



Kooyong Precinct
Health Care Bethlehem

ANNUAL REPORT

2023–24

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Acknowledgement of land and traditional owners

Calvary Health Care Bethlehem acknowledges the traditional owners of this land, the Bunurong Peoples of the Kulin Nation. We pay our respects to their Elders, past, present and emerging.



Calvary is pleased to be recognised as a leader in gender equality by the Champions of Change Coalition.

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

Design by the lovely folks at **skoop**

About Bethlehem

Opened in 1941 as a private hospital offering maternity, medical and surgical services, Calvary Health Care Bethlehem (Calvary Bethlehem) is part of a national charitable Catholic not-for-profit organisation with more than 18,000 staff and volunteers.

Today, Calvary Bethlehem continues as a publicly funded health service, recognised as a specialist palliative care service and a state-wide provider of services for patients living with progressive neurological diseases. With a focus on wellness and active engagement in life, our highly skilled multidisciplinary teams work collaboratively with patients and their GP, community health, aged, disability and other health services across the State, to ensure that care is easily accessible and coordinated across – inpatient, centre-based and community-based settings.

Calvary Bethlehem provides direct patient care through a single point of access and working in partnership with other Victorian health services. Care is coordinated across the following settings depending on the needs of the patient and their family: centre-based clinics, day centre, home-based care and inpatient sub-acute beds; providing secondary consultation, telehealth consultations, 24-hour telephone support, after hours in-home support and integrated assistive technology to maximise patient independence.

About this report

This annual report outlines Calvary Health Care Bethlehem's operational and financial performance from 1 July 2023 to 30 June 2024. The functions of a public health service board are outlined in the the Health Services Act 1988 (Vic) (the Act) and include establishing, maintaining and monitoring the performance of systems to ensure the health service meets community needs.

Calvary Health Care Bethlehem is a metropolitan health service established under section 181 of the Act. Health Services Act 1988 (Vic). Specifically, metropolitan health services comprise denominational hospitals and public health services, as listed in Schedule 2 and Schedule 5, respectively, of the Health Services Act 1988. Schedule 2 applies to denominational hospitals, and Schedule 5 applies to public health services.

As a public health service established under section 181 of the Health Services Act 1988 (Vic), Calvary Health Care Bethlehem report to the following Ministers for the financial year 2023–24:

Minister for Health

The Hon Mary-Anne Thomas, 1 July 2023 to 30 June 2024

Minister for Ambulance Services

The Hon Gabrielle Williams, 1 July 2023 to 2 October 2023

The Hon Mary-Anne Thomas, 2 October 2023 to 30 June 2024

Message from the Chair and General Manager

Following a period of transition and change as we re-established our services at the new Calvary Kooyong facilities in January 2023; Calvary Bethlehem, as core service within the integrated precinct, has achieved a number of key milestones over the past year. As always, the Calvary Bethlehem team along with members of the broader precinct – staff and volunteers – adopt a collaborative approach and unwavering focus on the wellbeing of our patients, residents and their families. This ensures the delivery of high-quality, person-centred care, supported by a culture of continuous improvement remains at the forefront of their endeavours.

Underpinned by Calvary's mission of 'being for others', the vision for the integrated precinct is to enable the communities it serves to live well with autonomy, assisted by connected, flexible services. This vision leverages the strengths of Calvary Bethlehem, established through over 80 years of service to the community supported by partnerships across the Victorian health, community and aged care sectors. Our actions to bring to life the vision for the precinct are at all times aligned with the priority focus areas as articulated in the 2023–2024 Statement of Priorities as the key accountability agreement between the Victorian State Government and Calvary Bethlehem as a denominational, publicly funded health service.

It is with great pleasure we present our annual report outlining key initiatives undertaken and our achievements over the past year. In particular, we recognise the incredible work of the Calvary Bethlehem team in being awarded three years full accreditation after welcoming a team of assessors in September 2023. After relocating services in late January, Calvary Bethlehem met all 148 actions of the National Safety and Quality Health Service (NSQHS) Standards. This was a remarkable achievement that reflected the teams focus on strong clinical and corporate governance, ensuring uninterrupted continuation of our services throughout the transition period and clear attention on maintaining safe and high-quality services that support good clinical outcomes for our patients.

Thank You to Our People and Community

We extend our sincere appreciation and thanks to our Executive, Managers, and all our staff at Calvary Bethlehem and the wider Calvary Kooyong precinct. Your support and the work you do each day, your dedication, compassion and determination to provide the best care possible in the true Spirit of Calvary of "being for others", ensures we continue the mission of the



Shannon Thompson

General Manager,
Calvary Kooyong



Jim Birch, AM

Chair,
LCMHC Board

Sisters of the Little Company of Mary as Venerable Mary Potter intended. Delivering our services and developing innovative models of care would not be possible without our supporters, volunteers and partners.

As always, we are very fortunate to have a committed volunteer community, including members of our Community Advisory Council; our Human Research Ethics and Ethics committees; those who bring a consumer focus to key governance committees and working parties; and those who assist in a wide range of clinical and corporate areas of our service. We also acknowledge all those who partner with us in different ways: other health service providers, community organisations, universities and the philanthropic community.

Thanks to each one of you. Your dedication and generous contribution helps us to make a difference to the lives of those for whom we care. You are visible representatives of the communities we serve and vital to our mission.

Expectations for the future

The year ahead provides great opportunity to consolidate our progress to date and to implement key actions as documented within our 2024–2025 Strategic Quality Operational Plan. This plan provides direction for Calvary Bethlehem as we navigate the ongoing changes and challenges in the health and aged care sectors. The year ahead will see Calvary Bethlehem strengthen existing and develop new partnerships to support our vision and Calvary strategic priorities, as we work collaboratively with the sector to build the framework to establish Local Health Service Networks as part of the Victorian Health Services Plan.

Shannon Thompson
General Manager
Calvary Kooyong

Jim Birch, AM
Chair, LCMHC Board

Foreword from the Chair

Calvary Ministries Trustee Board

"It is not the greatness of what we do, but the way we perform it that will render us pleasing to God."

Venerable Mary Potter.



Hon Michael Lee

Chair

Calvary Ministries

Directors, ably led by Jim Birch, AM, the National Executive Leadership team led by Martin Bowles, AO, PSM and the staff and Executive team at Calvary Bethlehem led by Shannon Thompson, for their dedication, commitment and stewardship of our mission. Thank you for your actions, whether great or small, that every day make a difference in the lives of the communities we serve.

Hon Michael Lee

Chair, Calvary Ministries Trustee Board

After the successful transition of Calvary Bethlehem and establishment of new services as part of the Calvary Kooyong integrated precinct in 2023, it has been both an honour and a privilege to witness the incredible progress we have made in fulfilling our mission and advancing our vision at the precinct. The team's journey has been defined by a steadfast commitment to excellence, innovation, and unwavering dedication to the communities we serve.

Our vocation is to heal the sick, to care for the dying, to care for each other and, in all these ways, to be for others. This is our purpose and our mission – to serve by being for others; it is the very essence of who we are and what we strive to achieve every day. Guided by our values, Calvary Bethlehem continues to focus their efforts on delivering impactful services, fostering meaningful partnerships, and empowering staff and the people we serve to reach their fullest potential. The way in which the team works, enabled by the trust placed in their service by all stakeholders, continue to propel them towards remarkable achievements.

This year has been one of consolidation for the Calvary Bethlehem and broader Calvary Kooyong team. They have not only met challenges, but embraced them as opportunities; and through the collective efforts of our dedicated staff, have taken these opportunities to innovate further and expand the reach of our services.

Together with our passionate supporters and valued partners, we continue to create a legacy of positive change and impact. As we look to the future, I am confident we will continue to build on this momentum to drive forward with renewed energy and focus on our mission of "being for others" and to strive always to be a continuing source of healing, hope and nurturing.

I thank the Little Company of Mary Health Care Board of



Strategic Intent FY25 – FY27

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 BEHAVIOURS

- We are present, attentive and listen to each other.
- We recognise the achievements of others.
- We actively involve each other in decision making.
- We are transparent.
- We share accountability for the delivery of our strategic vision.
- We do not look to shift blame.



FOUNDER

Venerable Mary Potter



Hospitality



Healing



Stewardship



Respect

OUR VALUES

THE SPIRIT OF CALVARY

The Spirit of Calvary expresses how we care for each other, and how we care for our patients, our residents and our clients by '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 listen to you and to those who care for you. We involve you in your care. We deliver care tailored to your needs and goals.

Your wellbeing inspires us to learn and improve.

OUR VISION

Sharing the Spirit of Calvary through Great, Connected Care.
In our hospitals, our aged care facilities, the home, and the community.
We call this the Calvary Care System.

OUR PRIORITIES

GUIDE US IN THE DELIVERY OF OUR VISION

A focus on quality and safety

We prioritise high quality care, deliver effective performance, foster respectful relationships, and strive for zero preventable harm through a culture of safety and continuous evidence-based improvement.

Caring for our people and our working environments

We provide a safe, equitable, inclusive, and welcoming work environment that respects the individual and supports their contribution to our Mission.

Partnering and planning for the present and the future

We anticipate and respond to community needs through partnerships, innovative healthcare models, technology integration, and advocacy for those with unmet needs or disadvantages.

Caring for our resources

We maintain and upgrade our resources, explore new funding sources, and promote environmental stewardship to sustain and grow our Mission.

Being for others.

Partnering & planning for the present and the future

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Serving our communities

Our community profile

Calvary Bethlehem supports a diverse community, and while our inpatient unit and Statewide Progressive Neurological Service support patients and their families from across Victoria, our community Palliative Care Service has a defined catchment across five local government areas (LGA's) and reflects the predominant population accessing our services.

In 2024, the estimated resident population for the five local government areas that we serve was 645,683. As reflected in the 2021 Census data, within our catchment population:

- 15.9% are aged over 65;
- 2.4% are aged over 85;
- 36.7% were born overseas;
- 21.1% speak languages other than English at home;
- 0.3% of the population are Aboriginal and Torres Strait Islander;
- the top 3 main non-English languages spoken are Mandarin, Greek and Cantonese.

