Allan Boston, was restructured leading to his departure in October 2010. A new role of Executive Director Eastern Hospitals was created, with Mrs Tracey Burton appointed in October 2010.

Dr Michael Stanford – CitWA, MB BS, MBA, FAFPHM, FAICD, FAIM, Grad Cert LCC

Group Chief Executive Officer – Appointed February 2002

- Nearly 30 years experience in public and private healthcare management, the majority in senior management roles.
- Previous CEO roles include: Australian Hospital Care Ltd, North Western Health, North Eastern Health Care Network, and Austin and Repatriation Medical Centre.
- Board memberships: St John of God Health Care Inc; Catholic Health Australia Inc; Curtin University of Technology; and the Royal Automobile Club of WA Holdings Pty Ltd.
- Councillor, WA Chapter of the Australia Business Arts Foundation.

Mr Graham Armstrong – MBA, MAppS

Chief Executive Officer, St John of God Pathology – Appointed April 2008

- Extensive experience in Australia and overseas private pathology sector.
- Qualifications with Australian Society of Cytology and International Academy of Cytology.

- Previous board member of Cooperative Research Centre for Diagnostics.

Assoc Prof Catherine (Kate) Birrell – BBus (HR), Grad Dip HA, MHSc

Group Director Nursing Services – Appointed April 2003

- 30 years' nursing experience and participates in national and state committees promoting and sustaining nursing professionalism, excellence and education.
- Chairperson of Catholic Health Australia's Director of Nursing and Midwifery Committee and member of its Stewardship Board, and board member of Geelong's Gordon TAFE.
- Australian Catholic University Honorary Clinical Associate Professor in recognition of her collaboration and support of nursing programs and initiatives.
- Member of Deakin University's Geelong Community Leaders Group.
- Board Member of Gordon TAFE.

Mrs Tracey Burton – BHA, MBA, GAICD

Executive Director Eastern Hospitals – Appointed October 2010

- Appointed to the new role of Executive Director Eastern Hospitals in October 2010 to lead growth and development in the Eastern region of Australia, which currently includes nine hospitals across Victoria and NSW.
- Over 25 years experience in the Australian health sector including leadership roles in public and private hospitals and within the Catholic healthcare sector, in New South Wales, Queensland and now Victoria.

LEFT TO RIGHT Back – Mr John Fogarty, Mr Ramon del Carmen, Dr Shane Kelly, Mr Kevin Taylor, Mr Stephen Roberts, Dr Lachlan Henderson, Mrs Tracey Burton, Mr Peter Mott, Mr Graham Armstrong. **Front** – Mr Michael Hogan, Ms Jennifer Stratton, Dr Michael Stanford, Assoc Prof Catherine Birrell, Mr Bryan Pyne, Mr Mark Grime.



**Mr Ramon del Carmen – BEc, MBA, CA,
Grad Cert LCC**

Executive Director, NSW Services and Chief Executive Officer, St John of God Hospital Burwood – Appointed June 2008

- Overall responsibility for NSW Services – Burwood and Richmond hospitals.
- Commenced as Director of Finance in 2002 when these services were run by the Brothers of St John of God.
- Extensive commercial background in chartered accounting, investment banking, telecommunications and health.
- Past service as Honorary Treasurer for the NSW State Branch Council of the Australian College of Health Service Executives.

**Mr John Fogarty – BBus, MBA, MAICD,
Grad Cert LCC**

Chief Executive Officer, St John of God Hospital Ballarat – Appointed May 2004

- Career in senior management in Melbourne's public and private hospitals.
- As Victorian Projects Manager led the integration of Berwick and Nepean Rehabilitation hospitals into St John of God Health Care in 2003 and 2004.
- Led Ballarat's \$65 million redevelopment, as well as overseeing significant structural and cultural change.
- Board member of Committee for Ballarat and Ballarat Clarendon College.

Mr Mark Grime – RN, BN, GAICD, Grad Cert LCC

Executive Director WA Regional Health Services – Appointed May 2006; Chief Executive Officer St John of God Hospital Bunbury – Appointed 2000.

- Overall responsibility for managing the group's regional health services in WA, including St John of God Hospital Geraldton.
- Director of Rural Health West and GP Down South.

**Dr Lachlan Henderson – MB BS, FRACGP, MHSM,
GAICD, Cert Sports Med**

Group Director Medical Services and Strategy – Appointed November 2008

- Extensive experience as a general practitioner and in clinical and managerial roles at St John of God Hospital Murdoch and the Mount Hospital, Perth.
- Inaugural member of the University of Notre Dame Medical School's Curriculum Committee and initial head of its Clinical School at Murdoch.
- Chair WA President's Medical Liaison Council for MDA National.
- Fellow of Leadership WA.
- Board Member Swan Care Group (Aged Care).

**Mr Michael Hogan – B Com, PGDip (HSM), CA,
MAICD, Grad Cert LCC**

Chief Executive Officer, St John of God Hospital Bendigo – Appointed February 2003

- Michael was appointed Chief Executive Officer of Mount Alvernia Mercy Hospital in February 2003, and continued in the role when St John of God Health Care acquired the hospital in 2005.
- Began his healthcare career with Ramsay Health Care in 1994 after an initial career in accounting and finance.
- Board member of two local community organisations involved in healthcare; Bendigo UFS Pharmacies Group and Bendigo Community Health Services.

**Dr Shane Kelly – MB BS, MBA, MPH, FRACMA, FAICD,
Grad Cert LCC**

Executive Director Perth (Northern and Eastern) Hospitals and Chief Executive Officer, St John of God Hospital Subiaco – Appointed January 2005

- Responsible for the strategic management and performance of our largest hospital.
- Significant health management experience in Western Australia, having held a range of senior public health positions, including Chief Executive Officer of the South Metropolitan Area Health Service, Princess Margaret Hospital for Children and King Edward Memorial Hospital for Women.



- Gained medical administrative experience as Executive Director Medical Services at Fremantle Hospital & Health Service.

Mr Peter Mott – BBus, MIR, Dip Hos Admin, FAICD, FCHSM, FAIM, Grad Cert LCC

Executive Director Perth (Southern) and Regional WA Hospitals and Chief Executive Officer, St John of God Hospital Murdoch – Appointed November 2002

- 35 years experience in the Western Australian health industry.
- Held a range of management, health policy and workforce roles in the public and private sectors, including at St John of God Hospital Subiaco, the WA Branch of the Australian Medical Association, and Swan District Hospital and Health Services.
- Chair of the Board of Lifeline WA and Deputy Chair of John XXIII College Council.

Mr Bryan Pyne – BBus, CA

Group Director Finance – Appointed October 2007

- 18 years experience in finance including 12 years with St John of God Health Care in a Group Services role, and as Director, Corporate and Financial Services for St John of God Hospital Subiaco.
- Prior to his current role, he was a chief financial officer in the aged care sector.
- Recipient of 2010 40 under 40 Award (WA).

Mr Stephen Roberts – BBus, BHA, MBA

Chief Executive Officer, St John of God Hospital Geelong – Appointed April 1991

- Early career in the public sector before joining St John of God Health Care in Goulburn, NSW, in 1986 and our Geelong hospital in 1991.
- Long-standing involvement in healthcare industry associations including as Past Chairman of the Church and Charitable Private Hospitals Association.
- During 2009 led our Project Advantage team, identifying operational efficiencies group-wide.
- Board member of the St John of God Hauora Trust, New Zealand.

Ms Jennifer Stratton – BA, Dip Ed, Prof Dip HR, FAICD

Group Director Mission – Appointed February 2000

- Professional training and experience in education led to a range of roles in industrial relations, policy and research, event organisation, professional and faith development, and human resource development.
- Leadership experience in Catholic education and Catholic health has ensured her expertise is sought on boards and committees across both sectors.
- Board member of the National Council of Caritas Australia.

Mr Kevin Taylor – BSc, GAICD, Grad Cert LCC

Group Director Corporate Services – Appointed April 2008

- Significant management experience within the health industry spanning 26 years, particularly in pathology.
- Previously Chief Executive Officer of St John of God Pathology.
- His strong links with Timor Leste's Government led St John of God Health Care to establish programs in nursing, pathology and rural primary healthcare in Timor which have been recognised by the Global Health Fund and World Bank as among the most successful by a non-government agency since the country's independence.
- Board member of Mosaic Community Care.



Glossary

Acute care

Treatment of a sudden episode of illness or injury.

Australian Council on Healthcare Standards (ACHS)

The agency inspecting and evaluating healthcare facilities to award accreditation.

Bed day/patient day

An allocated measure of length of stay for inpatients admitted for an episode of care.

Benchmarking

Method of measuring performance against established standards of best practice.

Board

The second tier of St John of God Health Care's bicameral governing structure.

Brother/s

A member of a Catholic religious congregation comprising men.

Caregiver

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

Clinical care

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

Clinical risk management

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

Continuity/continuum of care

The stage of patient care comprises an overall continuity or continuum of care.

Collection centre

A centre offering pathology services.

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.

Discharge

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.

Doctor accreditation

The approval process to obtain clinical privileges to treat patients in our hospitals.

Dual diagnosis

The co-existence of two medical diagnoses, for example mental health and substance abuse disorders.

Episode/occasion of service

An episode of care that starts and finishes within a specific period.

EQuIP

The Evaluation and Quality Improvement Program of the Australian Council on Healthcare Standards, which accredits hospitals.

Equivalent Full Time (EFT)

The ratio of the total number of paid hours during a period (part time, full time, contracted) by the number of working hours in that period.

Ethics ACES

A program designed to support staff facing ethical issues.

Evidence-based practice

An approach to clinical practice where decisions are made based on incorporating evidence from research, clinical expertise, and appropriateness for the patient's condition and circumstances.

Flexible placement model

An approach to student nurse placement involving students working across various shifts throughout the semester, scheduled around their study commitments.

Group

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

Group Management Committee

Comprising the Group Chief Executive Officer and senior executives, this committee provides assistance and advice on operational matters.

Group Services

Comprises St John of God Health Care's shared services, which provide support to divisions and services.

Health Workforce Australia (HWA)

An initiative of the Australian Council of Australian Governments (COAG) established to meet future challenges of providing a health workforce.

Holistic

St John of God Health Care's practise of focusing on the whole patient; addressing their social, emotional, and spiritual needs in addition to their physical treatment.

Hospital in the Home (HITH)

The provision of care to hospital admitted patients in their place of residence as a substitute for hospital accommodation.

Hospitaller Order of St John of God

A Catholic order of Brothers – St John of God Health Care merged with their Australian and New Zealand services in 2007.

Inpatient

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

Interns

Recently qualified medical practitioners, who undertake a year of supervised practice within a hospital, rotating through different specialties.

ISO 9001 (International Standardisation Organisation)

An internationally-recognised quality accreditation standard.

Medical record

Compilation of a patient's medical treatment and history.

Multi-disciplinary

More than one discipline of health professionals.

Not-for-profit or non-profit organisation

An organisation not operating for the profit or gain of individual members.

Nursing and Midwifery Standards of Excellence

A set of seven standards reflecting principles widely understood in nursing and midwifery literature as contributing to a healthy and positive work environment, focusing on person-centred holistic care.

Outpatient

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

Palliative care

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

Pastoral service

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

Patient/client/consumer

A person for whom St John of God Health Care accepts the responsibility of care or service delivery.

Patient concessions

Treatment subsidies provided to patients facing hardship.

Pathology

The diagnostic branch of medicine examining changes in cells and tissues which 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.

Press Ganey

An independent company conducting benchmarked satisfaction surveys.

Procedure

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

Project Advantage

A groupwide initiative established in May 2009 to produce cost savings across St John of God Health Care.

Registrar

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

Sentinel event

An infrequent, significant adverse patient event, arising from medical treatment and occurring independently of a patient's condition, which may reflect system and process deficiencies.

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 is a fundamental and non-negotiable part of our ministry.

Social Outreach and Advocacy (SOA) services

St John of God Health Care services which reach out to people experiencing disadvantage.

Sister/s

A member of a Catholic religious congregation comprising women.

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.

Stewardship

Responsibilities relating to each other and planet earth in ways which are mutually transforming.

Sustainability

Aspiring, through principles, policies and practices to meet present needs without compromising the ability of future generations to meet their needs, particularly across environmental, social and economic contexts.

Team nursing model of care

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

Trustees

The first tier of St John of God Health Care's two-tiered governance structure, the Trustees have overall responsibility for St John of God Health Care.

Visiting Medical Officer

A doctor accredited to treat their patients at one of St John of God Health Care's hospitals.

Index

A

Aboriginal 26, 27, 32, 75
Accord 33
Accreditation 46
Annual General Meeting 87
Audit and Risk Committee 89
Australian Council on Healthcare Standards 46

B

Ballarat 34-35
Bank debt 16
Benchmarking 69
Bendigo 36
Berwick 37
Bequests (see donations) 78
Biographies 91-97
Board (see Governing Board) 87, 89, 90, 93-94
Brothers of St John of God
(see Hospitaller Order of St John of God) 5, 18, 40, 50
Bunbury 27
Burwood 42

C

Capital expenditure 15
Caregiver Hardship Policy 76
Caregiver Satisfaction / Survey 13, 46, 63
Catholic Health Australia 72, 92
Clinical risk management 47
Community Relations Framework 74
Compliance 47, 48, 81
Comprehensive Cancer Centre 54, 56, 77, 78
Consultants 60
Counselling 30, 32, 40, 42, 44, 65
Culture 18, 58, 64

D

Day surgery 31, 34, 35, 38
Disability 33, 44, 63
Disadvantage 26, 74-76
Doctors 60, 20, 16
Donations (see bequests) 78
Drug and alcohol 40

E

Earnings before interest, tax, depreciation and amortisation (EBITDA) 14-15
East Timor 24, 26, 35, 78

Employee Assistance Program 65
Environment 79-84
Equal opportunity 63
eRecruitment 62
Ethics 72, 55, 9
Evaluation and Quality Improvement Program (EQUIP) 46, 25
Excellence (care, awarding) 45-52

F

Fellowship 71
Finance 14-17, 8
Finance Committee 89
Flexible Placement Model 35
Flexible work options / workforce 62-64
Formation 20, 72, 89
Founding story 5
Funding (see grants) 9, 10, 30

G

Geelong 38
Geraldton 28
Governance 85-97
Governing Board (see Board) 87, 89
Grants (see funding) 62, 38, 56, 78
Group Management Committee 87, 95-97
Group Services 102

H

Halswell 44
Head office 102
Health Choices (home nursing) 25, 12
Horizon House 26, 75
Hospitaller Order of St John of God
(see Brothers of St John of God) 5, 87
Hospitals 27-32, 34-43

I

Indigenous 9, 8, 26, 30, 63
Industrial relations 64
Infant mental health (see perinatal mental health) 26, 35, 37, 38, 41, 42, 43, 56
Information technology / services / systems 49
International Health 26
Investment Committee 89

K

Key Result Areas 5

L

Leadership and management development 70, 20

Learning and organisational development 69

Location map of our services 22-23

Lost time injury 67

M

Manual handling 69

Medical education 61

Mental health 26, 35, 37, 38, 40, 41, 42, 43, 56

Midwife / midwives / midwifery 19, 30, 32, 35, 49, 55, 56, 59, 61, 64, 71

Mission 4

Murdoch and Murdoch Community Hospice 29-30, 83

N

National Nursing Development Program 26

Nepean Rehabilitation 39

Nurses / nursing 26, 28, 29, 30, 35, 36, 37, 38, 39, 40, 41, 49, 54, 55, 56, 60, 61, 62, 64, 71

Nursing and Midwifery Standards of Excellence 49

O

Occupational health and safety 66-69, 11

Operating revenue (see revenue) 16

Organisational structure 5, 86-87

P

Palliative care 49

Parental leave 64

Partnerships 9, 10, 20, 55, 75

Pastoral service / care 50

Pathology 26, 12, 17

Patient Concessions Policy 76

Perinatal mental health (see infant mental health) 26, 35, 37, 38, 41, 42, 43, 56

