

**You matter.
We care
about you.**



**LITTLE COMPANY OF MARY
HEALTH CARE LIMITED
ANNUAL REVIEW
2017/2018**

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

The Community Care Story

Calvary Community Care has been supporting people in their own homes and communities for over 20 years. We deliver a range of aged care, disability and other support services that enable independence, improve social connections and promote positive health and wellbeing.

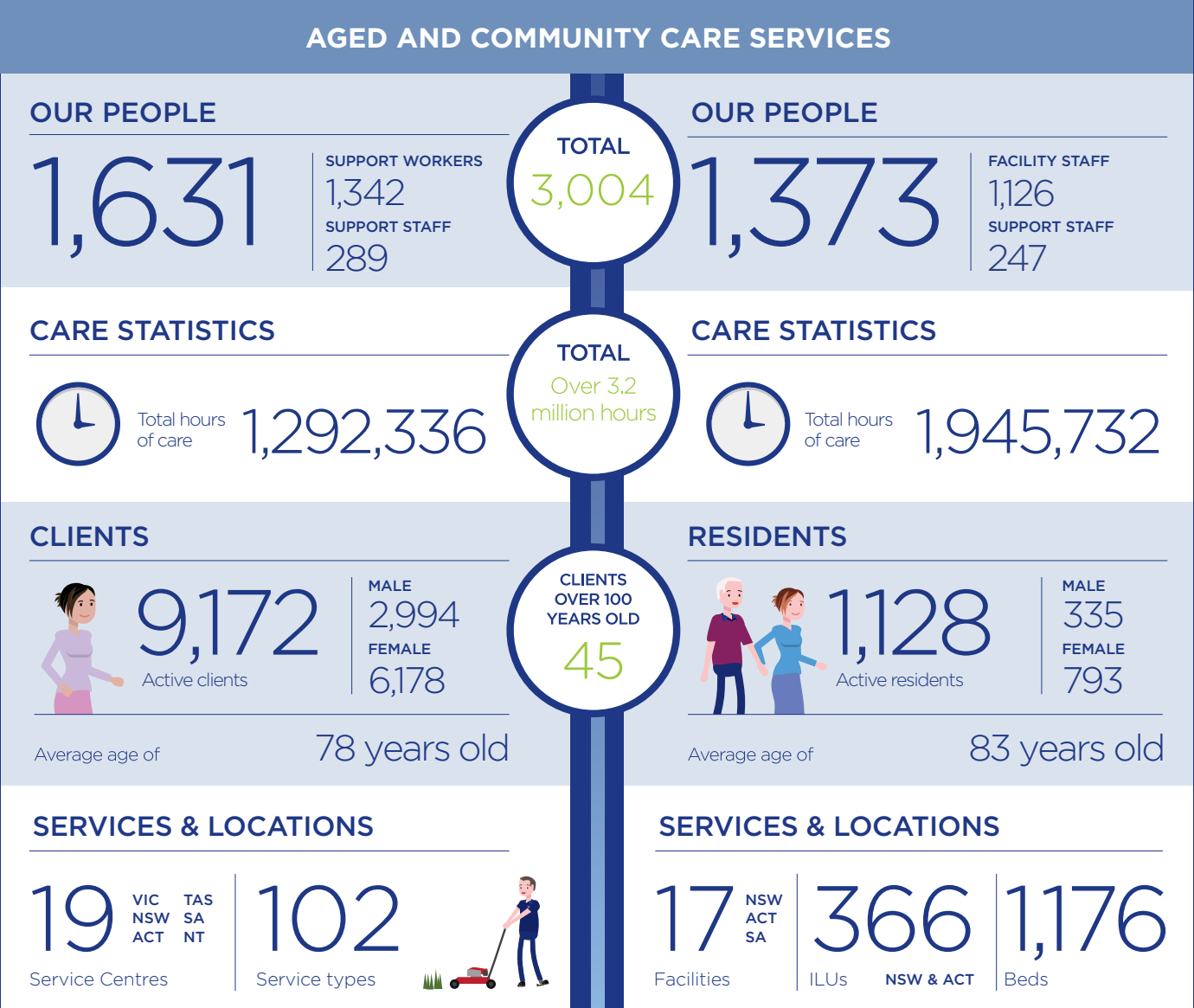
The Retirement Communities Story

Calvary Retirement Communities (CRC) provides quality care and services within a supportive environment in which residents are respected for their individuality. CRC has 14 residential care facilities and three stand-alone independent living villages across NSW, SA and the ACT.

The Hospitals' story

Calvary has four public and 11 private hospitals that provide acute and sub-acute care. Eleven of our hospitals work together to provide complementary care across the regions in which they operate including: three hospitals in ACT, four hospitals in South Australia and four hospitals in Tasmania, including two hospitals in Hobart and two hospitals in Launceston. Our single hospitals in Riverina, Sydney, Newcastle and Melbourne work closely with local health area networks to provide valued services for our communities.

You matter.
We care
about you.
Caring for
Australians
since 1885



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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.



COVER IMAGE

Our cover features Mary and Calvary’s community palliative care nurse Jenny. Mary was one of the first patients admitted to Calvary North Adelaide’s new community palliative care service that commenced in September 2018. Mary values and appreciates the care and support she requires at home following an admission to the oncology ward at Calvary North Adelaide. See page 17 for more details.

Foreword from the Chair

Calvary Ministries

“All we do is for God, and if no one sees what we do but God, so much the better.” Writings of Venerable Mary Potter.

Venerable Mary Potter had a vision for the Calvary spirit to live through the Sisters of the Little Company of Mary, and through what she called the Greater Company of Mary, which includes all who share this journey of spirit and service across the Calvary organisation in retirement communities, hospitals and community care.

The work, the sacrifice to God and the humanity of the Sisters of the Little Company of Mary in Australia since 4 November 1885, has set the foundations for what Calvary is today.

When we succeed in sharing the Calvary spirit with those whom we serve, lives are touched for the better. Over the course of the year, people touched by Calvary have reflected on what this means to them. Here are two examples:

“I have a deep regard for the values of Calvary and have empathy, respect and admiration for Mary Potter and all she achieved in her lifetime. I always choose to attend ‘Mary Potter Day’ to celebrate her and all she did to help others. The loneliness aspect of her care resonates deeply with me.

To say “rewarding” is very cliché, but for me, seeing my clients happy to see me walk through their door is the best feeling in the world. It makes me want to be the best I can be. I love being a part of the Calvary family.”

Staff member

“Talking to a lovely lady who came to massage and oil my arms and hands, not only felt great but she was also an adept conversationalist.

I sat contemplating a while and thanked God, as well as commended the kind hearted staff and volunteers; people that not only serve, but give of themselves.

One touch, one remark, one expression of empathy would be more beneficial than medicine, to build up a patient’s will to fight his malaise.

It works; I have been through it.

I leave Calvary with a heavy heart to my lonely existence at home, but I will always remember the peaceful and happy time I was given.

Thank you and God bless you.”

Patient

My term as Chair of Calvary Ministries finished a few months after the end of this financial year, so this is my last message to you.

Calvary Ministries is a church body established by the Sisters so that their ministries and the charism of Venerable Mary Potter could live on and thrive in Australia, even though the number of Sisters is on the decrease, and the age of those remaining is on the increase. We all owe a huge debt of gratitude to the Sisters for their foresight, hard work and commitment. We stand on their shoulders.

It has been an honour and a privilege to play my little part and to serve as the initial Chair of Calvary Ministries. I leave Calvary Ministries Trustee Board in very good hands under the capable leadership of the Hon. Michael Lee as its new Chair.

I thank the LCM Health Care Board of Directors ably led by the Hon. John Watkins AM, the National Executive Leadership team led by Mr Martin Bowles PSM, and all Calvary leaders for their dedication, attention to detail and stewardship of our mission.

I also wish to thank my fellow Trustees and the dedicated staff of Calvary Ministries for their support and commitment.

The Trustees offer their continued support, and I can assure you that you are in their thoughts, hopes and prayers. On behalf of Calvary Ministries, the Trustees 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



Bill d'Apice

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.

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.

Message from the Chair

Little Company of Mary Health Care (LCMHC)

The mission of Venerable Mary Potter, and the work of the Sisters of the Little Company of Mary in Australia for over 133 years, inspires each of our services, the staff and volunteers to provide high quality, compassionate health, aged and home care to thousands of Australians in need.

While a continuing industry-wide downturn in private hospital throughput results in subdued revenue levels, Calvary continues to trade strongly. Much needed reform, funding pressures and changes in the aged and home care sectors continue to focus the Board's attention.

A new National Chief Executive Officer, Martin Bowles, PSM joined the organisation in November 2018 to assist the board lead our mission. Martin has a wealth of experience gained during his almost 40 years as a senior public servant. For the last 11 years he was Deputy Secretary in the Departments of Defence and then Climate Change, and then the Secretary of the Department of Immigration and Border Protection, followed by three years as Secretary of Health. Calvary is the richer for Martin's diverse experience, as well as his incisive strategic and leadership skills.

The board is focused on creating a culture of accountability and transparency, of clear messaging about Mission and expectations for organisational behaviour. We remain committed to prioritise services for the poor and vulnerable. We appreciate members of our organisation who respond to the pain felt by other members, as well as the positive impact of compassionate leadership both on employees and those with whom they interact. The board reinforces the organisation's zero tolerance for bullying behaviours and harassment.

We advocate strongly for 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. To this end, we made strong submissions to ACT Parliamentarians as they debated end of life choices.

Areas the board has been addressing this year also include the following:

- The development of a new Strategic Intent;
- Strengthening clinical governance, particularly the prioritisation of innovation and improvements in clinical safety, and the opportunity for Calvary to become a champion in this area;
- Strengthening safeguarding of children and vulnerable adults, including those who are aging;

- Privacy requirements, cyber security and Enterprise Risk Management;
- Ensuring that Calvary has appropriate Medical Grade Infrastructure;
- Developing our position on and preparing the organisation for the introduction of euthanasia in Victoria;
- Strategy in relation to Capital Expenditure and Cash Flow Management;
- The redevelopment of Calvary Health Care Bethlehem;
- The ongoing integration into the Calvary family of Flora McDonald and St Catherine's Retirement Communities in South Australia;
- Finalising the Calvary Ryde Retirement Community redevelopment plan together with strategies to minimise disruption for existing residents;
- The development of Calvary Adelaide Hospital; and
- Strengthening our partnerships with respect to procurement, locally and globally.

Our hospitals, aged care and community facilities are very fortunate to have excellent assistance from a committed volunteer community. I also thank members of the auxiliaries who operate within our services. 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 communities they serve.

We acknowledge and thank Sisters Jennifer Barrow LCM, Kathleen Cotterill LCM and their Councils for their unwavering support of our work. Likewise, we value the support and guidance of the Trustees, who, led by Bill d'Apice, undertake a critical role in the governance of Little Company of Mary Health Care. Bill retires as the inaugural Chair of Calvary Ministries at the end of this year. His work over many years to ensure that the mission of the Sisters of the Little Company of Mary is embedded in the Calvary Ministries' family has been unwavering, tireless and most professional.

I am proud to lead an enthusiastic, professional and inspirational group of directors. We thank our departing director, Dr Katherine McGrath for over nine years of high quality and professional service to the board.

I thank and commend the work of the National Executive Leadership Team and all our leaders. They bring a wealth of knowledge to the table for the benefit of all at Calvary.



The Hon. John Watkins AM, Chair

My sincere admiration and appreciation 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. Their positive contribution is evidenced by donations, bequests, letters of praise and ongoing highly complimentary feedback that filters to our board with regularity. I commend everyone at Calvary for the service we have been privileged to offer this year.

THE HON. JOHN WATKINS AM
CHAIR, LCMHC BOARD

Our strategy and year in review



Martin Bowles PSM, National Chief Executive Officer.

Message from the National Chief Executive Officer

Firstly, let me say that my inaugural year at Calvary has been really enjoyable. One of the key attractions of Calvary for me is that I see it as a microcosm of the health System, which creates a tremendous opportunity to look at healthcare from a person-centered way, with an integration model in mind.

I would like to acknowledge the work of former National CEO Mark Doran, who led Calvary through nine years of significant transformation and growth, preparing the ground well for our next set of opportunities.

I see it (Calvary) as a microcosm of the health System, which creates a tremendous opportunity to look at healthcare from a person-centered way, with an integration model in mind.

The health and aged care industry is in a state of disruption, in a good way. We seek more than ever to understand and support the unique needs of each individual, moving away from a one-size-fits-all model of care. A constant in the current environment is that consumers, regulators, providers and governments are making different decisions than in the past. The challenge is anticipating what that may look like so we can adapt accordingly. The Aged Care Royal Commission will be a fantastic opportunity to help us find the best way for us to assist our residents and clients in the Aged and Community Care space.

In the private hospital space, we are seeing quite a lot of volatility as the national reforms around quality, safety and appropriateness take hold. This coupled with the potential capping of the private health insurance rates will see short term pressures on the system leading to subdued results.

Even with this volatility, Calvary has made some good progress on preparing ourselves for these changes. During the year we introduced a new structure that brought our residential aged care (Calvary Retirement Communities) and community care (Calvary Community Care) businesses under the one Aged Care and Community Services umbrella. This has allowed us to improve our focus on the residents and clients we serve across the country.

In the hospital sector, we have introduced a regional structure, allowing us to more effectively develop clinical service plans for the communities we serve.

With the new structure, we are focusing on leadership and our culture so we can better deliver on our Mission and Values. We have undertaken a lot of reflection using different tools and have focused heavily on

the behaviours we need to exhibit to live our values. Our behaviours are the most significant contributor to the successful delivery of our Strategic Intent, featured opposite.

The 2017/18 year was also a busy year on the development front. The new Adelaide Hospital is progressing well and keeping us very busy. Once complete, this will be one of the most advanced private hospitals in Australia.

Stage one of the theatre redevelopment in Lenah Valley is now operational. This will give us the capacity to grow our business in Hobart to better serve the local community.

