

Annual Report



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10

new name, new logo, new look

CENTRAL, VITAL AND THRIVING

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Vision

Castlemaine Health will be widely acknowledged within our industry and by stakeholders as a preeminent Australian Rural Health Service.

Mission

As a comprehensive rural health service for the Castlemaine district we shall maturely continue to expand our knowledge, learning, services and skills and partner with other stakeholders to provide person centred care of the highest quality.



Castlemaine Health – the brand story

In 2008 the Board and Executive of Mt Alexander Hospital (as it was then known) recognised the need for a re-think of the organisation's image.

The Hospital's role within the Loddon Mallee Region had developed to meet the needs of a growing population. Delivery of a diverse range of inpatient, outpatient and outreach services to the Shire of Mount Alexander had extended to include provision of assessment, rehabilitation and allied health services to neighbouring shires.

The organisation had a clear regional focus and needed a brand that reflected that positioning to Government, stakeholders, staff and community.

The journey

The organisation engaged Dsign Diezel Group (DDG) as its brand management project partner. DDG's specialist team worked closely with the Board and Executive to review the existing brand.

DDG undertook extensive consultation with staff and community to gather the data and opinion that would inform the brand development, before recommending a relevant new brand structure based on three key elements.

The new name

Castlemaine Health communicates the organisation's aspirations as a sub-regional entity that is much more than a Hospital. It reflects the breadth and depth of the services offered and delivers versatility for future extension or diversification. It gives the brand a central, familiar focus within its regional catchment, expressed in a simple, easy-to-recall name.

The new logo

Vibrant, clean and contemporary – just like the organisation it represents. The multi-coloured graphic with an earthy, elemental palette reflects the regional and diverse nature of the service. A simple, stylised Mount Alexander is central to the logo (but not overpowering). The graphic is 'ownable' and over time will be remembered and recognised as symbolising the health service.

Five colours have been selected to represent the organisation and the different services:

Navy: Corporate
Orange: Residential Aged Care
Red: Administration
Blue: Acute and Rehabilitation
Green: Community Health

The new positioning statement

Central, vital and thriving encapsulates the character of Castlemaine Health in a simple, connective phrase. 'Central' refers to Castlemaine's convenient geographical position, its 'heart of Victoria' location. 'Vital' captures the imperative nature of the health service, and the spirited development of the organisation. 'Thriving' conveys the prosperous, expanding aspect of the business.

Today

The 'old' Mt Alexander Hospital brand was retired in 2009 and replaced with the fresh and forward-focussed Castlemaine Health brand – a brand that will celebrate the real essence of this contemporary and dynamic organisation well into the future.

Year in Brief

Key Achievements

- Development of Strategic Plan (page 3)
- Launch of new name and logo (page 3/inside front cover)
- Organisational structure review (page 3)
- Received Bronze Award at the Australasian Reporting Awards (page 3)
- Implementation of extensive new computer software (page 4)
- Closure of Thompson House low care unit (page 5)
- Decrease in length of stay of rehabilitation clients (page 5)
- Bushfire Strategy developed (page 5)
- Staff member named the first rural palliative care Nurse Practitioner (page 6)
- Commencement of Monash Medical School training program for medical students (page 6)
- Implementation of Initial Registration for Overseas Nurses Program (page 6)
- Appointment of new positions: Blood Transfusion Nurse, Clinical Practice Development Officer (page 6), Health Independence Program Manager, Hospital Admissions at Risk Program Nurse, Community Rehabilitation Centre Intake Worker (page 7), Cafeteria Trainee & Health Information Services Trainee (page 10)
- Increase in the number of surgical procedures (page 6)
- Adult Day Services and Community Aged Care Packages passed assessment against the Home and Community Care Standards (page 7)
- CADARG (Castlemaine and District Accommodation Resource Group) achieved accreditation against HASS (Homelessness Assistance Service Standards) (page 8)
- Implementation of a lead tenant program to assist youth homelessness (page 8)
- Extension of the Early Intervention service (page 8)
- Reduced waste usage across the organisation (12)
- Introduction of a corporate uniform (page 15)

Performance at a Glance

	Staff		
	2009/10	2008/09	% Change
Number of Staff Employed	626	613	2.12%
Equivalent Full-Time	366.23	373.24	1.88%

Patient Statistics

	Admitted patients							
	Acute 2009/10	Acute 2008/09	Sub-Acute 2009/10	Sub-Acute 2008/09	Other 2009/10	Other 2008/09	Total 2009/10	Total 2008/09
Separations								
Same Day	1602	1593	0	0	0	0	1602	1593
Multiday	1579	1709	345	324	25	18	1949	2051
Total Separations	3181	3302	345	324	25	18	3551	3644
Emergency *	1218	1223						
Elective *	1842	1837						
Other Including Maternity *	140	157						
Total Separations	3200	3217						
Total WIES *	1982	2148						
Total Bed Days *	8377	9125	7843	7630	749	433	16969	17188

Note

■ Not applicable

*Estimates due to change of software system

	Non admitted patients	
	2009/10	2008/09
Emergency Department Presentations *	5380	5359
Outpatient Services – Occasions of Services	33184	32687
Total	38564	38406

*Estimates due to change of software system

Resident Bed Days	
2009/10	2008/09
63132	62999

Babies Born	
2009/10	2008/09
52	62

Overview of Services Provided

Acute /Sub-Acute Facilities (65 staffed beds)

- Medical
- Obstetric
- Paediatric
- Rehabilitation
- Geriatric Evaluation & Management
- Respite
- Surgical
- Accident & Emergency

Residential Aged Care High Care (90 beds)

- Ellery House
- Thompson House

Low Care (71 beds)

- Spencely
- Penhall
- Renshaw

Community

- District Nursing Services
- Post Acute Care Home Services
- Support Aged Care Assessment Service
- Adult Day Activity Centre
- Community Rehabilitation Centre / Allied Health Departments
- Volunteer & Social Support Program
- Castlemaine & District Accommodation & Resource Group (CADARG)
- Early Intervention Program
- Palliative Care

Client Services

- Medical
- Nursing & Personal Care
- Welfare/Social Work
- Podiatry
- Occupational Therapy
- Physiotherapy

- Speech Therapy
- Dietetics
- Continence Management
- Volunteer Assistance
- Pharmacy
- Psychiatry
- Pastoral Care
- Infection Control
- Recreational Activities
- Transport
- Pathology-Provided on site by Gribbles Pathology
- Radiology and Ultrasonography - Provided on site by Bendigo Radiology

Facility Management Support

- Engineering Services
- Supply Department
- Human Resources
- Health Information Services
- Information Services
- Public Relations / Fundraising
- Finance Department
- Hotel Services
- Occupational Health & Safety
- Quality Department

Training and Development

- Training and Development Apprenticeships & Traineeships
- Graduate Nurse Program
- Overseas Registration Program
- Public Health Programs / Health Promotions
- Staff Education / Professional Development
- Undergraduate Program
- Work Experience Program

History

- 2009 "Mt Alexander Hospital" renamed "Castlemaine Health" New logo implemented
- 2008 Thompson House upgraded
- 2007 Ellery House opened
- 2000 Newstead Hostel upgraded
- 1998 Renshaw House upgraded
- 1998 Spencely House upgraded
- 1996 Penhall Hostel opened
- 1995 Acute Facilities relocated
- 1995 Thompson House opened
- 1994 Building Program launched
- 1986 Castlemaine District Community Hospital amalgamated with Alexander to become Mt Alexander Hospital
- 1959 Mount Alexander Hostels established
- 1939 Halford Street Hospital opened
- 1860 Castlemaine Benevolent Asylum opened
- 1853 Gingell Street Hospital opened

Castlemaine Health is a public hospital incorporated under the Health Services Act 1991 and has a variety of programs and services funded by:

**The Department of Health Minister:
The Honourable Daniel Andrews**

**The Department of Health & Ageing
Minister:
The Honourable Nicola Roxon**

**The Department of Education Minister:
The Honourable Bronwyn Pike**

**The Department of Human Services
Minister:
The Honourable Richard Wynne**

Report of Operations

In reporting this year, we will seek to outline our achievements and explore the challenges and transformation journey we are facing in meeting our newly developed strategic goals.

Our new strategic goals have been developed following an extensive review which, coordinated by a consultant, included literature review, analysis of Government policy, stakeholder opinion, current operational and financial outcomes and future projections. After much discussion and collaboration, the Board of Management has chosen the following key strategic goals for 2010 to 2015:

1. Seamless Person Centred Care
2. Leadership in provision of holistic care
3. Rural Centre of Excellence in research, training and clinical practice
4. Stakeholder and political management

We have developed Operational Plans with reference to these goals which assist with planning and monitoring.

