

Wellvisions

Summer 2017/18

Innovative device set to revolutionise spinal surgery

New 3D screw to greatly improve
patient recovery

Surgical oncologist named Scientist of the Year

Director Breast Cancer Research,
Professor Christobel Saunders,
received this prestigious accolade

Indocyanine Green for Sentinel Lymph Node Mapping

New technology to reduce risk of
cancer spreading



ST JOHN OF GOD

Subiaco Hospital

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Message from the CEO



It brings me great pleasure to share with you some of the incredible achievements of St John of God Subiaco Hospital in this latest issue of Wellvisions.

Showcasing the advances we are making in care, research and medical techniques is an important element in continually enhancing our culture of excellence.

As Chief Executive of St John of God Subiaco Hospital, I have the privilege of leading the hospital and its services into the next stage of development, building on the 120-year legacy of delivering exemplary hospitality, compassion, respect, justice and excellence.

My vision for our future is an evolution of the existing culture of excellence in every respect, bringing together clinical care and hospitality to offer genuine person-centred care. This includes research and academic leadership ensuring that patients receive cutting-edge therapies and opportunities to participate in trials.

As a member of the St John of God Subiaco Hospital community, your contribution as a volunteer, donor, caregiver, doctor or patient is integral to our success.

We continue to build a strong reputation as a comprehensive cancer service and demonstrate leadership in a number of clinical and research areas, as highlighted by some of the articles in this issue.

Professor Christobel Saunders, who was recently named a joint recipient of the 2017 Premier's Science Award for Scientist of the Year, is the driving force behind the Continuous Improvement in Care – Cancer Project. This project aims to identify and measure outcomes of care that are most important to cancer patients beyond standard treatment regimes.

Our doctors and a team of surgeons are playing an integral role in the development of an innovative device that could greatly improve the recovery of severe bone fractures and complex spinal surgery, particularly for people with weak bones.

With such talent, drive and commitment to improving patient care and outcomes, and a clear vision of where we are going, the future looks brighter than ever.

Professor Shirley Bowen
*St John of God Subiaco Hospital
Chief Executive Officer*



Professor Gabriel Lee and
Dr Matthew Oldakowski (PhD)

New 3D bone screw set to revolutionalise spinal surgery

Surgeons at St John of God Subiaco Hospital are helping to develop an innovative device that could greatly improve recovery from severe bone fractures and complex spinal surgery, particularly in people with weak bones.

The device is a titanium expandable bone screw, which allows stronger bone fixation than a traditional screw, improving safety during surgery and reducing the chance of complications.

It has been designed using 3D printing technology as part of a research and development collaboration between St John of God Subiaco Hospital, Royal Perth Hospital and Curtin University, with support from The University of Western Australia and University College London.

St John of God Subiaco Hospital's Head of the Neurosurgery and Spinal Surgery Department, Professor Gabriel Lee is an

integral member of the development team and says the device will not only improve outcomes for patients but contribute to a more sustainable and efficient health system.

"A spinal stabilisation and fusion may be required to treat a variety of conditions, including traumatic fractures, spinal degeneration, deformity and tumours," Professor Lee said.

"During these procedures a number of bone screws are typically implanted to stabilise the spine. These screws need to be placed carefully as they are often millimetres from critical blood vessels or



nerve structures, and they need to be interconnected by plates or rods.”

“However, elderly and osteoporotic patients may have quite weak bone, which causes screws to loosen or pull out over time. This significant complication can result in worsened pain and neurological disability – often requiring further surgery. This is costly and adds to the burden of the health system.”

St John of God Subiaco Hospital is co-funding a postdoctoral research fellowship with Curtin University for PhD student and biomedical engineer, Matthew Oldakowski, who is designing the expandable screw.

Mr Oldakowski said the patented design of the screw is at the heart of its functionality and has been made possible in part by the development of 3D printing with titanium.

“The novel design allows the screw to be easily expanded and able to be safely removed if required, which sets it apart from other expandable screws currently in the market,” he said.

The design is seen as platform technology, which may be translated for use in orthopaedic surgeries throughout the skeleton.

Orthopaedic surgeon Professor Markus Kuster is leading an investigative study to evaluate the use of the expandable screws in hip surgery.

The project was recently awarded a Development Grant of \$414,000 by the National Health and Medical Research Council, which will allow additional safety testing in the laboratory to strengthen its commercial potential.

The researchers aim to start a clinical trial in three years.



New program to place WA at forefront of cancer care

A ground-breaking program that will fundamentally change approaches to cancer care in Western Australia, being led by St John of God Subiaco Hospital's Director of Breast Cancer Research Unit, has received a \$750,000 grant from the Cancer Research Trust (CRT).

Professor Christobel Saunders, who was recently named a joint recipient of the 2017 Premier's Science Award for Scientist of the Year, is the driving force behind the Continuous Improvement in Care – Cancer Project.

The project aims to improve patient care based on the emerging concept of values-based health care delivery, which encourages continuous improvement in value and structure of care.

"Initially we will identify and measure outcomes of care that are most important to cancer patients beyond standard treatment regimes," Professor Saunders said.

"For example, a patient with prostate cancer may place their concerns about impotence and incontinence as important as surviving the cancer."

"The information will be then used to embed quality improvement and research into models of care to enhance patient outcomes."

The program will initially focus on four common cancers (colorectal, breast, prostate and lung) as well as one uncommon cancer (ovarian).

St John of God Subiaco Hospital, St John of God Midland Public and Private Hospitals and Royal Perth Hospitals are expected to be test sites for the program.

Professor Saunders said a key component of the program will be engaging with clinicians and consumers to ensure the best outcomes.

"The program will also involve health services and researchers in collecting measurable data, generating and trialling new interventions, and implementing findings as quickly as possible."

