



LITTLE COMPANY OF MARY  
HEALTH CARE LIMITED  
**ANNUAL REVIEW**

Continuing the Mission of the Sisters of the Little Company of Mary

2015/2016

# Spirit of Calvary

Being for Others

**Everyone is welcome.**

You matter. We care about you.

Your family, those who care for you, and the wider community we serve, matter.

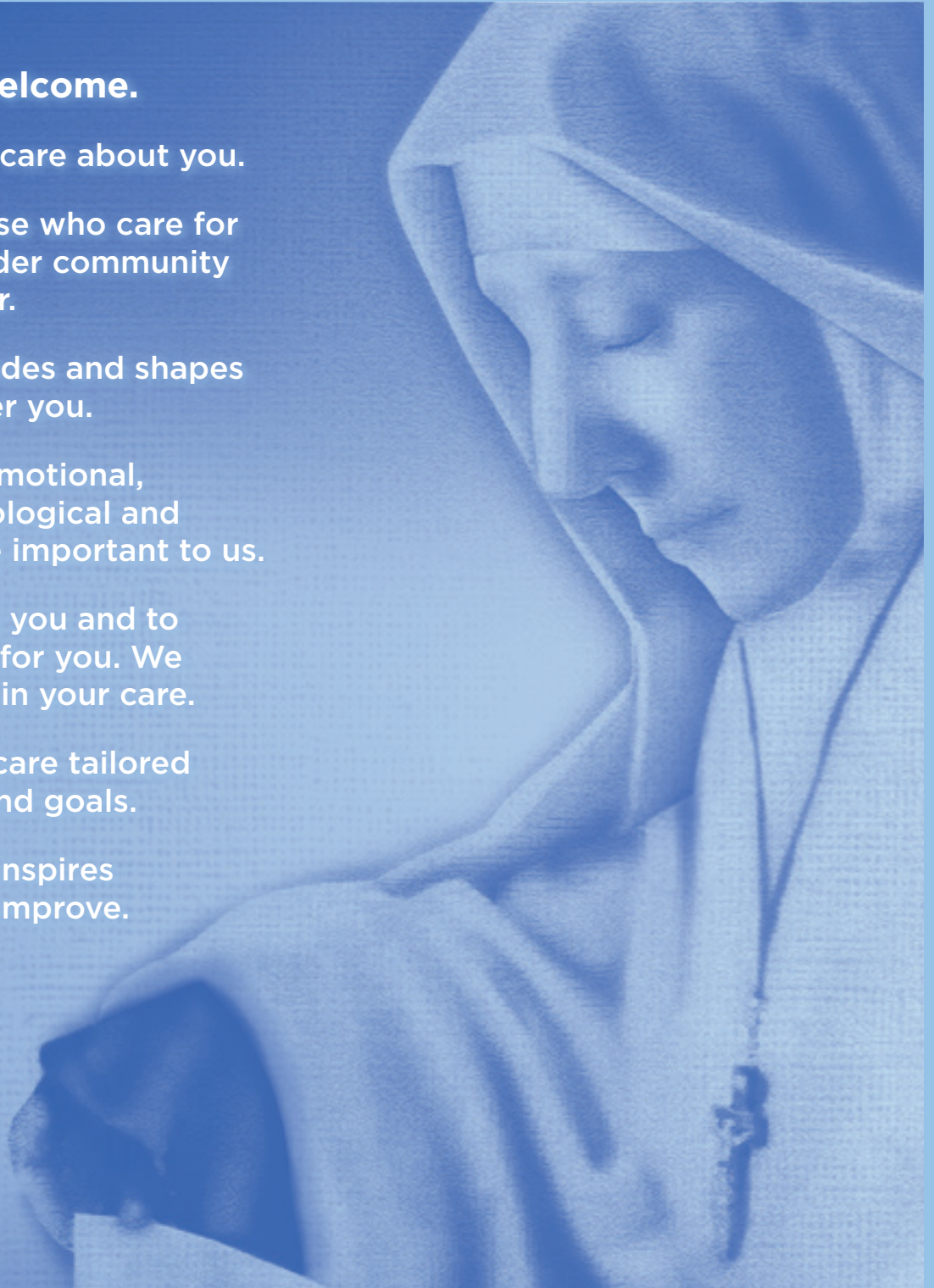
Your dignity guides and shapes the care we offer you.

Your physical, emotional, spiritual, psychological and social needs are important to us.

We will listen to you and to those who care for you. We will involve you in your care.

We will deliver care tailored to your needs and goals.

Your wellbeing inspires us to learn and improve.





### 1885-2016

131 years ago, six courageous Sisters of The Little Company of Mary sailed from Naples to Sydney on the SS Liguria. Their mission was to care for the poor, sick and dying. Bringing forth the work of Mary Potter in Australia, their vision was to continue to be a source of healing, hope and nurturing to those in need.

#### Acknowledgement of Land and Traditional Owners

Calvary acknowledges the Traditional Custodians and Owners of the lands on which all our services operate. We acknowledge that these Custodians have walked upon and cared for these lands for thousands of years. We acknowledge the continued deep spiritual attachment and relationship of Aboriginal and Torres Strait Islander peoples to this country and commit ourselves to the ongoing journey of Reconciliation.

Aboriginal and Torres Strait Islander people are respectfully advised that this publication may contain the words, voices, names, images and/or descriptions of people who have passed away.

Calvary is pleased to be recognised as a leader in gender equality by the Workplace Gender and Equality Agency.



## Our Mission

"We bring the healing ministry of Jesus to those who are sick, dying and in need through 'being for others':

- + In the Spirit of Mary standing by her Son on Calvary;
- + Through the provision of quality, responsive and compassionate health, community and aged care services;
- + Based on Gospel values; and
- + In celebration of the rich heritage and story of the Sisters of the Little Company of Mary.

## Our Vision

As a Catholic health, community and aged care provider, to excel, and to be recognised, as a continuing source of healing, hope and nurturing to the people and communities we serve.

## Our Values

Our values are visible in how we act and treat each other. We are stewards of the rich heritage of care and compassion of the Little Company of Mary. We are guided by these values:

- + **HOSPITALITY** demonstrates our response to the desire to be welcomed, to feel wanted and to belong. It is our responsibility to extend hospitality to all who come into contact with our services by promoting connectedness, listening and responding openly.
- + **HEALING** demonstrates our desire to respond to the whole person by caring for their spiritual, psychological and physical wellbeing. It is our responsibility to value and consider the whole person, and to promote healing through reconnecting, reconciling and building relationships.

+ **STEWARDSHIP** recognises that as individuals and as a community all we have has been given to us as a gift. It is our responsibility to manage these precious resources effectively, now and for the future. We are responsible for: striving for excellence, developing personal talents, material possessions, our environment, and handing on the tradition of the Sisters of the Little Company of Mary.

+ **RESPECT** recognises the value and dignity of every person who is associated with our services. It is our responsibility to care for all with whom we come into contact with justice and compassion, no matter what the circumstances, and we are prepared to stand up for what we believe and challenge behaviour that is contrary to our values.

## About Calvary

Calvary is a charitable Catholic not-for-profit organisation with more than 12,000 staff and volunteers, 15 public and private hospitals, 15 retirement and aged care facilities, and a national network of community care centres. We operate across six states and territories within Australia. Established in Sydney in 1885, by the arrival of the Sisters of the Little Company of Mary in Australia, our mission is to provide health care to the most vulnerable, including those reaching the end of their life. We provide aged and community care, acute and sub-acute health care, specialist palliative care and comprehensive care for people in the final years of their life.

Full details of our locations are featured on the back page.

# Growth, Innovation and Integration

This year our theme 'Growth, Innovation and Integration' profiles our focus on growing Calvary's organisational capability in smart and innovative ways. Our vision is to deliver integrated models of care that ensure optimal health outcomes for the recipients. As always, serving our communities is at the centre of everything we do.

We invite you to read and enjoy their stories, they are our reason for being.

Our front cover features Portia Jamu (also pictured below), Registered Nurse at Calvary Health Care Bethlehem hospital in Caulfield, Victoria.



## Calvary at a glance

Year to 30 June 2016

### HOSPITALS

199,518 Admissions

443,942 Outpatients

116,390 Emergency  
Department  
Presentations

4,714 Births

100,813 Surgical  
Procedures

### COMMUNITY CARE

Approx 16,156  
Average number of  
individual clients  
per year

Approx 9,800  
Average number of  
clients receiving a  
service at any one  
time

Approx 900,000  
Average visits

1.2 million  
Average annual  
hours

## Contents

- 05 FOREWORD FROM  
THE CHAIR OF  
CALVARY MINISTRIES
- 06 MESSAGE FROM  
THE CHAIR LITTLE  
COMPANY OF MARY  
HEALTH CARE BOARD
- 07 A YEAR IN REVIEW
- 08 THE SPIRIT OF  
CALVARY
- 10 CELEBRATING THE  
PAST, EMBRACING  
THE FUTURE
- 12 DEVELOPMENTS AND  
UPGRADES
- 16 SERVING OUR  
COMMUNITIES
  - 23 FUNDRAISING
  - 24 VOLUNTEERS
  - 28 COMMUNITY CARE
- 30 EXCELLENCE IN  
CARE
- 38 OUR PEOPLE AND  
CULTURE
- 46 WISE STEWARDSHIP
- 50 OUR TRUSTEES,  
BOARD, EXECUTIVE  
TEAM AND SERVICES
- 64 CALVARY DIRECTORY

### RETIREMENT COMMUNITIES

20 residents over  
the age of 100

359 residents over  
the age of 90

OF WHOM 66 LIVE IN  
INDEPENDENT LIVING  
VILLAGES

770 new admissions

+ 406 ADMISSIONS TO  
RESIDENTIAL AGED CARE  
FACILITIES (excluding respite)

+ 318 RESPITE ADMISSIONS TO  
RESIDENTIAL AGED CARE

+ 46 ADMISSIONS TO  
INDEPENDENT LIVING  
VILLAGES



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## Foreword from the Chair of Calvary Ministries

**"In those days we possessed great liberty of spirit, fear and restraint were unknown to us, and love was our guiding star. Mary Potter always told us to follow the Ignatian rule, "Love God and your sisters, and do what you wish".**

Sister Sr Brigid Rosser, LCM, one of the founding Sisters who arrived in Sydney on 4 November 1885.

As we mark the 75th Anniversary of our service at Calvary Health Care Bethlehem in Melbourne and the 50th Anniversary of Calvary Health Care Kogarah in Sydney, it is apposite to reflect on the founding spirit of the Sisters of the Little Company of Mary who first arrived in Australia 131 years ago.

Sister Brigid Rosser remarks on their great liberty of spirit, their energy and agility in the service of people who needed their care.

Reflecting some fifty years later, Sr Brigid closed a journal she had kept from the beginning with these words:

*"...a work whose foundations were laid in dire poverty and planted deep in the Cross. Does this not teach us what a mighty tree grows from the Mustard Seed, watered and nurtured by the early traditions of our young Congregation. And as another era has begun, may each year unfold golden sheets, surpassing far anything that has gone before..."*

Sister Brigid Rosser, LCM

The work and sacrifice to God and humanity of these Sisters has set the foundations for what Calvary is today.

And, in the spirit of the Foundation Sisters, it is our people who make Calvary the thriving spiritual hub of quality care, healing and nurturing of life that it is today. The centre and heart of our mission are the people with whom our staff and volunteers interact with each and every day - our patients, residents, clients, their families and carers.

One recurring theme in all of our work, as reflected in the Spirit of Calvary, is "being for others". Our work today, whether in a hospital, aged care facility or working with people and families in the community, is for the well-being and healing of people. The service of Calvary today, as evidenced in this annual review, continues the work the Sisters of the Little Company of Mary commenced in 1885.

The Directors of Calvary Ministries are delighted with the new Mission Accountability Framework, adopted in April 2016. This Framework assures us that our mission integration and effectiveness is being well nurtured and well monitored.

I thank both the Board of Directors and the National Leadership Team for their dedication. Their attention to detail



Bill d'Apice

and their stewardship of our continued mission is very much appreciated. We are exceptionally proud of the achievements and investment in our calling to assist those in need of our care.

We are warmed by the stories of staff and volunteers who do a great job but also go above and beyond to make life better for the communities we serve.

We offer our continued support and assure all that you continue to be in our thoughts, hopes and prayers. On behalf of Calvary Ministries, we thank you all for carrying on the important work and traditions of the Sisters of Little Company of Mary.

**BILL d'APICE,  
CHAIR, CALVARY MINISTRIES**

# Message from the Chair

**It is with great pleasure and a sense of privilege that I write about this year's achievements on behalf of the Board of Directors.**

We are a growing organisation. Significantly, we have commenced building a new 94 bed Private Hospital in the ACT, a new aged care facility in Muswellbrook, NSW and entered into an agreement to build a new 342 bed private hospital in Adelaide. We have opened the Mary Potter Palliative Care and St Joseph's Rehabilitation Units at Calvary Riverina Hospital, expanded the St Luke's Mental Health Unit in Launceston, commenced construction of new operating Theatres at Calvary Lenah Valley in Hobart and developed a hospital-to-home program in South Australia.

Both the standard and variety of our work during this year has been significant in line with our strategic plan. We have introduced a mission accountability framework, electronic bedside charts in our private hospitals, strengthened our recruitment procedures and increased our vigilance in relation to cyber security. We have introduced a Leadership Capability Framework for Senior Managers and established two new national leadership roles, Chief Operating Officer and Chief of Innovation, to ensure we can continue to grow, innovate and integrate our care into the future. Health, Community and Aged Care are complex and changing services.

As a provider of person centred care in public and private hospitals, in the home and in residential aged care and retirement communities, Calvary is in a unique position to demonstrate innovative and imaginative ways of improving a person's journey through a complex health care system to greater well-being.

In relation to health insurance, our advocacy earlier in the year to ensure that those who experience chronic illnesses, the elderly and those in the last year of life are not disadvantaged by what could have been punitive and financially driven "safety and quality" measures has had positive outcomes for all. The provision of excellent clinical care and compassionate service of the highest quality by supportive staff and volunteers is central to our mission.

We continue to advocate strongly for the aged citizens in residential facilities and in

particular, those in the last months of their lives. We have inherited a sacred duty from the Sisters of the Little Company of Mary to do all we can to ensure the highest quality of care is provided to those who are frail, aged and dying.

This year, with the Sisters of the Little Company of Mary and our Trustees, Calvary Ministries, we are celebrating 50 years of service at Calvary Health Care Kogarah and 75 years at Calvary Health Care Bethlehem. It is always a privilege to be in the company of our Sisters. We express our thanks and admiration for the work they have done in Australia for over 130 years. We thank them for bringing the healing love of Jesus to those in need, for their inspiration, guidance and sheer hard work. These beautiful women are our living treasures.

Much has changed in health care and much more is changing. But some things remain the same. We are proud of the care provided at our hospitals, aged care facilities and all our other services. The respect shown for the dignity of each patient, resident and client remains unchanged. That is especially what we celebrate and give thanks for this year. Our hospitals, aged care and community facilities are very fortunate to have excellent assistance from a committed volunteer community. Being for others is a mission imperative that is highly visible in our volunteer workforce and demonstrated within this year's review. Calvary's volunteers support all of us to increase the quality of our patients' and residents' experience and we are most grateful for their gift.

On behalf of our Board, I thank members of the Auxiliaries who operate within our hospitals. The funds these groups raise are significant, enabling us to provide leading edge care in some instances where funds are not otherwise available. Most importantly they are a visible part of the hospitals they serve.

We acknowledge and thank Sister Bernadette Fitzgerald, Little Company of Mary (LCM) and her Council for their unwavering support of our work. We also value the support and guidance of the Directors of Calvary Ministries Limited



John Watkins AM

which, led by Mr Bill d'Apice, undertakes a critical role in the governance of Little Company of Mary Health Care.

The work of the Board of Directors never ceases to impress me. Their collective and individual talents are what is needed in today's complex world of health care. I am proud to lead such an enthusiastic, hard-working and inspirational group of people whose stewardship of this company is exemplary.

I thank and commend the work of the National CEO Mark Doran and the National Leadership Team. They are professional in all they do and bring a wealth of knowledge to the table for the benefit of all at Calvary. They are an experienced and capable team committed and ably led by Mark whose unswerving commitment to Calvary stands us all in great stead.

Last, but by no means least, my sincere appreciation and thanks goes to our staff throughout Calvary. Their work each day brings a human face to the mission of Calvary and they are our greatest ambassadors. Through their interactions and work each day, all of us are privileged to become part of the lives of people who call upon us for care. Their positive contribution is evidenced by donations, bequests, letters of praise to the company, and ongoing highly complementary feedback that filters to our Board with regularity. Thank you. I commend everyone at Calvary for the service we have been privileged to offer this year.

**THE HON. JOHN WATKINS AM,  
CHAIR, LCMHC BOARD**



# A Year in Review

**Our future is in providing integrated, high-reliability health care that's digitally enabled to truly put the person at the centre of care and deliver the health outcomes they value.**

Much of our progress this year has been in working towards providing good-quality health care.

As well, in FY15-16, Calvary focused on adapting our operations to provide our patients, residents and clients with integrated services. We are not there yet, but we are making significant progress.

Ultimately, our vision for success will ensure that:

- the care we offer people is tailored to their needs and preferences, and can be provided in the most appropriate location for them
- people are as involved in their care as they like, and can nominate family members or carers to be involved too
- clinicians are supported in the services they provide, and their time is respected so they can focus on the goals of the people to whom they offer care.

Calvary is committed to reducing or, wherever possible, eliminating potentially preventable complications that affect patient outcomes and experiences. During FY15-16, Calvary engaged with a range of private health insurers, including Medibank Private, to determine effective and robust ways in which we can work together to achieve our mutual objective of improving care. We were very happy to be able to negotiate a mutually acceptable outcome in the case of Medibank Private.

Most importantly, during these negotiations Calvary articulated and defended its view that our clinicians should be central to reviewing or identifying instances of care that resulted in negative outcomes, and assessing whether they could have been avoided.

In line with the requirements of the Australian Commission on Safety and Quality in Health Care, we have implemented a robust internal review process for considering episodes of care from which a complication results. We will share the outcomes of reviews with funders and others interested in improving the quality of care. Our initial reviews of such episodes of care demonstrate that a very low proportion of complications could have been avoided. Most complications occurred as a consequence of known risks in areas of care that are complex, challenging and subject to ongoing improvement.

Calvary also continued on the journey of renewing our assets and growing. Construction of new hospitals in both the ACT and Adelaide is expected to be completed in 2017 and early 2019, respectively; and a new retirement community in Muswellbrook, NSW, is expected to be completed in early 2017. Calvary has also made applications for the redevelopment of Calvary Health Care Bethlehem in the Melbourne suburb of Caulfield, and Calvary Ryde Retirement Community in Sydney so they may adopt integrated service models comprising aged, community and clinical care.

In closing, I thank Calvary Ministries, our Trustees, the Little Company of Mary Health Care Board and the National Leadership Team for their commitment, counsel and encouragement throughout the year; and our staff and volunteers for their dedication and commitment to serving our communities.

**MARK DORAN,  
NATIONAL CEO,  
LITTLE COMPANY OF MARY  
HEALTH CARE LIMITED**



Mark Doran

Norman Hayward

# THE SPIRIT OF CALVARY

The people we serve inspire Calvary's focus on growth, innovation and integration. Each of them plays a significant role in our lives, and we in theirs. This is Norman's and Maree's story.

Maree Gibbs, Manager,  
Mt Carmel Retirement  
Community, Maitland, NSW

**Norman may well be the reason I choose to work in aged care. Perhaps it's the satisfaction gained from giving hope or helping to ease the suffering in someone's life.**

In 2009, the staff at Calvary's Mt Carmel met Norman for the first time as he joined us for temporary respite care. He was 52 years young, had limited vocabulary, generally spoke in one-syllable words and had been living in squalor.

While living on the street, Norman may have suffered a stroke. No-one is certain and he was unable to tell us. Norman was estranged from his partner and children. He was a heavy smoker and had poor and deteriorating health.

Norman didn't want to stay. He was not ready, I guess, to accept help. It can be harder to accept help than give it. In August 2011, I saw Norman at the local shopping centre. He was in a dishevelled state, and I knew we could help. I asked whether he would again like to move into Mt Carmel's care and he said yes. There was no hesitation from either of us. Norman had very few possessions – just his clothing, a few photos and lots of DVDs.

We welcomed Norman back with open arms and gathered enough furniture to make his room comfortable and homely. With the help of the public trustee, we purchased Norman new clothing, shoes and a TV/DVD player.