In 2018, the ACT's Calvary Bruce Private Hospital saw its first year of operation. The Calvary Public Hospital Bruce completed the redevelopment of the maternity services ward and approval for works to make our Emergency Department more appropriate for the patients we see. While challenging, we are seeing signs of improvement in its performance. This is critical for the citizens of the ACT.

As we contemplate our service offering in Launceston, we submitted an unsolicited proposal to the Tasmanian Government to build a co-located facility adjacent to Launceston General Hospital. We have now progressed this to the second stage. We are working closely with our medical and broader community to develop a proposal that will serve the needs of the local community in Launceston.

The redevelopment of the Caulfield site in Melbourne has also progressed as we received a positive outcome from the VCAT to replace the ageing Bethlehem Hospital with a hospital and residential care facilities. We are currently developing the formal proposal for Board endorsement.

In South Australia, our Calvary Community Care business has also made some inroads into new business with a new contract with the South Australian Government. We have also developed a palliative care in the home program, the first of which is running in Calvary North Adelaide (p17).

The year was not without its challenges. The most significant of these being the colonoscopy recall of almost 400 patients in Hobart. This was a difficult time, particularly for the patients who were affected. I was proud to see local and national teams coming together to work tirelessly to ensure the best possible outcome for the patients.

We will always have to manage difficult issues, but for me, how the teams come together to get the best outcome for our patients, the community and Calvary is important.

We are moving forward to a place where we can not only explore our current markets, but also our new ones. In doing so, we are guided by our Strategic Intent, focused on

our behaviours and four key areas: Quality and safety; Care of our people and working environments; Partnering and planning for the present and future; and Caring for our resources.

We are moving forward to a place where we can not only explore our current markets, but also our new ones. In doing so, we are guided by our Strategic Intent, focused on our behaviours and four key areas: Quality and safety; Care of our people and working environments; Partnering and planning for the present and future; and Caring for our resources.

I invite you to read more about those in the coming pages.

I am enormously proud of the contributions our people are making towards our patients, residents and clients, many of whom are at their most vulnerable.

It is a privilege to serve our communities with compassionate health and aged care and have the opportunity to make a positive difference to their lives; and I thank my Senior Executive team and all our people for their hard work and support throughout the year to help make this a reality.

MARTIN BOWLES PSM
NATIONAL CHIEF EXECUTIVE OFFICER

Martin Bowles PSM joined Calvary in December 2017 and is the former Commonwealth Secretary of Health. Martin has played an integral role in changes across the health sector, including the significant reforms to government funding for public hospitals in Australia, to generate greater efficiency, safety and quality in our hospital system.



Strategic Intent 2018-2023

You matter. We care about you.

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 Values



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 Behaviours

- We will be present, attentive and listen to each other.
- We will recognise the achievements of others.
- We will actively involve each other in decision making.
- We will be transparent.
- We will be accountable for our actions.
- We will not look to shift blame.

Priority: A focus on quality and safety

Build workforce capability to ensure that all staff understand and are supported to perform their roles and responsibilities with maximum effectiveness.

Create respectful, collaborative relationships with patients, residents, clients, families and community partners from which to grow compassionate, person-centered models of care.

Commit to zero preventable harm and reduce the unplanned variation that leads to such harm, within a 'high reliability' framework that prioritises safety and continuous improvement.

Priority: Care of our people and our working environments

Provide safe, equitable workplaces that are welcoming and respectful of all.

Attract diverse people who value making a difference and are willing to contribute a range of complementary skills, motivated by the spirit of 'being for others'.

Entrust, support and equip people to make their best and most effective contribution to Calvary's mission to provide 'healing, hope and nurturing to the people and communities we serve.'

Priority: Partnering and planning for the present and the future

Anticipate future developments and be ready to respond to opportunities that will impact upon the communities that Calvary serves.

Research partnerships to meet health and social needs now and in the future.

Advocate for, and initiate responses to, unmet needs and people experiencing disadvantage in the communities we serve.

Priority: Caring for our resources

Upgrade and maintain our facilities, ICT assets, infrastructure, and work environments and pursue innovative enterprise for the benefit of our people and our environment.

Sustain and develop new sources of funding to serve people now and in the future.

Create opportunities and partnerships to utilise our resources more effectively and efficiently in the service of others.

In 5 years' time Calvary will...

Be the health, community and aged care provider of choice in the markets we serve in delivering integrated, seamless, safe and quality care with equity and compassion at its base that is appropriate to the individual and community's needs.

Caring for our resources



L-R: Calvary South Australia hospitals' Finance Team
• Carlos Mora Patino, Acting Director Finance, Calvary North Adelaide and Central Districts Hospitals
• Naomi Heritage, Acting Finance Manager, Calvary North Adelaide Hospital
• Scott Prettlejohn, Director of Finance, Calvary Wakefield and Calvary Rehabilitation Hospitals
• Rebecca Lines, Assistant Accountant, Calvary North Adelaide Hospital
• Anh Luu, Management Accountant, Calvary Rehabilitation Hospital
• Chad Ownsworth, Management Accountant, Calvary Wakefield Hospital

STRATEGIC INTENT

Priority: Caring for our resources

Upgrade and maintain our facilities, ICT assets, infrastructure and work environments, and pursue innovative enterprise for the benefit of our people and our environment.

Sustain and develop new sources of funding to serve people now and in the future.

Create opportunities and partnerships to utilise our resources more effectively and efficiently in the service of others.

Review of Operations

Calvary is pleased to deliver a solid surplus of \$62.02 million, in a challenging industry environment.

Calvary is unique in that it participates in three health and care sectors being: private and public hospitals, aged care and community care. Each of these has had its own set of challenges and industry dynamics that Calvary has navigated successfully.

Calvary continues to invest its surplus funds back into the operations:

- Calvary Bruce Private Hospital, completed in 2017
- Calvary St Vincent's Hospital, \$6.2 million endoscopy unit and cardiovascular laboratory, completed in September 2017
- The Calvary Lenah Valley Hospital operating theatre upgrades due for completion in April 2019

- The continuing Calvary Adelaide Hospital development due for completion mid 2019
- The Calvary Health Care Bethlehem integrated care development, receiving the Victorian Civil and Administrative Tribunal (VCAT) approval to proceed in May 2018
- Calvary Ryde Retirement Community, historic site development receiving approval to proceed in July 2018.

Calvary has a very strong balance sheet and overall financial position. This financial strength will enable the organisation to pursue opportunities, continue to invest in its people and facilities and support a culture of delivering quality and safe care to our patients, residents and clients.

Our Services

State	Calvary Hospitals		Calvary Retirement Communities	Calvary Community Care Centres
	Public	Private		
Australian Capital Territory	1	2	1	1
New South Wales	2	1	14	8
South Australia	-	4	2	4
Tasmania	-	4	-	1
Victoria	1	-	-	4
Northern Territory	-	-	-	1
TOTAL	4	11	17	19

See pages 42-51 for full details of all locations and services.



L-R: Clinical nurses Lauren Few and Sopheap Seng-Le, Calvary Rehabilitation Hospital, South Australia.

Profit or Loss FY18

	2018 \$'000	2017 \$'000
Revenue	1,235,754	1,187,877
Other income	35,129	55,313
Total revenue and other income	1,270,883	1,243,190
Employment expenses	758,285	709,984
Goods and services	310,253	311,005
Finance costs	4,688	1,894
Depreciation and amortisation	50,049	46,011
Other expenses from ordinary activities	116,671	106,859
Total expenses	1,239,946	1,175,743
Operating surplus	30,937	67,447
Capital funding received	31,080	10,370
Total surplus	62,017	77,817
Total comprehensive income	62,017	77,817

Expenses

The Group's expenses from operating activities totalled \$1,235.3 million (2017: \$1,173.8 million).

Personnel costs represent 61% (2017: 60%) of total operating expense.

Staffing levels for clinical services have increased during the reporting period with total staff of 7,263 full time equivalents as at 30 June 2018 (2017: 6,437). The actual number of staff as at 30 June 2018 was 11,155 (2017: 10,843).

Revenues

The Group's revenue from operating activities totalled \$1,266.8 million (2017: \$1,198.2 million).

Grants and subsidies from Government for hospital and aged care operations totalled \$526.3 million (2017: \$472.6 million).

Grants and subsidies represent 42% (2017: 39%) of revenue from operating activities.

Balance Sheet

	Note	2018 \$'000	2017 \$'000
Current assets			
Cash and cash equivalents	10	296,734	397,661
Trade and other receivables	9	80,664	76,385
Inventories		16,690	13,889
Term deposits	11	257,168	124,248
Other current assets		7,684	8,359
Total current assets		658,940	620,542
Non-current assets			
Trade and other receivables		1,114	943
Property, plant and equipment	4	822,505	788,862
Investment property	5	3,232	3,286
Intangible assets	6	38,734	39,391
Other non-current assets		364	364
Total non-current assets		865,949	832,846
Total assets		1,524,889	1,453,388
Current liabilities			
Trade and other payables		95,746	93,822
Borrowings	13	9,059	8,788
Employee benefits	20	128,238	119,731
Other provisions	16	6,386	5,034
Income received in advance		19,665	17,081
Refundable loans	14	287,474	263,320
Total current liabilities		546,568	507,776
Non-current liabilities			
Trade and other receivables		1,085	833
Borrowings	13	84,363	107,895
Employee benefits	20	14,855	13,668
Other provisions	16	3,216	2,701
Total non-current liabilities		103,519	125,097
Total liabilities		650,087	632,873
NET ASSETS		874,802	820,515
Consolidated cash flow statement			
Net cash inflows from operating activities		113,208	120,187
Net cash outflows from investing activities		213,202	146,460
Net cash flow used in financing activities		933	78,728
Net increase/(decrease) in cash		100,927	52,455
Free		463,712	430,792
Tied		90,190	91,117
		553,902	521,909

Partnering and planning for the future





L-R: The Hon. John Watkins AM, Chair Little Company of Mary Health Care; Bill d'Apice, Chair Calvary Ministries; Meeghan Fitzharris ACT Minister for Health; and Jim Birch AM, Board Director Little Company of Mary Health Care.

Partnering and planning for the future Highlights

CALVARY AND SOUTH AUSTRALIA HEALTH PARTNERSHIP

In October 2018, Calvary Health Care South Australia hospitals has partnered with SA Health to alleviate pressures being experienced across the public hospital system. Our four hospitals across Adelaide – including Calvary Central Districts, Calvary North Adelaide, Calvary Rehabilitation and Calvary Wakefield hospitals – have provided 20 beds per day to help with overflow on an ongoing-as-needs basis.

CALVARY AND MEDIBANK PRIVATE PARTNERSHIP

Since 2017, Calvary has partnered with private health insurer Medibank Private to reduce the number of hospital acquired complications. The partnership focuses on five key areas of preventable harm including falls, hospital acquired infections, surgical complications, blood clots and pressure ulcers. Under the agreement, Medibank provides data to build a comprehensive picture of patient outcomes across all our hospitals to ensure patients receive the best quality care.

ACT MINISTER FOR HEALTH AND CALVARY CHAIR OPEN \$77 MILLION CALVARY BRUCE PRIVATE HOSPITAL

ACT Minister for Health Meeghan Fitzharris and Calvary Chair the Hon. John Watkins AM opened the new Calvary Bruce Private Hospital on 27 September 2017. “We are committed to creating a better health system in the ACT, and this new \$77 million hospital offers the community the latest in medical facilities while retaining close working relationships with the public hospital Calvary also operates,” Minister Fitzharris said.

ACT HEALTH FUNDS \$15 MILLION CALVARY BRUCE PUBLIC HOSPITAL EMERGENCY EXPANSION

In June 2018, the ACT government announced a \$15 million upgrade to the emergency department (ED) at Bruce Public Hospital, with works to commence in September 2019. The upgrades to the emergency department’s waiting area will make a difference to people who are waiting and ED staff along with additional treatment spaces, equipment upgrades and improved access.

ACT HEALTH FUNDS \$2.6 MILLION MATERNITY WARD UPGRADE

ACT Health provided \$2.6 million funding for Calvary Bruce Public hospital’s maternity ward upgrade. The refurbishment, unveiled on Monday 30 July 2018, includes an expanded capacity to 18 beds, a reconfigured maternity unit with 10 single rooms and four large twin rooms, a patient and family lounge, baby assessment room and enhanced facilities for partners who want to stay at the hospital.

FEDERAL AND STATE GOVERNMENTS AND SNOW FOUNDATION \$6 MILLION CLARE HOLLAND HOUSE UPGRADE

In September 2018, the Australian and ACT Governments in partnership with the Snow Foundation announced \$6 million in funding to extend and upgrade Clare Holland House hospice. The expansion will increase the number of specialist in-patient palliative care beds, improvements and development of administration and clinical spaces together with more family friendly features that enable loved ones to stay with patients.



L-R: Robin Haberecht, Calvary Riverina Private Hospital General Manager with Deputy Prime Minister and Member for Riverina Michael McCormack and Melissa Neal, Murrumbidgee PHN v.

STRATEGIC INTENT

Priority: Partnering and planning for the present and the future.

Anticipate future developments and be ready to respond to opportunities that will impact upon the communities that Calvary serves.

Research partnerships to meet health and social needs now and in the future.

Advocate for, and initiate responses to unmet needs and people experiencing disadvantage in the communities we serve.

CALVARY RIVERINA AND MURRUMBIDGEE PRIMARY HEALTH NETWORK LAUNCH WOMEN'S INITIATIVE

Deputy Prime Minister and Federal Member for Riverina Michael McCormack launched The Women's Wellness and Recovery Program at Calvary Riverina Hospital's Drug and Alcohol Centre in Wagga Wagga on 13 April 2018. The \$1.8 million program will support pregnant women and new mothers living in the Murrumbidgee region, experiencing alcohol and drug disorders.

The program provides tailored specialised treatment and practical support as early as possible. The one-to-one individualised and community-based support service includes drug education, specialist treatment and counselling within a family-based intervention framework.

CALVARY SUPPORTS SA HEALTH COMMUNITY CARE PROGRAM

Calvary Community Care are delighted to be chosen as one of four non-government organisations to deliver SA Health Community Care services. Commencing July 2018, the SA Community Care Program is a health initiative implemented by SA Health with the objective of delivering support and assistance to people in the home environment to avoid unnecessary visits to the emergency department, admission to hospital or to assist consumers to leave hospital when clinically safe to do so. Calvary Community Care along with other service providers are assisting in the delivery of a range of services tailored to meet individual needs, replacing the previous model of predominantly packaged services.