CRT Executive Officer Eleonore Fuchter said Professor Saunders' program will revolutionise cancer care in WA through the development of new, efficient and effective data collection and "interrogation systems", which will directly improve the lives of cancer patients.

"This is a flagship program that is cutting-edge in terms of patient care, placing patients at the centre of the cancer care continuum. It will place cancer care in WA at the forefront of Australian and international best practice in improving care for cancer patients," she said.

Values-based health care delivery has been highly successful in improving patient outcomes in the United States and Europe over the past few years.

Professor Saunders is internationally recognised as one of Australia's most prominent cancer surgeons. She has contributed to many clinical aspects of breast cancer research, including clinical trials of new treatments and translational research, which puts best evidence-based care into practice.

The program will also involve The University of Western Australia, Murdoch University, Curtin University and the University of Notre Dame Australia.

The CRT grant will be provided over a five-year period, with a possible extension for another four years. It is hoped an additional \$250,000 will be provided from other supporters.

Professor Saunders named joint Scientist of the Year

Professor Christobel Saunders, Director Breast Cancer Research at St John of God Subiaco Hospital, has been named the joint recipient of 2017 Premier's Science Award for Scientist of the Year.

Professor Saunders is an internationally renowned cancer surgeon and researcher with a particular interest in breast cancer including clinical trials of new treatments, supportive care and translational and health services research. Her work has led to better treatments and improved survival and quality of life for people with cancer.

Professor Saunders said she is appreciative of the award and how it highlights the excellent research being undertaken in Western Australia that has a global impact.

"This award is a real win for recognising the importance of clinical medical research in science. It also highlights how we have such great collaborative teams in WA, which not only can do world class research but help change the way we practice medicine by implementing this research - and so improving the lives of people affected by cancer," Professor Saunders said.

"Certainly, from my point of view, this is not an award to an individual but to the team that do cancer research here in WA and across Australia."

St John of God Subiaco Hospital's Chief Executive Officer Professor Shirley Bowen said the accolade is well deserved for the incredible work Professor Saunders is undertaking in breast cancer research and improved patient outcomes.

"The hospital's breast cancer research group is thriving under Christobel's strong leadership and skills," Professor Bowen said.

"Christobel has greatly expanded the research undertaken by our breast cancer research unit, which now includes the full spectrum of breast cancer, from prevention through to survivorship."

Professor Saunders is a consultant surgeon at St John of God Subiaco, Royal Perth and Fiona Stanley Hospitals, a Professor of Surgical Oncology and Head of The University of Western Australia's School of Surgery.

The Premier's Science Awards were established by the State Government in 2002 to honour the outstanding achievements of WA's science and innovation community. Professor



Saunders shares the honour of being Scientist of the Year with Professor Harvey Millar of The University of Western Australia's School of Molecular Sciences and National Director of the ARC Centre of Excellence in Plant Energy Biology.

Breast Cancer Survivorship Clinic helps women to thrive

The Breast Cancer Survivorship Clinic, which opened in 2016 thanks to support of the St John of God Foundation, is positively impacting the lives of hundreds of breast cancer survivors.



Fiona and Erica Hancock

St John of God Subiaco Hospital is the only private hospital in Western Australia to offer a cancer survivorship clinic, integrated with the clinical oncology services. In doing so, the Clinic helps to improve the long term outcome of people affected by breast cancer.

One in eight Western Australian women will be diagnosed with breast cancer and since opening, the Clinic has so far helped more than 43 people from across the state.

Fiona Hancock is a patient of the Breast Cancer Survivorship Clinic and says it has made an extremely difficult time in her life much easier to handle.

In late 2012, Fiona made a doctor's appointment for what she thought was a cold. Instead, she was delivered much more serious news.

"I not only had pneumonia but also multifocal breast and lymph node cancers," Fiona said.

"It was a really hard day, but the hardest thing for me, was having to explain to my daughter Erica, that I would be going into hospital a lot and why I would be losing my hair.

"However, with the wonderful support of my husband Richard, my mother Janet, family and friends, I felt that I could get through it all," she said.

Fiona went through multiple facets of treatment from surgery, to chemotherapy, radiotherapy as well as a reconstruction – all completed under the multidisciplinary team at St John of God Subiaco Hospital.

"The service was excellent; all the nurses were so lovely. I found that having access to a large range of services at the one place made the days I had treatment easier and more comfortable," Fiona said.

"The support I received was incredible. Everyone gave me hope all the way through. It was such a positive environment."

Fiona completed her treatment at the Bendat Family Comprehensive Cancer Centre, after which she was recommended to the Breast Cancer Survivorship Clinic.

The Clinic addresses the patient's individual problems following treatment, and looks to use the cancer experience as a catalyst to improve a patient's general health and lifestyle and obtain optimal well-being, shifting the focus to thriving.

"The clinic was so comprehensive and tailored to suit my needs," Fiona said.

"The full experience I received from my first treatment, all the way through to the breast cancer survivorship clinic post-treatment was exceptional. Everyone at St John of God Subiaco Hospital really helped me to thrive, not just survive."

