



24th to 25th  
September 2020

## Programme

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# Welcome

Diversional and Recreation Therapy Australia would like to welcome you to our first Virtual National Conference 2020. The conference theme 'Embracing Diversity' has attracted speakers locally, interstate and internationally to present papers on a range of professional issues. The DRTA Board encourages you to embrace the variety of philosophies, ideas and concepts presented over the next two days as we celebrate Diversional and Recreation Therapy and examine the challenges and opportunities in 'Embracing Diversity'.

To assist you to have a positive experience at the conference, here are some important tips:

- > **Negotiating the conference programme:** We have put together a full and diverse programme. Please refer to the programme for the timing of presentations. To ensure that this event is as stress free as possible, we have arranged a 5 minute break after each speaker and a 10 minute break in the middle of the afternoon/morning, so it is important to take note of start times of presentations. This booklet provides you with the abstracts of each presentation and we suggest you read them to help make the best choice on which session will be best for you.
- > **Networking:** Although we cannot have our usual face-to-face networking opportunities, at the end of the sessions each day, we have time for questions to the Board and a panel discussion. We welcome your participation at these times.
- > **Trade Exhibition:** Of course we are unable to have our trade tables this year, however, in the breaks between speakers we will be running a PowerPoint where you can see what our great supporters and sponsors have to offer. We also have their contact details in this booklet so that you can follow up on any queries. Please support them as they very generously support us every year.

On behalf of DRTA, have a wonderful conference experience and let's find inspiration in 'Embracing Diversity' into the future of our profession.

**Charlise Bennett**

President Diversional and Recreation Therapy Australia

# Day 1 Thursday 24th September

**There is a 5 minute break between speakers**  
(unless indicated)

**12.00pm - 12.30pm AEST**

Introduction and Welcome to Country



**12.30pm - 1.30pm AEST**

**Keynote** Jacqueline Quirke

Are we truly embracing the concepts of 'diversity' with our profession?

(10 minute break)



**1.40pm - 2.25pm AEST**

Kate Noble and Julieanne Cardwell

The SENSES Study: The impact of Diversional Therapy on the agitation of clients with dementia



**2.30pm - 3.15pm AEST**

Charlise Bennett & Stewart Alford

What's in a name? Titles used in Diversional Therapy

(10 minute break)



**3.25pm - 3.40pm AEST**

Kelsey Hoy- Leisure bite

Arts access in the mental health setting



**3.45pm - 4.30pm AEST**

Orquidea Tamayo Mortera

The Inmu: A summerset Pilot Project

## Day 2 Friday 25th September

**There is a 5 minute break between speakers**  
(unless indicated)



**9.00am - 9.45am AEST**

Meredith Butler, Pauline Crameri & Sally Goldner  
Supporting diversity and wellness for the older LGBTI people



**9.50am - 10.35am AEST**

Anne Richard & Robin McNeal  
NCTRC Overview

(10 minute break)



**10.45am - 11.00am AEST**

Diana Rizo- Leisure Bite  
Hilarity Amidst the COVID-19 Chaos



**11.05am - 11.50am AEST**

Sue Mark  
Isn't Montessori about children? ...What about grown ups?



**11.55am - 12.40pm AEST**

Lesley Fox  
Death and dying is different to everyone - End of Life Matters

**12.45pm - 1.00pm AEST**

Panel discussion with the Board



# Abstracts - Day One

Keynote: 1pm-2pm Thursday 24th September



## Jacqueline Quirke

MCommHtlh; GradDipHlthSc; DipDT; AssDipAppSc(DT); CertIVH&R; CertIVBSZ  
Educator, Consultant, Diversional Therapist

### *Are we truly embracing the concepts of 'diversity' with our profession?*

When the word diversity is mentioned what is the first thing that comes to your mind? Gender, religion, race? Diversity means much more than this .....