To ensure effective governance we are actively continuing Board member development with three places being funded for training with the Australian Institute of Company Directors. New members to the Board will be offered training provided by the Department of Health. Personal and Board performance reviews will be completed annually.

Open communications and relations with both departmental and local political representatives have been maintained and expanded with staff representation on many key regional, state and national committees. We support attendance of appropriate staff at conferences to ensure ongoing representation and contemporary practice is incorporated in service delivery.

This year we have undertaken a rebranding project and changed our name to Castlemaine Health. The original Mt Alexander Hospital title did not clearly portray our location and has historically led to confusion with Alexandra Hospital. Following on from this, we have implemented new uniforms for all staff. The uniforms have assisted the public to clearly define the roles of the staff while they are in our care. Signage is soon to be upgraded and other organisational materials used with insignia are being updated over the next 12 months. Our Web site is undergoing updates to ensure it is contemporary and user friendly.

Clinically we have seen a reduction in

acute medical admissions as a direct outcome of actions to reduce preventable hospital admissions. We have increased operating theatre sessions which has resulted in increased surgical activity. Our rehabilitation unit has treated more patients associated with shorter lengths of stay and improved case management. We have extended services in early childhood development and have seen great expansion of our person centred care philosophy throughout the organisation. Our overseas nurses training program, commenced in July 2009 and has blossomed to offer placements three times per year.

Technology, funding and service demand changes have placed us in a position to fully review our organisation, ensuring we optimise tax payers' funds. An extensive organisational structure review has commenced and will be completed during the next year.

Environmentally, further to our continued engagement in the Maines Power Project, we continue to work towards reducing our carbon footprint and have implemented energy saving, recycling and waste management improvements. We have undertaken significant bush fire preparations and have set out a capital plan which looks to define a plan for building and equipment management for the next 10 years.

Information technology changes have been a challenge to the organisation. New financial and patient management software has been implemented under the State HealthSMART initiatives. In addition, there has been new risk management software and bedding down of recently introduced human resource and residential aged care systems. We have replaced over \$130,000.00 worth of video technology and a \$30,000.00 cold sterilising unit in the operating theatre. All this has put tremendous pressure on staff and we are proud of how they have stood up to the challenge.

Compliance with external bodies has continued and the Health Service has recently achieved our first accreditation in Homelessness Assistance Service Standards. We had successful visits from the Aged Care Standards Agency and continued to meet food safety and cleaning audit requirements. I am proud to inform our community that on a majority of elements in a recent Victorian Patient Satisfaction Survey, we have shown improvement on nearly all levels. As a result, when benchmarked against our peers of the same level service, Castlemaine Health is leading the way.



Graem Kelly, CEO



Bill O'Donnell,
President of the
Board

Thank you to all in the community who have voted their support in the comments and feedback they gave in this survey.

Demand on residential aged care beds has led to a reduction in hostel beds and we are seeking to introduce a new service in transitional care for the elderly. We are also investigating the possibility of introducing a 24 hour medical in house cover for emergencies.

The annual Murray to Moyne Cycle Relay had fewer teams this year, but with two teams they still raised in excess of \$30,000.00 for the health service. Their support is greatly appreciated and we are in awe of their commitment. Our volunteers on committees and those whom are helping us provide services to this great community are appreciated as some of this district's true unsung heroes.

We were proud to win a Bronze Award in the Australasian Reporting Awards for our 2009 Annual Report. This verifies our commitment to informing our Public in plain, simple terms what it is we are doing, how we are doing it and where we are going in the future. Thanks goes to the dedicated team who made this possible.

The year has been an eventful one. Staff have been required to deal with continuing change so that we can meet the contemporary expectations of this health service and their commitment to providing professional, safe care and service support. On behalf of the Board and the community we thank them for their efforts and continued support.

Bill O'Donnell

Graem W Kelly

Our Finance Team

Profile

The Finance Directorate oversees management of financial operations, health information and supplies (including new equipment and information technology).

Quality Outcomes

- Five new computers with internet access installed for resident's use (an outcome of a \$7,500 grant from the Department of Human Services)
- Introduction of a new style guide to standardise the formatting of documentation
- Review of the staff newsletter process
- Implementation of new software (electronic) systems: Management Advantage (Residential Aged Care), RiskMan (Incident Reporting System), iPM (Patient Management) and Oracle Financial Management system

Future Directions

- Implement Business Unit Reporting
- Develop an Information Technology Plan
- Improve purchasing processes
- Continue to implement new software systems
- Pursue the implementation of an e-Record

Finance

To ensure the ongoing sustainability of the facility, the Finance Team oversees systems in relation to accounts payable, accounts receivable, resident trust, salary packaging and financial reporting, including Maldon Hospital.

Health Information Services

The Health Information Service Team oversees the medical records system, admission and discharge procedures, and the reporting of demographics to the Department of Human Services. Staff have continued to provide coding.



Leon Williams - Computer Systems Manager

services to Maldon, Maryborough, Dunnolly, Birchip, Donald, Charlton, Wycheproof and St Arnaud Hospitals.

Long serving staff member, Heather Paulet, was promoted to the role of Chief Health Information Manager in November. The previous incumbent, Darryl O'Bryan has remained on staff with a new role of Project Manager for the implementation of a new electronic patient management system. Darryl received the HIMAA Victorian Branch Health Information Managers Achievement Award (Rural Category) 2009 for her service, achievements and dedication to health information services both internally and for the Loddon Mallee Region.

Erica Dickson was appointed as our first Health Information Services Trainee in November.

Supply

The Supply Department oversees the smooth running of purchase and distribution of necessary supplies, services and new equipment.

This year has been an extremely busy one, with a large amount of work dedicated to implementation of the

Oracle Finance/Supply electronic system. The result is that staff now order supplies on line which increases efficiencies both in time and paper. The Supply Department also conducted a major stock review and streamlined the stock at hand.

Information Technology

Upgrading and installation of computers, installation of new programs and overseeing education in the new electronic programs has been a focus of work for the Computer Systems Officer this year.

The use of computers continues to increase as electronic communication becomes a way of life. In addition to the implementation of new program, there have also been some in house purpose built programs developed that have reduced the use of paper and time whilst improving systems, this includes the Connolly Rehabilitation admission system and a new system for the allocation of Health Service vehicles.

Our Nursing Care

Profile

The Nursing Directorate manages the provision of clinical care within Residential Aged Care, Rehabilitation, Acute Medical and Surgical, Midwifery and Accident and Emergency services.

Quality Outcomes

- Implementation of the electronic documentation system called "Management Advantage" within Residential Aged Care areas
- Extension of multi-dose blister medication packs to all residential care areas
- Implementation of ward based admission coordination in the Rehabilitation Unit
- "Living Well Ageing Well" Project roll out
- Bush Fire Strategy developed and tested

Future Directions

- Development of the Clinical Practice Development role under Dr Amanda Watson
- Development of "Transition to Care" Programs within our residential aged care units
- Secured rehabilitation physician expertise to help guide the rehabilitation services
- Opening second operating theatre as a procedure room
- Implementation of the Person Centred Care principles throughout Castlemaine Health
- Responded to demand for dialysis services
- Investigated the viability of chemotherapy services
- Extended benchmarking of clinical data with other hospitals
- Improved transition of our residents into care through a funded project

Residential Care

The Director of Nursing, Dr Ann Allenby, was invited to become a member of a Nursing Leadership Group looking at issues in residential aged care State wide. This Group has been commissioned by the Quality Improvement Unit at the Department of Health and aims to gain a public sector industry perspective on current issues.

As a result of a large number of vacancies within our low care residential areas, Thompson House low care unit was closed and the residents and staff were relocated to other on site units. Extensive consultation and negotiation occurred to facilitate a smooth transition.

Residential aged care staff has led the way by implementing Management Advantage, which is an electronic documentation system. Several staff whom had never used a computer before have embraced the system and use it in daily practise.

In March 2009 the facility moved to a new aged care funding system. This has subsequently been audited in February 2010 with evidence of claims made being checked. We are pleased to report an excellent result which indicates our staff is managing the new system well.

Connolly Rehabilitation Unit

In July 2009 Nurse Unit Manager, Jan Swift, and her team organised an event for the Australasian Rehabilitation Nurses Association which was attended by 80 participants from around the State. The program included topics such as: pain management, dementia issues in rehabilitation, medication in the elderly, burns management and dressings, current interventions in dysphasia and communication post stroke.