Norman continued to have limited family contact, with his son visiting occasionally. In 2013, Norman's older brother contacted him to tell him that another brother had passed away in Melbourne. Norman was clearly saddened by this news. After the funeral, his brother came

to visit him a few times, but the visits were irregular and several letters that Norman sent to his brother were returned "address unknown".

Norman became unwell. He told staff that he had no reason to live, and refused to get out of bed, eat properly or make any attempt to communicate, apart from becoming difficult with any staff who tried to help him. His days were spent lying on his bed, watching cartoons and eating junk food. Norman increasingly smoked cigarettes, until the day his doctor decided he needed to stop, following Norman's attempt to light a fire in his room.

In early 2015, Norman was asked if he minded moving upstairs. He took this as a promotion and was very excited about the move. Our staff again assisted Norman to make his new room his own. In June 2015, I applied to the National Disability Insurance Scheme (NDIS) on Norman's behalf, with the aim of helping to improve Norman's lifestyle and give him some purpose in life. Norman had a 'wish list', and when discussing this with the NDIS coordinator, he referred to me as "my mother".

With NDIS support, in September 2015, Norman started going out with a support worker two days a week. These adventures allowed him to do everyday activities such as going to the shops to buy a pie, see a movie and go shopping for fishing gear – fishing was one of the activities on his wish list. Soon Christmas time arrived, and Norman gave Christmas cards to most staff at Mt Carmel. Everyone could see that it gave Norman great pleasure to distribute the cards. At last, he started to look like he was enjoying his life.

These days, Norman really enjoys the men's group he attends every second







Norman Hayward and Maree Gibbs,  
Mount Carmel Calvary Retirement Community

**NORMAN HAYWARD, RESIDENT,  
MT CARMEL RETIREMENT  
VILLAGE, MAITLAND, NSW**

I was born in Maitland to Eric and Mary, the fifth of eight children. My parents didn't have TVs!

When I was only little, they moved to Victoria. My favourite time at Castlemaine High was play time and home time. I loved fishing, and my father taught me how to cook. From my father's teachings, my first job was the cook at Truckstop Australia.

I worked hard for three years before moving to a farmhouse in Condobolin, NSW, where I spent many years as the cook on a large wheat farm. I moved to Maitland, where I met a girl and we had two children.

My favourite spot was fishing down past the Hawkesbury River ... a fisherman never reveals their best spots.

I like being with the staff and residents. I like to help the others by pouring juices at breakfast and walking the trolley back. People joke about me getting a job here, and I think I'd like the manager's job so I can sit at the front door and watch the comings and goings.

Before I came here I was on the streets. Now I have my own place and friends.

Nah, Maree is not my mother! She's the boss, a good boss.

Friday. With the help of Mt Carmel's occupational therapist, he now stands proudly upright with the assistance of a walking stick. His behaviour has significantly improved. He speaks in sentences – in fact, he even initiates conversations – and makes sure he is well groomed before going out. Norman also makes the decisions about what he is going to do each time he goes out, and returns from each outing telling the staff what he did, including how much he won at bingo.

Norman has also re-established contact with his family, who have now started to visit him regularly. He was invited to his daughter's school graduation, and there were tears of joy all around. Norman now gets up early every morning; he assists the staff in preparing the dining area for breakfast, then goes down to the dementia area to help his friends there. Norman also assists the Leisure and Lifestyle Officer

with the activity program. And if you want to know the whereabouts of any resident, just ask Norman.

If you meet him, you will see a huge grin on his face, as he has finally found a reason to live.

This is not the end of Norman's story; it's more like the beginning. Perhaps some time in the future Norman could move from the aged care facility to supported accommodation in the community. Regardless, he is now living a life with purpose, and it has been our privilege to know him.

**Norman certainly  
has found a special  
place in my heart!**



# CELEBRATING THE PAST, EMBRACING THE FUTURE

## 131 Years of Calvary in Australia

Sister Elizabeth Gilroy of the Little Company of Mary (LCM) in Australia (pictured) recently reflected on the story of the Sisters who established the Australian arm of the LCM in 1885 at the request of LCM founder, Mary Potter. Sister Elizabeth explored their story as founding Sisters of the Province of the Holy Spirit and told how the expression of their spirit gave rise to the Little Company of Mary Health Care services in Australia.

“A strong foundation is necessary for every structure.”

Mary Potter, Brides of Christ

Soon after founding the Sisters of the Little Company of Mary in 1877, Mary Potter sent six courageous sisters to Sydney on the SS Liguria. They departed Plymouth on 16 September 1885 and arrived in Sydney on 4 November 1885. On arrival in Australia, words from a letter from Mary came back to them: “I will be with you and peace and fortitude will be given you to face anything and everything for the love of Him whom Jesus left Heaven for to work for his Father’s glory and save souls who are dying.”

Once in Sydney, Sister Brigid Rosser wrote in her diary: “In those days we possessed great liberty of spirit, fear and restraint were unknown to us, and love was our guiding star. Mary Potter always told us to follow the Ignatian rule, ‘Love God and your sisters, and do what you wish’.”

At Christmas time in their first year in Australia, Mary wrote to the sisters to encourage them in their work. “Keep praying, no matter how dry you feel in your prayer,” she wrote. “Be aware of the Cross of Jesus and through prayer you will comfort your patients by your manner. It is the prayer that will keep you going and when there is hardship, turn to Jesus. Begin with very small things, do the little things well.”

There was strong leadership from the beginning, with planning and training. Mary advised them to lead by example. “We cannot give what we do not possess,” she wrote.

After many years in Australia, Sister Marie Hedigan wrote in her reflections: “I was always tired from nursing duties; however I considered that the total commitment to the patients was, in fact, a spiritual experience.”



Sister Elizabeth Gilroy LCM





### **CALVARY HEALTH CARE KOGARAH JUBILEE CELEBRATING 50 YEARS OF CARE**

Calvary Health Care Kogarah recently marked 50 years of caring for terminally ill people in Sydney's St George and Sutherland areas under the banner of the Sisters of the Little Company of Mary.

What began as a hospice in 1966 grew to include a day hospital and bereavement service in 1981, with further extensions in 1991 to accommodate the Calvary Community Palliative Care Team and a pain clinic for outpatients. Also in 1991, the hospital became an associated teaching hospital of the University of New South Wales.

In 1994, Calvary Health Care Kogarah embraced a new focus of care. While continuing to provide excellent palliative care services, it added a 16-bed inpatient rehabilitation unit. Since that time, its Rehabilitation and Aged Care Services have expanded to include the Transitional Aged Care Service, Continence Advisory Service and Dementia Day Care. The latter includes some overnight respite care for dementia clients, a Driver Assessment and Rehabilitation Service, a Diversity Health Service, podiatry services and Community Aged Care Rehabilitation.



The original site for Kogarah Hospital donated by the local Fitzgerald family



### **CALVARY HEALTH CARE BETHLEHEM CELEBRATES ITS 75TH ANNIVERSARY**

The year 2016 was significant in the history of Calvary Health Care Bethlehem. It marked 75 years since the Sisters of the Little Company of Mary purchased a small bluestone hospital on Kooyong Road in Caulfield, Melbourne, and commenced a journey of care delivery that continues to this day.

The hospital opened in 1941, at the time providing much-needed maternity care and general surgery. It now provides palliative care, and care for those with a progressive neurological disease.

LCM Province Leader Sister Bernadette Fitzgerald remarked on the role of the 'Bethlehem Spirit' in overcoming the limitations initially faced by the sisters, doctors and lay staff, including nurses, kitchen staff and maintenance staff – with "each one making the mission real".

Calvary Health Care Bethlehem honours the past in continuing to live by the mission and values that informed the work of those that went before. It also embraces the future, responding to the changing health care needs of its community.

In this its 75th year, planning to redevelop the Bethlehem site has begun which will see the traditional hospital services integrated into a health precinct that will include Calvary Retirement Communities, aged care and Calvary Community Care services.



1950's Little Company of Mary Bethlehem nurses

# DEVELOPMENTS AND UPGRADES



## Calvary Adelaide Hospital, South Australia

This project involves the design, construction and leasing of the largest-ever private hospital to be built in South Australia and the first new private hospital in nearly 20 years. The 342-bed hospital will replace the Calvary Wakefield and Calvary Rehabilitation hospitals and create more than 500 jobs during the construction phase.

Total project value: \$300 million  
Target completion date: early 2019

## Calvary Muswellbrook

When construction is complete, the 65-bed residential aged care facility will replace Mt Providence Retirement Community, which was established 40 years ago. The new facility will include 42 independent living units, which will be built in two stages.

Total project value Stage One: \$23 million  
Target completion date: March 2017





## Lenah Valley Theatre Redevelopment

Construction of five new operating theatres at Calvary Lenah Valley Hospital in Hobart, Tasmania, is underway, with building of the structural frame nearing completion. The new complex abuts the existing theatre, which will be refurbished once the facilities are open at the end of stage one. Construction will take place over five stages to allow the existing theatres to remain operational throughout the 21-month project. The redevelopment will include seven operating theatres, Stage 1 and 2 recovery units, a central sterilising unit, and a new Day of Surgery Admission Centre.

Total project value: \$23.4 million  
Target completion date: mid 2018



## Calvary Bruce Private Hospital

Calvary's new 'hospital for the future' will feature eight state-of-the-art operating theatres that will accommodate everything from day surgery procedures to complex surgery performed in digital operating suites. It will also offer completely private single rooms with hotel-like ensuites and finishes.

The Calvary Bruce Private Hospital will replace the existing private hospital. It will be a stand-alone facility that will initially offer 94 inpatient beds, 26 day-only beds and up to eight theatres. The building will have capacity to expand to 156 beds as Canberra's northern suburbs grow. Currently located within Calvary Public Hospital (on levels three and six), the project includes extending the Hyson Green mental health unit to provide an extra eight beds, bringing the number of beds to 28.

Total project value: \$73.8 million  
Target completion date: July 2017

### Rehabilitation and Palliative Care Units

Calvary Riverina Hospital celebrated the opening of the Mary Potter Palliative Care Unit and St Joseph's Rehabilitation Unit in September 2015. These facilities expand Calvary's inpatient capacity and provide much needed rehabilitation programs and an improved palliative care setting. Calvary is now part of the Palliative Care Alliance, providing integrated inpatient services to public patients in the Riverina. The facilities include a fully equipped gymnasium, hydrotherapy pool, outdoor exercise area, kitchen and laundry for assisted daily living activities.

Total project value: \$9.3 million  
Completion date: September 2015



### Calvary's Bruce Car Park Opens Two Months Ahead of Schedule

Calvary Public Hospital Bruce's \$16.87 million five-storey car park was opened by ACT Minister for Health Simon Corbell on 17 December 2015, two months ahead of schedule. Funded by ACT Health, the project involved constructing the 704-vehicle car park on the hospital campus for staff, patients and visitors, increasing available parking by 515 spaces.

Total project value: \$16.87 million, funded by ACT Health  
Completion date: December 2015





## St Luke's Mental Health Facility Helping More People

**"We are extremely proud of the service we offer in treating patients and getting them well again." Grant Musgrave, CEO**

Calvary has responded to community demand and increased the size of the mental health unit at Calvary St Luke's Hospital in Launceston, Tasmania. Four more private rooms have been added to the unit, which was established three years ago. The nurses' station has also been expanded and another therapy room has been added to allow for separate day and inpatient therapy programs.

Total project value: \$1.49 million  
Completion date: February 2016

**When the mental health unit opened at St Luke's Hospital in Launceston, it soon became clear that many patients had issues relating to grief and loss.**

In response, the pastoral care team developed a weekly workshop on grief and loss as part of the inpatient therapy program. Using an alternative approach founded on a strengths-based model, the team offers seven sessions that explore spirituality and resilience. Focusing on gratefulness instead of mindfulness,

participants are encouraged to look beyond their circumstances and try to appreciate moments that bring joy, rather than dwelling on grief and loss.

The program uses a variety of themes and discussion starters – including 'How a penny made me feel like a millionaire' – to assist participants to manage adversity and build resilience through concepts such as the 'Bank of Coping'.



Pastoral team carers Louie Venter and Edwin Vandervelde developed a new approach to help patients manage grief and loss









# SERVING OUR COMMUNITIES

## YOUNG CANCER PATIENT'S DREAM BECOMES A REALITY

An eight-year-old girl being treated by the department of radiation oncology at Calvary Mater Newcastle received special treatment from the team of radiation therapists, nurses and reception staff. turn to the next page for full story.

## Young Cancer Patient's Fantasy Becomes Reality

**AN EIGHT-YEAR-OLD GIRL BEING TREATED BY THE DEPARTMENT OF RADIATION ONCOLOGY AT CALVARY MATER NEWCASTLE RECEIVED SPECIAL TREATMENT FROM THE TEAM OF RADIATION THERAPISTS, NURSES AND RECEPTION STAFF.**

She was being treated on our newest linear accelerator, potentially a very scary procedure that had to be repeated 33 times.

When staff members learned that she liked the animated fantasy film Frozen, a 33-day Frozen themed countdown poster was made for her and she listened to her Frozen music CD every day to help her forget why she was there.

The radiation therapists decided that she deserved a bigger-than-normal send-off on her last treatment day. The team

dressed up as the Frozen characters Elsa and Olaf, adorned the entrance to the treatment room with mobiles and covered the door with a 'sheet of ice'. The treatment room looked like an ice cave, with shining blue lights, mobiles and balloons. Frozen confetti and a cake were also laid on for the exiting star of the day.

Reception and nursing staff joined in, giving the young patient an 'icy wand'

and wheeling her and her brother around in a big blue chariot before plunging them through the 'ice' into the 'cave'. Squeals of delight, laughter and giggles could be heard throughout the department. She guessed the real identities of Elsa and Olaf – which no-one else could.

The young patient and her family went away with a beautiful memory, feeling loved and cared for.



## Emergency Change Agent

Associate Professor David Caldicott is an emergency medicine specialist in the Emergency Department at Calvary Public Hospital Bruce in the ACT. He believes this always-busy and frequently intimidating environment is a powerful setting for effecting behavioural change in people.

Working both internationally and around Australia, David has participated in and observed "too many" episodes where Emergency Department staff have "laid it on the line to people about the immediate and ongoing health consequences" of their behaviours. He has also seen too many unnecessary deaths and other tragedies.

"At the moment, I am particularly concerned by the variety and availability of novel illicit drugs across our communities, and both the proven and potential dangers that these have for frequent or even occasional users," he said.

"These substances are illegal, as they should be. However, prohibiting drugs leaves us with this terribly dangerous paradigm: young people who use drugs frequently or occasionally are afraid to admit that they do, or to seek assistance in the case of misadventure.

"We have to stress the message, particularly to younger people, that they must seek urgent assistance if anything goes awry – either for themselves or their friends. Too often, people in distress and danger delay seeking treatment, or are left by their friends, because they fear assistance will create consequences if they are found to have broken the law.

"Getting young people into a clinical setting, and treating them with respect and compassion, provides the most powerful situation for doctors, nurses and expert counsellors to talk to people about changing their behaviours, or to address underlying issues that influence their behaviour.

"Seizing these 'teachable moments' for intervention is in line with the long Catholic tradition of providing help without judgment to vulnerable people and persons in need. It also accords with the philosophies of medicine that clinicians commit to in the Hippocratic Oath and the Declaration of Geneva. "Our capacity to merely understand, let alone confront, these activities is negligible unless we change our approach to managing illicit drugs, and underpinning that is Calvary and other services being available and accessible as and when required."



Dr David Caldicott





## From Little Things Big Things Grow

### **MYANMAR REFUGEE TUANG PHAI-PI CELEBRATED HIS GRADUATION FROM CALVARY'S REFUGEE MENTORING PROGRAM IN CANBERRA IN JUNE 2016.**

The 12-week program gives refugees the opportunity to gain professional experience in an Australian workplace and helps them settle into their new community.

Calvary staff, from the gardening to the nursing departments, share their skills and expertise with program participants and in turn increase their understanding of the refugee experience.

Tuang worked a couple of days a week in the garden of Calvary Public Hospital Bruce under the guidance of gardener and mentor Alistair Carnegie.

"My favourite part of the program was learning how to cut and trim plants," said Tuang, who with his wife, Man, was settled in Australia in 2013 by the United Nations High Commissioner for Refugees (UNHCR). Tuang was also given free career counselling sessions to identify his skills and help him develop his resumé.

The couple were warmly welcomed into the Canberra community and their son Solomon was born last year at the Calvary Public Hospital Bruce. "Australians are very polite and friendly," Tuang said, adding that he saw his gardening as a way to give back to the hospital.

Alistair had never met a refugee before he became a mentor. "They are so quick to learn things and it is just a joy to see the expression on their face and help them out. I would have Tuang back working with me tomorrow," he said. Alistair, who has been mentoring refugees for six years, said he has been consistently inspired by their determination and work ethic. "Many of these guys came from a farming background. When they came to me, they just took off."

Speaking at the graduation ceremony, Karen, a mentor since 2008, said it had been a very humbling experience. "What drew me to the program was my interest in culture, caring for others and the hope I could help in a small way," she said.

"I know I can't help all the refugees in the world ... But I hope I've been able to help just a few in a small way."

Catherine Stubberfield, UNHCR's External Relations Officer in Canberra, said the program was a wonderful example of the contribution refugees can make and the impact that individuals and communities can have by supporting them.

"The Calvary Refugee Mentor Program shows just how much refugees achieve and how much we are all enriched in turn when we welcome them," she said. "It can seem like a small action, but it makes a huge difference."

Tuang's love of gardening stems from his childhood on his family's farm. "In Burma, we had a small family farm. I went with my father from our home in the city and sometimes we stayed there one or two weeks."

Thankful for the skills that Alistair taught him, Tuang said he hopes to find a job in the industry. "Before, I didn't know how to plan a garden or trim plants. Alistair has taught me everything ... and now I am looking for a gardening job."

## Students Challenge the Way We Think About Dying

“Two DVD’s documenting local school student experiences of palliative care challenge perceptions of death and dying. Students visited Calvary St John’s in Hobart and Calvary Health Care Bethlehem in Melbourne over a period of weeks to learn about end of life care. As one of the student participants says, coming to Calvary for end-of-life care is coming to “a place where people care about living life to its fullest”.

### **CALVARY ST JOHN’S HOSPITAL, HOBART**

Exploring Death, Dying and Palliative Care, a 13-minute educational DVD, documents a six-week interactive program between Calvary’s hospitals and senior Vocational Education and Training (VET) nursing school students from St Mary’s College and Guilford Young College in Tasmania.

Conducted on site at Calvary St John’s Hospital in Hobart, the program helps students learn about death, dying and palliative care from a range of experts, including the patients themselves.

The DVD was launched in June at the Nagle Centre, St Mary’s College, in Hobart. The Hon. Michael Ferguson, the Tasmanian Minister for Health, said, “This program is uniquely engaging in that, through the eyes of the students, we learn how we may improve community understanding of people who are approaching and reaching the end of life.”

One patient, Virginia de Groot, generously shared with students the challenges of having a terminal illness and talking about it with her family. For many students, this was a very moving and emotional experience. “I didn’t consider that some people find it hard to talk about it and come to terms with it, so that was, yeah, quite emotional,” said one student.



Students from Sacred Heart Girl’s College, Oakleigh, Victoria participated in a pilot program that helps communities talk about death and dying, loss and grief so that those living with a terminal disease can be better supported.

### **CALVARY HEALTH CARE BETHLEHEM, CAULFIELD, VICTORIA**

Calvary Health Care Bethlehem, a health service that specialises in end of life care, has launched the DVD as an educational tool for schools and community groups.

The DVD raises awareness about the issues that arise at the end of life. It helps communities talk about death and dying, loss and grief so that those living with a terminal disease can be better supported.

The DVD is the result of a 2015 health promotion project between Calvary Health Care Bethlehem and Sacred Heart Girl’s College, Oakleigh, Victoria. It was funded by the Victorian Department of Health and features testimonials from patients at the end of life and insights from students.

The Hon. John Watkins AM, Chair of Little Company of Mary Health Care, said, “This project exemplifies the continuation of our founder, Mary Potter, who had a very specific and particular focus on providing exceptional and dignified palliative care to people in the community.”

La Trobe University’s evaluation of the project found that it had had a profoundly positive impact on the

students involved. Students reported that the experience was transformative, with nearly all of them saying they felt more self-confident and open-minded afterwards.

Students also reported having a deeper understanding of death and palliative care and a decreased fear of death, as well as a heightened appreciation of life. The La Trobe University evaluation found that the response of other students who saw the DVD was almost as profound as the response of those who participated in the filming.