CALVARY NORTH ADELAIDE AND BUPA LAUNCH PALLIATIVE HOME CARE SERVICE

In September 2018, Calvary North Adelaide and Bupa launched a Palliative Home Care Service in response to an increasing desire from patients to be cared for and to die at home.

The service helps identify the right balance between home based and inpatient palliative care and provides increased choice for patients to select the location of their care (home or hospice). The service creates a more seamless experience for patients transitioning between care environments.

Service Manager and Palliative Care Nurse Practitioner Kevin Hardy notes that clinical studies show a direct correlation between palliative care delivered within the home environment, and a higher quality of patient and carer experience.

Palliative Home Care visits vary according to patient need from once a week for 'stable' patients up to several times per day for patients in the last days of life.



Kevin Hardy, Palliative Care Nurse Practitioner.

Partnering and planning for the future

Capital developments



Artist's impression of Calvary Adelaide Hospital, Adelaide, South Australia.

New Calvary Adelaide Hospital, South Australia

TOTAL PROJECT VALUE: \$300 MILLION
TARGET COMPLETION DATE: MID 2019

The new Calvary Adelaide Hospital is the largest-ever private hospital to be built in South Australia and the first new private hospital in nearly 20 years.

The 344 bed hospital will replace the Calvary Wakefield and Calvary Rehabilitation hospitals. Around 700 hospital staff will relocate to the new facility, which will allow for growth of around 50% staff on completion and capacity for significant growth in staff in the following years.

Owned by Dexu and Adelaide-based developer Commercial & General, and under construction with building contractor John Holland Constructions, the 12 storey hospital is located on the corner of Putney and Angas Streets, Adelaide. Details of the new hospital are available at www.calvaryadelaide.org.au

In alignment with the values of wise stewardship, Calvary generates profits for the purpose of reinvesting our funds in services and capital infrastructure. Our capital development infrastructure aims are to: meet forecast population growth; and or provide more responsive and inclusive models of care; and or complement the delivery of public health services. Calvary is grateful for the support of multiple stakeholders, including Primary Health Networks; local, federal and state governments; and the commercial sector in providing for the future health care needs of the communities we serve.

On 14 August 2018, (L-R) Commercial and General Executive Chairman Jamie McClurg, SA Premier Steven Marshall and Calvary Chair John Watkins AM attended an important 'topping out' milestone of Calvary Adelaide Hospital construction at 12 storeys high.

“Calvary has been caring for South Australians for more than 100 years, and this new hospital enables us to increase capacity and meet rising demand for quality health care.”

John Watkins AM, Chair Little Company of Mary Health Care



New Calvary Bruce Private Hospital, ACT

BEST COMMERCIAL BUILDING AWARD

Congratulations to AW Edwards, builders of the new Calvary Bruce Private Hospital in the ACT, who won the award for Best Commercial Building over \$50 million at the ACT Master Builders Awards on 29 June 2018. The awards recognise and celebrate the ACT's best builders, their teams, and the projects which have won them acclaim in the residential, commercial and civil construction sectors.

The award is a great acknowledgement of the work by AW Edwards and the Calvary team who worked alongside them. We would like to acknowledge in particular the efforts of Mick O'Driscoll the external Project Manager (now with Calvary) and Jennifer Raxworthy, Transition Manager, and all the Bruce Private staff for their efforts in getting the new hospital up and running.

The AW Edwards and Calvary team gave their all to this project, which was achieved under excellent stewardship with regards to budget and was delivered in just under 18 months, opening 27 September 2017.



L-R: Phil Clisby, Design Manager at AW Edwards and Angus Bradley, National Development Manager at Calvary.



Calvary Bethlehem Hospital Redevelopment, Victoria

HEALTH AND RETIREMENT PRECINCT DEVELOPMENT RECEIVES DEVELOPMENT APPROVAL MAY 2018

Patients, residents, staff, neighbours and the wider community will benefit from a substantial redevelopment of the current 1960's Calvary Health Care Bethlehem public hospital in Caulfield, after VCAT approved revised plans for the proposed precinct in May.

The design, revised in response to community sentiment, will see the existing hospital replaced by a Health and Retirement Precinct comprising a new hospital, retirement village, residential aged care facility, medical centre and cafe.

The Calvary Bethlehem Health and Retirement Precinct is a significant project for Calvary. For the first time, Calvary is combining all Calvary services, including hospitals, retirement and aged care, in one residential location to allow ageing-in-place.

- A place that enables people to live a healthy and fulfilled life;
- A place to build friendships and stay connected to the local community;
- A place to feel safe and enabled in an accessible environment for all;
- A place that embraces diversity and empowers people to make their own decisions and lifestyle choices;
- An option for people to age in their local community, and to be supported to live in the same place as their care needs change;
- Access to appropriate and timely interventions and supports to maintain independence; and
- A place that enables people to die in their chosen location with the level of support they require.



Artist's impression of Calvary Ryde roof top terrace.

Calvary Ryde Retirement Community, New South Wales

**HISTORIC SITE RE-DEVELOPMENT RECEIVES APPROVAL JULY 2018
TARGET COMPLETION DATE MAY 2020**

The redevelopment of Ryde Retirement Community's historic site will offer an integrated community with a residential aged care service, retirement living village, health and wellness centre, onsite respite and community support services for seniors, as well as dedicated dementia spaces, and open air gardens and community spaces.



Artist's impression of proposed Calvary Launceston Private Hospital.

Proposed Calvary Launceston Private Hospital, Tasmania

\$100 MILLION PROPOSAL MOVES TO SECOND STAGE

In December 2017 Calvary submitted an unsolicited proposal to the Tasmanian Government to relocate St Luke's and St Vincent's Hospitals into one place, increasing the number of available hospital beds and providing more services. The plan to relocate the two private hospitals into one adjacent to the Launceston General Hospital could ease the pressure on the public system and create a dedicated health hub for the region.

The Tasmanian Government is progressing the proposal to the second phase, providing the opportunity to explore the benefits of the private and public sector working in partnership to provide the best health outcomes for the Northern Tasmanian community.

The second phase involves the Assessment Panel and Calvary working together to ensure that the proposal meets the needs of both parties and future plans, and also ensures that the co-location improves the services and health outcomes for both public and private patients.



The Lenah Valley theatre upgrades incorporated a range of new equipment including the "Airo" Mobile Intraoperative CT Scanner. The scanner provides surgeons with real time diagnostic imaging during surgery.

Calvary Lenah Valley Hospital, Tasmania

**\$23.4 MILLION THEATRE UPGRADES
TARGET COMPLETION DATE APRIL 2019**

Redevelopment of the operating theatres at Calvary Lenah Valley Hospital in Hobart, Tasmania is nearing completion, bringing the number of functional theatres to nine. The theatres are housed in a new building which adjoins the existing structure. The redevelopment includes nine operating theatres, Stage 1 and 2 recovery units and a central sterilising unit. The new Executive Suites are now open with the Day of Surgery Admission Centre, Doctor's Lounge and Board Room due for completion in April 2019. Importantly, the project allowed the introduction of cardiac surgery in 2018.



Calvary St Vincent's Hospital, Tasmania

**\$6.2 MILLION ENDOSCOPY UNIT AND CARDIOVASCULAR LABORATORY
COMPLETION: SEPTEMBER 2017**

Calvary St Vincent's Private Hospital's Cardiac Catheter Laboratory and Endoscopy Unit marks the delivery of much needed services for all northern Tasmanians.

Tasmanians in the north, north east and north west have the highest prevalence of cardiovascular disease in Australia according to ABS data. Yet the Australian Commission on Safety and Quality in Health Care analysis of 2014 confirmed that northern Tasmanians also experienced the lowest rate of coronary angiograms and cardiac intervention services nationally, with most performed within the public sector.

The new Cardiac Catheter Laboratory and Endoscopy Unit are welcomed by many, including 45% of the Tasmanian population with private health insurance, relieving the high case load experienced by the public health system.

Caring for our people and working environment



Mark Green, National Director, Mission.



In August 2017, Sister Jennifer Barrow, Province Leader of Australia - Little Company of Mary, is awarded Catholic Health Australia's highest honour, the "Maria Cunningham Lifetime Contribution Award".

STRATEGIC INTENT

Priority: Care of our people and our working environments.

Provide safe, equitable workplaces that are welcoming and respectful of all.

Attract diverse people who value making a difference and are willing to contribute a range of complementary skills, motivated by the spirit of 'being for others'.

Entrust, support and equip people to make their best and most effective contribution to Calvary's mission to provide 'healing, hope and nurturing to the people and communities we serve.' prioritises safety and continuous improvement.

People, Values and Culture

During the past year, Calvary has renewed our focus on our People, Values and Culture. Our aim is to support staff health, safety and wellbeing; inspire integrity in decision-making; and learn from the people Calvary serves, together with partners and organisations with whom Calvary shares a similar purpose.

Specifically, we focus on accountability for mission and charism; attracting, retaining, training and developing people who strongly align with Calvary Mission and Values; and communications that are timely, transparent and accountable.

CALVARY MISSION ACCOUNTABILITY FRAMEWORK - FIVE ELEMENTS



Evaluating our mission

In 2016 Calvary developed a Mission Accountability Framework strategy for developing, monitoring, evaluating and learning how we might keep our mission firmly grounded in the rich heritage of the Sisters of the Little Company of Mary. These were women who grasped the Spirit of Calvary and learned how to hold an aching heart, heal the sick, tend the dying and nurture the soul.

The framework evaluates peoples' feedback from their experiences and stories to track achievement of our mission.

SPIRITUAL FOCUS

It is apparent that there is a real pride and motivation from our rich Calvary heritage. Interaction with staff across different sites offers up 'current day heritage' - those stories where clients and colleagues have experienced the Spirit of Calvary through the behaviour of staff.

ORGANISATIONAL CULTURE

Overall, our organisational culture, our values and behaviours together with our strategic intent have been in sharp focus since the arrival of Martin Bowles, National Chief Executive Officer, in late 2017. In the words of the Calvary Community Care Director of Mission (DoM),

Reflecting on examples of organisational suffering and the extent of it in some areas of our business, challenges us to respond on several levels, with our language, behaviours and organisational focus. This particularly calls us as DOMs but is also a collective call for Calvary managers and executive staff to demonstrate compassionate and responsive leadership.

Specifically, we need to identify, call, manage, train the appropriate people to manage bullying behaviours. We need to mandate some form of a 360 appraisal for all executive leaders. We need to help staff understand that performance management is not "bullying". We need to support people to have these conversations in such a way that they are not experienced as such.

COMMUNITY ENGAGEMENT

In the context of conducting a cultural safety audit, the Calvary Mater Newcastle Director of Mission observes, *The process of engaging with the local CALD and Aboriginal communities immediately took me into what I believe to be the heart of mission, being responsive the needs of the most vulnerable in the community we serve. Negotiating change and resources at an Executive level was a real learning, as was working with other key stakeholders such as the Multicultural and the Aboriginal Health Units of our Local Health District. My learnings were around the importance of being attuned to those obvious in their absence. This was not driven by an overwhelming need that was confronting us each day, it was the eerie*

silence of statistics and absence. It took a lot of work and engagement to call this out at a moral level. We are now in a position to appoint an Aboriginal Hospital liaison Officer and the Multicultural Health Unit has appointed a liaison officer three days a week with us also.

PREFERENCE FOR THE POOR AND VULNERABLE

Across the year there were many examples where, as an organisation, we were able to demonstrate our commitment to the poor and the vulnerable in society. Examples include,

- An indigenous client kept unnecessarily in hospital pending the purchase of a special bed - the cost of which wasn't going to be covered by other agencies. By paying for this bed, Calvary enabled this client to return to country.
- Advocacy for another indigenous client 'turned away' by all other providers in Adelaide. Significant cooperation and collaboration with her indigenous liaison officer resulted in improvements to the habitable state of her home, relief from an advocate who was abusing the client, assistance with medication, assistance in the care of her pets.
- Clients living in squalor, not wishing to be judged but needing support and advocacy to work through certain scenarios.
- Assistance to a staff member in dire straits financially and compromised in terms of her safety.
- Budgeted contributions to fund charitable surgery established in response to new policy.
- Exercise programs run by Calvary Rehabilitation Hospital's physiotherapist at Catherine House.
- Refugee student one-to-one mentoring.

ADVOCACY

Another patient from rehabilitation presented with her major issue being not her facial fractures from a recent fall at home, but her husband's dementia and lack of support and services because she lived in a rural area. Liaising with Social Work we were able to get her the help she needed. She asked if she could access pastoral care for telephone support after she went home. I gave her the pastoral care number (which she has not yet used) but said she felt better having it in her handbag!



L-R: Simone Pahl, Volunteer and Lauren Moore, Mission Services Resource Officer, Calvary Health Care South Australia.

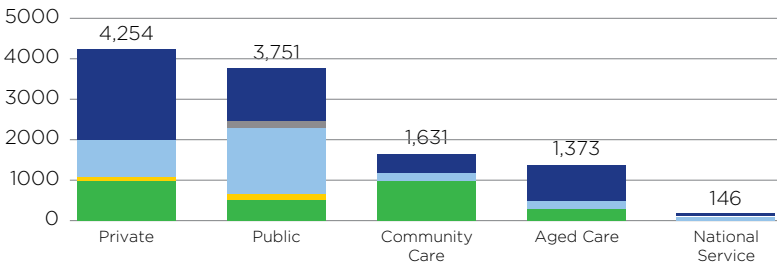
Our people

In February 2018 Calvary was awarded an Employer of Choice for Gender Equality (EOCGE) citation for the fourth consecutive year. Calvary is a major employer of women with over 10,000 employees, 8000 of which are female, with 53% female representation at executive level.