Jacqueline will explore what diversity means in a broader context and how we can apply this thinking to the profession of diversional and recreational therapy. Through challenging our thinking around the concept of diversity we can push the boundaries of innovation, disrupt internal and external processes and ways of thinking, create new cultural norms and push the profession to high levels of recognition and accountability. A thought provoking session that will challenge us to continue to push the boundaries of what is possible.

Jacqueline has worked with in and around the profession of diversional therapy for her whole career. She has held a number of roles including lecturer at the University of Sydney, Aged Care Quality Assessor, Director and Business Manager of Redleaf College of Professional Education (a Registered Training Organisation), lecturer at Western Sydney University, owner of B&S Books, author, consultant and educator related to better practice approaches in diversional therapy and aged care service provision (residential and community). Jacqueline has recently taken up a newly created role at Southern Cross Care (NSW & ACT) as the Engagement and Purposeful Living Manager.

Jacqueline has presented at many conferences and workshops related to diversional therapy, aged care and dementia both in Australia and overseas and is the co-author of two manuals (documentation and policy development), two leisure programming and activity books (Starting Points for Programs and Activities / Books 1 & 2), an activity planner for people with dementia and she has written over 35 training manuals in leisure and health and community services.

Jacqueline was a board member of the Diversional Therapy Association for over 10 years and undertook the roles of President, Secretary, Treasurer and Newsletter Editor. She has maintained close contact with the DRTA supporting them with projects as required.

**Notes:**

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# Abstracts - Day One

2pm-2.45pm Thursday 24th September

## The SENSES Study: The impact of Diversional Therapy on the Agitation of clients with Dementia

**Kate Noble**

Intake Officer NeuroRehab Allied Health Network  
Graduate Certificate in Gerontology  
Bachelor of Applied Science (Diversional Therapy)

**Julianne Cardwell**

Diversional Therapist Coledale Hospital / Diversional Therapy Consultant  
Bachelor of Applied Science (Diversional Therapy)

Agitation in patients with Dementia can often occur in the hospital setting due to a number of complications including decreased health, isolation, pain, boredom and Behavioural and Psychological Symptoms of Dementia. This agitation can manifest itself through wandering, absconding, biting, resisting care, screaming and aggressiveness. Agitation can also lead to increased medication, increased falls, increased length of stay, early entry to RACF and even death in the individual.

By understanding a patient's identity through their leisure and recreation interests a Diversional Therapist can program individual Behavioural plans to minimise agitation and increase a patient's quality of life during their stay in hospital. This intern produces many roll-on effects not only for the patients but also for the family or the RACF that the client is from. It can also help to make an admission into hospital less traumatic for the individual and help to identify coping mechanism for the family unit.

This presentation looks at the SENSES study a funded NSW Health project ran at Campbelltown Hospital for 4 months in 2019. It identifies the impact a qualified Diversional Therapist can have on the ward not only for patients but also the cost effectiveness for the hospital system. It will showcase the breadth of the study from the initial identification of the profession through the funding process and lastly to the implementation and evaluation of the project. It will point out the limitations as well as provide future options for the Diversional Therapy profession in public health system.

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# Abstracts - Day One

2.45pm-3.30pm Thursday 24th September

## What's in a name?

### Charlise Bennett

Teaching and Learning Coordinator, Health Science  
Bachelor of Applied Science (Diversional Therapy)  
Graduate Certificate (Research Studies)  
Graduate Certificate (Tertiary Teaching and Learning Practices)  
Masters of Health Services Management  
Doctor of Philosophy student (Professional reasoning in Recreational Therapy)

### Stewart Alford

Academic Course Advisor, Postgraduate Health Sciences  
Bachelor of Health Science (Therapeutic Recreation)  
Graduate Certificate in Mental Health Practice  
Masters of Health Science (Health Services Management & Aged Care Management)  
Doctor of Philosophy \*Under Examination (Recovery Camp; Recreation and Recovery an essential pairing)

After being involved in numerous discussions and debates over decades a question that is constantly asked by people in our field of practice is what title should we use?