The school students made some important observations. One student reflected on the relevance of the project because “we are all going to go through it one day”.

Another said, “Though death is something that is unknown and mysterious, it is not morbid and depressing. It is a happy and optimistic environment.”

“We have all these campaigns for cancer and for all these range of illnesses, but we don’t have anything for death,” another student said. “We all end up dying and there is just not enough people talking about it.”

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# Father Kerry Moves Into Semi-Retirement at Calvary Ryde

**AFTER 55 YEARS AS A PRIEST, WORKING IN PARISHES IN THE ARCHDIOCESE OF SYDNEY, MONSIGNOR KERRY BAYADA HAS RETIRED FROM ACTIVE PARISH MINISTRY. HE HAS CHOSEN TO RESIDE AT CALVARY RYDE RETIREMENT COMMUNITY AND ACCEPTED A ROLE AS CHAPLAIN FOR THE COMMUNITY, WHERE HE OFFERS SPIRITUAL CARE TO THE RESIDENTS AND THEIR FAMILIES.**

At 80 years young, Father Kerry (as he is affectionately known) is enjoying his semi-retirement at Calvary Ryde, where he has been warmly welcomed by staff, volunteers and residents. He described his new surroundings as “a very happy community ... They are very open and very keen to make you part of the community”.

In his spiritual role at Calvary Ryde, Father Kerry celebrates mass weekly and gives communion to the residents on Thursdays, whether it is in the onsite chapel or at the bedsides of residents who are unable to attend. “I try to make myself available ... I pop around and see people and they are also free to come and see me at any time that they wish,” he said. He also officiates at christenings, marriages and funerals for friends, family members and ex-parishioners.

For the past 30 years, Father Kerry served as the parish priest in Our Lady of Fatima parish, Caringbah. But as his 80th birthday approached, he decided it was time to move as he “was finding the responsibility of a parish quite

burdensome in the end”. Father Kerry was born in Haberfield, Sydney, and grew up in nearby Gladesville. He entered a minor seminary in 1948 and was ordained in 1960. His first appointment was to the parish of Earlwood, Sydney, followed by a short time at Belmont, Lake Macquarie. In the 1960s, he was sent to Darlinghurst, in inner-city Sydney. It was “a real eye opener”, he said. “I got a fair view of life from beginning to end and the alternative style of the people who lived there. It took me weeks before I could sleep through the noise. I was exposed to things that I never thought I would be exposed to. I learnt quite a few lessons.”

After a number of years in Darlinghurst, Father Kerry was appointed Vocations Director for the Archdiocese of Sydney, a role he held for 17 years. He helped young people discern whether the priesthood and religious life were for them, helping hundreds of young men into the seminary. It was a role he found extremely rewarding. “I admire a lot of them. A few of them have become bishops. It was a privilege to be part of their life,” he said.

Father Kerry enjoys the slower pace of life in his villa at Calvary Ryde. He participates in social activities and enjoys some gardening. “I have a little bit of a garden here. I’ve brought some orchids and a few other plants – hydrangeas and petunias – to get a bit of colour around the place.”

The community at Calvary Ryde includes devoted volunteers who assist the residents. Father Kerry has been

particularly impressed by the dedication of these volunteers. “I have been admiring the volunteers that come and help out ... especially their faith and their commitment,” he said. “They are very dedicated people. I’m very, very touched by that. I’m very impressed at how they give their time.”

For Father Kerry, the location is also very handy. Every Monday night, he is able to continue his long tradition of participating in the family dinner at his brother’s house nearby. “I’m the eldest of nine. One brother has 13 children, and there are over 35 nieces and nephews, and as many great-nieces and nephews.”



**Monsignor Kerry Bayada, Calvary Ryde Retirement Community resident**



## Married for 55 Years and Still in Love

After 55 years of marriage, Joan and Joe's dedication and care for one another is still growing. Joan said the secret to a long marriage was "give and take, you can't have it all one way".

These days, Joan and Joe, aged 87 and 90, live at Calvary St Paul's Retirement Community on the banks of the Manning River in Cundletown, north of Taree. Since meeting in 1960, this couple have enjoyed a loving and caring relationship. They still regularly exchange cheeky banter and laugh at each other's jokes.

When asked how they maintain their strong relationship, Joan said, "We seem so much alike, we like home life and he's so kind". Joe added, "She looks after me".

To Joe and Joan the union of marriage means everything. "It just builds and builds until it gets to the stage you just seem to be one. You seem to think the same, as one," Joan said.

"The secret is just to love each other and give and take. Nothing is perfect. You can't have it all one way. And that's where I think sometimes there's a mistake - young people want their own way on everything."

**"THE SECRET IS JUST TO LOVE EACH OTHER AND GIVE AND TAKE. NOTHING IS PERFECT."**

**CALVARY RETIREMENT COMMUNITIES ALLOW COUPLES TO CONTINUE TO GROW TOGETHER WITHIN OUR SAFE AND SUPPORTIVE SURROUNDINGS.**



# FUNDRAISING



The Mater Auxiliary proudly present their 2015-16 fundraising cheque

## Calvary Mater Auxiliary Another Bumper Year

**AFTER FUNDRAISING TIRELESSLY THROUGHOUT THE YEAR, THE EXTRAORDINARY GROUP AT THE CALVARY MATER NEWCASTLE AUXILIARY ONCE AGAIN ASTOUNDED EVERYONE WITH ITS SIGNIFICANT DONATION, THIS TIME TOTTALLING \$372,057.47.**

Equipment bought with the funds included a new stem cell freezer for the hospital's Haematology Unit, which cost more than \$128,000, five diversional therapy trolleys, vital signs monitors, a blood pressure machine, two electric pressure chairs, equipment for the occupational therapy department's oncology loan pool and wigs for the Wig Service.

Greg Flint, Calvary Mater Newcastle Chief Executive Officer, said, "The loyalty and dedication of our Auxiliary members is inspiring and we are very grateful for the support they have provided to both patients and staff over the past year."

The Auxiliary is a group of 30 dedicated volunteers, both men and women, ranging in age from 60 to 98. They raise funds to buy oncology equipment and items needed for the care and comfort of patients at Calvary Mater Newcastle.

Sadly, many Auxiliary members have endured their own cancer journey, while others have lost loved ones to this disease. Members of the group offer each other friendship and support, while cheerfully fundraising for a cause close to their hearts.

Elaine Wellard, Auxiliary President, said, "We volunteer to give back to the community. The Auxiliary comprises a great group of people who are passionate about making a difference in people's lives. It is an honour to do what we do and we are very grateful for the huge amount of support we receive from the community to help us raise vital funds for the hospital every year."

The Auxiliary is well known for its bowling days, coach trips, fashion parades, celebration lunches, craft goods, baking and its 'famous' lolly tables at the hospital. It has wide support in the community, which continues to donate to the Auxiliary for the benefit of the hospital and its patients.

### MASTER CHEFS RAISE \$10,000 FOR RIVERINA PALLIATIVE CARE ALLIANCE

My Kitchen Rules (MKR) celebrity chefs Martino Convertino and Luciano Ippoliti served up joyful energy when visiting to cook frittata for patients at Calvary Riverina Hospital's Palliative Care and Rehabilitation Unit. The chefs asked to visit the unit after donating a dinner that raised \$10,000 for the Riverina Palliative Care Enhancement Council. Our grateful thanks go to Martino and Luciano, and to Coles Glenfield for its generous donation of food and Harris Scarf for its stunning range of cooking utensils.



L-R My Kitchen Rules chefs  
Luciano Ippoliti and Martino  
Convertino

# VOLUNTEERS

Calvary is blessed to have more than 1,000 dedicated volunteers, whose every effort is a valuable contribution to improving the health and wellbeing of others. Here are some of their stories.



## Siblings Volunteer at Calvary Wakefield Hospital

**SIBLINGS THALIA AND ELIAS HAVE BOTH BEGUN VOLUNTEERING AT CALVARY WAKEFIELD HOSPITAL (CWH) IN ADELAIDE - ELIAS IN PATIENT SERVICES AND THALIA IN WARD SUPPORT. WE ASKED THEM A FEW QUESTIONS ABOUT THEMSELVES AND THEIR ATTITUDES TO VOLUNTEERING.**

### **WHAT INTERESTED YOU ABOUT VOLUNTEERING WITH CALVARY WAKEFIELD HOSPITAL?**

The notion of volunteering occurred to us while studying at university, as a means to change things up from the monotonous hours of our noses in books, to contribute to the wonderful community of Adelaide and have the chance to meet different people from diverse backgrounds.

### **WHAT DO YOU ENJOY ABOUT VOLUNTEERING AT CWH?**

By volunteering we are donating our time, but having the opportunity to meet people from different walks of life and listen to their stories every shift is a privilege that well exceeds the value of our given time. Walking

into a patient's room with the goal of alleviating their loneliness and putting a smile on their faces, and achieving that goal, is something that gives us joy and makes it all worthwhile. Being in a hospital can be a daunting experience, so having a role that ensures the patients feel comfortable and valued gives us a sense of purpose beyond that which is provided by studying and exams. Moreover, interacting with the lovely and amazing group of people working at CWH, from the nurses to housekeeping, makes volunteering at CWH an experience we look forward to every week.

### **WOULD YOU RECOMMEND VOLUNTEERING TO YOUR FRIENDS AND, IF SO, WHY?**

We would absolutely recommend volunteering to anyone and everyone. Volunteering is a chance to be a part of something bigger than yourself and to use your time to do some good in this world. It is a chance to have a positive impact on someone else's life, regardless of the size of your actions, and to gain a whole new perspective on life. It is an opportunity to meet great people from different backgrounds who you

wouldn't normally meet, and it gives you a sense of purpose and fulfilment. Finally, volunteering is a great way to reduce stress and boost self-confidence and self-esteem. To sum it up, by volunteering you're not only helping others, but you're also helping yourself.

### **WHAT DO YOU HOPE TO ACCOMPLISH IN THE NEXT FIVE YEARS?**

**Thalia:** Hopefully I will still be volunteering at CWH while also finishing up medical school and starting my internship. I also want to volunteer in other organisations, such as Foodbank SA, Cancer Council SA and Red Cross, to further expand my experiences and contributions. As the preacher Max Lucado said, 'No-one can do everything, but everyone can do something' and I want to do a lot of things.

**Elias:** If all goes well, I will be starting my career as a physiotherapist in sports medicine. I would also like to continue to be a part of the CWH family and perhaps expand my volunteering experiences further, as I want to give back as much as I can while I am able to.





Calvary Public Hospital Bruce volunteers Daphne and her husband Chris

## 'It Takes Two'

**WHEN DAPHNE ASHLEY RETIRED IN 2008, SHE LEFT THE AUSTRALIAN TAX OFFICE ON A FRIDAY AFTERNOON WITH THE INTENTION OF, AT SOME POINT, EXPLORING VOLUNTEERING OPPORTUNITIES AT CALVARY PUBLIC HOSPITAL BRUCE.**

A chance encounter with Norma Sloane (a long-time Calvary Auxiliary member) at Mass on the following Sunday quickly led to Daphne getting involved.

Daphne said, "The idea of doing something at Calvary was in my mind. I mentioned this to Norma, who told me there was an Auxiliary meeting two days later and I should come along."

"So I did, with my intention being to assist with flowers, the lollies cart or possibly the patients' book service. It soon became obvious that these were important roles but there was also a great deal more to the Auxiliary, especially around fundraising activities and working with Calvary to assist the improvement of services in a range of areas.

"I was very lucky that my husband Chris shared my desire to be involved, so he started coming along and soon also joined the Auxiliary. In retrospect, it was wonderful that at our time of life, we found something new that we were both enthusiastic and ultimately quite passionate about.

"After joining the Auxiliary, the opportunity arose to nominate to be

an office-holder, which in turn led to me becoming the president for three years until standing down this year. What a privilege that was. I established some marvellous relationships with clinical, executive and administrative staff and volunteers from across Calvary.

"This enabled us to talk with the people delivering care to find out where our assistance was most needed and to help formulate fundraising programs to provide those areas with items and equipment that will enhance the patient experience.

"Over the past few years, the Auxiliary has supported Calvary with equipment for the Calvary Birth Centre, a highly advanced cancer probe, humidicribs for the maternity unit, a theatre ultrasound machine, a gastroscope, and lifting and mobility equipment.

"Chris and I have also enjoyed an enriched social and friendship network through the Auxiliary. Quite recently, my ageing mum fell ill and passed away, and the support of my Auxiliary colleagues was a great strength, and really important to me during that time. "Ironically, Chris has replaced me as President, which has allowed me to devote more time and energy to the 'routine' Auxiliary activities and fundraising events.

"My advice to people now is to look at volunteering opportunities to discover the real joy of giving. Don't leave it too late - organisations like the Calvary Auxiliary desperately want younger people involved and through volunteering you can really make a difference."

## Adam Yurka

**ADAM VOLUNTEERED AT CALVARY HEALTH CARE KOGARAH IN SYDNEY. HE RECENTLY WROTE TO HIS VOLUNTEER COORDINATOR TO SHARE HIS EXPERIENCES.**

"I would like to say a massive thank you for taking me on board in 2013 and having me up until the end of 2015. Volunteering at Calvary has taught me more about myself than I could have ever imagined. It has helped me to cherish the simple everyday things I had taken for granted, such as walking and talking, along with developing a strong sense of community involvement.

Calvary has also showed me that it's the little things that can make the biggest difference to a patient's happiness or wellbeing, from non-verbal gestures to simply listening to what they have to say, something that no amount of books could have ever taught me. I know that I will be able to use the core values from my time at Calvary as the foundation for my own life's journey as I now start my Doctor of Dental Medicine degree at the University of Sydney. Once again, thank you for the opportunity that has, and will continue, to shape the person that I am today."



Adam Yurka(at right), volunteer at Calvary Health Care Kogarah, spent much of his time catching up with patients.

## 3,000 Gestures and Counting

**OVER THE PAST FIVE YEARS, VOLUNTEER JOAN NEAVE HAS BEEN WORKING OUT OF HER LOUNGE ROOM IN MELBOURNE, CREATING NEARLY 3,000 VELVET HEARTS TO PROVIDE COMFORT TO PALLIATIVE CARE PATIENTS AND THEIR FAMILIES AT CALVARY HEALTH CARE BETHLEHEM.**

The little hearts fit into the palm of a hand or a child's pocket and come in a huge range of colours. Each family member is invited to choose a colour that resonates with them. The hearts serve as a small but potent symbol of the importance of their loved family member.

Every month or so, Joan delivers more than 100 of the hearts to Bethlehem pastoral carer Sue Loughnan. Over a coffee, Joan hears from Sue about the work of the pastoral care and bereavement teams and the lives that have been touched since her last visit.

The hearts bring comfort to patients at the end of their life in a number of ways and have been sent all over the world. They are used by pastoral carers during reflective practice with patients and in the education sessions they conduct with external providers. Bethlehem doctors often carry them on their rounds and children are encouraged to put a heart in their pocket so it is always close.

A little boy whose grandfather was dying at Bethlehem painted a picture of his whole family and each of the coloured hearts they had chosen. The boy placed himself between his grandfather and grandmother in the picture, but had trouble squeezing in his aunties. When it was suggested that he use another sheet of paper the boy refused. "We all have to be together," he said.

Stories like this proliferate throughout the health service: a mother using a heart to reconcile with her son; a grandmother finding solace in the bags she made to

house three little hearts for her three granddaughters; a father leaving a heart and a message for his unborn child. One family from mainland China whose father had died while being cared for by the health service requested hearts for absent family members in China. Thanks to the work of a dedicated Bethlehem volunteer, the family was able to post a dozen hearts to comfort grieving family members half a world away.

Though she is surrounded by hearts all year round, Joan said she doesn't feel like the hearts are hers. "These hearts already belong to the family they are destined for," she said. "I am just their maker."



When it was suggested that the little boy use another piece of paper to fit in his aunties and uncles he refused. "We all have to be together" he said.



Joan Neave

# The Story of Your Life: A Biography Program for End of Life

End of life and dying are topics we often avoid talking about in our society. At Calvary North Adelaide Hospital, a small group of volunteers are offering their services to palliative care patients so that those who are nearing the end of their life have a chance to tell their story.

This unique biography program is the first of its kind in South Australia, and is offered to patients through the Mary Potter Hospice, Calvary's cancer services and Central Adelaide Palliative Care Service.

The program started in 2007, when Louise Finnane and Anthea Heal heard about a biography program in Melbourne. Louise, who had been the chaplain at Calvary North Adelaide Hospital for a number of years, was working with Anthea on the art therapy program at the hospital.

They heard journalist Kerry O'Brien interview a Melbourne woman who went to New Zealand to learn about a program for palliative care patients. They wanted to find out more, to add 'narrative therapy' to the art therapy program at the hospital.

With the support of Calvary's Sister Mary Glowrey, the pair went to Melbourne for a one-day seminar to learn how to run the biography program, which they adapted for use at Calvary.

The first group of volunteer biographers graduated in July 2008 after eight days of training over eight weeks. Anthea and Louise also found a sponsor, HPS (a pharmacy service provider), which gave support, including computers, printers and digital recording devices.

## **ONE OF THE MAIN AIMS OF THE BIOGRAPHY SERVICE IS TO GIVE PATIENTS A SENSE THAT THEIR LIFE HAS HAD MEANING.**

"Biography enables patients to reflect on their lives, reminding them of what they have done and that their lives have been meaningful," said Anthea. "It is what happens to the patients through the telling of the story that makes biography a valuable process." Production of the printed and bound story is secondary to the therapeutic benefit.

Christine Mallett now coordinates the program with Louise. "The confidential one on one service focuses on the therapeutic value to a patient. We offer the patient the chance to review their life with a trained biographer, who is simply there to hear their story," Christine said. "There are no questions asked, no direction given. It's simply about what they want to say at that time – about their life, their family, their thoughts, their work, their feelings."

The biographer records the story of a patient they meet during up to six

one-hour sessions over 10 weeks. The biographer then transcribes the recording, and goes over it with the patient at the next session. This allows the patient to edit their own story. Photos can also be included.

"The biographer sits down informally with the patient, either in the hospital, hospice or in their home," said Christine. "It's just like sitting down with a friend to have a chat, the only difference being that the recording device is on. It's not an interview technique the biographer is using – it's a listening technique. The biographer is just the conduit to help the patient get what they want to say on the page."

"We're not looking for a perfect document. We're looking to hear the person's voice on the page. They edit their own story, which gives them confidence, because they are in control. Nothing goes on the page without their permission."

When the process is finished, the patient receives two bound copies plus a CD or USB stick containing their story. More than 400 referrals have been made since the program began nine years ago.

For more information on the Calvary biography program, please email [SA-biography@calvarycare.org.au](mailto:SA-biography@calvarycare.org.au) or call (08) 8239 9556 to leave a message.

**With thanks to MedicSA**





# COMMUNITY CARE



## A STORY OF ENABLEMENT AND EMPOWERMENT – FIFTEEN YEARS TOGETHER

Calvary Community Care support worker Diane first met Sam when he was just three years old. Sam, who has Down Syndrome, is now 18 and able to support himself, but Diane was part of his life for 15 years. She said she considers it “a privilege to have been involved in this young man’s journey to independence”.

Initially Diane’s support gave Sam’s mum and dad time to undertake activities with their other children. However it grew into a service that educated and mentored Sam to access and interact with the local community in a safe manner. The family consider Dianne a pseudo grandmother to Sam.

“I have been with Sam through day care, kinder and school, right through to his graduation. I was even lucky enough to attend Sam’s debutante ball, which would have to be one of my highlights. Sam was so excited and had a lovely partner, Chloe. It was a real pleasure to watch them together.

“The last 15 years with Sam have included some of the most memorable and rewarding times in my life,” said Diane. “I have never considered this work, but rather a great way to grow into a caring person and become aware of special needs.”

## Delivering 24-Hour Care in the Community

Support worker Vicki has been part of the Calvary community for five years. “I was originally a secretary for a chartered accountant,” Vicki said. “But after becoming a mother of two boys – one of whom was diagnosed with autism when he was three – I really wanted to do something to help people.

“It was through caring for my son, and attending to his needs, that I really developed a passion for helping people. I found it very rewarding, and I could see that I really made a difference.” Vicki found her calling in Calvary Community Care and has never looked back.

When Vicki was first approached about providing 24-hour care, she thought it was impossible because of her family commitments. She helped out by covering part of the shift – between 11am and 4:30pm – until a full-time replacement was found.