Pinelodge 40

Pomegranate (our symbol) 5

Press Ganey Surveys (see Satisfaction surveys) 13, 46, 63

Q

Quality and clinical risk management 47

R

Raphael Centres 35

Rehabilitation 39, 44, 71

Remuneration Committee 89

Research 53-56

Revenue 14-15

Richmond 43

S

Saint John of God (Patron Saint) 5

Saint John of God Foundation 77-78

Salary packaging 65

Satisfaction surveys 13, 46, 63

Serious lost time injury (frequency) rate 68

Service Ethos 60

Sisters of St John of God 5, 71, 77, 87

Social justice 74-76, 16, 20

Social Outreach and Advocacy (SOA) 26, 75

Sponsorship 77

Stewardship 15

Subiaco 31-32

Sustainability 6, 11

T

Team Nursing Model 35, 36

Trustees 87, 91-92

V

Values 4

Vision 4

Volunteers 77

W

Waipuna 44

Warrnambool 41

Wellington 44

Workforce planning 60

Work-life balance 63

Y

Yes Personnel 33

Young people / youth 26, 38, 39, 44, 74, 75



Contact Us

HEAD OFFICE

St John of God Health Care

Ground floor, 12 Kings Park Road
West Perth, WA 6005
PO Box 508, West Perth, WA 6872
Tel (08) 9213 3636
Fax (08) 9213 3668 *
Email info@sjog.org.au

NATIONAL

St John of God Foundation

68 Coghlan Road
Subiaco, WA 6008
PO Box 8032, Subiaco East, WA 6008
Tel (08) 9382 4292
Fax (08) 9382 0332 *
Email veronica.cavlovic@sjog.org.au

St John of God Health Choices, Head Office

Ground Floor, 111 Coventry Street
PO Box 986, South Melbourne, VIC 3205
Tel (03) 9205 6530
Fax (03) 9690 0633 *
Email info.healthchoices@sjog.org.au
www.sjog.org.au/healthchoices

Group Services

Osborne Park Office

454 Scarborough Beach Road
Osborne Park, WA 6017
Tel (08) 6103 5606
Fax (08) 9201 1096 *
Email info@sjog.org.au

Melbourne Office

Ground floor, 111 Coventry Street
South Melbourne, VIC 3205
Tel (03) 9205 6500
Fax (03) 9690 0633 *
Email info@sjog.org.au

Wendouree Office

33 Grandlee Drive
Wendouree, VIC 3355
Tel (03) 5342 6601
Fax (03) 5342 6620 *
Email info@sjog.org.au

WESTERN AUSTRALIA

Hospitals

St John of God Hospital Murdoch

100 Murdoch Drive
Murdoch, WA 6150
Tel (08) 9366 1111
Fax (08) 9366 1133
Email info.murdoch@sjog.org.au

St John of God Murdoch Community Hospice

100 Murdoch Drive
Murdoch, WA 6150
Tel (08) 9366 1111
Fax (08) 9366 1133
Email info.mch@sjog.org.au

St John of God Hospital Subiaco

12 Salvado Road
Subiaco, WA 6008
PO Box 14, Subiaco, WA 6904
Tel (08) 9382 6111
Fax (08) 9381 7180
Email info.subiaco@sjog.org.au

St John of God Hospital Bunbury

Corner Robertson Drive &
Bussell Highway
Bunbury, WA 6230
PO Box 5007, Bunbury, WA 6231
Tel (08) 9722 1600
Fax (08) 9722 1650
Email info.bunbury@sjog.org.au

St John of God Hospital Geraldton

12 Hermitage Street
Geraldton, WA 6530
PO Box 132, Geraldton, WA 6531
Tel (08) 9965 8888
Fax (08) 9964 2015
Email info.geraldton@sjog.org.au

Pathology

St John of God Pathology

Western Australia
23 Walters Drive
Osborne Park, WA 6017
PO Box 646, Wembley, WA 6913
Tel 1300 367 674
Fax (08) 9204 2974
Email info.pathwa@sjog.org.au

Social Outreach and Advocacy Services

Drug & Alcohol Withdrawal Network

12 Salvado Road
Subiaco, WA 6008
Tel (08) 9382 6049
Fax (08) 9382 6725
Email info.subiaco@sjog.org.au

St John of God Murdoch Ferns House

62 Pakenham Street
Fremantle, WA 6160
Tel (08) 6226 9444
Fax (08) 9282 5015

Raphael Centre Subiaco

12 Salvado Road
Subiaco, WA 6008
PO Box 14, Subiaco, WA 6904
Tel (08) 9382 6828
Fax (08) 9382 6823
Free Call 1300 306 828
Email info.raphaelsubiaco@sjog.org.au

VICTORIA

Hospitals

St John of God Hospital Ballarat

101 Drummond Street North
Ballarat, VIC 3350
PO Box 20, Ballarat, VIC 3353
Tel (03) 5320 2111
Fax (03) 5333 1682
Email info.ballarat@sjog.org.au

St John of God Hospital Bendigo

133-145 Lily Street
Bendigo, VIC 3550
PO Box 478, Bendigo, VIC 3552
Tel (03) 5434 3434
Fax (03) 5434 3455
Email info.bendigo@sjog.org.au

St John of God Hospital Berwick

Gibb Street
Berwick, VIC 3806
PO Box 101, Berwick, VIC 3806
Tel (03) 9709 1414
Fax (03) 9707 4135
Email info.berwick@sjog.org.au

St John of God Hospital Geelong

80 Myers Street
Geelong, VIC 3220
PO Box 1016, Geelong, VIC 3220
Tel (03) 5226 8888
Fax (03) 5221 8807
Email info.geelong@sjog.org.au

**Patient results should not be faxed
to the head office but to the hospital
in which the patient is being treated.*

St John of God Nepean Rehabilitation Hospital
255–265 Cranbourne Road
Frankston, VIC 3199
Tel (03) 9788 3333
Fax (03) 8790 8747
Email info.nepeanrehab@sjog.org.au

St John of God Pinelodge Clinic
1480 Heatherton Road
Dandenong, VIC 3175
Tel (03) 8793 9444
Fax (03) 8793 9440
Email info.pinelodgeclinic@sjog.org.au

St John of God Hospital Warrnambool
136 Botanic Road
Warrnambool, VIC 3280
PO Box 316, Warrnambool, VIC 3280
Tel (03) 5564 0600
Fax (03) 5564 0699
Email info.warrnambool@sjog.org.au

Pathology

Ballarat Laboratory
101 Drummond Street North
Ballarat, VIC 3350
PO Box 2718, Ballarat, VIC 3354
Tel 1800 636 633
Fax (03) 5320 2113
Email info.patheat@sjog.org.au

Geelong Laboratory
245 Ryrie Street, Geelong, VIC 3220
Tel 1800 676 823
Fax (03) 5225 1179
Email info.patheat@sjog.org.au

Social Outreach and Advocacy Services

St John of God Accord
Shop 24A, Ringwood Square Shopping Centre, 59-65 Maroondah Highway, Ringwood, VIC 3134
PO Box 528, Ringwood, VIC 3134
Tel (03) 8804 4600
Fax (03) 8804 4690
Email contact@st.johngod.org.au

Bloomsbury House Dual Diagnosis Unit
101 Webster Street, Ballarat, VIC 3350
Tel (03) 5320 2601
Fax (03) 5320 2613
Email info.ballarat@sjog.org.au

Pomegranate House Community Psychology Service
103 Webster Street
Ballarat, VIC 3350
Tel (03) 5320 2260
Fax (03) 5331 8455
Email
pomegranatehouse.ballarat@sjog.org.au

Raphael House Ballarat
103 Drummond Street North
Ballarat, VIC 3350
Tel (03) 5320 2016
Fax (03) 5320 2018

Raphael Centre Berwick
32 Fairholme Boulevard
Berwick, VIC 3806
Tel (03) 9707 3988
Fax (03) 9707 0297
Email info.raphaelberwick@sjog.org.au

Raphael Centre Geelong
11 Fenwick Street
Geelong, VIC 3220
Tel (03) 5221 7333
Fax (03) 5221 9766
Email
raphael.centre-geelong@sjog.org.au

Raphael Centre South West Victoria St John of God Hospital, Warrnambool
136 Botanic Road
Warrnambool, VIC 3280
PO Box 316, Warrnambool, VIC 3280
Tel (03) 5564 0636
Fax (03) 5564 0699
Email
info.raphaelsouthwestvic@sjog.org.au

Raphael House Ballarat
103 Drummond Street North
Ballarat, VIC 3250
Tel (03) 5320 2016
Fax (03) 5320 2018
Email raphaelhouse.ballarat@sjog.org.au

NEW SOUTH WALES

Hospitals

St John of God Hospital Burwood
13 Grantham Street
Burwood, NSW 2134
PO Box 261, Burwood, NSW 1805
Tel (02) 9715 9200
Fax (02) 9747 5223
Email info.burwood@sjog.org.au

St John of God Hospital Richmond
177 Grose Vale Road
North Richmond, NSW 2754
Locked Bag 2, Richmond, NSW 2753
Tel (02) 4570 6100
Fax (02) 4571 1552
Email info.richmond@sjog.org.au

Social Outreach and Advocacy Services

Casa Venegas
PO Box 112, Enfield NSW 2136
Tel (02) 9715 9200
Fax (02) 9747 5223
Email casa.venegas@sjog.org.au

Raphael Centre Blacktown
36-38 First Avenue
Blacktown, NSW 2148
Tel (02) 9839 0900
Fax (02) 9672 1318
Email blacktown.reception@sjog.org.au

NEW ZEALAND

St John of God Hauora Trust
26 Nash Road, Halswell
Christchurch, 8025
Tel +64 3 338 2009
Fax +64 3 338 2008
Email enquiries@sjog.org.nz

Supported residential facilities for people with a disability

St John of God Halswell
26 Nash Road, Halswell
Christchurch, 8025
Tel +64 3 338 2009
Fax +64 3 338 2008
Email enquiries.halswell@sjog.org.nz

St John of God Wellington
11 Messines Road
Karori, Wellington 6012
Tel +64 4 464 2010
Fax +64 4 464 2008
Email administrator.wellington@sjog.org.nz

Social Outreach and Advocacy Services

St John of God Waipuna
349 Woodham Road
Linwood, Christchurch 8061
PO Box 24127, Eastgate, Christchurch 8642
Tel +64 3 386 2159
Fax +64 3 386 2158
Email enquiries.waipuna@sjog.org.nz





Long after people have returned home from hospital or ceased their interaction with our services, they may not remember our facilities or equipment; what will remain in their memories, we hope, will be the words and actions of our people who cared for and supported them.

Our investment in new buildings, equipment and services reflects our long-term commitment to our communities and enables us to deliver quality, innovative care to our patients and clients and will continue to be a key factor in our success into the future, particularly given our place in a sector demanding constant evolution.

The most poignant and long lasting measure of our success however is how well cared for and supported people feel through our caregivers living our Mission in their interactions with our patients and clients each day.

So while our investments in infrastructure are exciting and important, and will help ensure our longevity, they must be viewed in the context – and alongside the more human face – of our Mission, which will continue to prosper, as it always has; through our people.

We end where we began, understanding that our goal is to give people an experience that will strengthen their confidence in life and give them a reason to hope.



Established 1950

2009/10 Annual Report – Gold Award

Since our first entry for our 2004/05 Annual Report, we have received one Bronze Award and four Silver Awards, consecutively, at the annual Australasian Reporting Awards.



This report is printed on paper that uses 55% recycled fibre and virgin fibre from sustainably managed forests. Sourced from an ISO accredited and certified carbon neutral mill, it is also manufactured using elemental chlorine free pulp.

St John of God Health Care Inc Annual Report 2010/11

Published October 2011, Perth, Western Australia

St John of God Health Care Inc

ABN 21 930 207 958 ARBN 051 960 911

(Limited Liability) Incorporated in Western Australia

GRINDSTONE CREATIVE

Design / Grindstone Creative

Photography / Australia, Peter Tabor; New Zealand, David Baird

Print / Zoet Print



Mixed Sources
Product group from well-managed
forests and other controlled sources
www.fsc.org Cert no. SCS-COC-001703
© 1996 Forest Stewardship Council





www.sjog.org.au

