



Philanthropy Report 2020/21



The Royal
Melbourne Hospital
Foundation



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Welcome

On behalf of the Royal Melbourne Hospital Foundation, I am pleased to present our 2020/21 Philanthropy Report.

Throughout 2021, the COVID-19 pandemic continued to present a second year of significant health challenges for Victoria. The RMH Foundation team were proud to support our frontline colleagues as they cared for patients while wearing full PPE, while they managed the state's largest COVID vaccination clinic (at the Melbourne Convention & Exhibition Centre), as they continued to research the best treatments for the sickest patients, and as they visited patients in the community or used new technologies to monitor them in their homes.

Funds from our successful COVID-19 Emergency Appeal were disbursed and supported a wide range of initiatives, including:

- Rapid expansion of telehealth services
- Home monitoring of COVID-19 patients
- Purchase of iPads so patients could communicate with their loved ones while visitor access to the RMH was restricted
- Upgrades of pathology testing equipment
- And much more.

Although the pandemic has dominated the headlines, there have been many positive and equally memorable developments. Through the generosity of more than

10,000 supporters, The RMH Foundation received donations and revenue of \$45.56 million between July 2020 and June 2021.

This included a transformational Gift in Will (or bequest) from a grateful patient – Mr. John Perrett – who was treated periodically at the RMH for more than 30 years. John's gift of more than \$19 million was the largest gift the RMH has ever received. It will support equipment, research and education and training needs in the Department of Nephrology for many years to come.

Donations over the past year have enabled us to support the RMH in a broad range of ways, funding world-class research and infrastructure, developing our workforce and improving patient and family-centred care. Many of these initiatives are profiled in this report and I hope you enjoy reading about how your support has made a meaningful difference.

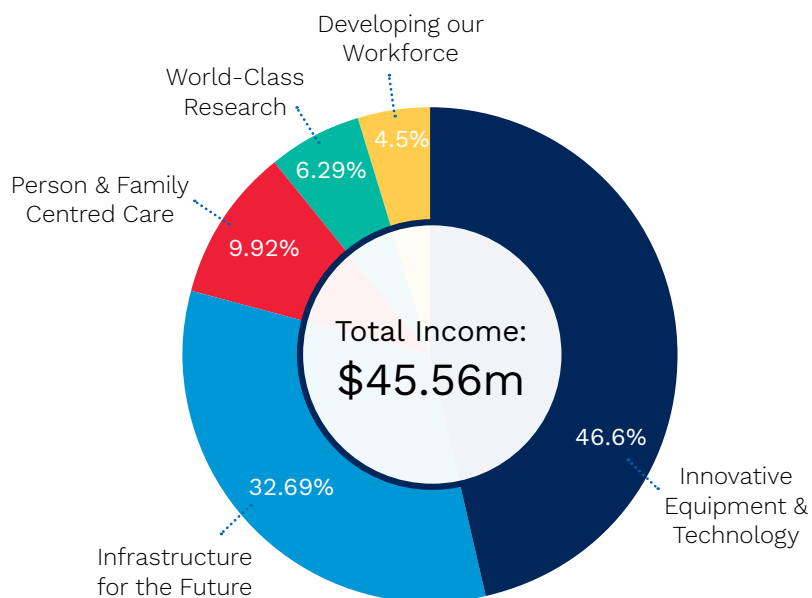
On behalf of the RMH Foundation, thank you to every one of our supporters for the generosity you have shown. We look forward to welcoming you back on site at the RMH soon to demonstrate first-hand the impact of your philanthropy.

Ed Smith
Director
Royal Melbourne Hospital Foundation

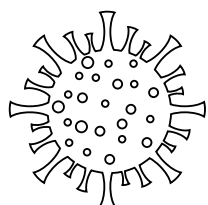
December 2021

Your support

2020/21 Financial Year Summary



In 2020/21 your support enabled us to fund



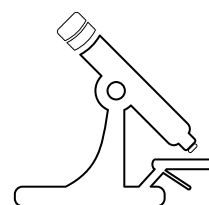
Responding to COVID-19

- A fleet of patient communication devices
- New transport ventilators in our ICU and ED
- Ongoing vaccine development to help end the pandemic



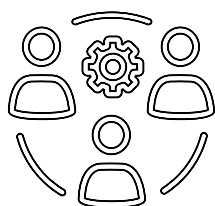
Person and Family Centred Care

- A hospital-wide glucose monitoring system
- Expansion of our telehealth infrastructure
- Sharing the music of the RMH Scrub Choir



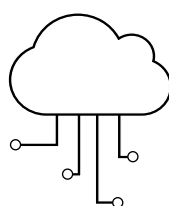
World-Class Research

- New research into Hairy Cell Leukaemia
- Research into how we can improve our hospital services
- The impact of aspirin on bowel cancer



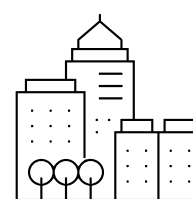
Developing our Workforce

- Two new cardiothoracic fellowships
- Nursing scholarships and awards



Innovative Equipment and Technology

- A cranial electromagnetic surgical navigation station for neurosurgery
- A high throughput digital scanner in pathology
- 3D surgical ultrasound technology



Infrastructure for the Future

- Planning work to expand our ED
- An Australian-first Mobile Mental Health clinic
- Victoria's leading comprehensive MS Centre



RMH pharmacist, Poppy, pre-filling a syringe with the correct dose of COVID-19 vaccine

COVID-19

The Royal Melbourne Hospital has seen its share of challenges through its 170 year history, but no doubt 2020-21 will go down as some of its most difficult years.

A global pandemic and the imminent spread of coronavirus in Australia forced the Royal Melbourne Hospital (RMH) to quickly reallocate resources for the expected surge in COVID-19 cases that could easily overwhelm the hospital system. As hospital admissions began to rise, thanks to support from the community and months of pandemic preparations, it meant the RMH was ready.

“Over the past 12 months, our staff have shown remarkable dedication, compassion and commitment to our values of People First, Leading with Kindness and Excellence Together. I thank each of our staff and volunteers for their work, and thank our community for their ongoing support in this extraordinary year.”

– Professor Christine Kilpatrick AO, Chief Executive



Ventilator interface

Transport ventilators saving lives

In the early days of the COVID-19 crisis, Lloyd J Williams and the Fox Family Foundation made generous five-year commitments to fund Coronavirus preparedness and research.

In 2021, the donation funded the purchase of transport ventilators that would be used across our ICU, Emergency Department and Surgical Theatres. Unlike traditional ventilators which are fixed, these lightweight, battery-powered transport ventilators support patients' breathing in the critical moments while they are on the move.

Thank you to Mr Williams and the Fox Family Foundation. This generous, multi-year commitment has enabled the RMH to remain at the forefront of care and research during the unpredictable COVID-19 pandemic.

Improving mental health supports for frontline health workers during pandemics and other crises

With support from Lord Mayor's Charitable Foundation, a study of frontline health workers during the COVID-19 pandemic is providing understanding of the factors that promote good mental health and wellbeing, the risk factors that contribute to poor mental health, and informing the design of supports for future crises.

Worldwide, as millions of people stayed home to minimise transmission of COVID-19, healthcare workers did just the opposite. Frontline health workers carried on working at hospitals and clinics, putting themselves at increased risk of infection, illness and death. Internationally, reports from healthcare staff described physical and mental exhaustion, and in some countries infection rates for health workers were as high as 30 per cent. As health systems globally strained under rising infections, Australian healthcare workers called for greater mental health support. Mental health complications pose a major threat not only to frontline health workers – but to Australia's entire healthcare system.