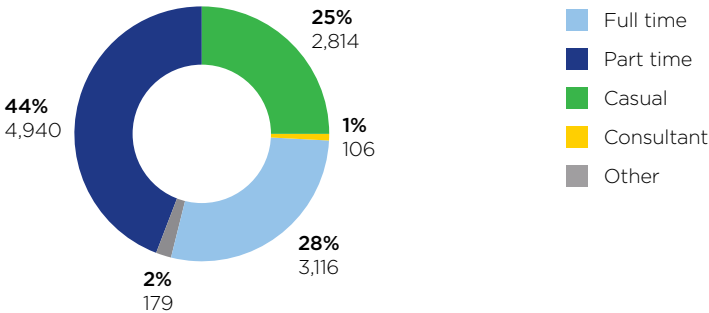


“Valuing difference can benefit all organisations. Gender equality is incorporated into Calvary business strategy as we believe that from creating a positive, diverse and fair workplace, the performance benefits will flow.”
Martin Bowles, National CEO

HEADCOUNT BY STREAM AND EMPLOYEE STATUS



HEADCOUNT BY EMPLOYEE STATUS



FY 17/18

Employees

11,155

Contracted FTE

6,721

Average age

44.7

Average years of service

7.72

Volunteers

1,140

Female

81%

Training and development

In financial year 17/18, a total of 935 students completed 153,146 hours of training with Calvary.

Calvary recognises the importance of partnerships with Tertiary and Vocational education providers. With that in mind an extensive review was undertaken of our agreements and facilitation processes of Undergraduate Clinical placements. This resulted in the development of an overarching Calvary National Student Placement Agreement; development and deployment of National Facilitation and Supervision Policy and Clinical Facilitator Position Description; and a process for uploading student details into Calvary Core Business system to demonstrate facilitation and supervision effort in our Private Hospitals.

Calvary also support clinical employees who wish to continue studying by maintaining a collaborative relationship with the University of Tasmania, through the online Scholarship program with total enrolments of 199 staff as at April 2018.

Calvary	Summary	As at 9/4/18		
Course Code	Course Title	2016	2017	Sem 1 2018
H4B	BNClinHons(Tran to Prac)	21	17	1
H4C	BNClinHons(Lead in Prac)	4	1	0
H4F	BN Prof Honours	121	153	179
H5F	Grad Cert in Nursing	0	0	0
H5H	Grad Cert Flex Learning & Sim	2	3	0
H5G	Grad Cert Addiction	1	0	0
H6G	Grad Diploma Midwifery	3	2	0
H6F	Grad Diploma Nursing	5	0	0
H7F/H7C	Master of Clinical Nursing	5	20	19
Total number of enrolments		162	196	199



Calvary South Australia hospitals Learning and Development co-ordinators.
L-R: Sarah Bricher, Calvary Wakefield Hospital, Mahasen Juaton, Calvary Rehabilitation Hospital, Cherete Harton, Calvary Wakefield Hospital.

In FY 17/18 a total of

935
students completed
153,146

hours of training with
Calvary.

Course snapshot

ONLINE COURSES
COMPLETED FY 2017-18

2,587 employees
undertook the Calvary
National Induction
Program Welcome

2,966 National Induction
Program – Professional
Conduct

2,920 National Induction
Program – Work Health
and Safety Fundamentals

2,115 Palliative & End of
Life Care Modules 1 & 2

1,761 National Induction
Program – Customer
Service

375 Volunteers Induction

ADDITIONAL COURSES
OFFERED ONLINE

5,228 Hand Hygiene

3,691 Fire & Emergency
Procedures

1,377 Manual Handling
Introduction

1,975 Medication
Calculations

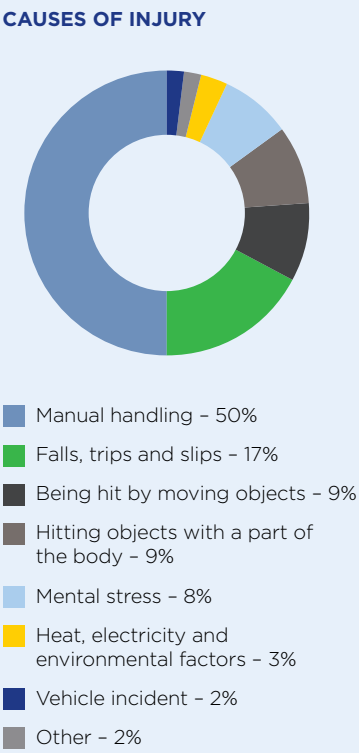
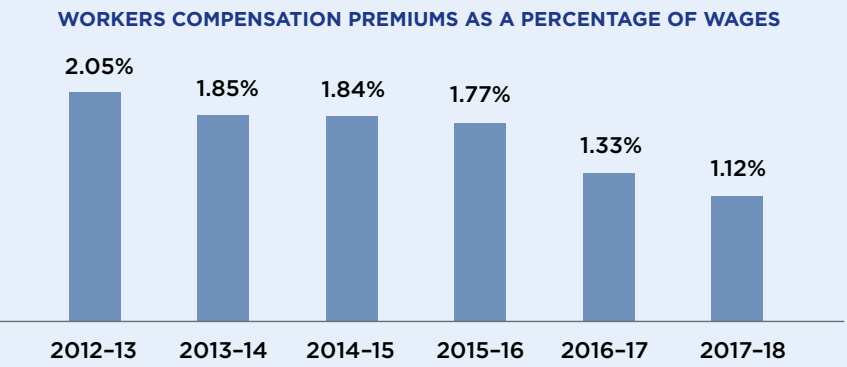
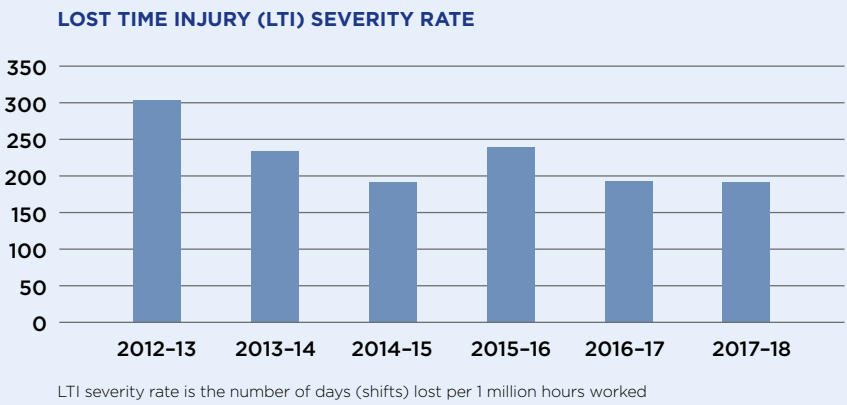
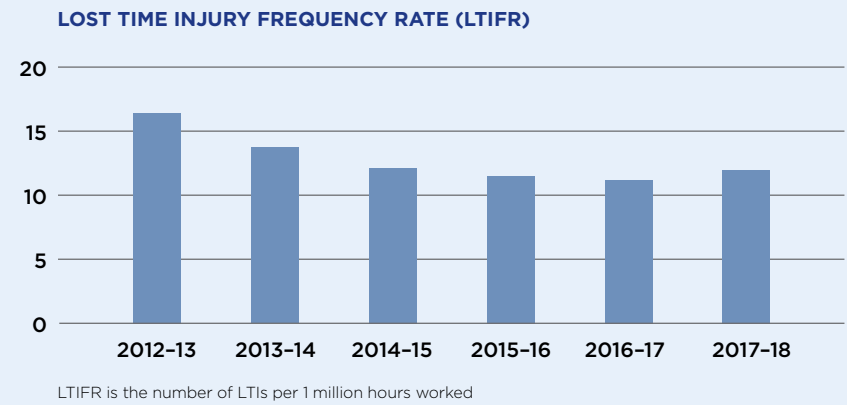
3,891 Basic Life Support

Workplace health and safety review

In FY17-18 Calvary continued to achieve steady improvement in work health and safety, and workers compensation performance.

Whilst there has been a slight increase, there has not been a drastic change to the lost time injury severity rate. Further review on recording and capturing lost time injury rates are being undertaken to ensure accuracy in reporting. Prompt intention to provide treatment to injured staff remains a focus. The key going forward is to improve outcomes on the management and reporting of hazards.

KEY WORK HEALTH AND SAFETY PERFORMANCE MEASURES FY17-18



L-R: Dennis Pomare and John Simpson, Radiation Oncology.

The WHS awards have been running since 2015 recognising the passion and efforts of those demonstrating excellence in the delivery of Work Health Safety.

Whether it be an individual or a team, the awards are all about the application of safety; whether it is incorporating safety as an integral part of one's job or being influential on a grander scale. Either way we all win!

2018 Best work health and safety solution

CALVARY MATER NEWCASTLE RADIATION ONCOLOGY ELECTRONICS DEPARTMENT - MULTI LIFT COLLIMATOR FLIPPING TOOL

Linear accelerators (radiation treatment machines) contain a beam shaping device called a Multi Lift Collimator (MLC) which requires periodic maintenance or repairs. For works to be undertaken the MLC carriage needs to be lifted out of the machine. The carriage is approximately 22 kilograms and is very difficult to access within the machine. Care must be taken when lifting the carriage due to the delicate electronics within the unit.

The hazardous manual task has been eliminated through the use of the MLC tool created by Dennis Pomare. Thanks to this creation, Bio Medical Engineers are no longer required to lift the heavy carriage. Potentially, workers were at risk of back injury and the circuit board attached to the carriage was also in danger of damage when being manually lifted.

A focus on
quality and
safety

Excellence
in care

L-R: Kathleen Cunanan, Laura Carthy, Enzo De Angelis, Nicole Manfield, Angelo Carbone.
Angiography Team, Calvary Wakefield Hospital, South Australia.


STRATEGIC INTENT

Priority: A focus on quality and safety.

Build workforce capability to ensure that all staff understand and are supported to perform their roles and responsibilities with maximum effectiveness.

Create respectful, collaborative relationships with patients, residents, clients, families and community partners from which to grow compassionate, person-centered models of care.

Commit to zero preventable harm and reduce the unplanned variation that leads to such harm, within a ‘high reliability’ framework that prioritises safety and continuous improvement.



PROFESSOR CHRIS BAGGOLEY AO

Professor Baggoley, former Australian Government Chief Medical Officer, joined Calvary in the role of Chief Medical Officer in May 2018. Based in Adelaide, Professor Baggoley is a member of the Calvary Executive Leadership Committee and his responsibilities include; a review of Calvary’s clinical engagement strategy, and the formation of a Clinical Council to engage medical and clinical stakeholders to help navigate through the changes occurring in healthcare.

Reliable, safe and effective care

Calvary is committed to delivering high-quality, safe health 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.

The Calvary Clinical Governance Framework (the Framework) sets out key structures, systems and processes that enable

organisation-wide accountability for the delivery of high-quality, safe care. For more information, visit www.calvarycare.org.au/clinical-safety-and-quality.

Most importantly, we have ensured that our patients, residents, clients, their families and the wider communities we serve, are able to work with us to develop solutions, understand emerging problems and ensure we provide the best support.

At Calvary, the quality and safety of the health care we provide is our priority. Each year, Calvary publishes data which measures our quality and safety against industry and government targets. The data in the table is averaged across Calvary hospitals and Retirement Community aged care facilities. Data from our public hospitals is also published on the MyHospitals website.

Patient safety & quality indicators	Calvary FY15-16 performance	Calvary FY16-17 performance	Calvary FY17-18 performance	Industry benchmark
Staph Aureus Bacteremia [^] (a lower rate is better)	0.13/10,000 OBD	0.01/10,000 OBDs	0.01/10,000 OBD	0.87/10,000 OBD
Hand hygiene [#] (a higher rate is desirable)	81%	82%	82%	85%
Patient falls (all) [^] (a lower rate is better)	2.94/1,000 OBD	3.27/1,000 OBD	3.27/1,000 OBD	3.5/1,000 OBD
Medication errors [^] (a lower rate is better)	2.56/1,000 OBD	2.78/1,000 OBD	2.78/1,000 OBD	<5.0/1,000 OBD
Accreditation	All Calvary services are fully accredited against relevant standards.			

[^] Data reported through Calvary Incident Management System
[#] Data collected by observational audit

Correct as at 30 June 2018 from <https://www.calvarycare.org.au/about/clinical-safety-and-quality/>

Patient experience surveys

In December 2017, Calvary commenced surveying patients using the Australian Patient Experience Question Set endorsed by the Australian Commission on Safety and Quality in Health Care in our 11 private hospitals.

Since then Calvary has received over 10,000 responses, including a response to one question measuring the willingness of patients to recommend Calvary’s services to others, giving a net promoter score of 83.5%.

The net promoter score is a measure of customer satisfaction. This feedback helps us identify what we are doing well and areas in which our services could be improved. It is a vital part of ensuring we deliver the highest quality care.