Jan left us in March to take a well earned break and we welcomed new Nurse Unit Manager, Christine Sloman, in April.

Over the year, the average length of stay for patients has decreased to 22 days compared with 24 days in the previous year. This is attributed to the opening of transition to care beds in early 2009, where people who no longer require rehabilitation services can wait for a residential bed, thereby moving clients through the system more efficiently.

The responsibility for coordination of admissions to rehabilitation was relocated from the Support and Assessment Service to staff on the Unit early in 2010. To help manage the waiting list a computer data base was developed internally and implemented for use in February. This will eliminate duplication of work in assessing prospective clients to be admitted.



Baby 'Ella'

Recreational Team

The Residential Recreation Team aims to provide all residents with an enjoyable and fun based program, to improve their quality of life. Group and individual activities are offered to suit the needs and interests of residents. The program is flexible and responsive to requests. In addition, the program aims to help residents settle into the care environment and continue their interests. Getting to know other residents and staff is an important part of adjusting to the lifestyle and feeling at home.

During the past year, the unit was successful in obtaining a grant to make computers available for residents. These computers are available in each unit and are used by residents to access email, the internet, play games, write life stories and edit photographs, etc.

Geroe Acute Unit

Nurse Unit Manager Craig DeLacy left this year to take up a position as CEO of the Bendigo Division of General Practice and we welcomed Helen Minkevicius as the new Unit Manager in January.

There were 52 babies born on site this year. Results of the midwifery survey showed a high degree of satisfaction with care and advice provided to families. The ability to labour and give birth in a community facility with minimal intervention is valued by the women and partners as a beautiful and calm way of giving birth.

Additional funding was received for a new position of Blood Transfusion Nurse in February. Registered Nurse Division 1, Andrew Lewis, is currently working one day per fortnight reviewing and improving systems in relation to the safe provision of blood product transfusions.

The 'Living Well, Ageing Well' (LSOP) project is in its last year and several activities have been undertaken focusing on care in the acute ward. Achievements include review of admission documentation and implementation of a system that makes use of validated



Overseas Medical Students

assessment tools. In addition, activities in establishing the concept of person centred care such as development of a policy, education of staff, conducting case reviews and reviewing handover processes have been undertaken. Work will continue across all directorates.

Operating Suite/Day Procedure Unit

Following on from the work commenced in the previous year, the operating suite has increased the average number of operations from 119 per month to 134 per month. Funding for this came from the Rural Patient Initiative designed to help reduce the rural public waiting list.

A new orthopaedic surgeon commenced in February specialising in shoulder arthroscopy and shoulder rotator cuff repair, which will broaden the range of surgery offered to the community.

New equipment purchases included replacement of the operating theatre lights with halogen lights and new laparoscopic imaging equipment. This equipment will improve the surgeon's ability to visualise the operating site and improve safety for patients.

Nurses Registration Program

The Return to Practice and Initial Registration of Overseas Nurses Program has been consolidated with 24 nurses participating during the last year. This has resulted in an increase of nurses available for employment in the Loddon Mallee region. Nurses undertaking the program have positively evaluated it, indicating they are feeling safe and confident to practice.

Monash Medical School Training Program

This program commenced operation in February providing support to the teaching of fourth year medical students in collaboration with Monash University and local General Practitioner practices.

Palliative Care Nurse Practitioner

Registered Nurse, Merrill Cole, was successful in becoming endorsed as the first rural palliative care Nurse Practitioner. This was a result of many years preparation from her Master's Degree through clinical internship to eventual endorsement.

Our Community Programs

Profile

The Community Programs staff provides integrated programs and health promotion based on person centred care and health independence principles. Multidisciplinary services include inpatient and outpatient rehabilitation, assessment, treatment, and social support across the Goldfields, Macedon Ranges and Mount Alexander Shires.

Quality Outcomes

- Appointment of an Intake Worker
- Appointment of a Health Independence Programs Manager
- Funded Flinders Chronic Disease Self Management Training
- 100% compliance with use of e-referral via Connecting Care and the Service Coordination Tool Templates across the Community Rehabilitation Centre (CRC)
- Expansion of membership of the Community Consultative Committee to include representatives from various client populations including carers and refugees
- Further development of Culturally and Linguistically Diverse (CALD) resources and education sessions for nursing, allied health and General Practitioners
- Participation in the Castlemaine African Community Health Working Party
- Implementation of the Medication Care Project and the Active Home and Community Care (HACC) model in partnership with the Mount Alexander Shire Council
- Initiation post discharge follow-up phone calls for all acute patients 70 years of age and over
- Implementation of the key worker role in CRC and Early Intervention
- Introduction of client held records, with all CRC clients now offered a copy of their care plan
- Regional HACC conference "A Question of CULTURE in Social Support" organised by Adult Day Services coordinator for Loddon Mallee Planned Activities Support Network
- Adult Day Services and Community Aged Care Packages were assessed as fully compliant with Home and Community Care Standards

Future Directions

- Implementation of a Shared Care Protocol in medication administration in the community between the District Nursing Service and the Shire's HACC personal care workers
- Implementation of the Active Service Model across all HACC Programs
- Ensuring compliance with Health Independence Program (HIP) guidelines
- Increasing integrated chronic disease management and self management approach (including development and evaluation of group program)
- Improvement of staff skills in facilitation of case conferences and family meetings
- Development of staff skills in relation to presenting at conferences
- Responding to recommendations made in the sub-acute review

Health Independence Programs (HIP)

The introduction of Health Independence Programs Guidelines has seen the implementation of many changes in the way the Community Rehabilitation Centre provides services.

New positions have been developed including:

- Employment of a HIP Manager to assist with managing the many changes needed to ensure consistency within CRC's subacute programs
- Employment of a Hospital Admissions at Risk Program (HARP) Nurse whose role is to coordinate care for clients who are over 65 years of age and have complex needs and chronic conditions. By providing education around disease process and symptom management, Ian Morelli works to reduce the need for preventable hospital admissions. The HARP Program is evaluated using measures of quality of life and fitness
- A new position of Intake Worker was officially commenced in August. Carol Porker and Sue-Ellen Ford share the intake role and are the first contact for clients and carers. The Intake Worker screens and prioritises all referrals and conducts the initial assessment and prioritises client access to the appropriate service, ensuring people get the right care, at the right time, in the right place

Occupational Therapy

During the year the Occupational Therapy Department was restructured with the department now integrated into the HIP stream. Additionally, some staff hours that were traditionally allocated for OT specific work have been reoriented towards providing more generic care coordination for clients with complex needs and chronic conditions. This position is a significant step toward improving interdisciplinary care planning within the CRC.

The Occupational Therapy Department has joined with Mount Alexander Shire in providing the "Active HACC" Program which is aimed at improving client's independence after a hospital stay. Shared care plans are now developed to increase the client's functional capacity and independence after illness.

Speech Pathology

The past 12 months has seen several changes, including employment of locum Speech Pathologists to help provide services to inpatients and outpatients. Despite staffing issues, the Speech Pathologists have continued to provide a wide range of services to the community including the annual Kindergarten Screening Program which is offered to all Kindergarten children in the Mount Alexander Shire. Speech Pathology services commenced an extra day per week at Macedon Ranges Health Services through More Allied Health Services (MAHS) funding from the GP Network. Staff from the department has also been involved in several activities and projects which include:

- Coordination of activities and information displays for Stroke Week
- Ongoing contribution to the Modified Texture Food and Fluid Project at Castlemaine Health, to increase the safety of patients with swallowing problems
- Ongoing participation in the Dysphagia Quality Assurance Program - a national program aimed at developing the knowledge and quality of skills in dysphagia (difficulty swallowing) assessment and management

Our Community Programs *Continued*

Podiatry

Highlights for the year included Virginia Bennett presenting at the 2009 Loddon Mallee Region Home and Community Care (HACC) Quality Forum on the partnership between Mount Alexander Shire and Castlemaine Health Podiatry Department. The department provided foot care training to staff at Ellery House so that they have a better understanding of foot health and can provide basic foot care to residents. Community services including wax bath clinics, kindergarten screenings, and home visiting service have continued.

Dietetics

The Dietitians have had a varied and interesting year providing nutritional service to Acute, Rehabilitation and Residential Care clients. They have been involved in Healthy Bones Week with activities in the cafeteria for staff, a Stroke Awareness display and activities during Stroke Week. Community presentations included label reading at the Returned Services League Club, healthy lunches at Castlemaine Primary School and cardiac health at Maldon Hospital. Staff presented at the Allied Health Conference and the Victorian Rehabilitation Nurses study day. They continue to provide a consultancy service to Loddon Prison, Malmsbury Youth Training and Kyneton District Health Service.

