



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.

# Person centred care across a range of services

In 1853 the first hospital was built in Castlemaine when the community needed to be able to care for those flooding into the goldfields.

The focus on people and community continues to this day, with Castlemaine Health now providing a diverse range of services to community members in a growing and changing population.

Castlemaine Health is proud to provide inpatient, outpatient and community services to the Shire of Mount Alexander and beyond.

### 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 acknowledges the support of the Victorian Government.

#### Key achievements

- Commencement of \$10 million redevelopment of theatre, urgent care and acute wards in February 2013 (page 3)
- Castlemaine Health Community Consultation Committee established in August 2012 (page 5)
- Successful increase in Aged Care revenue as a result of improved care and documentation for residents (page 8)
- Development of the Older Person's Nurse Practitioner scope of practice (page 8)
- Appointment of Visiting Geriatrician and Rehabilitation Specialist to Connolly Rehabilitation Unit (page 10)
- Continuation of external peer support for General Practitioner Obstetricians and Midwives (page 10)
- Up-skilling of pharmacy technicians, progressing towards Certificate III in Hospital-Health Services Pharmacy support (page 10)
- Participation of allied health staff and allied health students in the Whole of Service Student Placement (WoSSP) Project (page 11)
- Refurbishment of the Metcalfe Building into the Children's Centre (page 11)
- Annual audit of processes implemented to document client involvement in care planning and decision making (page 13)
- Case Manager completed Diploma of Community Services Co-ordination (page 13)
- Dementia Working Group (interdisciplinary) initiated in July 2012. Evaluation of DWG June 2013 has identified the need to improve transition points to care, from onset through to end of life (page 13)
- Staff members have commenced training at Gay and Lesbian Health Victoria (page 13)
- IT installed a number of uninterruptible power supplies to safeguard the continuing operation of network and computer-based equipment. (page 14)
- Seven Computers on Wheels (COWs) have been installed across a number of areas within the hospital to improve computer access (page 14)
- Over one hundred computers have been upgraded or refreshed (page 14)
- The introduction of a steam cleaner has enabled the team to enhance our infection control practices, reduce manual handling risks and allow for earlier re-admittance into rooms (page 15)
- KRONOS time and attendance and rostering project commenced implementation in September 2012 (page 16)

ACTIVITY	2012-2013 ACTIVITY Achievement
WIES public	1423
WIES private	330
TOTAL WIES (public and private)	1753
WIES DVA	93
WIES TAC	2.75
WIES TOTAL	1848.75
Sub acute inpatient discharged bed days	
Rehab Level 2 (non DVA)	5347
GEM (non DVA)	1733
Rehab Level 2 DVA	546
GEM DVA	425
Ambulatory occasions of service	
SACS Non DVA	12077
SACS DVA	122
Post Acute Care non DVA	360
Post Acute Care DVA	0
Aged Care	
Residential Aged Care (bed days)	54,763
Nursing Home Type discharged bed days	
NHT non DVA	592
NHT DVA	163
WIES Activity Performance	
WIES (public and private) performance to target (%)	85
Quality and safety	
Health service accreditation	Full compliance
Residential aged care accreditation	Full compliance
Cleaning standards	Full compliance
Consumer Participation Indicator	100
People matter survey	Full compliance
Maternity – women with prearranged postnatal home care (%)	99
Infection control	
Hand Hygiene Program compliance (% audit period 2)	81.4
Staphylococcus aureus bacteraemia (SAB) rate	nil
Methicillin Resistant Staphylococcus aureus (MRSA) Infections rate	nil
Vancomycin Resistant Enterococci (VRE) rate	nil
Clostridium difficile events/infections	3
Occupational Exposure	4

# Overview of services provided

#### Acute/Sub-Acute facilities (65 staffed beds)

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

#### Residential Aged Care

#### High Care (90 beds)

- Ellery House
- Thompson House

#### Low Care (63 beds) (Ageing in Place)

- Spencely
- Penhall
- Thompson House

#### Community

- District Nursing Services / Palliative Care / Post Acute Care
- Post Acute Care Home Services
- 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
- Community Aged Care Packages
- Continence Service

#### **Client Services**

Medical

2

- Nursing & Personal Care
- Social Work

- Podiatry
- Occupational Therapy
- Physiotherapy
- Speech Therapy
- Dietetics
- Continence Management
- Volunteer Assistance
- Pharmacy
- Psychiatry
- Pastoral Care
- Infection Control
- Recreational Activities
- Pathology provided by Health Scope Pathology
- Radiology and Ultrasonography
   provided by Bendigo Radiology

#### **Corporate Services**

- 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
- International Registration Overseas
   Nurses Program
- Public Health Programs / Health
   Promotions
- Staff Education / Professional Development
- Undergraduate Programs
- Work Experience Program

Financial Summary					
	2013*	2012	2011	2010	2009
Total Revenue	41,089	38,541	37,130	34,605	35,323
Total Expenses	43,706	42,651	40,917	38,904	35,231
Net Result (inc Capital & Specific Items)	-2,617	-4,110	-3,787	-4,299	92
Retained Surplus/Accumulated Deficit	-15,105	-12,487	-8,377	-4,590	-291
Total Assets	47,489	48,382	52,381	55,839	60,106
Total Liabilities	18,244	16,688	16,359	16,030	15,998
Total Equity	29,245	31,694	36,022	39,809	44,108

#### History of Transition

- 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 Mount 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 1998 and has a variety of programs and services funded by:

Department of Health and Ageing (*Federal*)

Minister for Health

The Hon Tanya Plibersek MP

Minister for Mental Health and Ageing, Minister for Social Inclusion, Minister Assisting the Prime Minister on Mental Health Reform, Minister for Housing and Homelessness

The Hon Mark Butler MP

Minister for Indigenous Health The Hon Warren Snowdon MP

The Department of Health (Victoria)

Minister for Health and Ageing The Hon David Davis MP

Minister for Mental Health

The Hon Mary Wooldridge MP

The Department of Human Services (*Victoria*)

Minister for Community Services, Minister for Disability Services & Reform *The Hon Mary Wooldridge MP* 

The Department of Education & Early Childhood Development (*Victoria*)

Minister for Education The Hon Martin Dixon MP

\*Unaudited results

## Report to the community

#### **Presidents Report**

It has been most pleasing to see the continued very high community support for our health service, reflected both in the Castlemaine Mail and in community feedback.

Not that this means we can rest on our laurels as the Board believes that if you do not continue to improve then you go backwards. It's not so much that old saying "if it ain't broke, don't fix it" but "how can we do even better for our community?"

Accordingly Castlemaine Health has obtained Government support for a new Service Plan, outlining what services we should be providing to the Mount Alexander community, and then a Master Plan which will decide on a new location for the hospital. While the Service Plan is in its early stages as I write this, it should be completed by September this year and will consider demographic trends in Mount Alexander as well as population health data. The consultation process will focus much on community expectations and financial sustainability, including the likely impact of the new Bendigo Hospital opening in 2016.

For the first time Castlemaine Health has also been part of the development of a comprehensive Whole-Shire Health Plan this year, involving the Council, CHIRP, St Luke's and other interested community bodies. This will have the benefit of providing a much-needed integrated approach to the provision of health services to our community.

I have to report that Castlemaine Health has suffered financially in the past year from two main factors. The first is the closure of our only operating theatre due to the redevelopment and the second has been the funding cuts to health services in general. We are consequently likely to be in deficit until 2015-16. However, I do want to pay tribute to the excellent work of CEO Ian Fisher and the senior management of Castlemaine Health for their dedication in finding new sources of revenue and in reducing administrative costs.

When our current \$10 million redevelopment is completed in early 2014 we will be able to provide our community with much improved urgent care access and two wonderful new operating theatres. We were privileged to have both the Treasurer The Hon Kim Wells and Minister for Health and Ageing the Hon David Davis perform the commencement of works.

I want to say how grateful Castlemaine Health is to our sister hospitals, Bendigo Health, Kyneton District Health and Maryborough District Health, for their very real support in enabling us to use their surgical facilities this year. The Loddon-Mallee Region Department of Health has also provided excellent assistance for us throughout this period.

As you would know, our former CEO Graem Kelly resigned in September last year to take up a position with the Queensland Health Service. After a careful search the Board was very pleased to be able to appoint our new CEO, Ian Fisher, whose background at Bendigo and Swan Hill health services as well as with Anglicare in the Northern Territory has proven invaluable. Ian commenced work with us in January. Welcome, Ian, and thank you very much for your expertise and hard work so far!

I want to also pay tribute to the wonderful work of the Acting CEO and Executive Director of Community Programs Rhonda Williams, the Executive Director of Nursing Amanda Edwards and the Executive Director of Finance/Corporate Services Rick Munari.



Glenn Sutherland President

One of our Board members Dr Les Fitzgerald has been on the Board now for twenty years. During that time Les has been both Vice-President and President and at all times has been a great contributor to the work of the Board. Thank you very much, Les!

As this is the third year that I have been President, I am stepping down. My three years have been very fulfilling but would not have been so without the advice and assistance of my Board Executive, in particular Lee Bower and Ian McKenzie, and the energy, interest and insights of the whole Board of Castlemaine Health.

In accordance with the *Financial Management Act* 1994 I am pleased to present the Report of Operations for Castlemaine Health for the year ending 30 June 2013.

Celem Sutheland

**Glenn Sutherland, MAICD** President.



#### **Chief Executive Officer**

Having started in the role of CEO in January 2013 it was quickly apparent that the Board, staff, visiting medical officers and community are proud of the history and services that are delivered at Castlemaine Health. I feel very privileged to be given the opportunity to be part of Castlemaine Health and the Castlemaine community and look forward to working with all stakeholders to continue the delivery of our valued services.

I would also like to acknowledge the work of Graem Kelly, the former CEO of Castlemaine Health, who made a significant contribution to the development of the service during his period as CEO.

#### Theatre, urgent care and associated capital works

The much awaited redevelopment of our theatres, urgent care and acute ward started in February 2013 and five months into the project it is well advanced. During the planning phase of the project the likelihood that there would be numerous issues uncovered when part of the old Hospital was demolished was included in the project construction and cost contingencies. So it was no surprise that soon after the demolition stage of the project commenced the first of many latent conditions were identified.

Our project team has worked its way through the variations as they have occurred and we are anticipating that the theatres will be fully operational early next year. The project has also impacted on our ability to meet our throughput targets despite the well planned arrangements to relocate elective surgery to neighbouring health care facilities. The community, staff (particularly in nursing) and visiting medical officers have been very understanding of the inconvenience of travelling to have their surgical work done elsewhere and difficulties on site with parking and accessing our services.

We are looking forward to the completion of the project and having new facilities that will assist our health service to offer expanded surgical services in an efficient and safe environment.

#### Strategic plan

Our current Strategic Plan (2009 to 2014) has been reviewed and endorsed by the Board. The key directions that the Board identified last year were again the focus this year. They are:

- 1 Completing Master Planning for Castlemaine Health.
- 2 Improving communication.
- 3 Building a workforce that is open, respectful, supportive and trusting, capable and aligned to the organisational goals.
- 4 Continuing to enhance organisational skills in change management.
- 5 Providing high quality governance and leadership.
- 6 Defining our role in the sub-region.

We have made substantial gains in these key directions which will be reviewed next year as we prepare a new Strategic Plan.

#### **Financial position**

Sustaining a sound financial position has again proven difficult and complicated this financial year due to the adverse impact of the closure of the theatres. Other factors that have added to our unfavourable position are reduced occupancy in our aged care, variable occupancy in sub-acute due to the mid-year Federal budget reduction and cost pressures in our expenses.

We are working with the Department of Health to get through another extraordinary financial year next year when our theatres will again be closed for at least 6 months and a third of our acute beds not accessible due to the redevelopment.

#### **Board and Executive team**

I would like to express my appreciation to the Board for their support and in particular to the President Glenn Sutherland and Vice President Lee Bower for my introduction into the organisation. Thank you to Rhonda Williams for Acting CEO and assisting me with the handover and orientation.



lan Fisher, CEO

I would also like to acknowledge the work of the Executive team; Executive Director of Nursing Services Amanda Edwards, Executive Director of Corporate Services Rick Munari, Executive Director of Medical Services Glenn Howlett and Executive Director of Community Programs Rhonda Williams for their commitment and effort throughout the year.

#### Challenges

There are many changes occurring that will impact on us next year. The new Commonwealth health reforms have already had an impact, with changes to how our health and aged care services will be funded, new reporting requirements and new National Health standards to meet. We have a new Service Plan to be completed that will identify the future profile of our services and form the basis of a Master Plan for redevelopment. Our financial resources will remain under stress and our facilities will be another year older.

However, as in the past, we will work together to meet these challenges and again it will be the community and our patients, residents and clients that will benefit from the changes that are made to ensure our care is appropriate, respected and cherished as it always has been.

Ian Fisher CEO

# Strategic Plan

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Victorian Health Priorities Framework	Health Service Strategy	Deliverables
Developing a system that is responsive to peoples needs	Identify local health service needs and ensure Castlemaine Health is responsive to our community need Improve access to services for vulnerable and disadvantaged persons Improving communication to ensure staff and other key stakeholders know what is happening and where they can access the information	Senior management engagement in Primary Care Partnership, local government health planning and the Loddon Mallee Murray Medicare Local to assist in developing an integrated approach to setting health care priorities and service delivery Community Consultation Committee re-established Services Plan commenced to ensure services are reflective of the community health needs now and into the future Client feedback indicates services are accessible Access and inclusion plans reviewed and improved Communication plan implemented
Expanding services, workforce and system capacity	Identify opportunities to address workforce gaps by optimising workforce capability and capacity and exploring alternative workforce models Identify opportunities to improve staff satisfaction and culture through organisational staff surveys and consultations	Workforce plan includes strategies to achieve greater Aboriginal workforce participation Redevelopment of theatre, Urgent Care and Acute facilities has commenced and will increase the capacity of Castlemaine Health to expand surgical and urgent care services Clinical workforce plan changed to reflect growing relationship with Bendigo Health Expanded use of allied health assistants and patient care workers has improved client care, assisted with workload issues and demonstrated to be cost effective Demonstrated improved organisational culture Service plan that will review services and staffing models has commenced Aged Care Nurse Practitioner in place
Increasing the system's financial sustainability and productivity	Continuous quality review of systems and processes Obtain approval to start a Master Plan on completion of Service Plan	Continued to move towards increased electronic records and implementation of healthsmart and other IT initiatives Accreditation achieved and sustained across all services Strategic Plan reviewed Active participant in the Loddon Mallee Health Services sustainability project Improvement in financial governance and reporting through restructure of Audit and Risk Management Committee Service Plan commenced and will consider sustainability
Using e-health and Communication Technology	Continue to move towards increased electronic records and implementation of healthsmart and other IT initiatives Implement IT Plan	Through the Loddon Mallee Health Alliance progress Castlemaine Health's and Loddon Mallee Region's progress to expanding e-health initiatives IT plan developed to take advantage of the Loddon Mallee network
Increasing accountability and transparency	Implement continuous improvements and innovation Recognize the importance of protecting the environment by minimizing the environment impact of work practices	Castlemaine Health fully accredited Staff appraisals for Managers included agreed agency wide KPI's Cost centre structure and monthly financial reports will align with Executive Director responsibilities Working parties established across a range of clinical activities are achieving outcomes that have improved patient flow and the quality and safety of hospital services Environmental sustainability activities documented, implemented and are being monitored



# Organisational Chart

#### THE COMMUNITY

#### **Board of Management**

#### Chief Executive Officer Ian Fisher

#### Engineering Health Inform

Human Resources PR / Fundraising Quality Badiology / Pathology

Executive Director of Community Programs Rhonda Williams

#### Community Rehabilitation Centre:

- \* Occupational Therapy
- Physiotherapy
- Speech Therap
- Dietetics
- Podiatry

District Nursing / Palliative Care / Post Acute Care

Adult Day Service

Early Intervention Program

Continence Advisory Service

HARP (Hospital Admission Risk Program)

CADARG (Castlemaine & District Accommodation & Resource Group)

Volunteer / Social Support Management xecutive Director of Nursing manda Edwards

After Hours Managers Clinical Nurse Education Clinical Resource Unit Acute Medical / Surgical Services Midwifery

Urgent Care Centre Rehabilitation Services Operating Suite / Day

- Residential Services:
- Ellery House
- Thompson House
- Penhall
- Spencely

Pocroation

Executive Director of Corporate Services Rick Munari

#### Finance

Transport Contract Management Supply Laundry Environmental Services Food Services Director of Medical Services Dr Glenn Howlett Specialist Medical Office

Visiting Medical Officers Specialist Medical Officers Pharmacy Infection Control



#### **Board of Management**

#### PRESIDENT

#### Mr Glenn Sutherland

BA, Dip Ed, Grad Dip Ed Admin, Grad Dip Mgmt Lecturer and Online Retailer Appointment Expires 30 June 2013

#### VICE PRESIDENT

**Ms Lee Bower** BSc (Monash) Employment & Training Consultant Appointment Expires 30 June 2014

#### TREASURER

#### Mr Ian McKenzie

Bach of Pharmacy Pharmacist / Wine Maker Appointment Expires 30 June 2013

#### **BOARD MEMBERS**

#### **Dr Les Fitzgerald**

RN RM Dip (Teach), BA Ed, M Nurse PhD Senior Lecturer in Health Sciences Appointment Expires 30 June 2014

#### **Ms Sharon Fraser**

Master of Business (Management) Bachelor of Applied Science (Speech Pathology) General Manager Appointment Expires 30 June 2013

#### **Ms Elizabeth Grainger**

Trained Infant Teachers Cert Grad Dip, Special Ed Assistant Principal (Retired) Appointment Expires 30 June 2015

#### Ms Maria Simpson

BA Master of Business (Administration) Diploma of Education CEO

Appointment Expires 30 June 2014

#### Ms Carolyn Wallace

Master Public Policy & Management Graduate Diploma of Education Bachelor of Arts Healthy Communities Project Coordinator Appointment Expires 30 June 2013

#### Mr Adam Sevdalis

Bachelor of Economics MBA Appointment Expires 30 June 2015

#### Board of Management Structure and Function

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

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 Monday evening of each month (except January) to deal with a formal agenda and reports on the Hospital's performance as reported by the Chief Executive Officer. Meetings commence at 6.30pm in the Board Room, Level 4 of the Hospital and are open to the Public.

#### Board of Management membership of Sub-committees

#### Credentials & Medical Appointments Advisory Committee

Dr Les Fitzgerald Ms Elizabeth Grainger Mr Glenn Sutherland

#### Chief Executive Officer Evaluation Committee

Mr Glenn Sutherland (President) Ms Lee Bower (Vice President) Mr Ian McKenzie (Treasurer)

#### Audit Committee

Mr Ian McKenzie (Chair) Mr Glenn Sutherland (President) Ms Carolyn Wallace (BOM-Emergency) Mr Richard Hetherington (Independent)

#### **Clinical Governance Committee**

Ms Sharon Fraser (Chair) Ms Lee Bower Ms Elizabeth Grainger Ms Mana Simpson

#### **Executive Management**

The Directors meet with the Chief Executive Officer every month to discuss strategic issues relating to the management of the organisation.

#### CHIEF EXECUTIVE OFFICER

Mr Ian Fisher MBus GradDipAcc PGradDip Health Administration

### EXECUTIVE DIRECTOR OF COMMUNITY SERVICES

Mrs Rhonda Williams RN B Pub Health Grad Dip Health Services Management

#### EXECUTIVE DIRECTOR OF FINANCE & CORPORATE SERVICES

Mr Richard Munari BBusiness (Accounting) CPA AIMM

#### DIRECTOR OF MEDICAL SERVICES

Dr Glenn Howlett MB BS LLB FRACGP

#### EXECUTIVE DIRECTOR OF NURSING SERVICES

Ms Amanda Edwards MHSM PGDAN (Emergency) PGDAN (Mid) RN



# Nursing care

The Nursing and Education Directorate continue to work hard to provide the high standard of clinical and residential care that the Castlemaine community has come to expect.

A broad range of services are provided within the Directorate and these include Residential Aged Care, Rehabilitation, Acute Medical and Surgical, Midwifery and Accident and Emergency services.

This year has been a particularly challenging one with building starting on the new operating theatres resulting in the old theatre being closed for nine months. We have worked with neighbouring hospitals Kyneton, Bendigo and Maryborough, our Surgeons and Nursing staff to keep operating services going during the closure. This has enabled people from Castlemaine to have their surgery and has ensured that Surgeons and Nurses have been retained to start again in our new theatres early next year. Gratitude and congratulations is extended to all involved for making this arrangement work so well.

#### Achievements

- Successful increase in Aged Care revenue as a result of improved care and documentation for residents.
- Pilot site to research the effectiveness of remote patient monitoring in residential care homes. Residents clinical information is accessed remotely by doctors who monitor the resident. The aim is to identify early deterioration in health to facilitate prompt intervention.
- Development of the Older Person's Nurse Practitioner scope of practice. This advanced nursing role has enhanced the care provided to residents of our aged care facilities and clients of our rehabilitation services.
- Introduction of a Snoezlin room in Ellery. The Snoezlin room provides a stimulating and soothing environment for high care, incapacitated residents. It is designed to deliver stimuli to various senses using lighting effects,

colour, sounds, music and scents.

- Development of a mobile activity unit for patients of the Acute Geroe ward. This activity unit was designed to relieve boredom for longer stay patients and improve function through activity.
- Hosting of the inaugural Loddon Mallee Regional Maternity Peer Review forum. This forum brought Doctors and Midwives from across the region to present and discuss client cases. The forum provided an opportunity for clinicians to get to know each other, understand the capabilities at each facility and determine actions that could be taken to improve communication between services and care for women.
- Workforce mapping of our nurses to identify gaps and possible areas for development going forward.
- Hosting of puppetry play during this year's Castlemaine State Festival.

#### **Future Directions**

- Leadership development of Nurse Unit Managers and Associate Nurse Unit Managers as key change agents within the organisation.
- Hospital redevelopment ensuring that environment and workforce development meets the needs of patients attending the hospital.
- Planning and implementing services for Operating Theatres when they reopen in early 2014.
- Partnering with Latrobe University to develop a sustainable Aged Care Nurse Practitioner role for Castlemaine Health and the wider region.
- Strengthening the International Registration of Overseas Nurses program to ensure future sustainability.

#### Geroe Acute Unit

Acute services cater for over 5200 accident and emergency patients, maternity patients assessed as low risk and admissions booked by the local doctors. During the year there were 75 babies born at Castlemaine Health, with 33 other mothers and babies transferred from larger hospitals for care post birth. The Geroe Unit also cares for post surgical cases, mental health clients and medical patients. Activity has been lower this year due to surgical patients having their operations at neighbouring hospitals.

#### Operating Suite/Day Procedure Unit

The Operating Suite is comprised of one fully functioning operating theatre, a central sterilising unit, a three bay first stage recovery and a nine bed Day Recovery Room which enabled 500 major and 850 minor surgical procedures to be performed this year.

Visiting surgeons from Bendigo, Ballarat and Melbourne provide operative procedures for ophthalmic, orthopaedic, dental, gynaecology, ear, nose and throat, plastics and reconstructive, general and urology surgical procedures. Our waiting times are significantly lower than most major hospitals and the first class, personal service cannot be rivalled!

Our waiting times are significantly lower than most major hospitals and the first class, personal service cannot be rivalled!

# 2013

#### Connolly Rehabilitation Unit

The 30 bed Rehabilitation, Geriatric Evaluation and Management and Respite Unit helps people recover from their health crisis. Care for patients includes physiotherapy, speech therapy or occupational therapy to help our clients return to their optimal physical and emotional recovery. The time here also provides an opportunity for the client and family to consider the long term options, whether it is to return home with or without support services, or move into residential aged care.

#### **Recreational Team**

The recreation team is a committed group of staff who work together to provide all residents with individual and group opportunities to participate in usual life and social activities appropriate to the individual's needs. This includes the ability to participate in social activities that residents may have been a part of before their need to move into a residential facility. We know that one of the hardest decisions to make is the one to move into residential aged care so one of the major roles of the Recreation Team is to help new residents and their families settle in to their new home. The team works with new residents and families to help to navigate the aged care system and to get used to living in an aged care community.



#### **Residential Care**

Castlemaine Health is home to 155 aged care residents. We assist our community of residents to live the best life they can within the residential care environment, helping them to maintain their social and family connections as much as possible. Even though most people try not to be our residents, we do our best to make it fabulous and really focus on person centred care.

#### Transition Care Program

The Transition Care Program aims to improve client's independence and confidence following a hospital admission. The program provides nursing care and low intensity therapy appropriate to the client which may include physiotherapy, speech therapy or occupational therapy. This provides an opportunity for the client and family to consider the long term options whether it is to return home, with or without support services, or transfer into a residential aged care facility.

Castlemaine GP Dr Rebecca Dale has retired from obstetrics at Castlemaine Health after 30 years of dedicated service.

Care for patients includes physiotherapy, speech therapy or occupational therapy to help our clients return to their optimal physical and emotional recovery



# Medical Services

Director of Medical Services Dr Glenn Howlett oversees the management of medical staff, pharmacy and infection control. He chairs the Clinical Services Committee and Infection Control Committee, and provides regular updates to the Board's Clinical Governance Committee. Dr Howlett regularly attends meetings of the Medical Staff Group and provides recommendations to the Credentials and Medical Appointments Advisory Committee.

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#### Achievements

- Appointment of Visiting Geriatrician and Rehabilitation Specialist to Connolly Rehabilitation Unit.
- Continuation of external peer support for General Practitioner Obstetricians and Midwives.
- Up-skilling of pharmacy technicians, progressing towards Certificate III in Hospital-Health Services Pharmacy support.
- Clinical placement of second and fourth year pharmacy students from Latrobe University.
- Building works in pharmacy to provide access to office for pharmacy technicians.
- Participation in audit of the National Inpatient Medication Chart.
- Infection Control Consultant undertaking Certificate in Infection Control and Sterilisation.

#### **Future directions**

- Ensuring sustainability of medical services
- Enhancement of clinical audit program

#### Pharmacy

Castlemaine Health has an onsite pharmacy service that oversees dispensing of medication to acute and subacute services and provides medication reviews for residents.

#### Infection control

The Infection Control Department manages the risk of infection transmission for staff, patients, residents and visitors to Castlemaine Health.

#### Medical staff

The General Practitioners of Castlemaine provide high quality inpatient services as well as supporting highly valued maternity and urgent care services. A dedicated doctor oversees clinical care on the Rehabilitation Unit and visiting surgeons and other consultants provide a range of specialist services. In collaboration with Monash University, medical staff support fourth year medical students who spend two days each week working in medical practices and one day each week participating in educational activities at Castlemaine Health.



Dr Glenn Howlett Executive Director of Medical Services

The General Practitioners of Castlemaine provide high quality inpatient services as well as supporting highly valued maternity and urgent care services



Fourth year Monash medical students learn suturing skills from Castlemaine GP Dr Daniel Silver

# Community Care

Community programs at Castlemaine Health provide a range of multidisciplinary services including inpatient and outpatient rehabilitation, assessment, treatment and social support to clients from the Goldfields, Macedon Ranges and Mount Alexander Shires.

#### Physiotherapy, Occupational Therapy & Speech

#### Achievements

- Participation of allied health staff and allied health students in the Whole of System Student Placement (WoSSP) Project
- Refurbishment of the Metcalfe Building (currently housing Early Intervention Program) transforming it into the Children's Centre. Children are now seen by allied health clinicians in a more suitable environment. Final negotiations are underway to secure the services of a Paediatrician who will visit the centre fortnightly.
- Completion of the Department of Health funded Allied Health Assistant (AHA) Implementation Program. Key areas identified are education and training for AHA's, development of the AHA network, and review of their roles.
- Grant received to appoint a coordinator to implement activities.
- Implementation of iPM patient management database in the Community Rehabilitation Centre.

#### **Future Directions**

- Further development of Children's Centre, allied health screening clinics, educational events, and improved coordination with other local services.
- Preparation for the introduction of Activity Based Funding.
- Minor building works to enable co-location of Intake, Client Administration and Reception areas.

#### HARP (Hospital Admission Risk Program)

#### Achievements

- HARP Manager played a vital role in the selection and co-ordination of clients to accommodate students in the Whole of System Student Placement (WoSSP) project.
- Department of Health provided funding for administrative support for the project.
- Introduction of team care coordination of clients.

#### **Future Directions**

- Preparation for Activity Based Funding.
- Consolidation of staffing.
- Improved management of waiting list.

#### Podiatry

#### Achievements

- Kindergarten screenings by podiatrists to identify anomalies in the very young and expand the knowledge of parents.
- Pathway between Castlemaine Health Podiatry and Mount Alexander Shire meets foot care needs for low risk clients.
- Staff actively participating in the Falls & Balance program in the Community Rehabilitation Centre.
- Winter Warmers program (wax baths) continues.
- Redevelopment of the podiatry office space funded by the Rural Accommodation and Infrastructure Program for the purpose of providing a suitable working environment for staff and students.

#### **Future Directions**

- Continue to review podiatry work space with respect to OH&S and infection control regulations.
- Consider alternatives for nonpodiatrist foot care providers.
- Review our regional podiatry services.

#### Dietetics

#### Achievements

- Revised menu choice procedure.
- Patients on the rehabilitation unit weighed weekly as an ongoing malnutrition screening tool.
- Introduction of Red Trays on Acute and Rehabilitation units.
- Review of information given to clients relating to the Red Trays.
- Creation of an information brochure for the Dietetic Department.

#### **Future Directions**

- Food wastage audit in all clinical areas using digital photography.
- Complete menu review in line with the Victorian menu standards.



# Community Care continued

#### **Continence Service**

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#### Achievements

- Commenced service for younger clients.
- Increased Home and Community Care (HACC) funding has allowed expansion of continence nursing.

#### **Future Directions**

- Expand service for 6-15 year old.
- Purchase bed alarms for hire to treat children with primary nocturnal enuresis.
- Promotion of service within Castlemaine health and external agencies.

#### **District Nursing Service**

#### Achievements

- Working collaboratively with the Mount Alexander Shire Council staff to review the hygiene assessments and improve documentation.
- Development of a referral form from Acute to the District Nursing Service.
- Involvement in the Whole of System Student Placement (WoSSP) Project.

#### **Future Directions**

- Implement the change of reporting for Palliative Care visits to service events and manage the transition to activity based funding.
- Explore the feasibility of Castlemaine Health Hospital In The Home Program.
- Review shared care protocols with the Mount Alexander Council Shire.

#### Early Intervention

#### Achievements

- Additional funding received has provided an additional five places in the program.
- Better co-ordination of the care received by children and their families, includes meetings with Early Intervention staff, family and staff from other agencies.
- Assessments by an Occupational Therapist and Physiotherapist have been introduced for children prior to them commencing school.
   Information vital when schools are applying for funding.
- In-services on hearing impairment presented by Early Intervention Education Advisor has assisted staff in gaining a better understanding of treatment for children with a hearing deficit.

#### **Future Directions**

- Develop a simple feedback system for distribution to carers.
- