

CABRINI ANNUAL REPORT



Cabrine  
Gandel Wing

16-17



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US

## OUR MISSION

**Who we are:** We are a Catholic healthcare service inspired by the spirit and vision of Saint Frances Xavier Cabrini and the Missionary Sisters of the Sacred Heart of Jesus (the Cabrini Sisters).

**What we believe:** We are a community of care, reaching out with compassion, integrity, courage and respect to all we serve.

**What we do:** We provide excellence in all of our services and work to identify and meet unmet needs.

## OUR VALUES

Our values form the base of our mission, are built around what we believe and drive how we act. They are drawn from Saint Frances Xavier Cabrini's life and reflect her heart, her spirit, her conviction and her approach.

**Compassion:** Our drive to care is not just a professional duty to provide excellent quality care but is born of a heartfelt compassion for those in need, motivated by God's love for all people.

**Integrity:** We believe in the power of hope to transform people's lives and remain faithful to the bold healing mission and legacy of Saint Frances Xavier Cabrini.

**Courage:** We have the strength, determination, vision and conviction to continue the work of Saint Frances Xavier Cabrini and the Cabrini Sisters.

**Respect:** We believe that every person is worthy of the utmost respect and the best possible healthcare. We know that our resources are entrusted to us to use for the benefit of others.

## A CATHOLIC ORGANISATION

Cabrini shares the healing mission of the Missionary Sisters of the Sacred Heart of Jesus and operates according to Catholic Health Australia's *Code of Ethical Standards for Catholic Health and Aged Care in Australia*.

chair



## Looking forward

By Chairman Richard Rogers

→ I have great pleasure in presenting the *Cabrini Annual Report 2016-17*. This year, we have been looking forward and positioning Cabrini for the future. I am fortunate to be the Chairman of a Board comprising talented and committed members who volunteer their time.

During 2016-17, all members have contributed significantly to the stewardship of Cabrini in Australia, utilising their particular expertise and skills. Cabrini's voluntary Board takes its role most seriously. We appreciate the guidance and wisdom of our founders and sponsors, the Missionary Sisters of the Sacred Heart of Jesus. We have a supportive Provincial Council and benefit from the consideration of our Provincial Superior Sister Pietrina Raccuglia MSC and Provincial Councillors Sister Arlene Van Dusen MSC and Sister Lucy Panettieri MSC. I would also like to thank Sister Catherine Garry MSC and Sister Diane Olmstead MSC for their assistance

***All of our Board members have contributed significantly to the stewardship of Cabrini Australia***



*This page:  
Launch of the new specialist mental health service at the Cabrini Asylum Seeker and Refugee Health Hub.  
From left: Chairman Richard Rogers, Cr Samantha Ratnam, Dr Tran Nguyen, Jane Garrett MP and Minister Martin Foley MP.*

and counsel, as well as my Board colleague Sister Sharon Casey MSC.

As a Board, we have been pleased to welcome three new Board Directors: Professor Katie Allen who joined in February 2016, Anthony Rice who joined in November 2016 and Martin Day who joined in November 2016. These new Board members have blended exceptionally well into our team and have been great contributors from their first day.

### STRATEGY

The health sector in Australia is facing many challenges and Cabrini is not immune to them. We have been working within the new corporate strategy for the period 2016-17, in order to address all matters that are affecting us and we are looking forward to a successful outcome.

From time to time, all organisations review their corporate structure to ensure alignment between strategy, structure, systems and skills. As a Board, we have turned our minds to this and we are reviewing the current structure and assessing changes that may be appropriate for the future.

In reviewing Cabrini's strategy going

forward, the Board considered the Cabrini Linen Service (CLS). In May 2017, we announced the sale of CLS to the Spotless Group. In keeping with the people philosophy of Cabrini, we undertook to help staff who wanted to remain in employment find new jobs. The Board is pleased to note that this challenge has been completed successfully with most of the CLS staff having gained employment.

### HIGHLIGHTS

This year has been extremely busy with some major changes occurring within the organisation. The Board understands and appreciates all of the work, effort and care by the medical staff who practise at Cabrini. We sincerely appreciate the help and patience of those doctors who have been relocated from their former rooms due to demolition of former medical centre 1 to make way for our new clinical building at Cabrini Malvern. We know that this has been disruptive and believe that the ultimate outcome will be of great benefit to all of us at Cabrini.

In June 2017, a new *Cabrini Medical Compact* was launched. Developed in consultation with our medical staff and consultants, this compact clearly sets

*In April 2017, we launched a new specialist mental health service at the Cabrini Asylum Seeker and Refugee Health Hub in Brunswick.*

out the doctors' responsibilities and Cabrini's responsibilities. It is another step in continuing the cooperation between Cabrini and our medical staff and embedding of the focus on patient care and wellbeing. I wish to thank all doctors who were involved in development of the compact, in particular Chair of Medical Staff Dr Antonio Grossi and Executive Director of Medical Services Dr Peter Lowthian for their leadership.

The Cabrini Asylum Seeker and Refugee Health Hub in Brunswick has proven to be an important facility helping to meet the healthcare needs of an underserved group in our community. In April 2017, we launched a new specialist mental health service at this centre with the help of the Hon Martin Foley, Victorian Minister for Mental Health. Our new mental health service is a necessary addition.

#### **EXPANSION OF CANCER SERVICES**

In February 2017, Let's Beat Bowel Cancer (a Cabrini health promotion initiative) and the Cabrini Foundation held a charity gala dinner in memory of tennis great Andrew Florent who died from bowel cancer in August 2016. The event was well attended with 500 guests. Let's Beat Bowel

Cancer does excellent work in promoting community knowledge of bowel cancer and funding vital research.

As a Board, we endorsed the purchase of a PET CT scanner and the construction of a temporary radiotherapy facility at Cabrini Malvern. This service will complete the suite of cancer services at Cabrini and is an appropriate development, as by any measure Cabrini is the largest cancer treating hospital in Victoria.

It is a great pleasure for the Board to note the commencement of construction of our new clinical building at Cabrini Malvern, now known as the Gandel Wing in recognition of the generous support of major donors Pauleen and John Gandel AC. The facilities that will be provided in this building will be the best of their kind, and are focused on patient care, comfort and safety. This project is by far the biggest project ever undertaken by Cabrini.

I would like to thank the Cabrini Sisters, the Board, all Cabrini staff, volunteers, accredited medical specialists, donors, consumer representatives and suppliers for your ongoing contributions and support to Cabrini. ●

chief



## A challenging year

By Chief Executive Dr Michael Walsh

→ *It's timely to reflect on the 2016-17 financial year and what has been achieved at Cabrini Health, as we plan for 2017-18 and the years ahead of us.*

### REFLECTION AND RENEWAL

From a Cabrini perspective, 2017 is the centenary of the death of Saint Frances Xavier Cabrini (1850-1917). Cabrini missions around the world have been reviewing and renewing their work in the light of Mother Cabrini's legacy, as well as our present and future challenges. In Melbourne, we have done the same. We have developed our *Cabrini Renew* health strategy, which recognises the shift in healthcare in Australia from acute, institution-based care to ongoing care for older people with chronic conditions living in our community. Our *Cabrini Renew* strategy recognises the need for better integration of health and social support services to enable these people to enjoy the best possible quality of life. We have continued to develop our services at the Cabrini Asylum Seeker and Refugee Health Hub in Brunswick, which we opened in April 2016,



# \$25m

*has been invested in upgrading buildings and equipment*

# 60+

*projects associated with the new Gandel Wing have been carried out*

forming new partnerships along the way. We continued our significant support of Cabrini missions in Africa, specifically St Mary's Hospital in Ethiopia and St Phillips Mission in Swaziland.

### **GROWTH IN ACTIVITY**

With respect to patient, resident and family services, we maintained our levels of activity in most services despite increased competition from both private and public sector health service providers. The overall private health insurance market slowed during 2016-17, with private health insurance stagnant and a trend towards downgrading health cover with customers choosing cheaper insurance options. The safety, quality and patient experience of our services, which is extensively measured internally and externally by regulators and insurers, was maintained and in a number of instances, significantly improved. Surveying of the community, which we have carried out in association with our strategic planning work, shows that Cabrini enjoys a strong reputation for providing high quality healthcare: one built by our excellent doctors and staff. Our palliative care, rehabilitation, homecare and residential aged-care services all had a strong year

from an activity perspective, which reflects that the care they provide is well regarded and meeting the needs of those we serve.

### **AN EMPLOYER OF CHOICE**

From a doctor and staff perspective, Cabrini continues to be an attractive and sought-after place to work. We have maintained and/or strengthened our excellent range of accredited specialist doctors, and a real landmark for the year was the signing of the *Cabrini Medical Compact*, an agreement between our senior medical staff, Cabrini Board and management. On the staff side, we have successfully negotiated a range of enterprise agreements to ensure that our pay and conditions keep pace with staff expectations and industry standards. Importantly, we have put special effort into improving workplace health and safety, in recognition of the importance of providing a safe and positive working environment for our staff.

### **FINANCIAL SUMMARY**

Financially, 2016-17 was a challenging year. On the positive side, we have been able to invest approximately \$25m in upgrading

*After gaining approval to proceed with our new clinical building, the \$120m project has now begun. It will be completed by mid-2019, setting a new standard in patient accommodation.*

buildings and equipment, which improves the environment for patients, staff and doctors. At Cabrini Malvern, some 80 projects associated with the new Gandel Wing were carried out – in particular, preparing medical centre 1 for demolition. This was a great effort by all those involved and those inconvenienced by the changes. This investment in our hospital is funded by our day-to-day health service operations and surpluses arising, and it has been a challenging year on this front. For the financial year just ended at Cabrini, the surplus is smaller than budgeted. We are working to address this trend, so that we can continue to invest, improve and expand our service to the community.

#### **MILESTONES**

Some important milestones occurred on 2016-17. We sold Cabrini Linen Service (CLS) to Spotless Group, and in doing so we outsourced our linen supply service. CLS had 126 staff. CLS managers and our People & Culture team have done a great job in working with them to find new employment. The transaction was complex, and the legal and negotiating team delivered an excellent outcome for Cabrini.

During the year, we gained approval to proceed with our new clinical building on our existing footprint at Cabrini Malvern, facing Wattleree Road at the corner of Isabella Street, and it was officially named the Gandel Wing after the principal donors John Gandel AC and Pauline Gandel. This \$120m project has now begun. It will be completed by mid-2019, setting a new standard in patient accommodation. Finally, Cabrini Technology expanded by acquiring Victorian Home Health Equipment known as VHHE, a supplier of aids and appliances for people who need them, which will enable us to expand in this growing area.

#### **THANK YOU**

Though challenging financially, our staff and doctors achieved a great deal in 2016-17. Thank you all for your ongoing commitment to the Cabrini mission, as we endeavour to maintain and improve our performance during 2017-18. My thanks to our Board led by Richard Rogers, my executive colleagues, donors and volunteers. ●

*Opposite page:  
An image showing the design of the new day oncology unit in the Gandel Wing at Cabrini Malvern.*



## *Your gifts of support*

The Cabrini Foundation helps us to build on our organisation's solid base and pursue new horizons, in order to deliver on Cabrini's mission of providing excellence in all our services. Donations to the Cabrini Foundation are used to directly benefit our patients and make a difference.





Established in 2011, the Cabrini Foundation provides an important link between Cabrini, our donors, supporters and the wider community. Our donors provide financial support through the Cabrini Foundation to invest in new technologies, conduct research throughout Cabrini and to develop new patient services.

Donations to support Cabrini's work come from a range of valued sources – from members of the local community, groups, corporate partners, trusts, foundations and people who leave a legacy or gift in their will. Cabrini is a charitable institution and does not rely on government or church funding. The 2016-17 year was a period of growth for the Cabrini Foundation in which it raised a record \$8.7 million. A highlight was that Cabrini Foundation staff had the opportunity to get to know our donors better, having spent time with them at events and in conversation at our hospitals. It has been an honour and a privilege for Cabrini to honour their valued support and their generous gifts.

### LET'S BEAT BOWEL CANCER GALA DINNER

Let's Beat Bowel Cancer is a Cabrini health promotion initiative established in 2001.

In February 2017, the Cabrini Foundation hosted its first gala event to raise money for Let's Beat Bowel Cancer. Andrew Florent (1970-2016), a former Australian tennis player and a patient of Cabrini, died of bowel cancer aged 46 and the event was held as a tribute to him. His son Ollie spoke of his pride in his father and his gratitude to Cabrini for the treatment his father had received. Held at Melbourne Olympic Park Trust's Margaret Court Arena and featuring four of Melbourne's leading chefs – Jacques Reymond, Ian Curley, Todd Moses and Pierrick Boyer – the event attracted 500 guests. The funds raised went to support LBBC's work in promoting bowel cancer testing across Australia.

### HEARTBEAT CABRINI

In 2017, we celebrated the thirtieth anniversary of the formation of Heartbeat Cabrini. Over this time, the Heartbeat Cabrini Committee and its dedicated volunteers have made an exceptional contribution to cardiac care at Cabrini. More than \$2.2m has been raised for cardiac equipment and facilities including ventilators, bedside monitors, cardiac-theatre monitoring equipment, pacemakers, a hypothermic kit, and a new heart-lung machine.

*Previous page:*

*Patient Pamela Hasek wears a scalp cooling cap, which reduces the likelihood of hair loss, during chemotherapy at Cabrini Malvern.*

*This page:*

*The Let's Beat Bowel Cancer Gala in February 2017 attracted 500 guests.*

*Opposite page:*

*Staff at the former Cabrini Gift Shop. From left: Penny Steele (Manager) with volunteers Patricia Hastings and Laura Fimmel.*



***“I do think there’s a certain obligation, for the ‘haves’ to reach out and see what they can do. There’s no shortage of people who need help; it’s a market that will always exist.”***

**– American businessman and philanthropist  
Chuck Feeney (1931-) who founded Atlantic Philanthropies,  
one of the world’s largest private foundations**

Recently Heartbeat Cabrini has contributed to the purchase of equipment and facilities for Cabrini Malvern including the da Vinci Si HD surgical (robot) system, the hybrid operating theatre, two cardiac catheterisation laboratories and the purchase of a trans-oesophageal echo probe (known as a TOE probe).

Even more importantly, the anniversary represents 30 years of commitment and care for anxious cardiac patients as they undergo treatment. Heartbeat Cabrini volunteers play an important and integral part in the patient experience for people receiving cardiac treatment at Cabrini.

At a celebration held to mark their 30-year milestone, Heartbeat Cabrini announced their commitment to the capital campaign for the new Gandel Wing with a pledge of \$150,000 towards the cardiac unit in the new building. This is a significant contribution and will provide us with an opportunity to mark Heartbeat Cabrini’s support in the future.

#### **SCRIBE PROJECT IN THE EMERGENCY DEPARTMENT**

We are grateful to our generous donors Equity Trustees and the Phyllis Connor Memorial Fund for their support of the



# \$400k

*was raised in our recent tax campaign,  
supporting genetic cancer research*

# \$8.7m

*was raised by the Cabrini Foundation  
during the financial year 2016-17*



#### *Opposite page:*

*From left: Clinical Nurse Consultant Lisa O'Driscoll, Caryl Finnegan (donor, Brendon Finnegan Professional Development Fund) and her daughter Sarah Reilly, and Clinical Educator Chris Quinn pictured at the Cabrini Donor High Tea held in September 2016.*

#### *This page:*

*Medical scribe Will Dunlop enters data on patient records in the Cabrini emergency department.*

medical scribe project underway in the Cabrini Malvern emergency department. Specially trained medical scribes work to record the notes of consultations and treatment plans, freeing doctors to conduct more patient-facing work. Without the help of a medical scribe, for every seven minutes that an emergency department specialist spends with a patient, they spend 53 minutes doing follow-up clerical and computer work.

#### **GRANTS AND SCHOLARSHIPS**

The Cabrini Foundation was proud to facilitate the granting of more than \$300,000 worth of scholarships to the Cabrini Institute in 2016-17. The scholarship program has grown in strength and allows our donors to have a direct impact on the work of the Cabrini Institute. These scholarships provide opportunities for further study, travel to important conferences or events or the opportunity to undertake advanced training. We look forward to expanding the scholarship program over the coming year, including support of some of our international projects

#### **FUNDRAISING CAMPAIGNS**

Our recent tax campaign raised more than \$400,000 to support genetic cancer research being conducted by Associate Professor Gary Richardson OAM and his colleagues. Family cancer clinics provide a service for people who have a family history of cancer, as well as their health professionals. The service is offered to any family members, whether or not they have been diagnosed with cancer. After assessing detailed information, clinics provide genetic counselling and various options for testing and treatment. The success of the campaign has enabled expansion of the clinic and a significant increase in the number of people being tested.

#### **CABRINI GIFT SHOP**

Each year, we celebrate the success of the Cabrini Gift Shop. Opened in 1994, it was intended that the shop would provide a service to patients, families and visitors, as well as generate funds for distribution to disadvantaged groups in the community. However, after many years of trading and support for Cabrini's charitable works, in 2017 the Cabrini Gift Shop was temporarily closed to allow for development of the



new clinical building at Cabrini Malvern now known as the Gandel Wing. Closure of the Cabrini Gift Shop was a sad event for the staff Penny Steele (Manager) and Barbara Summerbell, as well as the volunteers who worked there. There were many memories shared at the volunteer recognition event, and tears as staff and volunteers said their farewells. During its 23 years of operation, the Cabrini Gift Shop generated more than \$1.1m in donations to charitable causes, supporting more than 20 organisations in Melbourne and overseas. Our patients, visitors and staff continue to miss the Cabrini Gift Shop, its eclectic mix of merchandise and friendly service, and look forward to its reopening in the new building.

### ENGAGEMENT WITH THE COMMUNITY

We work closely with the local community and our patients to ensure that they are engaged in our work and part of our fundraising efforts. Highlights this year included:

#### A Royal Affair

The Cabrini Foundation worked with Neville Spielvogel and his family to host

a fundraising event at the iconic Royal Arcade in the centre of Melbourne. In 2014, Mr Spielvogel's wife Diane died at Cabrini Palliative Care in Prahran. As a tribute to the memory of his late wife, Mr Spielvogel conceived the idea of using the arcade as the setting for an operatic adventure featuring David Hobson and hosted by Tiffany Cherry. The event recognised the exceptional support provided to the Spielvogel family by Cabrini Palliative Care.

#### Love Courage Hope

Love Courage Hope was started by a group of charitable people in the local community who established a fund in memory of a family member who had died. After fundraising for many years, the group felt it was time to hand over the fund to Cabrini as the start-up grant for a patient support fund within the Cabrini Foundation. These funds are to be used to support patients who are undergoing financial stress during their cancer treatment. This initiative is already having an impact on patients who have brain tumours as they undergo treatment.

#### Capital campaign

We are most grateful to our benefactors who have begun the capital campaign

*This page:*

*From left: Cabrini Chief Executive Dr Michael Walsh with major donors John Gandel AC and Pauline Gandel.*

*Opposite page:*

*From left: Cabrini Board Chairman Richard Rogers with major donors Ada and Eva Selwyn.*



with significant contributions to the new clinical building. It was wonderful to be able to announce the opening of the Gandel Wing and the naming of the Alan, Ada and Eva Selwyn Emergency Department and was a fitting way to close the financial year.

We are extremely grateful to all those who have already contributed to the campaign with donations and pledges to support the development of these new facilities, which will provide an even better experience for our patients. We look forward to involving the whole of the Cabrini community in our fundraising activities over the next two years. Our future patients and their families will benefit greatly from the generosity of our Cabrini community.

**BEQUESTS**

Gift in Wills play an important part in the growth of Cabrini’s fundraising income. In 2016-17, income from bequests amounted to \$211,287 which was almost 5 per cent of Cabrini Foundation’s income. Cabrini is grateful to all who has contributed to the Cabrini Foundation’s success in this way. ●

**SOURCES OF INCOME 2016-17**

*Cabrini Foundation* \$4,741,195      *Capital Appeal Income* \$3,949,061





*Major donors Gary and Pam Simonds (centre) pictured with their extended family.*

## Home at Cabrini

Pam and Gary Simonds are right at home at Cabrini.

They have been generously supporting Cabrini for more than eight years as major donors, as well as receiving their medical care. Gary refers to the family's generosity as "one of the best investments we ever made".

"Every time we come in here, it's such a friendly hospital and friendly staff, Pam isn't concerned if she's coming in for a small operation or for something more serious," he says. "You don't look forward to going to hospital, but she's certainly not concerned if she's going to Cabrini."

Everywhere the Simonds go at Cabrini, they are warmly greeted by Cabrini staff. It starts in the carpark, continues through their medical consultations and finishes in the Terrace Café where Pam and Gary regularly stop in for a snack.

"We visit all the nurses, we love the food in the Terrace Cafe, we're there quite often," says Pam. "I love the chips in the café. They make the best chips!"