In 2023-24, 63.7 % of our admitted patients identified as Australian, 4.4% as Greek, 3.6% English and 2.7% were New Zealanders. The majority of our palliative care patients reside in the areas immediately surrounding Bethlehem, almost 40% of them living in Glen Eira or other adjacent local government areas.

The local community is ageing and is from diverse ethnic and cultural backgrounds. There is a significant

Greek and Jewish community in our council areas, with Italian, Chinese and Russian cultures also well represented. In 2023-24 after English, Mandarin, Greek and Cantonese are the second most common languages spoken at home.

The top 10 places of birth recorded at admission in 2023-24

Country	Admissions	Proportions (%)
Australia	334	64.9%
England	23	4.5%
Greece	22	4.3%
Germany	9	1.7%
Italy	9	1.7%
South Africa	7	1.4%
Russian Federation	6	1.2%
Poland	6	1.2%
Burma	5	0.9%
Wales	5	0.9%
Other birthplaces	89	17.3%
Total	515	100%

Our community in brief

The catchment area for our palliative care service includes Port Phillip, Stonnington, Glen Eira, Kingston and Bayside local government areas. The estimated resident population of these communities in 2024 was 645,683. 15.9% of those are over the age of 65.

Most common languages spoken at home after English:

1. Mandarin
2. Greek
3. Cantonese

36.7% of people were born overseas.

0.3% of our population are Aboriginal and Torres Strait Islander

15.9% of the population are aged over 65.



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Empowering people to keep healthy and safe in the community

Promoting positive ageing and increasing death literacy

Calvary Bethlehem's specialist palliative care service held its first in-person "Talking about Death over Coffee" afternoon in collaboration with Bayside City Council's Healthy Ageing program. Coinciding with Dying to Know Day, the event was held at the Sandringham Library in August 2023.

Initially planned in 2020 to be held in-person, it was the first time that the original concept could be realised after the COVID pandemic required the event to be held online which became known as 'Death over Zoom.'

The online-sessions were very popular with participants, who were encouraged to engage in their own end-of-life planning, emphasizing the ongoing importance of promoting open dialogues about death and end-of-life planning.

During the sessions participants were encouraged to contemplate and openly discuss their preferences and wishes regarding their end-of-life care and decisions. While acknowledging the inherent discomfort and fear associated with the topic of death, organisers stress the importance of having these conversations.

The return to hosting the first in-person event marked a significant milestone for the program. The response to the event was overwhelmingly positive and Bayside City Council is very keen to hold more in the future.



Calvary Bethlehem runs sessions with community groups throughout the year to raise awareness about death and the issues that arise at end of life



Expansion of the Calvary Bethlehem Volunteer Service



Since July 2023, our volunteer service at Calvary Bethlehem has steadily grown and developed with the ongoing support of the Order of Malta. Continued feedback from volunteers and regular training offered has strengthened the quality and scope of our service. With this, we have seen an expansion of roles and programs that have been embraced by volunteers.

One such program is the My Life Reflections program.

In partnership with Beyond Words, a not-for-profit, volunteer-run biography organisation, six volunteers have been trained to support our patients to tell their life story, through listening, transcribing, editing and publishing their story to share with family and loved ones. This program supports patients to feel affirmed, valued and celebrated, sustaining their identity, and enhancing their personal meaning and purpose.

Volunteers continue to help in other unexpected ways with the Comfort Rug Project growing exponentially. The



residents of the Hyson Retirement Apartments formed their own Knit and Knatter group during the year with volunteer support, and with our wider community and members of Friends of Bethlehem, they have provided beautiful hand-knitted or crocheted rugs, scarves and beanies to patients who may need additional physical and emotional warmth.





Community Advisory Council

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In the 2023–2024 financial year, the Bethlehem Community Advisory Council (CAC) helped to organise a number of community breakfasts to help drive community awareness about the work we do. It also helps to raise much needed funds to help contribute to the Living Well fund at Calvary Bethlehem and make a difference to the quality of care delivered to patients and their families.

CAC members donated their time in May to walk the streets of Caulfield South delivering postcards to the local community advertising the opening of the new Volunteer Hub on Saturn Street and encouraging community members to visit.

Community Council members, led by CAC Chair Kevin Halpin, have been assisting our fundraising department in the organisation of Calvary Bethlehem's fourth Annual Charity Golf Day. The event has grown in size every year and for the second time, in 2024, will be held at the Victoria Golf Club in Cheltenham.

Through community events such as these, our CAC helps us build our Friends of Bethlehem network. Together, we extend community awareness of the work at Calvary Bethlehem and build a community that supports those people with life-limiting disease.

CAC member networks and experience have been vital in promoting our work to a wide audience, and the Council continues to host community breakfasts throughout the year for this purpose.

We are keen to hear from anybody who would like to either join the Council or learn more about how they can support its work. For all enquiries, please contact:

community.relations@calvarycare.org.au

Friends of Bethlehem

A community of support

Friends of Bethlehem has been operating since 2014. Conceived by the Bethlehem Community Advisory Council, Friends of Bethlehem are community members who know Calvary Bethlehem through a variety of connections and experiences, appreciate the work we do, want to hear more about the organisation and engage with us in different capacities.

Members receive:

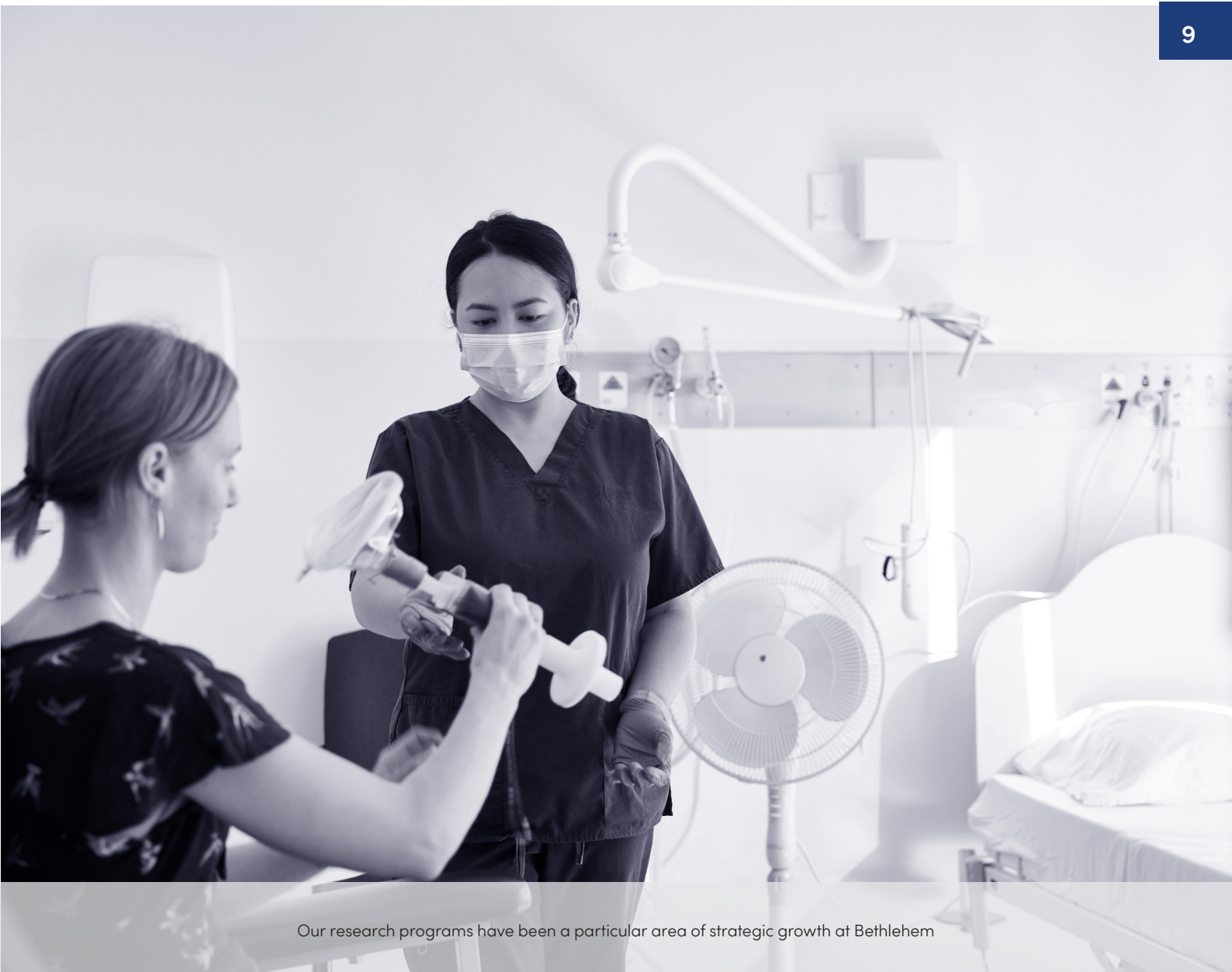
- 4–6 newsletters and electronic newsflashes each year, with updates on our activities, events, research and resources;
- invitations to our events and activities such as workshops, webinars and open days; and
- opportunities to get involved in volunteering, sharing their experience to help us tailor our services to community needs.

Once they are members, many of our supporters want to become more involved in the organisation. When they do, they contribute in a number of ways:

- volunteering;
- becoming a consumer representative;
- sharing a patient experience story;
- attending a workshop;
- spreading the word about palliative care and how to live well with incurable illness;
- joining our Community Advisory Council;
- becoming a financial supporter; and
- linking us to other relevant community groups.