“I thoroughly enjoyed caring for this client, and when a replacement was found, I really missed going,” said Vicki. “When the opportunity came up to work with this client again on a 24-hour basis,

I had a discussion with my family to see if we could manage and, with their support, I accepted.”

Vicki still cares for this client today. She said, “Twenty-four-hour care takes caring to the next level – you become part of the extended family – and it comes with more complex tasks and responsibility. This has opened the door to a lot of training and upskilling opportunities for me. I also get experience liaising with GPs, specialists and case managers.”

While being organised is vital, Vicki said there were many benefits to delivering live-in 24-hour care. “Firstly, there is the rewarding feeling you get from caring for someone in this way. You really make a difference to them and their family, and there is so much appreciation. It’s a unique, special and very personal arrangement. I really enjoy the ‘quality’ time I can spend with the client in between tasks and appointments. I can give them a meaningful structure to their day. I find that 24-hour care gives me a break from my usual daily routine and parent duties, which is nice, and I really look forward to going each week.”





L-R Cooking for Wellness community care clients John Carroll, Cameron Holland and Marshall Neal

## Calvary, COTA and Community West explore 'Cooking for Wellness'

**THE COOKING FOR WELLNESS PROJECT AIMS TO MAKE COOKING AT HOME EASIER, HEALTHIER AND MORE APPEALING TO OLDER PEOPLE, INCLUDING THOSE FROM CULTURALLY DIVERSE BACKGROUNDS.**

Developed by Calvary Community Care and funded through COTA (Council on the Ageing) and CommunityWest's Step Forward - Together™ initiative, the project has been as much about the process of co-production (working collaboratively with clients) as the outcomes. Judith Henriksen, Manager of Practice and Innovation at Calvary Community Care, said, "This project has helped break down some of the traditional barriers that exist between providers and clients. One of the biggest challenges we faced was reassuring clients that their input was valuable and needed for the success of the project."

The project has engaged clients and employees to explore ways to improve the nutritional status of older people, identify client needs for culturally appropriate meals and provide practical assistance for direct care staff, clients and carers on how to prepare nutritious meals.

Together with a group of clients and employees from the Hunter region, Calvary Community Care has trialled a number of different meal options in the home.

Participants have cooked and baked at home to identify which recipe methods, ingredients and preparation times were most suitable and appealing for older people living independently at home. Recipes were selected based on factors including cultural diversity, simplicity and number of ingredients. They were then analysed by a nutritionist to verify their suitability and nutritional value.

The resources developed by the project are being digitised for distribution via a downloadable mobile app.







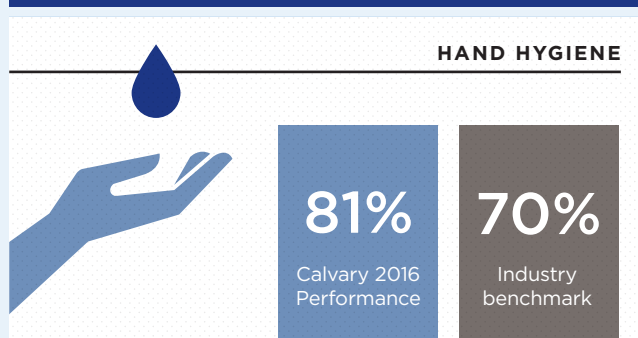


# EXCELLENCE IN CARE

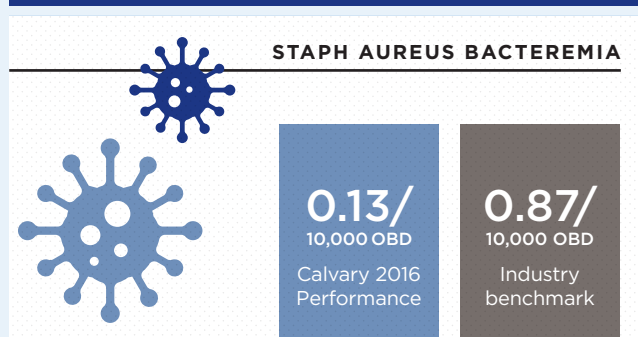
L-R REGISTERED NURSE CHARLES AND MEDICAL OFFICER VINAY AT CALVARY  
PUBLIC HOSPITAL BRUCE, ACT



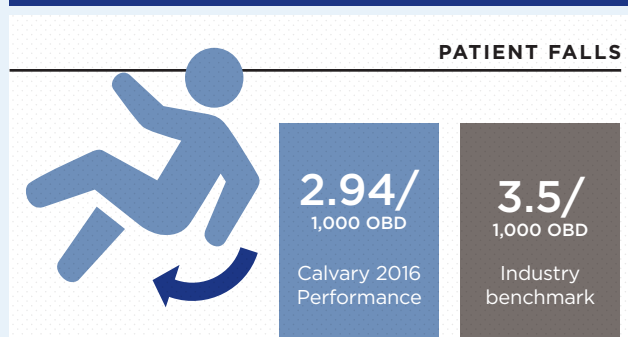
### HOW CLEAN ARE OUR HANDS?



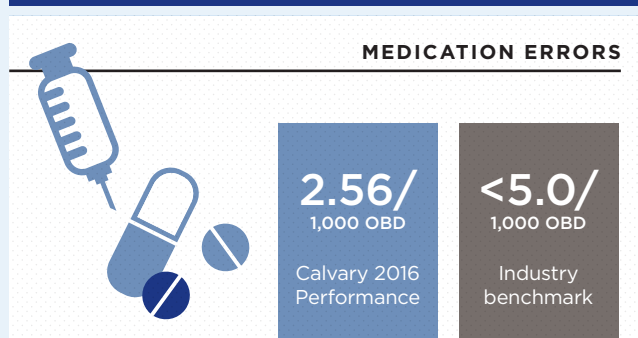
### HOW ROBUST ARE OUR INFECTION CONTROLS?



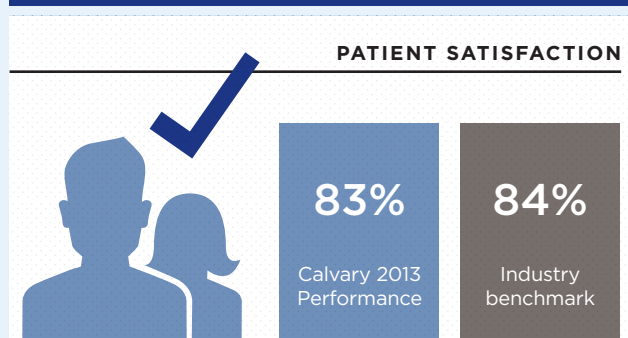
### PATIENT FALLS



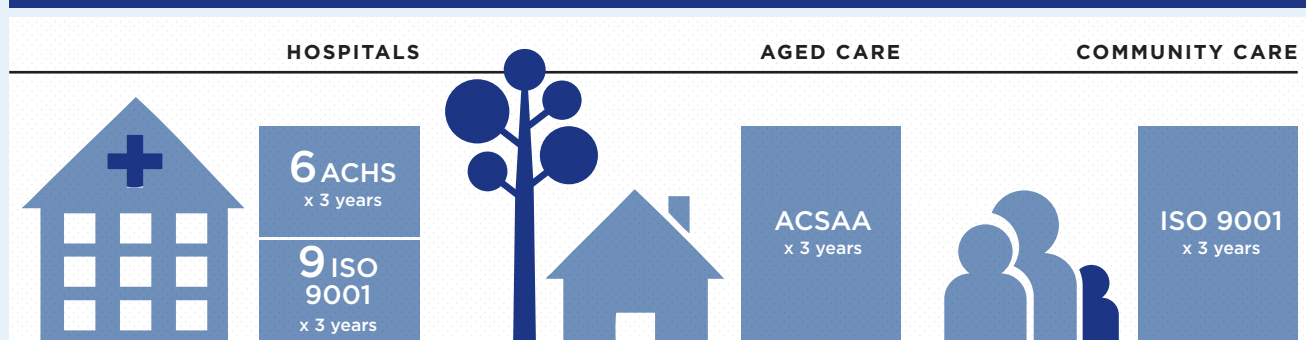
### MEDICATION ERRORS REQUIRING INTERVENTION



### 2013 SNAPSHOT OF PATIENT SATISFACTION



### CALVARY ACCREDITATION



OBD: Occupied Bed Days  
 ACHS: Australian Council Healthcare Standards  
 ACSAA: Aged Care Standards & Accreditations Agency

# High Reliability Care

## Reliability, Quality and Safety

We believe that high reliability in health care means providing consistently high-quality, safe care for every patient, every time. We have an excellent record, and we are committed to seeking out and optimising every opportunity to improve the experiences and clinical outcomes of our clients, patients and residents.

Over the past year, we have initiated or delivered a range of projects that have reinforced and strengthened our strong foundation in clinical safety and quality.

We have engaged our leaders in strengthening our shared commitment to zero-harm goals, establishing a positive safety culture, and instituting a robust process improvement culture.

We have worked hard to recognise, monitor and address inexplicable and unwanted variability in the care we deliver. As a result of our ongoing negotiations and relationships with health funders and regulators, we have developed and implemented organisation-wide clinician-led approaches to preventing complications and reviewing them whenever they occur.

Over the past year, we have reduced the number of falls, hospital-acquired infections and medication errors. Most importantly, we have ensured that our patients, residents and clients, and their families and the wider communities we serve, are able to work with us to develop solutions, understand emerging problems and provide support.

### PHASING IN ELECTRONIC MEDICAL RECORDS

Our clinical staff work in increasingly complex and challenging environments. As part of our commitment to them, we have introduced initiatives that support them and enable them to be the very best they can be – to continuously improve clinical outcomes and improve patient, resident and client experiences.

We have introduced the electronic clinical record system Vitro across our 10 private hospitals in the first phase towards implementing full electronic medical records. Vitro provides enhanced decision-support tools at the bedside, supports integrated care models that put patients at the centre of care, and detects and prevents avoidable errors.

The introduction of Vitro demonstrates our investment in innovation to support our clinicians to deliver real change in clinical practice.

### PATIENT SAFETY & QUALITY INDICATORS

|                                      | CALVARY 2016 PERFORMANCE                  | INDUSTRY BENCHMARK |
|--------------------------------------|---|--------------------|
| Hand Hygiene <sup>#</sup>            | 81%*                                      | 70%                |
| Staph Aureus Bacteremia <sup>^</sup> | 0.13/10,000 OBD                           | 0.87/10,000 OBD    |
| Patient Falls (all) <sup>^</sup>     | 2.94/1,000 OBD                            | 3.5/1,000 OBD      |
| Medication errors <sup>^</sup>       | 2.56/1,000 OBD                            | 5.0/1000 OBD       |
| Patient Satisfaction <sup>*</sup>    | 83%                                       | 84%                |
| Accreditation                        | All Calvary services are fully accredited |                    |

<sup>^</sup> Data reported through Calvary Incident Management System

<sup>\*</sup> Data reported from independent patient survey results 2013

<sup>#</sup> Data collected by observational audit



## Calvary Star Awards



L-R 2015-16 STAR Awards winners Allison Campbell, Director of Clinical Services and Grant Musgrave, CEO, of Calvary St Vincent's and St Luke's Hospitals in Launceston, Tasmania; with Ann Young, National Manager Clinical Safety and Quality.

Calvary's STAR Awards show our dedication to improving clinical safety for our patients, residents and clients. The awards also celebrate staff members who make a significant contribution to improving our clinical safety performance, particularly relating to reducing falls.

### WINNERS AWARD - CALVARY CENTRAL DISTRICTS HOSPITAL

A major drive to prevent falls at Calvary Central Districts Hospital in South Australia succeeded in reducing the number of falls to below the target of 3.08 falls per 1,000 occupied bed days (OBD), with a rate of 2.31 OBDs for 2015-16.

Strategies included asking volunteers to give non-clinical assistance and sharing responsibility for preventing falls among the elderly and confused to all people around the patient, not just the allocated nurse.

### ACHIEVEMENT AWARD - CALVARY ST VINCENT'S AND ST LUKE'S HOSPITALS

The St Vincent's and St Luke's hospitals in Launceston achieved an almost 50 per cent reduction in falls. The hospitals recorded 1.32 falls per 1,000 OBDs against a target of 1.2 for 2015-16.

## Integrating Care for Those Who Need It Most

Since 2012, Calvary has worked to establish regional alliances that build strong and innovative working relationships with local health, aged and social care providers in the communities we serve. Caring for people in their last year of life is a responsibility shared among health professionals from many services, as well as families and members of the wider community. Ensuring seamless care and good communication between all parties can be challenging. The Hunter Alliance – a partnership between Hunter New England Local Health District, Hunter New England Central Coast Primary Health Network and Hunter Primary Care – won financial support from the NSW Planning and Innovation Fund to develop an innovative approach to overcome these challenges. It's called the Care in the Last Year of Life Workstream.

At the heart of this pilot project is MyNetCare, a web-based clinical handover tool for coordinating the care of people in the last year of life. The tool aims to improve communication between people who are approaching

the end of their life, their clinicians and carers, and others they may authorise to view and contribute to their clinical handover record. MyNetCare helps those involved in the care to coordinate service providers and ensure good communication and comprehensive clinical handover. It also encourages patients to talk about and document their wishes and to share them with their care team. This helps clinicians to more closely align treatment choices with the person's expressed needs and goals of care as they approach the end of life.

Over recent months, the MyNetCare project team has been conducting awareness and education sessions with consumers and clinicians from a wide range of acute, community, specialist palliative care and residential aged services in the Newcastle region.

The MyNetCare pilot program was launched in October 2016.





# Recognising Excellence In Care



**DR MAUREEN MCCLUSKEY, OAM**

Dr Maureen McCluskey, a general practitioner at the Calvary Haydon Retirement Community in Canberra, was awarded a Medal of the Order of Australia for service to medicine and to aged care.

Dr McCluskey, who has been in practice for 41 years, has run her practice from the retirement community for the past four years.

She has had a particular interest in aged care for 20 years. She served as a member of the ACT Government's pilot study into respite care in early dementia in 2004-05. She also wrote and published *An ABC of Residential Aged Care* in 2012. She was a member of the Medication Advisory Committee at Bupa Aranda in 2004-14; a member of the Care and Ethics Committee and the Medical Advisory Committee Ginninderra Gardens Nursing Home (now Bill McKenzie Gardens) from 2004-09; and has been a member of the Medication Advisory Committee at Calvary from 2008-16.



**PROFESSOR JAMES DENHAM, OAM**

Professor James Denham, a Senior Staff Specialist with the Department of Radiation Oncology at Calvary Mater Newcastle, was awarded a Medal of the Order of Australia for his service to medicine and to medical research.

Known to his colleagues as Jim, Professor Denham has worked at the Calvary Mater Newcastle hospital since 1987. Since 1992, he has been Conjoint Professor, School of Medicine and Public Health, at the University of Newcastle, where he established a degree course in therapeutic radiography. He is also a founding member of the Trans Tasman Radiation Oncology Group, which was formed in 1989. In 2005, Professor Denham advocated to improve awareness of prostate cancer and to promote its earlier diagnosis and more effective treatment. In 2006, he was a recipient of the HMRI Sparke-Helmore Award for Research Excellence. In 2013, he received a NSW Government Community Service Award.

Professor Denham has received more than \$10 million in competitive research funding and more than \$7 million in industry funding. He has also published more than 190 papers in peer reviewed journals and presented published works at 58 conferences, both nationally and internationally.



**DEIRDRE TUCK, OAM**

Deirdre Tuck, Hospital Coordinator and oncology nurse at Calvary St John's in Hobart, was awarded a Medal of the Order of Australia for her contribution to medical research organisations and to oncology nursing. Deirdre, a specialist in oncology and palliative care, co-managed the hospital's Gibson Unit for many years and is the President of the David Collins Leukaemia Foundation. Calvary is very proud of Deirdre and grateful for her ongoing contribution to Hobart's community of care.



Hannah Sayers of ACT Bruce Public Hospital was awarded ACT Midwife of the Year by ACT Health

## Education Sessions

### PROGRESSIVE NEUROLOGICAL DISEASE

Around 100 people attended two workshops run by the Statewide Progressive Neurological Disease Service at Calvary Health Care Bethlehem in FY15-16. The service is designed to improve the quality of life of those living with a progressive neurological disease (PND). The service is funded by the Victorian Government, but it frequently provides education and phone advice to clinicians and services throughout Australia and, occasionally, beyond. Through our service, we seek to foster collaborative partnerships between health professionals and increase awareness of the issues faced by individuals living with PND and their families.

Over the years, many community clinicians have asked to visit the service to learn about the strategies and interventions that can assist people living with a PND. In response to an increasing number of such requests,



staff in the service began offering community capacity building workshops in September 2014.

These full-day workshops offer attendees an opportunity to interact and exchange ideas about the complex management of people living with a PND. The workshops incorporate multidisciplinary presentations from allied health, nursing and medical staff on clinical management approaches and interventions. Participants are given the opportunity to attend a range of interactive sessions, where they can ask questions and trial a broad range of equipment, including hoists, wheelchairs, neck support collars and

eye gaze-controlled computer-based communication systems.

Participants this year said they valued the small interactive sessions, which allowed time to focus on specific issues with specialist clinicians. The focus on quality of life and the use of videos and testimonials from real patients enhanced learning, giving insights into the experiences of patients and their families. Feedback from participants showed that these workshops were very well received. Some suggested offering more targeted sessions, which led to the development of a post-conference workshop, run adjacent to the National Motor Neurone Disease Conference in September 2016.

## Excellence in Pastoral Care Award

Catholic Health Australia (CHA) has honoured Calvary Mater Newcastle's Pastoral Care Manager, Mary Ringstad, with its Award for Excellence in Pastoral Care 2015.

Mary was presented with the award at the Catholic Health Australia Awards at Parliament House, Canberra, in August. The award recognised Mary's 17 years of dedicated service, during which she has ensured that spirituality remains a cornerstone of the provision of Catholic health care.

Widely recognised as an outstanding provider of sensitive and compassionate pastoral and spiritual care, Mary is valued not only by staff and patients at Calvary Mater Newcastle, but by the greater Newcastle and Hunter region communities.

Mark Green, National Director, Mission, at Calvary, said, "We are very proud

of what Mary has achieved and her leadership not only at Calvary but also in the Catholic sector.

"Mary's capacity to be immersed in the full breadth of our community's life, in the things that matter to our people, is inspirational and moving. Her insight that our hospitals and aged care facilities are full of people carrying heavy emotional loads is a poignant reminder of the potential for cognitive and emotional overload. We need to look after one another."

When addressing delegates at the Catholic Health Australia annual conference, Mary spoke of the vital role pastoral care plays in both the physical and spiritual wellbeing of patients.

"Pastoral care is the human face of health care," she said. "It's the human encounter that changes people's lives. We need uncompromised commitment to pastoral care in Catholic health facilities.

"We need to be confident to enter the lives of those who enter our facilities – we need to open our hearts and our minds."





Calvary Cessnock trainees Callan Hawes (left) and winner Jake Basista (right), with Operations, Quality and Risk Manager Karen Fortington

## Calvary Trainee Named Best in the Hunter

Calvary Cessnock Retirement Community employee Jake Basista was awarded the 2015 School Based Trainee of the Year at Novaskill's Hunter region NSW awards in November 2015.

Jake said he couldn't believe it when he won the award. "When they announced my name, I looked over at Dad and he was up out of his seat," Jake said. "It took 24 hours for it to sink in that I had won." Jake, 16, was initially attracted to aged care as his 'Great Nan' was a resident at Calvary Cessnock, and he saw how she was cared for before she passed away. "I feel that I am returning the favour for the care my Great Nan received when she was there," he said.

Jake recently completed a Certificate III in Aged Care and now wants to enrol in the Certificate IV course.

Fellow Calvary Cessnock trainee Callan Hawes, 23, was a finalist for the Trainee of the Year award.

Jake and Callan are both part of the Calvary Cessnock 'Locals Caring for Locals' training program, which aims to provide greater employment opportunities in the Cessnock region. It is led by Calvary Cessnock Retirement Community General Manager Kristin Smith.

## National First for Aboriginal Health Practitioner

**CONGRATULATIONS TO KATHRYN BENSLEY, CALVARY MATER NEWCASTLE'S PALLIATIVE CARE SENIOR ABORIGINAL HEALTH EDUCATION OFFICER, WHO IS NOW AUSTRALIA'S FIRST REGISTERED ABORIGINAL HEALTH PRACTITIONER (RAHP) IN PALLIATIVE CARE.**

Kathryn is a recent graduate of the Aboriginal Health College in Sydney, where she completed a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice). Kathryn juggled 500 hours of practical experience with full-time work and caring for her family.