The Simonds family have a number of connections to Cabrini, including their grandson's wife Samantha Simonds, who was a nurse at Cabrini's Brighton and Malvern hospitals, and their two great-grandchildren who were both born at Malvern. This year, the Simonds diversified their donation to support the development of a tablet-based solution for Cabrini's expectant parents. The app called Eve connects the user to a variety of tools to help monitor the wellbeing of both the mother and baby.

When thanked, Gary says it's a pleasure and an investment for the family to support Cabrini. "We've had a bit of success in business, and we do help a lot of organisations – Cabrini is certainly one of them. We do it because of the work they do. We appreciate what they do for the community."

The Simonds family continues to invest in Cabrini's future with their annual commitment to the new clinical building, the Gandel Wing. ●



# 02

## *Your care and experience*

Our mission impels us to provide excellence in all our services, to demonstrate compassion and to reach out to fulfil unmet needs. We aspire to provide an exceptional experience for our patients, residents and their families.





Patient- and family-centred care is care that is organised around the patient and takes into account their particular needs and preferences. To provide this kind of care, we must work in partnership with patients, residents and their families to understand and fulfil the full range of their requirements. At Cabrini, we are committed to partnering with our patients, residents and their families. This commitment supports excellent medical care through effective partnerships and communication.

### **PARTNERING WITH CONSUMERS**

In line with our mission, Cabrini works to partner effectively with our patients, residents and their families to improve our care and services. We do this in a range of ways, for example:

- Seeking patient and family feedback about our care and services through formal mechanisms such as surveys
- Developing patient information together with our consumers
- Involving patients and families in staff education activities such as training and workshops
- Providing staff with training on the principles and importance of patient-

and family-centred care, patient experience and management of feedback

- Appointing consumer representatives to Cabrini committees and working groups where we share information about our performance and involve them in developing plans for service improvements

### **PATIENT, RESIDENT AND FAMILY EXPERIENCE ADVISORY COMMITTEE**

Cabrini's Patient, Resident and Family Experience Advisory Committee (established in 2013), known as PEAC, continued to meet throughout 2016-17. It comprises approximately equal numbers of Cabrini staff and consumers who work to advise the Chief Executive on priority areas and issues where consumer participation is required. In line with the committee's terms of reference, the PEAC's performance is evaluated annually with all members invited to provide their feedback. Chaired by Natalie Sullivan, who is Executive Director of Brighton and Continuing Care and holds executive responsibility for patient experience, the group continued to maintain a high profile

*Previous page:  
Patient Ian Moyle undergoes dialysis treatment.*

*This page:  
Peter Clarke volunteers at Cabrini and provides a consumer perspective on the Cabrini Malvern Emergency Department Management Committee.*

*Opposite page:  
Adelaide Melia, a nurse at Cabrini Palliative Care in Prahran, which has 22 inpatient beds.*



# 54%

*Growth in inpatient palliative, rehabilitation and residential care services*

# 2011

*The year that the Cabrini Patient and Family Register was established*

with Judy Hacker (a founding member of the PEAC) continuing to represent its interests as an invitee on the Cabrini Board of Directors.

#### **PATIENT AND FAMILY REGISTER**

Established in 2011, our Patient and Family Register continues to provide an important feedback loop about our plans and services. It comprises past patients, carers or family members who support us in ensuring our care, services and processes reflect consumer preferences and needs. Members were involved in a range of activities over 2016-17 including review of new and revised patient information, participation in Cabrini events and attendance at committees and working groups designed to enhance the patient experience.

#### **UNDERSTANDING PATIENT EXPERIENCE**

Cabrini values patient, resident and family feedback as it provides us with an opportunity to consider our care and services from a different perspective and helps us to identify areas for improvement. We collect feedback from our consumers in various ways including:



- Formal compliments, complaints and suggestions
- Post-discharge follow-up phone calls to patients who have received care at our hospitals and healthcare facilities
- Seeking feedback from patients and families through surveys
- Holding focus group discussions and workshops
- Conducting patient and family interviews
- Stories of patients' experiences posted on the Patient Opinion website

### CARING FOR THE WHOLE PERSON

Catholic healthcare is distinctive in that it seeks to embrace all dimensions of the human person: physical, psychological, social, emotional and spiritual. It is an expectation that all who work with us will treat our patients, residents and their

families with compassion and respect. However, illness and accidents can be life-changing, and often provoke deep thought and questions. Our pastoral care team strives to accompany people in need of spiritual and emotional care, and supports other clinical staff in this important endeavour. We provide three distinct but related services:

- Faith-based support including a sacramental service for patients and residents who have a religious affiliation. We work collaboratively with ministry teams from various faith groups to provide this care.
- Spiritual and emotional counselling available to patients on a referral basis. This service is provided by our specialist pastoral practitioners.
- Bereavement support for patients and residents facing the end of their life and for families after the death of their loved one. This has been part of our palliative care service for many



years, and in the past 12 months, we have expanded this services so that it is now available in all of our hospitals and healthcare facilities.

At its most basic level, the pastoral response is an embrace of the heart and a commitment to stay with the other person to see the journey through. Our Patient and Resident Services Volunteers offer social and emotional support through a range of extra services provided in our wards and public-facing departments at all of our campuses and in the community. It might be by visiting patients who are lonely, offering hand and foot massage during chemotherapy treatment, accompanying people from one department to another so they find their way more easily or providing a warm blanket to make their experience in our emergency department more comfortable. These small gestures offered with compassion can make the busy hospital environment less frightening. This makes a difference to our patients, with

many of our volunteers having joined our team because of the care they received from a volunteer when they themselves were unwell.

### CONTINUING CARE

Our services grouped together under the banner of continuing care comprise our rehabilitation, residential and aged-care services, community-based services, allied health and ambulatory services. During 2016-17, we have worked to consolidate inpatient service delivery. At the same time, we have worked on expansion of our community-based services, which provide care to patients, and support and education to families. We have grown our inpatient rehabilitation, palliative and residential care services. Overall, this group of services experienced 54 per cent more activity in 2016-17 than last year, with most growth having occurred in our out-of-hospital services, specifically chronic disease, community dementia care and outpatient rehabilitation care.

*Above:  
Graduate midwife Calida Fifer (left) was named Student Midwife of the Year by the Australian College of Midwives. She is pictured with former Cabrini Maternity Manager Kym Harrison.*



A major focus throughout the year was to grow and commercialise our community clinical programs through multi-sectorial partnerships enabling provision of Cabrini's community services to our patients and to the clients of our partner organisations.

The escalating pressure on hospital beds, an older population with more complex health needs, increasing healthcare costs, and the preference for people to remain living in their own homes necessitates the development of new approaches to help address these challenges.

Highlights in 2016-17 include the following:

- Continued growth and development of a private rehabilitation therapy-in-the-home service with a 91 per cent increase and encouraging feedback from patients who value this contemporary service
- Introduction of a lymphoedema clinic at Cabrini Brighton in April 2017 designed to provide necessary care for inpatients and outpatients who experience this condition related to cancer treatment
- Dementia is a leading cause in the burden of disease in our community: it is the second-leading cause in men 85 years and older, and the leading cause in women aged 85 years and older. With the generous support a donation from the Merrin Foundation, we have developed a unique multidisciplinary community service to provide dementia and cognition care. A memory clinic is based at Cabrini Brighton with more than 100 clients enrolled in the program. Four in ten consultations take place in patients' homes.
- A 30 per cent growth in activity in our chronic disease program with visits to heart failure and respiratory patients having increased 54 per cent and 40 per cent respectively on last year
- Continued development of community partnerships and better engagement strategies with Villa Maria Catholic Homes, our community health centres in south-eastern Melbourne, the South East Melbourne Primary Health Network and primary care agencies
- Our residential aged-care home in Ashwood met all of the Australian Government Aged Care Quality Agency's 44 accreditation standards
- We provided 7109 palliative homecare visits, which was 948 more than last year

*This page:  
Nurse Manager Clara Officer  
leads a discussion with staff of the  
paediatric ward.*

***We are expanding community care options for our patients by engaging with our partner organisations such as Villa Maria Catholic Homes.***

- Activity in the Cabrini Allied Health Centre grew by 47 per cent

**EFFECTIVE PARTNERSHIPS AND COLLABORATION**

We have worked to identify community partnerships and increase engagement with partners in our geographical catchment, in order to expand community care options for our patients – many of whom have complex health conditions, in particular chronic conditions such as diabetes. These conditions require primary (e.g. general practice), acute (e.g. hospital) and community health providers to collaborate effectively, as these patients have multiple touchpoints and benefit from integration of care and services. It is becoming increasingly important for organisations to work together on service planning and share their knowledge to help improve the experiences of people moving between various parts of the healthcare system. With the importance of primary and community care providers in maintaining healthy communities, we have established collaborative partnerships with an emphasis on extending engagement beyond the acute or hospital sector.

Throughout 2016-17, our clinical

community partnerships have grown to enhance our ambulatory services to third parties and include the newly merged Villa Maria Catholic Homes (VMCH), the South East Melbourne Primary Health Network and the Southern Melbourne Primary Care Partnership. These cross-sector collaborative partnerships have resulted in the establishment of transitional care and restorative programs, fee-for-service allied health service provision, input to catchment-planning and service-coordination programs, a commissioned primary care program and ambulatory services satellite opportunities. A particular highlight is the establishment of dementia and cognition clinic-based and community services to VMCH homecare package clients; this new service fulfills a gap in care not addressed by public or private providers nationally. In aged-care, the change to consumer-directed homecare packages mean that clients can choose to move to their home-based care to their provider of choice.

**New community cognition and dementia service**

The Cabrini Community Cognition and Dementia Service was established in October 2016 with the help of the Merrin Foundation's philanthropic

**91%**

*Growth in private therapy-in-the-home services*

**7109**

*Palliative care home visits*

***Our new community cognition and dementia service has been welcomed, providing care for patients and support for their families.***

support, providing timely access, expert assessment and diagnosis, therapy, management and ongoing care for people who have dementia, as well as support for their carers and families. This unique, multidisciplinary service based at Cabrini Brighton is helping to fulfil an unmet need in the community brought about by an ageing population and increasing prevalence of dementia in the community. By 2050, it is predicted that more than one million people will have this disease and require ongoing specialised care and management, as well as support for families and carers. The potential lost productivity of people suffering dementia and their carers was estimated to be \$5.5bn in 2016. This comprised \$3.2bn (or 59 per cent) foregone earnings by carers (source: National Centre for Social and Economic Modelling for Alzheimer's Australia *Economic Cost of Dementia in Australia 2016-56*).

While there are many diagnostic services available for dementia, ongoing management teams are rare and none offer the full range of clinical and social elements provided by Cabrini's new service. Our person-centred care is supported by clinical practice guidelines, close collaboration with consultant geriatricians, and a full complement of

allied health and nursing staff to ensure the needs of the patient and their family are met. Four in ten consultations have taken place in the community rather than hospital thereby improving access. The end-to-end service supports patients and their families from pre-diagnosis to the end of life – working closely with the patient's GP, medical specialists and providers of services/care. The service reached almost 100 patients in its first eight months of operation, delivered eight clinical education sessions and six community health promotion activities. We forged a partnership with Villa Maria Catholic Homes to become its expert provider of dementia assessment, management and training.

In response to the many enquiries we have received from those with memory concerns who are self-referring and families seeking education about their relative's or friend's condition, we have offered free community seminars at partner organisations such as Alfred Health, Eastern Health, Jewish Care, Mecwacare, St Andrews Anglican Church and Villa Maria Catholic Homes, as well as Rotary Clubs and general practices.

*Opposite page:  
Ashly Mattiske, baby Ruby and  
Cabrini's Director of Maternity  
Dr Danielle Wilkins.*



# 85

People aged 85 years and older make up 45 per cent of patient beddays at Cabrini Rehabilitation

# 600

Visits each month to Cabrini's general practice in Caulfield South

### Villa Maria Catholic Homes

Cabrini's partnership with Villa Maria Catholic Homes (VMCH) is governed by a revised *memorandum of understanding* to reflect the ongoing collaboration and expanded services. A steering committee to oversee the partnership and a service agreement will be effective in 2017-18. Cabrini has partnered with VMCH to provide dementia and cognition care and coordination to VMCH clients in their homes for clients on homecare packages in the south-eastern part of Melbourne. We began providing this service in August 2016. Another milestone achieved through our partnership with VMCH is the launch of a dementia consultancy and management service for the people living in the Hume region of Victoria. This will extend VMCH's metropolitan program to ensure that clients have access to specialist medical consultation and Cabrini dementia specialist allied health services such as dietetics, speech and occupational therapy.

Our short-term restorative care programs enable older Victorians to remain living safely in their own homes following a hospital stay, and avoid entering into residential aged-care prematurely. Participants receive appropriate support



*Above:  
Paediatric patient Elise Harrison,  
with her father Andrew, has a snack  
after her procedure.*

***Cabrini's short-term restorative care programs enable older Victorians to live safely in their own homes following a hospital stay, and avoid entering into residential aged care prematurely.***

services from Cabrini and VMCH, which add to their quality of life. The first of these new federally funded programs awarded to Cabrini and VMCH in 2016-17 comprises community rehabilitation programs in the Hume region, which help older people to improve their function, independence and quality of life. Their needs may be the result of a fall or physical deterioration following a hospital stay. Through this eight-week, multidisciplinary program we have been able to support older people in maintaining their independence.

Throughout the year, Cabrini has provided clinical expertise on dementia care to VMCH clinical staff and worked with the management team in establishing education resources and video presentations for teams in metropolitan and regional areas.

**Southern Melbourne  
Primary Care Partnership**

In 2016-17, Cabrini continued to work with the Southern Melbourne Primary Care Partnership (PCP). Its role is to provide ongoing opportunities to implement State Government health and social policy at the local level. The activities of the PCP are all underpinned by partnerships/relationships to assist with integrated

approaches to providing services in the community setting, as well as building capacity through collaboration and service integration. One of 30 primary care partnerships in Victoria, the Southern Melbourne PCP services the five local government areas of Bayside, Glen Eira, Kingston, Port Phillip and Stonnington. Cabrini remains the only private health service on the PCP and is included as one of two health services represented at the executive level.

The Victorian Department of Health and Human Services provides the funding to Southern Melbourne PCP for services in the areas of partnership development, service coordination, integrated health promotion and integrated chronic-disease management, prevention planning and intervention. There has been representation and input from the Cabrini ambulatory team to the service coordination working group – specifically the chronic disease community program and more recently, the diabetes project linking GPs to community health services. Cabrini staff were engaged in the catchment planning process across the five LGAs in the lead-up to the PCP strategic directions plan for 2017-21. Cabrini contributes at the governance level by chairing the Southern Melbourne

**89%**

*Of patients who attended Cabrini Rehabilitation (Glenhuntly Road campus) returned to their usual home*

**2012**

*Babies born at Cabrini Malvern in 2016-17*



PCP executive and chairing the strategy and performance sub-committee.

#### **South East Melbourne Primary Health Network (PHN)**

The primary health networks were established nationally to develop initiatives designed to prevent unnecessary hospitalisation, improve outcomes against national health priorities, ensure more efficient delivery of primary care for patients and improve capacity for GPs to contribute to sustainable local health solutions. The South East Melbourne PHN is funded by the Commonwealth Department of Health and covers a broad geographical area from the Mornington Peninsula to Port Melbourne and Dandenong. It covers 1.2 million people and almost 1000 GPs.

As one of six Primary Health Networks in Victoria and 31 nationally, the South East Melbourne PHN aims to deliver improved access to primary healthcare and better coordination with hospitals, and ultimately better integrate the health system at a regional/catchment level. As it transitioned from a service-provider model to a commissioning model in 2016-17, there has been wide stakeholder consultation recognising that primary

# 83%

*At least 83 per cent of Cabrini Rehabilitation patients would recommend us to family and friends*

# 25%

*Growth in our chronic disease program*



health (e.g. general practice) is typically the first and main contact with the healthcare system. Strategically, Cabrini has contributed to primary health advisory groups and future considerations on the model and funding of primary health.

Our Cabrini General Practice in the LGA of Glen Eira was successful in tendering for a care coordination grant. The purpose is to build capacity within our practice to support care coordination for patients who have chronic and complex conditions. The focus of this role will be assessment, care planning, education and building self-management capacity while assisting with service navigation and appropriate escalation of care needs. With our well established chronic disease, allied health, community palliative care and newly developed community dementia programs, we are well placed to assist both our GPs and patients with a care plan, coordinate care across the different settings and provide linkages to other services where necessary. With diabetes the most prevalent condition in Glen Eira that leads to hospital admissions, we consider it a priority. Therefore we have established a weekly Diabetes Nurse Educator service based at the practice to support care coordination, our patients and GPs.

### **DEVELOPMENTS IN REHABILITATION CARE**

Located in Elsternwick, Cabrini Rehabilitation provides care at two hospitals sites: Hopetoun Street and Glenhuntly Road. Inpatient services comprise specialist orthopaedic, neurological, respiratory and cardiac rehabilitation programs, as well as reconditioning and pain management. Patients are generally admitted after a period of acute hospitalisation, following surgery or after an acute health episode such as a stroke.

This year has seen a continuing trend in admission of patients who are 85 years and older. This group makes up 45 per cent of all patient days, an increase of 40 per cent compared with three years ago. This is in line with the most recent, hospital utilisation data. That is, people aged 85 and older comprise 2 per cent of the population and account for 13 per cent of hospital patient days. As this older, more complex patient often presents with several underlying health conditions or a pre-existing disability, they are at greater risk of falls while in hospital, developing delirium or becoming physically deconditioned. We have responded by introducing improvements to ensure

*Opposite page:  
Kirby Young is Program Director,  
Acute, Allied Health and Ambulatory  
Services. He is pictured being  
interviewed by WIN News at the  
announcement of new programs in  
the Hume region.*

*This page:  
Dr Merlina Sulisito, a palliative care  
doctor, at work at Cabrini Palliative  
Care in Prahran.*



patient safety such as more frequent staff assessment and rounding per shift, a new paging-system alert for at-risk patients and a new identification tool to assist staff in recognising patients who have impaired cognition that may affect their ability to communicate effectively.

A key improvement in 2016-17 was the implementation of the blue tray project: a meal assistance identification program. Our nursing, domestic services and allied health staff are involved in providing this necessary help to patients. Adopted at our Brighton and Elsternwick hospitals, it is designed to better identify and support patients who need assistance during mealtimes. For example, meal set-up (preparation of meals and positioning of

items, opening packets and removing lids), supervision and feeding assistance.

### **Benchmarking**

We submit six-monthly inpatient data to the Australasian Rehabilitation Outcomes Centre sponsored by the Australasian Faculty of Rehabilitation Medicine. It analyses our patient outcome data and benchmarks our performance against like services across Australasia. The most recent results demonstrate that our patients are on average older than those of our peers – approximately nine years older (Glenhuntly Road) site and three years older (Hopetoun Street). Despite this:

- Of our Glenhuntly Road patients, most

*Above:  
Dietitian Jo White at meal service  
time, Cabrini Malvern.*



(89 per cent) returned to their usual accommodation and, when compared with peer services, 36 per cent of patients gained greater function and had a shorter length of hospital stay than the national average

- Of our Hopetoun Street patients, 96 per cent returned to their usual accommodation; and 39 per cent gained greater function and had a shorter length of hospital stay than the national average

Continuous inpatient surveys conducted during 2016-17 have shown Cabrini Rehabilitation patients are highly likely to recommend us to their family and friends, with scores ranging from 83

to 100 per cent. In response to patient and family feedback, a number of improvements were made to our facilities and environment, particularly at our Glenhuntly Road campus where patient rooms were reconfigured in October 2016. This has enabled an increase in the number of single and double rooms, as well as the proportion of rooms that have private ensuite bathrooms. Other improvements at this hospital have included:

- delivery of new patient chairs in all patient rooms, as well as providing dining tables and chairs in some double and single rooms
- completion of a quiet room for patients, families and visitors

#### **DEVELOPMENTS IN ALLIED HEALTH AND AMBULATORY CARE**

Our allied health and ambulatory services staff deliver patient care and services at all Cabrini's clinical sites, as well as community settings including patients' homes. The continuing development of an employed and integrated allied health service and workforce at Cabrini is essential in ensuring ongoing access to appropriately skilled clinicians. Ambulatory healthcare services have greater capacity to respond to and meet people's healthcare needs, prevent deterioration and avoid unnecessary hospital admissions. Ambulatory services have been developed and implemented across public and private healthcare



providers across Victoria for more than a decade. Cabrini acknowledges both the patient and organisational benefits of providing this model of healthcare.

Our ambulatory services encompass a wide variety of services, providing care for people outside of the traditional walls of a hospital. It incorporates ambulatory rehabilitation, where care is provided in an outpatient or home-based environment, and chronic-disease management, where care and support are provided across the continuum of care. There was considerable growth across these areas in 2016-17.