Net promoter score

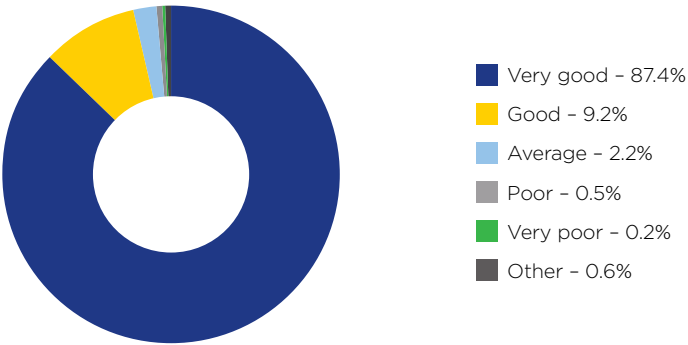
83.5%

The FY 2017-18 Calvary net promoter score = 83.5%

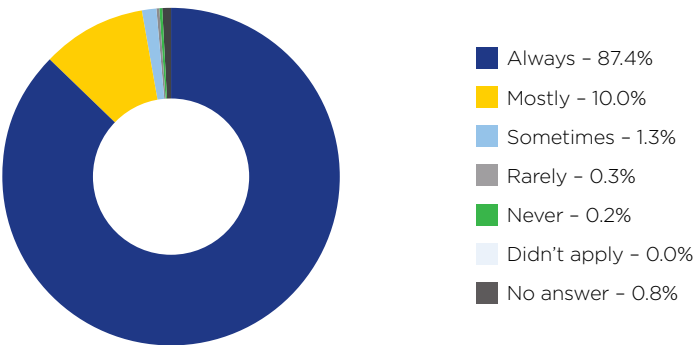
(Measures the willingness of patients to recommend Calvary’s services to others. (Score = {10 +9} – {6+5+4+3+2+1}))

Survey highlights

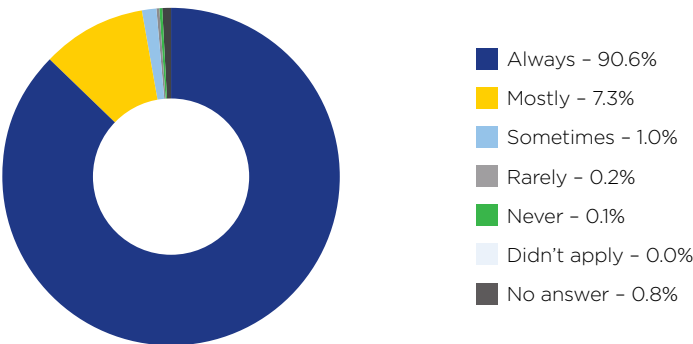
OVERALL, THE QUALITY OF TREATMENT AND CARE I RECEIVED WAS



WHEN I WAS IN HOSPITAL, I FELT CONFIDENT IN THE SAFETY OF MY TREATMENT AND CARE



I WAS TREATED WITH RESPECT AND DIGNITY



Palliative and end of life care

Naomi Byfield, Palliative Care Clinical Trial and Research Coordinator.

Making a difference at the bedside

Palliative care improves the quality of life for patients with a life-limiting illness and their families, through the prevention and relief of suffering through early identification and assessment, and treatment of pain and other problems - physical, psychosocial and spiritual.

A common misperception is that palliative care is only for patients who are dying. Palliative care may also improve symptoms and restore normality.

At Calvary Mater Hospital, the Palliative Care Clinical Trial and Research Coordinator, Naomi Byfieldt, says this tangibility of seeing the improved quality of a patient's life, for however long, is what propels her in her work. "We need to break down the perception that health care research is mainly for curative treatments. Palliative care research gives meaning to living, not meaning to dying," she says.

For the past nine years Naomi has been steadily building up the research division of the hospital's Department of Palliative Care. From designing studies, protocols and ethics applications, to improving patients' access to service.

"What terminally ill patients need and want to improve is their quality of life. Our patients contribute to our research agenda and play a huge role in the research we carry out.

If research doesn't make a difference at the bedside, then why is it being performed? Translation of research is so important," she says.

With time being a precious commodity for patients, the studies are designed to impact the least amount on a patient's time and lifestyle. Most studies usually last a maximum of four weeks and participants live at home as outpatients.

Current research activities include medical education, quality assurance, bereavement support, and ways to provide equitable and quality end of life care to residents in nursing homes.

Other research includes improving 'Care of Dying' in acute care with a suite of tools developed and distributed to the hospital's doctors and nurses to enable them to provide the best care. The tools were informed and developed by bereaved family members whose loved ones died in a hospital setting. The translation of this profound piece of research has provided clinicians with the confidence and skill sets to make palliative care their business.

Excerpt of original story written by Helen Ellis, Calvary Mater Newcastle, published in Hunter Lifestyle Edition 91, 2018

"What terminally ill patients need and want to improve is their quality of life. Our patients contribute to our research agenda and play a huge role in the research we carry out. If research doesn't make a difference at the bedside, then why is it being performed? Translation of research is so important."

Palliative and End of Life Care Research Institute

Established in 2017, the Calvary Palliative and End of Life Care Research Institute connects clinicians and researchers across four specialist palliative care units at Calvary Health Care Bethlehem, Victoria; Calvary Public Hospital Bruce, ACT; Calvary Mater Newcastle and Calvary Health Care Kogarah in NSW.

Working in collaboration with the Palliative Care Clinical Studies Collaborative, research examines symptoms experienced by palliative care patients such as pain, nausea, breathlessness and delirium and aims to improve clinical management and prevention as well as psychosocial research focussing on the experiences of patients, their families and friends.

The institute is led by nationally and internationally respected researcher Professor Liz Lobb, Professor of Palliative Care at Calvary Health Care Kogarah, and Adjunct Professor at the University of Notre Dame in Sydney. The Institute brings researchers together to share

ideas and experiences, optimise funding, and deliver outcomes.

Supporting people both living and dying at home, the palliative care environment is impacted by social and demographic changes, as families and housing arrangements change, people are living longer, often with more chronic illnesses and frailty.

Committed to providing the best possible care to our patients, residents and clients, including those who are approaching and reaching the end of life. The Institute plays an important role in delivering evidence-based care in accordance with Calvary's mission and values, as well as national and international accepted best practice. Our goals are to place people in our care and their families first, to ensure high quality, safe care, and to deliver innovative and integrated care.

To find out more visit www.calvaryresearch.org.au.

Medical oncology research trials wins SPIRA award

The Calvary Mater Newcastle's Medical Oncology Research (MOR) Clinical Trial Units won the inaugural ASIA-Pac Site Recruitment Innovation Award (SPIRA). The award was in recognition of the innovative, patient-directed enrolment strategies used by the trials unit during a recent prostate cancer study.

The study posed many recruitment challenges due to the targeted nature of the trial treatment and expected a 90% pre-screening failure rate. MOR trials committed to screening 17 participants in 12 months. With recruitment innovations and a committed research team, MOR screened 48 patients in 12 months and enrolled five patients in the study treatment.

The judges congratulated the unit on their teamwork, regional network approach and patient focus.



Patient Eric has a break with Rosie in the hospital gardens at Calvary Health Care Bethlehem Hospital

Shining light on living the end of life

Venerable Mary Potter believed that loving care would banish fear. In her footsteps, and in the example of the LCM Sisters over more than 130 years of Calvary in Australia, we continue to work in new and creative ways to reduce the anxiety and fear that can be felt by sick and dying people, their family members and the wider community.

From January 2019, Calvary will be filming the authentic lived experiences of 20 patients, residents and clients in our care, who are estimated to be living their last 12 months of life.

With a focus on capturing the first-hand experiences of people who are living the end of their life, these stories will form the central component of a new public awareness campaign designed to increase community familiarity with what it can be like for many Australians who are approaching or currently navigating this phase.

The purpose of the campaign is to increase familiarity and expand understanding by providing Australians with highly intimate

and educative encounters with persons experiencing advanced life limiting disease, who are engaged in care, and living an empowered and dignified life – whatever that may mean to the person and their family carers.

While end of life can certainly be difficult, the reality of many people's experience is positive, even beautiful and hope-filled. Calvary, with the assistance of the people in our care, can show that these kinds of experiences are possible, even in a hospital bed.

The first phase of Calvary's campaign is called the Living End of Life Experiences Video Project, led by National End of Life Communications Manager, Stephen Lyons.

For more information about this initiative, please email: Stephen.Lyons2@calvarycare.org.au

We continue to work in new and creative ways to reduce the anxiety and fear that can be felt by sick and dying people, their family members and the wider community.

Case study The gift of accompaniment

When Michael wasn't able to play his trumpet anymore, he wanted to give up on everything else, too. He didn't know whether to be angrier at the cancer attacking his body or the dementia attacking his mind. Never had he felt more helpless, more pathetic in his illness than when Michael first realised he would never play again.

All there was now, he thought, was suffering and death. Nothing but for his deterioration; then more doctors, more drugs and treatments, then death, then nothing again. So the trumpet – something that had defined his entire life – was swiftly boxed up and discarded, deep under the house. Michael had decided that he was no longer himself. Michael had decided to die.

Each of us lives with our own vulnerabilities and unique circumstances that may inform our particular kind of suffering. For many, their grief and loss is not relieved by medicine, but rather through the solidarity of presence, the enterprise of research, imagination, creativity and grit, together with the multiple acts of service of those who give to those who have not.

Palliative care and end-of-life care, for example, aim to treat the physical, psychological and social difficulties associated with life-limiting illnesses and dying so that the person can live as well as possible, whatever that might mean to them and their family members. This is how we have assisted those who experience loss and grief and face their death every day.

Months later, Michael asked for his trumpet again.

Now in a hospital bed, set up in the living room at home, Michael was surrounded by his family: his eldest son with the twins who had just started school; his daughter, recently remarried and seven months pregnant with her first child; and the youngest boy who, brain damaged in a riding accident, had made huge strides in learning to speak again. His situation was different now, as was theirs. He was dying. And he knew it would happen soon.

Despite every disappointment, frustration and wave of pain he had endured throughout the grieving of his deterioration, Michael knew what would remain were the things he could count on most: the love of his family, and the memory of an imperfect life and an imperfect death, lived as only Michael could live it. Michael asked for his trumpet.

Strangely, nothing mattered more to Michael than the 'right now' he had wished to deny himself months earlier. Michael held his trumpet close to his chest. The brass had worn in places that made this instrument uniquely his. Neither of them were what they once were: Michael was now an old, sick and dying man; the trumpet bore the scars of playing music for 40 years.

Michael arrived at the end knowing he was loved, knowing that he had loved, and knowing that when he was at his sickest and most vulnerable, his care was a privilege to all those who had accompanied him.

Michael died just before breakfast, at home, on a Wednesday morning in December. He lived and died with cancer and dementia. While these diseases had an impact on Michael's ability to do the things he had once loved doing, they didn't destroy the human being – the person that was Michael, beneath the disease.

While he had once wished for nothing else but to end his life, at a point his suffering had felt unbearable, the months and weeks that followed offered Michael and his loved ones surprising opportunities to heal and discover meaning in life he never thought possible.

He gifted his family and carers with the opportunity to accompany and care for him until the end and be part of his rediscovery of self.

Calvary will continue to accompany the sick and dying with holistic person-centred health, aged, and community care as it has in Australia for the past 130 years.

MARK GREEN
NATIONAL DIRECTOR OF MISSION

This is a shortened version of an article written by Mark Green and first published on 21 August 2018 in the Australian Catholics 25 Year Anniversary Edition (online and print).



L-R: Dominique Nyilas, Lyn Herd, Sophia Wooldridge, Helen Ellis, Sulu Lolohea, Mary Ringstad, Shakila Kader, Alyce Weatherall receive the Best Team Contribution to Clinical Safety.

STAR stands for Stop, Think, Act, Report - and that's exactly the kind of commitment we'd like to celebrate.

The Calvary STAR Awards support Calvary's dedication to improving clinical safety for our patients, residents and clients and celebrate staff who make significant contributions to improve our clinical safety performance.

2018 STAR Awards

Calvary Mater Newcastle (CMN) Executive sought to review the organisation's ability to serve the needs of the Aboriginal, and Culturally and Linguistically Diverse (CALD) communities of the Hunter. The presentation rates for both groups did not reflect the local demographic and incidence of disease data for these particular communities.

A project officer was appointed to undertake a Cultural Safety Audit. The project confirmed some serious common misperceptions that had a direct impact on the communities' confidence in presenting at CMN for treatment. Particular barriers to access were also identified, which directly impacted any sense of cultural safety for these various communities.

This project has identified a pathway across Calvary for the engagement of vulnerable communities, whose needs have been discovered in their absence from our services. Our foundation as a Catholic hospital can be comforting for some, but for other cultures it can be confronting and intimidating. Cultural safety and security has a substantial impact on Aboriginal and CALD community members accessing health care, but it is not as obvious as other more measurable risks. We have incorporated this area of safety into our Consumer and Community Engagement Framework, including the place of the Cultural Determinants of Health.

Calvary Mater Newcastle wins International VIP Award

A specialist team at Calvary Mater Newcastle public hospital received worldwide recognition at the 41st International Hospital Federation Congress in Tapei, Taiwan on 8 November 2017, for their caring and compassionate approach to treating Very Important Patients (VIPs). A VIP is a patient who presents to the Emergency Department more than eight times within 12 months, or is re-admitted to hospital within 28 days of their last stay.

The Calvary Mater team asked patients a series of questions and care plans that addressed patient needs were developed, enabling personalised support from community partners to be tailored to reduce re-admission rates. With a multidisciplinary approach including NSW Ambulance, doctors, nurses and allied health (social work, physiotherapy, occupational therapy, pastoral care), the team worked together to identify problems and try to resolve them.

Since the VIP program was implemented in July 2015, VIP re-admission rates have fallen by 29%.



L-R: Karen Bolger, Allied Health and Anneliis Way, Music Therapist of Calvary Health Care Bethlehem accept the CHA Pastoral Care Award.

Calvary recognised in CHA highest honours for health and aged care

The Catholic Health Australia (CHA) National Awards 2018 pay tribute to exemplary innovation, excellence and contribution to health and aged care.

The awards were presented at the National Catholic Health Australia Conference gala dinner held in Melbourne 28 August 2018. CHA represents 80 not-for-profit hospitals, 25,000 aged care beds and employs 83,300 people nation wide.

CHA's Chief Executive Suzanne Greenwood said, "Each winner has displayed tremendous care, compassion and dedication to those in their care, to improving quality and meaning of life."

EXCELLENCE IN PASTORAL CARE AWARD – CALVARY HEALTH CARE BETHLEHEM – ANNELIIS WAY FOR THEIR SONGWRITING LEGACY PROJECT: ULURU WE LOOK TO YOU

Music therapist Anneliis Way works with patients on writing a song that can be left for family and friends, and reflect their deepest thoughts about their life. A beautiful case example is the late Andrew McCutcheon, social change advocate, Methodist pastor, local and state government member, who left a song for all Australians. Desperately disappointed about the rejection of the Uluru Statement from

the Heart, he wrote a song with Anneliis to reflect his deep wish for a reform, land rights, treaty and reconciliation. The week that he passed his song was played to him. In slow and slurred speech, he asked if the song might 'go viral'! At his State funeral his song was performed by Nick Seymour, Anneliis Way and Dan Kelly, and the Uluru Statement from the Heart was unfurled by Thomas Mayor, Chair of the Uluru Convention.