Healthcare workers are at high risk of occupational stress, burnout, depression, and suicide, and the risks to mental health are exacerbated during crisis and disaster events. Poor mental health among health practitioners has far

reaching consequences, affecting not only individuals and their families long-term, but also impacting the quality and safety of clinical care for patients, and disrupting health workforce capacity.

The COVID-19 pandemic has presented unprecedented mental health challenges globally for health workforces. Prevention and risk mitigation strategies are needed to preserve occupational health and safety, and ensure the health workforce is 'future-proofed' against the psychosocial impacts that occur in a rapidly changing work environment and the stressors caused by exposure to risk events.

Associate Professor Natasha Smallwood and Professor Karen Willis identified the urgent need to undertake research to determine the psychosocial impacts of the pandemic on health workers. Seed funding from The Royal Melbourne Hospital Foundation enabled establishment of a website and implementation of a national survey. The Australian Frontline Health Worker Study is the largest global frontline health worker survey, with more than 9,500 responses, and the only Australian research conducted in real-time during the 2020 Victorian Stage-4 restrictions, examining the psychosocial impacts of COVID-19 across the entirety of the health workforce.

In the study's initial findings, 61% of frontline health workers reported anxiety; 58% reported burnout; 28% reported depression; 30% reported having mental health problems before the pandemic; 26% reported increased alcohol consumption and 74% had not sought any help for psychosocial / mental health issues during the pandemic.

A Lord Mayor's Charitable Foundation 'Proactive' Grant is now assisting the research team to rapidly analyse and transform the data collected into health policy guidance. Three phases will translate the evidence for the Australian mental health system into practical solutions.

This research is a vital component of the national response to COVID-19. Supporting and reducing adverse mental health impacts on health workers can reduce the risk of poor patient clinical care and safeguard health workforce capacity during future crises.

Thank you to Lord Mayor's Charitable Foundation for investing in our most valuable asset – our healthcare workers.



Pharmacists drawing up COVID-19 vaccinations at our state vaccination hubs



Drawing by 10 year old, Oliver, from Goonawarra Primary School

Communicating with loved ones during a pandemic

Protecting front line health workers is critical for maintaining our pandemic response, including strict protocols being in place. Unfortunately that has required the heart-wrenching decision not to allow visitors for patients in the hospital, even when they most need the support of loved ones.

While effective in slowing the spread of COVID-19 in hospital, isolation is not without its costs. Understanding patients need to have the support of their families

and carers, the Royal Melbourne Hospital (RMH) encouraged communication via video conferencing technology. While many patients could make video calls using their own devices, there were those who didn't have a smart device, or who were too ill to operate them. With support from the community, The RMH Foundation was able to roll out a fleet of iPads to facilitate video communication for patients.

Thanks to the help of our community, the RMH has been able to maintain best-in-class infection control measures while looking after the mental health of its most vulnerable patients.



A patient using one of our new iPads to communicate with a loved one



An ICU clinician pictured with an ECMO machine which pumps and oxygenates a patient's blood outside the body, allowing the heart and lungs to rest



The RMH Department of Nephrology team

Impact of gifts in Wills

A transformational gift for the Royal Melbourne Hospital Nephrology Department

In the early 1990s John Perrett had a kidney transplant at the Royal Melbourne Hospital (RMH). Back then, the life expectancy for kidney disease wasn't long, but thanks to ongoing research, amazing clinicians and ongoing care, the transplant gave John another 30 years of life – something he never forgot or took for granted.

John was born in Sunshine and grew up in St Albans, riding horses across the paddocks, playing football and tennis. He never left, spending most of his working life as a pharmacist in Main Road West, and (for a time) also working on his father's small farm in Gisborne. John was a savvy businessman and accepted an offer to sell his pharmacy to Amcal. He wisely invested the proceeds in shares and real estate.

John spent his life in a modest three-bedroom home in St Albans which his parents built in 1959.

John was very frugal. Jane, one of John's friends and tenants recalls, "He had this old, old television with a green picture and it had this hum in it and for years we would sit there and I'd say, 'John you would really appreciate the cricket more if you could see it properly'."

Following in his father's footsteps, John was involved in the racing game as part owner of several horses – some were successful, others are still running! He never married and was devoted to his father who John cared for in his final years.

John sadly passed away in September 2020 at the age of 86. At the time of his death he owned five properties in St Albans. He left two properties to his long-time tenants and friends, and the remaining three were donated to the RMH.

"We are forever indebted to John for his transformational gift. His incredible legacy will live on for many generations to come and his vision and generosity will have an enormous impact on all renal patients, particularly in the areas of transplantations, medical and surgical care, equipment and operating theatre refurbishment. We could not do our vital work without people like John," said Associate Professor Nigel Toussaint, Director of Nephrology at the RMH.

The proceeds from John's gift in Will have been invested. Each year, the Department of Nephrology will identify priority projects and research this legacy gift will fund. This will ensure John Perrett's gift achieves the greatest impact for the RMH, its patients and staff for generations to come. We are eternally grateful to John for his transformational gift.



Rollo Morgan
pictured with
his son

Donations in lieu of flowers to help future patients and their families

Rollo Morgan was diagnosed with a disease affecting his kidneys just six weeks after getting married. His kidney failure was understood to be well progressed, dating back to a bacterial infection on a backpacking trip around India 10 years earlier.

Although kidney failure is a disruptive health issue, this didn't stop Rollo living a full life. He travelled extensively and had an abiding interest in the world; a genuine curiosity and love for people, places and life in general. He also had a wicked sense of humour.

In 2012, Rollo's condition deteriorated quickly, resulting in a kidney transplant at the Royal Melbourne Hospital (RMH). The kidney was donated by his incredibly generous late sister, Henrietta. Rollo and Henrietta had a unique bond and her selfless offer of a kidney made their bond even stronger. It gave Rollo's life new meaning.

Eight years later, Rollo unexpectedly passed away. His wife, Claire said, "if it wasn't for the RMH Renal Unit Rollo's journey would have been vastly different. The highly attentive medical care, professionalism and support was second to none. Rollo had huge respect for the RMH and was openly grateful for all the work that they did to better his medical outcomes."

Claire and her two young children will be forever grateful for the medical expertise and care shown at the RMH. To express their appreciation, the family requested donations in lieu of flowers at Rollo's funeral, which will be directed towards research at the RMH to help future patients and their families.

Remembering Helen Mildred Keneley

Helen Mildred Keneley passed away on 15 September 2019. In her lifetime, Helen enjoyed holidays and special occasions at her timeshare in Lake Mulwala with extended family. She was also a regular at the Moonee Valley Bridge Club Thursday afternoon sessions.

When Helen died, she left her estate to four charities she was passionate about, including the Royal Melbourne Hospital, for oncology research. We are very grateful to Helen for her generosity and will ensure that her legacy lives on through ground-breaking research.



Julie pictured with her cat Max

A lasting gift to Dermatology

Six weeks after arriving in Australia from the United States, Julie was diagnosed with Dermatamyositis, an extremely rare inflammatory disease that causes muscle weakness and skin rashes. Her symptoms were atypical which made it more difficult to diagnose.