Support and Assessment Services

The Support and Aged Care Assessment (ACAS) Team has reviewed the department's objectives during the year and as a result has rationalised the service provided to Connolly Rehabilitation Unit. The service has been restructured to have less staff who have been provided with dedicated roles in either ACAS or the Support Program.

Early Intervention

The Early Intervention Program was successful in obtaining funding for extra places for children with complex needs. Since the program commenced in mid 2001 the number of children seen has increased from 23 to 40. This has also lead to an increase in staff from 1.6 EFT to 2.0 EFT.

District Nursing/Palliative Care/ Post-Acute Care

District Nurses provide quality nursing for people in their own homes. Nurses with specific knowledge in Palliative Care now provide a service to residents of Mount Alexander Shire. The Post Acute Care Service provides the provision of short-term care for patients with complex needs during their recovery from an episode of acute illness or injury.

District Nurses together with the personal carers from Mount Alexander Shire, developed the Shared Care Protocol for Medication Administration in the Community. The pilot program has commenced and will be evaluated in June.

Continence Service

A full time Continence Nurse and part time Physiotherapist provide confidential assessment, treatment and management strategies for adult clients in the community suffering from bladder and bowel dysfunction. The Continence Nurse also acts as a consultant to staff to assist in the management of hostel residents and inpatients on the Acute and Rehabilitation Units. Community clients are usually referred by a General Practitioner or case manager, but may also be self referred. Referrals are currently accepted from Mount Alexander and Macedon Ranges Shires, although boundaries for the service are under review.

CADARG (Castlemaine and District Accommodation and Resource Group)

CADARG is funded through the Supported Accommodation Assistance Program (SAAP) - a program jointly financed by the Commonwealth and State Governments. Our goal is to enable people in the Mount Alexander Shire to access appropriate housing so that they can achieve independence and quality of life.

CADARG also provides a rural Centrelink agency service to the Mount Alexander Shire and visiting service from Housing, Consumer Affairs Victoria, Legal Aid and Child Support.

During the year a review was held of forms, procedures and building standards compliance.

On 1st and 2nd of June 2009 the service was assessed by the Quality Improvement and Community Services Accreditation (QICSA) against the Housing and Supportive Services (HASS) Standards and passed with outstanding results. This is the first time that we have required accreditation against these services and we are still waiting the final report which will include some recommendations for improvement for us to work towards.

During the past 12 months CADARG's Youth Homelessness Action Plan has supported a Lead Tenant Program which has provided young people with an opportunity to live in a secure and stable environment. The program has achieved good outcomes and was evaluated positively.

Adult Day Services

Adult Day Services continue to provide respite services (National Respite for Carers program) and Planned Activity Groups (Home and Community Care program) in clubs at Harcourt, Castlemaine and surrounds. Four long weekends of respite were provided using the Seven Hills Holiday House in White Hills and two holidays for couples to Mulwala and Warrnambool were enjoyed immensely.

A holiday for young people with a disability was rescheduled due to extreme heat conditions. Activities offered during the year have included cultural days, art gallery visits, regular music and craft activities and some new technology has been introduced following a gift of a Wii (television game) and TV for clients. The new Strength Training for Carers Planned Activity Groups commenced in April 2009 in response to discussions held with carers. There are currently seven participants, with the potential to expand.



Community Programs Team

Our Volunteers

Volunteer participation at Castlemaine Health Service enhances quality service provision to patients, clients and residents of the Health Service, aged care facilities and community.

Volunteers enthusiastically support Castlemaine Health across the breadth of our operations by:

- Visiting and assisting with lifestyle/ recreation programs and care support in residential facilities and within the Adult Day Services in Harcourt and at Faulder Watson Hall in Castlemaine
- Providing individual companionship to, and sharing of interests with, older community members
- Assisting in the café and with our lolly and library trolleys
- Providing pastoral care to residents and assisting with palliative care in the community
- Driving and escorting people to medical related appointments and community activities
- Sharing enriching, musical and artistic skills and talents with the Castlemaine Health community
- Facilitating a Companion Walking Program
- Regular visiting with pets to residential facilities
- Assisting with administration, publishing, surveys and special projects in various departments, and
- Participating through our Board of Management and Community Consultative Committee

Quality Outcomes

Making Music, Being Well Week

This celebratory national biannual week of active music making was brought to Castlemaine Health this year thanks to the foresight of one of our volunteers. This is an initiative celebrating the link between making music and feeling good. Mount Alexander Shire's talented musicians, many of whom are also our volunteers and paid employees, performed in various locations around Castlemaine Health including our Adult Day Service.



Our Trolley Ladies

Partnership with Goldfields Library Service

A project officer has been employed by the Goldfields Library Service to help older people connect with libraries. Volunteers are assisting residents of our residential units to select from a range of written and recorded materials available through the library service. This service will greatly benefit avid readers and those with specific interests that our small in-house library cannot cater to. Support equipment such as magnifiers, book rests and specialised compact disc players are now available for borrowing or purchase

The 'Connys'

Many Connolly Rehabilitation Unit patients spend weeks or months with reduced access to recreation or social activities. We have introduced volunteers to engage patients in one to one or small group activities and to encourage social interaction.

New volunteers are welcome please contact the Castlemaine Health Volunteer Office on 5471 1565



"From the people at reception to the nurses and doctors I found the most pleasant and competent medical treatment. The best hospital I've ever attended"- Comment received from a day surgery patient Aug 2009.

Our Facility Services

Profile

In order to ensure ongoing efficient and reliable services, the General Services Directorate oversees the management of assets and facilities, management of the vehicle fleet, provision of catering, cleaning, waste disposal, recycling and security services.

Quality Outcomes

- Excellent results on external food safety and cleaning audits
- Refurbishment of Slater House to provide accommodation for staff and students
- Upgrading of building automation/temperature control system for Geroy Acute, Connolly Rehabilitation and Community Rehabilitation Centre
- Upgrading of the Theatre and CSSD air conditioning control system and installation of a return air duct
- Implementation of an electronic vehicle booking diary for the vehicles managed by Engineering
- Employment of Trainee in Food Services
- Deliveries of linen and meals to Maldon Hospital reduced from seven trips to four per week
- Refurbishment of two rooms in Tolstrup wing for use by Monash University Medical Students as a lecture theatre and study room
- Completion of the removal of asbestos from the ceiling space above the Acute and Rehabilitation wards
- Change in rostering in the Laundry enabling staff to have weekends off

Future Directions

- Replacement of signage as funds become available
- Investigate options for the use of the former Hospital site at Halford Street
- Landscape and build paths between Ellery House and the Administration office

- Improve compliance with all high priority work requested of the Engineering Department to be completed within two days
- Reduce the number of false fire alarms
- Investigate the purchase of a larger washing machine for the Linen Service

Transport Management

Over the past year, Castlemaine Health Transport Department has concentrated on providing specialist services in the following two areas:

Day Respite Program - This service meets the growing demand of local and regional clients who suffer from a cognitive impairment. The objective of this service is to provide access to specialist programs and provide maximum respite time for carers. The challenge is to apply Person Centred Care principles, by scheduling collection and delivery times to meet individual circumstances and maintain an operationally efficient service.

Inter Hospital Transport - This service is for appropriately assessed non time critical patients who are required to attend regional and metropolitan hospitals for admission or diagnostic services. The benefits are that the service is cost effective, time responsive and relieves the pressure on the time and non time critical service providers.

The Department continues commercial partnership providing services to the Community Health Centre, Maldon Hospital and Mount Alexander Shire.

Support services include vehicle allocation, resident activity programs, courier service, meal delivery, mail collection, processing and despatch.

Cleaning Services

To ensure compliance with increased cleaning audit requirements, there has been an increase in the frequency and thoroughness of cleaning audits. There are now three external audits per year

instead of one which is reported to the Department of Health. There has been an increase in the number and types of areas that require monthly auditing.

During the year, a replacement program was commenced whereby all window curtains in the Acute and Rehabilitation Units are being progressively replaced with curtains that are able to be laundered in the facility laundry.

The external audit of cleaning conducted in May had an outstanding result of 97% compliance which is well above the 85% required.

Food Services

The kitchen staff provide in excess of 273,000 meals per year to our Acute and Rehabilitation Units, residential aged care facilities, staff, visitors, Maldon Hospitals and community clients who receive meals on wheels.

A newly developed position of trainee in the cafeteria was filled by Stephanie Wilson, who has helped the team increase sales associated with an extension of products and services available to staff and the public.

Congratulations to Sarah Chislett, Apprentice Cook, on winning a Silver Medal at the State Australian-Tafe Culinary Challenge August 2009.

An annual external food safety audit was conducted in June with excellent results.

Security

To improve the safety for our clients and staff, the following additional security measures have been put in place:

- Review of evening and night shift positions led to an increase in hours covered by security staff and a saving of eight hours per week in EFT
- Installation of additional security cameras in Penhall and Ellery House

Engineering

Key roles of the Engineering Department include the coordination of building works and building maintenance. In addition the department oversees the facilities fire safety emergency systems.

Major projects for the year included:

- Audits of energy and water usage
- Fire prevention works including removal of trees and bush
- Replacement of the roof over the gymnasium
- Upgrade or installation of airconditioning to Health Information Services, Reception, Day Procedure Unit and Central Sterilising Department, Head Chef and Hotel Service Manager offices

Linen Services

Castlemaine Health Linen Service provides linen services to client's (particularly resident's) and internal departments as required and several external customers (the number of which has increased substantially this year). This service includes washing, ironing and repairs.

After a successful trial, fitted sheets have been purchased to replace flat sheets. There has been positive feedback from both staff and clients stating this makes the beds more comfortable and easier to make.

Weekend shifts in the Linen Service were transferred to week day shifts reducing the costs of paying penalty wages and improving satisfaction of employees.

Contracts

Contracts continue to be monitored using an electronic program. During the year contracts were commenced through Health Purchasing Victoria for bread and milk resulting in savings of up to \$30,000 per annum.



RECOGNITION OF THE SERVICE OF: GRAEME HILL Deputy Chief Executive Officer Ceased Duties June 2010

"One of the most hard working and committed staff we have ever had, who has always had the staff welfare at heart."

"A wonderful leader and example of people centred management."

"A very supportive manager and always with the best interests of the organisation in mind."

Dedication, hard work and commitment are reflected in Graeme Hill's 39 years of service with this organisation.

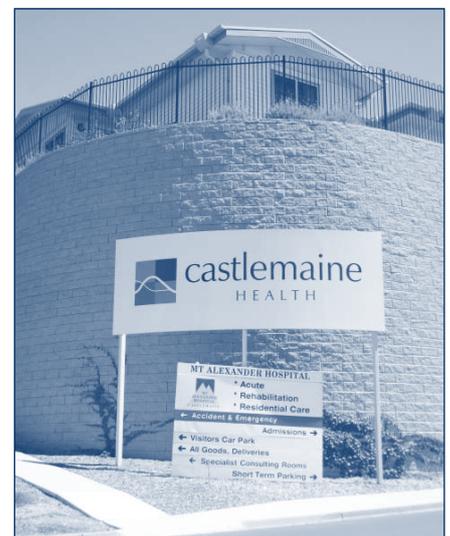
Graeme commenced working in 1971 as an Administration Clerk for the then known Alexander Home & Hospital for the Aged. He has held a number of positions including Pay Master, Administrator of Maldon Hospital, Director of General Services and has had many other responsibilities including Acting Chief Executive Officer.

Graeme has been instrumental in driving many major contributions within the Health Service. This has included involvement in the planning and construction of Capital Works projects, the amalgamation of Castlemaine District Community Health Service and Alexander Home and Hospital for the Aged,

changes within Hotel Services department, and the establishment of CHIRP (Castlemaine Health Information Resources and Promotion). Graeme has also been involved in the introduction and development of standards to enable the Health Service to receive accreditation status and the introduction of a staff gymnasium and upgrading the cafeteria. Graeme has also been the Coordinator of the twinning relationship with Kundiawa Hospital in Papua New Guinea since its commencement in 2000 and has made a number of visits both as part of the project and as a volunteer during his annual leave.

Graeme's achievements and contributions to the Health Service are far too numerous to list and his impact on the staff, clients and the community have been invaluable.

We would like to wish Graeme the very best for his future endeavours after leaving the service in June.



Old and New



Our Environment

Castlemaine Health abides by a strict Environmental Policy that provides the staff with guidance to ensure that we offer an environmentally friendly health service and workplace. We are committed to protecting the environment and ensuring sustainability wherever we can. Ongoing consideration is given to conserving energy and water, reducing greenhouse gas emissions and improving waste management.

Energy conservation

Over the past year we have introduced the following initiatives to reduce energy usage:

- T5 lighting low energy
- Variable speed drives to plant room's 7 and 7a
- Direct digital control of the air conditioning system on the North Block
- Return air duct to theatre with a 50% capacity to recondition and recycle the air
- New boiler strategy to control on demand

As a result of the above we have recorded an 11.2% reduction in power use and a 10% reduction in natural gas use compared with the same period last year.

Waste management

To ensure ongoing minimisation of waste we have established systems to maximise recycling of paper, metals, plastics and batteries.

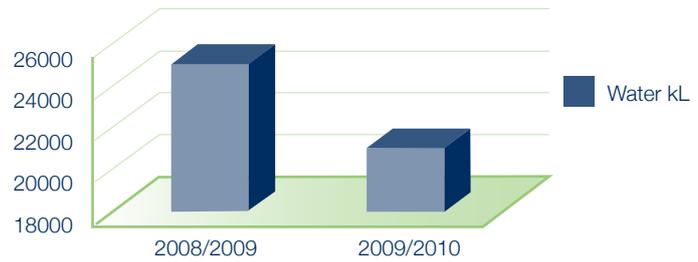
Water consumption

Ongoing work funded through a Community Water Grant has seen a reduction in water usage this year in excess of 1380 kLitres. One strategy implemented to assist with this reduction was rainwater harvesting from the South Block for flushing toilets in Ellery House.

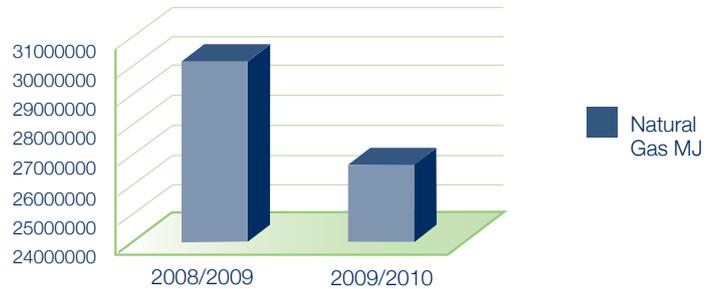
Future directions

- Regular internal energy and water usage audits
- Ongoing monitoring for opportunities for additional funding to facilitate sustainable initiatives

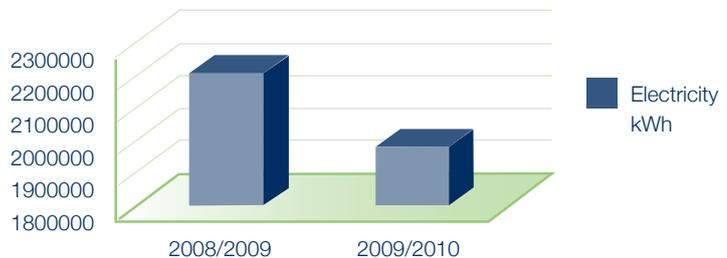
Water kL



Natural Gas MJ



Electricity kWh



Our Engineering Department

Corporate Governance

PRESIDENT

Mr Bill O'Donnell

BA, LLB

Solicitor, Notary Public and Mediator

Appointment Expires 30/06/2011

VICE PRESIDENT

Mr Glenn Sutherland

BA, Dip Ed, Grad Dip Ed Admin, Grad Dip Mgmt

Lecturer and Online Retailer

Appointment Expires 01/07/2010

TREASURER

Mr Ian McKenzie

Bach of Pharmacy

Pharmacist / Wine Maker

Appointment Expires 01/07/2010

BOARD MEMBERS

Ms Lee Bower

BSc (Monash)

Employment & Training Consultant

Appointment Expires 30/06/2011

Dr Les Fitzgerald

RN, RM, Dip (Teach), BA Ed, M Nurse PhD

Senior Lecturer in Health Sciences

Appointment Expires 30/06/2011

Ms Elizabeth Grainger

Trained Infant Teachers Cert

Grad Dip, Special Ed

Assistant Principal

Appointment Expires 30/06/2012

Ms Jude Jackson

Trained Primary Teachers Cert

Grad Dip, Special Ed (Retired)

Appointment Expires 30/06/2012

Mr Bruce Johnsen

BSc Biology, Grad Dip Computing Teacher

Appointment Expires 30/06/2012

Mr Rob Waller

CEA (REIV)

Estate Agency Director

Appointment Expires 30/06/2012

Board of Management Structure and Function

The function of the Board of Management is to oversee the governance of the Health Service and to ensure that the services provided by the Health Service comply with the requirements of the Health Act 1988 and the By-Laws of the Health Service.