Our allied health service comprises: dietetics, exercise physiology, music therapy, occupational therapy, physiotherapy, psychology, social work and speech pathology working within inpatient wards and associated areas. Throughout 2016-17, our inpatient allied health service continued to meet demand at our acute hospitals (in Brighton, Malvern and Prahran), Cabrini Rehabilitation, Cabrini Residential Aged Care and our hospital-in-the-home program with 26,052 referrals and 106,373 attendances to patients.

Our ambulatory service comprises: chronic disease, outpatient rehabilitation, therapy in the home, allied health

outpatient programs, home-based rehabilitation (i.e. therapy in the home), and the dementia and cognition service. This service employs nursing and allied health specialists to provide clinical care to patients in outpatient clinics such as the Cabrini Allied Health Centre and community-based settings including patient's homes or residential facility.

In 2016-17, we began seeing more than 2000 new people diagnosed with chronic conditions such as coronary artery disease, chronic heart failure, chronic respiratory disease, diabetes, dementia and primary brain tumours. We provided more than 10,000 face-to-face occasions of service to patients, an increase of 25 per cent on last year.

Our ambulatory outpatient service, which provides multidisciplinary rehabilitation care under the guidance of a rehabilitation physician in both the outpatient and home environment, provided 33,000 allied health sessions, which was an increase of 17 per cent more than last year.

#### **Cabrini Allied Health Centre**

This centre, which provides primary and continuing allied health care for the community, experienced growth in activity of 47 per cent. Philanthropic

*This page:  
Hydrotherapy is provided at Cabrini  
Rehabilitation's Hopetoun Street and  
Glenhuntly Road campuses.*

*The goal of palliative care is to improve quality of life for patients who have a life-limiting illness, as well as support their loved ones.*

support enabled the development of a lymphoedema service, which provides monitoring for people at risk of developing this condition after surgery, and treatment. The service is offered at our Brighton and Malvern hospitals. Other new services introduced over 2016-17 include occupational therapy driving assessments, respiratory physiotherapy, Pilates and a new program for people suffering hip and knee osteoarthritis called GLA:D. GLA:D stands for Good life with osteoarthritis: Denmark. The Cabrini Allied Health Centre was first in Australia to launch this evidence-based exercise and education program designed to reduce pain and improve quality of life.

#### **MEETING NEEDS FOR PALLIATIVE CARE**

Cabrini Palliative Care based at Prahran, which was established in 1999, is unique in that it is Victoria's only private palliative care service. The goal of palliative care is to improve quality of life for patients and their loved ones by providing holistic care that addresses their physical, emotional, social, cultural and spiritual needs. We work to help patients and their families live as well as possible and support them at their end of their lives. Cabrini Palliative

Care continues to grow with an increase in the number and complexity of patients and referrals throughout our health service. Referral to this service is open to all patients who have a life-limiting illness. The past year has seen patients admitted for symptom management, medication rotation and discharge planning in preparation for home. Our patients have benefited from greater involvement of our allied health service in mobility support, home set-up and provision of equipment to support patients remaining in their own homes. Our inpatient survey continued to demonstrate a high level of satisfaction among patients and carers against dimensions of patient-centred care, interactions with staff, hospital environment and hotel (i.e. food and domestic) services.

Palliative homecare is increasingly popular reflecting people's wishes to remain in their own homes and communities where possible. Approximately 200 patients are enrolled under our homecare program. Our multidisciplinary team continued to develop with more allied health services provided in both inpatient and community settings. We provided 7109 palliative community visits in 2016-17, which was 948 more than last year. With the introduction of palliative care medical consultant

# 6

*five-star food awards won by Cabrini Residential Aged Care in Ashwood, the latest being the City of Monash Golden Plate Award in March 2017*

# 200

*Patients enrolled in our palliative homecare program*



community visits, we have improved access for patients whose symptoms cannot be managed by a general practitioner and who are too unwell to attend our supportive care clinic.

In February 2017, we implemented a shared-care model of palliative home care to better support our patients who wish to stay at home. Since then, we have provided 58 allied health visits: 39 involved occupational therapy, 13 were for physiotherapy, three related to social work support, two were for speech pathology and one involved dietary advice. We estimate the visits cost more than \$6000. As this service is not covered by health insurance funds, we provide it free to our patients.

### **DEVELOPMENTS IN OUR RESIDENTIAL AGED-CARE SERVICES**

Cabrini Residential Aged Care in Ashwood remains a popular home for elderly people who can no longer live in their own homes. There is a trend towards people staying in their own homes supported by homecare packages and entering permanent residential care later in life i.e. in their late 80s or 90s. This is a significant shift whereby residents are

often entering Cabrini Residential Aged Care after an acute-care admission and with more complex healthcare needs. Our special needs unit is in high demand given the need for dementia-specific care and services.

In November 2016, we underwent a robust three-day audit conducted by the Australian Government Aged Care Quality Agency. Cabrini Residential Aged Care satisfied all 44 expected outcomes in:

- management systems, staffing, organisational development
- health and personal care
- care recipient lifestyle
- physical environment

In an unannounced visit by the Australian Government Aged Care Quality Agency in March 2017, Cabrini Residential Aged Care was found compliant with all assessed expected outcomes.

Following an assessment in March 2017, Cabrini Residential Aged Care in Ashwood earned a City of Monash Golden Plate Award. These awards recognise businesses throughout the Monash municipality that provide a high standard of food safety. Food proprietors are awarded up to five stars, based on their Annual Golden

*This page:*

*From left: Kieran Meade from Dance, Be In It and resident Win Harris at Cabrini Residential Aged Care in Ashwood.*

*Opposite page:*

*Registrar Dr Ben Land (far right) treats young Levi Huberman (centre, pictured with his mother Jessica) in the emergency department at Cabrini Malvern.*



Plate food-safety assessment carried out by Council's Environmental Health Officers. It is not the first time Cabrini Residential Aged Care Ashwood has been commended for its meal service. The team has been honoured in the City of Monash Golden Plate Awards on six occasions: in 2011, 2012, 2014, 2015, and 2016 and again in 2017. To achieve five stars, premises have to meet strict criteria i.e. achieve a score of 93 per cent or higher in their assessment, have a fully implemented food-safety program, no justified food-related complaints in the previous year and no serious food-safety risks during inspection.

### **Life and lifestyle**

Our initiatives support the physical, emotional, spiritual and social needs of our residents, their families, representatives and our staff.

In 2016-17, we employed a registered music therapist to work with our residents and optimise their wellbeing and quality of life. Registered music therapists are tertiary trained allied healthcare professionals bound by a code of ethics. Music therapy in aged care provides a range of benefits such as emotional and spiritual wellbeing, prevention of social isolation (especially for bed-bound or

room-bound people), reduction and/or prevention of anxiety and low mood, and opportunities for creative self-expression or communication. During a music therapy session, a resident may engage in singing, instrument playing, reminiscence, music therapy based discussion, music relaxation and songwriting. Feedback from residents, family members and staff about the service has been positive.

We have introduced a new inhouse hair and beauty service for residents. Open most weekdays, the dedicated salon service has proven popular among residents, visiting family members and staff. Weekend appointments have been made available for residents who need personal services ahead of attending a special event or celebration. ●

## A second family

Nurse Manager Adriana Owusu-Afriyie has her hands full at Cabrini Residential Aged Care and would not have it any other way. She manages two units and is responsible for 60 residents, 50 staff and 120 family members and friends of residents.

**B**orn in West Africa, Adriana arrived in Australia in 1996. Living in the local neighbourhood, she was drawn to Cabrini Residential Aged Care. When passing by with her children (now adults aged between 17 and 27 years), she went inside to enquire about the possibility of volunteer work. Before long, she had completed her training to be a personal care attendant, joined the staff and begun her career at Cabrini, which has spanned almost 11 years and most of Cabrini's hospitals and healthcare facilities. "When I first came here, I had no qualifications or experience but they believed in me," she said. "I am proud to wear the Cabrini uniform and value the support they have given to me personally."

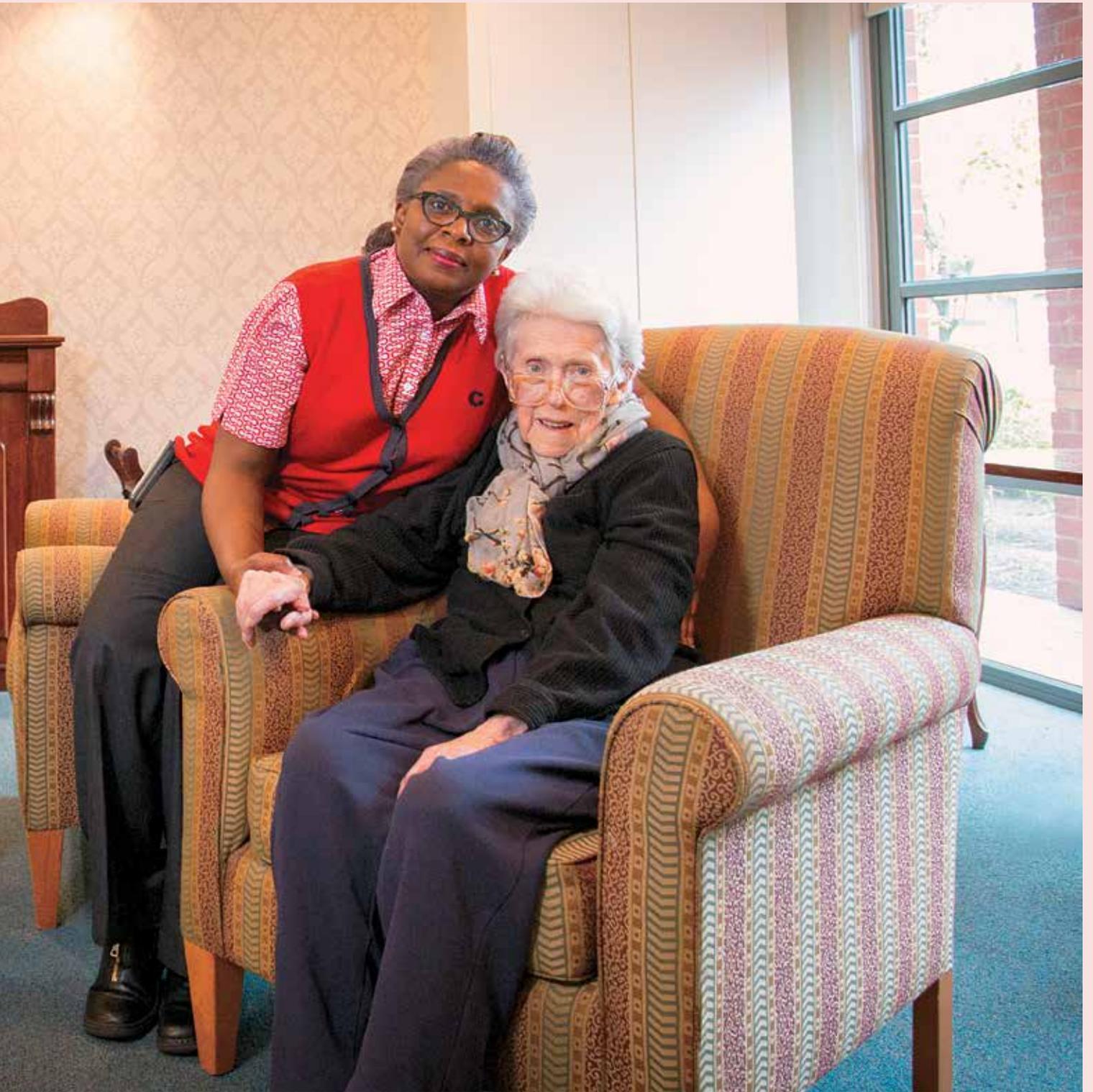
Adriana qualified as an enrolled nurse and then as a registered nurse. She obtained the Graduate Diploma in Palliative Care in Aged Care and is currently contemplating a Master degree and a PhD, in order to gain more knowledge about aged care. She and her team earned a Mission Partners Award (2014), designed to acknowledge and celebrate staff who ensure our mission and values are lived and express who we are as an organisation. She is passionate about her work in aged-care. "I love what I am doing and want to give it my 100 per cent best," she said. "This is home to our residents, we give them love and support to adjust to their new situation and we form a second family to them," she said.

Adriana believes that the best thing about working as a nurse in aged-care is the personal connection staff have with residents. "They call me by my name – the personal bond and the relationship we form is very special – and I love the interaction we have with them."

The hardest part is when residents die. "Losing them is really hard, we miss them and their families; it is a challenge for us and very sad, but it is part of living." ●



*Nurse Manager Adriana Owusu-Afriyie with resident Shirley Taylor.*



# 03

## *Our services*

We strive to meet the needs of our community and stakeholders as a modern, responsive provider of health and health-related services.





During 2016-17, we made significant progress in upgrading our healthcare facilities and equipment, in order to provide the best possible care to our patients, residents and their families, explore new service opportunities and strengthen our community benefit program. While all of our services are designed to deliver benefits to the community, our community benefit program helps to make visible our commitment to be a good corporate citizen beyond the general expectation of a private healthcare service. In this way, we seek to demonstrate transparency and accountability as a Catholic charitable institution.

Cabrini Health Limited is a Catholic, charitable institution owned by the Missionary Sisters of the Sacred Heart of Jesus, also known as the Cabrini Sisters. Although we are the only organisation operated by the Cabrini Sisters in Australia, we are part of an international network of health, education, social service and pastoral agencies spanning 17 countries and serving some of the poorest people in the world. As well as providing high quality healthcare, we seek to create broad community benefit through activities we undertake in direct response to an identified community need and where

the primary goal is not to effect a direct economic benefit to the organisation. The nine domains of the program are mission-driven services, clinical education and research, advocacy, health outreach, health promotion, social outreach, community engagement, environmental stewardship and staff support. For more information about our community benefit activities, please refer to the *Cabrini Community Benefit Report 2016-17* available on the Cabrini website [www.cabrini.com.au](http://www.cabrini.com.au), which has been published as a separate report this year.

## IMPROVEMENTS TO MEDICAL FACILITIES

### Developments at Cabrini Brighton

Cabrini Brighton has a total of 141 beds of which 91 are inpatient beds. The medical, nursing and allied health staff at this hospital provide care for inpatients who have surgical, medical and oncology needs. The hospital encompasses a popular day oncology unit, five surgical theatres, an onsite Cabrini Medical Imaging service, pathology service, specialist sleep clinic and the base for Brightways: A Cabrini Breast Cancer Service which provides multidisciplinary

*Previous page:*

*Dr Antonio Grossi is an anaesthetist and Chair of Medical Staff at Cabrini. He was instrumental in development of the Cabrini Medical Staff Compact.*

*This page:*

*Cabrini Medical Imaging nurse Jessica Wilson attends to a patient undergoing an MRI.*

*Opposite page:*

*Children enjoy the hi-tech special effects in the new paediatric ward at Cabrini Malvern.*



care for patients who have breast cancer. In April 2017, a high dependency unit was established at the hospital. In its first four months of operation, 40 patients were admitted for specialised care. It enables us to admit patients who have more complex needs (such as cardiac monitoring) but do not require coronary or intensive care. New monitors installed at the unit were supported by a donation through the Cabrini Foundation.

Other improvements at this hospital in 2016-17 include:

- Installation of a new MRI machine in May 2016
- Installation of high-tech sleep clinic assessment monitoring equipment in January 2017
- Addition of an inpatient and outpatient lymphoedema clinic to support patients who develop this condition as a result of surgery or cancer treatment
- Introduction of an echocardiography service
- Introduction of an outpatient multidisciplinary clinic for dementia and cognition care, as well outpatient dietetics, physiotherapy and diabetic education clinics

# 50

*Kilowatts of new solar panels installed at Cabrini*

# 11,767

*Number of cardio-respiratory episodes of care across our health services*



Further developments include:

- Introduction of a 24-hour cardiologist roster, which began in January 2017
- Implementation of a psychiatric liaison service to assist our accredited medical practitioners with the care of inpatients who need additional psychiatric support
- Introduction of a new breast care nurse role sponsored by the McGrath Foundation in response to the needs of patients who have metastatic (or secondary) breast cancer

#### Developments at Cabrini Malvern

It has been a year of great movement at Cabrini Malvern in preparation for the

demolition of the old medical consulting centre on Wattleree Road at the corner of Isabella Street to allow construction of the new Gandel Wing. More than 80 individual projects were required to move and reaccommodate staff and doctors, with 200 people relocated. Areas of the existing hospital were repurposed to create five new medical consulting suites to fulfil our commitment to provide consulting space for doctors displaced from the building being demolished.

- In November 2017, we opened a **new paediatric ward**. Our new ward for children and teenagers employs innovative design features to ensure it is technologically advanced and autism friendly.

- We restructured our cardiac services, closing the former coronary care unit and relocating acute care for cardiac patients to an expanded ward on the southern end of the first floor
- A new, modern **cardiac consulting suite** (suite 17) was created in part of the area previously occupied by the old Cabrini Children's Centre and now accommodates a group of cardiologists and cardiothoracic surgeons, as well as our echocardiogram service.
- We closed the **Cabrini Gift Shop** previously located on the ground floor of the hospital to make way for development of the new building, where it will eventually be relocated.



- We upgraded the popular **Terrace Café** on the ground floor of Cabrini, added a kiosk-style gift shop facility there and introduced a new satellite service **Terrace To Go** in the foyer of the theatre block.
- A new **patient discharge lounge** was constructed, as well as a new cashiers' area
- We upgraded the **patient and visitor carpark entrance** on Coonil Crescent to introduce two lanes inbound in the morning and two lanes outbound in the afternoon and allow for the closure of the Isabella Street entrance

Further upgrades undertaken or supervised by Cabrini's engineering

services department in 2016-17 included:

- Installation of a further 50 kilowatts of solar panels
- Replacement program for the nurse call systems all sites
- Upgrades to carpark lighting (LED) Brighton
- Facade rejuvenation, LED lighting upgrade and kitchen airconditioning upgrade at Cabrini Residential Aged Care in Ashwood
- Replacement of the pool heating system at Cabrini Rehabilitation (both campuses)
- LED lighting upgrade at Cabrini Palliative Care in Prahran

*Above:*

*Nurses Helena Hayes and Deb Ruddy on the job at Cabrini Brighton.*



# 2019

*When the new Gandel Wing at Cabrini Malvern will open*

# 30

*Patients per day will be treated in the new radiation oncology service at Cabrini Malvern*

## **BETTER CARE FOR OLDER PATIENTS**

We have an ever increasing number of frail, elderly patients which is indicative of societal trends and our particular demographic. Cabrini Malvern's new Gandel Wing will have a floor dedicated to their care when it opens in 2019. In the meantime, we have established a project to improve the care we currently provide to this often vulnerable group. Creation of a multidisciplinary meeting room, formalisation of ward rounds and multidisciplinary team meetings, documentation and better integration of allied health services are some of the outcomes so far.

## **DEVELOPMENTS IN EMERGENCY CARE**

In 2016-17, our emergency department (ED) at Cabrini Malvern brought the medical scribe concept from the USA to Australia for the first time and is testing it critically. A medical scribe is a trained assistant for a doctor: they stand with the doctor during consultations, documenting it and arranging all that the patient requires (e.g. diagnostic tests, consultations, procedures and admission to an inpatient hospital bed if necessary). It is not widely known that



an emergency doctor spends almost half of their time (48 per cent) during a clinical shift typing at a computer instead of seeing patients. The aim of the scribe is to free the doctor from administrative tasks and allow them to spend more time with their patients. We tested the role in a pilot with an American scribe and then conducted an extended pilot and training. Ultimately, our aim is to improve access to emergency doctors for patients who are acutely unwell.

## INTRODUCTION OF RADIATION THERAPY

Radiation therapy is an integral part of treatment for many cancers and is soon to become available at Cabrini. In June 2017, Cabrini and GenesisCare announced a partnership to deliver a new, technologically advanced radiotherapy service to offer patients comprehensive cancer care at Cabrini, increasing access to this important form of cancer treatment. GenesisCare began construction of an interim service facility in April 2017 within the grounds of Cabrini Malvern. Once complete, it is expected that some 30 patients per day will be treated there.

The new radiation oncology service complements the hospital's existing suite

of diagnostic, surgical and medical cancer care. A linear accelerator, which drives the radiation beams, will be housed in a bunker, surrounded by one-metre thick walls. Once the Gandel Wing is completed in 2019, a permanent radiation therapy service will open with two linear accelerators. The introduction of onsite radiotherapy at Cabrini Malvern will mean that Cabrini patients will no longer need to travel by medical transport or ambulance to receive this treatment and outpatients can receive complete cancer care at Cabrini. Another addition to cancer treatment at Cabrini will be a PET scanner (PET stands for positron emission tomography) used predominantly to detect cancer. It will be installed at Cabrini Medical Imaging at Cabrini Malvern. Both the radiotherapy and the PET scanner will be the culmination of Cabrini's plans to provide a comprehensive cancer centre serving both Cabrini's oncology patients and their families, as well as the wider community.

