

THE FONT

THE NEWSLETTER OF ST VINCENT'S HOSPITAL MELBOURNE



ST VINCENT'S
HOSPITAL
MELBOURNE

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MESSAGE FROM THE CEO

Welcome to the first edition of *the Font* for 2015.

New years are all about new starts, and that is especially true for the 200 medical interns, graduate nurses and allied health graduates who are starting their careers at St Vincent's. We have an enviable reputation for nurturing the talents and skills of our clinical staff, a reputation that attracts the best and brightest graduates to St Vincent's. We are delighted to welcome them to the St Vincent's community. In this edition of the Font we profile two new starters, graduate nurse Emily Baker and intern Dr Matthew Rees, as they take the first steps on their professional journey.

St Vincent's has an ambitious and exciting agenda for the year ahead – in many respects, the work we do over the next 12 months will build the foundations for St Vincent's future sustainability, prosperity and leadership in public healthcare.

We will be working closely with the Victorian Government to craft a new long-term Health Services Agreement. It's a once-in-a-generation opportunity to shape our future role in public healthcare – the current 25-year agreement, signed in 1992, made it possible to build the 11-storey hospital which is at the heart of the Fitzroy campus.

This year we will also be seeking new opportunities to be a voice for the voiceless. Our experience in caring for people at the margins of society means St Vincent's has a valuable contribution to make on issues such as the rise of ice as a devastating drug of addiction, and the continued toll of alcohol-related health conditions and violence.

The coming year is a pivotal one for St Vincent's – it will no doubt have its share of challenges, but our opportunities are significant and exciting and I have a strong sense of optimism for what we will achieve, and what we will contribute, in 2015.

I hope you enjoy this edition of *the Font*.

Ben Fielding
Chief Executive Officer
St Vincent's Hospital Melbourne

OUR NEW INTERNS





CARING, A FAMILY AFFAIR

A love of literature, drama and music had Emily Baker setting her sights on a career in the arts, but a part-time receptionist job at a dermatology clinic changed all that.

After a year of studying teaching and arts, Emily transferred to a Bachelor of Nursing, and hasn't looked back – she is now one of 104 graduate nurses who have started their professional careers at St Vincent's over the past month.

'When I started at the clinic, I loved the fast pace but mostly it was the people. I was working with a lot of nurses and former nurses and they had a great sense of camaraderie,' says Emily.

Emily would often see patients over a period of weeks and months and witness the change in them.

'Particularly in psoriasis patients you can see some amazing improvements, and it's this whole improvement from a mental and psychological point of view, as well as the physical. It makes you go 'this is why we do the job!'

Emily's career epiphany was at the suburban clinic of her father, St Vincent's Director of Dermatology Associate Professor Chris Baker.

'I've had a long connection with St Vincent's, starting here as a student myself, and it's really great to see one of my children come through the same system,' says A/Prof Baker. 'Once you become part of the St Vincent's family you never lose that connection. It's such a great place to work – St Vincent's has high standards, a great ethic and it's an institution that cares about its staff. From my own experience in hospitals here and overseas, St Vincent's nurses are equal to the best in the world.'

'My dad's been so passionate about his job,' says Emily. 'The most important piece of advice he's given to me is to put yourself in the shoes of your patients. You might be having a bad day, but you're not there for you, you're there for them, and they're in a vulnerable state and need your care.'

St Vincent's Graduate Nurse Program is consistently the state's most sought after and competitive – almost 1,000 graduates applied for the 104 places in the 2015 program. During her degree Emily had three clinical placements at St Vincent's.

'St Vincent's was absolutely my number one choice, and when you go into the interview knowing that you really want it, it makes it that much easier to sell yourself.'

'When you're choosing where you want to go, reputation is obviously a big thing, but it's also about word of mouth and what I heard about the St Vincent's grad program was that there was great support and educational opportunities. And during my placements the nurses I worked with had so much knowledge, and were so competent, and you could see that the patients felt well cared for.'



MEET TOP 2015 INTERN DR MATTHEW REES

Above: New intern Dr Matthew Rees will spend his first rotation in St Vincent's busy emergency department.

St Vincent's welcomed 61 newly-minted doctors to its medical community in January. Among the new interns is St Vincent's Clinical School alumnus Dr Matthew Rees.

Dr Rees was the top-performing student in the first class to graduate from the University of Melbourne's new Doctor of Medicine program, an achievement he describes as a great honour. He was in good company, with 16 of the top 60 graduates coming from St Vincent's Clinical School.

From the Clinical School facilities, to the staff, location and his fellow students, Dr Rees can't speak highly enough of his experience and it made St Vincent's a natural first choice when it came to intern programs.

'I was aware how well St Vincent's Clinical School did academically, and from day one we got to meet senior consultants and were able to develop really good relationships with them.'

In particular, Dr Rees cites Clinical School surgical mentor Mr Naveed Alam and Professor Michael Henderson as important influences on his education and development, and he remembers a number of inspiring speeches from Professor Peter Choong.

Over the coming year, each intern will do five rotations at St Vincent's, with one placement at a regional hospital. Dr Rees has started in the emergency department, with rotations in general medicine, respiratory medicine, cardiothoracic and general surgery still to come.

'Starting in ED is great. Everyone is very welcoming and there's a lot of support from people like Dr Neil Cunningham, who had a lot to do with my teaching as a student and now as an intern in ED.'

As Dr Rees and his fellow interns are taking the next steps on their professional journeys, the next crop of Clinical School students is beginning theirs. Does he have any advice?

'Everyone who goes into medicine is motivated, and very results-oriented, but if you focus only on marks and rankings you miss out on a bit of the experience. The big thing is to enjoy the study – if you enjoy learning you're halfway there.'

He says it's also vital to have other outlets. For Dr Rees that meant cycling and tennis, playing piano and occasional club DJ-ing, not to mention table tennis in the Clinical School common room.

'Starting in ED is great. Everyone is very welcoming and there's a lot of support from people like Dr Neil Cunningham, who had a lot to do with my teaching as a student and now as an intern in ED.'

'I think the natural tendency for medical students is to talk medicine non-stop, which is good, but sometimes it's nice to switch off and have a hit instead.'

STORIES OF MIGRATION – CULTURAL DIVERSITY WEEK 2015

There's a strong reminder of Australia's migration history among St Vincent's patient population. The age and ethnic diversity of our patients reflects the global political and economic upheavals that drove people to leave their homeland and become Australians.

In a healthcare setting, this diversity can present a challenge for communication, understanding, and culturally appropriate care.

'Stories of Migration' is the theme for Cultural Diversity Week, to be held across the St Vincent's campus from 14 – 22 March.

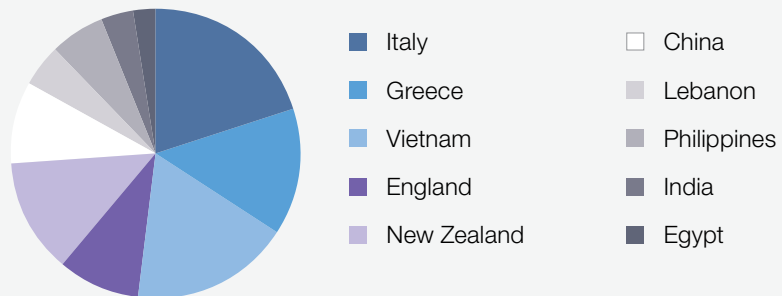
Cultural Diversity Program Coordinator Monita Mascitti-Meuter believes Cultural Diversity Week is a time for collaboration, compassion, celebration of difference and understanding.

'Over half of our patient population reflects a culture, practises a religion or speaks a language different from their health care professional, so it's no surprise that Cultural Diversity Week is such an important celebration here at St Vincent's.'

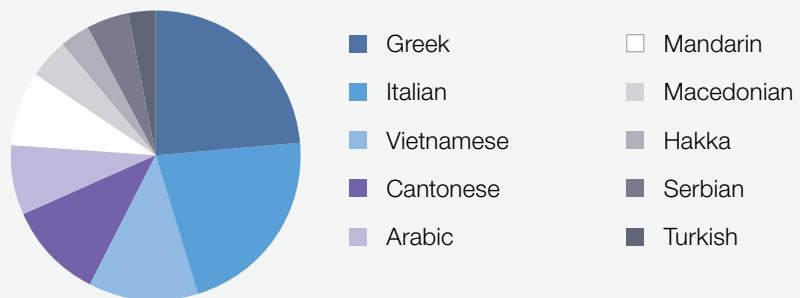
'We are committed to supporting staff by providing a greater awareness of culturally responsive care by encouraging them to consider the risks involved when failing to request an interpreter and the importance of regular Cultural Diversity Training. Over 1,000 staff members undertake this valuable training each year and it can make a real difference.'

PATIENTS AT ST VINCENT'S

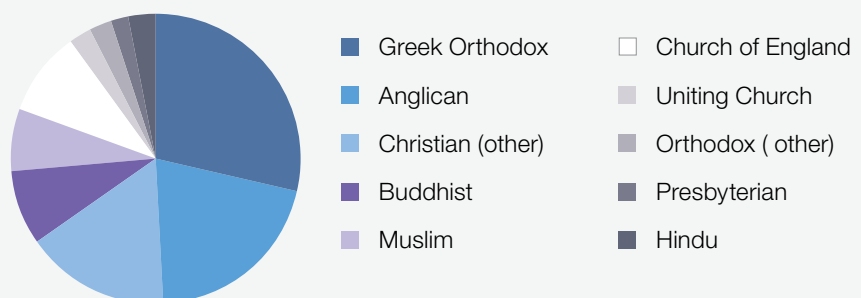
TOP TEN COUNTRIES OF BIRTH (OTHER THAN AUSTRALIA) 2013-14



TOP TEN LANGUAGES (OTHER THAN ENGLISH) 2013-14



TOP TEN RELIGIONS (OTHER THAN ROMAN CATHOLIC) 2013-14



CULTURAL DIVERSITY WEEK

The Cultural Diversity Committee would like to invite you to celebrate Cultural Diversity Week which will be held from 14 – 22 March. Cultural Diversity Week provides an opportunity for all Victorians to celebrate our cultural, linguistic and religious diversity. Here are a few easy ways for you to celebrate Cultural Diversity Week:

MARY MEETS MOHAMMAD MOVIE SCREENING

Wednesday, March 18
12.30pm – 1.50pm

Eric Seal Room, Mental Health
RSVP to mission@svha.org.au

TAI CHI CLASS (FREE!)

Thursday March 19
2pm – 2.30pm – Session 1

Thursday March 19
2.30pm – 3pm – Session 2

Courtyard in front of IPS
Participation by RSVP only –
places are limited
Email: mission@svha.org.au

A TASTE OF HARMONY LUNCH: ORGANISE ONE FOR YOUR TEAM!

Any time throughout the week

Across all campuses

For more info on how to register and organise a Taste of Harmony lunch visit www.tasteofharmony.org.au or email mission@svha.org.au

CULTURAL DIVERSITY INTRANET QUIZ

Located on the 'events page' of the cultural diversity website

Awesome prizes to be won

If you are planning something separately and would like to promote it throughout the organisation, please contact the Cultural Diversity Coordinator Monita Mascitti-Meuter for assistance by Friday, 27 February.



For five years, Vietnamese interpreter Kim Luu Thi Nguyen has helped patients at St Vincent's; being part of their private conversation, and witness to their fears and tears.

Of the many who remain in her memory, Kim recalls Anh Thi (name changed) a Vietnamese speaking prisoner from Dame Phyllis Frost Centre transferred to St Augustine's Ward at St Vincent's in 2013. Anh Thi was the only female on the ward and spoke very little English. She was culturally, physically and spiritually isolated. Anh Thi's experience is a good example of the way St Vincent's staff look after a patients' spiritual needs.

Anh Thi spoke, through Kim, about the importance of her Buddhist faith and her love for her country. Pastoral Care arranged for a Vietnamese Buddhist visitor to see her regularly. After the first visit Anh Thi waved goodbye through the windows until the visitor left the unit. This was a clear expression of her gratitude to someone from her own culture, language and spirituality.

In addition, a Vietnamese seminarian who was on pastoral placement at the time of her admission was also able to support Anh Thi and converse with her in Vietnamese. The Pastoral Practitioner continued to take an interest in Anh Thi's situation, listening to her personal story through the Buddhist chaplain. St Augustine's and Pastoral Care were able to advocate on her behalf and share spiritual resources with staff and meet her needs.

As Anh Thi's need for support increased during her final journey, she appeared to feel well connected and comforted as she dealt with her fragile circumstances. Pastoral Services contacted a Vietnamese Buddhist monk to visit and provide further spiritual support close to the time of Anh Thi's death.

Anh Thi's dying wish was to have her ashes returned to Vietnam and to be buried in a Buddhist temple. This was honoured and fulfilled. This spiritual story reflects that of many who come to St Vincent's. Cultural, physical and spiritual support is pivotal to providing culturally sensitive care to our patients.

DESIRE TO MAKE A DIFFERENCE LEADS TO AWARD FOR DR THAI HONG

Gastroenterology is not the most glamorous of the medical specialties – but in part, that’s what made it attractive to Thai Hong when he was a medical student.

‘In choosing my specialty, I wanted to serve an area of medicine that is often neglected, hence my decision to choose gastroenterology,’ Dr Hong says. ‘Some of the significant gastroenterological diseases, such as hepatitis B and hepatitis C, are endemic among ethnic communities and those with alcohol addiction.’

Now a Gastroenterologist and Clinical Research Fellow, Dr Hong is leading a multi-centre study reviewing rates of liver cancer in Victoria. It’s the first population-based study of liver cancer in Australia.

‘We know that cancer registries tell us that instances of liver cancer are increasing,’ Dr Hong explains. ‘We are seeing an increasing number of patients from countries with endemic rates of Hepatitis B. On top of this, many people with Hepatitis C have now had the condition for 30 to 40 years and are starting to develop cirrhosis, a precursor to liver cancer.’

Despite evidence of an increase in liver cancer, Dr Hong and his team hypothesised that the true rate of liver cancer was higher still. Results from the study have indeed shown that the incidence of liver cancer is significantly under-reported by cancer registries.

‘We looked at all of the data we could compile from all tertiary hospitals across Melbourne and found that there were a higher number of cancers than the cancer registry had reported.’

‘Traditionally, cancer has been diagnosed by histology (tissue biopsy); however most are now done purely through imaging, which contributes to underreporting of the disease.’

Getting a true measure of the rate of liver cancer across Victoria is important to understand the extent of the problem, so that government can direct relevant resources to at-risk populations – in this case high density areas of certain ethnic populations.

‘With effective screening – six monthly ultrasound screening targeting an at-risk population – we can identify and treat possible liver cancer early.’

Dr Hong was recognised at Australian Gastroenterology Week (AGW) on the Gold Coast in October last year. He won Young Investigator of the Year, for making a significant contribution to clinical or laboratory based research in the field of gastroenterology.

As a result of the team’s findings, the Victorian Cancer Registry has changed its policy on the diagnosis of liver cancer.



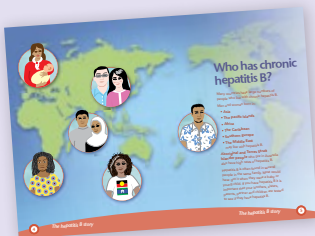
Dr Hong with Prof Alex Thompson, Director of Gastroenterology at St Vincent’s.

THE HEPATITIS B STORY

St Vincent's Gastroenterology department, together with Inner North West Melbourne Medicare Local, has produced an education resource designed for health workers to use in discussion with chronic hepatitis B patients who have limited health literacy.

'The Hepatitis B story' describes care and management using informative illustrations alongside easy English text, encouraging clients to make informed choices and engage in their healthcare. The resource is also available in Vietnamese, Mandarin, Cantonese and Karen.

The teaching tool is available as a printable version and as a video clip in all five languages from the St Vincent's Hospital website www.svhm.org.au



STRONG START FOR ST VINCENT'S INNOVATION PROGRAM

St Vincent's innovation program, CATALYST, is now supporting seven outstanding ideas to improve the way we deliver care to our community.

St Vincent's innovation program, CATALYST, is now supporting seven outstanding ideas to improve the way we deliver care to our community.

Initiatives to receive funding since the program launched in July 2014 have included:

- a web-based guide to interventions for consumers with dual diagnosis
- a translation app to facilitate communication between clinicians and Culturally And Linguistically Diverse residents in our aged care facilities
- a tool to help home dialysis patients with self-management that also alerts clinicians if intervention is required
- developing new software to accurately measure and record the arm movements of patients after stroke
- using colour contrast in bathrooms and toilets to improve safety for patients with vision or cognitive impairment
- a consumer-led documentary showcasing our work at St Paul's (a ward at Port Phillip Prison).

CATALYST was created to give staff the opportunity to turn innovative ideas into practice. Anyone who identifies a new way of working that could positively impact patients, is encouraged to apply for support.

'We've had a tremendous response so far, with many impressive ideas put forward,' explains CEO, Ben Fielding. 'Not all proposals have met the criteria for CATALYST, but in most cases we've been able to explore those suggestions through other channels. The true impact of CATALYST is far greater than those seven projects currently underway.'

'A great example is a proposal we received to automatically populate physiotherapy information into post-acute care referral forms,' he says. 'We discovered that this was a relatively simple change that could be implemented straight away without CATALYST support. It has already made an impact, freeing up valuable time for therapists to spend with their patients. And all it took was for someone to put up their hand to say "I've got an idea".'



PATIENT CARE AT THE HEART OF THE MATTER

The onset of Julie Lauterbach's years of heart trouble was abrupt. Julie suffered a heart attack not long after being in a serious car crash in 1999. A triage nurse at the time, she collapsed mid-theatre. That was the start of a merry-go-round of GP and hospital visits, and years of compounding medical conditions. "I was eventually confined to my lounge room; unable to move, work or sleep from the pain," says Julie.

In January this year her heart failure symptoms worsened, and Julie arrived by ambulance at St Vincent's Emergency Department. It's estimated 350,000 Australians have chronic heart failure, many requiring admission to hospital. There's also a high risk of re-admission, as patients find it difficult to remain well, without adequate medical and community support, and education about how to maintain heart health after being discharged.

In October 2014, St Vincent's launched a new program aimed at reducing the length of stay and readmission rates of these patients. Ten per-cent of St Vincent's heart failure patients are re-admitted within

a month. 'Although this sits comfortably below the state's average, St Vincent's continues to strive for better prevention, diagnosis and treatment for patients,' says Deputy Director of Cardiology, Associate Professor David Prior.

The pilot program has a specialist nurse to provide heart failure patients with ward and clinic-based support and education, as well as referrals for community-based health and well-being programs. Julie is among the first of St Vincent's heart failure patients to experience the new program, which involves being visited by the specialist heart health nurse on the ward and being followed up in clinic after leaving hospital.

"I like (her), she cares about me, she is realistic about what I can achieve, and when I say I'm going to try and put changes in place, I believe that she believes me. And that's important."

With years of expertise in chronic disease management, Christin Bird is one of St Vincent's dedicated specialist nurses. "I review patients on the ward, sometimes several times during their admission, and follow them up 7-10 days after they are discharged from hospital.

They come back to see me free of charge at our specialist clinic, and it is here that I ensure each person has fully understood how to monitor their condition at home to prevent re-admission to hospital. This could involve anything from how to monitor and assess their fluid intake, response to medication, or referrals to other services as required," says Christin.

Christin works alongside Cardiac Nurse Consultant Rhonda Sanders, "Evidence shows patients are less likely to remember the self-care information that was given to them in hospital, due to factors such as stress and illness. Patients also might not meet the strict criteria required for a community-based nurse to visit their home," says Rhonda. "Our program addresses these gaps."

The Improving Heart Failure Care Program is available to all patients with heart failure admitted to any area of the hospital. Clinical staff are encouraged to contact Christin Bird or Rhonda Sanders to refer patients to the program and patients are welcome to inquire about the program through Cardiology or their General Medicine Unit.

FAREWELL DRUIDS

A century ago, amid much pomp and ceremony, Australia's then Governor General, Sir Ronald Munro-Ferguson officially opened St Vincent's Druids' Wing, on Victoria Parade. Melbourne's major metropolitan newspaper of the time, The Argus, noted the Lord Mayor of Melbourne among the many dignitaries gathered to observe the Archbishop of Melbourne laying the foundation stone.

The Druids' Wing was St Vincent's first purpose-built outpatients department seeing 19,000 patients in its first year. It was also a home for nurses-in-training on the upper floors and housed more than 4,000 nurses over the years. This live-in apprenticeship system was an advanced and successful scheme for nursing education at the time.

Some of the nurses who lived and trained in Druids Wing are still working at St Vincent's today. Nurse Unit Manager Patricia Noonan and Urology Nurse Consultant Genevieve Duggan have fond memories of their time in the Druids' Wing in the 1970's, just before the tertiary system took over in the 1980's, and the model of on-site nursing accommodation drew to a close.

'We would gather in the tea room for fruit toast and a debrief. Some of us were as young as 18, so it was really beneficial for us to share our experiences from the ward like that. Fellow students became like sisters, and of course many of us have remained lifelong friends,' says Patricia, glancing at Genevieve with a smile.

Genevieve recalls a slightly less public destination within the Druids' – the roof! It was a popular spot for nurses to sneak off to for fresh air and a sunbake. 'I'm really not sure if we were allowed to go up there, but we did because the rooms were very basic and most did not have much of a view from their window.'

But the busy clinics have long since moved on, and the sometimes rowdy upstairs nurses' home has fallen silent. The building was increasingly used as office space and was vacated for good around the time that St Vincent's Main Hospital Building opened in 1995.

At the centenary of its opening, St Vincent's prepares to farewell the old Wing, which will be removed piece by piece, starting this month. 'Heritage pieces, like the foundation stone, will be kept to mark its place in St Vincent's Hospital history', says St Vincent's Archives and Heritage Manager, Barbara Cytowicz.

The building will be replaced in the short term with a landscaped park to offer staff, patients and visitors access to an open space with trees and timber seating. In the longer term, the site will form part of the proposed Aikenhead Centre for Medical Discovery development which will be Australia's first biomedical engineering research and education centre.



St Vincent's nurses escape to the Druid's Wing roof to catch some sunshine, circa 1920s.



THE VALUE OF COMMUNITY INPUT

ST VINCENT'S COMMUNITY ADVISORY COMMITTEE (CAC)

Are you interested in playing an integral role in shaping patient experience across St Vincent's? Then you might consider joining the team and become a Community Advisory Committee member.

The Community Advisory Committee (CAC) is a key committee with an important role in shaping the future of consumer engagement and patient experience at St Vincent's.

The CAC advocates for patient centred care and assists the health service by portraying the patient and carer journey of care through their eyes. Consumers also provide feedback on health information to ensure that it is appropriate in language, font and layout to help consumers understand their condition and treatment options.

The committee meets every two months and has 11 consumer and community members who volunteer their time to provide advice on behalf of the community. The CAC is a key part of the hospitals' improvement process, with Executive staff giving updates at the meetings

and the Committee reporting back to the Chief Executive Officer and senior management.

Bronwyn Williams, the Chair of CAC says it's a rewarding experience, 'Ideally, volunteering should be a two-way street where both parties benefit. I am really pleased to have had the opportunity to enhance my knowledge of health issues and contribute to St Vincent's continuous improvement strategy at the same time.'

If you know of a consumer or carer who might be interested in joining the CAC, please contact the CAC Resource Officer, Denise Reynolds on 9231 2558.

'To me, membership of the CAC is a responsibility to provide an independent consumer's perspective. My input helps the organisation remain focused on the consumers and their needs. I feel very fortunate to see firsthand the approach of the organisation in generating and implementing initiatives that are patient, consumer and carer focused.'

– CAC member

ST VINCENT'S CONSUMER REGISTER

The St Vincent's Consumer Register is a list of interested consumers and carers who are available to be consulted for:

- Provision of feedback on patient information resources, e.g. brochures
- Participation in interviews/ focus groups/ discussion groups on particular issues
- Participation as a consumer representative on a working group/ project steering group

Members of the Consumer Register participate as much or as little as they wish, depending on their circumstances. For more information, contact Denise Reynolds on 9231 2558.



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