Of her recent achievement, Kathryn said, "My scope of practice is firstly education. That is, education for non-Aboriginal staff and medical students about the customs, beliefs and practices of Aboriginal people. I also educate Aboriginal people about palliative care and what it means for them and their families when they are diagnosed with a terminal disease, and the need for them to consider end-of-life care.

"In addition, I work as a support person, liaison officer and advocate for Aboriginal patients and their families in the community, hospitals and nursing homes. I lend advocacy and cultural support to Aboriginal and Torres Strait Islander patients attending specialist clinics or hospital appointments.

"I've been extremely privileged to be with Aboriginal patients at the end of life. Death is a scary word for Aboriginal people – that fear of the unknown." Kathryn acknowledges there are many complexities around gender and culture in her work in the Newcastle community, where she is well known.

"Dying in country is important, but it depends on the person and the support they can get. The more traditional people are, the more important it is to them to observe their customs. Others who aren't so traditional don't worry as much about where they die, and they are more open to talking about death and dying."











# OUR PEOPLE AND CULTURE

STEPHANIE, WARD CLERK AT CALVARY PUBLIC HOSPITAL BRUCE, ACT



good works.

Leadership capability is critical to our on going success and Calvary is committed to playing it's role in developing leaders in the sector. Likewise Calvary is committed to workplace gender equality and has again been recognised as a leader in this area by the government agency.

Training, education and investing in the new generation of the health workforce is important to Calvary and the community. Our hospitals offer graduate transition to professional practice, post graduate and scholarship programs.

Calvary have embraced technology by using e-Learning as a key delivery mode for mandatory and other skills training. Our learning and development strategy also includes on the job, facilitator lead training, but e-learning is clearly now a key platform. In 2015/16 Calvary staff completed 69,000 on line learning modules.

## People and Culture

At the heart of Calvary are amazing people doing wonderful things to serve and enrich the lives of others.

We captured just a few of the wonderful stories of Calvary staff on a series of videos that were launched with our new web site. We heard stories of a life time working at Calvary in a variety of roles, stories of the unique personal and career development people have

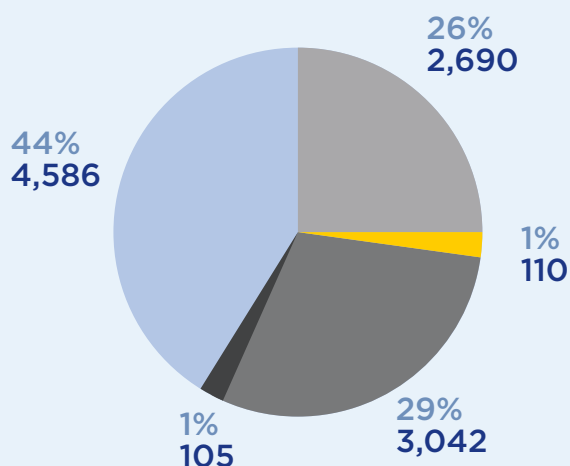
experienced at Calvary.

Calvary launched two new recognition programs in 2015 to recognise just some of the special efforts in critical focus areas of Clinical Care - The Star Awards and in Workplace Health and Safety. The winners were announced at the annual leadership conference. A perpetual plaque is now hanging at the national Offices of Calvary to remember these

In a growing organisation it is paramount that we refine and embed appropriate governance structures and systems to monitor the business. In 2015/16 Calvary launched the Speak Out program to ensure we are kept abreast of risks and issues in our services and staff feel they have a voice.

## Calvary People Snapshot

Full Time
  Part Time
  Casual
  Consultant
  Other



+ NUMBER OF EMPLOYEES 10,538  
 + NUMBER OF VOLUNTEERS 1,081  
 + NUMBER OF REGISTERED NURSES 3,338  
 + NUMBER OF ALLIED HEALTH WORKERS 396  
 + NUMBER OF COMMUNITY CARE SUPPORT WORKERS 2,732  
 + AVERAGE YEARS OF SERVICE 7.4



# Calvary's 'Let them Shine' Leadership framework

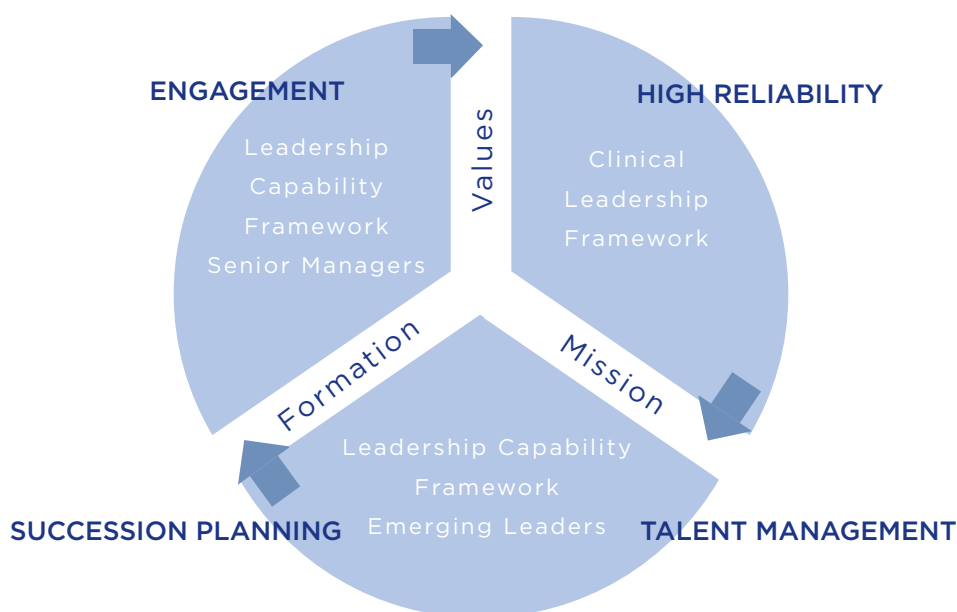
## CALVARY HAS DEVELOPED 'LET THEM SHINE', A CAPABILITY FRAMEWORK FOR SENIOR, CLINICAL AND EMERGING LEADERS.

It aims to lift the capability, capacity, flexibility and adaptability of leaders, to prepare them for the challenges they face each day in their front-line leadership roles and for career progression.

A Let Them Shine framework for senior managers was launched in 2016, and is to be followed by a program for emerging leaders and clinical leaders in late 2016 or 2017.

Investing in our leadership capability of today and tomorrow is key to delivering on our strategic plan and operational performance target.

The benefits are expected in engagement, our reliability, our talent pool and succession planning.



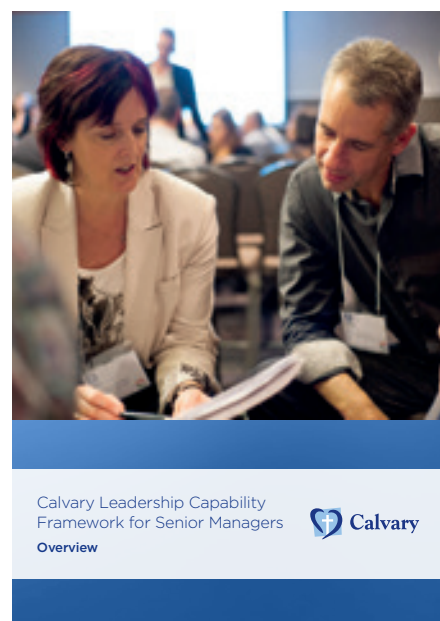
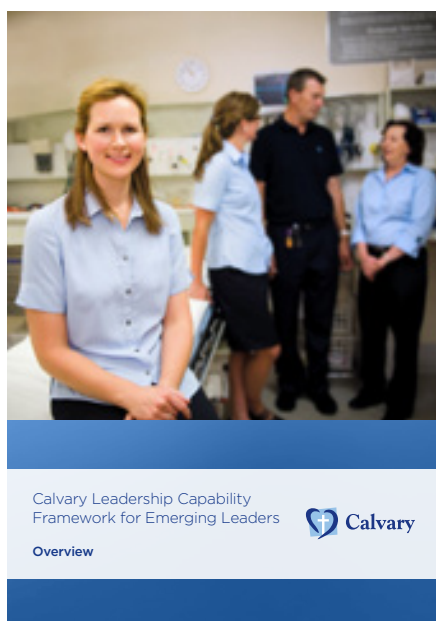
## SENIOR LEADERSHIP FRAMEWORK

- + DEVELOPMENT GUIDES
- + INTERVIEW GUIDES
- + PROFILING TOOL

## EMERGING LEADERS FRAMEWORK

**In development - launching 2017**

Calvary is launching programs for modules to address the Frameworks



## Calvary embraces eLearning platform

### Course Snapshot

**9,501 Calvary National Induction Program**

**9,423 Calvary Professional Conduct**

**9,165 Work Health and Safety Fundamentals**

**10,233 Palliative & End of Life Care Module 1**

**10,171 Palliative & End of Life Care Module 2**

**69,000 Total Courses Completed**



## Calvary is recognised as a leader in gender equality

WGEA Director Libby Lyons said "I congratulate all of the 2015 citation holders for their initiative and commitment. These employers are at the frontline of driving positive change as they set the gold standard for inclusive workplaces."

"It's especially encouraging that more organisations are looking for ways to actively support women and men to balance their caring responsibilities while also pursuing their careers."

Mark Doran, Calvary's National Chief Executive Officer, is very proud of our focus on creating a working environment that supports a diverse range of employees to maximise their personal potential in a wide range of roles on offer at Calvary.

"The citation recognises that gender equality is increasingly critical to an organisation's success and is viewed as a baseline feature of well-managed and leading organisations."

The EOCGE citation is a voluntary leading practice recognition program that is separate to compliance with the Act. Criteria for the citation cover leadership, learning and development, gender remuneration gaps, flexible working and other initiatives to support family responsibilities, employee consultation, preventing sex-based harassment and discrimination and establishing targets for improving gender equality outcomes.

Additional courses offered online

**6,534 Hand Hygiene**

**3,088 Basic Life Support**

**5,162 Fire Safety and Emergency Procedures**

**5,406 Manual Handling Introduction**

### New courses offered in 2016

- + RESUS4KIDS - Paediatric Emergency Management Series
- + Conflict & Challenging Behaviour Awareness series
- + WHS Short Courses
- + Computer Courses - Microsoft 2013
- + Competition and Consumer Law series



# Calvary Helps Graduates Transition to Professional Practice

Placements for Calvary's 'Transition to Professional Practice' national program for graduate nurses, midwives and enrolled nurses increased from 113 in 2015 to 170 in 2016, to accommodate Calvary's growth.

Calvary's graduate program offers career opportunities with specialist training, education and leadership development in future years of employment.

## KRISTY STAPLETON, REGISTERED NURSE

### CALVARY CENTRAL DISTRICTS HOSPITAL, ADELAIDE, ONE OF CALVARY HEALTH CARE ADELAIDE'S FOUR HOSPITALS

I completed my Graduate Nurse Program in 2013. I chose Calvary because the program seemed great in terms of benefiting me as a young professional and not just as a nurse completing extra requirements.

The program was challenging but a great experience. I learnt so much from the clinical staff, the education sessions with all the other Calvary Health Care Adelaide's registered nurse graduates, the fundraisers for Little Company of Mary in East Timor and the auditing of the standards. I made some lifelong friends among fellow graduate nurses as we all supported each other immensely.

Our coordinator was a fantastic support too, pushing us clinically and professionally, but also being a shoulder to cry on in our time of need. Three years later, I am working as a clinical facilitator at Calvary Central Districts Hospital. Through my experience working on the wards at North Adelaide, I identified my passion for educating and supporting undergraduate nurses – and here I am now. I absolutely love it.

## POST-GRADUATE PROGRAMS

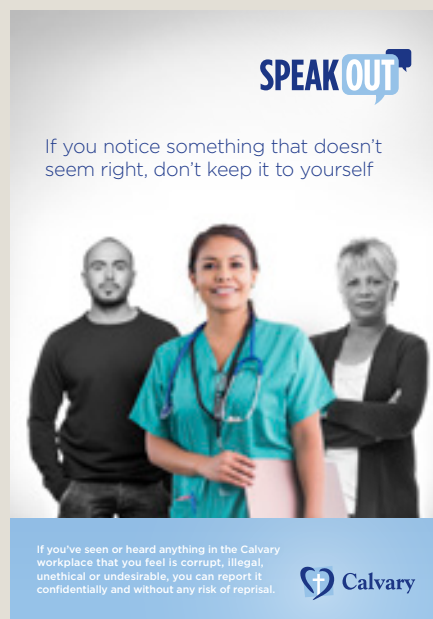
- + Since 2013, Calvary has partnered with the University of Tasmania (UTAS) to provide an honours program and post-graduate qualifications for tertiary-qualified nurses.
- + Participants have the opportunity to complete tertiary study online as part of the UTAS Calvary fee-free scholarship program. The program helps them develop their nursing knowledge and skills in their speciality and bring evidence-based research to the workplace to influence and challenge the status quo and ensure we maintain best practice. We are pleased to note that:
- + **158 CALVARY STAFF COMPLETED POST-GRADUATE STUDIES IN 2015**
- + **134 STAFF ENROLLED IN 2016, WHICH IS CONSISTENT WITH PREVIOUS YEARS.**



Kristy Stapleton

# Speak Out Program


Calvary introduced a 'Speak Out' program in May 2016 that enables employees to report corrupt, unethical or inappropriate behaviour in the workplace. The service is outsourced to an external provider as Calvary recognised that there are times when employees may not feel comfortable disclosing information internally. Speak Out is a confidential and anonymous program that facilitates the reporting of incidents relating to harassment and bullying (both experienced and observed), theft, fraud and any other perceived inappropriate or illegal conduct.



**SPEAK OUT**

If you notice something that doesn't seem right, don't keep it to yourself

If you've seen or heard anything in the Calvary workplace that you feel is corrupt, illegal, unethical or undesirable, you can report it confidentially and without any risk of reprisal.

 Calvary

## Workplace Health and Safety Review

Calvary has moved beyond simply focusing on legislative compliance, and seeks to evolve into a values based, learning organisation. Thus, we promote safety, health and wellbeing by proactively identifying and managing all workplace hazards.

We added the role of National Injury Management and Wellbeing Advisor to the Workplace Health and Safety (WHS) team in April 2016. The main aim is to ensure best-practice injury management for all employees who sustain a work-related injury. The advisor will also focus on developing and implementing strategies to minimise workers' compensation premiums, promote employee wellbeing, manage fitness for work, and undertake performance reporting. The advisor will also provide

support and coaching in effective management of workplace injuries and related issues.

Calvary conducted its first Workplace Health and Safety (WHS) Awards in 2015. The awards aim to raise awareness of workplace health and safety requirements across the whole organisation, and encourage, recognise and celebrate staff making significant contributions to improving safety. All staff can participate in awards to raise awareness of risk management, consultation, building awareness, building capability and engaging at individual and team levels. Calvary is proud to congratulate the winners below for their outstanding contributions to Calvary workplace health and safety.

| AWARD  | RECIPIENT  |
|--|--|
| Best individual contribution to improving WHS - Non - WHS professional | Andrew Pert (Riverina Hospital)                                |
| Best individual contribution to improving WHS - WHS professional       | Sue O'Connell (Central Districts and Rehabilitation Hospitals) |
| Safety Leadership Award - Individual                                   | Dr Jane Fisher (encouragement award)                           |
| Best solution to an identified WHS issue                               | Kim Skeffington (Retirement Communities - Cessnock)            |
| Best team contribution to improving WHS                                | Bethlehem WHS Committee  |



L-R Bethlehem WHS Committee delegate Nathan McCracken, CEO Dr Jane Fischer and Quality and Safe Systems Manager Mark Heenan

## Workplace Health and Safety

### FY15-16 WHS PERFORMANCE MEASURES

- + Lost time injury frequency rate (LTIFR) - 5 per cent improvement
- + Number of worker's compensation claims - 12 per cent improvement
- + Lost time injury severity rate - 20 per cent increase (returned to the FY13-14 level)
- + Manual handling claims - 13 per cent improvement
- + Total claims cost - 9 per cent improvement

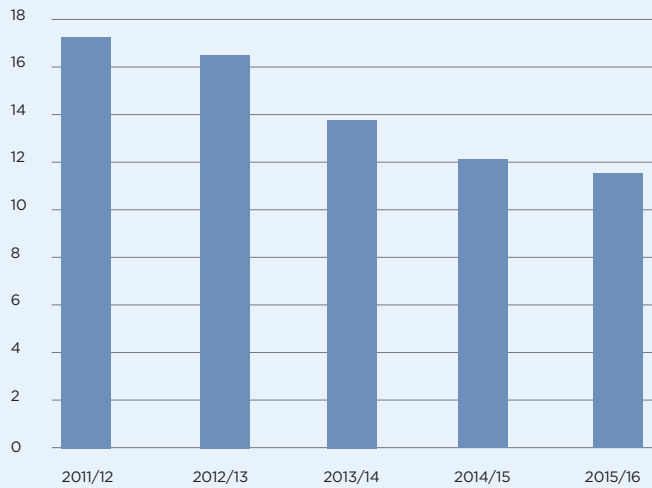
Over the past four years, Calvary has experienced a significant reduction in worker injuries, related workers' compensation claims and lost time injury frequency rates. With our continued focus on WHS, these improvements have continued in FY15-16. Calvary has also worked on further imbedding our WHS management system to achieve greater consistency across the group and to improve the management of workplace risks. Some of the significant changes implemented in FY15-16 include:

- + undertaking a standardised WHS systems audit across all services, allowing for the identification of areas for improvement and a comparison with previous Calvary services performance.
- + introducing a single WHS Action Plan database, allowing for visibility and accountability for completing all WHS-related improvements
- + developing a central online library for risk assessments and work instructions, allowing services to share WHS resources, which frees up time for other WHS activities.

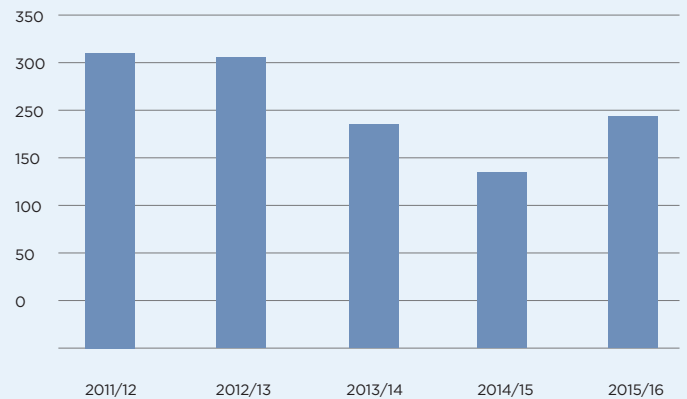
Calvary has continued to reduce the number of injuries; however, in FY15-16, the number of shifts lost to injury (severity rate) has increased. To help manage workplace injuries, Calvary created a new National Injury Management and Wellbeing Advisor role in late FY15-16. The advisor will work with various Calvary services to improve the health of staff and to ensure we provide effective rehabilitation for injured workers.