## CLINICAL AND SUPPORT SERVICES

### Cabrini Medical Imaging

During 2016-17, we provided a total of 62,224 inpatient episodes of medical imaging treatment and a total of 90,242

*Opposite page:  
New patient discharge lounge on the ground floor at Cabrini Malvern.*

*This page:  
New carpark entrance at Cabrini Malvern. The former entrance on Isabella Street is now permanently closed.*



Above:  
Madeline Tasevski and cousin  
Emily at Cabrini Brighton's  
paediatric sleep service.

## ***Cabrini Medical Imaging performed a record 152,466 medical imaging procedures in 2016-17, continuing a strong trend in growth.***

outpatient episodes across the modalities at our services located at our Brighton and Malvern hospitals. The range of services includes general x-ray, ultrasound, CT scan, mammography, nuclear medicine, and magnetic resonance imaging (MRI), as well as a range of interventional services. In 2016-17, Cabrini Medical Imaging completed full integration into the I-Med PACs system, which provides us with secure long-term image storage and support. Referrers and radiologists are now able to review images not just obtained at Cabrini but at I-Med sites across Australia supporting the continuum of care for our patients. We are planning for the installation of a PET/CT and the replacement of the general CT units with new units incorporating dedicated cardiac and vascular software. During the year, we incorporated the Breastscreen service into our portfolio.

### **Cabrini Pathology**

In 2016-17, Cabrini Pathology performed 150,952 inpatient episodes of care and 49,103 outpatient episodes across our health service. Cabrini Pathology offers a comprehensive range of services including microbiology, haematology, biochemistry, histology, cytology, bloodbank serology, immunology and pathology collection

centres. Some of the highlights for the year were:

- A Virtuo blood culture system installed December 2016
- Dragon voice recognition software in use from January 2017, implemented to improve turnaround times for pathologist reporting
- Introduction of Methotrexate testing inhouse from February 2017, greatly improving turnaround time for patient results and reducing costs
- Expansion of our pathology collection home visit service to cover a wider area and more patients from March 2017
- We completed our NATA accreditation successfully in October 2016

Cabrini Pathology provides outreach cytology services in support of Modilon Hospital in Madang, Papua New Guinea with 220 cases reported.

### **Cabrini Cardio-respiratory service**

In 2016-17, we performed 2622 episodes of inpatient care and 9145 outpatient episodes across our health service. In 2017-18, we will expand our service to Cabrini Brighton.

# 7

*Businesses under the Cabrini Technology umbrella*

# 30

*Jobs retained when Cabrini Technology bought Victorian Home Health Equipment in May 2017*

## *Cabrini Technology provides an innovative, independent information and healthcare technology service to organisations throughout Australasia.*

### **Cabrini Pharmacy**

To support 24-hour operation of hospital services, more hours of pharmacy support have been dedicated to our emergency department and day-of-surgery admission centre to ensure accurate records of patients' medications. We rolled out a new guardrails system for our intravenous smart pumps. This system minimises any risk of inadvertent over- or under-dosing with electronic guardrails to ensure dosing stays within safe limits. We deployed Omnicell automated medication dispensing cabinets across Cabrini. These cabinets replaced the older Pyxis system, providing safe storage and electronic recording of medication usage linked to the patient, as well as assistance with restocking.

### **Cabrini Technology**

Established in 1978, Cabrini Technology provides an innovative, independent information and healthcare technology service to organisations throughout Australasia and has headquarters in Mount Waverley. It comprises: AWA Technology Services, Cabrini's Centre for Innovation, Chemtronics Biomedical Engineering, Chemtronics *Direct*, Hospitech Facilities and Asset Management, In-a-Tick

Compliance Testing Services and a recent addition to the stable Victorian Home Health Equipment (VHHE). Cabrini Technology employs approximately 450 people with a further 200 specialist contractors and has 16 offices in Australia and New Zealand.

In 2016-17, Cabrini Technology has continued to develop new capabilities, enabling growth in under-serviced areas or addressing unmet need. This diversification provides for growth offsets to compensate for the traditional biomedical engineering business that has been flat and is directly related to growing pressure on hospitals to cut costs. While several long standing **Chemtronics Biomedical Engineering** contracts concluded and were not renewed, a significant new opportunity came to fruition: the establishment of a national biomedical engineering contract for the Calvary hospital group. While we currently provide services for many of Calvary's hospitals, the new contract includes two additional hospitals in Canberra and one in Wagga Wagga. The scope of the contract at other hospitals has also increased.

**Chemtronics Direct** which provides technical services for assistive technologies in the disability sector has

continued to grow. The expansion in NSW has continued with more services being provided to Enable NSW including establishing a staging and 'last mile delivery' service based at the Albury office/warehouse. Chemtronics *Direct* established an assistive technology hire service designed to supply equipment for patients. This new service is known as ALTER, the acronym for Assistive Living Technologies & Equipment Resources, and initially the client base was small. An opportunity arose to acquire VHHE which offered services that are closely aligned with ALTER. In May 2017, we completed and announced the acquisition, and managed to preserve 30 jobs and minimise business interruption. A new integrated structure was put in place and contracts have been re-established with some of the major public hospitals in Melbourne.

While **AWA** was unexpectedly advised by a client that a large area of business conducted for them would be moved to Singapore, we have been successful in winning a number of significant projects, mainly for government, including NSW Police and NSW eHealth. This project work has compensated for the business loss and there are many more opportunities in the pipeline.



*This page:  
Volunteer Kaye Nutman at the  
Cabrini Wig Room in Bayside  
located at Cabrini Brighton,  
which recently marked five years  
of operation.*

The **Cabrini Centre for Innovation** developed and built a new software application called Eve. This application is aimed at engaging mothers-to-be with the hospital clinicians, provide education and a number of useful resources. The design and content was created in consultation with clinical experts at Cabrini. A pilot is being conducted with 100 women due to give birth at Cabrini in the coming year. If successful, Eve will be launched as a commercial product. A further opportunity is to commercialise the underlying medical-grade software platform, which was developed as part of the project and is being branded Health Kite. It will become the backend for many more products that will be built on the Health Kite rapid-development platform.

Work for **Hospitech Facilities and Asset Management** has slowed due to conclusion of many of the new hospital construction projects, however during the year work continued on Casey Hospital, Royal Eye and Ear Hospital and redevelopment work at Emmy Monash Aged Care.

**In-a-Tick Compliance Testing Services** has grown during the year, particularly in NSW where it has been successful in providing services in the public health

sector. Currently we are providing support to inhouse biomedical departments in five local health districts.

#### **ENVIRONMENTAL MANAGEMENT SYSTEMS**

Cabrini's engineering service, based at Cabrini Malvern and working across our health service, maintained accreditation to ISO 9001 accredited quality-management systems and ISO 14001 environmental management systems. ●



*Rafx Hamilton, Manager  
of Engineering Services*



## Engineered for success

Rafx Hamilton is Engineering Services Manager at Cabrini, leading a team of 24 staff: he has a diverse role that covers maintenance of all infrastructure and services within Cabrini. He says the team is often called on to “assist in other unusual ways”.

**R**afx has worked at Cabrini for almost nine years but his association began many years earlier: he was born at Cabrini. He most enjoys the challenge inherent in his job. “There is never a dull moment in engineering services,” he said.

“We maintain a broad range of equipment and infrastructure and provide a wide variety of services.”

As the team is involved in all new building and renovation projects, and equipment installation, preparation for the development of the new Gandel Wing on Cabrini Malvern’s footprint has been an exciting challenge. “Cabrini’s facilities range in their built dates from 1900 to 2017, so there are many issues to take into account when caring for them and their inhabitants.”

Over the past year, these are just some of the projects in which the team has been involved: installation of two food dehydrators to recycle foodwaste into compost, installation of more than 100 kilowatts of solar panels, creation of a new paediatrics ward and new cardiac consulting suites, preparations for a new radio therapy bunker and establishment of a new plant room to supply support power and chilled water to the new hospital wing.

Rafx says Cabrini’s point of difference is the organisation’s ethos, the Cabrini Sisters and their involvement in the organisation. “It is great to work for an organisation that cares for people,” he said. “It provides me with opportunities to combine with my love of people with my technical skills and experience.”

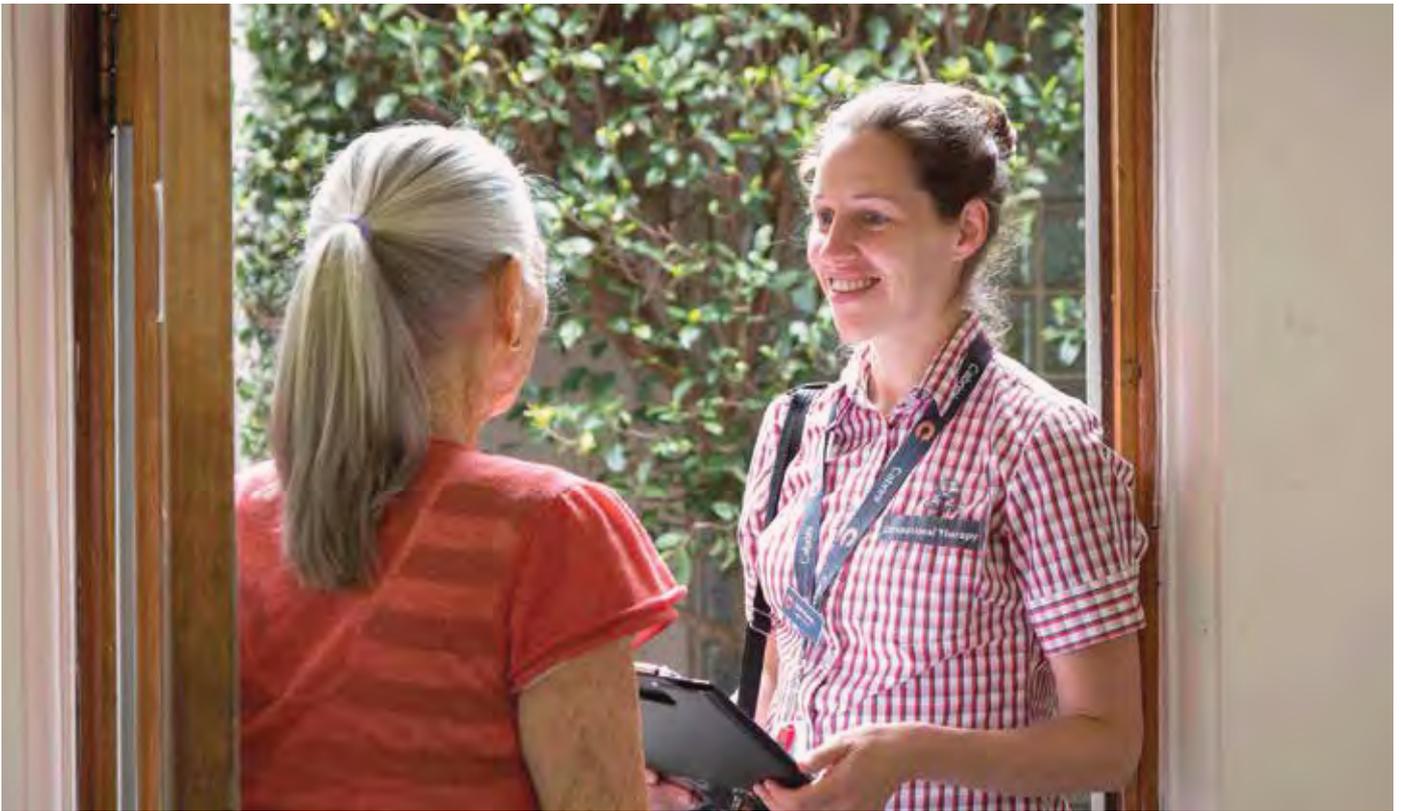
He feels he is here for a purpose, and seeks opportunities to contribute beyond his day-to-day role, having volunteered at the Cabrini-Children First Foundation Big Day Out events and in the kitchen at the Sacred Heart Mission dining hall.” ●

# 04

## *Our people*

Our people are central to our success. We work to anticipate, attract, develop, retain and enable our people to realise their potential and deliver excellent patient experiences now and in future.





Cabrini has a people strategy designed to achieve excellence in the experience of our people, the delivery of an outstanding patient, resident and family experience and realisation of our mission through adoption of strategic initiatives to achieve three key outcomes:

- 1) Planned employment and retention of the right people with the right skills
- 2) A high performance culture where people learn and grow
- 3) Strong systems, processes and practices

Our strategic goals are to foster a positive, vibrant and high performance work culture and to ensure we have the right staff profile and capability now and in future. The people of Cabrini comprise 4425 employees, some 1400 accredited medical practitioners and 232 volunteers, as well as community members who contribute in a range of ways. The future calls for an integrated set of people and culture initiatives to attract, develop, engage and retain a broadly distributed age range and skill mix of people to deliver service excellence.

#### **PLANNED EMPLOYMENT AND RETENTION OF THE RIGHT PEOPLE WITH THE RIGHT SKILLS**

Following introduction of an e-recruit recruitment system in 2016, we have enhanced our recruitment processes. Cabrini joined the LinkedIn online professional community to assist with the identification of prospective employees. Targeted recruitment videos were developed for enrolled nurses, midwives and general employees to promote Cabrini to potential candidates. The addition of online video interviewing has further modernised our recruitment process.

Strategic workforce planning was implemented across the nursing workforce supported by a team-based model of nursing care. Nursing workforce plans were developed to support workforce reform and development. Targets for skill mix and agency use were agreed. A part-time fractional employment minimum of 0.4 was set and new dual contracts for individuals ceased.

The employee benefits we offer through Maxxia salary packaging were well utilised. Three-quarters of employees utilised one or more forms of salary sacrifice as follows:

- 73 per cent utilised salary packaging



Page 61:

*Stuart Fleming, Manager of  
Cabrini Pathology.*

Opposite page:

*Natalie O'Connor, an occupational  
therapist at Cabrini Rehabilitation,  
consults with a patient.*

This page:

*Dr Steve Philpot of Cabrini's  
intensive care unit.*

- 38 per cent utilised meal entertainment
- 5 per cent utilised venue hire
- 5 per cent utilised the novated leasing option

All activities related to staff recruitment, departure or termination were carried out in partnership with leaders and managers together with People and Culture specialists, enabling the development of a workforce and culture that values people at Cabrini.

### **A HIGH PERFORMANCE CULTURE WHERE PEOPLE LEARN AND GROW**

More than 480 hours of staff development were delivered with 1600 staff having completed development programs across work health and safety, people-skills development and computer skills. Our online learning management system provides the platform and recording mechanism for the completion of organisational and local mandatory training requirements.

Mind Tools, an online learning suite, has continued to be available to all employees for the second consecutive year. Mind Tools is a comprehensive leadership, team-management, decision-



*Above:  
Cardiologist Professor Peter Kistler*

***Our strategic goals are to foster a positive, vibrant and high performance work culture and to ensure we have the right staff profile and capability now and in future.***

making, project-management, personal productivity and communication-skills toolkit, with more than 1000 skills, techniques and tools explained in detail via practical learning support. Some 1500 employees have utilised this resource over the past year.

Forty-four leaders participated in the third and final year of the performance acceleration leadership development program. This program was facilitated by the Advisory Board from the USA. Participants applied their learning from each session by working in project teams to resolve real challenges for Cabrini. Through this experience our leaders learnt skills in project management, change management, teamwork, financial decision-making and communication. More than 150 participants have completed the program.

Staff forums continued throughout 2016-17 with senior managers visiting various Cabrini locations, affording open conversational opportunities to gain direct staff feedback: 153 employees participated in these forums.

#### **STRONG SYSTEMS, PROCESSES AND PRACTICES AS ENABLERS OF EMPLOYEES' WORKPLACE EXPERIENCE**

The fourth biennial Cabrini-wide staff engagement survey was conducted in July 2016 by external consultants Best Practice Australia. A slightly higher participation rate (56 per cent) was achieved than previously. Managers implemented action plans at the local level to address issues arising and an organisation-level action plan has been implemented.

Workplace change occurred in many departments. This included a comprehensive change process to support our people through the sale of the Cabrini Linen Service to Spotless Group, which took effect in July 2017.

Our plan for work health and safety (WHS) 2017-19 has four pillars:

- 1) Leadership
- 2) Safe, healthy and respectful work environments
- 3) Managing key WHS risks
- 4) Caring for employees who have injuries with an increased emphasis on employee wellbeing

# 4425

*staff work at Cabrini*

# 35,000

*Hours contributed by Cabrini's 232 volunteers*

## ***Cabrini aims to foster a positive, vibrant and high performance work culture and ensure the right mix of staff.***

The Cabrini WHS policy was revised to include a section on the personal responsibility of all employees for safety. The structure and terms of reference of all WHS committees were revised, a WHS responsibilities procedure was issued and position descriptions were updated.

For safe, healthy and respectful work environments, a wellbeing calendar was introduced in collaboration with Cabrini's employee assistance program (EAP) provider. This included the delivery of monthly wellbeing webinars. In 2016-17, 39 per cent more employees accessed this service than previously. Utilisation of the EAP remains low with a total of 79 employees accessing the service, 66 per cent of whom were self-referred. To provide employees with insight into their health and wellbeing, a Medibank BeBetter Portal was launched for all employees supported by Medibank. Twenty-three Cabrini teams completed the Virgin Pulse Global Challenge, a 100-day worldwide virtual journey that improves both physical and psychological health of participants.

Improvements to the management of key risks included revision of the documentation for working safely in the community, issuing of a WHS incident-

management procedure and incident investigation guide, development of the safe moves program for safe handling of people and investigations checklists for manual handling and slip/trip/fall incidents. A project plan was developed for the prevention and management of clinical and other aggression incidents.

To improve our care for injured employees, dedicated software to assist our injury-management team in managing injuries and associated workers' compensation claims was purchased, and quarterly claims reviews with executive sponsorship were conducted in partnership with our claims agent.

### **WORKPLACE RELATIONS**

Cabrini negotiated two enterprise agreements that cover the majority of employees. The Nurses' Consultative Committee continues to meet quarterly to support early resolution of workplace matters and sharing of ideas.

#### **Cabrini Nurses and Midwives Agreement 2016**

The *Cabrini Nurses and Midwives Agreement 2016* was approved by the Fair Work Commission on 9 March 2017.



The agreement is effective until October 2020 and includes pay increases and improvements to terms and conditions of employment. The agreement genuinely values the lifestyle and dedication of our nurses and develops more professional pathway opportunities for all nurses and midwives at Cabrini.

### **Cabrini Health and Allied Services Agreement 2016**

The *Cabrini Health and Allied Services Agreement 2016* was approved by the Fair Work Commission on 11 May 2017. The agreement will operate until September 2019 and includes pay increases and improvements to terms and conditions of employment. The agreement expanded the classification structure for theatre technicians, instrument technicians, personal care attendants (hospital) and food services employees.

### **EDUCATION AND RESEARCH**

In the mid-1970s, Cabrini was the first private hospital to participate in professional training for medical staff which had previously been the exclusive domain of public hospitals. This opportunity was extended to

undergraduate nursing students in the 1980s and, more recently, to allied health students. Further, we have expanded our involvement to include postgraduate support.

During 2016-17, Cabrini provided 2800 clinical placement days for medical, nursing and allied health students. We supported 18 positions for registrars pursuing specialist training in emergency, intensive care, neurology, gastroenterology, general medicine, gerontology, pathology, medical oncology, palliative care and medical administration.

From a research perspective, the Cabrini Human Research Ethics Committee approved 96 projects:

- 49 projects were submitted by students, Cabrini staff and Cabrini Institute researchers
- 17 applications related to cancer research which resulted in our patients having access to 46 cancer trials over the past 12 months

Cabrini researchers contributed to healthcare knowledge and expertise through 85 publications, two books and seven book chapters.

*This page:*

*Cabrini Brighton's Lynne Turnbull (centre) and Sue Hewat (General Manager & Director of Nursing) with Carli Kristensen (left) of Cabrini Malvern volunteering at Sacred Heart Mission in St Kilda.*



# 2800

*Clinical placement days provided  
for medical, nursing and allied  
health students*

# 480

*Hours of staff development delivered  
with 1600 staff having completed  
development programs*



*Opposite page:  
Cabrini head chef Robert Castellani  
at work in the kitchen.*

*This page:  
Cardiac Services Director Dr Gautam  
Vaddadi (centre) and team.*

## OUR DOCTORS

More than 1400 accredited medical practitioners work with us across the range of medical specialties and sites. Most of our doctors are independent visiting medical officers (VMO), and all are an essential part of our Cabrini clinical services. As well as their contributions to excellent patient care and patient experience, many volunteer to be involved in hospital management and quality committees and research, as well as in medical student and postgraduate teaching. We are fortunate to have doctors of such quality who are prepared to contribute to all facets of our organisation.

### Changes in medical leadership

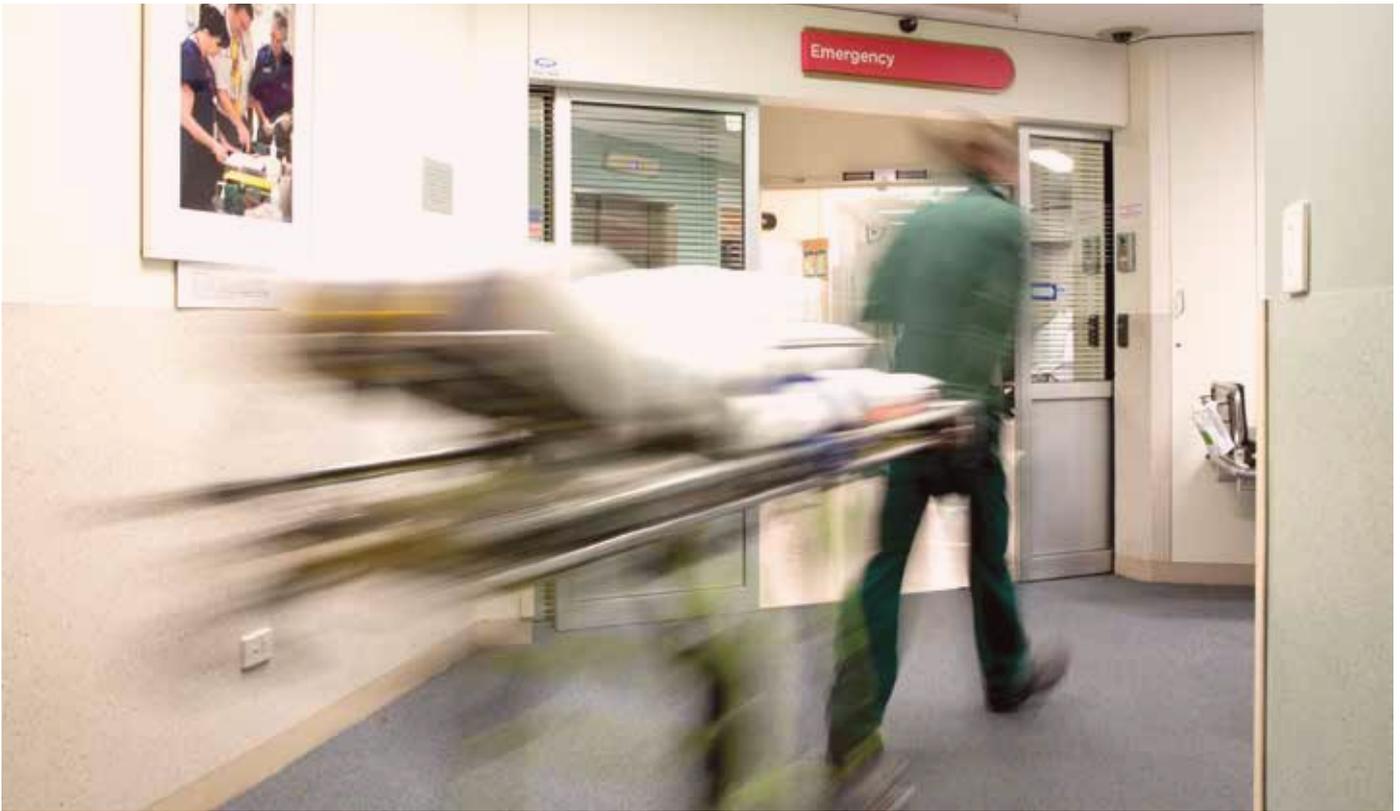
During 2016-17, there has been a change in medical leadership positions. Dr Gautam Vaddadi was appointed as our first Medical Director of Cardiac Services. This is an exciting development which recognises the pivotal role of cardiology and cardiac surgery at Cabrini Malvern. It supports the clinical provision of cardiac services and, with the engagement of the cardiologists and cardiac surgeons, is enhancing the quality and safety of our services. Dr John Reeves continues to provide leadership as Medical Director of Cabrini Malvern

with surgeon Mr Val Usatoff leading perioperative services. Dr Ben Brady (medical oncology and haematology), Dr Chantal McNally (anaesthetics), Dr Michael Ben-Meir (emergency medicine), Dr Vineet Sarode (intensive care), Dr Natasha Michael (palliative care) and Dr Kwong Teo (rehabilitation medicine) continue to provide medical leadership in their respective areas, with support of ongoing developments in clinical and research programs.

By the end of 2017, Dr Antonio Grossi will have completed his two-year term as Chair of the Medical Staff Executive, which represents all of our doctors. He has been pivotal in the development of the *Cabrini Medical Compact*, which provides a framework for the crucial relationship between our medical staff, Cabrini management and Board. Dr Melita Kenealy will be take over as Chair of Medical Staff.

### Investment in new technologies

The services we are able to provide depend on doctors learning and adopting new techniques. It is likely that the work developing the transcatheter aortic valve implantation (TAVI) program, which allows replacement of the aortic valve via catheters from an artery in



the groin rather than the usual open or minimally invasive surgical methods, will be supported by listing of the procedure on the *Medical Benefits Schedule* in November 2017. The effect will be that the procedure will become available to more patients who have a clinical need for an aortic valve replacement and are not well enough to have open cardiac surgery. This program is a truly interdisciplinary model of care, with involvement of a team of nurses, cardiologists, surgeons and anaesthetists. Another example of new service introduction has been the development of new techniques via endoscopes for fine needle ultrasound guided biopsies of the lung and intestinal tracts. These enable precision guided biopsies of lesions which previously could not be performed, and are now part of our service offering.

### Clinical registries

Clinical registries are an important part of healthcare quality and provide an increasingly important foundation for clinical research. The collation and analysis of data from large numbers of patients (or megadata) provides powerful tools to improve our healthcare for individual patients and for the healthcare system. Cabrini doctors within the Cabrini

Institute such as Associate Professor Paul McMurrick (Colorectal Cancer Registry) and Professor Rachelle Buchbinder (Australian Rheumatology Association Registry) have been pivotal in the establishment of registries. Others such as Associate Professor Jeffrey Lefkovits (Victorian Cardiac Outcomes Registry) and Professor Mark Frydenberg (Prostate Cancer Registry) have provided leadership within registries in their specialty areas.

### Grants for clinical staff

In 2016-17, the Cabrini medical staff has continued and expanded its program to support allied health and nursing staff and students through education travel grants. They have continued the program of funding short research programs with our medical students from Monash University and the University of Notre Dame working with our medical researchers. The purpose of these grants is to show the medical staff's support for our colleagues and students, and to encourage them to learn new skills.

### Honours

In the 2017 Australia Day Honours, Associate Professor Gary Richardson was awarded the Medal of the Order of



*Opposite page:  
Cabrini's emergency department  
received 22,804 patients in 2016-17.*

*This page:  
Sister Sharon Casey MSC is a  
member of Cabrini's Board of  
Directors and provides valuable  
guidance to the organisation.*

Australia (OAM) for service to medicine particularly oncology. As Head of the Cabrini Monash Department of Medical Oncology – The Szalmuk Family Department of Medical Oncology, Associate Professor Richardson has worked continually to promote clinical oncology research at Cabrini and in doing so, to provide the best possible care to cancer patients who come to Cabrini for their care. He has provided leadership both nationally and through the Monash Partners Academic Health Science Centre (Monash Partners) collaboration.

### **OUR NURSES**

To improve the care of our patients, our nurses have restructured the way they work. With team nursing, each patient is assigned to a team, instead of an individual for a shift. This ensures that there is always someone available who knows about their care needs. It also allows for different aspects of the patient's care to be provided by different team members. We have introduced more qualified Patient Care Assistants (PCA), a role that assists with many routine care needs such as showering and assistance with activities of daily living. These changes have been linked to the concept of hourly rounding,



whereby our patients are proactively visited by a member of the nursing team at least every hour, to anticipate patients' needs rather than waiting for them to call for a nurse.

We remain invested in supporting our nursing and midwifery workforce by better understanding our past, current and future needs. We have restructured our novice graduate nurse program to better meet operational and workforce needs. Novice enrolled nurses and registered nurses now learn together under our new transition-to-professional-practice program.

The sixteenth annual Peter Meese Memorial Lecture and associated awards were presented at Cabrini Malvern in

March 2017. Held in memory of Dr Peter Meese, a former infectious diseases doctor and patient of Cabrini during his bowel cancer diagnosis and treatment, the event celebrates the work of cancer nurses and provides a forum for education and discussion. Natalie Lalor, a team leader in Cabrini Brighton's day oncology unit and co-facilitator of the hospital's living with cancer program, received the 2017 Peter Meese Travel Scholarship. She used her prize to attend the 2017 Cancer Survivorship Conference in Adelaide.

At the end of 2016-17, it was announced that Sue Grasby RN, a nurse manager at Cabrini Malvern, had been awarded Catholic Health Australia's (CHA) annual Nurse of the Year Award for 2017, which

*Above: Chief Executive Dr Michael Walsh (fourth from left) and Executive Director of People and Culture Mary-Anne Gallagher (third from right) with Cabrini's leadership scholarship recipients presented in November 2017.*



honours an outstanding nurse working in Catholic health and aged-care services. It recognises a commitment to serving patients with respect and dignity while acknowledging their individual uniqueness. This commitment may be demonstrated through a research project, innovative program or significant contribution to the promotion and celebration of a Catholic understanding of care within a changing environment.

The award recognises Ms Grabsy's volunteer contributions to healthcare services in Papua New Guinea (PNG). It included a cash prize of \$5000 for use in supporting a program or for professional development and a trophy.

### OUR VOLUNTEERS

Opportunities to volunteer have positive effects for the individual and the broader community. We receive valuable service from an active volunteer workforce, which enables us to provide extra services to our patients, residents and their families. In 2016-17, more than 35,000 hours of value-added service were provided by:

- Heartbeat Cabrini patient visitors
- Catholic Ministry volunteers
- Cabrini Gift Shop volunteers
- Patient and Resident Services volunteers

We received approximately 1000 hours of *pro bono* support from psychiatrists,

general practitioners and psychologists at the Cabrini Asylum Seeker and Refugee Health Hub. As it caters mainly for Medicare-ineligible asylum seekers, we would not be able to offer such a comprehensive service otherwise.

Using conservative hourly rates for each staff classification, Australian minimum-wage rates for patient and resident volunteers and Heartbeat Cabrini patient visitors, and 95 per cent of the Catholic Archdiocese of Melbourne grade 1 pastoral associate rate, we estimate that the volunteer time contributed to Cabrini is worth more than \$950,000.

More than 1600 hours were provided to our partner organisations through

*Each year many of our staff are involved in fundraising for charities, volunteering their time in community organisations or participating in service programs operated by other organisations.*

a diverse range of services such as governance and administrative support for St Mary's Hospital in Ethiopia, participating in primary health checks in a service program with Cabrini Ministries in Swaziland, providing a pathology service for Modilon Hospital in PNG, volunteering for medical evacuation surgery or as a mentor for visiting overseas.

Each year many of our staff are involved in fundraising for charities, volunteering their time in community organisations or participating in service programs operated by other organisations. We take pride in the contributions they make and celebrate their achievements.

## **CELEBRATING OUR IDENTITY**

### **Significant anniversaries**

On 7 July 2016, we marked the seventieth anniversary of the canonisation of Saint Frances Xavier Cabrini by Pope Pius XII, the first naturalised USA citizen to be canonised by the Roman Catholic Church. She was later named Universal Patroness of Immigrants in honour of her lifetime's work caring for migrants in the USA, Latin America, Europe and England. We celebrated this important occasion with Mass and supper held at Cabrini Malvern

# 1400

*Number of accredited  
Cabrini doctors*

# 70

*In July 2016, we marked the seventieth  
anniversary of the canonisation of  
Saint Frances Xavier Cabrini*



on 3 August 2016. Reverend Maurizio Pettena CS presided. This was fitting, as Reverend Pettena is the Director of the Australian Catholic Migrant and Refugee Office and a member of the Scalabrinian Congregation. Blessed Bishop Scalabrini (1839-1905) who founded the Scalabrinian Congregation and Mother Cabrini (1850-1917) were compatriots and contemporaries. Representatives of the Italian community joined current and past staff, friends and associates of Cabrini to acknowledge and celebrate the event.

The month of December 2016 marked the opening of a year of celebration commemorating a century of care in the tradition of the mission and spirit of Saint Frances Xavier Cabrini.

### **Formation for mission**

We believe we are responsible for leading the organisation in a manner consistent with our identity and for preparing the next generation of leaders and staff, so that the essence of our mission is realised. We seek to attract staff who are passionate about our mission and values, and invest in formation so we are able to be authentic representatives of a Catholic, Cabrinian ministry.

We understand formation to be a life-

long transformational process that engages the whole person – body, mind, heart and soul. It involves reflection and contemplation, search for meaning and understanding, probing and questioning. Our commitment to formation flows from our desire to encourage people to find and become their best selves at work and, in so doing, fulfil their human potential.

We have invested in ethics education, particularly for clinical staff. Eight staff completed an online ethics program developed by Catholic Health Australia and offered by BBI Australian Institute of Theological Education. Fourteen staff (including ten senior clinicians) participated in an ethics masterclass on end-of-life care care, facilitated by Associate Professor Bernadette Tobin, Director of the Plunkett Centre for Ethics in Sydney.

In the first half of 2017, the Mission and People Board Sub-committee developed a new formation program structure and approach to ensure that every staff member understands our identity, is consistent with our mission of care and service and acts in a manner consistent with our behaviours that matter (essentially, our code of conduct). ●

*This page:  
Reverend Maurizio Pettena CS  
celebrated Mass at Cabrini Malvern  
to mark the seventieth anniversary of  
the canonisation of Mother Cabrini.*

## Nurse of the year

Sue Grasby RN, a nurse manager at Cabrini Malvern, was awarded Catholic Health Australia's (CHA) annual Nurse of the Year Award for 2017.

According to Professor Lee Boyd, Cabrini's Executive Director of Nursing and the Cabrini Institute, Sue models the Cabrini mission and values every day, is a strong patient advocate and a valued member of the nursing leadership team.

Sue's award recognises her volunteer contributions to healthcare services in PNG. As an award winner, Sue she received a cash prize of \$5000 to support a program or professional development and a trophy.

Sue says she is committed to improving the health of the PNG people and engaging in health promotion to prevent illness in remote areas. "My passion for volunteer outreach nursing has been brought to my work at Cabrini," she said. "I have actively canvassed and encouraged co-workers to become involved by raising awareness of the plight of our PNG neighbours, which has stirred the compassion of ten staff to volunteer in a remote, hot and humid country, while experiencing the beauty and gratitude of the people."

Sue's involvement with providing health outreach services in PNG was sparked when she trekked the Kokoda Track in 2010. In 2014, she began volunteering with No Roads Health, travelling by foot, car and boat to six remote coastal villages to provide healthcare to those most in need.

"I felt the need to respond to the chronic lack of health care that is being suffered by our close neighbours and which we take for granted in our country," she said.

"I am privileged to work in an acute hospital in Australia, moreover, this experience affirmed my desire to give back and try to make a difference to these people who live in remote villages and lack so much in both access and availability of healthcare." ●



*Cabrini nurse manager Sue Grasby volunteers with No Roads to Health in PNG.*



# 05

## *Our stewardship*

At Cabrini, we believe that we are stewards of resources entrusted to us to use for the benefit of others.





We must focus on operating effectively and efficiently to maintain our financial viability, thereby enabling continual investment in high quality facilities and services for our communities. To protect our organisation and ensure the future of Cabrini in Australia, we have various strategies, governance, leadership and operational structures in place, which help us to develop our services and provide responsible stewardship of our resources.

### OUR STRATEGY

For 70 years, Cabrini Health has been true to the Cabrini Sisters' mission of providing compassionate care to those in need of our care and support. As we realign our health strategy for the next decade, we are renewing our purpose of caring for the most vulnerable. In doing so, we have had much discussion about where to best target our services: who are the needy and vulnerable people whom we need to serve today?

Cabrini is part of a competitive healthcare market made up of other not-for-profit (also known as for-purpose) healthcare providers, public hospitals and for-profit healthcare groups. People can and do

shop around for their healthcare, many of them paying beyond what their health insurance will cover. They visit a range of doctors, medical specialists and other healthcare professionals. This has caused fragmentation of our healthcare system which is increasingly difficult to navigate. In decades past, the local family general practitioner or GP took care of most or all of a person's healthcare needs. These days, someone with one or more health conditions may have a dozen different people involved in their care.

This has led us to the certainty that the way we structure, organise and offer our healthcare services must make things (choices, decisions and processes) as easy as possible for our customers i.e. our patients and their families. They need to be at the centre of, and in control of, the decisions that affect their healthcare and to be supported by us in ways that meet their priorities and preferences.

With this in mind, we have developed a strategy to join the dots of fragmented health and social care to improve the experience people have with us: before, during and after their care in one of our hospitals or other healthcare facilities. In doing so, we are aiming to integrate our services and make it easier for the people

*Previous page:  
Plastic surgeon Mr Andrew Greensmith, Mr Rory Mahr and a team of Cabrini staff operate on a medical evacuee.*

*This page:  
Consultant psychiatrist Professor Suresh Sundran at the Cabrini Asylum Seeker and Refugee Health Hub.*

*Opposite page:  
As part of Annual Cabrini Week, we hold a ceremony to honour patients and staff who have died over the past year.*



using them. As well as better joining up our own services, we are working on new partnerships that will create a better experience for the person at each touchpoint – before they come to Cabrini and after they leave us. We will do this through creating connections between health services (such as medical specialists and pharmacists) with other services such as local council, local businesses and other care providers. We cannot – and should not aim – to do all of it on our own, so we need to create connections to ensure care for the whole person. In doing so, we will cluster services around the person in our care, in order to keep them healthy, safe and happy in their own homes for as long as possible.

As well as integrating our services and introducing new services that patients want and need (for example, radiation therapy at Cabrini Malvern), we need hospital facilities, equipment and systems that meet emerging and future healthcare needs. Fourteen separate projects and initiatives are underway in the renewal of Cabrini's health mission and a further 11 are in the pipeline. For example, building works are underway for the new Gandel Wing at Cabrini Malvern which is due for completion and opening in 2019. In the meantime, our partner in the provision

# \$3.3m

*Invested in charitable services*

# 1000

*Hours of pro bono support from clinicians at the Cabrini Asylum Seeker and Refugee Health Hub*



*This page:  
Anne Anderson works as a cleaner/  
assessor of equipment in the  
ALTER business unit, a division of  
Chemtronics Direct set up to handle  
equipment hire and sales.*

of radiotherapy services GenesisCare is developing an interim radiotherapy facility. We are working on a number of technology-based supports and services including an online resource for expecting and new parents.

#### **FINANCIAL STEWARDSHIP**

During 2016-17, Cabrini's revenue exceeded \$532m, which was \$10m more than last year. Our expenditure was lower than last year by \$2m although we incurred increases due to the introduction of new enterprise agreements, higher WorkCover costs, reduced supplier rebates and additional depreciation costs.

Cabrini's cash flow and liquidity decreased throughout 2016-17 due to deterioration in performance as a result of an operationally challenging year. Further, we continue to invest in our new Gandel Wing at Cabrini Malvern; this is a major project, which formed the majority of the capital expenditure for the financial year.

#### **PROVIDING BENEFITS TO THE COMMUNITY**

Cabrini is a Catholic, for-purpose,

*“Our distinctive vocation 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 Joseph Bernadin USA (1928-1996)

charitable organisation that does not rely on direct government or church funding. Our Catholic identity calls us to:

- respect the inherent dignity of every person
- create social conditions that allow people to reach their full potential and to participate in their communities
- give priority to the needs of the poor and marginalised
- be prudent managers and share our resources in the interests of the community as a whole
- be good stewards of the environment, conscious of the interdependence of all living creatures and the finite nature of our natural resources

Our mission commits us to reaching out with compassion, integrity, courage and respect to all we serve. As a provider of healthcare and healthcare related services, all of our services and activities are intended to deliver benefits to the community. Beyond this, we have in place a community benefit framework. We work to demonstrate transparency and accountability with respect to the concessions we receive as a charitable institution by annually assessing the value

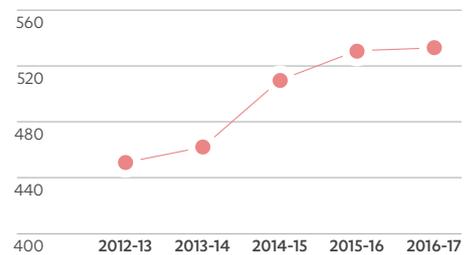
of our activity against our community benefit framework.

Since 2013, we have assessed the value of our community benefit program across eight domains of activity: mission-driven health services, health promotion, health outreach, social outreach, education and research, community engagement, advocacy and environmental stewardship.

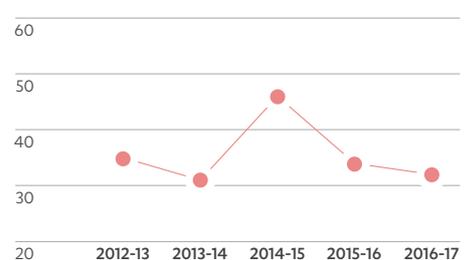
Where possible, direct costs and/or foregone revenue in each domain are calculated and reported. In the case of environmental stewardship, we monitor energy utilisation across all clinical sites against patient beddays to provide visibility of the effectiveness of our sustainability interventions and investment. We undertake some activities that provide value without necessarily incurring a cost to the organisation. For example, our commitment to provide social benefits through procurement, encouraging staff to reduce their environmental impact in their personal lives and providing opportunities for people to connect with the community through volunteering.

In 2016-17, the total financial value of our community benefit program was \$9.9m comprising \$9,278,616 in direct costs and \$609,149 in foregone revenue.

REVENUE (\$M)

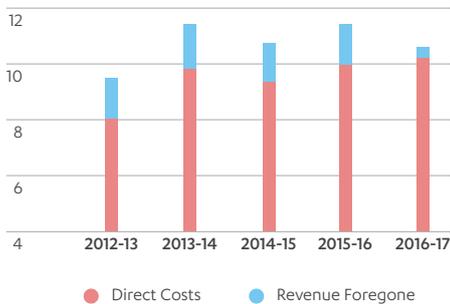


CAPITAL EXPENDITURE (\$M)

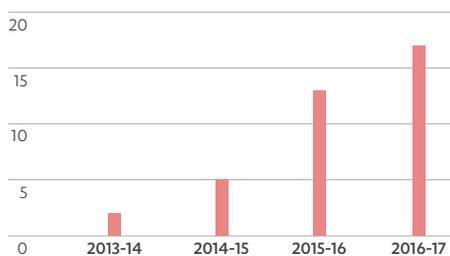


*For 70 years, Cabrini Health has been true to the Cabrini Sisters' mission of providing compassionate care to those in need of our care and support.*

#### COMMUNITY BENEFIT PROGRAM VALUE (\$M)



#### PROCUREMENT FROM LOCAL TRADERS (\$M)



#### A new approach to bereavement support

In November 2016, we announced the closure of Cabrini's pilot community bereavement service Vale. The service, which was introduced in July 2014 to support older residents in Stonnington who have been bereaved, was closed earlier than expected due to low take-up. We had planned to operate the service as a three-year pilot program to ascertain the demand for group-based bereavement support. The initiative was part of Cabrini's commitment to contributing to the development of strong and vibrant communities.

The proposal for a community bereavement service arose from a community needs analysis undertaken by Cabrini and the City of Stonnington in 2013. The analysis showed that 12 per cent of women and 11 per cent of men aged 65 years and older in the City of Stonnington are providing unpaid assistance to a person with a disability; and that there are significant pockets of ageing residents and a higher percentage of older people living alone in the area. Vale was one of two community initiatives developed to address the needs of this group. The other involved partnering with Bentleigh Bayside

Community Health to improve access to transport for older residents in the City of Stonnington, an initiative that continues.

At the same time Vale was established as a community-based bereavement service, we began work to expand our hospital-based bereavement service for patients who are diagnosed with a terminal illness and die with us. As this internal bereavement program grows, it will provide better support for our patients and their families. Currently we are working to determine how else we may reach out to others who do not use our health services.

#### Social procurement

Cabrini takes pride in doing business with suppliers that share a common goal of ethics in sourcing and trading. We have a procurement policy stating our commitment to ethical sourcing of goods and services and a framework to help us achieve the best outcomes in procurement i.e. value for money, high standards of probity, transparency, accountability and risk-management and where possible, social benefit.

We give preference to goods or services sourced locally. Since 2014, as purchasing contracts have ended, we have



Domain	Direct Costs	Foregone revenue
Mission-driven services	\$2,634,441	\$549,231
Health outreach	\$493,232	
Social outreach	\$1,453,367	
Education and research	\$2,997,912	
Health promotion	\$16,500	
Community engagement	\$1,671,418	\$59,928
Advocacy	\$1,050	
Environmental stewardship	\$10,696	
<b>Subtotals</b>	<b>\$9,278,616</b>	<b>\$609,159</b>
<b>Total program value</b>		<b>\$9,887,775</b>

*This page:  
Sister Barbara Staley MSC, General  
Superior of the Missionary Sisters  
of the Sacred Heart of Jesus.*

## *Cabrini takes pride in doing business with suppliers that share a common goal of ethics in sourcing and trading.*

progressively moved our purchasing to businesses in the local government areas where Cabrini's services are located. The purpose is to support local traders, as they help to create vibrant and well-resourced communities. We monitor and report on the value of purchasing from local traders as a measure of community benefit. In 2016-17, the value of our local purchasing increased from \$13.3m in 2015-16 to \$16.6m i.e. an increase of \$3.3 million. Where we are unable to purchase goods or services locally, we source supplies from suppliers that support communities where the Cabrini Sisters have missions and other countries with which Australia has free trade agreements.

Where possible we consider purchasing from social enterprises or Aboriginal and Torres Strait Islander-run businesses. Such enterprises are organisations or businesses that combine trade with social purpose and where that social purpose is a defining part of their business. We are a member of Supply Nation, which is endorsed by the Australian Government. We use our best efforts to ensure all goods and services are sourced from businesses that comply with the principles promulgated by the Ethical Trading Initiative, the United Nations International Labor Organization, the United Nations *Declaration of Human*

*Rights* and the *Code of Ethical Standards for Catholic Health and Aged Care in Australia*. We are dedicated to continually reducing the environmental impact of our supply change.

When we purchase goods that are sourced either directly or through distributors where manufacturing occurs in countries where slavery remains an issue, we require the supplier to present us with their business social compliance initiative (BSCI) auditing methodology. This is a supply-chain management system designed to drive social compliance and improvements in factories and farms in global supply chains. It implements the principle of international labour standards protecting workers' rights such as International Labor Organization conventions and declarations, the *United Nations Guiding Principles on Business and Human Rights* and guidelines for multinational enterprises of the Organization for Economic Co-operation and Development.

### **CHARITABLE SERVICES**

Since 1994, Cabrini has allocated funds to charitable works to extend our reach beyond our healthcare operations. In 2016-17, \$3.3m was invested in charitable services, a significant increase on the

\$3.07m invested during the previous year. Cabrini's cross-subsidy was complemented by a \$70,000 contribution from staff donations and fundraising activities. Of the total:

- \$857,000 was invested in our international health partnerships in Swaziland, Ethiopia and PNG.
- \$429,000 was invested in capacity building programs in the local government areas where our health services are located
- \$805,000 was targeted as philanthropic grants to organisations offering Aboriginal health and wellbeing programs, asylum seeker and refugee support or working with communities of disadvantage.
- \$679,000 was invested in our own charitable programs such as the Cabrini Asylum Seeker and Refugee Health Hub, providing *pro bono* access to surgery for children who do not have access to the treatment they need in their own countries, training overseas clinicians and developing screening tools to assess the mental health of asylum seekers.



*This page:  
Nurse Stephanie Laurie at work  
at Cabrini Brighton.*

- \$350,000 was invested in other international programs sponsored by the Cabrini Sisters.
- The balance of \$180,000 was spent on program administration.

### **Advocacy**

We define advocacy as taking a public stance on an issue and undertaking activities designed to influence social attitudes and policy responses. In doing so, we draw on our reputation, experience and ethical position as a Catholic healthcare provider and our values as a member of the international Cabrini community to advocate on issues. Depending on the issue, our audience may be the community in general, a section of the community, or our staff. Currently our advocacy priorities are end-of-life care, asylum seekers and refugees, and Aboriginal reconciliation. We have been active in advocating for improved access to palliative care and cautioning against the introduction of voluntary assisted dying legislation in Victoria.

We have published social policy position statements to articulate our position on Australia's First People and the treatment of asylum seekers and refugees. We engage our staff in our efforts to create a



Above:  
Medical evacuee Pulei Latu of Tonga  
with her surgeon Mr Will Blake.

## *We define advocacy as taking a public stance on an issue and undertaking activities designed to influence social attitudes and policy responses.*

fairer, more inclusive society through our Aboriginal cultural immersion experience and membership of the Catholic Health Australia-Apunipima partnership focused on improving primary health services in Cape York. In April 2017, we launched a specialist mental health service for asylum seekers and refugees. This service operates from the Cabrini Asylum Seeker and Refugee Health Hub in the northern suburb of Brunswick and complements the primary health service launched at this centre in April 2016. Our staff have supported clients of the Cabrini Asylum Seeker and Refugee Health Hub through fundraising and donating knitted garments over the winter period.

### **Protecting our environment**

As a Catholic organisation, Cabrini is committed to environmental stewardship. We have measured and reported on our utility consumption, waste sent to landfill, and carbon dioxide emissions from our clinical facilities since 2011-12, using patient beddays as a measure to account for changes in activity. Although these measures do not reflect all activities performed across our organisation, as healthcare is the most energy intensive and generates the most waste of any of our services, we believe this is the most useful

measure of our effectiveness in reducing the impact we have on our environment. Over the past five years, there has been a downward trend in our consumption of most utilities and improvements achieved in 2016-17. The net effect is a 15 per cent reduction in carbon dioxide emissions from a high of 0.1164 tonnes per bedday in 2013-14 to 0.0989 per bedday in 2016-17.

Highlights in 2016-17 include the following:

- Continuing reduction in electricity usage at Cabrini Malvern, which has resulted in the lowest recorded annual electricity usage since 2003 and solar electricity generation capacity of 150 kilowatts per hour onsite
- Work to reduce the amount of general waste sent to landfill continued with our food waste dehydrator, located at Cabrini Malvern, having processed 72 tonnes of material, producing some 20 tonnes of soil enhancer, and resulted in a reduction of 175 tonnes of greenhouse gases
- With the separation of food waste from general waste, and improved recycling practices, Cabrini Malvern's general waste tonnage fell to 448 tonnes, the lowest weight of landfill waste over the past ten years
- Co-mingled weights collected at Cabrini Malvern continue to show an increase with 2 per cent growth in 2016-17 indicating that more staff are recycling materials
- Cardboard and paper waste are now an economic resource generating some \$9500 dollars in rebates in 2016-17

Other achievements in 2016-17 include:

- We decreased our consumption of electricity from its peak in 2014 by 7.72 kilowatt hours per bedday, a saving of another 0.83 kilowatt hours per bedday on 2015-16.
- We decreased our water consumption from its peak in 2013 by 0.058 kilolitres per bedday, which represents the lowest consumption since we monitoring began.
- We reduced our volume of waste-sent-to-landfill from its peak in 2013 by 0.0007 tonnes per bedday.
- We reduced carbon dioxide emissions from its peak in 2104 by 0.0175 tonnes per bedday, falling below 0.1 tonne per bedday for the first time since monitoring began.

Growth in Cabrini's culture of recycling and sense of environmental responsibility

***Cabrini provides a comprehensive range of high quality acute, subacute, palliative care, primary care, residential care, diagnostic and community-based health services.***

has been supported with staff engagement activities such as:

- Cabrini's annual Environment Week held across all of our locations
- Promotion of TAKE2 in June 2017, Victoria's collective climate change pledge to reach net zero emissions by 2050 and keep the global temperature rise to under two degrees in June 2017. Cabrini joined more than 300 other Victorian businesses and individuals to take the pledge and invited our staff to make their own personal environmental pledge with 210 having done so.

Reducing our use of utilities such as electricity, gas and water, and better management of waste reduces Cabrini carbon emissions. Over the past ten years, Cabrini's carbon emissions have fallen by 10 per cent or some 3000 tonnes.

#### **ESTABLISHMENT OF CABRINI**

Founded in Melbourne in 1948, Cabrini is a large, Catholic, private, charitable organisation in Victoria. We provide healthcare and health related services with our origins in the Melbourne suburb of Malvern. We are part of an international organisation with a presence

in 17 countries. Our owners and sponsors are the Missionary Sisters of the Sacred Heart of Jesus (the Cabrini Sisters). We are part of the Stella Maris Province, headquartered in New York City, which comprises Africa, Australia and USA. We do not rely on government or church funding and any surplus funds that we generate are reinvested in our facilities and services. We support charitable social outreach programs in partnership with other agencies locally, interstate and overseas. These activities are actively supported by our staff.

#### **ROLE OF CABRINI**

Cabrini provides a comprehensive range of high quality acute, subacute, palliative care, primary care, residential care, diagnostic and community-based health services. Our services span cancer care, chronic disease, emergency medicine, general practice, health promotion, heart services, home and community based care, maternity services, paediatric care, palliative care, primary care, rehabilitation, residential aged care, research and education. We work together with our accredited medical practitioners, community healthcare providers such as general practitioners and healthcare

*Opposite page:  
Radiation therapy is coming  
to Cabrini.*



**FIVE-YEAR SNAPSHOT: CABRINI MALVERN'S IMPROVEMENT IN RECYCLING**

	2012-13	2013-14	2014-15	2015-16	2016-17	% increase	% increase
	Kilograms	Kilograms	Kilograms	Kilograms	Kilograms	15-16 V14-15	17-16 V15-16
Paper	62,410	71,810	70,007	72,731	69,281	3.9%	-4.7%
Cardboard	87,620.5	87,620.5	86,129.12	85,617	93,678	-0.6%	9.4%
Commingled	20,746	22,275	22,655.4	30,786	31,501	35.9%	2.3%
Organic Recycling	0	0	0	12,138	75,757		524.1%
General	584,000	513,000	509,000	541,000	448,000	6.3%	-17.2%
<b>Total</b>	<b>754,777</b>	<b>694,706</b>	<b>687,791</b>	<b>742,272</b>	<b>718,218</b>	<b>7.9%</b>	<b>-3.2%</b>

Notes:

While the kilograms of collected paper is lower this year, some of this is accounted for through improved printing habits by staff. Cardboard collection and disposal has grown by 30 per cent which is due in part to the changed delivery arrangements in logistics generating more cardboard waste.

*“Many things have to change course, but it is we human beings above all who need to change. We lack an awareness of our common origin, of our mutual belonging, and of a future to be shared with everyone. This basic awareness would enable the development of new convictions, attitudes and forms of life. A great cultural, spiritual and educational challenge stands before us, and it will demand that we set out on the long path of renewal.”*

– Encyclical Letter *Laudato Si* of the Holy Father Pope Francis on care for our common home (24 May 2015)

agencies, Catholic Health Australia and the wider community. Together with our partners, we seek to understand and respond to the community’s needs.

## OUR COMMUNITY

Our patients come mainly from eight local government areas: the cities of Bayside, Boroondara, Glen Eira, Kingston, Monash, Moreland, Port Phillip and Stonnington. Cabrini’s patient population is diverse and includes people of various ages, cultural heritage, socio-economic status and disabilities.

## HOW WE ARE ORGANISED

Cabrini provides clinical care from hospitals and healthcare facilities in Ashwood, Brighton, Brunswick, Caulfield South, Elsternwick, Malvern and Prahran. We have administrative and other support services located at Hawthorn, Malvern, Mount Waverley and Thomastown. Our clinical services are provided from our large acute hospitals at Brighton and Malvern, Cabrini Palliative Care Prahran, Cabrini Residential Aged Care Ashwood and Cabrini Rehabilitation. These facilities are supported by a comprehensive

range of clinical and other support services described in this report. A brief description of each of our hospitals and healthcare facilities follows.

### Clinical services

**Cabrini Malvern:** Established in 1948, this 508-bed acute care hospital provides a wide range of services including coronary care, day procedures, day oncology, emergency care, hospital-in-the-home, intensive care, maternity, paediatric (children’s) care, medical imaging and pathology.

**Cabrini Brighton:** Established in 2002, this hospital has 141 beds across three wards and features a day oncology unit, high dependency unit, endoscopy, sleep centre, onsite medical imaging and pathology, specialist consulting suites and 24-hour medical coverage.

**Cabrini Residential Aged Care Ashwood:** Established in 2001, this is home to 90 residents. Residents’ wellbeing and quality of life are enhanced by a range of social, recreational, spiritual and emotional support and activities. We provide care for a range of needs and have an 11-bed secure unit.



*This page:  
Resident Mia Burrows and her  
daughter Jill at Cabrini Residential  
Aged Care in Ashwood.*

**Cabrini Rehabilitation:** This comprises two campuses, Hopetoun Street (which became part of Cabrini in 2007) and Glenhuntly Road (which became part of Cabrini 2010) and a total of 71 beds. Specialist inpatient and outpatient rehabilitation care is designed to restore patients to the best possible level of function.

**Cabrini Palliative Care Prahran:** Established in 1999, this 22-bed specialist palliative care hospital offers a wide range of services including medical support, nursing, pastoral care, counselling, allied health services, music therapy and art therapy. Many more patients receive care and support within our homecare program.

**Cabrini Asylum Seeker and Refugee Health Hub:** Established on the ground floor at 503 Sydney Road, Brunswick, services include GP clinics and specialist mental health services. Further services will include chronic disease management, maternal and child health and infectious disease management, complemented with social, emotional and spiritual support. Medicare-ineligible asylum seekers will receive priority access to our services at no charge.

**Cabrini General Practice:** This well-established family GP clinic, located at 992 Glenhuntly Road in Caulfield South, became part of Cabrini in February 2016. It provides a range of primary healthcare services with male and female GPs available for consultations. We are committed to providing comprehensive general practice care to all individuals and families in this community. New patients are welcome.

#### **Other divisions and services**

**Cabrini Technology:** Cabrini Technology provides an innovative, independent information and healthcare technology service to organisations throughout Australasia and has headquarters in Mount Waverley. It comprises: AWA Technology Services, Cabrini's Centre for Innovation, Chemtronics Biomedical Engineering, Chemtronics Direct, Hospitech Facilities and Asset Management and In-a-Tick Compliance Testing Services. In 2016-17, it acquired Victorian Home Health Equipment.

**Charitable and social services:** Since 1992, we have expressed our missionary identity through charitable and social services. Believing strong and



# 72

*Tonnes of material was processed by our food waste dehydrator in 2016-17*

# 1992

*The year we began our formal program of charitable and social services*

collaborative community partnerships are the best way to address social and economic disadvantage, we endeavour to form long term relationships and to leverage our human, financial and material resources. We seek opportunities for staff to participate which, in turn, enables them to help create a better world. Our program operates on three levels. Locally, we seek to strengthen community capacity and resilience. Our national priorities are the health and wellbeing of asylum seekers, refugees and Australia's First People. Internationally, we focus on strengthening the delivery of health care in the developing world, particularly in Papua New Guinea, Ethiopia and Swaziland.

**Cabrini Institute:** The Cabrini Institute supports research and education activities across the health service, as well as health promotion activities on behalf of Cabrini. Senior medical staff and researchers oversee a diverse research program, as well as developments in clinical education. The research program includes arthritis, back pain, cancer, care of the elderly, health literacy, medicine, nursing, patient safety and surgery. The Cabrini Institute also plays a significant role in the education of our young healthcare professionals. Let's Beat Bowel Cancer,



a Cabrini health promotion initiative, is designed to alert Australians to the major risk of bowel cancer.

**Cabrini Foundation:** Cabrini does not rely on direct government or church funding. The Cabrini Foundation helps Cabrini to deliver essential healthcare services, provide medical equipment and fund programs through workplace giving, major campaigns, direct mail and individual/community donors. Please call the Cabrini Foundation if you wish to assist any Cabrini program on ph (03) 9508 1380. ●

*Opposite page:  
Service engineer Lisa Karpinski  
of Chemtronics Biomedical  
Engineering.*

*This page:  
Compounding pharmacy at  
Cabrini Brighton.*

## A catch for the Cabrini Asylum Seeker & Refugee Health Hub

Dr Ed Sixsmith has a dual role: he works as a paediatric emergency doctor at the Royal Children's Hospital and as a *pro bono* general practitioner (GP) at the Cabrini Asylum Seeker and Refugee Health Hub in Brunswick.

**E**d shares his unusual name with a famous baseball player (1883-1926) who played catcher in the major leagues for the Philadelphia Quakers, USA. In this case, Ed is the catch. He is himself an outsider of sorts – he moved from the UK to Australia six years ago. For the past 18 months, he has volunteered as a GP at the Cabrini Asylum Seeker and Refugee Health Hub. He says he had always wanted to do humanitarian work. In 2015, he spent six months in Paoua, a town in the north of the Central African Republic, at a hospital run by Doctors Without Borders.

On returning from Africa, Ed wanted to find a way to carry on working with people who do not have the same access to the healthcare in which he works every day. "That's why working at the Cabrini Asylum Seeker and Refugee Health Hub is perfect; it gives me that opportunity to give back." Ed says this work provides him with a good balance and that there is a definite need for the service.

"We work with people who have immigrated to Australia but not been given full status, including not being able to work, have access to Medicare, or pharmaceutical benefits," he said. "This is a vulnerable group who are not able to access the benefits that come with living in Australia: they are deprived of their ability to progress to a normal life having escaped from untold horrors – there are huge mental as well as physical health consequences arising from their situation."

Ed says that the country in which you are born has a dramatic effect on your life's path. "Being a white British person gives me a lot of open doors." Ed's volunteer service is undoubtedly helping to open doors for others who have been less fortunate. ●



*Dr Ed Sixsmith volunteers as a GP at the Cabrini Asylum Seeker and Refugee Health Hub.*





## *Our performance, governance and leadership*

At Cabrini, we believe that we are stewards of resources entrusted to us to use for the benefit of others.

*Opposite page:*

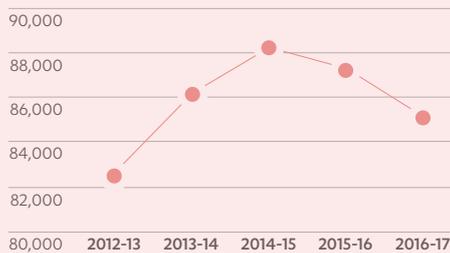
*From left: Cabrini Chief Executive Dr Michael Walsh, Episcopal Vicar for Health, Aged and Disability Care Reverend Monsignor Anthony Ireland, Centre Manager Tracey Cabrié and Executive Director of Mission and Charitable Services Cath Garner at the Cabrini Asylum Seeker and Refugee Health Hub.*



## Our performance

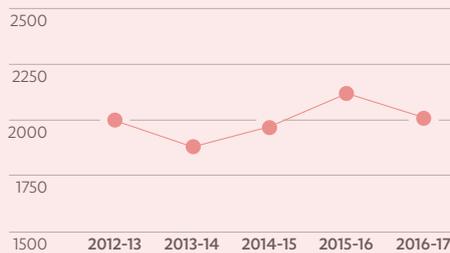
Following is a five-year snapshot of our operational performance across a number of key clinical areas.

### EPISODES OF INPATIENT CARE



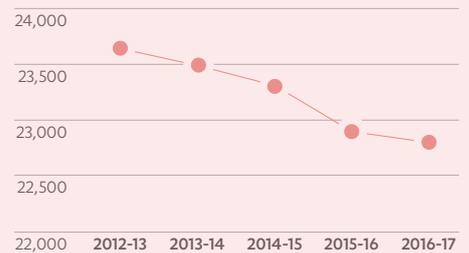
During 2016-17, we provided 85,154 episodes of inpatient care at Cabrini, a decrease of 2162 on last year.

### NUMBER OF BABIES DELIVERED



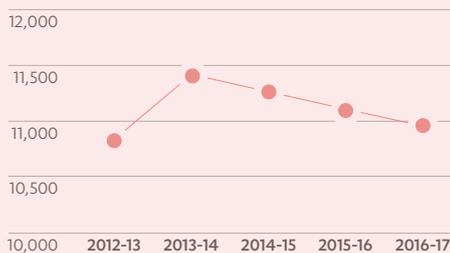
During 2016-17, we helped to deliver 2012 babies at Cabrini Maternity, which was eight fewer than last year.

### NUMBER OF EMERGENCY ATTENDANCES



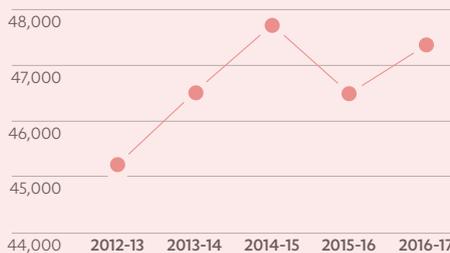
During 2016-17, we received 22,804 presentations at our emergency department located at Cabrini Malvern, 95 fewer than last year.

### NUMBER OF EMERGENCY ADMISSIONS



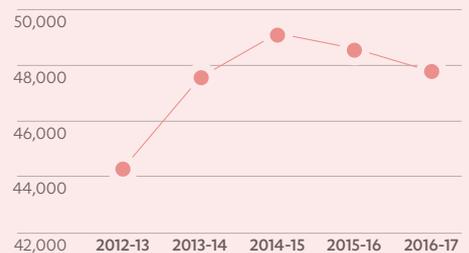
During 2016-17, the number of patients admitted from our emergency department for hospital care was 10,958; this was 152 fewer than last year.

### NUMBER OF SURGICAL OPERATIONS PERFORMED



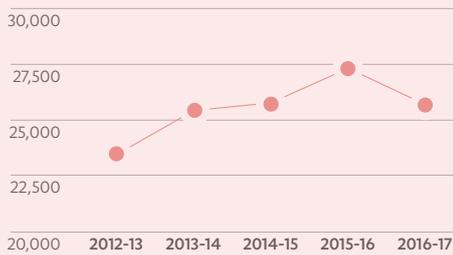
In 2016-17, we provided 47,384 people with surgical operations at our hospitals in Brighton and Malvern; this was 870 more than last year.

### NUMBER OF DAY CASES



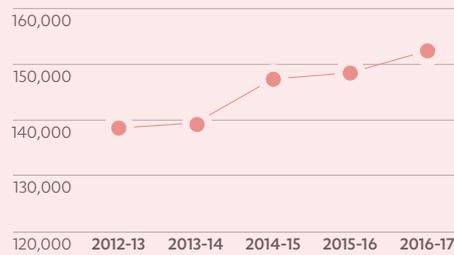
In 2016-17, we treated 47,781 day-case patients; this was 825 fewer than last year.

**NUMBER OF DAY ONCOLOGY PATIENT TREATMENTS**



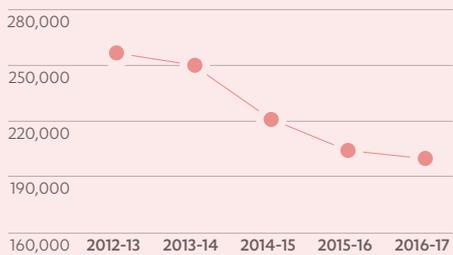
In 2016-17, we provided 25,741 treatments in our day oncology units at our Brighton and Malvern hospitals; this was 1626 fewer than last year.

**NUMBER OF MEDICAL IMAGING PROCEDURES**



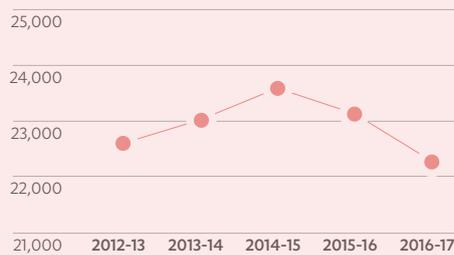
In 2016-17, a record 152,466 medical imaging procedures were performed at Cabrini; this was 3918 more than last year and continues a strong trend of growth in this service.

**NUMBER OF PATHOLOGY EPISODES**



In 2016-17, a total of 200,055 episodes of pathology care were provided at Cabrini; this was 4398 fewer than last year and reflects the change in direction of our pathology operations which became effective in 2015-16.

**NUMBER OF PATIENT BEDDAYS IN CABRINI REHABILITATION**



In 2016-17, we provided 22,287 inpatient beddays at our two Cabrini Rehabilitation hospitals; this was 846 fewer than last year.

## Our Board

A Board of Directors, appointed by the Missionary Sisters of the Sacred Heart of Jesus, governs Cabrini Health Limited. Our Board Directors bring a broad range of experience and skills to the Cabrini Board's governance role.



### Richard Rogers

*Appointed July 2010,  
appointed Chair October 2014*

Richard's professional experience is in retail, property development and business advisory. Richard was co-owner and joint Managing Director of Roger David. He undertakes property development, was Deputy Chair of Gandel Philanthropy and sits as an advisor on company boards. Richard is a mentor to a number of young people in start-up businesses. He has been heavily involved in community activities and is a former President of a number of Jewish community organisations.



### Professor Katie Allen

*Appointed February 2016*

Katie is a paediatrician and medical researcher who has more than 25 years of experience. She is Director of the Population Health Research Theme at Murdoch Children's Research Centre, Professor of Paediatrics at the University of Melbourne and a paediatrician at the Royal Children's Hospital. Katie is a Board member at both the Raising Children Network and Australian Food Allergy Foundation. She holds a Professional Chair in Food Allergy at the University of Manchester UK and is a member of the Australian Institute of Company Directors. Committee service includes the American Academy of Allergy, Asthma & Immunology, the European Academy of Allergy and Clinical Immunology, the World Allergy Organization and the Australasian Society of Clinical Immunology and Allergy. She has honours degrees in medicine and medical science, and a doctoral degree. She is a fellow of both the Royal Australasian College of Physicians and the Australian Academy of Health and Medical Sciences.



### Peter Black

*Appointed October 2012*

Peter Black has a broad range of corporate experience, having held senior roles at the international company Amcor Ltd including ten years as Group General Manager Internal Audit. During this time, the audit department expanded to five international countries. For more than a decade, he has served as a member of the Province Finance Advisory Committee for the IBVM Loreto Sisters' Australian Province, providing commercial advice to the Sisters, covering oversight of their schools across Australia and their Australian and international community projects. Peter holds a degree in commerce from Canterbury University in New Zealand and is a Member of the Institute of Chartered Accountants of Australia and New Zealand.



### Sister Sharon Casey MSC

*Appointed July 2010*

Born in USA, Sister Sharon is a Missionary Sister of the Sacred Heart of Jesus (Cabrini Sister) and has served two terms as a Provincial Councilor for the Stella Maris Province prior to being missioned to Cabrini Australia. Her background is in education and she holds a Master Degree in Religion and Spirituality from New York's Fordham University. Sister Sharon has served as Executive Board Committee Member for Cabrini High School in New Orleans and the Cabrini Centre for Nursing and Rehabilitation in New York.



### **Martin Day**

*Appointed November 2016*

For more than two decades, Martin has held senior executive roles in acute health service in Australian and international markets. He has 14 years of corporate governance experience in the not-for-profit sector including healthcare and industry superannuation. Most recently he was CEO of the private hospitals division of St Vincent's Health Australia. An Adjunct Professor of Australian Catholic University, Martin's qualifications include a Master of Business Administration and an undergraduate degree in valuations and real estate. He is a Fellow of Australian Institute of Company Directors and a graduate of Australian Institute of Superannuation Trustees. His expertise includes risk-management, clinical governance, financial management, stakeholder engagement and public-private partnerships.



### **Sylvia Falzon**

*Appointed July 2010*

Sylvia has worked in the financial services industry for almost three decades. She has held senior executive positions responsible for institutional and retail funds management businesses both domestically and internationally. Her roles have included Head of Business Development at Aviva Investors Australia, an equity partner at Alpha Investment Management and Chief Manager International Sales and Service at National Mutual Funds Management/AXA. Sylvia is currently a non-executive director of ASX-listed companies Perpetual Limited, SAI Global and Regis Healthcare. She is a non-executive director of Museums Board of Victoria. Sylvia holds a Master of Industrial Relations and Human Resource Management (Hons) from the University of Sydney and a Bachelor of Business degree from the University of Western Sydney. She is a senior fellow of the Financial Services Institute of Australasia and holds a graduate diploma from the Australian Institute of Company Directors.



### **Jeff Gleeson QC**

*Appointed August 2015*

Jeff is a barrister who practises across a number of commercial areas, including professional negligence, building and construction, insurance law, sports law, superannuation, inquests, inquiries and defamation law. He was appointed Queen's Counsel in 2007.



### **Peter Mahon**

*Appointed July 2010*

Peter is CEO of corporate advisory firm Royce Communications. He has extensive communications experience in the corporate, government and not-for-profit sectors. Peter's healthcare experience includes the Commonwealth Department of Health and Ageing, Therapeutic Goods Administration, Victorian and Commonwealth Departments of Human Services, Medicare Australia, GMHBA, Royal Children's Hospital, Mercy Hospital for Women, St Vincent's Health, Affinity Health, Villa Maria Society, Freemasons Hospital and the Catholic Archdiocese of Melbourne. Peter holds a Bachelor of Economics degree from Monash University. He is a former member of the Xavier College School Council, Chairman of the Xavier Foundation and the Sacre Coeur Foundation. Peter is a member of the Salvation Army Board of Advice.

## Our Board continued



### Father Laurence McNamara CM

*Appointed October 2012*

Fr McNamara is a Vincentian priest and moral theologian. He is parish priest of St Joseph's Malvern and Senior Lecturer in the Department of Moral and Practical Theology at Catholic Theological College, MCD University of Divinity, Melbourne. He has lectured at St Francis Xavier Seminary, Adelaide College of Divinity, Flinders University and the Catholic Institute of Sydney. Fr McNamara is a graduate of the Gregorian University, Rome, and Oxford University. He received his doctorate from the University of Adelaide. Fr McNamara has been Deputy President of the Catholic Institute of Sydney and President of the Catholic Moral Theology Association of Australia and New Zealand and a member of human research ethics committees for health and public sector organisations.



### Dr Paul Nisselle AM

*Appointed October 2014,  
retired November 2015*

Paul is a general medical practitioner (GP) who has extensive experience in medical indemnity insurance, as well as medical law and clinical risk management. He works as a sessional GP and is a consultant with MDA National and the Cognitive Institute. He is a Fellow of the Royal Australian College of General Practitioners, a Foundation Fellow of the Faculty of Forensic and Legal Medicine, Royal College of Physicians (England) and holds a Master of Health and Medical Law from the University of Melbourne. He was made a Member of the General Division of the Order of Australia (AM) in 2013 "for service to medicine and the medical profession through contributions to a range of government and professional organisations and to the community through youth welfare and cultural groups".



### Professor Robyn O'Hehir AO

*Appointed September 2010*

Robyn is Professor/Director Allergy, Immunology and Respiratory Medicine, Central Clinical School, Monash University and the Alfred Hospital, Deputy Head, Central Clinical School, Monash University and Deputy Head Research, Alfred Health. She is a consultant physician, educator and internationally renowned researcher in allergy and anti-inflammatory therapies who has received substantial grant support from the National Health and Medical Research Council. Robyn was elected a Fellow of the Australian Academy of Health and Medical Sciences and a Fellow of the Thoracic Society of Australia and New Zealand in 2015 and she was made an Officer of the Order of Australia in 2016. Robyn is a Life Governor of Asthma Victoria and a member of Council of the Sir Robert Menzies Memorial Foundation.



### Sneza Pelusi

*Appointed October 2014*

Sneza has worked with Deloitte Australia for 24 years including 14 years' experience as an audit partner. She holds a Bachelor of Commerce, is a member of the Institute of Chartered Accountants in Australia and is a registered company auditor. She has worked in Perth, Melbourne and Jakarta. Since October 2008, Sneza has led the Deloitte Victorian Assurance and Advisory practice nationally and is a member of the firm's national executive. Previously she led the Deloitte Victorian Assurance and Advisory Practice and was a member of its Victorian and national executive.

**Anthony Rice**

*Appointed November 2016*

Anthony is a Managing Director within Macquarie Group's investment banking division, Macquarie Capital, where he has worked since 2004 advising companies in the real estate and healthcare sectors in relation to equity and debt-raising, mergers and acquisitions, and corporate strategy. Previously he was with JPMorgan's investment banking division where he advised a range of financial and general industrial companies. Anthony holds a Bachelor of Business and a Master of Applied Finance, and he is a member of the Institute of Chartered Accountants Australia.

## Invitees to the Cabrini Board



### Dr Antonio Grossi

*Invitee since January 2016*

Currently Antonio is the Chair of Medical Staff at Cabrini and in this role, he is an invitee to the Cabrini Board of Directors. In 2001, he was appointed as a consultant anaesthetist at Cabrini. Since 2004, Antonio's many contributions have included involvement in the administration of the anaesthetic department and craft group. He is deputy director of Cabrini's department of anaesthesia and pain management. Antonio is present Chair of the Professional Issues Advisory Committee of the Australian Society of Anaesthetists and a member of the Victorian Anaesthetic Group. A graduate of the Australian Institute of Company Directors, he is currently studying a Master of Health Administration at Monash University.



### Judy Hacker

*Invitee since March 2016*

Judy has more than 30 years' experience in the corporate world driving the strategic direction of major brands such as Estee Lauder, Yellowglen, Decore, Uncle Tobys and Wolf Blass. In 2007, Judy established her own business Maxim Marketing and works with organisations to strengthen their brands through strategic focus. In 2002, she completed Leadership Victoria's Williamson Community Leadership Program. Since then, Judy has volunteered with a range of not-for-profit organisations and has been on the board of Amaze (Autism Victoria), FareShare, Choir of Hard Knocks and Extended Families. Presently Judy is on the Board of Women's Health Victoria.



### Alison Moran

*Company Secretary since July 2015*

Alison is a qualified legal practitioner admitted to practise in Victoria and Western Australia. She is a graduate of the University of Melbourne and former General Counsel of Corrs Chambers Westgarth. Alison has more than 20 years' legal experience including significant board and corporate governance experience. She supports the Chairman and the Chief Executive in the management of the Cabrini Board of Directors and Board Committees. As well as her law degree, Alison has a Graduate Diploma in Applied Corporate Governance. She is a member of the Governance Institute of Australia.



### Dr Michael Walsh

*Chief Executive since 2008*

Dr Michael Walsh has been Chief Executive of Cabrini Health Limited since December 2008. He has a distinguished career in hospital and health administration in Victoria, Western Australia, the UK and the Middle East. Michael is a medical graduate of Monash University and holds a Master in Public Administration from the Kennedy School of Government, Harvard University. He is a Fellow of the Royal Australasian College of Medical Administrators and the Australasian College of Health Service Managers. Michael is appointed as a Company Secretary of Cabrini Health Limited.

## Board committees

The Cabrini Health Board of Directors was supported by eight Board Committees during 2016-17:

- Cabrini Audit and Risk Management Committee
- Cabrini Human Research and Ethics Committee
- Cabrini Foundation Board
- Cabrini Institute Council
- Cabrini Mission and People Committee
- Cabrini Patient Experience and Clinical Governance Committee
- Cabrini Nominations Committee
- Major Construction Projects Committee

The responsibilities and work undertaken by each of these committees are outlined as follows.

### **Cabrini Audit and Risk Management Committee**

*Chair: Peter Black*

The Audit and Risk Management Committee is appointed by the Board to assist it in fulfilling its governance responsibilities in relation to the financial management of Cabrini.

### **Cabrini Foundation Board**

*Chair: Sylvia Falzon*

The Cabrini Foundation Board is appointed by the Board to assist it in fulfilling its governance and oversight responsibilities relating to fundraising. This Board oversees and guides all fundraising activities for, on behalf of, or under the auspices of Cabrini.

### **Cabrini Human Research Ethics Committee**

*Chair: Dr Margaret Staples*

The Cabrini Human Research Ethics Committee reports to the Board and is responsible for reviewing and approving research projects that involve human participants and 41 are being conducted at Cabrini. It ensures that the research affirms the mission and values of Cabrini and the Catholic Church. It also ensures that ethical standards are maintained in research projects to protect the interests of the research participants, the investigator and Cabrini.

### **Cabrini Institute Council**

*Chair: Professor Peter Fuller*

The purpose of the Institute Council is to develop, support and promote the clinical education and research activities of Cabrini. It acts as the principal advisor on Cabrini's education, research and health promotion strategies and governs/oversees the conduct of the Cabrini Institute.

### **Cabrini Mission and People Committee**

*Chair: Sister Sharon Casey MSC*

The Mission and People Committee is appointed by the Board to assist it in fulfilling its governance and oversight responsibilities relating to Cabrini's identity and purpose including organisation culture, ethical practice, community benefit and community partnerships.

### **Cabrini Nominations Committee**

*Chair: Richard Rogers*

The Nominations Committee is appointed by the Board to assist the Board fulfil its governance and oversight responsibilities relating to the Board and Board Committee composition, performance and succession planning.

### **Cabrini Patient Experience and Clinical Governance Committee**

*Chair: Dr Paul Nisselle AM*

The Patient Experience and Clinical Governance Committee is appointed by the Board to assist it in fulfilling its governance and oversight responsibilities relating to the key principles of clinical governance and to ensure governance systems are in place that maintain and improve the reliability and quality of patient care, as well as improve patient outcomes.

### **Major Construction Projects Committee**

*Chair: Richard Rogers*

The Major Construction Projects Committee was established in September 2015 to provide governance oversight on behalf of the Board of major capital construction works undertaken by Cabrini, where those works have an anticipated cost of \$25m or more.