For many years, Julie was an outpatient in Rheumatology, Dermatology and other departments of the Royal Melbourne Hospital (RMH), undergoing seemingly endless procedures including scans, imaging, intravenous drips and blood tests.

Julie has always seen herself as an optimist and knew that she would get better. She said, “the support given to me by many nurses, doctors and staff was nothing short of amazing and I saw first-hand the compassion and array of services the RMH offers. Everything from translators and home care management to transportation and physiotherapy.”

“Born in the US, I have great respect for the superior and free healthcare that Australia offers to all of those in need. There are so many worthwhile charities, but I love that the RMH supports everyone, regardless of religion, colour, or gender - with no political agenda, just a desire to make people whole, and that means everything to me.”

“I feel really good paying forward the good deeds and lifesaving programs, which is why I have left a gift in my Will to the RMH. The hospital was like a second home to me, a safe haven where I called the staff my friends, and I will be forever grateful.”

A family legacy

The Honourable Margaret Lusink AM (Peg) is known as a trailblazer for women in law. She was the first woman to become a partner in a Melbourne law firm and the first Victorian woman appointed to a superior court of record when she was made a judge on the newly-established Family Court in 1976.

However law wasn't her only passion. After retiring from the bench, Peg sat on the board of a number of hospitals and was the representative of the Euroa Bush Nursing Hospital on the Victoria Bush Nursing Hospitals Association.

When Peg reflected on her life, she didn't have to think too hard before deciding to leave a gift in her Will to the Royal Melbourne Hospital (RMH).

Peg's family ties to the RMH run deep. Her late husband, Dr Graeme Larkins, was a leading medical practitioner at the RMH, and her younger sons, the late Dr Stephen Larkins and Professor Richard Larkins AO, and grand-daughter, Professor Sarah Larkins, all trained at the RMH.

Peg said, “I really admire the role that the RMH plays in the healthcare system of Victoria and Australia and I'm incredibly proud of my family's deep association with this wonderful hospital. It provides world-class care to everyone who needs it, regardless of their financial status. It has dedicated doctors, nurses and other staff who have chosen to work in the public system. Their role in the COVID-19 pandemic has been outstanding.”

“If my gift in Will can help the hospital to continue its wonderful role caring for the sick, training the next generation of health workers and advancing medical knowledge and care, I can ask for nothing more.”



The Honourable Margaret Lusink AM





The Royal Melbourne Hospital Home Lottery grand prize



Person & family centred care

The Royal Melbourne Hospital Home Lottery

Rita Van Seters was camping in outback Queensland when she got the call saying she had won the Royal Melbourne Hospital (RMH) Home Lottery Grand Prize, a \$4M luxury home in Brighton East.

"I said 'you've got to be joking'," Rita said when she received the call from Gold FM's Christian O'Connell.

Having worked in hospitals throughout her career, Rita knew what a challenging year it had been for the RMH.

2021 did indeed see another spike in COVID-19 cases, but it also marked an important medical milestone – the 100th anniversary of the discovery of insulin. Every ticket sold in this RMH Home Lottery went to support patients like Hayley Klein, a young mum who has lived with Diabetes for 23 years since her diagnosis at age five.

“The Royal Melbourne Hospital has a huge COVID-19 ward and has been doing it really tough. I thought to myself that I would show my support by buying a ticket.”

– Rita, winner of The Royal Melbourne Hospital Home Lottery grand prize

"As medical science has advanced over the years, new technologies have given me the freedom and flexibility I need to live a fulfilling life – and I am just so grateful!" says Hayley.

We are proud that in 2020, the RMH Department of Diabetes and Endocrinology was ranked in the top 30 Endocrinology Departments in the world, and number 1 in Australia based on a peer survey performed by Newsweek-Statista.

As one of Australia's busiest public hospitals, supporters of The RMH Home Lottery play an important role in helping us to advance healthcare for everyone, every day. Thank you!

Thank you

A special thank you to some of our most generous donors to the Department of Diabetes and Endocrinology. Andreas Andrianopolous, Beng Hin and Joyce Chew, Lilla Officer and the Officer Family, Monteleone Family in memory of Maria Monteleone and Michelle Coillett. Your generous support has been instrumental in making the RMH Department of Diabetes and Endocrinology the best in Australia.

Mill's Kitchen

Mill's Kitchen was started in 2012 by Melissa Chen to raise vital funds for the Royal Melbourne Hospital (RMH). Melissa has a long, personal connection to the hospital, established when her brother-in-law, Ben Fitzgerald, was treated for a brain tumour and passed away at the age of 31.

Through her love of food, Melissa and her family have hosted Chinese cooking classes and events for hundreds of people in Melbourne, which has supported cutting edge technology and equipment at the RMH.

In 2019, Melissa raised over \$200,000 for the ICU waiting room refurbishment, providing a space of comfort, warmth and contemplation for families and loved ones experiencing enormously challenging times.

Her latest philanthropic goal is to raise \$100,000 to refresh the public areas of Cyril Jewell House and Boyne Russell House, two public Residential Aged Care facilities managed by RMH. These funds will be used to create warm and welcoming spaces for the residents to wander, relax and socialise.

Unfortunately, due to lockdowns in Melbourne, the fundraising dinners have been put on hold, but are always top of mind for Melissa. We thank her for her dedication and commitment to improving patient care in the RMH.



Melissa Chen (left) hosting a dinner to raise funds for the RMH ICU



Members of the RMH Scrub Choir



The Royal Melbourne Hospital Scrub Choir

Mrs Barbara Haynes OAM has been a patron of Music Therapy at The Royal Melbourne Hospital (RMH) for many years. In that time, the program has grown significantly, providing countless hours of clinical Music Therapy sessions at patients' bedsides and providing live music across the hospital.

Barbara's support has enabled Music Therapy sessions at the bedside of people who have experienced major brain traumas, like Sophia.

When the Music Therapy team first saw Sophia on the stroke unit, she had lost her ability to speak after her stroke. The music therapist sat at her side and began to sing songs from Sophia's home country, Russia. These Russian songs instantly connected with the well part of Sophia's brain, and she began to spontaneously sing along. The joy on her face, as she reconnected with her voice and sang with the music therapist, was transformational.

Stories like this would not be possible without the support of people like Barbara who believe in the healing power of music and the skill of music therapists to connect with patients.

Barbara is truly a member of the RMH Music Therapy team. She is easy to talk to, happy to explore new horizons in music and available to engage with other potential supporters of our program. Barbara's passion for Music Therapy, and her in depth understanding and belief in its role for recovery and wellbeing, has enriched so many lives. Thank you.

Australia's first Dermatology Telehealth Service for Aboriginal and Torres Strait Islander communities

Skin infections are a cause of significant morbidity and mortality among Aboriginal and Torres Strait Islander people. Provision of service to regional centres is insufficient to meet the need in community. Even in metropolitan centres, there is a gap in the provision of culturally-appropriate care which may further reduce access.

In 2020, the Royal Melbourne Hospital (RMH) introduced Australia's first dermatology telehealth service dedicated to Aboriginal and Torres Strait Islander

communities. This service was generously funded in-part by an independent medical grant from Janssen Australia and New Zealand.

The dermatology telehealth service is designed to treat Aboriginal and Torres Strait Islander people from Aboriginal community controlled health services in Melbourne, as well as regional and rural areas of Victoria.