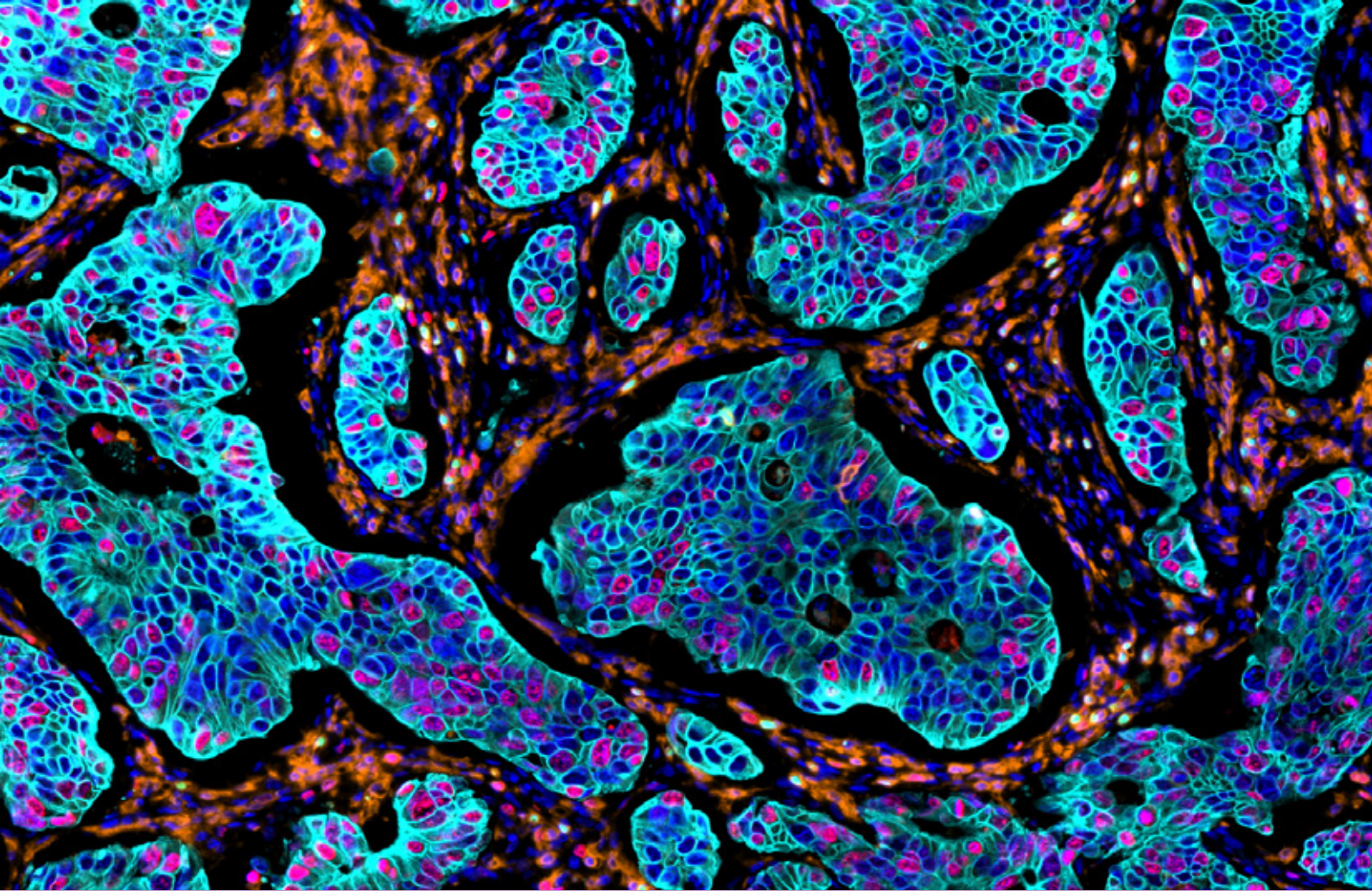
"It is because of the latest research and programs that I received the best treatment and learnt how to manage my life after cancer.

"I am so grateful that I can be here to spend time with my family," Fiona said.

“

The support I received was incredible. Everyone gave me hope all the way through. It was such a positive environment.

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Immune cells in colon cancer tissue captured using fluorescent slide scanner funded by Bright Blue – The Police Commissioner’s Fund for Sick Kids for the Telethon Kids Institute Western Australia.

TissueGnostics: A Western Australian First

Researchers at St John of God Subiaco Hospital are the first in Western Australia to have access to a new TissueGnostics Workstation that enables more accurate cancer diagnosis and treatment.

The St John of God Foundation has partnered with the Tonkinson Research Fund, which supports medical research into colorectal cancer to improve the lives and treatment of people with this disease, to purchase the system, which is now in use.

Colorectal cancer, also known as bowel cancer, is the fourth most common cancer diagnosed in Western Australia, accounting for 10 per cent of all cancer cases.

Advances in cancer diagnosis and treatment increasingly rely on the complex characterisation of the tumour and of the cells surrounding it.

In recent years, laboratory techniques have been developed to allow detailed assessment of cells in tissue samples such as tumour samples and diagnostic biopsies.

Through the new TissueGnostics Workstation, researchers now have access to enhanced and sophisticated analysis of samples.

St John of God Subiaco Hospital’s Colorectal Cancer Research Group Fellow, Dr Melanie McCoy, said this new technology places the hospital at the forefront of cancer research and patient-centred care.

“The system is the first in the state and will enable comprehensive analysis of tumour tissue on a level not previously possible in Perth,” Dr McCoy said.

The workstation will provide benefits to a range of current and future cancer research projects, particularly within the colorectal and gynaecological cancer research programs.



Indocyanine Green for Sentinel Lymph Node Mapping

St John of God Subiaco Hospital is the first facility in Western Australia to utilise new technology that can reduce the risk of uterus or endometrial cancer spreading to other parts of the body.

Dr Stuart Salfinger, Deputy Head of Department of Gynaecology, is the first gynaecologic oncologist in the state to use Sentinel Lymph Node Mapping, which can identify the first lymph node (sentinel node) that drains from the area and could spread the cancer around the body.

The sentinel node is identified using a fluorescent dye known as Indocyanine Green (ICG) and a near-infrared camera.

“Cancers in their early stage can have about a five per cent chance of being present in the lymph nodes (or glands) in the pelvis, which can spread the cancer,” Dr Salfinger said.

“However, lymph nodes are only removed routinely during surgery in patients who have a high-risk disease or an unusual CT scan, as about 20 per cent are of patients at risk of lymphedema or leg swelling.

“This means that a number of patients will have cancer in the lymph

nodes that is not detected with standard surgery, which may increase the risk of the cancer returning.

“Studies have shown that by identifying and removing the sentinel node, we have the best chance of identifying any early spread of the cancer and undertaking appropriate treatment.

“The removal of only the initial draining lymph nodes does not carry the same high risk of lymphedema or leg swelling.”

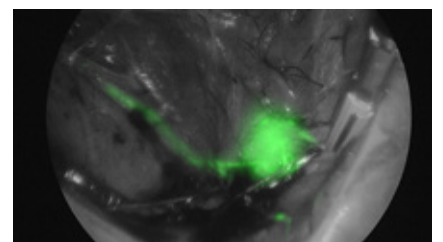
The sentinel node is identified during laparoscopic hysterectomy (key hole surgery) to remove the uterus and treat the cancer.

The dye is inserted during the procedure and an infra-red camera is used to identify the sentinel node, which is then removed laparoscopically.

As it is minimally invasive surgery, most patients are usually home within one to two days.

Dr Salfinger said ICG has been used safely for many years for studies of blood vessels in eyes, heart function and liver blood flow.

Similar technology is used to identify the sentinel node to stop the spread of breast cancer.



Stage Two Hospital Refurbishments Commence

The second stage of redevelopment at St John of God Subiaco Hospital is commencing in early 2018 with the expansion of the day chemotherapy unit and refurbishment of the north block.

Chief Executive Officer Professor Shirley Bowen said the development will enable the hospital to continue providing exceptional person-centred care to a community with increasing needs for more complex medical and surgical interventions.

"After extensive planning, it is wonderful to be moving ahead with the second stage of our redevelopment, now the stage one demolition is complete," Professor Bowen said.

"This development is part of our core focus on providing high quality patient care in first class facilities."

The expansion of the day chemotherapy unit, known as Ivy Suite, will see the unit grow from 16 bays to 24 bays. The upgrade of the area will resolve some existing issues including wayfinding, patient lounge experience and availability of bays, to improve the service for patients.

"This expansion of oncology services allows us to confidently respond to growth opportunities within the community by aligning capacity availability with demand," Professor Bowen said.

The second part of the project is the refurbishment of the north block, to improve private room capacity and rejuvenate the wards and communal areas.

The scope of work includes converting 17-shared rooms to single rooms and expanding the ensuites serving these rooms. All other ensuites will be upgraded with new fittings, flooring, wall vinyl and paint for a fresh new look. In addition, new televisions, furniture, linen and curtains will finish the rooms providing a higher quality experience for patients.

The primary focus of this refurbishment is to enhance patient care by improving the hospital's amenities with a more contemporary environment. This will further enable the hospital's aspiration to be Australia's leading private hospital, and build on our impressive history and reputation.

If you have any queries on the redevelopment, please email subiredevelopment@sjog.org.au.

Dietary tips for shift workers

St John of God Subiaco Hospital's Allied Health Manager and Advanced Accredited Practising Dietitian Charlene Grosse provides her top dietary tips for shift workers.



As people work irregular hours, their daily routine including regular eating and exercise is interrupted. Poor eating habits combined with a lack of physical activity can put anyone at greater risk of developing chronic diseases including type 2 diabetes, heart disease and some cancers.

Research shows that shift workers have a higher prevalence of being overweight and more likely to consume starchy foods, alcoholic drinks, coffee and sweets.

When doing shift work, some may find it hard to know when and what to eat. It can also be hard to find enough time to exercise regularly. The following four tips can help assist to stay healthy and alert when on shift work.

1. Aim to maintain regular eating patterns, regardless of your shift.

Eat according to the time of day and be careful not to overeat on the job. Eating a large meal at work can make one feel sluggish, tired and can cause heartburn, wind or constipation.

For day shift: have a breakfast meal when you wake, lunch and snack during the shift and a small meal before bed to prevent waking hungry.

For night shift: have a small breakfast to help with sleeping, lunch meal to provide energy for the day, a small dinner meal early in a shift and a small snack later in the shift to help stay alert and energised.

2. Plan ahead.

Being organised is the key to eating well on shift. Set yourself up for success by planning meals for the shifts ahead. Make grocery shopping and meal preparation part of a weekly routine. Cook recipes in bulk and freeze leftovers in single serve portions. All meals should include a balance of protein and low GI carbohydrates.

3. Pack healthy snacks.

Shopping for work is an important part of meal and snack planning. It can be difficult to find healthy snacks at work if the cafeteria is closed after hours, as vending machines often carry high salt, sugar and fat options. Nutritious snacks include cheese and crackers, fruit or a handful of nuts with low fat yoghurt.

4. Choose healthy drinks.

Drink plenty of water to stay hydrated and limit intake of sugary drinks and caffeine. Sugary drinks provide short bursts of energy often resulting in lower energy levels later on. Excess caffeine can affect your ability to sleep. Herbal teas and decaffeinated fluids can be included as part of daily fluid intake.

Good nutrition and fitness go hand in hand so take the time to have a stretch break or walk a few flights of stairs. By eating well and keeping active anyone can help manage the challenges of shift work.



Five common misconceptions about pastoral care



St John of God Subiaco Hospital's Manager of Pastoral Services Suranga Amaratunga corrects some common misconceptions about his profession to give a better insight into the role of professional pastoral practice.

1. Pastoral care is religious work

It's not uncommon for patients to refuse or be reluctant to have a visit from pastoral care workers. There are many reasons this could happen, but a common one is the misconception that care is associated with organised religion. While this was true many years ago, it is not the case anymore.

Today's pastoral care practitioners are not always religious or associated with any particular religious affiliation. They could be professionals with a background or experience in a range of professional fields such as teaching, nursing or counselling. This non-denominational approach allows them to cater for and meet the needs of patients from all walks of life and faith backgrounds.

2. Pastoral care is only for patients receiving end of life care

Often people who are experiencing terminal illness and death reflect on their world of relationships and achievements. They may be curious to explore end of life discussions as they consider their own purpose and legacy of life, the wellbeing of those left behind, and their desire to make a meaningful transition from life to death. Understandably, pastoral care plays a significant role in this space.

However, people admitted to hospital for non-life threatening illness may also be confronted with other realities of change and loss at various levels. This may include changes to lifestyle, self-identity, body image, relationships and financial stability as well as overall uncertainty of the future state of their health and wellbeing. These and other external or internal factors can lead to perceived loss of control and

power, which can leave them feeling helpless and profoundly sad.

Pastoral care can support these patients through a sensitive context in which patients are able to hold on to the disrupted story of their life and yet find the strength and hope to reshape their life's meaning and connections.

3. Pastoral care is a form of therapeutic counselling

It is understandable that many people who are already feeling vulnerable may be apprehensive about additional therapies. While pastoral care shares similar values and skills of therapeutic counselling, it greatly varies in its focus, objectives and practice.

The focus of pastoral care is on helping patients make sense or meaning of their hospital experience. It does this by providing an opportunity for patients to give expression to their deepest worries and hopes and therefore creating favourable conditions to facilitate healing ('wholeness') and maintain their connection to their spirituality.

If pastoral care practitioners feel that patients need psychosocial support beyond what pastoral care can provide, they will refer patients to other relevant professionals, which may include counsellors.

4. Pastoral care is not a part of the health care team

Pastoral care is an integral part of the health care team and can be effective in helping patients cope with emotional distress and maintain a balanced perspective on life. This in turn helps to improve recovery and minimise suffering.

The St John of God Subiaco Hospital pastoral services team work closely with members of the health care team to support patients during challenging times. The team recognises that emotional, spiritual, psychological and social needs exist within a person that contribute towards their overall quality of care.

By listening and honouring patient's experiences, often not related to their illness, pastoral workers make it possible for patients to validate who they are as human beings. This adds another dimension to health care where patients are given the opportunity to be seen and heard beyond their disease.

5. Pastoral Care is best reserved for professional pastoral practitioners

Although pastoral care practitioners have specific training and experience to deliver pastoral care in a professional context, any action that contributes towards a positive experience of healing and wellbeing can be considered pastoral care.

Accordingly, any action of care can also be pastoral if it is coupled with genuine concern for the other person's wellbeing. While some may be reluctant to recognise such simple acts of kindness, generosity and love as pastoral due to its association with religious connotations, we recognise them as pastoral care as it supports the person to see the beauty of each unique individual.

Healing and growth happen in the context of a community of positive relationships and we all are and can be active participants in positive conditions for improved quality of life or death.

Subiaco Ball



Medical Practitioner Soirée



Health and Medical Research Sundowner

The Research Sundowner helped to mark St John of God Subiaco Hospital's third annual Health and Medical Research Week, bringing together the research community comprising clinicians, lead investigators, scientists, foundation benefactors and research caregivers.

Professor Steve Webb, Chair of the Research Management Committee and Director Clinical Trials, launched the 2016/2017 Health and Medical Research Annual Report at the event.





Jill Kelly

Nurse Practitioner Pain Medicine

LENGTH OF EMPLOYMENT

More than 20 years at St John of God Health Care, initially at St John of God Murdoch Hospital for nine years before moving to St John of God Subiaco Hospital in 2008.

CAREER DESCRIPTION

I commenced my career as an Enrolled Nurse in orthopaedics for 12 years. I was encouraged to complete my Registered Nursing studies by my manager at Murdoch, before undertaking my first Masters in Pain Medicine at the University of Notre Dame (Fremantle).

My current mentor, former Director of Anaesthesia and Pain Medicine Dr Joe Pracilio, in collaboration with nursing administration at Subiaco then supported me to complete my second Masters through Curtin University to become a Nurse Practitioner.

I have been in my current role at the hospital since April 2012 and was the first Nurse Practitioner to work in a private hospital in Australia.

DESCRIPTION OF ROLE

My role can be divided into three areas: the clinical work I undertake, teaching and research and nursing leadership.

Clinically, I treat in-patients who are referred to the Acute Pain Service, averaging 80 to 100 patient visits weekly.

These patients are generally 24 hours post-operative and experiencing either high levels of pain or adverse effects to prescribed analgesia. Acute pain management intervention for patients admitted to hospital from specialist rooms or other St John of God Health Care divisions suffering acute pain, awaiting surgery has recently become an important part of my role.

I see the significant association of pain and anxiety in many of our patients, which has the potential to influence patient outcomes whilst in hospital and post discharge. Often it is the little things that count in the management of these patients. Establishing trust with patients, listening to concerns, and providing explanation and follow up, are key factors in successful patient pain management, in addition to prescribing a safe and effective pharmacological management plan.

I am an Adjunct Senior Lecturer at the University of Notre Dame's (Fremantle) School of Medicine, teaching the junior doctor workforce and nursing caregivers on ward rounds and providing them the latest, practical knowledge of pain medicine in the classroom.

I am also lead investigator in a study investigating the post-discharge patient experience of 300 surgical day cases from a pain perspective. This study is in partnership with Professor Eric Visser and The Churack Chair of Chronic Pain Education and Research at the University of Notre Dame (Fremantle).

Nursing leadership is an important part of my role. I endeavour to support my nursing colleagues clinically to provide patients with high standards of care. I encourage my nursing colleagues to pursue ongoing professional and personal development opportunities and be the best they can be. Currently we are undergoing many changes in healthcare delivery models of care. As a role model and advocate for nursing I work to promote the diversity and value of nursing roles as key members of the multidisciplinary team.

TYPICAL WORK DAY

No two days are alike as my day is responsive to patients' pain management needs.

I start my day by reviewing urgent cases referred to the service and providing follow up review of patients seen the day before. An important part of my role is to assist ward caregivers in preparing these patients for discharge by providing discharge planning and patient discharge education.

Patients identified as at risk of developing chronic pain or prescribed high dose opioids for discharge may be reviewed in the Nurse Practitioner-led Acute Pain Discharge Clinic seven to 10 days after leaving hospital.

The rest of my workday involves research, policy reviews, project roles and being part of hospital committees.

CAREER HIGHLIGHT

I cannot pinpoint a moment that has been my career highlight as it is an ongoing thing for me.

It is a privilege to work in this role, providing care for our patients who are often at the most vulnerable times of their lives. The rewards of working alongside nursing and medical colleagues to provide care to ensure our positive patient outcomes and experience is the highlight of every working week for me.

In 2013 I was awarded the WA Nursing and Excellence Award: Metropolitan Nurse of the Year, which was a proud moment for me and all who had been a part of my journey to become a Nurse Practitioner.

HOBBIES

I have a wonderful husband and five gorgeous children who keep me very busy. We have also just welcomed our first grandchild, which is such an exciting time for our family. Family time is really important to us, regardless of what is going on in our lives we always share in a weekly Sunday feast together.

We are a keen sporting family with a passionate interest in the AFL and our much loved West Coast Eagles, so we do enjoy regular Melbourne trips to watch the footy, enjoy the great food, coffee, go shopping and catch up with friends.

New Executive Appointments



STEVE COHEN-JONES
DIRECTOR OF BUSINESS AND SERVICE DEVELOPMENT
 St John of God Subiaco Hospital

Steve Cohen-Jones has joined the hospital in the newly created position Director of Business and Service Development.

Steve will lead the strategic direction of the hospital through service provision and investigate key business development opportunities for the hospital and its specialists. Steve has extensive experience in sales, marketing and business development through his strong career at Performance on Hand, PharmAust Manufacturing and Expense Reduction Analysts.

His experience in the health industry, most recently at Health Engine and previously through establishing Rokeby GP, is a great fit for the organisation.



DR EVA DENHOLM
DIRECTOR OF MEDICAL SERVICES
 St John of God Subiaco Hospital

Dr Eva Denholm has joined the hospital as the Director of Medical Services. Eva originally trained as a surgeon before being beckoned into medical administration.

As the previous Director of Clinical Services at Fremantle Hospital and the Medical Co-Director at Osborne Park Hospital, Eva is well positioned to lead the medical department.

Her experience as a surgeon combined with medical administration experience is a welcome complement to the executive team.



JENNIFER HEALEY
DIRECTOR OF MISSION INTEGRATION
 St John of God Subiaco Hospital

Jennifer Healey has been appointed the hospital's Director of Mission Integration. She has previously worked as Director of the Office of University Relations at The University of Notre Dame and Principal of Loreto, Nedlands.

Jennifer brings a wealth of experience in leadership: theological, educational, administrative and pastoral. Her professional qualifications include a Master of Religious Education, Bachelor of Education and Diploma of Teaching.



ANDY WHEBLE
DIRECTOR OF CORPORATE SERVICES
 St John of God Subiaco Hospital

Andy Wheble is the hospital's Director of Corporate Services.

He has extensive experience in operational delivery, project, program and transformational management in both the public and private sectors.

Formerly the General Manager Operations South for Activ Foundation, Andy has worked in patient support services for Serco and Fiona Stanley Hospital. He has also worked in senior operational and project roles in the United Kingdom.

New Heads of Departments

St John of God Subiaco Hospital recently announced several new Head of Department appointments.

Each of these doctors are leaders in their field and are exceptional role models to the hospital's caregivers, colleagues and patients.

Heads of Departments provide clinical leadership to ensure personalised, effective and timely patient care for patients of their specialty. As well as provide strategic leadership and direction, service planning, provision of services and ensure the service provided is of the highest quality, with an emphasis on patient-focused care.



DR RESHMA PARGASS

Director of
Anaesthesia and Pain



MR MING YEW

Head of Department
General Surgery



DR MILLY WONG

Head of Department
Internal Medicine

Professor Webb Honoured with Chancellor's Award



Intensivist and Director Clinical Trials, Professor Steve Webb, has received the Chancellor's Award from The University of Western Australia (UWA).

This prestigious award recognises a sustained and outstanding contribution to the university over many years, outside or beyond one's current duties.

Professor Webb has been with the university for more than 12 years in various roles.

UWA Deputy Vice-Chancellor Research Professor Robyn Owen said his passion for research and compassion for researchers, staff, students and the community, both locally and globally, has upheld and enhanced the high standards to which we should all aspire.

"His consistently professional manner, deep sense of ethics and generosity of knowledge have been invaluable to our university and other institutions," she said.

On receiving the award, Professor Webb said he was delighted and surprised with the honour.

"It's nice to have the work I'm doing acknowledged," he said.

His clinical research interests include the long-term consequences of and recovery after critical illness, resuscitation and treatment of patients with septic shock, management of traumatic brain injury, pathogenesis of septic shock, antimicrobial therapy, acute kidney injury, and choice of intravenous fluids in critically ill patients.



LENGTH OF SERVICE AWARDS

The service and dedication of more than 300 caregivers and volunteers has been recognised at the annual St John of God Subiaco Hospital Length of Service Awards.

A total of 307 caregivers and 15 volunteers were celebrated for their long and committed service.

More than 50 caregivers and three volunteers were recognised for 20 years or more service to the hospital in 2017. One special caregiver has given St John of God Subiaco Hospital an incredible 45 years of service.

Just like the Sisters before them who gave their lives to the service of others, these caregivers and volunteers have shown their commitment and dedication to our Mission.



POMEGRANATE AWARDS

Congratulations to the 11 caregivers who recently received Pomegranate Awards for living the values of St John of God Health Care.

These awards recognise excellence in hospitality and care, and showcase the unique difference of caregivers at St John of God Health Care.

Speedy feedback via text message

St John of God Subiaco Hospital has introduced a feedback mechanism called the Net Promoter Score (NPS) to gain rapid insight into the patient experience.

NPS is used widely and well-regarded in industries such as banking and telecommunications, but rarely in hospitals and its enthusiastic uptake at the hospital is creating opportunities for real time staff recognition and service improvements and importantly, it is giving patients a voice.

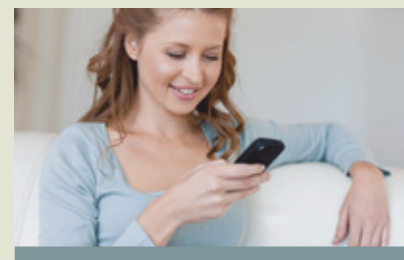
The hospital sends out a follow up text to all its patients within a day of being discharged. It simply asks "On a scale of 1-10 how likely are

you to recommend St John of God Subiaco Hospital?"

The patient is given the option to text back a reason for their score.

When comments are provided, managers are able to recognise caregivers for their outstanding care and any negative feedback is followed up promptly thanks to the real-time functionality of the tool.

Within its first three months of implementation the hospital had



more than 4,500 responses, with about 70 per cent scoring their experience a 9 or 10.

The hospital is grateful to patients and their carers for taking the time to complete the survey and provide feedback.

Annual Press Ganey patient satisfaction surveys will be continued as it provides a more in-depth analysis to support the NPS score system.

Research

2016/2017 HIGHLIGHTS

The latest Health and Medical Research Annual Report is now available at sjog.org.au/subiacopublications



142 publications



89 new research studies approved



79 projects



40 conference presentations



15 external collaborations



3 conference presentation awards



More than 40% of all St John of God Health Care was undertaken by Subiaco Hospital



30% of research undertaken in medical oncology



25% of research undertaken in nursing, midwifery and allied health

Third Annual Health and Medical Research Week

St John of God Subiaco Hospital has brought together leading researchers to share knowledge and skills at its third annual Health and Medical Research Week.

The week, which was held in September 2017, showcases the research undertaken at the hospital and other local research institutes and offers an opportunity for researchers to further develop their skills.

The event attracted a number of high profile researchers including Professor Jane Turner from the University of Queensland, Dr Fennella Gill who



Professor Jane Turner and Dino Cercarelli, Research Operations Manager

won the 2017 WA Nursing and Midwifery Excellence Award for Excellence in Research, and Professor Chris Reid from Curtin University and Monash University, as well as our own researchers Professor Steve Webb, Professor Christobel Saunders, Dr Paul Cohen, Dr Ed Litton and many others.

Hospital research is critical to ensuring clinical care is underpinned by the best

evidence available to improve patient outcomes and develop new levels of clinical excellence.

St John of God Subiaco Hospital is internationally recognised as a leader in research across areas including nursing, midwifery, medical and allied health practices, respiratory, orthopaedics, oncology, cardiology, gastroenterology, intensive care and pain treatment.



MATERNAL VACCINE RESEARCH NEXT FRONTIER AT ST JOHN OF GOD HEALTH CARE HOSPITALS

A maternal vaccine trial to protect newborns against a common respiratory virus, which is the leading cause of paediatric emergency presentations, is underway at three St John of God Health Care hospitals.

The Maternal Respiratory Syncytial Virus (RSV) Vaccine Trial will assess whether a vaccine given to pregnant women can help protect their newborn babies against the virus.

The trial is being led in Western Australia by the Telethon Kids Institute and currently underway at St John of God Subiaco, Murdoch and Mt Lawley hospitals.

Co-investigator and Head of Obstetrics and Gynaecology at St John of God Subiaco Hospital Dr Michael Gannon said RSV was the leading cause of paediatric emergency department presentations as well as the number one cause of admission to paediatric hospitals and intensive care units.

“Maternal vaccination is very much the new frontier,” said Dr Gannon, who is also the Australian Medical Association President.

“The rationale for the current instituted programs for maternal influenza and pertussis (whooping cough) vaccination is that if you vaccinate the mother during pregnancy, she will sustain an immune response and the antibodies will be passively transferred across the placenta to the baby.

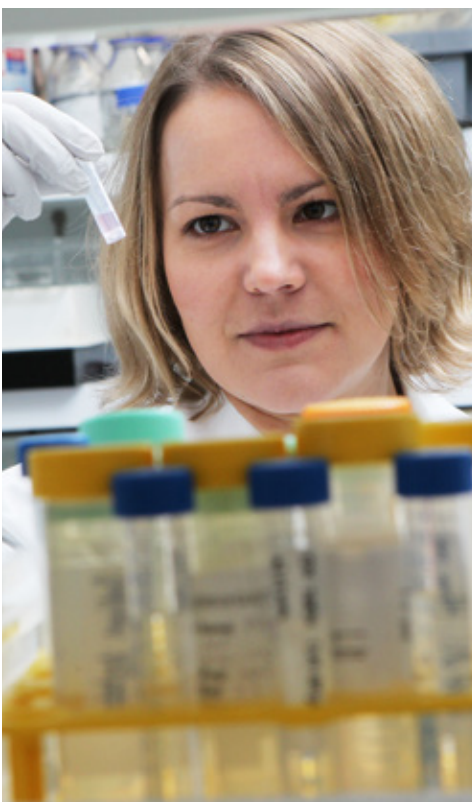
“This will then give the baby protection for those crucial first few months of life.

“This trial is looking to see whether or not maternal vaccination against RSV will give small babies that protection in the first 12 months of life.”

Currently in its second year, robust safety mechanisms have been built into the trial to protect participants.

Dr Gannon said St John of God Health Care’s involvement in this trial highlights the important role the private health care sector plays in teaching, training and research.

“The trial is a great example where women having their babies at a St John of God Health Care hospital can not only do their bit to advance the cause of science, but they are the vanguard of what we hope will prove to be an effective treatment,” Dr Gannon said.



Suzanne Cavanagh Early Career Investigator Grant awarded

Dr Melanie McCoy, Research Fellow for the St John of God Subiaco Hospital Colorectal Cancer Research Group, has been awarded the Suzanne Cavanagh Early Career Investigator Grant.

The \$34,000 Cancer Council WA grant will be used to fund the study ‘Treating bowel cancer – does the immune system have a role to play?’ in collaboration with The University of Western Australia, St John of God Subiaco Hospital and Telethon Kids Institute.

Dr McCoy is working alongside Professor Cameron Platell as co-investigator, to determine whether in some patients the cancer cells release

signals that suppress the immune system, stopping it from attacking the cancer. If so, using new drugs to block these signals might make current treatments more effective.

Dr McCoy said the grant will enable the Colorectal Cancer Research Group to extend the scope of a previous Cancer Council WA funded project investigating how the immune system influences response to chemotherapy and radiotherapy for bowel cancer.

“It will allow us to continue our work in this exciting area of research, and continue to improve outcomes for people with bowel cancer,” Dr McCoy said.

Colorectal Cancer Research Group win two photo competitions

The St John of God Subiaco Hospital Colorectal Cancer Research Group have recently won two notable photographic awards.

The Group's image entitled 'The World of Tumour Immunology', won first prize in the 2017 Australasian Society of Immunology 'Snapshots of the immune system' national scientific photography competition.

The image (figure 1) shows a circular piece of colon cancer tissue 1mm in diameter, stained with fluorescent

markers to highlight immune cells (red), surrounding and infiltrating the tumour (light blue). The small green cells visible among the red cells are regulatory T cells that suppress immune responses.

Dr Melanie McCoy, Tracey Lee-Pullen and Chidozie Anyaegbu from the Group had another image selected for use on the front cover of the 2018 Australasian Society of Immunology Journal, Immunology and Cell Biology.

The image (figure 2) shows colon cancer tissue stained with fluorescent markers to highlight the tumour (light blue) and immune cells (orange). The pink highlights tumour and immune cells (green) in the process of actively dividing. The more sparsely distributed green cells (immune cells) suppress immune responses.

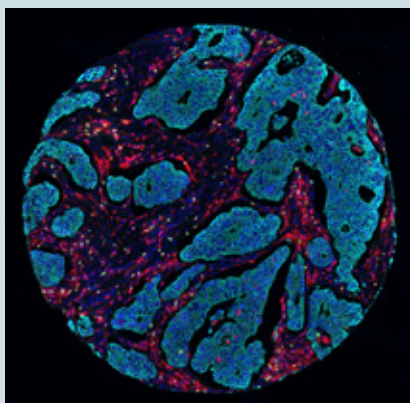


Figure 1

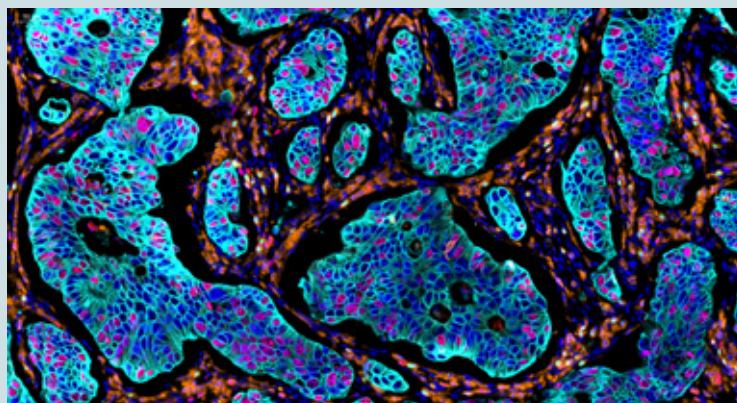


Figure 2

NEW INSULIN SYRINGES RESULT OF HOSPITAL INVESTIGATION

An investigation by St John of God Subiaco Hospitals' Clinical Nurse Consultant Diabetes and Nursing and Midwifery Practice Council (NMPC) member, Kendra Nunweek-Hanlon, has resulted in an international review into the manufacture of insulin needles.

In May 2016, the NMPC asked Kendra to investigate anomalies with blood glucose levels after a ward representative reported to the council that they were not improving despite a patient having an IV insulin infusion through a pump, in situ.

Kendra's investigation uncovered that the insulin needles used to prime the infusion bags were not long enough to pass through the chamber and prime the solution, as the insulin was remaining in the port chamber.

Since the hospital swapped to a larger needle, no further incidents have been reported and the company that produces the syringes are considering developing an insulin syringe that is longer and has bigger gauge as a new product.

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