The family said that the program "allowed Dad, Mum and the rest of us to focus on some positive action". Anneliis' work highlights the importance of creating space for people at all stages of life to have their voice heard and to attend to the whole person. Music transcended physical limitations and enabled Andrew to spread a final message of hope for justice and healing in indigenous communities.

SR MARIA CUNNINGHAM LIFETIME CONTRIBUTION AWARD – CATHERINE (KATE) BIRRELL OAM, MELBOURNE

CHA's highest honour was awarded to Kate for her 40 years of dedication to nursing, nursing education, and Catholic health. Kate is currently a director of Calvary Ministries.

Kate is a nurse by profession and has been a member of the Australian College of Nursing

since 2012 and before that the Royal College of Nursing Australia from 1990.


Kate was pivotal in helping establish the CHA Nurse Unit Manager Scholarship Program. She initiated the CHA Nursing and Midwifery Symposium, which is now an annual event, and she initiated the CHA Nursing Awards.

Kate has made a significant contribution not only across Calvary, but also in previous roles with St John of God Health Care, for all CHA members. She exemplifies the great outcomes that can occur when we work together and has inspired and mentored numerous others.



Kate Birrell OAM, Calvary Ministries Director

Our services



The Heart of Calvary is no better illustrated than by the hospitality and generosity of spirit in the faces of Mwangi Wagucha and Janet Searle, part of our Calvary Wakefield Hospital, South Australia team.

Our locations

ACT

- Calvary Public Hospital Bruce
 - Clare Holland Hospice
- Calvary Bruce Private Hospital
 - Hyson Green Mental Health Services
- Calvary John James Hospital
- Calvary Haydon Retirement Community
- Calvary Community Care – Bruce

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 (13 locations)
- Calvary Community Care – Sydney, Taree, Riverina (also respite care), Hunter/Newcastle (also respite care and social centre), Forster (respite care only), Lakelands (also respite care)

NT

- Calvary Community Care – Darwin, Alice Springs, Bathurst Island

SA

- Calvary Adelaide Hospital
- Calvary North Adelaide Hospital
- Calvary Wakefield Hospital
 - Calvary Wakefield Surgicentre
- Calvary Rehabilitation Hospital
- Calvary Central Districts Hospital
- Calvary Flora McDonald Retirement Community
- Calvary St Catherine's Retirement Community
- Calvary Community Care – Adelaide, Port Augusta (also respite care), Victor Harbor

TAS

- Calvary Lenah Valley Hospital
- Calvary St John's Hospital
- Calvary St Luke's Hospital
- Calvary St Vincent's Hospital
- Calvary Community Care – Launceston, Hobart

VIC

- Calvary Bethlehem Health and Retirement Precinct
- Calvary Health Care Bethlehem
- Calvary Community Care Head Office
- Calvary Community Care – Melbourne, Gippsland, Shepparton



Services by region Australian Capital Territory (ACT)

Regional Managers



BARBARA REID, Regional CEO ACT Hospitals
MATTHEW FILOCAMO, Director of Operations, Retirement Communities
HELEN DOUGLAS, Director of Operations, Calvary Community Care

CALVARY PUBLIC HOSPITAL BRUCE, ACT **General Manager: Mark Dykgraaf** **(Barbara Reid to Aug 2018)**

275 bed public hospital.

Services: The hospital provides emergency, critical care, generalist medical and surgical services, maternity including a midwifery lead service, voluntary adult mental health, day chemotherapy and specialist outreach services including Midcall, Breast Care, Lymphedema and Geriatric Acute Care at our Bruce campus. From Clare Holland House in Barton we provide specialist palliative care services to the ACT and surrounding region.

Calvary Public Bruce is a teaching hospital 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 BRUCE PRIVATE HOSPITAL, ACT **General Manager: Elaine Bell** **(Kim Bradshaw to Feb 2018, Elena McShane to July 2018)**

118 bed facility located on the Calvary Bruce campus, with eight digitally integrated theatres and an eight-bed critical care unit.

Services: General medical and surgical services are complemented by clinical excellence in orthopaedics, urology, gastroenterology, and ophthalmology. Specialist services include a 12 bed maternity suite providing new families with specialised care and support after birth, and the 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 **General Manager: Tim Free**

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

Services: The hospital offers an extensive range of services including general medical, general surgery, vascular, gynaecology, paediatrics, orthopaedics, urology, gastroenterology, thoracic, vascular, plastic, dental, ENT, intensive care unit. It also has a unit with a Level 2 special care nursery. Its rehabilitation unit offers 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.



CALVARY HAYDON RETIREMENT COMMUNITY, ACT **General Manager: Stephanie Tyrell**

Among the gumtrees and gardens of South Bruce, Calvary Haydon Retirement Community provides quality residential care and support to 100 residents. It also offers dementia-specific services, respite accommodation and independent living units. All rooms are single with ensuites and are generous in size. The community is close to a large shopping centre and public transport, and Calvary's public and private hospitals are just across the road.



CALVARY COMMUNITY CARE

Assists 10,000 clients each month across 19 locations in NSW; the Australian Capital Territory, South Australia, Tasmania, Victoria, the Northern Territory and the Tiwi Islands. Calvary Community Care has been supporting people in their own homes and communities for over 25 years, delivering a range of aged care, disability and other support services that enable independence, improve social connections and promote positive health and wellbeing. Community Care has a wide range of Commonwealth and State funded programs which focus on supporting individuals to remain living in their own home and local communities.

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

Services by region New South Wales (NSW)

Regional Managers



WENDY HUGHES, Regional CEO NSW Hospitals
MATTHEW FILOCAMO, Director of Operations, Retirement Communities
HELEN DOUGLAS, Director of Operations, Calvary Community Care

CALVARY RIVERINA, WAGGA WAGGA, NSW **General Manager: Robin Haberecht**

165 bed private hospital.

Services: Calvary Riverina Hospital's services include palliative care, general medicine, general surgery, intensive care, cardiology, respiratory medicine, sleep studies, orthopaedics, colorectal care, oncological and reconstructive breast surgery, bariatric surgery, ENT, paediatric surgery, urology, ophthalmology, obstetrics and gynaecology, day surgery, oral maxillofacial surgery, plastics and rehabilitation. Calvary Riverina Hospital also provides a comprehensive drug and alcohol acute withdrawal and sub acute/rehabilitation service which comprises inpatient, home based withdrawal and outpatient withdrawal and support services.

Onsite services include cardiovascular laboratory, medical imaging and pathology services and the Riverina Cancer Care Centre providing medial and radiation oncology treatment.



CALVARY HEALTH CARE KOGARAH, NSW **General Manager: Drew Kear**

98 bed sub-acute public hospital.

Services: This facility in southern Sydney offers multidisciplinary sub-acute inpatient services for palliative care and rehabilitation, a large Day Rehabilitation Program and ambulatory and community-based palliative care, rehabilitation and aged care services. The facility also operates Dementia services offering day and overnight respite. Calvary Kogarah is also a provider of community services include multidisciplinary palliative care and rehabilitation teams, an aged care assessment team, a transitional aged care program, a range of Commonwealth Home Support Program (CHSP) funded programs. This teaching hospital is aligned with University of NSW and Notre Dame University, and is a 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 **General Manager: Mark Jeffrey** **(following retirement of CEO Greg Flint September 2018)**

208 bed public hospital providing district and tertiary referral services, as well as a teaching hospital and research centre. The hospital is the major cancer care centre for the Hunter region, providing 350,000 outpatient treatments per year.

Services: The hospital offers services across general medical and surgical, emergency, intensive care, coronary care, clinical toxicology, drug and alcohol services, haematology, radiation oncology, medical oncology, melanoma services, and palliative care. This major research facility is affiliated with universities and colleges, both nationally and internationally.



CALVARY ST PAUL'S RETIREMENT COMMUNITY, NSW **General Manager: Luke Sams** **Manager: Wendy McLaughlin**

Positioned in a rural setting on the Manning River in Cundletown, near Taree, Calvary St Paul's Retirement Community has a warm country feel. It offers permanent accommodation for 40 residents in single rooms with ensuites, as well as respite accommodation.



CALVARY NAZARETH RETIREMENT COMMUNITY, NSW **General Manager: Luke Sams** **Manager: Julie Heaney**

Calvary Nazareth Retirement Community in Belmont North provides quality care and support to 50 permanent residents. It has a dementia-secure unit and offers respite accommodation services and independent living.

Services by region **New South Wales (NSW)** *continued*



CALVARY RYDE RETIREMENT COMMUNITY, NSW
General Manager: Godwin D'Amato

Set amid tranquil landscaped gardens on an historic property, Calvary Ryde Retirement Community 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. Mary Potter Residential Care is a 63-bed facility including a 21-bed wing for patients with dementia. Dalton Gardens has 126 independent living units and provides residents with a maintenance-free, secure and relaxed lifestyle.



CALVARY TANILBA SHORES RETIREMENT COMMUNITY, NSW
General Manager: Luke Sams
Manager: (Acting) Krystal James

Calvary Tanilba Shores Retirement Community provides quality care for 41 residents and also offers respite accommodation and independent living. Residents enjoy views of the beautiful bay and bushland in their single rooms, each with their own private ensuite.



CALVARY ST FRANCIS RETIREMENT COMMUNITY, NSW
General Manager: Luke Sams
Manager: Susan Waters

Located in the Lake Macquarie suburb of Eleebana, this facility has 52 single aged care rooms, 30 independent living units, respite accommodation and a 12 bed secure unit for residents with dementia. The two bedroom independent living units have internally accessible lock-up garages, air conditioning and gardens. Each aged care room has an ensuite.



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 to 296 residents across two Residential Care sites: Bimbadeen and Nulkaba.

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
General Manager: Luke Sams
Manager: Bradley Roberts

Calvary Mt Carmel Retirement Community provides quality care for 41 residents and also offers overnight respite accommodation and independent living. All rooms are single, air conditioned and have their own private ensuite and balcony overlooking the rural backdrop of Maitland.



CALVARY MUSWELLBROOK RETIREMENT COMMUNITY, NSW
General Manager: Luke Sams
Manager: Maree Gibbs

Calvary Muswellbrook Retirement Community provides a 65 bed residential aged care facility and 22 independent living villas. Overlooking Muswellbrook Showground, the community is located close to local shops and public transport.

Services by region **New South Wales (NSW)** *continued*



CALVARY COOINDA RETIREMENT COMMUNITY, NSW
General Manager: Luke Sams
Manager: Sharon Sheen

Calvary Cooinda Retirement Community in Singleton provides quality care for more than 34 permanent residents and offers overnight respite accommodation. Calvary Cooinda's residents enjoy single rooms, each with their own ensuite, open common rooms and a large outdoor area overlooking Singleton Showground.



CALVARY EPHEBUS RETIREMENT COMMUNITY, NSW
General Manager: Luke Sams
Independent Living Units Coordinator: Elizabeth Jacobs

Centrally situated in Dickson Street, Lambton, Calvary Ephesus Retirement Community offers eight independent living units with internally accessible lock-up garages. Neighbouring Holy Trinity Parish, the village is a short distance to the Lambton shops, cafes and the library.



CALVARY TOURS TERRACE RETIREMENT COMMUNITY, NSW
General Manager: Luke Sams
Independent Living Units Coordinator: Elizabeth Jacobs

Calvary Tours Terrace is a community of two bedroom independent living apartments in the Newcastle suburb of Hamilton South. The village is centrally located close to Beaumont Street and Junction Fair Shopping Centre, local clubs and public transport.



CALVARY ST LUKE'S RETIREMENT COMMUNITY, NSW
General Manager: Luke Sams
Independent Living Units Coordinator: Elizabeth Jacobs

Located close to the cafes on Darby Street, Calvary St Luke's Retirement Community is a community of six two bedroom units. 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 also available for entertaining guests.



CALVARY ST JOSEPH'S RETIREMENT COMMUNITY, NSW
General Manager: Luke Sams
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.



CALVARY ST MARTIN DE PORRES RETIREMENT COMMUNITY, NSW
General Manager: Luke Sams
Manager: Maureen Kiss

Located in the heart of Waratah in Newcastle, Calvary St Martin de Porres Retirement Community is close to a large shopping centre, public transport and the Calvary Mater Newcastle hospital. It provides quality aged care for 41 residents in single rooms with ensuites in a single-level building.



CALVARY COMMUNITY CARE

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

Services by region

South Australia (SA)
and Northern Territory (NT*)

Regional
Managers



SHARON KENDALL, Regional CEO SA Hospitals
MATTHEW FILOCAMO, Director of Operations, Retirement Communities
HELEN DOUGLAS, Director of Operations, Calvary Community Care

CALVARY HEALTH CARE SOUTH AUSTRALIA

Shared Services

207 Wakefield Street
Adelaide SA 5000
Ph: 08 8179 1500
www.calvarysa.org.au



CALVARY WAKEFIELD HOSPITAL, ADELAIDE, SA

General Manager: Kerrie Hayes

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

Services: 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

General Manager: Kerrie Hayes

65 bed private rehabilitation hospital with day and outpatient programs.

Services: This rehabilitation hospital offers inpatient and day patient rehabilitation including cardiac, orthopedic, neurological stroke, multi-trauma, falls prevention, geriatric assessment, pulmonary and reconditioning services. It is committed to restoring patients' quality of life to its optimal level.



CALVARY CENTRAL DISTRICTS HOSPITAL, SA

General Manager (Acting): Emma Poland
(Elena McShane to Feb 2018)

A modern 92 bed private hospital.

Services: Surgical and medical services include comprehensive cancer care services and specialist on-site consulting. Core surgical specialties are general surgery, orthopaedic, gastroenterology and ophthalmology. Located north of the city, the hospital provides valuable support to the Barossa Valley and Northern Yorke Peninsula regions.



CALVARY NORTH ADELAIDE HOSPITAL, SA

General Manager (Acting): Tanya Brooks
Following retirement of CEO Sue Imgraben Dec 2017, Sharon Kendall appointed CEO Jan 2018 to Oct 2018

153 bed acute inpatient private hospital with seven theatres, three day procedure rooms, a Day Oncology Suite and a 15-bed onsite Mary Potter Hospice.