This service is a crucial first step to address the significant gap in access to specialist dermatology services experienced by Aboriginal and Torres Strait Islander people. Thank you to our funding partner, Janssen Australia and New Zealand, for making this Australian-first service possible.

Dry July

2020 will be a year Kelly O'Sullivan never forgets. COVID-19 was running rampant all over the world, Melbourne was in lockdown and Kelly was diagnosed with cancer.

Kelly was fit, active and very social with two grown children and a four-year-old who kept her on her toes. Following a dental check, a lesion was found in her inner cheek lining – this led to an epic ulcer developing in her mouth and then her tongue. When her pain became unbearable, she was ordered to come into the Royal Melbourne Hospital (RMH) where she received a stage four cancer diagnosis.

Kelly and her husband, Rory, worried about how to tell their son, Winton. "Because it was during COVID-19, we had this extra thing of him watching or hearing news and it was always about the pandemic. When we had the chat about mom being sick, he said, 'Oh, have you got COVID-19, Mum?' And I said, 'No, I have cancer'. He said, 'Oh, phew.' He was relieved. Cancer was the better option to COVID-19," Kelly recalls.

Kelly credits her recovery to the fabulous nurses who became like

a surrogate family to her, the amazing surgeons and more recently, the head and neck support group at the RMH who have become lifelong friends.

Kelly's message today is, "Go to the dentist. Put yourself first so you can stay around for the rest of your family and friends, or whoever. Because it's unbelievable. One little thing, it just changes your life so much."

"I owe my life to the amazing staff at the RMH. Going dry for July was the very least I could do in order to raise much-needed funds and awareness for this terrible illness. While my fight is far from over, I am able to find the strength to continue each and every day surrounded by so much love and support from family, friends and the community of Gembrook."

With thanks to the 2021 ambassadors, Kelly and Rory, and everyone who took part in Dry July, the community raised \$52,260.

Since 2009, the Dry July Foundation and the RMH Foundation have collaborated to successfully raise funds for patient care projects and equipment for cancer at the RMH. Thank you to the Dry July Foundation for their support in ensuring the RMH can continue to provide cancer patients with the highest level of comfort and care every day.



Our significant supporters

The Royal Melbourne Hospital Foundation recognises and is deeply appreciative of the generous support received from individuals, businesses, trusts, foundations, community groups and organisations. It gives us great pleasure to acknowledge these contributions below:

Trusts & Foundations

Annie Josephine Wellard Charitable Trust, managed by Equity Trustees
Australian Communities Foundation
Domenic & Anne Gallace Family Fund
Circle of Latitude Foundation
Dry July Foundation
Estate of Milan Kantor
Fight Cancer Foundation
Guthrie Family Charitable Trust
Jack Ma Foundation
Lord Mayor's Charitable Foundation
LMCF – Meg and Frank Sims Fund
Movember Foundation
Norman Beischer Medical Research Foundation
Perpetual Foundation – C.M.Herd Endowment
Sydney Maxwell Wellard Charitable Trust, managed by Equity Trustees
The Clive and Vera Ramaciotti Foundation
The Danks Trust
The Garnett Passe & Rodney Williams Memorial Foundation
The Hugh D T Williamson Foundation
The Ian Potter Foundation
The Leona M and Harry B Helmsley Charitable Trust
The Lynly and Yvonne Aitken Trust
The Muriel and Les Batten Foundation
The Myer Foundation
The William Buckland Foundation
Type1 Foundation

Gifts in Wills

Estate of Claire Brigid Bryan Aird
Estate of Noel Charles Belcher
Estate of Agnes Ferguson Clark
Estate of Elsie Margaret Cleaver
Estate of David Grills
Estate of Helen Mildred Keneley
Estate of Ruth Mann
Estate of Alan Ambrose Murray
Estate of Vicki Peroulis
Estate of John James Perrett

Estate of Clare Sendapperuma
Estate of Graeme Bernard Sexton
Estate of Laura Sillitto
Estate of Jacqueline Pauline Troisi

Endowments

Estate of Allan Watt & Chris Geyer
Estate of Dr Margaret Henderson OBE

Gifts in Perpetuity

Albert Spatt Charitable Trust
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Andrew James Schreuder Foundation
Charles Wright Trust
Doris & Rupert Joseph Charitable Trust
E C Blackwood Charitable Trust
Eliza Wallis Charitable Trust
Ernest & Letitia Wears Memorial Trust
Estate of John Anderson
Estate of Amelia Batten
Estate of Arthur Lindhurst Blannin
Estate of Benjamin Champion
Estate of Henrietta Lucy Cherry
Estate of Edward Davies
Estate of Alfred Herman
Estate of William Dehnert
Estate of Dorothy Winifred Dike
Estate of Irene Daisy Dike
Estate of Ethel Mary Drummond
Estate of Mary Ann Edwards
Estate of George Lawrence Godfree
Estate of Herbert William Hampton
Estate of Louisa Henty
Estate of Ernest John Kebby
Estate of Joseph & Kate Levi
Estate of William Macrow
Estate of Charlotte Marshall
Estate of William Marshall
Estate of Mary Mason
Estate of J R G & E McKenzie
Estate of Margaret Lillian Merrifield

Estate of Isabella Agnes Pritchard
Estate of Muriel Ivey Smith
Estate of Emily Vera Winder
Estate of John Frederick Wright
Estate of Ephraim Yoffa
Eugene & Janet O'Sullivan Trust

Grant Bequest

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Joseph Herman Charitable Trust
Joseph Kronheimer Charitable Fund
Louis Berner Charitable Trust
Louis John Wahlers Trust Fund
Martha Miranda Livingstone Fund
Mary Evelyn Bowley Charitable Trust
Mary MacGregor Trust
Mary Symon Charitable Trust
Mr & Mrs Simon Rothberg Charitable Trust
Thomas B Payne Fund
Werge Batters Perpetual Charitable Fund
William & Mary Ievers & Sons Maintenance Fund

Major Benefactors

Mr Andreas Andrianopoulos
The Fox Family Foundation
Mrs Greta Goldblatt
Mr Geoffrey & Mrs Jan Hamilton
Mr David Johnston & Mrs Barbara Haynes OAM
Ms Katy Honig
McNally Family Foundation
Diana Morgan AM
Alan Officer, Georgina Officer & Anna Blanche
in memory of Lilla Officer
Price Family Foundation
Priscilla Kincaid-Smith Festschrift Fund
Mr Mark Robertson OAM & Mrs Anne Robertson
Mr Lloyd & Mrs Suzie Williams

Major Benefactors (Lifetime)

Mrs Sue Clifton
Mr Andy & Mrs Rebecca Drewitt
Dr John & Mrs Diana Frew
Johnson Family Foundation
Ms Linda Nicholls AO
Mr Phuc Nguyen
Ms Nancy Price

Prof Andrew Roberts AM
Mr Hadrianus Setiawan

Major Donors

Mrs Roseanne Amarant
Mr Srinivas Anand
Mr Eugene Arocca
Mrs Kausar Baher & Mr Kashif Ahmed
The Late Mr Wajid Bangash
Mr Warwick Bisley
Mr Ross Blair
Mrs Faize Bol
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Mr Anthony Calabrese
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 Miss Jennifer Harvie
 Mrs Ruth Henkel
 Mr Anthony Hocking
 Mr Doug Hooley
 Mr Gary Hunt
 Ms Elizabeth Hurley
 Mr Mitchell Hurley
 Mrs Thang Huynh
 Mrs Uyen Huynh
 Mrs Margaret Irvine
 Mr Mark & Mrs Sara Kagan
 Miss Olivia Karcoushkas
 Mrs Manpreet Kaur
 Mr Shainal Kavar
 Mr Richard Kennedy
 Mr B Khoo
 Prof Christine Kilpatrick AO
 Mr Danny Lai
 Mr Van Lai
 Prof Katherine Leslie AO
 Mr William Lewis
 Dr Meir Lichtenstein
 Mr Paul Lightfoot
 Mr Minh Le
 Miss Thanh Mai Le
 Mr Trieu Le
 Mr Peter Lemon
 Mrs Tran H Lim
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 Ms Catherine Looney
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 Dr Jean McMullin
 Mr Ron & Mrs Victoria McNeilly
 Mr Paul McSweeney
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 Mr Michael & Mrs Susan Minshall
 Ms Marlene Mogford
 Miss Joan Montgomery AM OBE

Family of the Late Rosalie Mordech
 Claire Morgan
 Louisa Vass & Rodney Morgan
 Mr Stephen Morgan
 Mrs Susan Morgan
 Dr Tony Morton
 Mr Baillieu Myer AC & Mrs Sarah Myer
 Mr Stephen Nethercote
 Prof Harvey Newnham
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 Ms Muoi Quach
 Mr Graham Quinn
 Mr Bruce Sanderson
 Mr Robin Scott
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 Ms Carol Soderstrom
 Mr Larry Stewart
 Mr Russell Stocker
 Mr Richard Stradwick
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 Ms Carina Thomas
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 Mr Greg Tweedly
 Chhim Heang Ven
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Mrs Marian Lawrence
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Mrs Patricia Weickhardt



Nurses undertaking patient handover in our ICU

World class research

Optimising care and outcomes for patients with Crohn's disease

With support from The Leona M and Harry B Helmsley Charitable Trust, the Royal Melbourne Hospital (RMH) is participating in an international multi-centre research study (the USE_IT Study) to validate the benefits of ultrasound examination of the intestine to detect inflammation, response and healing in Crohn's disease (CD) treatment. The research aims to optimise care and improve outcomes for patients with Inflammatory Bowel Disease (IBD), particularly CD.

Crohn's disease is a chronic, progressive autoimmune disease with no cure. Mucosal healing is associated with improved clinical outcomes, such as prolonged remission, fewer hospitalisations and surgical procedures, lower risk of colorectal cancer, and improved quality of life. Achieving mucosal healing has emerged as a major goal of therapeutic intervention in IBD. However, targeting mucosal healing is challenging as it requires frequent, costly and invasive procedures for patients.

Intestinal ultrasound (IUS) is an effective, non-invasive tool used to accurately evaluate disease activity, and assess for the development of complications in IBD and particularly in CD. Given its low cost, minimal invasiveness, and easy repeatability, IUS is gaining traction as a core monitoring tool aimed to guide therapy used to limit CD progression and disease-related complications that commonly occur, even in the absence of symptoms.

Use of IUS at the bedside in combination with biomarkers could improve timely introduction of disease modifying medications and improve patient outcomes.

The USE_IT study has the potential to transform CD care by developing a validated and reliable point-of-care assessment tool to monitor disease activity and treatment response non-invasively. This will improve clinical care, patient safety and satisfaction and reduce long-term disability by facilitating the introduction of appropriate and timely disease modifying medications.

*This study is being led by Associate Professor Britt Christensen, Head of IBD at the RMH

Giving back

In August 2017 Geoff Hamilton was diagnosed with Acute Monocytic Myeloid Leukaemia (AMML). After a three year journey with the Royal Melbourne Hospital (RMH) and Peter MacCallum Cancer Centre (PMCC), including multiple rounds of chemotherapy and a Bone Marrow Transplant from his brother, Geoff was finally declared in 'molecular remission'.

Geoff and his wife, Jan, know better than most the challenges associated with cancer treatment. They also know the importance of research into improving the effects of these harsh treatments. This is why they decided to support a new research program into the effect of Extra Corporeal Photopheresis (ECP) on treating symptoms of Graft Versus Host Disease (GVHD).

ECP is a process where a patient's blood is extracted, the red cells are spun off and returned, while the white cells are injected with a drug which makes the T Lymphocytes more susceptible to UV

radiation. The white blood cells are then exposed to ultraviolet radiation before being transferred back into the body along with the dead T Lymphocytes. This process encourages the immune system to reduce its production of T Cells in order to stop attacking healthy cells.

Anecdotally, many people have found benefits from ECP, but there is not enough scientific evidence to determine whether it should be part of a standard treatment protocol. This research will begin to build the evidence necessary to answer that question.

This isn't Geoff's first experience supporting the hospital. During his 14-month stay on Ward 7B at the RMH, Geoff knitted beanies to raise money for the hospital. Those funds went to purchase sculptures for the ward to give other patients something beautiful to look at while undergoing sometimes gruelling treatments.

Thank you to Geoff and Jan for their generosity after their own harrowing cancer journey.



Geoff and Jan Hamilton on a bike ride at St Helen's



An additional ICU pod has been purpose built for the COVID-19 pandemic response

A learning healthcare system to improve outcomes from intensive care and hospital

With support from The Clive & Vera Ramaciotti Foundations, Associate Professor Adam Deane is creating a true learning healthcare system in Intensive Care. The first of its kind in Australia, the project is leveraging capabilities of the electronic medical record (EMR) and embedding pragmatic trials into a learning health system that will generate new evidence and rapidly translate it into clinical practice to ensure every patient receives the best care available.

Of the flood of research discoveries that could inform clinical practice, it may take up to 17 years for only 14% of research findings to be implemented into clinical care. Uptake of clinical evidence is inefficient because most randomised clinical trials occur in settings that are separated from clinical care and do not always answer research questions that are relevant and meaningful to clinicians, patients, and health systems. In addition, clinicians and delivery systems can be overburdened with providing routine care and addressing multiple other priorities, with limited time for learning about new clinical evidence and integrating it into practice.

Each year 130,000 Australians are admitted to an Intensive Care Unit (ICU) and 40,000 require emergency ICU admission for mechanical ventilation.

The latter cohort has a mortality rate of 25%, and the safety and effectiveness of many therapies administered to these patients is unknown. This situation suggests that we need a different research context for generating and translating evidence into everyday practice.

Associate Professor Adam Deane, Head of Research and Deputy Director of Intensive Care Unit at the Royal Melbourne Hospital (RMH), will develop a learning healthcare system at the RMH to improve outcomes for patients.

A Health Investment Grant from the Ramaciotti Foundations, one of only seven to be awarded nationally in 2020, is supporting the employment of an engineer to maximally utilise the RMH EMR system to capture new evidence generated using pragmatic clinical trials, a study design conducted in real-world clinical practice settings. Embedding evidence from pragmatic trials into the EMR will guarantee rapid translation, or implementation of the findings of the latest research, into a learning health system.

A/Prof Deane's team at the RMH ICU are in a unique position to undertake this project. The RMH is one of Victoria's busiest ICUs, and has patients arriving at any time of the day or night.

This often means that the administration of life-saving therapies must occur outside 'business hours', such as during the COVID-19 pandemic or after motor

vehicle accidents, when critically ill patients are admitted at night or during the weekend for emergency treatment.