Members are required by the Act to act with integrity and objectivity at all times. They are required to declare a pecuniary interest, when applicable, during Board debate and withdraw from proceedings. There were no occasions that required declaration this year.

Conflict of interest is declared during Board proceedings, in accordance with the By-Laws of the service.

Board members serve in a voluntary capacity and do not receive payments.

A number of sub-committees consisting of Board, Staff, Visiting Medical Officers and members of the community have been formed to advise and recommend on relevant matters.

The Board of Management meets on the fourth Tuesday evening of each month (except January) to deal with a formal agenda and reports on the Health Service's performance as reported by the Chief Executive Officer and each of the Directors. Meetings commence at 6.30pm in the Board Room, Level 4 of Castlemaine Health and are open to the Public.

Board of Management membership of Sub-committees

Credentials & Medical Appointments Advisory Committee

Mr Bill O'Donnell (Chairperson)

Ms Lee Bower

Mr Les Fitzgerald

Ms Elizabeth Grainger

Mr Bruce Johnsen

Mr Glenn Sutherland

Chief Executive Officer Evaluation Committee

Mr Bill O'Donnell (President)

Mr Glenn Sutherland (Vice President)

Mr Ian McKenzie (Treasurer)

Audit Committee

Ms Jude Jackson (Resigned)

Mr Ian McKenzie (Chair)

Mr Rob Waller

Mr Richard Hetherington (Independent)

Ms Sandra Wilson (Independent)

Executive Management

The Directors meet with the Chief Executive Officer every Monday to discuss strategic issues relating to the management of the organisation. The Director of Medical Services does not attend on that day, but attends a full day on Thursday at the Health Service.

CHIEF EXECUTIVE OFFICER

Mr Graem Kelly, PSM

MBA, BA App Sc, Grad Dip Rural Health, Adv Dip Bus, RN, AFCHE, MAICD, AIMM, FARLF

DIRECTOR OF GENERAL SERVICES AND DEPUTY CEO

Mr Graeme Hill

Dip Acc, Cert Bus Studies (Hosp Admin), PNA, Grad Dip Bus Manag, FCHSM (Ceased duties June 2010)

DIRECTOR OF NURSING

Dr Ann Allenby

RN, Cert Onc Nsg, Cert Steril & Inf Control, MedSt, DN, Cert Business & Admin, MRCNA

DIRECTOR OF MEDICAL SERVICES (Resigned June 2010)

Dr Albert Ip

MB BS, MBA, MPH

DIRECTOR OF COMMUNITY SERVICES

Mrs Rhonda Williams

RN, B Pub Health

DIRECTOR OF FINANCIAL SERVICES

Mr Geoff Vendy

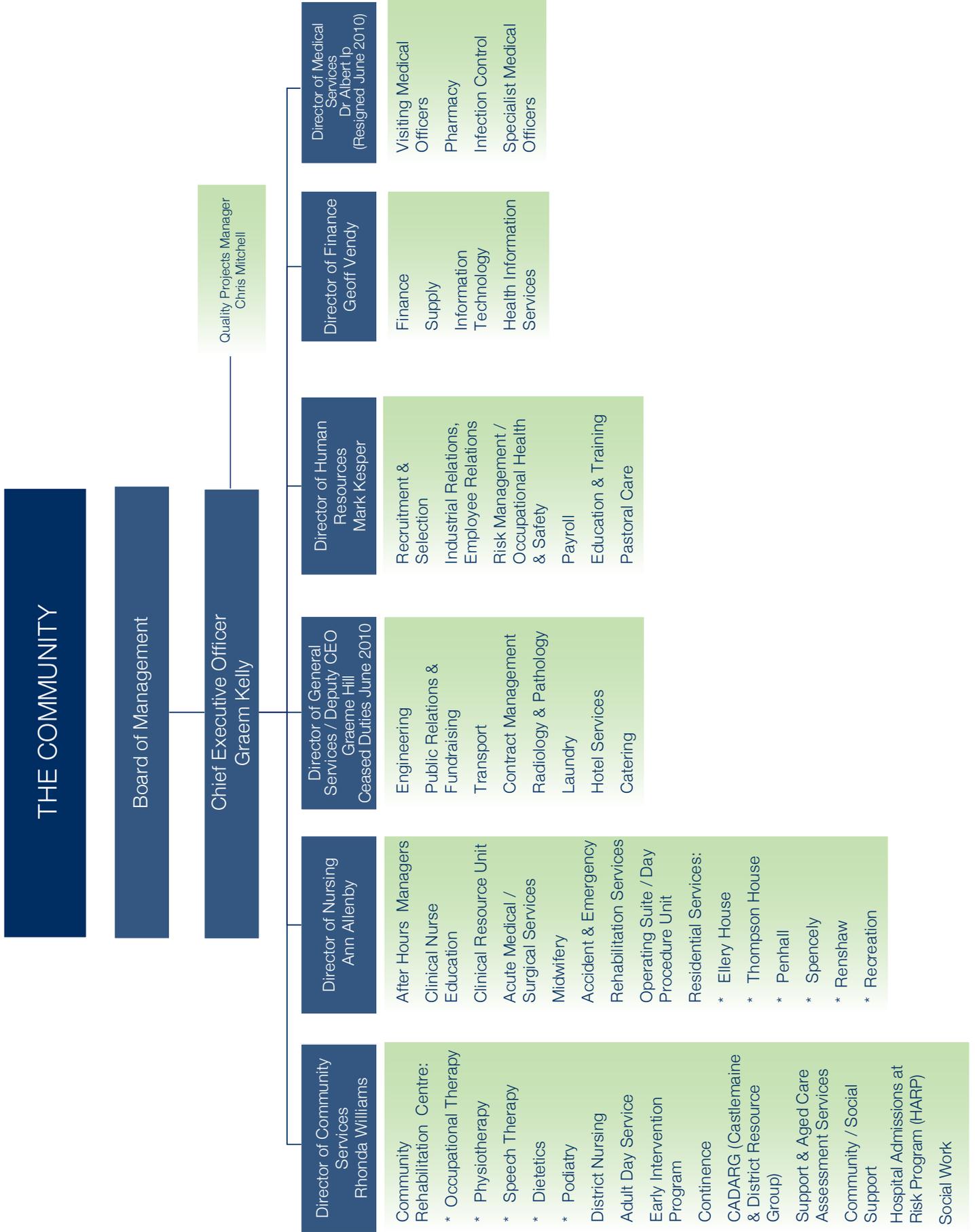
BBus (Acc)

DIRECTOR OF HUMAN RESOURCES

Mr Mark Kesper

Dip Civil Eng

Organisational Chart



Our Staff

Profile

The Directorate provides support in the areas of recruitment, payroll, occupational health and safety as well as general advice to facilitate having a workforce that is capable and accountable.

Quality Outcomes

- Implementation of a corporate wardrobe and uniforms across all departments
- Review of the Compulsory Education Program
- Implementation of Initial Registration of Overseas Nurses (IRON) Program
- Introduction of additional traineeships
- Review of medical practitioner credentialing documentation
- Review of administration and clerical roles
- Introduction of Riskman online incident reporting system
- Introduction of a Code Grey (Potential Personal Threat) Procedure
- Review of the Emergency Procedure Manual

Future Directions

- Development of a comprehensive management training program
- Implementation of an absence management strategy
- Revision and update of staff position descriptions into a newly developed format
- Investigate implementation of KRONOS (a time and attendance electronic system)
- Extend use of computerised on line learning tools

Education and Training

Professional development continues to be an important component of the education and training program. This assists staff to fulfil their professional educational requirements and ensures that clients receive the best possible care. A variety of opportunities are provided including education sessions, study days, practical sessions, clinical support and learning packages. A review of the compulsory education staff program was conducted and resulted in a more streamlined system, with additional provision of on line training.



Kate Jermyn & Evita Ferguson with our new uniforms

Clerical and Administrative Review

A review of clerical and administration processes was conducted to ensure staff in this work area are supported and appropriately resourced. Outcomes of the review include updated position descriptions and adjustments to administration staffing allocations.

Equal Employment Opportunity (EEO)

Castlemaine Health continues to observe and follow principles of Equal Opportunity, including selection on merit. Vacant positions are advertised internally and externally to ensure the Health Service continues to attract and retain a dedicated and skilled workforce.