## and Safety Performance Measures

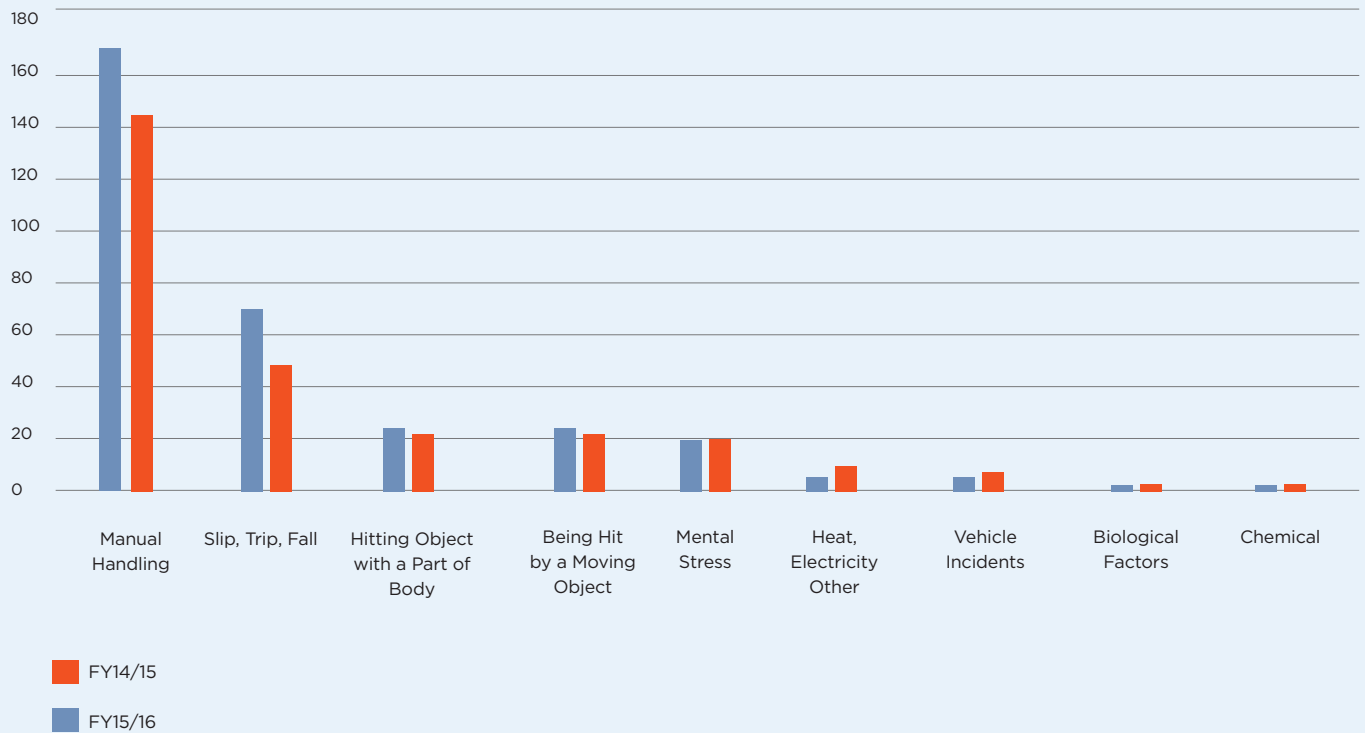
Lost Time Injury Frequency Rate



Lost Time Injury Severity Rate



Mechanism of Injury - No. of Claims





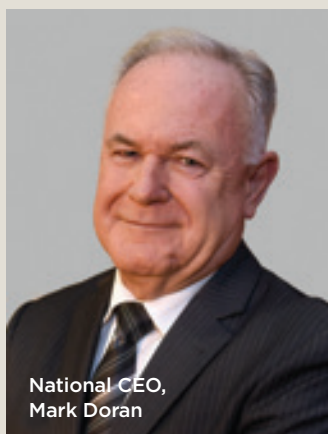




A photograph of the interior of a modern chapel. The space is characterized by its high, vaulted wooden ceiling and three tall, narrow stained-glass windows that run the length of the sanctuary. The windows feature abstract designs in shades of blue, yellow, and red. In the foreground, rows of dark wood pews are visible. To the left, an altar area is partially seen with a white cloth and a small white tabernacle. The lighting is warm and soft, creating a serene atmosphere.

# WISE STEWARDSHIP

FEATURED ABOVE - CALVARY HEALTH CARE KOGARAH PUBLIC HOSPITAL CHAPEL



National CEO,  
Mark Doran

The Directors believe that we should be striving to achieve the best commercial results to sustain our operations, fund better integration, grow and innovate in pursuit of our strategic aims. Demonstrating wise stewardship and contributing to social stability in the communities Calvary serve requires a strong financial base. Calvary achieves this through strict cost management and the pursuit of improved revenue rates. Calvary continues to invest in its ability to be a source of healing and in facilities which enable Calvary to provide a wider range of services to the local communities.

Our models of care have been developed to be more efficient and effective in ways which reflect Calvary's core values. Specifically, Calvary's focus is on minimising preventable admissions, unnecessary treatments and delays in assessments, educating residents about care options, and improving access to home care services.

**MARK DORAN**  
**NATIONAL CHIEF**  
**EXECUTIVE OFFICER**

# Little Company of Mary Health Care Limited

## Financial Summary for the Year ended 30 June 2016

### Our short and long term objectives are to:

- 1) Put the person and family at the centre of care in all settings, continuing to focus on palliative and end of life care;
- 2) Sustain the ability of our hospitals, aged care facilities and community services to provide quality and compassionate care in the communities we serve;
- 3) Improve the delivery system in order to promote effective, equitable, quality care and ensure patient, resident and client safety; and
- 4) Grow, integrate and innovate within our 'circle of competence' within the environment we operate. It's Calvary's aim to provide a highly valued service that is greater than the sum of its parts.

### Principal Activities

The principal activities of the Group during the period were the provision of acute health services by private and public hospital facilities, sub-acute services, palliative care, residential aged care, independent living units ('ILU'), community and home care services.

Within these activities, Calvary has developed models of care that have been specifically designed to meet customer expectations, while reducing cost, complexity and risk. This includes the continued development of home and community based services to better manage chronic disease and palliative and end of life care. Calvary's doctors, nurses, carers work closely with Local Health Districts, Primary Health Networks and other stakeholders to

improve the care journey of a patient and reduce their burden within what can be a complex system.

For the financial period 1 July 2015 – 30 June 2016, Calvary has maintained improved operating performance and cash position as a result of a continued focus across all services on the core revenue generating activities, along with cost management.

Where necessary, ancillary services have been outsourced and non performing aspects of our services have been subject to stringent review.

The private hospital sector continues to seek improved health fund rates in an environment where health costs are growing at a rate in excess of inflation.

The aged care and home care sectors are significantly funded by the Commonwealth government where rate increases have been below the rate of inflation. The introduction of significant changes in the regulation of these sectors will be challenging.

### SIGNIFICANT CHANGES IN THE STATE OF AFFAIRS

There were no significant changes in the state of affairs of the Group during the financial year.

### Results

A surplus of \$67.8M was achieved for the Group for the financial year ended 30 June 2016 (2015: surplus \$77.8M).

The reduction in year on year net surplus is attributable to increased depreciation and amortisation charges as the future revenue generating capacity of buildings on sites currently subject to redevelopment are reviewed and the ongoing value of community care intangible assets is reassessed.



The maintenance of the improved operating performance and cash position is a result of a continued focus across all services on the core revenue generating activities along with cost management. Where necessary, ancillary services have been outsourced and non performing aspects of our services have been subject to stringent review. The private hospital sector continues to seek improved health fund rates in an environment where health costs are growing at a rate in excess of inflation. The aged care and home care sectors are significantly funded by the Commonwealth government where rate increases have been below the rate of inflation. The introduction of significant changes in the regulation of these sectors will be challenging.

## Review of operations

### (A) REVENUES

The Group's revenue from operating activities totalled \$1.17M (2015: \$1.13). Grants and subsidies from Government for hospital and aged care operations totalled \$464M (2015: \$468M). Grants and subsidies represent 40% (2015: 41%) of revenue from operating activities. In addition, other income (including interest, rent and donations) totalled \$37.6M.

### (B) EXPENSES

The Group's expenses from operating activities totalled \$1.14M (2015: \$1.09M). Expenses on personnel costs represent 61% (2015: 61%) of total operating expense.

Staffing levels for clinical services have increased during the reporting period with total staff of 6,620 full time equivalents as at 30 June 2016 (2015: 6,546). The actual number of staff as at 30 June 2016 was 10,588 (2015: 10,577).

## Future Developments

The Calvary Group plans to continue service integration throughout the regions in which it operates, in accordance with the mission, vision and values of the organisation. The Group continues to examine both growth potential and the underlying strategic value of existing assets.

### CALVARY HEALTH CARE ACT

At the date of this report, Calvary Health Care ACT Limited (ACT) is in discussion with ACT Health about the possible expansion of the Calvary Public Hospital with the funding of additional beds over the current 295. Discussions with ACT Health in relation to the funding of employee leave liabilities which existed at the time the ACT government changed from cash to accrual accounting are also ongoing.

Calvary Health Care ACT has commenced construction of a new 94 bed standalone Private Hospital on the Bruce campus opposite the Public hospital with an expected completion date of July 2017. When the new hospital commences operations, the 6th floor of the Calvary Public Hospital Bruce, which has 60 beds, will be vacated by Calvary Private Hospital along with space used for theatre operations and administration.

### CALVARY HEALTH CARE BETHLEHEM

Calvary is proposing to redevelop the current Calvary Health Care Bethlehem Public Hospital as part of an integrated health precinct on its current site in Caulfield to address its aging infrastructure and ensure a sustainable Model of Care. This will mean that the current public hospital will be re-built to provide modern contemporary health care accommodation alongside complementary Calvary services including residential aged care and community care.

The proposal seeks to expand the existing specialist palliative and progressive neurological services to include independent living units and residential aged care. This initiative is aligned with the Victorian Department of Health and Human Services Strategy.

### CALVARY HEALTH CARE ADELAIDE

The new Adelaide hospital, currently under construction and due to open in the first half of 2019 will merge the operations of Calvary Wakefield and Calvary Rehabilitation Hospitals. The current Calvary Wakefield and Calvary Rehabilitation leases expire in July 2019.

### CALVARY RETIREMENT COMMUNITY, MUSWELLBROOK

The Board has approved development at Muswellbrook of an integrated aged care community which will comprise a 65 bed residential aged care facility and 42 independent living units. Construction commenced for the 65 bed residential aged care and 22 (Phase 1) independent living units in the 2015/16 financial year and it is anticipated that the service will commence operation in March 2017.

### CALVARY COMMUNITY CARE

In February 2017, the Home Care Package (HCP) will become deregulated with package allocations to specific providers being revoked. Consumers will consequently hold the package allocation and have the ability to choose their preferred provider. The Calvary Group has developed planned strategies to maximise retention of current Home Care Package (HCP) clients and also strategies to attract new consumers.

## Significant events after year end

Set out below are the details of matters or circumstances which have arisen since the end of the financial year which significantly affected, or may significantly affect, the operations of the Group.

On 14th July 2016, Calvary Health Care ACT Limited commenced a dialogue with ACT Health, in accordance with the Calvary Network Agreement (CNA), regarding the funding model applicable to the 2016/17 financial year and the level of funding provided. As at the date of this report, negotiations continue with ACT Health in relation to the ongoing funding arrangements for the Public Division.









# OUR TRUSTEES, BOARD, EXECUTIVE TEAM AND SERVICES

FEATURED ABOVE - CALVARY HEALTH CARE KOGARAH PUBLIC HOSPITAL NSW



# Calvary Ministries Directors

### MR BILL D'APICE (CHAIR)

Bill is Chairman of Partners at Makinson & d'Apice, a well-known Sydney law practice, which has provided legal services to various agencies of the Catholic Church for many years.

Bill's principal areas of legal practice are property law, commercial law and the law relating to charities and Not-For-Profits. Although he has expertise in all aspects of commercial law, his particular emphasis is on corporate structuring, governance and directors' duties. He also sits on a number of charity and Not-For-Profit boards which allows him to bring practical experience to his advice. He was a Director of Catholic Church Insurances Limited for 15 years, and it's Chair for 9 years. Bill, through his firm, has provided legal advice to the Little Company of Mary for a number of years, and is currently a member and Chair of the Little Company of Mary Advisory Council. Bill resides in Sydney.

### MR GARRY RICHARDSON

Garry has extensive experience as a Chief Executive in the Australian health insurance industry, as well as holding other senior positions in the financial services industry.

Since retiring from a full-time chief executive role in 1998 Garry has held positions as Chair of Southern Health, Health Super Pty Ltd, Health Super Financial Services Ltd, Housing Guarantee Fund Ltd and has also held Directorships in Dental Health Services Victoria and the Australian Red Cross Society. Garry was also Commissioner of the Private Health Insurance Administration Council from 1998 to 2007, and Chair of the National Blood Authority from 2007 to 2011.

In addition to his current role as a director of Calvary Ministries, he is also a director of Defence Health Ltd and is currently Chairman of St Roch's Parish Pastoral Council. Garry has also held the position of Chair of Little Company of Mary Health Care Ltd. Board in 2007/2008. He is a fellow of the Australian Institute of Company Directors. Garry resides in Melbourne.

### SISTER KATHLEEN COTTERILL LCM

Sr Kathleen Cotterill has been a member of the Little Company of Mary for over 40 years.

During this time Sr Kathleen has held positions at both clinical (general & midwifery) and administrative levels in various healthcare facilities within the Little Company of Mary (Riverina, Tasmania, ACT & Qld - Cairns) and other Catholic health settings, including the role of Director of Inpatient Services at Hawkesbury District Health Service.

She has previously been a member of the Notre Dame (Sydney) School of Nursing Advisory Board, a member of the Catholic Health Australia Directors of Nursing Committee and a member of the Calvary Ministries Members' Council. Sr Kathleen is a Councillor on the Leadership Team of The Province of the Southern Cross of the Little Company of Mary. Sr Kathleen resides in Sydney.

### MR DAVID PENNY

David is currently Financial Administrator for the Diocese of Wilcannia-Forbes in Western NSW. Until December 2015 he held a similar role within the Diocese of Broken Bay. In this diverse role David is responsible for the financial and administrative management of the Diocese. He has significant experience in the management and governance of the not-for-profit organisations and has been a BBI Council member since its inception.

David holds degrees and diplomas in Health Science and Administration, completed the Intensive Executive Management Program for Non-Profit Leaders at Stanford University, CA, USA in 2004. David has a Master's degree in Management and has also recently completed a Master in Pastoral Theology at Heythrop College, London University, UK.

David was a Director of Little Company of Mary Health Care between 2000 - 2009 and was a member of its Mission & Ethics Committee. David resides in Sydney and Forbes NSW.

### MS CATHERINE (KATE) BIRRELL OAM

**Appointed to the board 26 November 2015.**

Kate has served as a Non-Executive Director and senior Nurse Executive in the not-for profit health services sector for many years.

For some 20 years Kate has had a senior management career with St John of God Health Care, finishing as Group Director of Nursing in December 2014. She still provides consulting services to St John of God Health Care as a Nursing Development Program Advisor in Timor Leste.

She holds a number of health related degrees, as well as a degree in business and administration. Kate's Board and committee appointments include; Barwon Health, University Hospital, Human Research Ethics Committee and Mercy Health Board Quality Committee. Previously Kate was a member of both Catholic Health Australia and the Caroline Chisolm Ethics Centre Boards and the Gordon Institute of TAFE Board. She is also a graduate of the Company Directors Course of the Australian Institute of Company Directors. In 2006 Kate was appointed by the Australian Catholic University to the position of Clinical Associate Professor of Nursing, which she held until her retirement in 2014.

Kate was awarded the Medal of the Order of Australia in the General Division for services to nursing, particularly education, and the community in June 2015. Kate resides in Melbourne.

### VERY REV. IAN WATERS

July 2015 - 25 November 2015, retired Father Ian Waters is the Parish Priest of two suburban parishes in the Archdiocese of Melbourne. He is renowned within Australia for his knowledge and expertise in canon law and consults to Bishops and Catholic agencies.

Fr Waters is a lecturer in canon law at the Catholic Theological College, East Melbourne. Fr Waters has served on a number of boards and associated bodies, including on the Senate and Academic Board of Catholic Theological College, as President of the Canon Law Society of Australia & New Zealand, and as Chairman of the Melbourne Diocesan Historical Commission.

He has been an advisor to the Little Company of Mary on Canon Law issues for a number of years. Fr Waters resides in Melbourne.

## MEMBERS' COUNCIL 2015/2016

Sr Bernadette Fitzgerald LCM – Chair  
[retired 30/06/16]  
Sr Marie Therese West LCM  
Sr Anne Sheridan LCM  
Sr Bernadette Clear LCM (retired  
21/04/16)  
Sr Jennifer Barrow LCM (appointed  
21/04/16)

## OFFICERS / ADVISORS

**MS Edwina MacArthur** [Executive  
Officer – appointed 14 September 2015]  
Edwina is a Chartered Accountant  
who after working for over 25 years in  
professional accounting practices joined  
the Not for Profit world. Since 2002 she  
has worked with the Society of Jesus  
(Jesuits) in financial and administrative  
roles. Edwina held the position of  
Assistant Director of Jesuit Mission up  
until the end of 2014 and has also served  
on Not for Profit Boards for the Sisters of  
Mercy and an international advisory team  
for the Jesuits.  
Edwina also acts as Company Secretary  
for Calvary Ministries Limited.

**Patrick Bugden OAM – Executive Officer**  
(retired 22/09/15)

**Michele Black** – Office Administrator /  
Personal Assistant

## Role of trustees

The Catholic Church takes great  
care in overseeing the works done  
in its name. Health care is one of  
those works. The ministry of health  
care is undertaken by a Public Juridic  
Person (PJP) constituted by a number  
of people. The PJP approved by the  
Vatican for Little Company of Mary  
Health Care Limited is known as Calvary  
Ministries. Calvary Ministries' purpose  
is to sustain and further the health  
care ministries originally undertaken  
by the Little Company of Mary – now  
undertaken by Little Company of Mary  
Health Care Limited.

Calvary Ministries exercises a canonical  
stewardship role consistent with the  
teachings and laws of the Catholic  
Church and guided where appropriate  
by the charism, spirit and mission of the  
Sisters of the Little Company of Mary;  
and in accordance with the canonical By-  
Laws of Calvary Ministries and the Code  
of Ethical Standards as approved by the  
Australian Catholic Bishops' Conference.

# Little Company of Mary Health Care Limited Board Directors

The Little Company of Mary Health Care Board is chaired by The Hon. John Watkins AM. The Board comprises the following members: Mr. Michael Roche AM (Deputy Chair), Mr. John Mackay AM, Ms. Rebecca Davies, Professor Katherine McGrath, Associate Professor Richard Matthews AM, Mr. Patrick O'Sullivan, Mr. David Catchpole, Ms. Jennifer Stratton and Mr. James Birch AM. The Hon. Greg Crafter AO served as a Director until the November Annual General Meeting, at which time Ms. Jennifer Stratton was appointed to the Board. Mr. James Birch was appointed to the Board in February 2016. The Board met eight times during the year. One of these meetings was held at Calvary Health Care Tasmania, Calvary St. John's Hospital campus in Hobart in October 2015. Another was held at Calvary Health Care ACT in Canberra in March 2016. This allowed Directors to visit Calvary Health Care Bruce, Calvary Haydon Retirement Community and Calvary John James Hospital, where they inspected our facilities and met staff, patients, clients and residents. In certain matters, regarding Reserved Powers, the Board require the consent of Calvary Ministries as holders of the charism of the health care services of the Sisters of the Little Company of Mary-Holy Spirit Province.

## THE HON. JOHN WATKINS (CHAIR) AM, LLB, MA, DipEd, HON DLITT MACQ

Appointed to the Board and as a  
Chair on 25 November 2010

John has been the Chief Executive  
Officer of Alzheimer's Australia  
NSW since September 2008. He is a  
member of the Advisory Committee  
for the Centre for Emotional Health at  
Macquarie University and an Adjunct  
Professor of Law at the University of  
Western Sydney.

John worked as a teacher for 16 years  
until his election to Parliament in 1995,  
where he served for 13 years.

John served for 10 years as a Minister,  
including the portfolios of Fair Trading,  
Sport and Recreation, Police and  
Corrective Services, Transport, Finance,  
State Development, and Education and  
Training. He was Deputy Premier when  
he retired in 2008.

Subsequently, has also served as  
Chancellor of the University of New  
England in 2013 and 2014.

John was awarded a Member of the  
Order of Australia in the Queen's  
Birthday Honours List in 2015 for  
significant service to the community  
through leadership positions with  
health organisations, to tertiary  
education, and to the Parliament  
of NSW.

## MR MICHAEL (MICK) ROCHE (DEPUTY CHAIR) AM, BA (ACCOUNTING), FCPA, MACS

Appointed to the Board on  
23 April 2008 and Deputy Chair  
on 10 June 2010

Mick Roche is a Consultant working  
with government agencies and  
companies that deal with government  
on a range of strategic management  
issues.

He is also on a number of public  
sector governance boards, a Director  
of Maritime Australia Limited and  
previously Chair of the Pharmaceutical  
Benefits Pricing Authority.

Mick was Under Secretary Defence  
Materiel in the Department of  
Defence and worked at senior levels  
in Customs and the Departments of  
Health, Prime Minister and Cabinet,  
and Immigration and Finance.

Mick was awarded the Member  
of the Order of Australia in the  
Australia Day Honours List in  
2015 for significant service to the  
community through a range of  
maritime, education, healthcare and  
sporting organisations, and to public  
administration

### **THE HON. GREG CRAFTER AO, LLB**

Appointed to the Board on 16 November 2006 and retired on completing a full nine year term on 26 November 2015.

