

#### Yes, I want to change the lives of Australians living with sensory disorders

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### iStent trial



The iStent device is smaller than a sesame seed.

Glaucoma
is the most
common cause
of irreversible
blindness in
the world.

Treatment aims to lower intraocular pressure (IOP) and typically includes

medication, laser, or surgery. While surgery is a very successful treatment, it is invasive and any surgery comes with a risk of complications. In recent years, minimally invasive glaucoma surgery (MIGS) has become an increasingly popular option of treating mild to moderate glaucoma. It is usually performed in conjunction with cataract surgery. The iStent is a microscopic MIGS device founded by Glaukos that is approved for use in Australia. The iStent Inject® is the second generation of the iStent device and Australia is one of the first countries in the world to have access to it. It can inject a MIGS device smaller than a sesame seed into the eye, to assist with eye pressure and potentially improve vision. With the support of Glaukos, the Eye and Ear has been conducting a randomised controlled trial throughout 2018 and 2019 comparing the effect of cataract surgery alone to combined cataract surgery with insertion of iStent Inject® for 100 open angle glaucoma patients. Eligible patients are sorted into two groups, half receiving cataract surgery alone (50) or cataract surgery with iStent Inject® (50). The recovery and results for each patient group will then be compared and contrasted, with a follow up period of two years. The Glaucoma Investigative and Research Unit (GIRU) have lead this trial, guided by Dr Jennifer Fan Gaskin and Dr Brian Ang. It is their hope that the trial will deliver clear results on the efficacy of the use of the iStent Inject® as minimally invasive treatment for glaucoma. The trial is drawing to a close, but interested patients should notify their Eye and Ear treating clinicians should they wish to be included.

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If you do not wish to receive further mailings, please phone 1800 808 137. Sight+Sound is published quarterly.

©The Royal Victorian Eye and Ear Hospital. October 2018. ABN 81 863 814 677 Phone: 1800 808 137 Email: info@eyeandear.org.au **Volunteer Profile** 

Joyce and Lois Kennard have always found a lot of strength in full-time work. They balanced full-time work in law and real estate with caring for both their parents until the end of their lives. Together they recognised their need for a change of pace in their working lives and made a brave step towards volunteering. It was also together that they were recruited and trained for the volunteer workforce at the Eye and Ear.

Their reason was simple. They wanted to find a way to be of help to people in need. "We know what goes into looking after people," said Lois. "We also know from experience how much it means to be looked after as a patient or a carer."

While Joyce and Lois weren't familiar with the Eye and Ear before their training, both of their parents experienced visual and hearing difficulties that inform their approach to interacting with patients.

"They can be very scared when they first walk in," said Joyce. "You can see how a gentle word can make them feel at ease." said Lois.

Joyce will keep a watchful eye over Eye and Ear on the Park and Lois will make sure things are in order at the main site on Gisborne Street. It is an opportunity for both to find their own groove in their new environment.

Just three weeks in, they seem to have taken to their surroundings and socialising with other volunteers. "Everyone is lovely," said Joyce. "We've all got a common interest in wanting to help."

"Respect for patients really stands out in this hospital," said Lois "I think this environment is something we're drinking in."



Lois and Joyce are our new 'dynamic duo' at the volunteer info desk across both our sites.

Interested in finding out more about volunteering or joining our consumer register? Please contact Betty Tellis on 9929 8658 or Betty.Tellis@eyeandear.org.au.



# Sight+ Sound

NEWS | SUMMER 2019





Belinda and Ryan are helping future patients by participating in our Enucleation focus group. Photo credit: @mel.dphoto

## Learning from experience to improve a patient's journey

Belinda Kidd and Ryan Smith have three things in common. They're both forward-looking and exude a quiet optimism, they both spend a lot of time on the computer for their roles in administration and graphic design, and they have both had an enucleation procedure (surgical removal of the eye ball) at the Eye and Ear. This is why they now share a fourth similarity. They are both members of a special focus group set up by our Patient Experience team.

Responses from the focus group will be collated to help to inform the development of a new enucleation information package that includes a patient video and updated fact sheets designed to be discussed between doctors and future patients.

The focus group met in September and spent a day discussing the many complexities of the procedure. For Ryan, the most surprising observation was the diversity of the group he was in. "It struck me on the day that everyone had different reasons for the operation," he said. "For some, enucleation was a very sudden and urgent thing, whereas for me it was because of a long-term degenerative condition."

## "I just want people to get accurate information. Don't google it. Go to a proper resource."

Belinda saw an Optometrist for blurred vision in her left eye that referred her to the Eye and Ear for a suspected retinal detachment. It was determined that she had a melanoma at the back of the eye. Surgery was almost immediate. "The idea of cancer was more of a concern to me," said Belinda. "It wasn't until my eye was removed and I felt the melanoma was out of my system that I could even process losing my eye."

For Ryan, a long and difficult battle with Anterior Uveitis a chronic inflammation of the eye related to his Ankylosing Spondylitis (chronic spinal inflammation) was the catalyst. "At the end we were just pouring eye drops into my eye and doing what we could to save it," he said. "I was even thinking 'I really want a prosthetic eye'. At least my appearance could return to normal after a long time battling this thing."

"I wanted to take part in the group because there were some moments where I felt uncomfortable, or a lack of information and I wanted to change that," said Ryan. "It's also a way of showing gratitude and of giving back."

Belinda was determined that the emotional process she believes only sinks in post-surgery wasn't forgotten. "The pain after the operation was unexpected ... I just wanted someone I could call or speak to," she said. "Just someone to turn to for 'what can I expect?"

Both note that the loss of an eye is personal and needs to be grieved in its own time, but are positive about the future and philosophical about advice for future patients.

"It made me re-evaluate what I wanted from my life and what I enjoy," said Belinda. "I just want people to get accurate information. Don't google it. Go to a proper resource."

For Ryan, it's about taking your power back. "In this scenario you don't really have a sense of control, but you do have control of how you respond," he said. "Get as much information as you can, talk with family and friends and use your resilience to get through."



#### **CEO Welcome**

I'm pleased to present my first issue of Sight+Sound as the new Chief Executive Officer of the Eye and Ear.

Already I've been made to feel very welcome at both our sites. I come from Peninsula Health where I have served as Executive Director. Operations (Chief Operating Officer) for over 22 years. I look forward to getting to know our community and hope to put my background in health service management to use, to yield positive outcomes for our staff and patients.

In our cover story Belinda and Ryan generously share their story of participating in our Enucleation focus group. It's just one of the many examples of our Patient Experience work, where we strive to learn from our patients to inform how we might improve our services in the future. We also have a rundown of our recent fundraising survey results, the opening of our South Eastern Cochlear Care Centre and an update on some exciting trials and training being conducted this summer. I hope you find something that interests you and I wish you a fantastic festive and summer season.





The Quality Account and Annual Review can be accessed on our website or in our waiting areas



Brendon Gardner, Graeme Clark, Jenni Bliss, David Anderson and cochlear recipient Roger Platt at the Centre's official opening.

#### Dandenong opens **Cochlear Care Centre**

A number of staff travelled to Dandenong in September for the official opening of the South East Cochlear Care Centre.

While the centre has been in operation since April, our Chief Executive Officer Brendon Gardner, Chief Nursing Officer Jenni Bliss, Professor Robert Briggs, Stefan Wigg and Board member David Anderson joined Professor Graeme Clark, Cochlear and Hearing Australia to formally welcome cochlear recipients, hearing associations and local dignitaries to the new location. The centre was founded with the motivations to bring hearing care and maintenance for cochlear recipients closer to home for those in the outer South Eastern region. Already this is proving successful with patronage reaching capacity. The occasion was also an opportunity to launch our new community awareness campaign in collaboration with Cochlear that aims to encourage Australians to seek early and regular testing and treatment for hearing loss to mitigate the negative impacts, such as social isolation. It was a thrill to see this message receiving widespread media attention, with Professor Robert Briggs interviewed for Channel 9 afternoon and evening news, Channel

Our Annual Review and Quality Account publications are now available online and in hard copy on stands across both sites of the hospital. Both publications showcase the work of Eye and Ear staff, volunteers and patient contributors. Both also include details on the number and type of services we have been proud to deliver in 2018-19 and some information on our staff

10 news as well as the Herald Sun and other

online and radio news stories.

responsible for this great work.

## Philanthropy in our eyes

Since our humble beginnings in 1863 the Eye and Ear has been very grateful for the support of Philanthropy. Philanthropy has allowed the hospital to fund research scholarships, buy equipment, build the Smorgon Family Wing and equip it. Currently we actively seek grant funding from Philanthropic Trusts and Foundations, we have the support of our loyal donors some of whom give a few times a year and we receive beguests from past patients. Those income streams provide us with opportunity to fund research, infrastructure and buy state of the art equipment.



#### Cochlear room refurbishment

Each year we are privileged to receive funds from the Eva Orloff Estate, this year we used the funding to

refurbish a clinical room in the Cochlear Implant Clinic. It has created a fabulous space for clinicians and patients as they go on their journey of having a cochlear implant.

The clinical room in the Cochlear Implant clinic has had a refresh thanks to the Eva Orloff Estate.

#### **Trusts and foundations**

Each year we apply to Philanthropic Trusts and Foundations for funding, for research, education and infrastructure. Over the past 6 years we have acquired almost \$2.1 million in grant income.

We are very proud to announce that we have recently received grants from:

Joe White **Bequest** 

Specialised Ultrasound for Operating Theatres for \$53,000

Glaucoma Australia

Research project which involves glaucoma patients utilising an App on their IPad or iPhone to measure their visual fields (an indicator of glaucoma progression). This research project is being directed by Dr George Kong, glaucoma specialist at the Eye and Ear. We have received \$57,700 so far.

Collier Charitable Trusts

We are very fortunate to have received \$35,000 to purchase a highly specialised operating microscope essential for the delicate surgery of the eye.

Ophthalmology trainees were encouraged to identify their personal values and explore how these impact the way they work.

Last year's Aubrey Bowen medal winner Michael Dobson awarded by former Chief Medical Officer Caroline Clarke.

#### Mind skills for eye doctors

In collaboration with Mind Room Psychologists our Ophthalmology trainees were given an invaluable opportunity to develop "mind skills" for mindfulness, meditation, and wellbeing. The focus was on psychological wellbeing for improved performance in high pressure environments. This training used a method called acceptance commitment training (ACT). The curriculum was developed by Dr Jacqueline Beltz and Associate Professor Diane Webster. Directors of Clinical Training Victorian Network, Royal Australia and New Zealand College of Ophthalmology and the Eye and Ear in conjunction with Dr Jo Mitchell, clinical psychologist from "The Mind Room" in Collingwood. This project has been funded by an educational grant from Johnson & Johnson initiated by Dr Beltz and supported by the Philanthropy Department.

#### **Honouring our best**

Our Staff Service and Excellence Awards honour the efforts and commitments of our dedicated personnel by recognising them for their longstanding service or achievement of excellence in specific categories. These are held each year and give staff the opportunity to enjoy a night of celebration and fun with colleagues after a year of hard work. This year we will honour more than 50 staff that have served at the Eye and Ear for 10, 15, 20, 25, 30, 35 and 40 years and recognise staff nominated by their peers for excellence in administration, clinical work and team work.

There's still time to answer our reader survey. Visit surveymonkey.com/r/SSReader and tell us what you think!

website?

2+ yrs

<2+ yrs

Have you ever visited our

#### **Donor survey results**

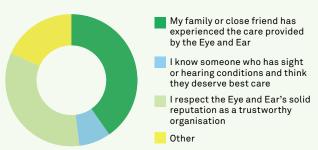
In our Summer 2018 edition we sent a donor survey to try and understand our donor community in more detail and respond to their needs.

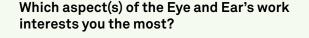
Below in our infographics is a brief summary of these results. We found that individual donors who are patients of the Eye and Ear are mostly, older than 70, are culturally and linguistically diverse (often speaking several languages), and have been cared for or a family member has been cared for at the Eye and Ear. They rarely use digital platforms such as our website and social media.

As we expected, patients donate to the Eye and Ear because of their long relationship with the hospital. They are supportive of funding research, equipment, indigenous outreach services and multicultural health programs.

These are unique characteristics when compared to other health services.

What was your key motivation for first deciding to support the Eye and Ear?









36-45



When did you first become

aware of the Eye and Ear?

eyeandear.org.au/page/About\_Us/Our\_Publications\_and\_DVDs/



Age category

#### Which of the following languages do you speak?