Our strategy and year in review

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Our research programs have been a particular area of strategic growth at Bethlehem

Part A: Strategic priorities

The statement of Priorities is aligned with the Department of Health Strategic Plan 2023–27. Calvary Health Care Bethlehem will contribute to the Strategic Plan 2023–27 by adopting the following priorities:

Excellence in clinical governance

Goals	Health Services Deliverables	Progress
Strengthen clinical governance systems that support safe care, including clear recognition, escalation, and addressing clinical risk and preventable harm.	Implement Speak Up for Safety (SUFS) program across all service streams, achieve 80% compliance rate for SUFS training attendance.	Completed 62%. Carried forward to 2024/2025 to achieve and maintain target compliance.
Implementation of the nutrition and quality food standards for health services.	Consultation with dietitians to formulate strategies to ensure all food provided to patients and residents is of optimal nutritional quality, appealing, offers variety and is culturally diverse, to sustain their nutritional intake, quality of life and wellbeing.	Completed with ongoing consultation process implemented and managed via the food and Nutrition Working Party.

Working to achieve long term financial sustainability

Goals	Health Services Deliverables	Progress
Co-operate with and support Department-led reforms that look towards reducing waste and improving efficiency to address financial sustainability, operational and safety performance, and system management.	Implementation of cost-saving initiatives: identify and implement cost-saving measures such as reducing unnecessary procedures, optimising supply chain management, and streamlining administrative processes.	In progress

Improving equitable access to healthcare and wellbeing

Goals	Health Services Deliverables	Progress
Enhance the provision of appropriate and culturally safe services, programs and clinical trials for and as determined by Aboriginal people, embedding the principles of self-determination.	Promote a culturally safe welcoming environment with Aboriginal cultural symbols and spaces demonstrating, recognising, celebrating and respecting Aboriginal communities and culture.	In progress

A stronger workforce

Goals	Health Services Deliverables	Progress
Improve employee experience across four initial focus areas to assure safe, high-quality care: leadership, health and safety, flexibility, and career development and agility.	Improve employee experience across four initial focus areas to assure safe, high-quality care: leadership, health and safety, flexibility, and career development and agility.	In progress

Moving from competition to collaboration

Goals	Health Services Deliverables	Progress
Engage in integrated planning and service design approaches, whilst assuring consistent and strong clinical governance, with partners to join up the system to deliver seamless and sustainable care pathways and build sector collaboration.	Review specialist workforce requirements to develop a shared workforce model, including coordinating efforts to attract workforce.	In progress

Empowering people to keep healthy and safe in the community

Goals	Health Services Deliverables	Progress
Enhance health literacy and promote high-quality health information so that the local community, including those in priority cohorts, can apply this knowledge to their own circumstances.	Collaborate with local community groups to implement activities promoting positive ageing and increasing death literacy.	Complete. Delivered workshop in collaboration with Bayside Council, local community workshops supporting improved early access to community supports, carer resource development

Local priorities

Goals	Health Services Deliverables	Progress
Establish a workforce plan to meet existing and future service demands and challenges, supported by a skilled and engaged workforce. Implement a continuous planning process to shape and structure the CHCB workforce, ensuring sufficient and sustainable capability, skills and capacity to deliver services now and into the future.	Establish a Workforce Development Working Party. Develop and implement a workforce plan.	Not achieved, delayed due to workforce structure change implementation. To be carried forward to 2024/2025.

Analysis of workforce by full-time equivalent positions (FTE)

Hospitals labour category	JUNE Current monthly FTE		JUNE Average monthly FTE	
	2023	2024	2023	2024
Nursing	85	91.9	82	86.7
Administration and clerical	17.0	18.0	17	16.7
Medical support	4.0	3.6	4.0	3.4
Hotel and allied services	3.0	2.3	3.0	1.9
Medical officers	12	12.7	11.0	11.4
Ancillary staff (allied health)	51.0	47.7	41.0	47.6
	172.0	176.2	161.0	167.6

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Financial commentary

In 2023-24, Calvary Bethlehem achieved an increase in inpatient activity; however, remained reliant on premium workforce impacting final results. The service actively engaged in strategies to address expense management and, under the direction of the Department of Health, formulated and partially executed the Financial Management Improvement Plan. Due to delays and consultation timing constraints, some actions were unable to be executed until late in the year and as a result Calvary Bethlehem was unable to achieve some of the deliverables as per the targets expressed in the Statement of Priorities. The Calvary Health Care Bethlehem operating result was achieved with support from the Department of Health. There were no subsequent events to balance date.

Summary of financial results (\$'000's)

	2024	2023	2022	2021	2020
Operating result*	-468	5	751	573	(388)
Total revenue	33,668	32,873	29,546	28,121	27,564
Total expenses	32,270	32,543	29,005	28,362	27,310
Net result from transactions	(1,602)	330	541	(241)	254
Total other economic flows	(17)	52	500	70	147
Net result	(1,619)	382	1,041	(171)	401
Total assets	38,899	39,331	14,984	15,288	14,860
Total liabilities	33,465	32,278	8,309	9,621	9,022
Net assets	5,434	7,053	6,675	5,667	5,838
Total equity	5,434	7,053	5,667	5,667	5,838

* The net operating result is the result against which the health service is monitored in its Statement of Priorities.

Information and Communication Technology (ICT) expenditure excluding GST

Business as usual (BAU) expenditure (excluding GST)	Non business as usual (non-BAU) expenditure (excluding GST) (\$ million)		
	Total=Operational expenditure and Capital Expenditure (excluding GST)	Operational expenditure (excluding GST)	Capital expenditure (excluding GST)
Total (excluding GST)			
\$1,079,986	\$39,364	\$0	\$39,364

Net results (\$000s)

Reconciliation between the net result from transactions reported in the model to the operating result as agreed in the Statement of Priorities.

	2024	2023	2022	2021	2020
Net operating result *	(468)	5	751	573	(388)
Capital and specific items					
Capital purpose income	16	0	549	0	0
Specific income	0	1,157	41	62	1,542
COVID-19 State Supply Arrangements – Assets received free of charge or for nil consideration under the State Supply Arrangements	0	0	0	19	0
State supply items consumed up to 30 June 2022	0	0	139	79	0
Assets provided free of charge	0	0	0	0	0
Assets received free of charge	0	0	4	4	0
Expenditure for capital purpose	0	0	(101)	(125)	(92)
Depreciation and amortisation	-823	-832	(838)	(852)	(808)
Impairment of non-financial assets	0	0	0	0	0
Finance costs (other)	-326	0	0	0	-118
Net results from transactions	(1,601)	343	541	(241)	254

Details of individual consultancies less than \$10,000

In 2023-24, there were nil consultancies where the total fees payable to the consultants was less than \$10,000

Details of individual consultancies more than \$10,000

In 2023-24, there were nil consultancies where the total fees payable to the consultants was more than \$10,000

Occupational health and safety data

Occupational Health and Safety Statistics	2023-24	2022-23	2021-22
The number of reported hazards/incidents for the year per 100 FTE	43	42*	16
The number of 'lost time' standard WorkCover claims for the year per 100 FTE	0.61	0.62	0.61
The average cost per WorkCover claim for the year	\$21,175	\$6,071	\$50,272

* This figure reflected the organisation's prioritisation of same shift reporting of incidents and hazards.

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Part B: Performance priorities

High-quality and safe care

Key performance indicator	Target	2023-24 Result
Infection prevention and control		
Compliance with the Hand Hygiene Australia program	85%	*82%
Percentage of healthcare workers immunised for influenza	94%	98%
Patient experience		
Victorian Healthcare Experience Survey – patient experience	95% positive experience	**Full Compliance
Healthcare associated infections (HAI)		
Rate of patients with Staphylococcus Aureus Bacteraemia (SAB) per 10,000 bed days	≤0.7	0.0%

* Re-audit completed July 2024 – 97.5%

**Insufficient data

Effective financial management

Key performance indicator	Target	2023-24 result
Finance		
Operating result (\$m)	0.0	-0.47
Average number of days to paying trade creditors	60 days	44 days
Average number of days to receiving patient fee debtors	60 days	39 days
Adjusted current asset ratio	0.7 or 3% improvement from base target	0.72
Current days available cash	14 days	3 days
Variance between forecast and actual net result from transactions (NRFT) for the current financial year ending 30 June	Variance \leq \$250,000	not achieved

Part C: Activity and funding

Funding type	2023-24 Activity achievement
Consolidated Activity Funding	
Acute admitted, subacute admitted, emergency services, non-admitted National Weighted Activity Unit (NWAU)	3,548
Acute non-admitted:	
Home enteral nutrition NWAU	18

Attestations

Financial Management Compliance attestation – SD 5.1.4

I, James Birch, on behalf of the Responsible Body, certify that Calvary Health Care Bethlehem has no Material Compliance Deficiency with respect to the applicable Standing Directions of the Minister under the Financial Management Act 1994 and Instructions.



James Birch
Chair
Little Company of Mary Health Care
25 September 2024

Responsible Bodies Declaration

In accordance with the Financial Management Act 1994, I am pleased to present the Report of Operations for Calvary Health Care Bethlehem for the year ending 30 June 2024.



James Birch
Chair
Little Company of Mary Health Care
25 September 2024

Data Integrity Declaration

I, Shannon Thompson, certify that Calvary Health Care Bethlehem has put in place appropriate internal controls and processes to ensure that reported data accurately reflects actual performance. Calvary Health Care Bethlehem has critically reviewed these controls and processes during the year.



Shannon Thompson
General Manager
Calvary Health Care Bethlehem
29 July 2024

Conflict of interest declaration

I, Shannon Thompson certify that Calvary Health Care Bethlehem has put in place appropriate internal controls and processes to ensure that it has implemented a 'Conflict of Interest' policy consistent with the minimum accountabilities required by the VPSC. Declaration of private interest forms have been completed by all executive staff within Calvary Health Care Bethlehem and members of the board, and all declared conflicts have been addressed and are being managed. Conflict of interest is a standard agenda item for declaration and documenting at each executive board meeting.



Shannon Thompson
General Manager
Calvary Health Care Bethlehem
29 July 2024

Compliance with Health Share Victoria (HSV) Purchasing Policies

I, Shannon Thompson, certify that Calvary Health Care Bethlehem has put in place appropriate internal controls and processes to ensure that it has materially complied with all requirements set out in the HSV Purchasing Policies including mandatory HSV collective agreements as required by the Health Services Act 1988 (Vic) and has critically reviewed these controls and processes during the year.



Shannon Thompson
General Manager
Calvary Health Care Bethlehem
29 July 2024

Integrity, Fraud and Corruption Declaration

I, Shannon Thompson, certify that Calvary Health Care Bethlehem has put in place appropriate internal controls and processes to ensure that Integrity, fraud and corruption risks have been reviewed and addressed at Calvary Health Care Bethlehem during the year.



Shannon Thompson
General Manager
Calvary Health Care Bethlehem
29 July 2024

Merit and equity principles

Merit and equity principles are encompassed in all employment and diversity management activities throughout Calvary Health Care Bethlehem. Calvary Health Care Bethlehem is an equal opportunity employer and is committed to providing for its employees a work environment which is free of harassment or discrimination, together with an environment that is safe and without risk to health. Bethlehem's employees are committed to our values and behaviours as the principles of employment and conduct. Calvary Health Care Bethlehem promotes cultural diversity and awareness in the workplace.

Local Jobs First Act FRD 25D

In 2023–24 there were no contracts requiring disclosure under the Local Jobs First Policy.

Freedom of Information

During 2023–24, Calvary Health Care Bethlehem received 15 applications. Of these requests, four were from lawyers, three from the coroner/police, six from family and two were the result of a subpoena.

Calvary Health Care Bethlehem made 15 FOI decisions during the 12 months ended 30 June 2024. All of the decisions were made within the statutory time period of 45 days.

A total of fifteen FOI access decisions were made where access to documents was granted in full. None of these decisions were made after mandatory extensions had been applied or extensions were agreed upon by the applicant. Of requests finalised, the average number of days under the statutory time (including extended timeframes) to decide the request was 35 days. Requests were resolved in an average of ten days.

Safe Patient Care Act 2015

The hospital has no matters to report in relation to its obligations under section 40 of the Safe Patient Care Act 2015.

Gender Equity Act 2020

Calvary Health Care Bethlehem is guided by the Victorian Gender Equality Act 2020 to promote, encourage and facilitate the achievement of gender equality in our workplace.

Calvary is also recognised as a member of the Champions of Change Coalition (CCC) initiative. The Coalition is a not-for-profit organisation that works with influential leaders to redefine men's roles in taking action on gender inequality. Influential leaders to redefine men's roles in taking action on gender inequality.

Members of the CCC Health Group, including Calvary's

National CEO, Martin Bowles AO PSM, have committed to using their power and influence to step up beside women to challenge the status quo, and adopt actions to cultivate inclusive cultures towards gender equality, increase female representation in leadership roles and enhance workplace flexibility across private and government sectors. Martin continues to speak at CCC seminars to discuss key issues around gender inequality and workplace flexibility.

Calvary is committed to the CCC initiative and is actively participating in the 'All Roles Flex' study focusing on barriers and enablers to workplace flexibility in medical specialty training and rostered clinical environments.

The Public Interest Disclosures Act 2012

Calvary Health Care Bethlehem is committed to extend the protections under the Public Interest Disclosures Act 2012 (Vic) to individuals who make protected disclosures under that Act or who cooperate with investigations into protected disclosures. The procedure and brochure are available to all staff on the Calvary Connect intranet site and to the public via our Quality and Safe Systems Manager.

Carers Recognition Act 2012

Calvary Health Care Bethlehem has taken all practical measures to comply with its obligations under the Act, including promoting the principles of the Act to people in care relationships who receive our services and to the wider community and considering the care relationships principles set out in the Act when setting policies and providing services.

Building Act 1993

No new building projects have been undertaken in the financial year ending 30 June 2024. In order to maintain buildings in a safe and serviceable condition, routine inspections were undertaken. Where required, Calvary Health Care Bethlehem proceeded to implement the highest priority recommendations arising out of those inspections through planned maintenance works. Calvary Health Care Bethlehem has also complied with Department of Health Fire Risk Management Guidelines.

National Competition Policy

Calvary Health Care Bethlehem continues to take all practicable measures to ensure compliance with the National Competition Policy and Competitive Neutrality Policy Victoria including:

- requirement for staff to declare conflicts of interest;
- compliance with Health Purchasing Victoria/ HealthShare Victoria probity policies; and
- probity principles embedded in procurement.

Caring for our resources

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St Michael's Grove Garden, the new patient, resident and visitor garden at Calvary Kooyong is maintained by the use of recycled water



Environmental sustainability

Following our move to the new precinct in late January 2023, the last financial year has been Calvary Bethlehem's first full financial year of operation, enabling the service to begin the process of re-establishing baseline data and put in place efficiency measures. The collated data has provided an opportunity to review the effectiveness of those measures in place to manage our environmental impacts and use of resources, as well as to work towards the introduction of further changes that support our efforts and commitment to caring for our environment responsibly and sustainably.

Analysis of 2023-2024 data has provided the following insights and actions to address these findings will be a focus in 2024-2025:

- A slight increase in fuel usage as a result of increased activity in the delivery of services in community settings;
- Decrease in gas usage as a result of the new precinct not having hydronic heating as was in place at our previous temporary location at Parkdale;
- Increase in electricity usage as a result of a much larger site, including more clinic rooms, larger single rooms with ensuite and more common spaces and meeting rooms;
- Increase in clinical waste with active review to be undertaken in the next year, noting ongoing impact of COVID outbreak management in late 2023; and
- Increase in water usage attributed to operating an in-house laundry having previously used an external provider.

	Baseline Parkdale	2021-22	2022-23*	2023-2024
Electricity				
Consumption (kW)	434 995	425,605	388,870	414,709
Consumption by area (kW/m2)	149.4	133.0	38.6	55.2
Natural Gas and LPG				
Consumption (MJ)	2 189 571	1 670 214	1,509,537	1,210,881
Consumption by area (MJ/m2)	684.2	521.9	281.53	175.24
Petrol				
Consumption (L)	9084	5450	9,084	9,276
Water				
Consumption (kL)	2 445	2 545	2,795	4,132
Consumption by area (kL/m2)	0.76	0.79	0.52	0.54
Waste				
Clinical waste (kg)	509	N/A	1,922.50	2,780.00
General waste (tonnes)	67.59	25	24.66	26.86
Recycled waste (tonnes)	24.38	13.18	10.86	11.17

Building an Integrated Specialist Workforce

As a specialist palliative care service and statewide provider for people living with progressive neurological disease (PND), Calvary Bethlehem is focussed on ensuring the community has access to high-quality health services that ensure each person is at the centre of their care and specialist support is accessible close to home wherever possible. We recognise delivery of these services is reliant upon having access to a highly-skilled workforce and our role in working collaboratively with partners across the system to achieve this and build capacity of the health system to provide specialist care.



Calvary Bethlehem have hosted Palliative Care and MND Communities of Practice over the course of the year

In 2023-2024, we commenced work to support the service to review specialist workforce requirements as they relate to our current expertise with the aim of strengthening partnerships and ultimately developing a shared specialist workforce model, supported by integrated planning and service design approaches. Activities completed or in progress include:

- Completion of a study evaluating collaboration within and across multidisciplinary teams of shared patients between specialist PND and community palliative care services, which is informing work to be completed in 2024-2025;
- Building communities of practice and undertaking two collaborative workshops with partner organisations;



The Allied Health Team conducted workshops with retirement apartment residents and staff to increase awareness about falls risks in their homes and simple strengthening exercises and solutions to minimise risk

Work to achieve the overarching goal was delayed in 2023-2024 due to a workforce structure change implementation and as a result will be carried forward into 2024-2025.



The first online forum brought together 50 health professionals and service providers from around Victoria who care for people living with MND, as well as some from Tasmania and NSW.

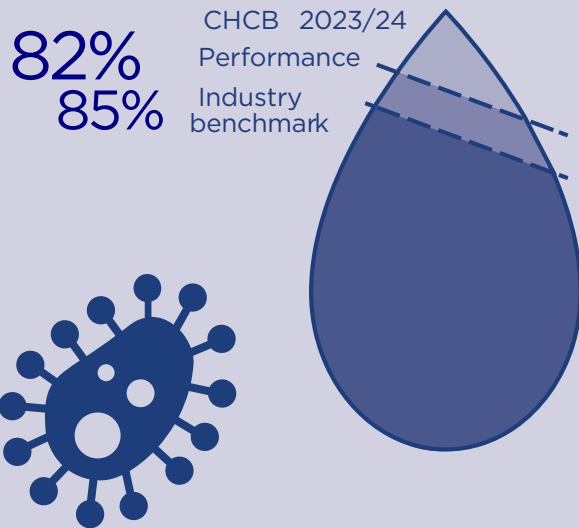
Quality and safety

21

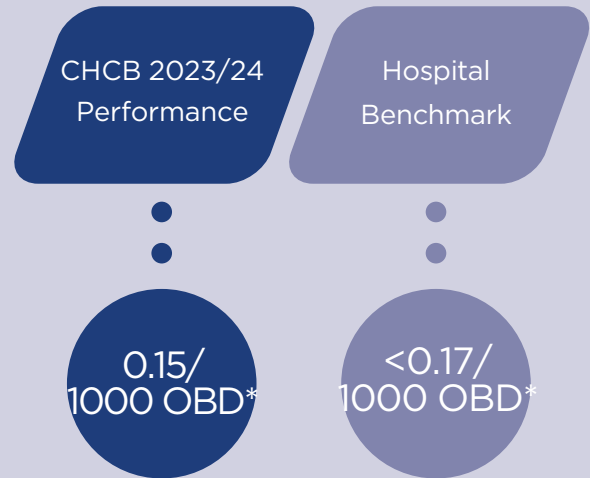


Hand hygiene

How clean are our hands?

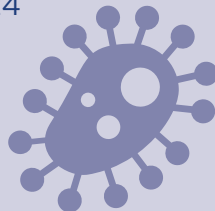


Hospital acquired pressure injuries



22

Healthcare-associated staphylococcus aureus bacteraemia infections



Patient falls

CHCB 2023/24 performance

11.65/1000 OBD



Medication

Medication errors



Staff

Flu immunisation



Complaints

13 <5 days average to respond

* OBD = Overnight Bed Stay



Partnering with Consumers Advisory Committee

Calvary Bethlehem recognises that only by involving the people we serve can we optimise patient safety and experience and provide responsive, high-quality services that reflect the individual and collective needs of our diverse communities.

The Calvary Bethlehem Partnering with Consumers Advisory Committee (PwCAC) advises on and supports the development of systems that provide for ongoing consumer engagement at all levels of the organisation and includes consumer members with lived experience. Calvary Bethlehem has a strong history of Consumer Engagement and was commended during accreditation assessments in September 2023 for the evident patient/family focus of the services we provide.

In 2023, the work of the committee was focussed on:

- updating the Consumer Engagement Framework
- developing, launching and promoting the Consumer Registry and the Consumer Research Register
- systematising the way we recruit and on-board consumers to committees and working parties

The Consumer Engagement Framework, due for release at the end of 2024, has been created with the input of two consumers to ensure participation from service users at all levels of the organisation including in planning, design, measurement and evaluation to improve the quality and safety of our services. The framework underpins our commitment to engage meaningfully with consumers in the work we do and ultimately improve the patient experience.

This last financial year, through the creation of a Consumer Registry and Consumer Research Registry, the PwCAC has been able to establish a pool of willing people who can assist by providing consumer perspectives on new services, systems and publications. The Committee has also established processes to provide a better understanding of consumer representative roles for those consumers who are recruited to committees and working parties.

Delivering food of optimal nutritional quality and cultural diversity to sustain patient wellbeing

Responding to the needs of our patients and to ensure the provision of food that is of optimal nutritional quality, is appealing, offers variety and cultural diversity; the Food and Nutrition Working Party, along with key staff, have been leading a body of work implementing strategies to ensure all food is able to sustain patients' nutritional intake, quality of life and wellbeing.

Over the last year, the following have been achieved:

- In consultation with consumers, dietitians and Calvary National Hospitality have developed a rotating menu that addresses seasonality, cultural diversity and offers variety, while meeting food and nutrition standards and the International Dysphagia Diet Standardisation Initiative (IDDSI) requirements;
- Undertaken consumer testing of menu offerings, using feedback to inform recipe adjustments;
- Build of the Chefmax menu management system (due for completion end September 2024) to enable an effective patient safety and menu management process by linking Chefmax to the Patient Administration System (PAS); and
- Working with industry partners to embed consistent certified Halal and Kosher menu options, including texture modified, and access to options that are free of the top 10 allergens.





Accreditation 2023

In September 2023, Calvary Bethlehem completed a successful three day assessment, meeting all 148 actions of the National Safety and Quality Health Service Standards (NSQHS).

All hospitals are required to be accredited to the National Safety and Quality Health Service Standards (NSQHS) which ensures that all health services have rigorous and consistent safety and quality systems.

The eight NSQHS Standards are:

- clinical governance;
- partnering with consumers;
- preventing and controlling healthcare-associated infections;
- medication safety;
- comprehensive care;
- communicating for safety;
- blood management; and
- recognising and responding to acute deterioration.

Under the eight standards there are 148 actions with sub-actions that hospitals are required to meet. Planning and preparation is continuous and is a key component of our quality planning cycle underpinned by the Calvary National Clinical Governance Framework, particularly with the move to the 'short notice' assessment where notification to hospitals is 24 hours prior.

In May 2023, health service organisations also commenced assessments against the newly introduced National Clinical Trials Governance Framework (CTGF)

which recognises clinical trials as routine health service provision and strengthens clinical and corporate governance. As a new standard in its first three year cycle, during the assessment, Calvary Bethlehem was assessed against a maturity scale and was found to be well progressed against the actions outlined within the CTGF. The CTGF has been incorporated into our quality planning cycle and will be progressed over the coming year.

The focus of the assessment was on the quality of care and the safe systems for consumers accessing Calvary Bethlehem services and includes the back-of-house services (maintenance, catering and cleaning) which support the precinct and are required to be compliant with both the NSQHS and the Aged Care Standards.

Before the accreditation assessment, the assessors were provided Calvary and Calvary Bethlehem policies and procedures, organisational chart, meeting and audit schedules, meeting minutes, patient feedback, records of inspections and external and internal audits and reviews.

Whilst on site, the assessors verified the information provided by interviewing staff, speaking to patients, families, and volunteers and observed how Calvary Bethlehem functions on a day-to-day basis.

During summation at the end of the assessment visit, the assessors commented on a very patient-centred service with a strong multidisciplinary approach and gained an understanding of the often complex needs of the patients requiring specialist care across the service and beyond the hospital.

Behaviours of concern, occupational violence and family violence

Over the last year, there were seven reports of occupational aggression and violence, three less than the previous financial year. As part of our ongoing work to support staff in managing occupational aggression and violence, and to reduce the occurrence of such incidents, Bethlehem has continued to deliver e-learning education for all staff. To complement this, and in recognition of our specialist clinical work, we have embedded planning meetings for patients with known behavioural concerns prior to admission as part of our practice to support care planning and the proactive implementation of preventative strategies.

The Multi-Agency Risk Assessment and Management (MARAM) Framework has been implemented and provides a structure for staff to respond and securely share relevant information between authorised organisations to assess and manage family violence risk and protect and support the wellbeing of children.

This year, Calvary Bethlehem has implemented a number of actions including:

- development of family violence procedures and flow charts;
- development of the webpage to include a range of Family Violence resources; and
- provision of education sessions to all staff of our Community Palliative Care Service and as part of the broader Bethlehem-wide Education Program.

Occupational violence statistics	2023-24
Workcover-accepted claims with an occupational violence cause (per 100 FTE staff)	0
Number of accepted Workcover claims with lost time injury with an occupational violence cause (per 1,000,000 hours worked)	0
Number of occupational violence incidents reported	7
Number of occupational violence incidents reported (per 100 FT)	0.02
Percentage of occupational violence incidents resulting in a staff, illness or condition	0%

Definitions

For the purposes of the statistics, the following definitions apply.

Occupational violence - any incident where an employee is abused, threatened or assaulted in circumstances arising out of, or in the course of their employment.

Incident - an event or circumstance that could have resulted in harm to an employee. Incidents of all severity rating must be included. Code Grey reporting is not included, however, if an incident occurs during the course of a planned or unplanned Code Grey, the incident must be included.

Accepted WorkCover claims - accepted WorkCover claims that were lodged in 2023-24.

Lost time - is defined as greater than one day.

Injury, illness or condition - this includes all reported harm as a result of the incident, regardless of whether the employee required time off work or submitted a claim.



Research Ethics and Ethics Committee

As a statewide provider for those with a progressive neurological disease, and specialist palliative care provider, Bethlehem has a well-established and active program of research in the palliative and neurological patient population. Studies range from locally governed site-specific clinical audits and quality activities, to large multi-site national and international clinical trials and studies.

Our research activity contributes to improving patient outcomes with a strong focus on the translation of research into practice. Key to these activities are many partnerships and collaborations, which provide opportunities for investigators to build skills, apply different approaches from complementary disciplines and lend to the credibility and validity of the research being conducted.

The Research Ethics & Ethics Committee (REEC) at Calvary Bethlehem is comprised of staff and members of our community, and is properly constituted in accordance with the National Health and Medical Research Council (NHMRC) guidelines and Catholic Health Australia's Code of Ethical Standards for Catholic Health and Aged Care Services in Australia.

The REEC is responsible for research governance and acting as a forum for consideration of research proposals from an ethics perspective. This year, the REEC

brought to fruition ongoing work in succession planning and bid farewell to Patrick Monahan as outgoing Chair who stepped down in June after six years of service. Patrick was an exceptional Chair to the REEC, generously sharing his knowledge and providing guidance to the committee's consideration of research proposals. We thank Patrick for his valuable contribution and commitment to REEC.

With Patrick's retirement from the REEC, we welcomed Philip Rowell to the role of Chair, having been a long-standing member of the REEC in his capacity as Lawyer. We are grateful for his leadership and for taking on this key role. Philip's appointment to Chair enabled the REEC to also welcome a new member, Anne Shortall, who has been appointed to the role of Lawyer.

The breadth of knowledge and experience of all members of the REEC ensures all research undertaken at Calvary Bethlehem is conducted responsibly, ethically and with integrity. Over the last 12 months, the REEC has considered and approved three new study proposals.

We would like to thank all members of the REEC for their ongoing commitment to Calvary Bethlehem, with particular acknowledgement of our external members who generously contribute their time and expertise to assist us in the review of applications.

External committee members

Mr Patrick Monahan, Chair (resigned June 2024)
 Fr Kevin McGovern
 Mr Philip Rowell, (Chair since June 2024)
 Ms Mary-Anne Lane
 Mr Garry McDavitt
 Anne Shortall (joined June 2024)

Calvary representatives

Mrs Shannon Thompson
 Dr Susan Mathers
 Dr Chris Grossman
 Dr Fiona Fisher
 Dr Alice Parkhill

Caring for our people and working environments

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Workforce Development A Stronger Workforce

Over the last year a number of initiatives have been implemented which aim to improve our staff experience and support staff to deliver safe, high-quality care; opportunities to develop leadership skills, focus on health and safety and provide opportunities for flexibility in work arrangements and career development. Initiatives and programs in FY24 include:

Calvary Speak Up for Safety™ Feedback System

Building on the Speak Up for Safety™ program already in place at Calvary Bethlehem, the Calvary Speak Up for Safety™ Feedback System has two purposes:

1. Recognition: A method to provide feedback and recognise co-workers whose behaviours promote patient safety; and
2. Reflection: A backup system to provide feedback about a co-worker's behaviour that is believed to undermine patient safety, when someone is not able to speak up in the moment.

The introduction of the feedback system aims to enable patients to feel supported in their environment with their needs and preferences met, provide guidance and ensure role responsibilities are clear and available for staff providing care to patients, families and visitors, and



ensures staff are appropriately educated and supported to escalate concerns and respond appropriately. Over the last 12 months, the leadership team have been trained regarding their role within the system, Peer Messengers were identified and trained in readiness for the Feedback System to be implemented in FY25, and 63% of staff have completed training in Speak up for Safety™.



Embodying the Spirit of Calvary – Piera Cantelmi

Last year, Piera Cantelmi was awarded the Spirit of Calvary Award for her outstanding demonstration of the core values of Calvary – hospitality, healing, stewardship and respect.

A dedicated employee with 17 years of service at Bethlehem, Piera was recognised for her commitment to embodying these values in her interactions with colleagues and the Bethlehem community.

Piera joined Calvary Bethlehem as an administrative assistant in the Learning & Development Centre after hearing glowing recommendations from existing staff members, who all spoke highly of the positive work environment and the sense of community within the organisation.

Piera applied for a position at Calvary Bethlehem wanting to contribute to the education and development of nursing students and graduate nurses.

Since that time, she has taken on various roles, including serving as a WHS Representative, Area Warden, and occasionally relieving in the Workforce Coordinator role. Her dedication and versatility in these roles have contributed significantly to the growth and success of the organisation.

Piera finds inspiration in the role she has been able to play shaping the future of healthcare professionals before they

embark on their careers. She values the support of her colleagues and admires their dedication, passion and care for patients and each other.

One of Piera's best experiences at Bethlehem has been working alongside a dedicated group of educators who share her commitment to training and educating staff members.



Through their collaboration, Piera has forged lasting friendships and shared many moments of laughter and camaraderie.

Piera's Spirit of Calvary recognition is a testament to her service and dedication to upholding the values of Calvary Bethlehem. Her long-standing contributions, positive impact and genuine care for others make her a valued member of Calvary Bethlehem and the broader Calvary Kooyong precinct and an inspiration to her colleagues.



Health and Safety and Leadership Development

Health and Safety

Following the Work, Health and Safety (WHS) Committee establishing new designated work groups and Health and Safety Representatives (HSR's) in FY23, new HSR's were offered and have completed 5-day HSR training and those who had previously completed training were offered and completed refresher training. The WHS Committee in conjunction with Wellness Champions continue to implement key activities ensuring Calvary Bethlehem and other integrated services continue to provide a safe work environment for all. These have included:

- Completion of a key risk audit in relation to Chemical Management and completion of actions to address any areas for improvement;
- Completion of environmental inspections across all areas in line with the established audit timetable; and
- Continued focus on early hazard identification and same-shift reporting, resulting in maintaining a year on year high level of reporting and achieving 91% of worker related incident investigations actioned and closed, 87.1% of reported hazards actioned and closed, Lost Time Injury Frequency Rate (LTIFR) of 6.5 and an improvement in same shift reporting moving from 35.7% in the year prior to 63.3% this financial year.



Leadership Development

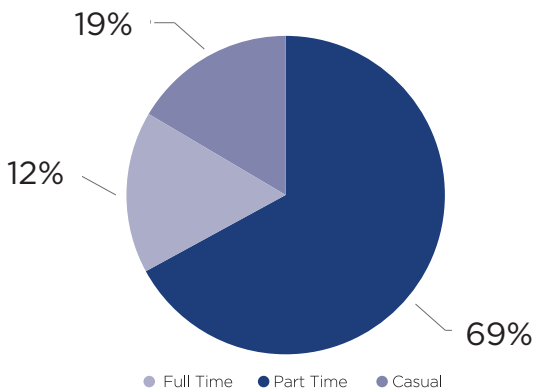
Calvary's vision is to lift the confidence, potential, flexibility and adaptability of all levels of leaders across Calvary, and prepare them for the challenges they face each day in their leadership roles. In line with this vision, Calvary Bethlehem staff were provided with the opportunity to participate in the following programs in the last year:

- Calvary Leadership Program – delivered across three tiers and in partnership with like-minded, dynamic education providers; and
- LinkedIn Learning – access to the LinkedIn online platform, providing a digital library with thousands of courses covering a wide range of technical, business, software and creative topics.



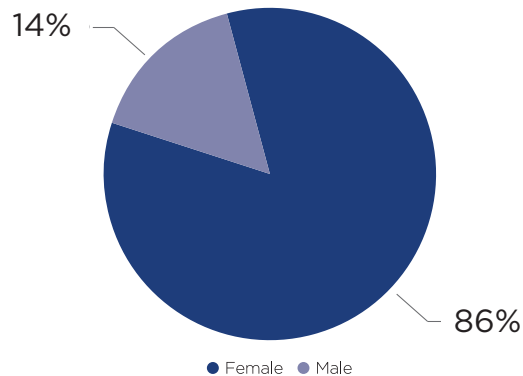
Staff profile

Breakdown of staff by employment status



39 Full-time employees
62 Casual employees
222 Part-time employees

Breakdown of staff by gender



46 Male
278 Female

Staff milestones

30 years of service

Roxanne Maule

25 years of service

Cathryn McMahon

Anna Smith

Deborah Handby

20 years of service

Michele Meachen

Judith Van Opstal

15 years of service

Monica Britto

Ester O’Sullivan

Juho Song

Glenda Colgrave

10 years of service

Soonyoung Park

Rajeshwari Hiremath

Almaz Wakjera

Heeral Shaikh

Jacinta Hill

Dimitra Collins

Stephanie Williams

Fiona Runacres

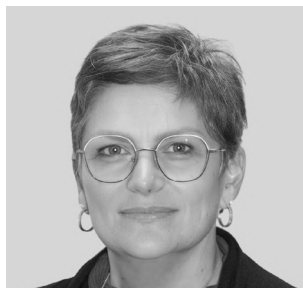
Lisa Mottram

Christine Young

Elisha Somerville

Executive management team

**Shannon
Thompson**
General Manager –
Calvary Kooyong



Commenced 01/03/2021

- Employment duration 21 years
- Executive oversight of all operational management and strategic direction of the service; leading the Executive Management Team in ensuring high quality and innovative service delivery that meets all quality, service and financial targets
- Executive oversight of all clinical services, including, strategic and operational direction and achieving effective service delivery across inpatient and ambulatory settings



Rowan Hearn
Director of Medical
Services and
Palliative Medicine

Commenced 01/03/2021

- Employment duration 8 years
- Management of medical team

Linda Maas
Director of Property
and Shared Services



Commenced 31/01/2023

- Employment duration 17 years
- Management of hospitality services, maintenance, environment and support services for Calvary Kooyong Precinct



**Tammy
Campbell**
Director
of Finance

Commenced 01/06/2022

- Employment duration 5 years
- Management of Human Resources, Health Information Services, Finance Information Technology and Fundraising
- Executive oversight of service budgets and financial reporting

Janine Stockley
Director of Clinical
Services and Quality
Systems



Commenced 07/11/2022

- Employment duration 19 months
- Management of quality, safety, risk, compliance, clinical services and Learning and Development



**Delia
Gawthorne**
Retirement Manager
Hyson Apartments

Commenced 17/10/2022

- Employment duration 20 months
- Management of Hyson Apartments retirement community



Karen Bolger
Regional Director
of Mission/Mission
Integration/Allied
Health Manager

Commenced 14/06/2024

- Employment duration 20 years
- Karen commenced her role as Regional Director of Mission (Vic) in June 2024 after being seconded into the Acting role in November 2023
- Executive oversight of the formation and education of staff, to further develop their understanding of the distinctiveness of their role in a Catholic health care facility.
- Management of the Pastoral Care & Bereavement, Social Work and Music Therapy Departments. (Ceased June 2024)