Pastoral Care Services

Danni Moore was appointed as our new Pastoral Care Coordinator, coming to us from Austin Health. Her role is to provide a safe and confidential space for people to explore issues of importance to them, regardless of background.

Pastoral care is available to all patients, residents, families and staff members. All interactions are conducted in a sensitive, person-centred and non-religious manner and requests for support can be made via reception or nursing staff. Danni is also one of four prevention of Bullying and Harassment Contact Officers.

Occupational Health and Safety (OHS)

An online incident reporting system (Riskman) was launched following a detailed implementation and training process. The system has eliminated the use of paper based report forms and has allowed more detailed trend reporting of adverse events. The quality of information being captured has improved as has the follow-up and overall risk management process.

The next phase of this process will be the introduction of the VHIMS (Victorian Health Incident Management System). This will see all health services providing the Department with regular reports of various incidents and will allow similar reporting to other regulatory authorities.

A manual handling working group was established in early 2009 following an identified increase in staff experiencing manual handling injuries. Although there has not been a substantial increase in the total number of WorkCover claims lodged, the nature of these injuries suggested that further preventative actions needed to be investigated and implemented.

The key outcome from this working group has been the recommendation to actively promote the principles of a "Fit for Life – Fit for Work" program, to train key personnel in the principles of Manutention and to encourage manual handling champions in each of the high risk areas of the health service.

Improved Emergency Radio Communications

Considerable work was undertaken in preparation for the 2009 – 2010 bushfire season following the inclusion of Castlemaine as one of the 52 townships of extreme risk. In addition to several new procedures being implemented, ten portable hand held radios were purchased and distributed to all key areas of the health service to aid in improving communications. Training continues to be provided to staff in the use of these radios which will be of great assistance in all types of emergency situations.

Injury Management & WorkCover Risk Management

The prevention of injuries and the rehabilitation of injured employees is a key focus of our OHS Risk Management program. Returning injured employees to work can be a complex process; we continue to have positive results through a proactive and consultative approach. We work closely with injured employees, medical practitioners, other health professionals and our WorkCover insurer, CGU Insurance.

While the number of reported back injuries continues to decline, an increasing trend of stress and shoulder related injuries has been identified.

In conjunction with CGU Insurance, we have provided training to Managers for

Human Resources Directorate Continued

successfully managing stress and OHS responsibilities. This training will continue throughout the next year and topics will include Return to Work, Claims Management and additional Risk Management training.

New equipment continues to be introduced to ensure a safe workplace. Items include:

- Electric motorised trolleys to aid in moving furniture and stores
- Safety barricades and warning signs for engineering
- Portable radios for emergency communications
- Smaller linen bags
- A system of safe sharps to reduce potential needle stick injuries
- Ergonomic office furniture
- Improved air conditioning equipment and controls
- More electric beds
- Lifting equipment and slide sheets to aid in the safe transferring of clients

Changes to WorkCover legislation

On 11 March this year, the Victorian Parliament adopted and passed the Accident Compensation Amendment Bill 2009. These amendments have resulted in increased benefits for injured employees and increased compliance requirements for employers. Further amendments will see greater emphasis on successfully returning injured workers to work.

Industrial Relations

There has been no lost time due to industrial disputes at Castlemaine Health. The Workplace Consultative Committee meets each month to discuss future changes in direction and to provide an avenue for employees and Union representatives to table any concerns. The introduction of monthly Department Head and quarterly Executive and All Staff meetings has improved communication significantly. Enterprise Bargaining Payments have been made during the year as per Government policy and consistent with Victorian Hospitals.

WorkCover Premiums

Year	Premium	% of Remuneration
09/10	\$485,608	2.1113%
08/09	\$414,971	1.9363%
07/08	\$353,124	1.6879%
06/07	\$303,883	1.3155%

WorkCover Days

Year	Days Compensation Paid
09/10	517
08/09	480
07/08	294
06/07	253
05/06	1076

WorkCover Claims

Year	Claims Lodged
09/10	6
08/09	10
07/08	4
06/07	6
05/06	11

Our Staff Profile as at 30 June 2010

Labour Category	June Current Month FTE	June YTD FTE
Nursing	160.24	157.94
Administration and Clerical	55.85	55.78
Medical Support	24.12	23.41
Hotel and Allied Services	95.20	95.12
Medical Officers	0.58	0.58
Hospital Medical Officers	0.49	0.49
Ancillary Staff (Allied Health)	29.75	28.05

Our Social Club

Profile

The Social Club currently has 203 members and the Committee's aim for this year was to build on the number of individual prizes and benefits for Club members. This was achieved by the number of individual prizes increasing to 161 compared to 136 for the previous year. Prizes are in addition to the other activities conducted by the Club, which included:

- **Lunches in the Cafeteria (four)**
- Free of charge
- **Staff Christmas Party** - Free of charge for staff. Held in conjunction with the Board of Management at Campbell's Creek Community Centre with entertainment by Horizon. It was terrific to welcome a group of colleagues from Maldon Hospital who attended and thoroughly enjoyed the night
- **Children's Christmas Parties**
- Free of charge. This was held at the Chewton Oval with an increased number of children delighted with the broad range of activities and of course, providing an enthusiastic welcome to Santa as he arrived on the fire truck. Thanks to the Chewton Fire Brigade for providing Santa's transport
- **Coffee & Cake Voucher** – Free. Club members were issued with a voucher that enabled them to enjoy a treat at one of two popular cafes in the Castlemaine business district. The Committee received positive feedback from members, particularly those working evening and night shift who were able to participate in this promotion
- **Melbourne Shopping Tour**
- **Castlemaine Business Discount Scheme** - Members who shop at participating businesses receive a discount. Four additional businesses joined the scheme this year



Face Painting at Childrens Christmas Party

The Club maintains its commitment to our clients by donating a gift to all residents and inpatients at Christmas.

Expenditure Summary:

Presidents Christmas gifts - \$1,483, TV Thompson House - \$792.00, total of \$2,275.15. Thompson House staff raised \$200.00 towards the large screen TV, management contributed \$250.00 and the Social Club contributed the balance via funds allocated for residents' gifts. The purchase included a bonus 26" TV which was drawn as a prize for Social Club members.

The success of the past year would not have been possible without the support of the Social Club Committee, members, management, the Board of Management, the local business community, Food Service department, cafeteria staff and all other staff who have assisted the Club over the past year. The Club extends its appreciation for their assistance.

The Social Club acknowledged the resignations of Graeme Hill (39 years of service) and Robyn Grant (27 years of service). Both were presented with a gift and Certificate of Appreciation in recognition of their service as Club members.

The Social Club Committee and members would like to especially acknowledge Graeme Hill for his generous contribution to the Club during his time at the Health Service. Graeme has been an Office Bearer, Committee member and has for many years donated his time to undertake the annual audit of the Club's financial records. Graeme has always been a willing, active and unobtrusive participant in helping with Social Club activities. His departure will create a vacuum, that will be difficult to replace and he will be sadly missed by staff and residents.

The Club extends best wishes for the future to Graeme, Robyn and their families

In conclusion, I would like to convey my sincere thanks to a hard working Committee consisting of Heather & Robert Stuchbree, Carla Roberts (resigned Feb 10), Diann Turnbull, Lisa Pollard, Marg Patton, Dallas Weston, Greg Hughes and Cheryl Bridgland for their excellent work over the past year.

Frank Carroll
President

Statutory Compliance

Attestation on Compliance with Australian / New Zealand Risk Management Standard

I, Graem Kelly, certify that Castlemaine Health has risk management processes in place consistent with the *Australian / New Zealand Risk Management Standard* and an internal control system is in place that enables the executives to understand, manage and satisfactorily control risk exposures. The *audit committee* verifies this assurance and that the risk profile of Castlemaine Health has been critically reviewed within the last 12 months, and

Attestation on Data Accuracy

Certify that Castlemaine Health has put in place appropriate internal controls and processes to ensure that the Department of Human Services is provided with data that reflects actual performance. Castlemaine Health has critically reviewed these controls and processes during the year.



GRAEM W KELLY, PSM
Chief Executive Officer
Date: 15 July 2010

Ex-gratia Payments

Castlemaine Health made no ex-gratia payments for the year ending 30 June 2010.

Freedom of Information Applications

All applications were processed in accordance with the provisions of the *Freedom of Information Act 1982*, which provides a legally enforceable right of access of information held by Government agencies. Castlemaine Health provides a report on these requests to the Department of Justice.

Freedom of Information requests can be submitted to the Chief Executive Officer, Castlemaine Health, PO Box 50, Castlemaine 3450. Application forms are available on our website www.castlemainehealth.org.au, or by phoning 5471 1555. Application fees and charges apply.

Twenty one requests were received under Freedom of Information in 2009/10. All requests were processed within the required timeframes.

Whistle Blower's Act

The Whistle Blower's Protection Act 2001 provides protection for any person who would like to make a disclosure of improper or corrupt conduct by an official of a public entity. Castlemaine Health received no complaints under this Act during the year.

Compliance with Building and Maintenance Provisions of Building Act 1993

All building works have been designed in accordance with the Department of Human Service's Guidelines and comply with the Building Act 1993 and the Building Code of Australia 1996.

Victorian Industry Participation Policy Act 2003

There were three contracts completed at Castlemaine Health under the Victorian Industry Participation Policy Act 2003 during this year. Terri Seymour, Aspex Consulting and Dsign.

Statement on National Competition Policy

Castlemaine Health complied with all Government policies regarding neutrality requirements with regards to all tender applications.

Consultancies for Year ended 30 June 2010

- Consultancies in excess of \$100,000 – Nil
- Consultancies costing less than \$100,000 – Number of consultants engaged three. Total cost of engagements \$190,302

Fees Charged for Service

All fees and charges charged by Castlemaine Health are regulated by the Commonwealth Department of Health & Ageing and the Hospitals & Charities (Fees) Regulations 1986, as amended and as otherwise determined by the Department of Human Services, Victoria. Policies and procedures are in place for the effective collection of fees owing to the service.

Ethical Standards

The Board of Management promotes the continued maintenance of corporate governance practice and ethical conduct by the Board members and employees of Castlemaine Health. The Board has endorsed a code of conduct with applies to Board members, officer and all employees.

Pecuniary Interests

Members of the Board of Management of Castlemaine Health are required to notify the President of the Board of any pecuniary interests which might give rise to a conflict of interest in accordance with Castlemaine Health Board's code of conduct.

Tax Deductible Gifts

Castlemaine Health is endorsed by the Australian Taxation Office as a Deductible Gift Recipient. Gifts to Castlemaine Health as a Public health service qualify for a tax deduction under item 1.1.1 of section 3-BA of the Income Tax Assessment Act 1997.

Disability Act 2006

Castlemaine Health has completed a Disability Action Plan for full implementation in 2010.

Acknowledgements

We wish to thank everyone, especially staff, who contributed to the writing and production of this year's annual report

Printing & Design

BMP Total Image Management

Cover and Page Layout
Jane Prideaux, Graphic Designer

Photography

Fran Taylor

Collation

Julie Best, Chris Mitchell, Heather Paulet,
Fran Taylor & Tina White

Support Data

Regional Office, Department of Health

Banker

Bendigo Bank

Auditors

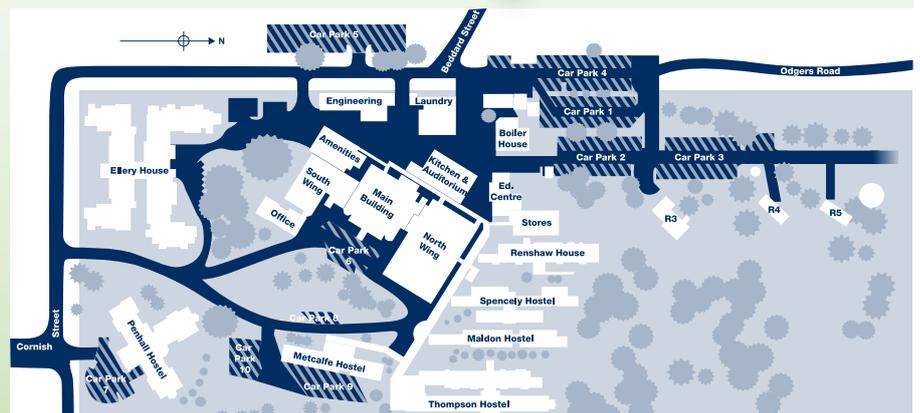
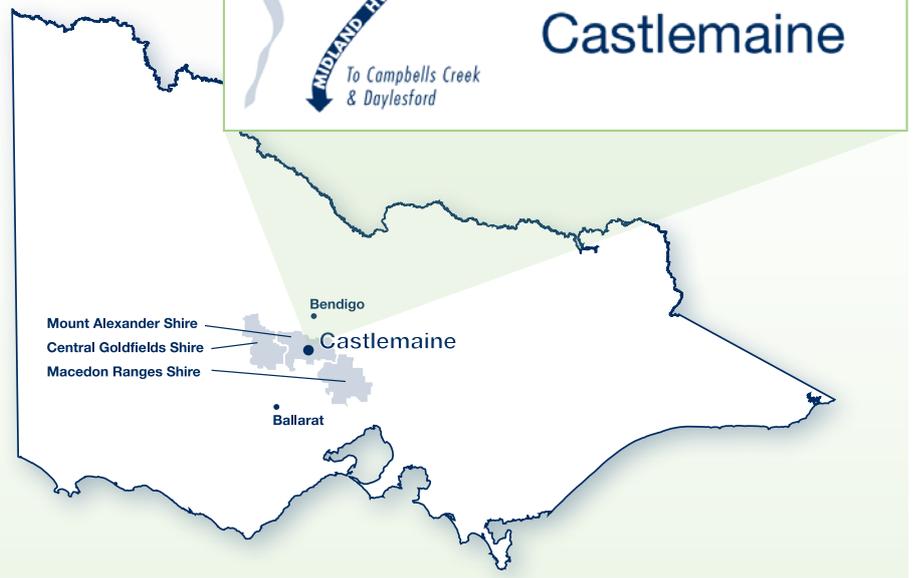
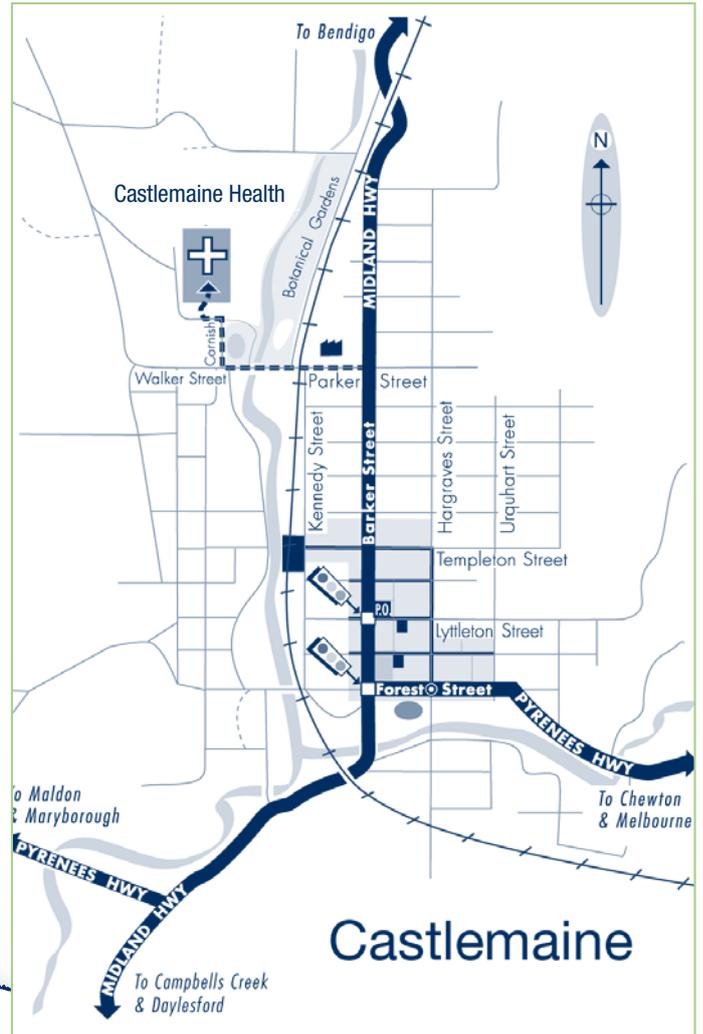
Auditor-General, Victoria

External Auditors Agents

Richmond Sinnott & Delahunty

Internal Auditor

Accounting & Audit Solutions, Bendigo



Castlemaine Health was successful in receiving a Bronze Award at the Australasian Reporting Awards for our Annual Report 2008/09

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Cornish Street, Castlemaine Vic 3450, PO Box 50
www.castlemainehealth.org.au