Greg was a Member of the South Australian Parliament from 1979 to 1993 and was a minister in the South Australian Government from 1982 to 1993. In 2008, he was appointed a member of the National Catholic Education Commission and in 2013 was made its Chair. He is a member of the Truth, Justice and Healing Council and is Chair of Catholic Health Australia's Bioethics Committee.

In the Australia Day Honours List in 2009, Greg was awarded an Officer of the Order of Australia for service to the Parliament of South Australia, to education policy in the areas of curriculum development and improved opportunities for teachers and to the community through social welfare and youth organisations.

### **MR JAMES (JIM) BIRCH, AM BA (HEALTH ADMINISTRATION), FCHSM, MNATSIHEC**

Appointed to the Board on 1 February 2016

Jim has over thirty years' experience in planning, leading and implementing change in complex organisations, transcending such areas as Health Care, Justice and Human Services. Jim has led many major consultancies over the period 2006 - 2016.

Jim is Chair of the Australian Red Cross Blood Service, Chair of Mary Mackillop Care South Australia Limited, Chair of the Australian Digital Health Authority, Deputy Chair of the Independent Hospital Pricing Authority and a Director of the Cancer Council SA.

Jim was awarded a Member of the Order of Australia in the Australia Day Honours List in 2007 for service to the community through leadership and management roles in the health and justice systems, and in the areas of public housing and child protection services.

### **MR JOHN MACKAY AM, BA (ADMIN/ECONOMICS), FAIM**

Appointed to the Board on 15 November 2007

John is Chair of Speedcast International Limited, Datapod Pty Ltd and a Director of the Canberra Raiders.

John was previously the Chancellor of the University of Canberra, Chair of the National Arboretum Canberra, the Chair of ACTEW Corp, ActewAGL, TransACT Communications Pty Ltd and a director of Canberra Investment Corporation Limited, Canberra Glassworks and the Salvation Army Advisory Board.

In the Queen's Birthday Honours List in 2004, John was awarded a Member of the Order of Australia for service to the community through the management and administration of major public utility services in the Australian Capital Territory and through contributions to a range of health care, social welfare, cultural and sporting organisations.

In 2008, he was named Canberra Citizen of the Year and conferred with an Honorary Doctorate by the University of Canberra.

### **MS REBECCA DAVIES BEc, LLB (HONS), FAICD**

Appointed to the Board on 25 September 2008

Rebecca is a Director of JDRF Australia, Transparency International Australia, and the Chris O'Brien Lifehouse and is the President of the Heart Foundation (NSW Division) and sits on its National Board.

Rebecca is a member of the Research Committee of the NHMRC and the Consumer and Community Committee. Rebecca is also a Fellow of the Australian Institute of Company Directors and is a regular presenter on AICD courses covering legal, risk and governance issues.

Rebecca retired from Freehills (now Herbert Smith Freehills) in 2009, where she was a senior partner specialising in litigation.

### **PROFESSOR KATHERINE MCGRATH MB, BS, FRCPA, FAICD**

Appointed to the Board on 26 November 2009

Katherine is a widely respected health care executive with more than 30 years' experience working in government, public health and private health, as well as holding senior clinical and academic posts.

Her roles have included Deputy Director General of NSW Health, Chief Executive Officer of Hunter Area Health Service, Professor of Pathology at the University of Newcastle and Group Manager of Strategy and Corporate Affairs at Medibank Private.

Katherine was a founding Commissioner with the Australian Commission for Safety and Quality in Health Care. Katherine currently operates a private health consultancy and is a member of the Board of the Coronial Advisory Council in Victoria.

Katherine originally trained as a haematologist and is a fellow of the Royal College of Pathologists of Australasia.

### **ASSOCIATE PROFESSOR RICHARD MATTHEWS AM, MB, BS**

Appointed to the Board on 1 January 2012

Richard is the former Deputy Director General of the Strategic Development Division of NSW Health. Until June 2007, he was also Chief Executive of Justice Health.

Richard began his career in general practice and was in full-time practice from 1979 until 1998. He developed a special interest in problems relating to drugs and alcohol, and worked for many years at St Vincent's Hospital Sydney's Rankin Court Methadone Stabilisation Unit. He is Chair of General Practice Education and Training, and is a Director of NeuRa, Government Property NSW and Alzheimer's Australia NSW. He also sits on the advisory board of the Centre for Healthy Brain Ageing.

Richard was awarded a Member of the Order of Australia in the Australia Day Honours List in 2010 for service to the health sector through leadership roles in the areas of service development, primary health care, mental health and drug and alcohol policy.



**MR PATRICK (PAT) O'SULLIVAN CA**  
Appointed to the Board on  
27 March 2013

Pat brings more than 30 years of international commercial and business management experience.

Pat is Chairman of HealthEngine and of the Lux Group. He is a Director of Carsales Limited, Isentia Limited and APN Outdoor Limited. He was previously a Director of iSelect Limited and iiNet Limited

Prior to becoming a non-executive Director, Pat was the Chief Operating Officer and Finance Director of Publishing and Broadcasting Limited (PBL) Media and, prior to that, Nine Entertainment Co. During these appointments, he was also Chairman of Ninemsn.

**MR DAVID CATCHPOLE BEC, DipFP, FAICD**  
Appointed to the Board on  
27 November 2014

David is a well-respected member of the Tasmanian business community. He was Executive Director of financial services firm Shadforth's Limited for more than 20 years.

David became a Director of the Royal Automobile Club of Tasmania in 1989 and served as club President between 1994 and 1997. He was also a non-executive Director of several health care organisations, including Royal Hobart Hospital Research Foundation and Southern Cross Care (Tas) and was a founding Director of the Financial Planning Association of Australia.

**MS JENNIFER STRATTON BA (ECONOMICS, ENGLISH AND HISTORY) FAICD**  
Appointed to the Board on  
28 November 2015

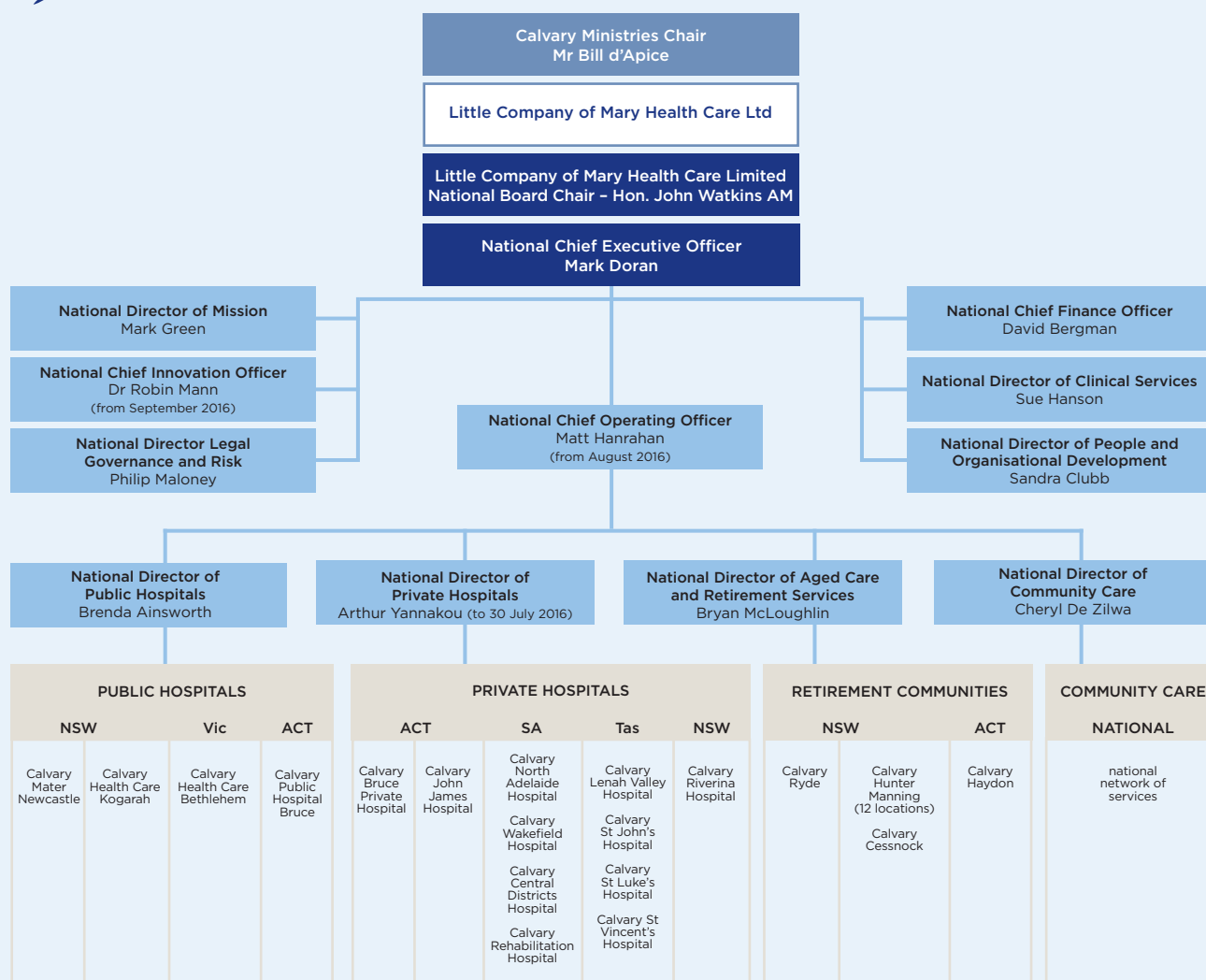
Jennifer is an accomplished senior executive and board member who has served in Catholic ministries in education, health care, aged care, and aid and development for more than 22 years.

She is Chair of the Trustees of MercyCare, a provider of aged care, family, health, disability and community services in Western Australia.

Prior to this, Jennifer was a Director of Catholic Health Australia and Chair of its Pathways Taskforce and its Mission and Identity Committee. Jennifer was Group Director of Mission for St John of God Health Care in Perth for 16 years.



## ORGANISATION CHART - EXECUTIVES



## National Leadership Team (NLT)



**MARK DORAN**

**National CEO**

Mark has extensive experience as a senior executive in health and has worked in both the public and private hospital sectors, starting his career as an administrative trainee. Mark has worked for Ramsay Health Care and Mayne Health, helping the latter grow from six small facilities to more than 50 hospitals. Mark commissioned the 300-bed John Flynn Private Hospital and Medical Centre on the NSW-Queensland border, managing it for seven years. He was also Mayne's State Manager for Queensland, where he was responsible for up to 15 facilities.



**MATT HANRAHAN**

**National Chief Operations Officer commenced August 2016**

Matt is responsible for providing leadership and implementing strategies across Calvary's four service streams. Matt joined Calvary in August 2016, bringing 26 years of experience in public and private health care administration. He has held various executive leadership positions at General Practice NSW Ltd and more recently as Chief Executive of Central Coast Local Health District (NSW Health). Matt led several key initiatives, including the \$568 million redevelopment of both Gosford and Wyong hospitals. He has a Masters in Health Administration, and is a Graduate of the Australian Institute of Company Directors (AICD).



**ARTHUR YANNAKOU**

**National Director of Private Hospitals until July 2016**

Arthur has more than 20 years' experience in public and private companies in Australia, in the private health care sector, including at Mayne Health and Affinity Health as Chief Executive Officer, Director of Hospital and Regional Manager.



**BRENDA AINSWORTH**

**National Director of Public Hospitals**

Brenda has focused on health system performance, clinical service redesign and the development of innovative models of care both in NSW and the ACT for the past nine years. Her previous positions include Director, Health Advisory at PricewaterhouseCoopers; Executive Director, Health Performance Improvement, Innovation and Redesign for ACT Health; and Director of Major Projects, Nepean Hospital. She won the 2010 Telstra Business Women's Award in the ACT for innovation. Brenda holds a Bachelor of Health Sciences (Nursing) and a Master of Management.



**BRYAN MCLOUGHLIN**

**National Director of Retirement Communities from 30 June, 2015**

Bryan was appointed National Director on 1 July 2015 after demonstrating strong leadership skills in his role as Operations Manager at Calvary Retirement Communities. Prior to joining Calvary, Bryan was Chief Executive Officer for Connectability Australia and Chief Operations Officer and Acting Chief Executive Officer for Hunter Medicare Local. He has also held senior roles with UnitingCare Ageing and the Hunter Area Health Service.



**CHERYL DE ZILWA**

**National Director of Community Care**

Cheryl joined Calvary Community Care in February 2013 after eight years as Chief Executive Officer of Windermere, an influential community organisation in Victoria. Cheryl has played a major role in improving quality and building capacity in community services across Australia. She has also worked with the National Heart Foundation in a senior health promotion role, which gave her a unique understanding of the full spectrum of health and community-based services. Cheryl is a former Registered Nurse and holds a Bachelor of Education and Master of Management.

**PHILIP MALONEY****National Director, Legal Governance and Risk**

Philip has been a lawyer for more than 25 years. His senior in-house legal roles include Regional General Counsel for Thorn Asia-Pacific; General Counsel for Stamford Hotels and Resorts; Senior Counsel for McDonald's Australia; Division Counsel for McDonald's Asia Pacific, Middle East and Africa (APMEA); and Vice President – General Counsel for McDonald's Pacific and Africa Division and its Senior Counsel for APMEA. Philip also has vast management experience and has held several directorships and appointments as Company Secretary.

**MARK GREEN****National Director of Mission**

Mark is passionate about social justice. Prior to joining Calvary in September 2014, he was Head of Mission and People at Caritas Australia. Mark's skills are in leadership, strategic planning, organisational management and development. He has degrees in economics, law and theology, as well as a post-graduate diploma in education. Mark is a member of the University of New South Wales Human Research Ethics Committee and is Chair of Catholic Health Australia's Mission and Identity Committee.

**DR ROBIN MANN****National Chief of Innovation from 2016**

Robin leads the development and implementation of our innovation strategy. He works closely with the National Leadership Team, where he is in charge of business and service development transformation (largely digitally based) to enhance our vision for integrated care using innovation and technology. Robin has a Bachelor of Engineering, Bachelor of Medicine and Master of Health Informatics, and became a Certified Health Informatician Australasia in 2014.

**SANDRA CLUBB****National Director of People and Organisational Development**

Sandra has worked in line management and corporate human resources roles in major manufacturing organisations for more than 20 years. She has wide experience working in organisations going through rapid change and growth. Sandra is passionate about having a positive and safe workplace culture and leadership development. She holds a Bachelor of Business in Strategic Human Resource Management.

**DAVID BERGMAN****National Chief Finance Officer**

David has more than 16 years' experience in the health and aged care sector as a senior executive with demonstrated success in growing organisations. He has a strong focus on business improvement, change management and the development of finance, information technology, treasury and reporting functions. David has also worked for chartered accounting and finance firms, and Macquarie Bank.

**SUE HANSON****National Director of Clinical Services**

For over 30 years Sue has provided clinical leadership in her specialty of palliative care with broad experience including in management, health executive, education, clinical governance and academic roles. Prior to joining Calvary, Sue was the inaugural Area Director of Clinical Governance in NSW South Eastern Sydney Area Health and has held appointments as President of the NSW Palliative Care Association, Member of the Board, Palliative Care Australia, National Director Standards and Quality, Palliative Care Australia and Professor of Palliative Care, University of Technology, Sydney. Sue is currently Co-Chair of the NSW Agency for Clinical Innovation Palliative Care Network.



## OUR SERVICES Public Hospitals



### **CALVARY HEALTH CARE KOGARAH, SYDNEY, NSW**

**Chief Executive Officer Shelley  
Castree-Croad**

95 bed sub-acute public hospital.

**Services:** Multidisciplinary, sub-acute inpatient, day-only, outpatient and community based palliative care, rehabilitation and aged care and dementia services. Community services include multidisciplinary palliative care and rehabilitation teams, aged care assessment team, transitional aged care program, a range of Home and Community Care (HACC) funded programs. A teaching hospital with University of NSW, Notre Dame University, member of the Cunningham Centre for palliative care research and clinical placements in under-graduate and post- graduate programs for other Universities.



### **CALVARY MATER NEWCASTLE, NSW**

**Chief Executive Officer Greg Flint**

195 bed public teaching hospital and major research centre delivering in excess of 320,000 outpatient treatments per year.

**Services:** Palliative care services, emergency, clinical toxicology, coronary care, intensive care, drug and alcohol, general medicine, general surgery, haematology, radiation oncology and medical oncology. Provides ambulatory care and inpatient services to the Hunter-Manning and New England areas. A major research facility with affiliations with universities and colleges, particularly the University of Newcastle and other national and international research partners.



### **CALVARY HEALTH CARE BRUCE, ACT**

**Chief Executive Officer Karen Edwards**

275 bed public hospital.

**Services:** The hospital provides emergency and acute care at our Bruce campus, and the ACT's leading specialist palliative care service from Clare Holland House at our Barton campus. We provide emergency medicine, maternity and critical care, as well as mental health and palliative care networks for the ACT. The hospital is also a major provider of elective and surgical services, which are delivered in inpatient, outpatient and domiciliary settings.

It is a teaching hospital that is associated with the Australian Catholic University, the University of Canberra and the Australian National University. Clare Holland House collaborates with the Australian Catholic University to run the Calvary Centre for Palliative Care Research.



### **CALVARY HEALTH CARE BETHLEHEM, MELBOURNE, VIC**

**Chief Executive Officer Dr Jane Fischer**

32 bed sub-acute public hospital providing significant and community based ambulatory services including clinics, a day centre and home-based care.

**Services:** Proudly serving the needs of the community for 75 years, Bethlehem provides one of Victoria's leading specialist palliative care services. It provides a statewide role caring for patients with progressive neurological diseases such as motor neuron disease, Huntington's disease and multiple sclerosis.

Interdisciplinary teams support more than 4,000 patients each year, using a patient - centred care model that focuses on wellness and having an active lifestyle.

The hospital is a teaching hospital with affiliations with a number of universities offering a range of student, graduate and post-graduate clinical placements for medical, nursing and allied health disciplines. It provides education and training to help other Victorian services better support people closer to home.

Bethlehem also enjoys research partnerships at national and international levels, particularly in the areas of progressive neurological disease.

## OUR SERVICES Private Hospitals

### ACT



#### **CALVARY BRUCE PRIVATE HOSPITAL, ACT**

**Chief Executive Officer Kim Bradshaw**  
(from 9 January 2017)

73 bed facility located on the Calvary Bruce campus.

**Services:** General medical and surgical services are complemented by clinical excellence in orthopaedics, urology, gastroenterology, and ophthalmology. Specialist services include a 15 bed Women's Health Unit, the Calvary Sleep Study Service and Hyson Green Mental Health Unit. Hyson Green is the only private mental health unit in the ACT that offers inpatient, day patient and holistic healing services.



#### **CALVARY JOHN JAMES HOSPITAL, ACT**

**Chief Executive Officer Tim Free**  
(Shaune Gillespie was CEO until October 2016)

155 bed private hospital in the ACT, including a 20 bed rehabilitation unit, seven theatres and one procedure room.

**Services:** Extensive range of general medical, general surgery, vascular, gynaecology, paediatrics, orthopaedics, urology, gastroenterology, thoracic, vascular, plastic, dental, ENT, intensive care unit, maternity unit with level 2 special care nursery. Rehabilitation unit with day programs servicing on average 35 to 40 patients a day including post joint surgery, medical reconditioning and falls prevention programs to reduce readmission to hospital.

### SA



#### **CALVARY WAKEFIELD HOSPITAL, ADELAIDE, SA**

**Chief Executive Officer Juanita Ielasi**

172-bed acute inpatient private hospital, with a 24/7 emergency centre and Wakefield Surgicentre day surgery

This major tertiary hospital focuses on neurosurgery and cardiac services, as well as orthopaedic, general and specialist bariatric surgery. It has consulting suites, a 24-hour private emergency centre, and level 3 intensive care and coronary care units and angiography suites. The freestanding Wakefield Surgicentre specialises in paediatric day surgery.



#### **CALVARY REHABILITATION HOSPITAL, ADELAIDE, SA**

**Chief Executive Officer Juanita Ielasi**

65 bed private rehabilitation hospital with day and outpatient programs.

**Services:** Inpatient and day patient rehabilitation including cardiac, orthopaedic, neurological stroke, multi-trauma, falls prevention, geriatric assessment, pulmonary, reconditioning and committed to restoring quality of life to its optimal level.



#### **CALVARY CENTRAL DISTRICTS HOSPITAL, SA**

**Chief Executive Officer Elena McShane**

A modern 90 bed private hospital.

**Services:** Medical and surgical services, including comprehensive cancer care services and specialist consulting suites on site. Located north of the city, the hospital provides valuable support to the Barossa Valley and Northern Yorke Peninsula regions.



#### **CALVARY NORTH ADELAIDE HOSPITAL, SA**

**Chief Executive Officer Sue Imgraben**

153 bed private hospital with 7 theatres, 2 day procedure rooms and 16 bed Mary Potter Hospice onsite.

**Services:** Inpatient care, surgical and medical services. Core surgical specialties are general surgery, colorectal surgery, urology and gynaecology. Oncology services, inpatient care and acute palliative care. Women's health services including obstetrics and gynaecology and a level 5 Special Care Nursery. All services are supported by Level 2 ICU and 24hr onsite medical cover.

## OUR SERVICES Community Care and Private Hospitals

### Community Care



#### **CALVARY COMMUNITY CARE**

National Director Cheryl De Zilwa

Assists 16,156 clients each month across 21 locations in NSW; Australian Capital Territory, South Australia, Tasmania; Victoria; Northern Territory and Tiwi Islands. Calvary Community Care has been supporting people in their own homes and communities for over twenty years delivering a range of aged care, disability and other support services that enable independence, improve social connections and promote positive health and well-being. Community Care offer three core service areas: Support at Home, Support for Carers and support when coming Home from Hospital.

**Services:** Personal care, social support, community access, transport, respite, community nursing, return from hospital support, 24 hour overnight care, domestic assistance, monitoring services, home maintenance.

### NSW



#### **CALVARY RIVERINA, WAGGA WAGGA, NSW**

Chief Executive Officer Robin Haberecht

121 bed private hospital, 32 bed drug and alcohol unit and a surgicentre.

**Services:** palliative care, general medicine, surgery, cardiology, respiratory, sleep studies, orthopaedics, colorectal, breast, bariatric, ENT, paediatric surgery, urology, ophthalmology, obstetrics and gynaecology, oral maxillofacial, plastics, intensive/coronary care, maternity and special care nursery, rehabilitation including hydrotherapy and day procedures. Onsite services include cardiovascular laboratory, medical imaging, pathology, cancer care centre and Breastscreen NSW.

### TAS



#### **CALVARY LENAH VALLEY HOSPITAL, HOBART, TAS**

Chief Executive Officer Kathryn Berry

181 beds including emergency services, critical care, obstetrics, orthopaedics and neurosurgery.

Lenah Valley is the largest private hospital in Tasmania. Situated five minutes from the heart of the city of Hobart with spectacular views over greater Hobart, the hospital is a leader in Neurosurgery, Orthopaedics, Urology, Gynaecology, Surgical and Medical Care.

**Services:** a modern Maternity and Women's Health Unit, Endoscopy Unit, Critical Care Unit, Intensive Care Unit and a 24/7 Accident and Emergency Department.



#### **CALVARY ST JOHN'S HOSPITAL, HOBART, TAS**

Chief Executive Officer Kathryn Berry

108 bed private hospital.

**Services:** palliative care, general medical and surgical services, day surgery, oncology, ENT and paediatric surgery, inpatient rehabilitation and pain management services.



#### **CALVARY ST LUKE'S HOSPITAL, LAUNCESTON, TAS**

Chief Executive Officer Grant Musgrave

68 bed private hospital.

**Services:** palliative care, orthopaedics, ENT surgery, dental surgery, general medical services, chemotherapy, mental health care and sleep studies.



#### **CALVARY ST VINCENT'S HOSPITAL, LAUNCESTON, TAS**

Chief Executive Officer Grant Musgrave

73 bed private hospital.

**Services:** urology, general surgery, colorectal surgery, plastic surgery, gynaecology surgery, oral and maxillofacial surgery, high dependency, lithotripsy, gastroenterology, post natal care, general medical services and rehabilitation.



# OUR SERVICES Retirement Communities

## ACT



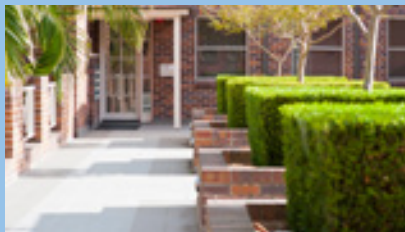
### **CALVARY HAYDON RETIREMENT COMMUNITY, ACT**

**General Manager: Stephanie Tyrell**

Among the gum trees and gardens of South Bruce, Calvary Haydon Retirement Community provides quality residential care and support to 100 residents. In addition to dementia-specific services and respite accommodation, it offers accommodation. The aged care rooms are all large single rooms with ensuites. They are finished with quality coordinated furnishings and are surrounded by fully landscaped gardens. Residents have access to spacious dining areas, and lounge rooms are scattered throughout the facility, allowing residents and families to relax together. The 78 independent living units are two- and three-bedroom villas and apartments.

The centre is close to a large shopping centre and public transport, and Calvary's public and private hospitals are just across the road – all ensuring that residents have a safe, secure and enjoyable standard of living.

## NSW – Sydney



### **CALVARY RYDE RETIREMENT COMMUNITY, NSW**

**General Manager Deborah Booth (Acting)**

Set amid tranquil landscaped gardens on an historic property, Calvary Ryde Retirement Community in Sydney offers permanent accommodation for more than 240 residents, as well as respite accommodation. The community is friendly and close-knit, with residents from many cultures and backgrounds.

Marian Residential Care has 52 single rooms with ensuites. Residents can enjoy activities five days a week, and delicious fresh meals are prepared in the kitchen daily. Mary Potter Residential Care is a 63-bed facility including a 21-bed wing for patients with dementia. It has a mix of single-, double- and four-bed rooms, most with garden views. Dalton Gardens has 126 independent living units and provides residents with a maintenance-free, secure and relaxing lifestyle.

## NSW – Hunter Region



### **CALVARY CESSNOCK RETIREMENT COMMUNITY, NSW** **General Manager: Kristin Smith**

Located in the heart of Hunter Valley wine country, Calvary Cessnock Retirement Community offers quality care accommodation in Bimbadeen and Nulkaba for 296 residents.

Bimbadeen Residential Care accommodates 80 residents in a contemporary, home-like environment. It also offers respite accommodation services. Residents are housed in large single rooms, each with an ensuite, in one of four lodges: Mt View (16 beds), Watagan (24 beds), Windemere (24 beds) and Mulbring (16 beds). Each lodge has a spacious lounge/dining area, plus separate lounges and quiet rooms. Mt View and Mulbring offer secure accommodation for people with dementia.

Nulkaba Residential Care offers contemporary accommodation for 216 residents as well as respite accommodation. Residents live in one of eight lodges, containing a mix of single and double rooms. Nulkaba offers secure accommodation for 96 people with dementia.



### **CALVARY MT CARMEL RETIREMENT COMMUNITY, NSW**

**Manager: Maree Gibbs**

This facility in Maitland provides quality care in rooms for 41 residents, overnight respite accommodation and 14 two-bedroom independent living units. Many of the units have a wraparound veranda and large windows with views. Each single room has an ensuite, air conditioning and a balcony overlooking the rural backdrop.



### **CALVARY MT PROVIDENCE RETIREMENT COMMUNITY, NSW**

**Manager: Brad Roberts**  
(formerly Suzette Connolly FY15-16)

Residents have been enjoying the country charm and friendly atmosphere of this facility in Muswellbrook in the beautiful Upper Hunter for more than 40 years. It has single aged care rooms for 36 permanent residents and 12 independent living units, as well as respite accommodation.



### **CALVARY COINDA RETIREMENT COMMUNITY, NSW**

**Manager: Sharon Sheen**

This facility in Singleton provides quality care for more than 34 permanent residents, as well as a day respite program and overnight respite accommodation. Residents enjoy single rooms, each with an ensuite, open common rooms and a large outdoor area overlooking Singleton Showground.

### NSW – Newcastle



#### **CALVARY EPHESUS RETIREMENT COMMUNITY, NSW**

**Independent Living Units Coordinator:**  
**Liz Jacobs**

It is just a short stroll to shops, cafes and the library from this independent living facility at Lambton in Newcastle, which features wide driveways, easy-to-maintain gardens and the neighboring Holy Trinity Parish.

Each of the eight two-bedroom units is air conditioned and has an internally accessible lock-up garage. In addition, a shaded communal barbecue area is available for entertaining guests or socialising with neighbours in this tight-knit community.

The facility also has a 24-hour monitoring system for emergencies and offers reactive and preventative maintenance to ensure units are always in prime condition.



#### **CALVARY TOURS TERRACE RETIREMENT COMMUNITY, NSW**

**Independent Living Unit Coordinator:**  
**Liz Jacobs**

Situated in the historic Newcastle suburb of Hamilton South, this facility provides a peaceful haven just minutes from the city centre. The architecturally designed living units feature generous rooms, air conditioning and low-maintenance gardens.

A shaded communal barbecue area is available for entertaining family and friends and for socialising with neighbours. The facility is close to the shopping precincts of Market Town and The Junction, making it ideal for downsizing without compromising on living life to the full.

The facility has a 24-hour monitoring system for emergencies. Reactive and preventative maintenance ensures units are always in prime condition.



#### **CALVARY ST LUKE'S RETIREMENT COMMUNITY, NSW**

**Independent Living Unit Coordinator:**  
**Liz Jacobs**

Located close to cafes and a relaxing bar in the Newcastle suburb of Cook's Hill, this facility offers the perfect blend of metropolitan and beachside lifestyles. The six two-bedroom units have air conditioning, picket-fenced courtyard gardens, welcoming entryways and ample parking.

The units back on to the St Luke's Social Centre, which offers residents a variety of entertainment, activities and day trips with like-minded people. A shaded communal barbecue area is available for entertaining guests after a day at the beach or a stroll down to Newcastle's café hub for a meal and a spot of people-watching.

### NSW – Lake Macquarie and Port Stephens



#### **CALVARY NAZARETH RETIREMENT COMMUNITY, NSW**

**Manager: Julie Heaney**

This facility in the lakeside community of Belmont on the Central Coast has aged care accommodation, 17 boutique one and two bedroom independent living units, secure accommodation for dementia patients and respite accommodation. The quality aged care accommodation for 50 permanent residents is in a single storey building with large lounge rooms and large outdoor covered courtyards.



#### **CALVARY ST FRANCIS RETIREMENT COMMUNITY, NSW**

**Manager: Susan Waters**

Beautifully maintained in leafy Eleebana on the Central Coast, this facility has 52 single aged care rooms, 30 independent living units, respite accommodation and a 12-bed secure unit for residents with dementia. Located in a tranquil bush setting, the two-bedroom units have internally accessible lock-up garages, air conditioning and gardens. Each aged care room has an ensuite. Residents in the single-level dementia unit can participate in daily activities including crafts, singing, bingo and cooking.



#### **CALVARY TANILBA SHORES RETIREMENT COMMUNITY, NSW**

**Acting Manager: Maree Gibbs (formerly Lindy Farrelly FY15-16)**

Residents enjoy beautiful views of Tanilba Bay and the bush in this facility, which has 41 single rooms, respite accommodation and independent living units. Each of the 41 aged care rooms has an ensuite. Residents can participate in activities seven days a week, as well as take regular bus trips and participate in social outings.



### **CALVARY ST JOSEPH'S RETIREMENT COMMUNITY, NSW**

**Manager: Helen Gayner**

Located in the Newcastle suburb of Sandgate, this facility is home to 135 residents. It also offers a secure unit for residents with dementia, an ethno-specific unit, respite accommodation and 18 one and two bedroom independent living units. The single and shared rooms for aged care residents are in an air-conditioned single-level building.



### **CALVARY ST MARTIN DE PORRES RETIREMENT COMMUNITY, NSW**

**Manager: Maureen Kiss**

Located in the heart of Waratah in Newcastle, the facility is close to a large shopping centre, public transport and a major local hospital. It provides friendly quality care for 41 residents in single rooms with ensuites in a single-level building.

## **NSW – Manning Valley**



### **CALVARY ST PAUL'S RETIREMENT COMMUNITY, NSW**

**Manager: Mark Gunn**

Positioned in a rural setting on the Manning River in Cundleton, near Taree, this facility has a warm country feel. It offers permanent accommodation in single rooms with ensuites for 40 residents, as well as respite accommodation.

## **Our Services**

### **Australian Capital Territory (ACT)**

- Calvary Public Hospital Bruce
- Calvary Public Hospital Bruce – Clare Holland House Campus
- **Calvary Bruce Private Hospital**
- Calvary John James Hospital
- Calvary Haydon Retirement Community
- Community Care Service Centre – Bruce

### **South Australia (SA)**

- **Calvary Adelaide Hospital**
- Calvary North Adelaide Hospital
- Calvary Wakefield Hospital
- Calvary Wakefield Surgicentre
- Calvary Rehabilitation Hospital
- Calvary Central Districts Hospital
- Community Care Service Centres – Adelaide, Port Augusta, Victor Harbor, Goolwa

### **Tasmania (Tas)**

- Calvary Lenah Valley Hospital
- Calvary St John's Hospital
- Calvary St Luke's Hospital
- Calvary St Vincent's Hospital
- Community Care Service Centre – Launceston



### **New South Wales (NSW)**

- Calvary Riverina Hospital
- Calvary Riverina Drug and Alcohol Centre
- Calvary Riverina Surgicentre
- Calvary Mater Newcastle
- Calvary Health Care Kogarah
- Calvary Ryde Retirement Community
- Calvary Retirement Communities Hunter (12 locations including **Muswellbrook**)
- Calvary Cessnock Retirement Community
- Community Care Service Centres – Sydney, Taree, Wagga Wagga (also respite care), Newcastle (also respite care and a social centre), Forster (respite care only), Albury (respite care only)

### **Victoria (VIC)**

- Calvary Health Care Bethlehem
- Calvary Community Care Head Office
- Community Care Service Centres – Melbourne, Gippsland, Shepparton

### **Northern Territory (NT)**

- Community Care Service Centres – Darwin, Alice Springs, Bathurst Island





# Calvary Directory

[www.calvarycare.org.au](http://www.calvarycare.org.au)

## NATIONAL OFFICE

### Little Company of Mary Health Care Limited

Level 12, 135 King Street,  
Sydney NSW 2000  
Ph: 02 9258 1700  
[www.calvarycare.org.au](http://www.calvarycare.org.au)

## CALVARY COMMUNITY CARE

Operates in Victoria, New South Wales,  
ACT, South Australia, Tasmania,  
Northern Territory and Tiwi Islands  
Head Office: 551 Blackburn Road  
Mt Waverley Vic 3149  
Ph: 03 9271 7333 / 1300 660 022  
[www.calvarycommunitycare.org.au](http://www.calvarycommunitycare.org.au)

## HOSPITALS

### AUSTRALIAN CAPITAL TERRITORY

#### Calvary Public Hospital Bruce

Corner of Belconnen Way and  
Haydon Drive, Bruce, ACT 2617  
Ph: 02 6201 6111  
[www.calvary-act.com.au](http://www.calvary-act.com.au)

#### Calvary Bruce Private Hospital

Corner of Belconnen Way and  
Haydon Drive, Bruce ACT 2617  
Ph: 02 6201 6111  
[www.calvaryactprivate.org.au](http://www.calvaryactprivate.org.au)

#### Calvary John James Hospital

173 Strickland Crescent,  
Deakin ACT 2600  
Ph: 02 6281 8100  
[www.calvaryjohnjames.com.au](http://www.calvaryjohnjames.com.au)

## SOUTH AUSTRALIA

#### Calvary North Adelaide Hospital

89 Strangways Terrace,  
North Adelaide SA 5006  
Ph: 08 8239 9100  
[www.calvarynorthadelaide.org.au](http://www.calvarynorthadelaide.org.au)

#### Calvary Wakefield Hospital

300 Wakefield Street, Adelaide SA 5000  
Ph: 08 8405 3333  
[www.calvarywakefield.org.au](http://www.calvarywakefield.org.au)

#### Calvary Rehabilitation Hospital

18 North East Road, Walkerville SA 5081  
Ph: 08 8168 5700  
[www.calvaryrehabsa.org.au](http://www.calvaryrehabsa.org.au)

#### Calvary Central Districts Hospital

25-37 Jarvis Road, Elizabeth Vale SA 5112  
Ph: 08 8250 4111  
[www.calvarycentraldistricts.org.au](http://www.calvarycentraldistricts.org.au)

## TASMANIA

#### Calvary Lenah Valley Hospital

49 Augusta Road, Lenah Valley Tas 7008  
Ph: 03 6278 5333  
[www.calvarylenahvalley.org.au](http://www.calvarylenahvalley.org.au)

#### Calvary St John's Hospital

30 Cascade Road,  
South Hobart Tas 7004  
Ph: 03 6223 7444  
[www.calvarystjohns.org.au](http://www.calvarystjohns.org.au)

#### Calvary St Luke's Hospital

24 Lyttleton Street,  
East Launceston Tas 7250  
Ph: 03 6335 3333  
[www.calvarystlukes.org.au](http://www.calvarystlukes.org.au)

#### Calvary St Vincent's Hospital

5 Frederick Street, Launceston Tas 7250  
Ph: 03 6332 4999  
[www.calvarystvincents.org.au](http://www.calvarystvincents.org.au)

## NEW SOUTH WALES

#### Calvary Riverina Hospital

Hardy Avenue, Wagga Wagga NSW 2650  
Ph: 02 6925 3055  
[www.calvary-wagga.com.au](http://www.calvary-wagga.com.au)

#### Calvary Mater Newcastle

Edith Street, Waratah NSW 2298  
Ph: 02 4921 1211  
[www.calvarymater.org.au](http://www.calvarymater.org.au)

#### Calvary Health Care Kogarah

91-111 Rocky Point Road,  
Kogarah NSW 2217  
Ph: 02 9553 3111  
[www.calvary-sydney.org.au](http://www.calvary-sydney.org.au)

## VICTORIA

#### Calvary Health Care Bethlehem

476 Kooyong Road,  
South Caulfield Vic 3162  
Ph: 03 9596 2853  
[www.bethlehem.org.au](http://www.bethlehem.org.au)

## CALVARY RETIREMENT COMMUNITIES

[www.calvarycare.org.au/retirement](http://www.calvarycare.org.au/retirement)  
Ph: 02 4954 1800 / 1800 222 000

#### Calvary Ryde Retirement Community

678 Victoria Road, Ryde NSW 2112  
Ph: 02 8878 1400

#### Calvary Haydon Retirement Community

2 Jaeger Circuit, Bruce ACT 2617  
Ph: 02 6264 7400

#### Calvary Cessnock Retirement Community

19 Wine Country Drive,  
Cessnock NSW 2325  
Ph: 02 4993 9000

## CALVARY RETIREMENT COMMUNITIES HUNTER

#### Hunter Regional Office

240 Maitland Road,  
Sandgate NSW 2304  
Ph: 02 4967 0600

#### Calvary St Joseph's

##### Retirement Community

240 Maitland Road, Sandgate NSW 2304  
Ph: 02 4967 0600

#### Calvary Cooinda Retirement Community

42 Bathurst Street, Singleton NSW 2330  
Ph: 02 6572 1537

#### Calvary Mt Carmel Retirement Community

9 Dwyer Street, Maitland NSW 2320  
Ph: 02 4932 0350

#### Calvary Mt Providence Retirement Community

59 Tindale Street,  
Muswellbrook NSW 2333  
Ph: 02 6543 2053

#### Calvary Nazareth

##### Retirement Community

1 Vincent Street,  
Belmont North NSW 2880  
Ph: 02 4947 0047

#### Calvary St Francis

##### Retirement Community

Gleeson Crescent, Eleebana NSW 2282  
Ph: 02 4942 7477

#### Calvary St Martin de Porres

##### Retirement Community

26 Lorna Street, Waratah, NSW 2298  
Ph: 02 4968 2244

#### Calvary St Paul's

##### Retirement Community

54 River Street, Cundletown NSW 2430  
Ph: 02 6553 9219

#### Calvary Tanilba Shores

##### Retirement Community

71-74 Tanilba Avenue,  
Tanilba Bay NSW 2319  
Ph: 02 4984 5922

#### Calvary Ephesus

##### Retirement Community

88 Dickson Street, Lambton NSW 2299  
Ph: 1800 222 000

#### Calvary St Luke's

##### Retirement Community

204-206 Darby Street,  
Cooks Hill NSW 2300  
Ph: 1800 222 000

#### Calvary Tours Terrace

##### Retirement Community

242 Lawson Street,  
Hamilton South NSW 2303  
Ph: 1800 222 000

#### Calvary Retirement Communities Shared Services

Level 1, 342-344 Main Road,  
Cardiff NSW 2285  
Ph: 02 4954 1800