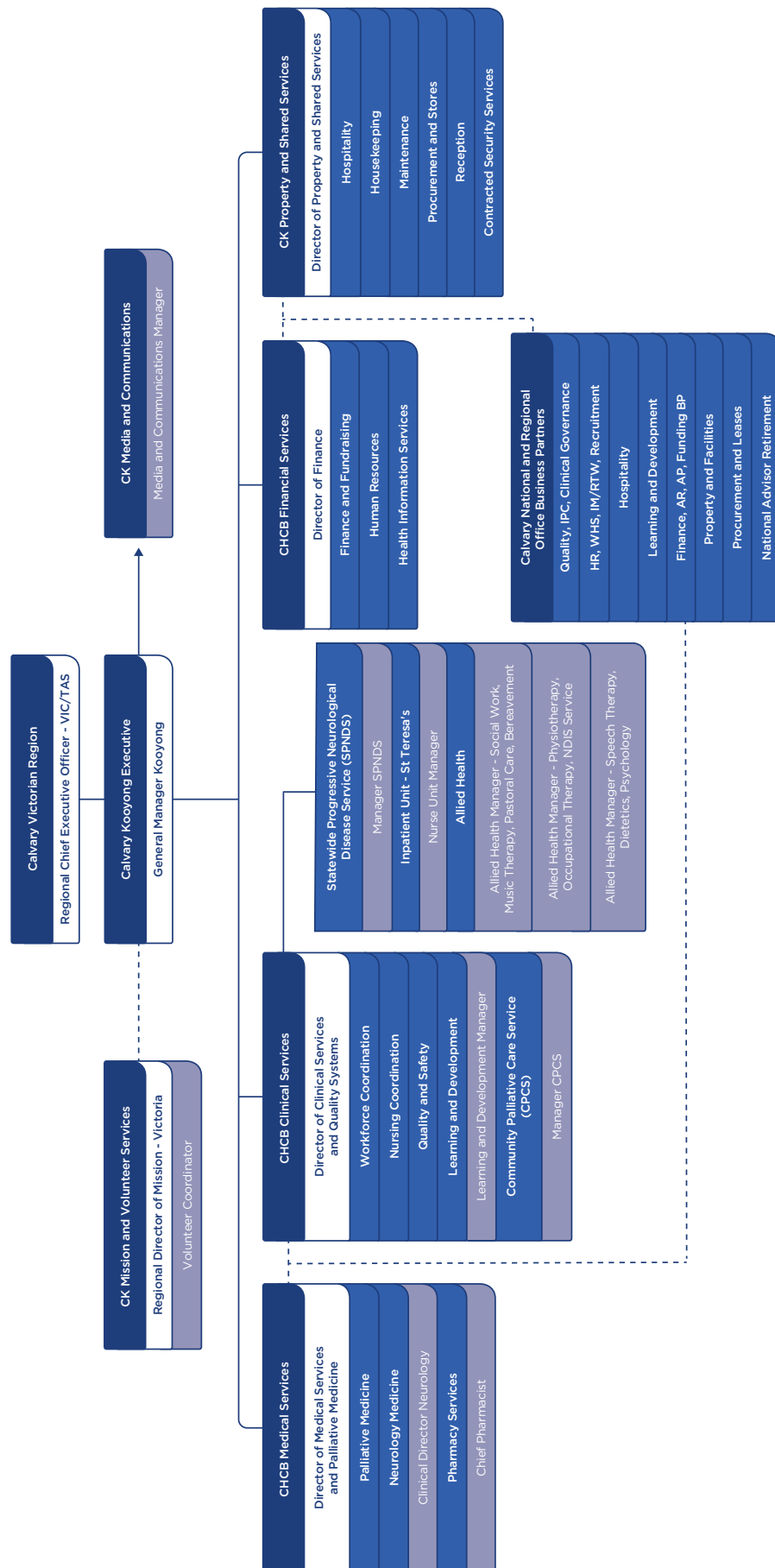
Liz Ngari
Home Manager
Huntly Suites



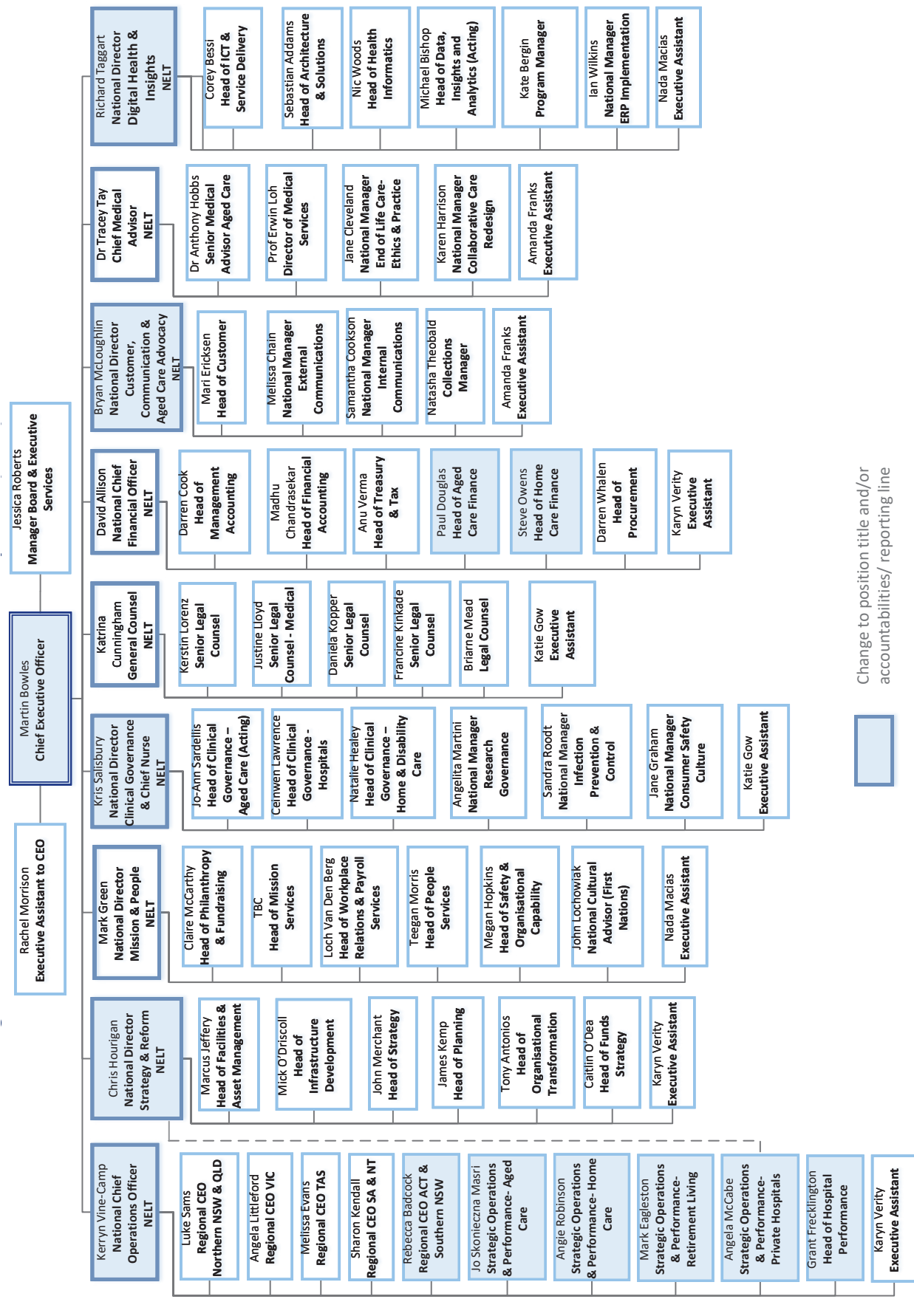
Commenced 26/06/2023

- Employment duration 12 months
- Management of Huntly Suites residential aged care home

Calvary Health Care Bethlehem 2023 – 24 Annual Report



LCM Health Care Organisational chart



Calvary Board and audit committees

The Calvary Board comprises up to nine independent non-executive Directors who are elected for a period of up to three years and can be re-elected to serve for up to nine years. During the year the Board had nine directors.

Objectives, functions, power and duties

The core objective of the service is to provide public health services in accordance with the principles established as guidelines for the delivery of public hospital services in Victoria under section 17AA of the Health Services Act 1988 (Vic) ('the Act')

Board of Directors

The Little Company of Mary Health Care Board of Directors is accountable to Calvary Ministries. Chaired by Mr Jim Birch AM, the Board includes Dr Annette Carruthers, Mr David Catchpole, Mrs Lucille Halloran, Ms Lucille Scomazzon, Ms Agnes Sheehan, Ms Jennifer Stratton and Professor Chris Baggoley AO.

"We believe that Australian society is best served by a single health care system in which the public and private sectors play complementary roles in delivering high-quality, responsive, and compassionate care."

***Hon. John Watkins AM, former Chair
National Board***

James (Jim) Birch, AM – Chair

BA (Health Administration), FCHSM, MNATSIHEC

Appointed to the Board on 1 February 2016. Appointed Chair 28 November 2019.

Jim has over 30 years of experience planning, leading, and implementing change in health care, justice, and human services. Jim is Chair of Lifeblood (the Australian Red Cross Blood Service) and formerly held the positions of Chair of the Australian Digital Health Agency 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 a Global Health Leader, Government and Public Sector Leader, and Lead Partner in Health and Health Care.

Agnes Sheehan

BA Business Studies (Hons)

Appointed to the Board on 22 November 2018

Agnes has had an impressive career, spanning more than 20 years as an Executive in the information and communications technology industry, and nine years as Non-Executive Director in the health sector. She was a Director at Telstra for over 13 years and during this time she led several of their largest businesses. Prior to Telstra she was the Regional Director for Ericsson Enterprise for Asia Pacific where she managed some of their most significant markets.

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 and the Leadership Program Development Committee for Catholic Health Australia.

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, focusing on hospitals and health services, residential aged care, retirement living, disability, and home-based care services.

Annette Carruthers AM

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 Director of the National Youth Mental Health Foundation (Headspace) and Cater Care Pty Ltd. She has qualifications in finance, superannuation, and corporate governance and is also a Panel Member for the Australian Financial Complaints Authority.

Lucille Halloran

BCom (HONS), BA (Admin), GAICD

Appointed to the Board on 23 November 2016

Lucille is a former managing partner of EY's Asia-Pacific

Government & Health Sciences practice. Lucille is now a strategic advisor to Synergy and a Director of the Canberra Symphony Orchestra. Lucille was born in Canada and brings a unique blend of Australian and Canadian public sector experience in policy reform, AI, data analytics, digital and citizen centric service delivery in health and human services.

Professor Chris Baggoley

AO, BVSC (Hons), BMBS, B Soc Admin, FACEM, FRACMA, D Univ (FUSA), FAAHMS

Appointed to the Board on 23 September 2021

Chris holds the titles of Professorial Fellow, College of Medicine and Public Health at the Flinders University of South Australia and Adjunct Professor, Faculty of Health and Medical Sciences, at the University of Adelaide.

He has held positions as Director of Emergency Medicine at the Flinders Medical Centre, at the Ashford Community Hospital and subsequently at the Royal Adelaide Hospital. He was CEO of the Australian Commission on Safety and Quality in Health Care from 2007-2011.

Yvonne Le Bas

BBus Studies, MA, Fellow CA Aus/NZ, Fellow Inst. CA England/Wales, FAICD

Appointed to the Board on 24 November 2022

A finance executive with over 30 years' experience across Financial Services, Property and Oil sectors in Australia and internationally, Yvonne is currently Chief Financial Officer of Resolution Life. Yvonne's financial services experience spans both Banking and Wealth Management, working for two of the major Australian Banks across a range of roles CFO, COO, General Manager, Strategic Development and major program delivery.

David Issa

Appointed to the Board November 2023

David is an experienced leader in insurance, banking, technology and digital transformation. David's professional experience includes 13 years at Westpac, culminating in the role of Chief Information Officer, Institutional Banking, followed by roles at Insurance Australia Group, including as Chief Executive Officer, Personal Insurance.

Board Committees

The Constitution requires the Board to establish and maintain a Mission and Ethics Committee and an Audit and Risk Committee and provides for the establishment of other committees to advise the Board. In line with the Board's commitment to the delivery of high-quality clinical care, the Clinical Governance Committee was established in 2011.