In January 2020 determined to be able to answer the question with some sort of evidence base, we decided to have a look at the different advertisements in the diversional therapy field. We looked at titles used across Australia inclusive of states and territories collecting information on 100 'diversional therapy' positions advertised.

Our findings should give us, as a profession, some clarity about the current perspectives of employers, identifying various issues and developing an evidence-base of what potential employers were looking for in terms of skills, abilities and qualifications for the profession. This paper explores what was found from these advertised vacant positions and discusses how we may use this research to inform practice and reduce ambiguity between expectations and roles

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# Abstracts - Day One

3.45pm-4pm Thursday 24th September

## Arts Access in the Mental Health Setting

**Kelsey Hoy** (Diversional Therapist)

Bachelor of Health Science (Therapeutic Recreation) University of Western Sydney  
The David Morgan Centre, Kenmore Hospital, Goulburn (Older Person’s Mental Health and Dementia Support Unit)

The current Kenmore Hospital site shares its name with its predecessor. Opened in 1895, Kenmore functioned as a repatriation hospital during WWII and more extensively, as a “psychiatric asylum” during the infancy of psychiatry in Australia. The stigma associated with mental health consumers of this service runs deep in the local community of Goulburn and has long since created a barrier that impedes consumer’s ability to access and effectively engage in the local community as part of the recovery continuum. The Goulburn Regional Art Gallery approached The David Morgan Centre in 2017 with a proposal to develop a series of unique art based opportunities for consumers, delivered by local artists using a diverse range of mediums. Consumers have had the ability to collaborate with staff to determine areas of interest that further explore creative expression and individuality.

This program has been facilitated on the unit as well as in the art gallery’s creative space. Several of the consumer’s projects have been shared through the gallery’s social media account, which has broadened the exposure of this program and provided a talking point for the local community with the hope of reducing the stigma experienced by mental health consumers trying to access community resources.

This program is funded through the IMB bank’s community grant scheme, and we have been most fortunate to have qualified for this funding since the conception of the project.

The artists and staff whom deliver these workshops have explored many different topics from emotions and identity, home, leisure, the world around us, and many others. Consumers have been guided to develop art related skills and to use the sessions as a means of expression and exercising autonomy during their hospital admission.

Facilitating this program during the COVID- 19 pandemic has created some challenges however with collaboration between all stakeholders, the art gallery has been able to create and distribute packages complete with necessary materials and instructions which has allowed the consumers to continue their engagement in this high quality art program.

Feedback from participants of this program has been overwhelmingly positive. People whom had not previously explored art based options for leisure have had the opportunity to experience various mediums and develop the skill set required to confidently continue engagement in creative outlets when they return home. It is hoped that this partnership with the art gallery can continue, and that the program remains responsive to participant interest.

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# Abstracts - Day One

4pm-4.45pm Thursday 24th September

## The Inmu: A sunset Pilot Project

**Orquidea Tamayo Mortera**

National Certificate in Diversional Therapy and others  
Summerset Group Holdings, National Diversional Therapist

Bringing the best of life to all our residents is something we are proud to be working on. We are aware that wellbeing areas are the main aspects of older people's health: physical, emotional, social, spiritual, and intellectual. Research shows that one solution to these challenges is the stimulation of the older person senses. Our skin is the most sensitive organ and sensory stimulation is essential for our brains – regardless of age, physical and cognitive abilities. At the same time, music has a direct path to our mind and body – which is design for movement, and the reason why music makes us want to move. Technology that can help us to stimulate our residents' senses and can be exceedingly valuable. Having access to technology that enhances our teams in the delivery of therapeutic interventions that can improve our resident's quality of life and support their wellbeing areas – is an integral part of our unique holistic approach.