## Our Executives

A Board of Directors, appointed by the Missionary Sisters of the Sacred Heart of Jesus, governs Cabrini Health Limited. Our Board Directors bring a broad range of experience and skills to the Cabrini Board's governance role.



### Dr Michael Walsh

#### *Chief Executive*

Michael has been Chief Executive of Cabrini Health Limited since 2008. He has a distinguished career in hospital and health administration in Victoria, Western Australia, the UK and the Middle East. He is a medical graduate of Monash University and holds a Master in Public Administration from the Kennedy School of Government, Harvard University. Michael is a Fellow of the Royal Australasian College of Medical Administrators and the Australasian College of Health Service Managers. He is appointed as Ministerial Delegate to the Board of Goulburn Valley Health.



### Jason Aquilina

#### *Chief Financial Officer*

Jason Aquilina, who joined Cabrini in 2011 as Director of Finance, was appointed Chief Financial Officer in August 2017. In this role, he has executive responsibility for Cabrini's patient accounts, payroll, accounts payable, management accounting, private health funds, and finance and treasury functions. Before Cabrini, Jason worked in transport and logistics, where he held multiple finance roles including leading the accounting teams for various large infrastructure and information technology projects. Jason is a certified practising accountant and holds a Bachelor of Business degree majoring in accounting and economics.



### Professor Leanne Boyd

#### *Executive Director, Nursing and the Cabrini Institute*

Leanne joined the Executive Committee in August 2014 as Executive Director of Nursing and Cabrini Institute. She has a clinical background in critical care and began working at Cabrini in 2012 as Director of Education and Staff Development. Leanne has more than 20 years' experience in health professional education. Previously, she worked at Monash University as Director of Academic Programs (Middle East) and Head of Department, Community Emergency Health and Paramedic Practice. Leanne holds postgraduate qualifications in education and critical care from Monash University and a Master of Tertiary Education Management from the University of Melbourne.

### Jessica Chia

#### *Chief of Strategy and Business Development*

Jessica Chia was appointed to her current role in April 2017. She is responsible for leading strategy, business development and marketing across Cabrini. As a career strategist, Jessica has 14 years' experience in corporate, business and people strategy spanning industries that include financial services, professional services, fast-moving consumer goods, health and transport.



### Judith Day

*Executive Director,  
Commercial Services and  
Business Systems and  
Deputy Chief Executive  
(resigned February 2017)*

Judith has worked at Cabrini for 11 years. She is a Certified Practising Accountant and completed a Master of Business Administration from the University of Adelaide. Judith has 20 years' experience in the health sector. Previously, she was Director of Finance and Administration at St Andrew's Hospital in Adelaide. Prior to that, she worked in various roles at Faulding Healthcare, Flinders Medical Centre and Ashford Community Hospital. Her responsibilities include finance, payroll, information technology, health information services and health fund contracts.



### Geoff Fazakerley

*Executive Director,  
Diagnostics, Major Projects  
and Infrastructure*

Geoff began working for Cabrini in 1985 and in 1990 became Director of Support Services until 1997, when he was made Director of Building and Business Development. In 2009, Geoff was appointed to the position of Executive Director, Diagnostic Services and Infrastructure. He also holds executive responsibility for major projects including the Gandel Wing at Cabrini Malvern. Geoff has played an integral part in overseeing the development and expansion of Cabrini Health, including our premises at Ashwood, Brighton, Elsternwick, Hawthorn, Malvern and Prahran.



### Mary-Anne Gallagher

*Executive Director,  
People and Culture*

In August 2014, Mary-Anne was appointed to her current role. Previously, she worked in the role of Principal Consultant, Organisation Development reporting to the Chief Executive, appointed in 2010. Mary-Anne is a registered psychologist who has worked in human resources for more than 25 years in private and public sector organisations including finance, corporate rehabilitation, environmental management, public and private health and tertiary education. She has held roles as director of organisation development and human resources at a global level in complex, dispersed organisations. Mary-Anne holds a Bachelor of Science, a Graduate Diploma in Applied Psychology and a Master of Science in Positive Organisation Development.



### Cath Garner

*Executive Director,  
Mission and Strategy*

Cath has a background in nursing and education and in 2002, she was appointed as Mission Integration Officer, joining the Executive Committee in 2007. She has worked in Australian healthcare for almost three decades in a wide range of key clinical, staff development and management roles. She holds postgraduate degrees in education, information systems, innovation/service management and theology. She oversees Cabrini Health's social outreach and community engagement programs.

## Our Executives continued



### **Dr Peter Lowthian**

*Executive Director,  
Medical Services*

In August 2014, Peter was appointed to his current role responsible for medical services and clinical governance. From 2002-2014, Peter was Executive Director of the Cabrini Institute and gained executive responsibility for clinical governance in 2013. He is a rheumatologist and a graduate of Monash University. Peter is a Fellow of the Royal Australasian College of Physicians, of the Australian Faculty of Rehabilitation Medicine, of the Royal College of Physicians London and of the Royal Australian College of Medical Administrators.



### **John Papatheohari**

*Chief Information Officer*

John joined in 2015. Previously, he was General Manager of Health Shared Services for five years, providing mission-critical information technology services across the Victorian public health sector. He made the transition to industry after 26 years working as a management consultant. During his career, John has led a diverse range of organisations, working at the intersection of business and technology, and has had extensive global exposure. Over his time at Cabrini, John has balanced establishing strategic direction with effecting operational improvement. He holds a Bachelor of Business and is an Associate Member of the Institute of Chartered Accountants.



### **Adjunct Associate Professor Natalie Sullivan**

*Executive Director of Brighton  
and Continuing Care*

Natalie joined Cabrini in 2010 and oversees five clinical campuses including our acute hospital in Brighton, palliative care, two rehabilitation hospitals, residential aged-care and Cabrini's chronic disease programs. In 2012, Natalie assumed executive leadership for patient experience. Her background is in allied health as a prosthetist/orthotist. She is recognised as a Fellow of the Australasian College of Health Service Management, holds a Master of Health Administration, and is a graduate of the Australian Institute of Company Directors. Prior to joining Cabrini, Natalie worked in public health in executive and general management roles leading groups of hospitals and network-wide health services.



### **Tim Staker**

*National General Manager,  
Cabrini Technology*

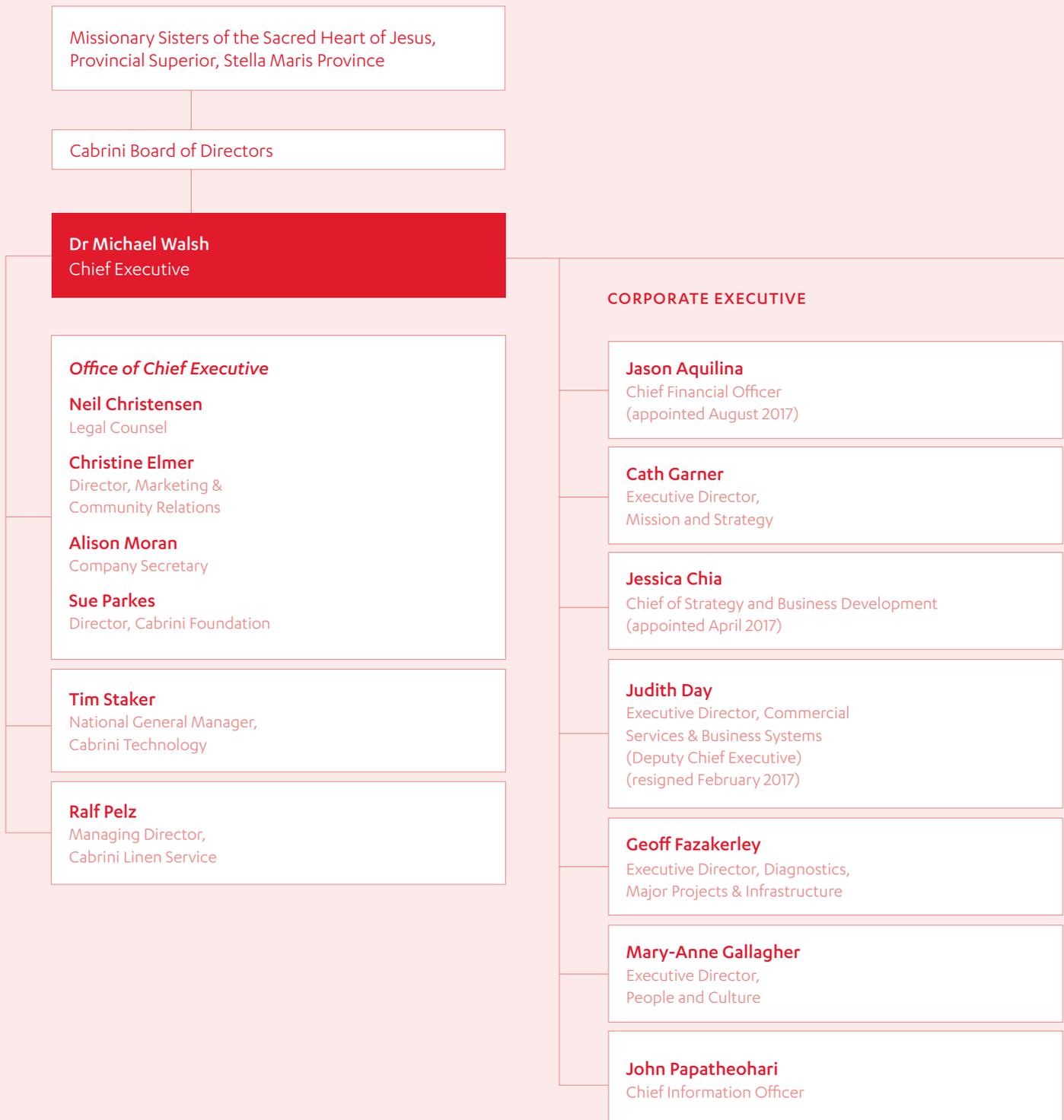
Tim Staker joined Cabrini in 2002 and leads Cabrini Technology which has over 450 staff operating throughout Australia and New Zealand, comprising AWA Technology Services, Chemtronics Biomedical Engineering, Chemtronics Direct, Hospitech Facilities and Asset Management, In-a-Tick Compliance Testing Services, Assistive Living Technologies & Equipment Resources and Victorian Home Health Equipment, as well as Cabrini's Centre for Innovation. He holds a Master of Business Administration, a Graduate Diploma in Technology Management and a Diploma in Biomedical Engineering. Previously Tim held senior positions with a large multinational provider of non-clinical services and has more than a decade of management experience working in the public health sector. He serves as a Board member for Breastscreen Victoria, where he chairs the Information Technology & Communication Board Subcommittee.

**Dr Simon Woods**

*Executive Director, Malvern*

Simon trained as a general surgeon specialising in upper-gastrointestinal surgery. He has worked in public and private hospitals in Australia, Scotland and Hong Kong. Simon was head of unit at the Alfred, Melbourne. From 2007-2014, he was Medical Director and subsequently Executive Director of Medical Services for Cabrini, ultimately ceasing his clinical practice. In 2014, Simon was appointed to the position of Executive Director of Cabrini Malvern, with overall operational responsibility for this acute tertiary hospital, as well as Cabrini Pharmacy. He has been closely involved with the development of Cabrini's clinical services plan. Simon is a medical graduate of Melbourne University, a Fellow of the Royal Australasian College of Surgeons and the College of Surgeons of Hong Kong and has an MBA (Executive), with distinction from RMIT University.

## Our organisation chart



**CLINICAL EXECUTIVE**

**Professor Lee Boyd**

Executive Director, Nursing  
and Cabrini Institute

**Dr Peter Lowthian**

Executive Director,  
Medical Services

**Adjunct Professor**

**Natalie Sullivan**

Executive Director,  
Brighton and Continuing Care

**Dr Simon Woods**

Executive Director, Malvern

## Our supporters

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 Yvonne Thompson  
 Joan and Roderick Thomson  
 Cornelis Van Ek  
 Alice Vaughan  
 B & A Wain  
 Mr Max Walters

In Memory of Geoffrey Robin  
 Westacott  
 Marcia Williams

### BEQUESTS

In Memory of Claire Abrahams  
 Estate of Gustav GH Apituley  
 Estate of Ellen M Balderstone  
 Estate of Nola Barnes  
 Estate of Carmel Mary Blanton  
 Estate of Doris Elaine Boyd  
 Mrs Ann Brewer  
 Estate of Rosina Violet Brown  
 Estate of Nance Nevasa  
 Buchanan  
 Estate of Agnes Ferguson Clark  
 Estate of Annie Marjorie  
 May Clarke  
 Roger John Cleary  
 Estate of Joyce Mena Coxall  
 Estate of David Roy Cross  
 Estate of John Lawrence  
 De Yong  
 Rino Della Bosca  
 Estate of John Robert Edwards  
 Estate of Dr Betty Elliott  
 Estate of Barbara Feil  
 In Memory of Hubert Frances  
 & Margaret Mary McCarthy  
 Estate of Harold Francis  
 Estate of U M Frawley  
 Estate of Dorothy Cecelia  
 Garbutt

Estate of John Sutherland Hamling

Estate of Pamela Mary Harper

Estate of Noel Arthur Hatherly

Estate of Mary Kathleen Hauser

Estate of Doris Mary Hawkless

Estate of Rita Mae Hunt

Estate of Doreen Johnson

Estate of Heather Jones

Estate of Valda Irene Keil

Estate of Irene Kozica

Estate of Dr Maureen Mackay

Estate of Robert Mackey

In Memory of Mrs Katherine Jane Mactier

Rita Anversa Magris

Estate of Brian Charles Mander

Estate of Katherine Mander

Estate of June Masson

In Memory of Kiril Miltenov

Estate of Marita Therese Mulcahy

Estate of Marjorie May Murdoch

Estate of Rex Oxnam

Estate of Leslie Charles Parkinson

Estate of Russell Pitt

Estate AV Powers

Estate of Lindsay G Quinn

Estate of William Clifford (Peter) Rawlins

Estate of Alexander Graeme Robertson

Estate of Anthony Carmel Saccasan

Estate of Grace Saunders

Mrs E C Seccull

Estate of Alan Selwyn

Estate of Leslie Alfred Shapland

Estate of Carl & June Simpson

Estate of Maria (Lina) Concetta Sinelli

Bella Taft

Estate of Hugh L Wallace

Estate of Wilma Elsa White

Estate of Betty Geddes Wood

The Estate of Vica Vitea Yavitch

#### **IN MEMORIAM**

Mr Christopher Bedelis

Dr Katrina Bottomley

John William Clapham

Kevin Elias

Walter Lyle Fish

Kerrie Hunter

Patricia Janes

Stephen Kelly

Dr Angela Marks

Mrs Christine Potts

Joyce Reed

Timothy Russell

In Memory of Richard John Savill

In Memory of John Selwyn,  
Our Beloved Husband & Father,  
from his Wife & Daughters

In Memory of George & Mira Szalmuk – The Szalmuk Family

Charlotte Tait

Geoffrey Robin Westacott

#### **PALLIATIVE CARE EDUCATION AND RESEARCH**

Brian H Gillies Palliative Care Research Fund

Brian H Gillies Travel Scholarship for Palliative Care Nurses

Sarah Miskin Palliative Care Nursing Scholarship

John Allison Monkhouse Palliative Care Scholarship

Mayer Page Research Fellow



## OUR HERITAGE STORY

Francesca Cabrini was born in northern Italy in 1850. Inspired by her deep faith in Jesus Christ, she was a woman of great compassion and courage. She saw her life as a mission to relieve suffering and serve those in need – particularly the poor and excluded. She established health, education and care centres in the USA and Latin America, in Europe and in England, becoming an inspiration to all whose lives she touched. She was the first citizen of the USA to be canonised a saint. At age 30, she founded the Missionary Sisters of the Sacred Heart of Jesus to show God's love for people through their compassionate action in the world. Today their mission reaches around the world, and includes Cabrini Health in Australia.

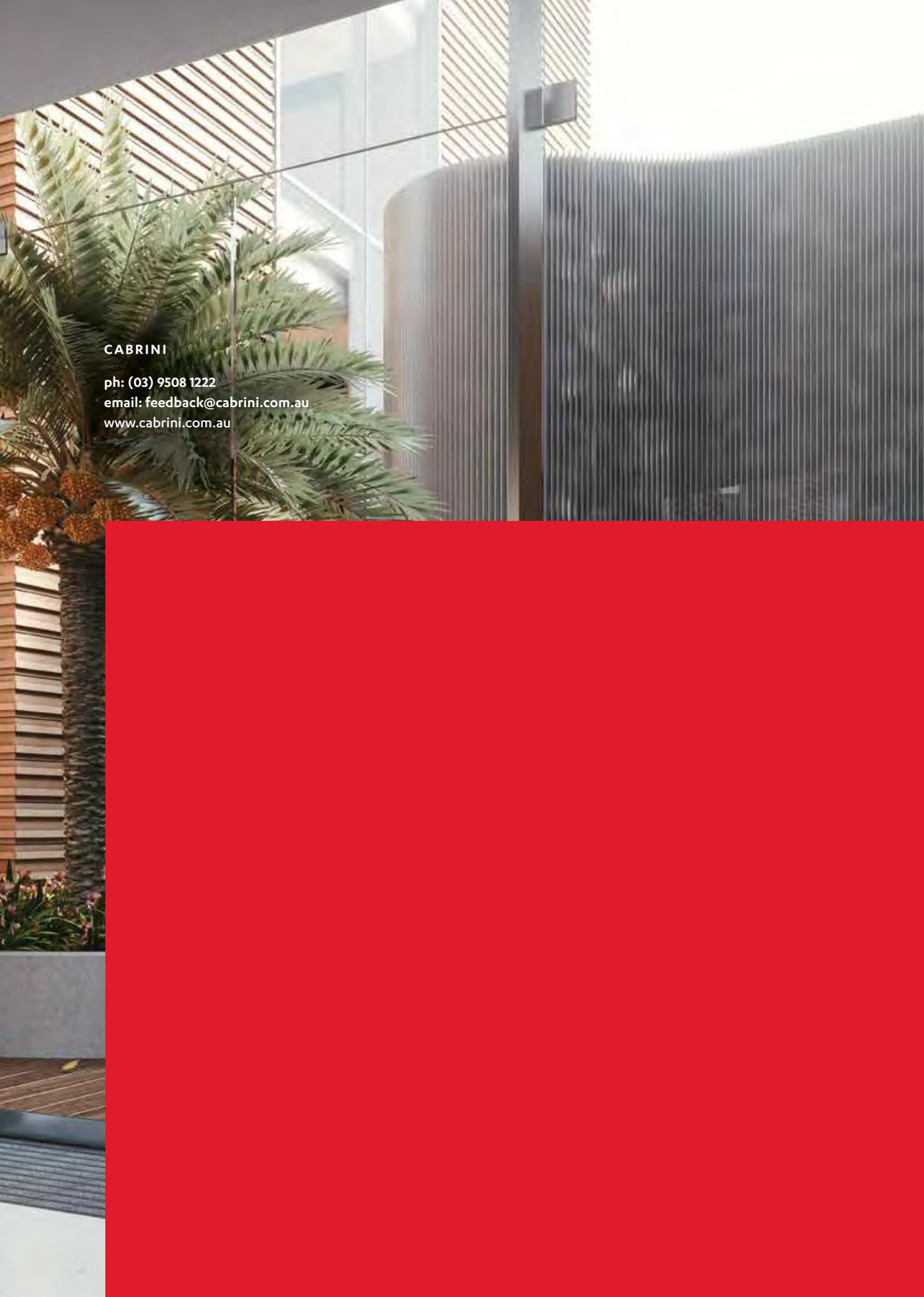
Our Cabrini story started in 1948, when ten Cabrini Sisters arrived in Melbourne to take over St Benedict's, a small hospital

in Malvern. The journey from Italy took ten days as the plane could only fly during daylight hours. The Sisters thought they were taking over a fully functioning hospital but unfortunately, this was not so. Without losing spirit, they worked hard to equip and make the place presentable so that they could re-open the facility. At the time, Melbourne was not the multicultural city that we know today. People were cautious of these Italian sisters who dressed and spoke differently to the Australian religious of the time. Despite their best efforts, in the first few months there were many complaints about their strange ways. However, the Sisters recognised there were people in need and, with courage and determination; they laid the foundation for the comprehensive healthcare service we have become today.

# 1948

*Ten Cabrini Sisters arrived in Melbourne to take over a small hospital in Malvern and laid the foundation for the comprehensive healthcare service we have become today.*



A photograph of a modern building facade featuring a combination of glass panels and horizontal wood slats. In the foreground, there are lush green plants, including palm trees and smaller foliage. A large, solid red rectangular block covers the bottom half of the image. Contact information is overlaid on the left side of the image.

**CABRINI**

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