Each committee comprises a chair and members selected by the Board, and works to Terms of Reference that are reviewed every year. From time to time, the Board may form working groups to advise on specific policy or strategy issues.

The Board currently maintains four standing committees:

Audit and Risk Committee

The Audit and Risk Committee's primary function is to assist the Board in fulfilling its oversight responsibilities by reviewing:

- The integrity and quality of financial information which will be provided to the stakeholders and others.
- The process adopted by management to identify and manage key business, financial and regulatory risks.
- The process adopted by management to ensure compliance with relevant laws, regulations, standards, codes and policy directives.
- The systems of internal controls and risk tolerance that management have established and the external audit process.

Audit and Risk Committee Members

- **Yvonne Le Bas (Chair)**
- **Agnes Sheehan**
- **David Issa**
- **Jim Birch (ex officio)**

Clinical Governance Committee

The primary objective of the Clinical Governance Committee is to provide assurance to the Board that the Clinical Governance Framework and key critical clinical systems and processes are effective and robust. These systems will include, but are not limited to:

- Incident management and reporting;
- Quality improvement;
- Appropriateness;

- Compliance with National Safety and Quality Health Standards;
- Clinical indicators, and;
- Consumer Experience. Service Accreditation/ Certification.

Mission and Ethics Committee

The Mission and Ethics Committee's primary function is to assist the Board in fulfilling its oversight responsibilities by reviewing:

- The integrity and quality of Calvary's mission strategy and its effectiveness.
- The quality and effectiveness of Calvary's Catholic ministry, characterised as "continuing the mission of the Sisters of the Little Company of Mary".
- The processes adopted by management to identify significant ethical issues which arise and ensure compliance with the Code of Ethical Standards for Catholic Health and Aged Care Services in Australia.
- The formation programs and ethics education programs for Board Directors, Senior Executives and Emerging leaders.
- The quality and effectiveness of Calvary's efforts to preserve its LCM heritage.
- Calvary's fundraising activity and the extent to which Calvary's services prioritise the needs of the poor and vulnerable.

Performance and Remuneration Committee

The primary function of the Performance and Remuneration Committee is to ensure that Calvary, as a major Catholic, not-for-profit healthcare provider, seeks to maintain and/or improve our healthcare workforce and their conditions over time, which in turn impacts positively on the communities in which we operate.

Decisions of the Board are cascaded, as required, through the organisation via the National Executive Leadership Committee and Regional Hospital CEOs/Operations Managers for Aged and Community Care.

Living well

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Helping our community to live well



- Direct Mail Appeals (focusing this year on Motor Vehicles and our Staying Connected Program);
- Grant funding from the Collier Charitable Fund; and;
- FightMND.

Community support has a direct impact on the care provision and quality of life of patients and their carers at Calvary Bethlehem

Community and philanthropic support enables Calvary Bethlehem to work together with our community to purchase new equipment, invest in technologies supporting patient care, drive innovation, expand our services and deliver additional specialised programs; all vital to ensuring our patients can live well with autonomy, assisted by connected, flexible services.

Each year, many individuals, trusts and foundations and businesses contribute a wide range of support enabling our staff to provide essential services to our inpatients and community patients.

This support also allows us to undertake cutting edge research which has a benefit to those we care for as well as to patients in the wider Victorian and Australian communities.

As a specialist Victorian public hospital caring for people with progressive neurological diseases throughout Victoria and those requiring Palliative Care services in our local community, our staff work every hour of the day to ensure that those we care for, receive the best possible care from our multi-disciplinary teams.

In the 2023/24 Financial Year our fundraising and philanthropy raised \$ 276,000.

Listed below are some of the ways we receive financial support from our community of supporters in 2023/24:

- Bequests and In Memoriam donations;
- Community Golf Day (run by Bethlehem's Community Advisory Council);
- Community Groups (Rotary Bentleigh Moorabbin Central);

Generous donations make a significant impact

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During the year we purchased:

- ten specialised chairs enhancing patient and staff safety and supporting patients with specific needs to be able to be seated comfortably;
- four new motor vehicles supporting refreshing our ageing fleet which is critical to our delivery of medical, nursing and allied health services in the community, transporting patients and delivering vital equipment;
- a power wheelchair to help patients become familiar with them prior to them purchasing one for ongoing personal residential use; and
- A blood analysis monitor to test a patient's blood sample on-site providing a rapid analysis at point of care enabling us to adjust treatment promptly.

Community support for Calvary Bethlehem



Calvary Bethlehem operates as a Victorian Public Hospital funded by the State Government with generous philanthropic support from the community. We extend our deepest thanks and appreciation to all of our generous supporters who have donated funds, products and services during the year.

Significant supporters

We would especially like to thank the following people and organizations for their significant philanthropic support during the year:

- Bayside Companion Dog Training School
- Mr Brian Carroll
- Collier Charitable Fund
- Iovenitti Family
- Mrs Stephanie Johnston
- Mr Andrew Madigan
- Perpetual Philanthropic Services – Fight MND
- Mrs Jenny Rogers
- Rotary Club of Bentleigh Moorabbin Central
- Estate of Mr Martin Rubinstein
- Urquhart Charitable Fund
- Mr Chris Zagoudis

“On behalf of our patients, their families and the dedicated Calvary Bethlehem staff and volunteers, I extend our deepest appreciation and sincere thanks to our incredible donors. Through your support, our service is able to offer programs, equipment, and crisis assistance that truly have a positive impact on the communities we serve.”

Shannon Thompson, General Manager Calvary Kooyong

Helping Bethlehem in your own way

There are many ways that you can help Calvary Bethlehem. You can make a regular donation on a monthly basis, leave a gift in your will, contribute in-memoriam donations when a loved one has died, receive our direct mail appeals, or attend an event such as the Bethlehem Annual Golf Day.

Our fundraising team works closely with donors to ensure their wishes are fulfilled, directing their donation to their area of interest. However, gifts for unspecified purposes help us to respond with flexibility to the most urgent needs. All donations of \$2 and over are tax deductible.

If you would like to receive further information about these programs or would like to receive our Friends of Bethlehem newsletter, please contact our team at: community.relations@calvarycare.org.au





Leaving a legacy that will help our patients to live well

Every year at Bethlehem, we receive in memoriam donations and bequests of various sizes from family members and patients who have been moved by the care that they have received whilst with us.

If you feel inspired to bequeath, please consider updating your will to support Calvary Bethlehem. Here are some simple steps to assist you.

When updating your will, you can ask your solicitor to insert a few simple words into your new will. Our suggested wording:

"I give free of any relevant duties or taxes (please insert text here from the 5 options below):

1. the whole of my estate; or
2. (number) % of my estate; or
3. the residue of my estate; or
4. (number) % of the residue of my estate; or
5. the sum of \$ (value)

To Calvary Health Care Bethlehem (ABN 81 105 303 704) of 476 Kooyong Road, Caulfield South 3162 for its general purposes. The official receipt of the organisation shall be a full and sufficient discharge to my executor".

Organisational priorities can change over time, so the most valuable gift you can make is an unrestricted gift, as it enables us to direct the funds to the area of greatest need at the time when the gift is received. It is also possible to support a specified area, and we suggest

speaking confidentially with our Finance Director to confirm that it is an enduring area of work.

Including a gift in your will can make a positive difference for thousands of future patients and their loved ones. We promise that we will use your gift wisely to assist our patients to live well all the days of their lives.

If you would like further information about leaving a gift in your will, or have already included Bethlehem and would like us to know, please contact us at:

friendsofbethlehem@calvarycare.org.au

Additional information available on request

Consistent with FRD 22 (Section 5.19 (d)/5.20) this Report of Operations confirms that details in respect of the items listed below have been retained by Calvary Health Care Bethlehem and are available to the relevant Ministers, Members of Parliament and the public on request (subject to the freedom of information requirements, if applicable):

- (a) Declarations of pecuniary interests have been duly completed by all relevant officers;
- (b) details of shares held by senior officers as nominee or held beneficially;
- (c) details of publications produced by the entity about itself, and how these can be obtained;
- (d) details of changes in prices, fees, charges, rates and levies charged by the Health Service;
- (e) details of any major external reviews carried out on the Health Service;
- (f) details of major research and development activities undertaken by the Health Service that are not otherwise covered either in the Report of Operations or in a document that contains the financial statements and Report of Operations;

- (g) details of overseas visits undertaken including a summary of the objectives and outcomes of each visit;
- (h) details of major promotional, public relations and marketing activities undertaken by the Health Service to develop community awareness of the Health Service and its services;
- (i) details of assessments and measures undertaken to improve the occupational health and safety of employees;
- (j) general statement on industrial relations within the Health Service and details of time lost through industrial accidents and disputes, which is not otherwise detailed in the Report of Operations;
- (k) a list of major committees sponsored by the Health Service, the purposes of each committee and the extent to which those purposes have been achieved; and
- (l) details of all consultancies and contractors including consultants/contractors engaged, services provided, and expenditure committed for each engagement.

As a public health service established under section 181 of the Health Services Act 1988 (Vic), Calvary Health Care Bethlehem report to the presiding Ministers for Health and Ambulance Services during the financial year 2023–24. The functions of a public health service board are outlined in the Act and include establishing, maintaining and monitoring the performance of systems to ensure the health service meets community needs.

Specifically the metropolitan health services comprise the denominational hospitals and public health services, as listed in Schedule 2 and Schedule 5 respectively of the Health Services Act 1988. Schedule 2 is applicable to denominational and schedule 5 is applicable to public health services.

Fulfilment of legislative requirements

The annual report of Calvary Health Care Bethlehem is prepared in accordance with all relevant Victorian legislation. This index has been prepared to facilitate identification of Calvary Health Care Bethlehem's compliance with statutory disclosure requirements.

Legislation	Requirement	Page reference
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Management and structure

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Financial information

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Legislation

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Calvary

Kooyong Precinct
Health Care Bethlehem

CALVARY HEALTH CARE BETHLEHEM - CALVARY KOOYONG

476 Kooyong Road | Caulfield South VIC 3162