The Inmu touch is a new worldwide assistive technology, a sensory stimulating companion. It unfolds an interactive music universe of wellbeing, joy, and social contact – in co-creation with people movements. Inmu stands for 'interactive music'. Inmu is a mobile therapy tool of a very special kind. It is disguised as a cushion and responds to the individual needs of people. It uses multi-sensory stimulation based on Artificial Intelligence technology. It unfolds an interactive music universe of wellbeing, joy, and social contact – in co-creation with people movements. It translates touch and movement into soft vibration and tactile stimulation – key to improving the wellbeing of older people.

On the 5th August 2019, I attended the Inmu touch launch in Auckland and discussed possibilities with Founder of Inmu Touch and Managing Director of Allied Medical. We began Inmu trials in November 2019. Six care centres were given a set of Inmu (1 InmuRelax and 1 InmuDance) to trial with one or two residents for a period of four to six weeks.

Inmu touch has demonstrated greater benefits regarding people's quality of life in areas such as; Cognitive Impairment, Dementia – Early, intermediate, advance (e.g. Alzheimer's), Trauma, Insomnia or sleep disorders , Stress , Phobia to appointments (e.g. GP, Dentist), Brain Injury / Neurological Rehabilitation), Intellectual disability (e.g. Autism, Down Syndrome), Mental Health, Speech disorder, Depression, Loneliness, Social Isolation, Bipolar Disorder, Bulimia/Anorexia, Social Anxiety/Anxiety Disorders, Concentration problems, Psychosis, Schizophrenia.

Inmu helps to reduce agitated behaviour, anxiety, apathy, and depression, as well as raising cognitive and social skills and willingness to cooperate and share with others – especially when used in multidisciplinary and/or interdisciplinary contexts in relation to care situations or other forms of activities or treatments.

The Inmu trials has made us rethink ways to deliver care, methods, approaches, and overall practices we are currently using, to bring the best of life to the people in our care through new assistive technology.

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# Abstracts - Day Two

9.00 am-9.45 am Friday 25th September

## Supporting diversity and wellness for older LGBTI people

### Meredith Butler

Meredith Butler is Outreach & Projects Coordinator for Switchboard Victoria's Out & About LGBTI Community Visiting Program. Her role includes working with service users and providers across metropolitan, regional and rural/remote communities to promote social connection and inclusion for older LGBTI people. Meredith has over 30 years' experience working in direct care and community engagement for health and community services including aged care, youth work, disability and carer support.

### Pauline Cramer

Pauline Cramer is the Coordinator of Val's LGBTI Ageing and Aged Care, a Rainbow Health Victoria program at the Australian Research Centre in Sex, Health and Society, (ARCSHS) at La Trobe University, Melbourne, Australia. Val's works to improve healthy ageing pathways, care and visibility of older LGBTI people. Pauline has over 25 years' experience working in human services programs. Her practical experience in LGBTI inclusive service development within a mainstream community aged care service led to achievement of the first ever Rainbow Tick accreditation.

### Sally Goldner AM

Sally Goldner's twenty year plus involvement in Victoria's LGBTIQA+ communities includes Transgender Victoria, co-facilitating Transfamily, presenting 3 CR's "Out of the Pan" and as Bisexual Alliance Victoria Treasurer. She was awarded an Order of Australia in 2019, is a life member of 4 organisations, the 2015 LGBTI Victorian of the year and joined the Victorian Women's Honour Roll in 2016.

This session provides an overview of the lives and needs of older lesbian, gay, bisexual, trans and intersex (LGBTI) people. Presenters will explore key issues that may impact the health, wellbeing, visibility and access to services, support and care of LGBTI older people. Many have lived a large part of their lives where concealment of their identities was the only protection from stigma and discrimination. LGBT older people are twice as likely to live alone, four times less likely to have children to assist them in accessing services and community activities and five times less likely to access health care and social services (Yang, Chu & Salmon 2017). As older people, this impacts their visibility in services and programs, and the ability of programs to include or address their needs (LGBTI Health Alliance 2019).

As one participant from Switchboard Victoria's Out & About program told us, "Don't just organise a new activity for older people and invite LGBTI folk. I want to know: Is it a safe and comfortable environment for me to be in? Are the activities and facilities tailored for my specific needs? Do other participants know that discrimination of people like me won't be tolerated?"

This practical interactive session explores ways to plan, deliver and evaluate a range of social and therapeutic activities that are safe, inclusive, relevant and enriching for older LGBTI people (whether they have disclosed to the service or not). Information and resources will be provided in this session to support therapists in the development of LGBTI relevant activities and programs.

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# Abstracts - Day Two

10.45 am-11.00am Friday 25th September

## Quality Conversations - Hilarity Amidst the COVID-19 Chaos

**Diana Rizos**

Certificate IV in Leisure and Health; Dementia Practice – Dementia Learning Centre; Dementia Training – Hammond Care; Risk Management Certificates – Fitness Australia; Certificates III & IV in Fitness; Certificate in Exercise Rehabilitation; Stepping On Facilitator (NSW Health); Certificate in Swiss Ball Instruction; Thump Boxing for Fitness Level 2 (Advanced); Work Health & Safety Representative Training - Telstra

COVID-19 Coronavirus has brought with it a new style of communication and engagement to the level that we have never experienced before. Our love of socialising was put to an abrupt halt. Social distancing became the norm and coughing or sneezing in public was now met with looks of shock and horror !!!!

Our staff and residents' family members were now greeted with the obligatory infrared non-contact thermometer zoning in on their foreheads – smack bang in the middle and questions as to any recent travels or contact with recently returned travellers.

Estranged family members with obvious flu symptoms suddenly arrived on Nursing Home doorsteps ..... but why? Such bizarre visits finished before they even started. Not a foot in the door !!!!

The bizarre behaviours of some family members had me questioning their mental state. Seriously. There were those who arrived with tissues sticking out of their nose, visitors in a wide array of masks and head coverings ranging from a blue cloth wrapped around three-quarters of their head to makeshift Sci-fi masks, to the more inexplicable versions of Darth Vader-like devices. Hilarious !!!!! What would they have done during the Bubonic Plague?

Then there was the resident's daughter who wore such a heavy mask that her dear Mama complained that she couldn't understand what she was saying. In an effort to better communicate, daughter typed on her mobile and scurried quickly towards her Mum shoving the phone in her face to read but the dear soul was visually impaired and couldn't read the tiny print. Said daughter was so frightened that no sooner had she shoved her mobile in her Mum's face, she'd just as quickly run away from her to the other side of the room !!!!! This comical scene played out for the entire visit. It's hard to tell if the daughter was frightened of catching Coronavirus from her Mama or frightened of giving it to her.

This presentation is a light-hearted look at the panic-stricken behaviours of people during the Covid-19 public health crisis and the hysterical responses from one extreme to the other. From the residents wanting to break down the front doors in their desperate attempts to abscond, retorting, "No Government is going to stop me going out !" - to the not-so-funny resident's wife being caught sneaking in through the side gate !!!!! What were these people thinking in doing what they were?

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# Abstracts - Day Two

11.00 am - 11.45 am Friday 25th September

## Isn't Montessori about children? ...what about Grown Ups?

**Sue Mark**

Montessorian, RN MCommMgt, Grad Cert IMHWP, CertGerontics;Trainer and Assessor  
Montessorian Trainer and Mentor - Montessori Consulting Australia

What does a child based program have to offer clients/care recipients in supporting and enriching their lives? And what does this have to do with Diversional and Recreational Therapists?

The Montessori Method is indeed designed to fit the child, instead of making the child fit the programme. But the Montessori approach for Ageing and Dementia is not about children; it is a philosophy that transfers over; that same philosophy that says children need choice, meaningful engagement, a sense of high self-esteem and sense that we understand their identify.... We need that at any age!” Looking at Maria Montessori and her work, we will see how this approach has been adapted to meet the needs of people who are ageing and/or live with dementia. We will explore the role of Diversional and Recreation therapists as the catalysts for change in ensuring that leisure and recreation form part of what happens every day. This applies wherever a person lives - in their home, a care community or attending respite programs.Montessorian aged-care is rehabilitative and requires taking a step back and observing. It is not about ‘over-caring’ . It is aimed at preserving and even enhancing skills and abilities enabling people to be the best they can be. Rather than doing for, the model promotes doing with, an approach which facilitates wellbeing and satisfaction for clients, families and team members.

Finding and understanding identity is at the core of the Montessori framework of 3Ws

1. Who is the person - life story, history, likes, needs , interests, strengths
2. What do we see - behaviours of unmet needs, engagement
3. What are we going to do about what we know and what we see? signage, roles, activities

Real life examples of the changes which have been made to the lives of people using the principles of Montessori will identify the importance of focusing on the individual, identifying their strengths and preserved abilities to develop programs to address their needs.

As Diversional and Recreational therapists, you are integral in leading the Montessori change.. It is a culture of care which is the responsibility of the whole team 24/7; the true essence of person centred care - supporting and enriching lives through understanding needs based on a person's identity!

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# Abstracts - Day Two

11.55 am - 12.40 pm Friday 25th September

## “Death and dying is different to everyone ~ End of life Matters” Open conversations within a Palliative Care approach.

### Lesley Fox

Certificate 4 in Leisure and Health, Certificate 4 in Frontline Management, Certificate 4 in Community services work, Certificate 3 in Home and community care

Lesley Fox; Lifestyle team Supervisor - Wesley Vickery Sylvania

In this session, I would like to display how we have chosen to attend to end of life matters that provide increased client choice and client involvement, leading to their diverse wishes being carried through with increased value and respect.

Achieved firstly by having open, quality, conversations with clients that lead to minimising the taboo around conversations concerning death and dying.

Allowing for end of life planning, unique creative activities to be designed with clients, that allow for a life journey to end in an honourable and flourishing way and for clients after life and death wishes to be advocated for or achieved.

By honouring the diverse spirit of a person that is aging, living with sickness, or just wants to talk about what comes next, we are privileged to journey alongside them right through to death and after wards with their families. By supporting family and allowing family to care in a richer capacity for their loved one, we help to facilitate relationship connections and foster end of life resolve.

I wish to display ways of placing upmost value on clients and their family at this time.

I hope to inspire and challenge people working in our industry to engage more in the palliative care process. It is often a journey in life that begins sooner than we think.

Death is a part of living and I would like to walk you through what we do at Wesley Vickery Sylvania and showcase what we have developed in the way of a palliative care kit.

Its all about allowing quality of life while still living and then facilitating a respectful exit to living and the allowance of a valuable legacy after death.

It could be a way to enrich what you are already doing or help you to start something new.

Every life matters ~ End of life matters.

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# Trade Partners

The Board and members of DRTA warmly acknowledge the support of all our valued Trade Partners



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03 8839 4602

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Dementia & Aged Care

info@zestdementiacare.com.au  
zestdementiacare.com.au  
P O Box 2791 SOUTHPORT BC QLD 4215  
1300 738 883 | 0410 659 517



4mbs@4mbs.com.au  
www.4mbs.com.au  
384 Old Cleveland Road COORPAROO QLD 4151  
07 3847 1717



scott.holmes@fluidmarketing.com.au  
www.fluidmarketing.com.au  
0419 140 980



trio6768@bigpond.net.au  
PO Box 187 WATERFORD QLD 4133  
0428 777 051



heather.ethicaltradingaustralia@gmail.com  
endangeredanimalsaustralia@gmail.com  
0411 639 472



tara.henderson@heartfoundation.org.au  
heartfoundation.org.au  
Level 12 500 Collins Street MELBOURNE VIC 3000  
03 93211515