Services: Calvary North Adelaide provides acute inpatient surgical and medical care. Core specialties include general, colorectal, urology and gynaecology surgery supported by the latest Da Vinci xi surgical robotic program. Medical capabilities include dedicated haematology and oncology services, a specialist palliative care service including inpatient and home care services. Women's health services including obstetrics and gynaecology and a Level 5 special care nursery. All services are supported by a Level 2 intensive care unit and 24 hour onsite medical cover. We have been providing care to the South Australian community since 1900.

Services by region

South Australia (SA)
and Northern Territory (NT*) continued



CALVARY ST CATHERINE'S RETIREMENT COMMUNITY, SA

Regional Manager: Anne Hooper
Residential Site Manager: Lisa Robertson

Located at Berri in the Riverland region, Calvary St Catherine's has a wonderful community feel and a homely environment where residents feel part of a family. St Catherine's is home to 50 residents in a mix of single rooms with ensuite, and single and double rooms with shared bathroom.



CALVARY FLORA MCDONALD RETIREMENT COMMUNITY, SA

Regional Manager: Anne Hooper
Residential Site Manager: Mary McFarlane

Calvary Flora McDonald, located in Adelaide, is a modern, welcoming facility that caters for 153 residents from diverse cultural and religious backgrounds. Two new wings were opened in June 2017, including a Vietnamese-specific wing.



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

*Calvary Community Care also deliver services to Tiwi Islanders in the Northern Territory.

Services by region Tasmania (TAS)

Regional Managers



CYNTHIA DOWELL, Regional CEO Tasmania and Victoria Hospitals
HELEN DOUGLAS, Director of Operations, Calvary Community Care

CALVARY LENAH VALLEY HOSPITAL, HOBART, TAS
General Manager: Marcus DiMartino (Kathryn Berry to Aug 2018)

181 bed facility 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 Hobart with spectacular views over greater Hobart, the hospital is a leader in neurosurgery, gynaecology, surgical and medical care. Eight new integrated theatres and a new biplane cardiac catheter laboratory are now operational.
Services: The hospital has a modern Maternity and Women's Health Unit, and offers endoscopy, critical care, intensive care and 24/7 accident and emergency services.



CALVARY ST JOHN'S HOSPITAL, HOBART, TAS
General Manager: Marcus DiMartino (Kathryn Berry to Aug 2018)

108 bed private hospital.
Services: Specialities include 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
General Manager: Grant Musgrave

68 bed private hospital.
Located in East Launceston with wonderful views. In conjunction with Calvary St Vincent's Hospital proudly servicing the Northern Tasmanian community for the last century providing a broad range of services.
Services: Specialties include palliative care, orthopaedics, ENT surgery, dental surgery, general medical services, chemotherapy, mental health care and sleep studies.



CALVARY ST VINCENT'S HOSPITAL, LAUNCESTON, TAS
General Manager: Grant Musgrave

78 bed private hospital.
Located north of the city centre in a prime location. In conjunction with Calvary St Luke's Hospital proudly servicing the Northern Tasmanian community for the last century providing a broad range of services.
Services: Specialties include urology, general surgery, colorectal surgery, plastic surgery, gynaecology surgery, oral and maxillofacial surgery, high dependency, lithotripsy, gastroenterology, cardiology, general medical services and rehabilitation.



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

Services by region Victoria (VIC)

Regional Managers



CYNTHIA DOWELL, Regional CEO Tasmania and Victoria Hospitals
HELEN DOUGLAS, Director of Operations, Calvary Community Care

CALVARY HEALTH CARE BETHLEHEM, VIC
General Manager and Medical Director: Dr Jane Fischer

Sub-acute public health service that provides patient care coordinated across 32 inpatient beds, centre-based clinics, day centre and home-based care including residential care settings.
Services: Proudly serving the needs of the community for more than 75 years, Bethlehem offers a specialist palliative care service and is a statewide provider for those with progressive neurological disease.
In collaboration with other providers, interdisciplinary teams support more than 4,000 patients each year, using a patient-centred care model that helps people to 'live well', knowing they have a progressive incurable illness.

The health service has affiliations with a number of universities offering a range of student, graduate and post-graduate clinical placements in medical, nursing and allied health disciplines. Bethlehem 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.



CALVARY COMMUNITY CARE

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

Governance



L-R: Sr Jennifer Barrow LCM and Bill d'Apice, Chair, Calvary Ministries.

About Calvary governance

Two Boards oversee Calvary governance: **Calvary Ministries is the stewardship ministry while the operational ministry for health and aged care is conducted by Little Company of Mary Health Care and its subsidiaries.**

Calvary Ministries Board of Directors

Calvary Ministries took responsibility for the stewardship of Little Company of Mary Health Care Ltd in January 2011, having been granted Public Juridical personality by the Congregation for Institutes of Consecrated Life and Societies of Apostolic Life. It exercises a canonical role consistent with the teachings and laws of the Catholic Church and guided by the charism, spirit and mission of the Sisters of the Little Company of Mary.

Calvary Ministries exercises a stewardship role over the health, aged and community care programs and services now conducted by Little Company of Mary Health Care Ltd and its subsidiaries, to improve the health and well-being of the communities they serve. Calvary Ministries must adhere to its canonical by-laws, and the Ethical Directives as approved by the Australian Catholic Bishops' Conference.

Calvary Ministries Ltd is the sole member of Little Company of Mary Health Care Ltd. There are reserved powers vested in Calvary Ministries Ltd concerning certain proposed actions of Little Company of Health Care Ltd.

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-profit organisations. 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 nine years. Through his firm, Bill 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. He 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, and 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 2007-08. He is a fellow of the Australian Institute of Company Directors. He resides in Melbourne

MR DAVID PENNY

David is currently Executive Leader Operations ISMAPNG (The Institute of Sisters of Mercy Australia and Papua New Guinea). Until May 2017 he held an executive role within the Diocese of Wilcannia-Forbes in Western NSW.

He has significant experience in the management and governance of not-for-profit organisations and has been a BBI Council member since its inception.

David holds degrees and diplomas in Health Science and Administration. He 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.

MS CATHERINE (KATE) BIRRELL OAM

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 has several Board and committee appointments. These currently include the Gordon Institute of TAFE Geelong, Barwon Health 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. 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 was the 2018 recipient of the CHA Sr Maria Cunningham Award for Lifetime Contribution. Kate 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 health care facilities within the Little Company of Mary (Riverina, Tasmania, ACT and Queensland) and other Catholic health settings. This includes 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. She resides in Sydney.

MR MICHAEL LEE

Michael has degrees in Science (1977) and Electrical Engineering (First Class Honours 1979) from the University of NSW and is a Fellow of the Institution of Engineers Australia.

Michael brings strong business skills and corporate governance experience to Calvary Ministries having operated effectively as a business consultant and director of listed companies as well as a director and chairman of unlisted companies.

In 1984 he was elected to the Australian Parliament for the electorate of Dobell. He was appointed by Prime Minister Paul Keating to the Cabinet, at age 36, as Minister for Resources and Tourism. Between 1993 and 1996 he served as Minister for Communications, Arts and Tourism.

In Opposition under Kim Beazley, he served as Shadow Minister for Health and Shadow Minister for Education, prior to being defeated at the 2001 election.

After retiring from politics, Michael was appointed honorary Chair of the Central Coast Campuses Board, which was responsible for the Ourimbah Campus of the University of Newcastle and the Gosford, Ourimbah and Wyong campuses of TAFE. In 2008 Michael was appointed Chair of the NSW TAFE Commission Board, providing advice to the Minister for Education and Training on the operation of NSW TAFE Institutes.

Michael is currently Chairman of Communications Alliance, the peak communications industry body in Australia.

Since 2002 Michael has been a Non-Executive Director of ASX listed Sydney Airport (previously Macquarie Airports) which owns and operates Sydney Airport. He Chairs the Safety, Security and Sustainability Committee and is also a member of the Audit and Risk Committee, as well as the Nominations and Remuneration Committee.

Michael has in past years held several other Non-executive directorships. Michael resides on the Central Coast of NSW.

MEMBERS COUNCIL 2017-18

Sr Anne Sheridan LCM (Chair)

Ms Maria Egan (deceased 14/01/2018)

Sr Marie Therese West LCM

Sr Monica Whelan LCM

OFFICERS/ADVISORS

Edwina MacArthur, Executive Officer

Edwina is a Chartered Accountant who joined the not-for-profit world after working in accounting practices for 25 years. 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 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.

Michele Black, Office Administrator/ Personal Assistant

Board of Directors

The Little Company of Mary Health Care Board of Directors is accountable to Calvary Ministries. Chaired by the Hon. John Watkins AM, the board includes Mr Jim Birch, Dr Annette Carruthers, Mr David Catchpole, Ms Lucille Halloran, Associate Professor Richard Matthews, Professor Katherine McGrath, Mr Patrick O’Sullivan, Ms Lucille Scomazzon and Ms Jennifer Stratton. Ms Rebecca Davies and the Hon. Michael Roche AM served as directors until the November Annual General Meeting at which time Dr Annette Carruthers and Ms Lucille Scomazzon were appointed to the board. The board met nine times during the year. One of these meetings was held at Calvary Health Care Bethlehem and allowed directors to meet staff and patients (October 2017). Another meeting was held in Adelaide (March 2018) and allowed directors to view the construction progress of the new Calvary Adelaide Hospital.

THE HON. JOHN WATKINS
AM – CHAIR, LLB, MA, DIPED,
HON DLITT MACQ

Appointed to the board and as
Chair on 25 November 2010

John is a board member of Catholic Health Australia and Catholic Professional Standards Ltd; Chair of Mary MacKillop Today and the McKell Institute; 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 was made a Member of the Order of Australia in the Australia Day Honours List in 2015, for significant service to the community through leadership positions within health organisations, tertiary education and the Parliament of NSW.

John worked as a teacher for 16 years until his election to Parliament in 1995 – 2008. He served 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, he has served as Chancellor of the University of New England in 2013 and 2014.

THE HON. MICHAEL ROCHE
AM – DEPUTY CHAIR, BA (ACCOUNTING),
FCPA, MACS

Appointed to the board on 23 April 2008
and elected Deputy Chair on 10 June 2010.
Retired 22 November 2017

Michael (Mick) is a consultant working with government agencies and companies that deal with government on a range of strategic management issues. He is on a number of public sector governance boards, a Director of Maritime Australia Limited. Mick was Under Secretary Defence Materiel in the Department of Defence and has worked at senior levels in Customs, and the departments of Health, Prime Minister and Cabinet, and Immigration and Finance.

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

Appointed to the board on
1 February 2016

Jim has over 30 years’ experience in planning, leading and implementing change in health care, justice and human services.

Jim is Chair of the Australian Red Cross Blood Service, Chair of the Australian Digital Health Agency, Chair of Clevertar Pty Ltd, a Director of the Cancer Council SA and Deputy Chair of the Independent Hospital Pricing Authority. Prior to Jim’s current appointments he was a partner at EY Australia (formerly Ernst & Young), where he was Global Health Leader; Government and Public Sector Leader; and Lead Partner in Health and Health Care. He has also been Chief Executive Officer of the South Australian departments of Health and Human Services, as well as the Women’s and Children’s Hospital, Adelaide; and Deputy Chief Executive Officer of the Department of Justice, South Australia.

Jim was made a Member of the Order of Australia 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.

ANNETTE CARRUTHERS
MBBS (HONS) FRACGP FAICD
GRADDIPAPPFIN

Appointed to the board on 22 November
2017

Annette is an experienced non-executive director in financial services, health, infrastructure and aged care. Current appointments include President of Multiple Sclerosis Australia, and Director of National Youth Mental Health Foundation (Headspace), Catercare Pty Ltd, and Multiple Sclerosis Research Australia. She has qualifications in finance, superannuation and corporate governance and is also a part-time member of the Superannuation Complaints Tribunal.

Previous directorships include ASX listed nib Holdings, AMP Capital’s Aged Care Investment Trust, Hunter Infrastructure and Investment Advisory board, National Heart Foundation (NSW Division), Hunter Medicare Local, Hunter Area Health Service and the NSW Board of the Medical Board of Australia.

Medically trained, Annette continues to work part-time as a general practitioner. Her medical interests include clinical risk management and quality improvement in health services. She is a member of the Medical Experts Committee of Avant Mutual Ltd, a leading medical indemnity insurer.

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 Shadforths 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.

REBECCA DAVIES
BEC, LLB (HONS), FAICD

Appointed to the board on
25 September 2008.
Retired 22 November 2017

Rebecca is a director of a range of companies in the financial services, health and music fields and is a facilitator for the Australian Institute of Company Directors. In 2009, she retired from Freehills, where she was a partner specialising in litigation. Rebecca is a member of the Australian Health Ethics Committee and Community & Consumer Group, a director of Catholic Healthcare, Transparency International Australia and JDRC Australia.

LUCILLE HALLORAN
Appointed to the board on
23 November 2016

Lucille is the Oceania Government & Public Sector Leader and Commonwealth Government Leader for EY.

She was born in Canada and brings a unique blend of Australian and Canadian public sector experience in policy reform and citizen-centric service delivery in the disability, employment, income support, pensions, education, human services and health sectors.

She is also passionate about women in leadership, systems thinking and innovation.

Lucille has worked extensively with the Commonwealth, state and local governments.

ASSOCIATE PROFESSOR RICHARD
MATTHEWS, AM, MBBS

Appointed to the board on 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. Richard is a Director of Neuroscience Research Australia Limited and also sits on the advisory board of the Centre for Healthy Brain Ageing. Richard was made a Member of the Order of Australia 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.

PROFESSOR KATHERINE MCGRATH
MBBS, 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 and public and private health, as well as holding 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. She was a founding commissioner on 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.

PATRICK O’SULLIVAN
CA, MAICD

Appointed to the board on
27 March 2013 and elected Deputy Chair
on 25 October 2017.

Patrick (Pat) brings more than 30 years of international commercial and business management experience. He was the Chief Operating Officer and Finance Director of Publishing and Broadcasting Limited (PBL) Media and Nine Entertainment Co. During this appointment, he was also Chairman of Ninemsn. Before joining PBL, Pat was Chief Financial Officer at Optus Pty Ltd, with responsibility for financial affairs, including corporate finance, taxation, treasury, risk management, procurement and property. He is Chairman of HealthEngine and a Director of Carsales and Marley Spoon AG.