“My hope is for the RMH ICU to leverage the EMR to ensure all eligible critically ill patients can be identified for enrolment into a relevant clinical trial. It will also allow rapid implementation of results into clinical practice which then allows us to give patients, who are admitted after trials are completed, the best available treatment based on the latest evidence,” Associate Professor Deane said.

Realising the full potential of the EMR will enable us to identify patients to participate in research projects, regardless of the time they arrive at the hospital.

“I would also like to thank Lloyd J Williams and the Fox Family Foundation who provided matched-funding for this project. Without their support this would not have been possible.”

– Associate Professor Adam Deane, Head of Research and Deputy Director of ICU at the RMH



Clinician using a Computer on Wheels which links to the Electronic Medical Record System



Candice Bigham pictured with her family

Remembering Billie

In November 2020, the All for Billie campaign was launched in honour of Billie Bigham, who lost her life to enterovirus when she was 11 days old – three days after her diagnosis.

“When Billie was a few days old, her symptoms included jaundice, lethargy and poor weight gain, which were initially thought to be due to poor feeding,” said Candice Bigham, Billie’s mum.

“When she developed a fever, further investigation led to her being diagnosed with an enterovirus infection. We had never heard of this type of infection before and didn’t understand it.”

“It’s so important that we improve our understanding of enterovirus infections, which can create great distress for the families they touch. Billie’s death has been devastating for me and my family. It is something I don’t want any other family to go through.”

– Candice Bigham, Billie’s mother

An enterovirus is a virus that predominantly infects the gut. There are many different types of enterovirus infections that cause a wide range of disease in babies and children, including polio, viral meningitis and hand, foot and mouth disease. While most enterovirus infections have mild symptoms, some cases can be fatal.

The All for Billie campaign has already raised over \$10,000 to fund the National Enterovirus Reference Laboratory at the Doherty Institute, to analyse the enteroviruses circulating in Australia using full genome sequencing.

Led by Associate Professor Bruce Thorley, Head of the Laboratory, the project will increase understanding of enterovirus infections in the country through improved characterisation of the circulating strains.

“There are more than 100 types of enterovirus and a relatively short stretch of genetic sequence is usually sufficient to identify one enterovirus type from another. We would like to delve deeper into the enterovirus genome to investigate whether there are key genetic differences within each type of enterovirus that may contribute to the severity of the infection,” Associate Professor Thorley said.

A virtual biobank for low-survival cancers, a vital resource for accelerating translational cancer research

A \$150,000 investment from the Ian Potter Foundation is supporting a Victorian Cancer Biobank (VCB) consortium collaboration to accelerate translational cancer research from target to therapeutic use by building a 'Virtual Biobank', with a focus on low-survival cancers. This digitised repository of biospecimens and associated metadata, will enable sharing and regeneration of valuable resources for the local and international biomedical research community, increasing opportunities for achieving breakthroughs in cancer research.

Rare and less common cancers account for a little over a third of all cancers but close to half (48%) of all deaths. While the clinical outcomes of cancers have generally improved over time, the five-year survival rate for some cancers are devastatingly low, such cancer of the pancreas, lung and brain (11%, 21% and 26% respectively in 2018).

With fewer patient samples, rare and less common cancers pose particular challenges for research. One of these 'bottlenecks' is the lack of availability of large sets of well curated samples. Access to human biospecimens is the game-changer for translating cancer research into improved prevention and clinical outcomes.

Biobanks are vital research infrastructure that are fundamental for productive and translational research in human diseases like cancer. The use of biospecimens and patient specific data in scientific investigation is foundational to translational research. Biospecimens from low-survival cancers are highly sought after, and this initiative aims

**Story continues on next page*



A petri dish being used to study microorganisms for research

to maximise their utility in as many research projects as possible.

Building a digitised repository of low-survival cancer biospecimens and associated metadata will enable the sharing of valuable resources for the wider biomedical research community, increasing opportunities for achieving breakthroughs for improving cancer outcomes.

Funding from the Ian Potter Foundation, via a 2021 Medial Research Grant, is supporting the commissioning of a Leica Biosystems Aperio AT2 automated high-throughput digital pathology scanning system. The digital system will build the capability of Victorian biobanking infrastructure to collect and store 'fit-for-purpose' samples for emerging technologies supporting the 'omics' revolution; and to offer an open access digital imaging service model for a wider group of cancer researchers.

Associate Professor Tony Landgren, Chair of the Victorian Cancer Biobank said: "We expect that we can accelerate research endeavours in low-survival cancer streams by building a 'Virtual Biobank' of digital biospecimens from the VCB retrospective cohort focusing on low-survival cancers, a stockpile of rare specimens from 1300 donors, held as glass slides."

Leanne Graham, Melbourne Health Tissue Bank Manager, said she was excited about the possibilities for the new equipment, which would "guarantee quality control of banked biospecimens, increase workflow efficiencies and improve assurance rates to researchers utilising biospecimens in their cancer research through work practices enabled by digital pathology."

Wayne Ng, Victorian Cancer Biobank Manager said, "The service model sustainability plan includes equitable access to this state-of-the-art digital platform via a fee-for-service model, enabling local researchers to further increase their research and collaborative capacity by sharing digital images."

"Embedding biobanking within a healthcare setting has the potential to address many of the challenges identified in the translational research setting," said Professor Christine Kilpatrick, Chief Executive of RMH.

"As research involving human tissue becomes increasingly personalised, the distinction between the health provider and the researcher is blurring, and hospitals must establish procedures to implement findings into the clinic. Biobanking is integral to the outcomes of translational research – improved health outcomes for patients."



A RMH nurse using a cannula to administer medicine to a patient



Mr David Low featured with a robotic-assisted surgery device called the da Vinci

Developing our workforce

Mr David Low awarded the Royal Melbourne Hospital Thoracic Surgery Fellowship

Thoracic Surgery at the Royal Melbourne Hospital (RMH) is one of the busiest centres for the treatment of lung cancer, chest trauma and benign disorders of the chest in Australia. In collaboration with Peter MacCallum Cancer Centre, our service performs around 600 surgical cases a year utilising advanced surgical techniques, such as minimally invasive surgery and robotics.

One of the cornerstones of this centre is the RMH Thoracic Surgery Fellowship. Established in 2008, the fellowship is awarded to a senior cardiothoracic or general surgical trainee that has completed specialty training and wishes to further enhance their skills in thoracic

surgical oncology and trauma.

In 2020, Mr David Low was awarded this prestigious position. This fellowship program has now helped over 15 emerging surgeons on their path towards managing advanced thoracic conditions, by teaching them the necessary high-end skills not available in standard training posts. This has largely been made possible thanks to our generous industry partners and individual donors.

We would particularly like to thank Johnson and Johnson Medical Pty Ltd for their ongoing and committed support for this position. We would also like to thank Mrs Greta Goldblatt for her very generous contribution to establish the Merwyn & Greta Goldblatt Thoracic Surgery Research Fellowship at the Royal Melbourne Hospital.

“I am both delighted and honoured to be the current Fellow in Thoracic Surgery at the Royal Melbourne Hospital. This 18 month position has given me the opportunity to work at a world leading institution, learn from the best cardiothoracic surgeons in Australia and develop my skills in precision surgery which will support patient rapid recovery. I would like to thank Johnson and Johnson for their ongoing support of this position and for helping surgeons like myself develop and accelerate our careers in thoracic surgery.”

– Mr David Low, RMH Thoracic Surgery Fellow

RISE Nursing Scholarships

Recruitment and retention of skilled, experienced nurses is a fundamental issue, not only for the future of the Australian nursing workforce, but also for the delivery of safe healthcare.

Nurses are highly sought after in the current COVID-19 environment due to new employment opportunities across public COVID-19 screening and vaccination clinics. This, along with pandemic burnout, has led to significant nurse shortages. Having treated approximately 40% of Victoria's COVID cases in 2020, the Royal Melbourne Hospital (RMH) is no stranger to this, and is currently experiencing a critical nursing workforce shortage with 130 vacancies as at July 2021.

To retain our existing nursing workforce and to attract new early career nurses, the RMH is excited to announce 100 new nursing scholarships over the next two years. The Registered Nurses Introduction to Specialty Education (RISE) scholarships will improve financial access to post graduate nursing education and provide new education pathways into speciality streams, including general surgery, trauma, perioperative, ICU, ED, orthopedics, plastics, general medical, infectious diseases, renal, cardiac care, rehab and aged care.

"Attracting and retaining skilled nurses requires the RMH to review our recruiting approach in a highly competitive market. We will soon launch an online advertising campaign across Australia, New Zealand and the UK," said Kristie McKenzie, Director of Nursing Education and Simulation at RMH.

This financial year, we are aiming to raise \$250,000 to offer our nursing workforce fifty post-graduate scholarships to fund the first year of the program.

To launch our fundraising campaign, we are delighted to have support from HESTA, a leading industry super fund, who has committed to the program by funding a number of nursing scholarships.



The late
Rosalie Mordech

The Rosalie Mordech Scholarship

The Rosalie Mordech Scholarship has been awarded since 2017 in loving memory of Rosalie Mordech. In her lifetime, Rosalie was a successful business woman, artist, fashion icon, motivational speaker, cabaret performer, loving wife to Adrian and devoted mother to Jonathan and Samantha. She had a unique generosity of spirit and she gave so much of her energy to her family, friends and other people.

Rosalie was memorable in her determination and took her healthcare very seriously, which helped when she became unwell. Rosalie formed strong relationships while she was a patient at the RMH, particularly with the caring nursing staff who looked after her.

Rosalie's family and friends established this scholarship to invest in the professional development and leadership capacity of nurses at the RMH, and to enhance the patient experience. This is in recognition that a hospital would be simply a building if it weren't for the skill, dedication and care of the talented professionals who look after patients within its walls.

The 2020 and 2021 Rosalie Mordech Scholarship recipients are Maggie Bock and Shinu Kurian. Maggie is the Floor Coordinator, Bed Manager and After Hours Manager in the Emergency Department and she's completing her final year of a Masters in Health Services Management at Monash University. Shinu is the Nurse Unit Manager for the Cardiac Catheter Lab and will begin a Masters in Health Administration at La Trobe University in September.

Thank you to Adrian, Samantha and Jonathan, along with the friends of Rosalie Mordech for carrying on her legacy and continuing to support our nursing workforce.



Clinicians using a high-definition imaging device to map the brain during surgery

Innovative equipment and technology

Advanced technology is improving neurosurgery

Led by Professor Kate Drummond AM, the Royal Melbourne Hospital (RMH) Department of Neurosurgery is at the forefront of brain tumour treatment in Australia and is a major hub for removal of the most complex brain tumours.

With referrals from all over Australia, it is essential that the RMH use the latest technology to provide patients with the best possible care and outcomes.

Thanks to support from our community, the RMH has purchased two new pieces of cutting-edge technology in the past year.

Enabling 'pinless' procedures with a new surgical navigation station

With support from the Muriel and Les Batten Foundation, a Brainlab Kick EM Cranial Electromagnetic Surgical Navigation Station is streamlining navigation for image guided surgery, enabling frameless 'pinless' procedures in neurosurgery.

When operating on the brain, it is critical to avoid damaging the brain regions

responsible for language, motor and sensory functions. Surgical navigation techniques used during surgery enable the neurosurgeon to identify vital areas of the brain to avoid injury and preserve function.

Surgical navigation — also called image-guided surgery, or neuronavigation — is similar in concept to a GPS system used in a car. Both attempt to localise or determine a position in space in the context of the surroundings. A surgical navigation system continuously tracks surgical instrumentation relative to the patient's anatomy and displays the relationship in real time on a monitor during surgery. Neuronavigation has enabled newer and more challenging surgical approaches for cranial (brain) surgery, which in turn have resulted in the need for better and more effective technical tools.

The Kick EM System, generously funded by the Muriel and Les Batten Foundation, is enabling our neurosurgeons to perform straightforward 'pinless' cranial procedures, with reduced trauma, faster recovery times and shorter hospital stays.



“The use of electromagnetic navigation in routine shunt surgery is helping us to eliminate poor shunt placement and over time we expect to see a reduction in shunt failure rates.”

— Professor Kate Drummond AM

“Frameless neuronavigation in neurosurgery is helping us to achieve more accurate placement, fewer complications, and reduce instances of unplanned return to theatre.”

“With this technology, surgeons can rely on intraoperative information during surgery to ensure that they have achieved the objective of the procedure, rather than wait for post-operative images to verify the results. Surgeons are able to react intraoperatively to the surgical situation by verifying what has been done after each step, potentially making corrections during the procedure.”

“The frameless image guidance system is also offering ease of use, flexibility and better surgical site access,” said Professor Drummond.

“Frameless procedures that avoid the use of skull pins provide ease of use with more flexible patient positioning, better access to the surgical site and elimination of line-of-sight issues for surgeons.”

The Kick EM System is in high demand for use in neurosurgical cranial procedures, and is being utilised for all shunt procedures – averaging between one and three surgeries per week.

Improving safety and efficiency with a new syringe driver guard

Thanks to funding from long term major corporate partner, PACCAR Australia, the RMH has been able to increase safety and efficiency in brain surgery, with a syringe driver guard.

A syringe driver, also known as a syringe pump, is a powered infusion pump used by anaesthetists to precisely and continuously administer fluid or medication to a patient during surgery. Medicine is placed in the syringe, and the syringe driver pushes the medication through a small plastic tube into the patient’s body.

During brain surgery, a patient may need to have an Intraoperative Magnetic Resonance Imaging (iMRI) procedure, which is a scan that generates images of the brain. Neurosurgeons rely on iMRI technology to create accurate pictures of the brain to guide them in removing brain tumours and other abnormalities during operations. Unfortunately, syringe drivers are not compatible with iMRI technology and without a syringe driver guard, patients can’t be taken into the room that houses the MRI.

With the purchase of the guard, syringe drivers are shielded from electromagnetic disturbances and can be seamlessly taken into the iMRI room. This new capability has resulted in improved theatre time efficiencies and patient safety.

“My sincere thanks to PACCAR’s Managing Director, Andrew Hadjidakou, and everyone at PACCAR, for once again providing vital funding that has meant we can continue to give our patients state-of-the-art care. We highly value our ongoing partnership with PACCAR and thank them for enabling us to purchase a much needed syringe driver guard. The inclusion of this technology into our operating theatres ensures we can enhance best practice healthcare during every surgery we do,” said Professor Drummond.



A clinician featured with advanced diagnostic equipment

Increasing Victoria's capacity for surgical services delivery and training

With support from the Danks Trust, the fit-out of two new operating theatres at the Royal Melbourne Hospital (RMH) is assisting training of registrar surgeons with 'hands on' learning experience.

The demand for emergency and trauma related surgeries is reaching critical levels – driven by rapid population growth, an ageing population, and the increasing burden of chronic disease and trauma related injuries. Increased medical student numbers has led to a bottleneck in demand for resident and registrar positions. Barriers to expanding clinical placements include the availability of suitably trained health professionals to supervise clinical placements, and a lack of appropriate infrastructure to support medical education in clinical settings.

To meet the escalating demand for the provision of comprehensive surgical services, and to alleviate wait list

pressures, the RMH recently completed construction of two new operating theatres at a cost of \$9million. With philanthropic support we raised \$1.7million to fund the final 'fit-out' with state-of-the-art equipment and technology.

Training registrar surgeons is an important aspect of the public healthcare system. However the 'hands on' learning that's required lengthens operation times compared to operations led by fully qualified surgeons, adding thousands of hours of theatre time and limiting the productive efficiency of our operating theatres. The improved theatre capacity will have significant implications enabling us to balance competing demands from elective surgery and emergency surgery and training needs with limited theatre resources.

With help from the Danks Trust, a \$50,000 grant is assisting us to build our capacity to develop the future surgical workforce.

"Our goal is to make the RMH the premier institution for PreSET surgical training in Australia and New Zealand ensuring that the RMH is a great place to work and to receive care," said Dr Reny Segal.

“This project is a priority for the RMH, and for all Victorians. It will increase our capacity for elective and emergency surgery, help decrease elective surgery waiting lists, and reduce bottlenecks in demand for surgical resident and registrar positions and training.”

– Dr Reny Segal, Medical Specialist and Head of RMH Surgical Educators Group



A nurse administering intravenous fluids to a patient in ICU



The RMH Emergency Department staff

Infrastructure for the future

Expanding our Emergency Department

The Royal Melbourne Hospital (RMH) Emergency Department (ED) treats a wide range of conditions, from the catastrophic through to the relatively minor. No matter what the condition, every patient is equally important, and needs to be addressed in a safe, timely, effective and person centred way.

Ambulatory Care is an essential zone within ED, where patients with minor injuries are treated. Seeing between 70 and 100 patients every single day, it serves the bulk of the patients in our waiting room.

In 2020, the RMH ED took over a nearby space, and we are now in the process of converting it into a larger and much improved ambulatory care space. The RMH, in conjunction with long term partner, BankVic, has invested significantly in the refurbishment, providing additional CCTV for safety, refitting staff work areas and purchasing state of the art equipment. We have also an extra nurse on evening shifts, and expanded our nurse practitioner program to include weekend cover.

The improvements will enhance the patient experience and significantly improve the care of thousands of patients every month.

“A big thanks to BankVic for the enormous support they have provided to the RMH Emergency Department over the years. This valuable investment will allow us to continue innovating and educating our workforce to enhance best practice healthcare.”

– Associate Professor Mark Putland, Director of Emergency Medicine at RMH

Victoria's leading comprehensive MS centre

The Royal Melbourne Hospital (RMH) provides the largest Multiple Sclerosis and Neuro-immunology service in Australia. Offering inpatient and outpatient care to over 1200 patients with MS and other neuro-immunological conditions every year, it also conducts many world leading clinical studies.

With the support of our corporate partners, The RMH Foundation is aiming to raise \$1 million to open Victoria's leading comprehensive MS Centre. This centre will be led by a multidisciplinary team of over 20 staff and aims to integrate clinical and basic research programs in MS and neuro-immunological diseases across the Melbourne Biomedical Precinct.

We have made a promising start and would like to acknowledge significant philanthropic contributions from: Roche, Biogen, Bristol-Myers-Squibb and Alexion.

"Our vision is to seamlessly integrate clinical care, academic research and clinical trials into a comprehensive centre" Professor Tomas Kalincik, Head of the MS Centre at the RMH Department of Neurology.

Creating positive first impressions for our patients

As one of the busiest Emergency Departments (ED) in Australia, our emergency clinicians treat and care for 80,000 patients every year. Our facilities are open 24/7, 365 days per year, and due to such high patient throughput, wear and tear on our facilities is inevitable.

Worn out by thousands of patients visiting our ED waiting room every year, the current seating is no longer fit-for-purpose and the RMH is actively focused on replacing it.

Nelson Alexander's Carlton North office, and WTFN Entertainment have provided much needed funding to enable us to move closer to replacing all seating. Completion of this project will improve the look and feel of the space, via a modern, professional refurbishment that will make for a calm and comfortable space.

Our ED is often the first interaction a patient will have in hospital – we want that first impression to be positive.



Professor Tomas Kalincik



A clinician standing in front of the RMH Emergency Department

Advanced Interventions for Mood Disorder Clinic

The COVID-19 pandemic has taken a toll on the mental health of Victorians. After spending more than half of 2020 in strict lockdown, the Royal Melbourne Hospital (RMH) has seen a significant increase in demand for mental health support services.

Past patient, Brandon, knows too well how frightening it is to hit rock bottom, having suffered a major depressive episode at the age of 19 he attended the RMH Emergency Department.

Thanks to the generosity of our supporters, in June 2021 we raised over \$160,000 to open the RMH Advanced Interventions for Mood Disorders (AIM) clinic. The AIM clinic will be a public mental health clinic right in the heart of Melbourne. It will allow us to offer additional treatments, which are currently only offered in the private sector, and will help us keep up with growing demand for services.

Professor Chris Davey, AIM Clinic Manager and Head of the Department of Psychiatry at The University of Melbourne said, "This will be life changing for so many people who are in desperate need of mental health support."

“When I arrived at the RMH on one of the darkest days of my life, I was fortunate that I had private health insurance. Because of that, the doctor working was able to refer me to specialist care. Imagine if I’d turned up at the hospital that day, feeling like I no longer wanted to be alive, and wasn’t able to access specialist support simply because of my finances. I know the doctors at the RMH would have treated me well and kept an eye on me for a day or two, but after that, their options would have been limited.”

– Brandon, past patient at the RMH

Optus helps launch a new mobile Mental Health Clinic

People with severe and persistent mental illness, such as schizophrenia or psychoses, are overrepresented in Melbourne's long-term homeless community.

The Royal Melbourne Hospital (RMH) is seeking to establish an Australian-first, ambulance-style Mobile Mental Health Clinic. We're aiming to take mental health outpatient care to our communities streets, parks and squats to treat Melbourne's homeless in their lived environments.

The mobile mental health clinic will serve people experiencing who have repeated episodes of care with mental health services. It aims to improve mental health service engagement, experiences of care, medication adherence and reduce relapse rates for street shelterless people.

A growing body of literature and overseas practice supports mobile health clinics as a successful and cost-effective model of healthcare delivery, uniquely positioned to address the needs of vulnerable and underserved populations. While mobile mental health outreach clinics have been successfully used overseas, this will be the first time this approach will be trialled for mental health outreach in Australia.

The purpose-built mobile mental health vehicle will offer a private and safe clinical space to administer medications and deliver clinical healthcare. Aiming to overcome access barriers to treatment for homeless populations, the model will use assertive outreach to be effective in engaging and gaining the trust of vulnerable individuals in their lived environment, be it public areas, squats, or emergency accommodation.

As a bridge between the clinic and the community, the Mobile Mental Health Clinic will address both medical and social determinants of health, and has the potential to play an important role in our evolving healthcare system.



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