LUCILLE SCOMAZZON
LLB (HONS 1) BA GAICD

Appointed to the board on 22 November
2017

Lucille is a partner and the national healthcare sector leader at Maddocks. She advises clients across the health care spectrum with a focus on hospitals and health services, residential aged care, retirement living, disability and home based care services.

Having advised on a number of sector transforming transactions, involving the consolidation and development of health care assets, Lucille acts for a range of organisations including institutional investors, developers and operators of healthcare assets. With expertise advising on health care regulatory and funding frameworks, Lucille is interested in exploring opportunities to facilitate collaboration and enable the provision of integrated healthcare services, while managing risk in a highly regulated environment.

Lucille previously served on the board of St Mary MacKillop Care (NSW) and on a human research ethics committee.

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 nearly 16 years.

Calvary National Executive Leadership Team



MARTIN BOWLES PSM
National Chief Executive Officer

Martin has a wealth of experience gained during his almost 40 years as a senior public servant. Prior to joining Calvary on 1 December 2018, Martin worked in both the Queensland and New South Wales Governments before moving to the Commonwealth. For the last 11 years, he was Deputy Secretary in the Departments of Defence and then Climate Change, and the Secretary of the Department of Immigration and Border Protection, followed by his appointment as Secretary of Health for the past three years. Martin was awarded the Public Service Medal (PSM) in 2012, and has played an integral role in changes across the health sector including the significant recent reforms to government funding for public hospitals in Australia, to generate greater efficiency, safety and quality in our hospital system.



PROFESSOR CHRIS BAGGOLEY AO
Chief Medical Advisor

As a former Australian Government Chief Medical Officer, Chris's priorities are a review of Calvary's clinical engagement strategy and the formation of a Clinical Council to engage medical and clinical stakeholders to help Calvary navigate through the changes occurring in health care.

Chris has been the Chief Executive for the Australian Commission on Safety and Quality in Health Care, Chief Medical Officer for the South Australian Department of Health and Director of Emergency Departments at Flinders Medical Centre, Ashford Community Hospital and the Royal Adelaide Hospital. He was President of the Australasian College for Emergency Medicine and Chair of the Committee of Presidents of Medical Colleges.



MATT HANRAHAN
Deputy National CEO and Director of Strategy and Service Development

Matt is responsible for providing strategic leadership and overseeing the integrated service development for Calvary's hospitals, and Aged and Community Care Services.

Matt commenced with Calvary in August 2016, bringing with him 26 years of experience across public and private health care administration. Matt has held various executive leadership positions at General Practice NSW Ltd and more recently as Chief Executive of Central Coast Local Health District. Matt has led several key initiatives including developing a patient-centric care model within the Central Coast region and leading the \$568m redevelopment of both Gosford and Wyong Hospitals.



KRIS SALISBURY
Acting National Director, Clinical Governance

Kris has a broad range of experience in management and health executive roles. She has held management roles in the health sector over the past two decades, most recently as National Manager Clinical Services and prior to that, CEO of Calvary Rehabilitation Hospital. In her current role, Kris is responsible for clinical governance across Calvary's aged, community, acute public and private hospitals in six Australian States and Territories. Kris holds a Bachelor in Health Science (Nursing) and Masters in Business Administration.



MARK GREEN
National Director of Mission

Mark has a strong passion for social justice. Prior to joining Calvary, he was the Head of Mission and People at Caritas. 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. He is a member of the UNSW Human Research Ethics Committee.



JUDITH DAY
National Chief Finance Officer

Judith is responsible for the leadership of Calvary's finance services. Judith has a 23 year career in health care, both in the private and public sectors. Judith was the CFO/CIO for 11 years at Cabrini Health and for the last two years, was also Deputy Chief Executive. Her prior experience includes Director of Finance and Administration at St Andrew's Hospital in Adelaide, and working in various roles at Faulding Healthcare, Flinders Medical Centre and Ashford Community Hospital. Judith is a Certified Practising Accountant, has a Master of Business Administration and is a Graduate of the Australian Institute of Company Directors.



BRYAN MCLOUGHLIN
National Director, Aged and Community Care Services

Bryan was appointed National Director, Aged and Community Care Services on 3 September 2018. Bryan was previously Director Retirement Communities from 1 July 2015, after demonstrating strong leadership skills in his role as Operations Manager. Prior to joining Calvary, Bryan had a number of roles including CEO for Connectability Australia, and Chief Operations Officer and Acting CEO for Hunter Medicare Local. He has also held senior roles with Uniting Care Ageing and the Hunter Area Health Service.



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.



BRENDA AINSWORTH
National Director, Hospitals

Brenda is responsible for the Calvary's 11 private and four public hospitals. Over the past nine years Brenda has focused on health system performance, clinical service redesign and the development of innovative models of care. Her previous positions have included Director, Health Advisory at Price Waterhouse Coopers, Executive Director, Health Performance Improvement, Innovation & Redesign for ACT Health and Director of Major Projects, Nepean Hospital. She was the winner of the 2010 Telstra Business Women's Award in the ACT for Innovation. Brenda holds a Bachelor in Health Science (Nursing) and a Masters in Management.



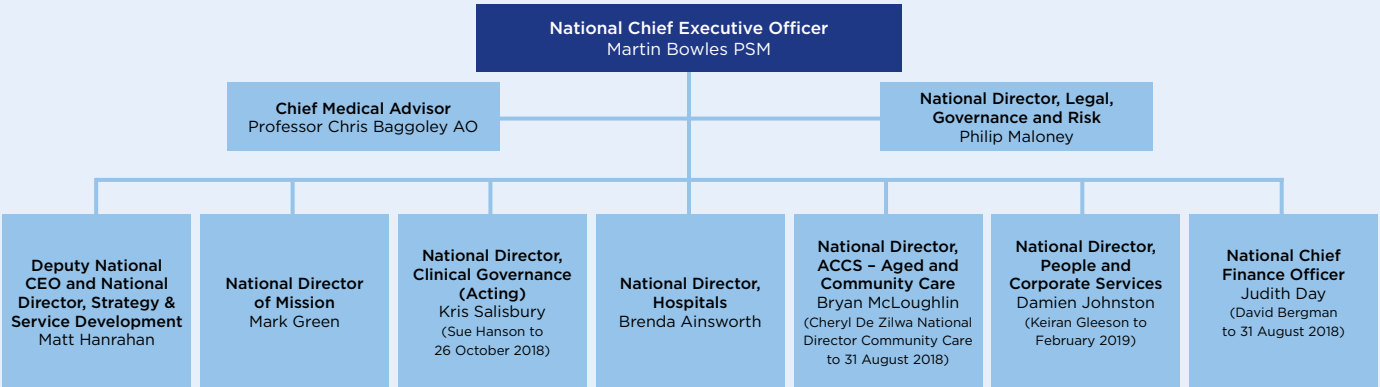
DAMIEN JOHNSTON
National Director, People and Corporate Services

Damien is responsible for leading Calvary's people and service engagement strategies and operational improvement programs; to help steer Calvary into an expanding and dynamic health care environment.

Damien is an accomplished people leader, bringing more than 15 years of extensive experience in health care executive positions in international and ASX-listed organisations, as well as the public sector.

For the past five years, Damien held the position of Chief Operating Officer with International SOS, where he led a large subsidiary of multi-site and regional operations, as well as corporate support services. He has also held senior management positions with Sonic Health Plus, Medibank, NSW RailCorp and NSW Corrective Services. With a solid background as an allied health professional, Damien also holds post-graduate qualifications including a Master of Science specialising in Exercise & Sport Science, along with an MBA.

ORGANISATION CHART AS AT FEBRUARY 2019



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

HOSPITALS**AUSTRALIAN CAPITAL TERRITORY****Calvary Public Hospital Bruce**

5 Mary Potter Circuit
Bruce ACT 2617
Ph: 02 6201 6111
www.calvary-act.com.au

Calvary Bruce Private Hospital

30 Mary Potter Circuit
Bruce ACT 2617
Ph: 02 6245 3100
www.calvaryactprivate.org.au

Calvary John James Hospital

173 Strickland Crescent
Deakin ACT 2600
Ph: 02 6281 8100
www.calvaryjohnjames.com.au

SOUTH AUSTRALIA**Calvary Health Care South Australia
Shared Services**

207 Wakefield Street
Adelaide SA 5000
Hospitals Ph: 08 405 3506
Community Care Ph: 08 8271 7212
www.calvarysa.org.au

Calvary North Adelaide Hospital

89 Strangways Terrace
North Adelaide SA 5006
Ph: 08 8239 9100
www.calvarynorthadelaide.org.au

Calvary Wakefield Hospital

300 Wakefield Street
Adelaide SA 5000
Ph: 08 8405 3333
www.calvarywakefield.org.au

Calvary Rehabilitation Hospital

18 North East Road
Walkerville SA 5081
Ph: 08 8168 5700
www.calvaryrehabsa.org.au

Calvary Central Districts Hospital

25-37 Jarvis Road
Elizabeth Vale SA 5112
Ph: 08 8250 4111
www.calvarycentraldistricts.org.au

TASMANIA**Calvary Lenah Valley Hospital**

49 Augusta Road
Lenah Valley TAS 7008
Ph: 03 6278 5333
www.calvarylenahvalley.org.au

Calvary St John's Hospital

30 Cascade Road
South Hobart TAS 7004
Ph: 03 6223 7444
www.calvarystjohns.org.au

Calvary St Luke's Hospital

24 Lyttleton Street
Launceston TAS 7250
Ph: 03 6335 3333
www.calvarystlukes.org.au

Calvary St Vincent's Hospital

5 Frederick Street
Launceston TAS 7250
Ph: 03 6332 4999
www.calvarystvincents.org.au

NEW SOUTH WALES**Calvary Riverina Hospital**

26-36 Hardy Avenue
Wagga Wagga NSW 2650
Ph: 02 6925 3055
www.calvaryriverina.org.au

Calvary Mater Newcastle

Edith Street
Waratah NSW 2298
Ph: 02 4921 1211
www.calvarymater.org.au

Calvary Health Care Kogarah

91-111 Rocky Point Road
Kogarah NSW 2217
Ph: 02 9553 3111
www.calvarykogarah.org.au

VICTORIA**Calvary Health Care Bethlehem**

152 Como Parade West
Parkdale VIC 3195
Ph: 03 9596 2853
www.calvarybethlehem.org.au

CALVARY RETIREMENT COMMUNITIES**Calvary Retirement Communities
Shared Services**

Suite 5, Level 1, 342-344 Main Road
Cardiff NSW 2285
Ph: 02 4954 1800 / 1800 222 000
www.calvaryretirement.org.au

AUSTRALIAN CAPITAL TERRITORY**Calvary Haydon Retirement Community**

2 Jaeger Circuit
Bruce ACT 2617
Ph: 02 6264 7400
www.calvaryhaydon.org.au

SOUTH AUSTRALIA**Calvary Flora McDonald Retirement
Community**

206 Sir Donald Bradman Drive
Cowandilla SA 5033
Ph: 08 8159 7000
www.calvaryfloramcdonald.org.au

Calvary St Catherine's Retirement Community

6-12 Coneybeer Street
Berri SA 5343
Ph: 08 8582 1444
www.calvarystcatherines.org.au

NEW SOUTH WALES**Calvary Ryde Retirement Community**

678 Victoria Road
Ryde NSW 2112
Ph: 02 8878 1400
www.calvaryryde.org.au

Hunter Regional Office

240 Maitland Road
Sandgate NSW 2304
Ph: 02 4967 0670

Calvary Cessnock Retirement Community

19 Wine Country Drive
Cessnock NSW 2325
Ph: 02 4993 9000
www.calvarycessnock.org.au

Calvary St Joseph's Retirement Community

240 Maitland Road
Sandgate NSW 2304
Ph: 02 4967 0600
www.stjosephshome.org.au

Calvary Cooinda Retirement Community

42 Bathurst Street
Singleton NSW 2330
Ph: 02 6572 1537
www.cooindaagedcare.org.au

Calvary Mt Carmel Retirement Community

9 Dwyer Street
Maitland NSW 2320
Ph: 02 4932 0350
www.mtcarmelvillage.org.au

Calvary Muswellbrook Retirement Community

15 Cassidy Avenue
Muswellbrook NSW 2333
Ph: 02 6542 4800
www.mtprovidencevillage.org.au

Calvary Nazareth Retirement Community

1 Vincent Street
Belmont North NSW 2280
Ph: 02 4947 0047
www.nazarethvillage.org.au

Calvary St Francis Retirement Community

Gleeson Crescent
Eleebana NSW 2282
Ph: 02 4942 7477
www.stfrancisvillage.org.au

**Calvary St Martin de Porres Retirement
Community**

26 Lorna Street
Waratah, NSW 2298
Ph: 02 4968 2244
www.stmartindeporresagedcare.org.au

Calvary St Paul's Retirement Community

54 River Street
Cundletown NSW 2430
Ph: 02 6553 9219
www.stpaulsagedcare.org.au

Calvary Tanilba Shores Retirement Community

71-74 Tanilba Avenue
Tanilba Bay NSW 2319
Ph: 02 4984 5922
www.tanilbashoresvillage.org.au

Calvary Ephesus Retirement Community

88 Dickson Street
Lambton NSW 2299
Ph: 1800 222 000
www.ephesusilu.org.au

Calvary St Luke's Retirement Community

204-206 Darby Street
Cooks Hill NSW 2300
Ph: 1800 222 000
www.stlukesilu.org.au

Calvary Tours Terrace Retirement Community

242 Lawson Street
Hamilton South NSW 2303
Ph: 1800 222 000
www.toursterraceilu.org.au

CALVARY COMMUNITY CARE**Shared Services**

551 Blackburn Road
Mt Waverley VIC 3149
Ph: 03 9271 7333 / 1300 660 022
www.calvarycommunitycare.org.au

Operates in Victoria, New South Wales, ACT,
South Australia, Tasmania, Northern Territory
and Tiwi Islands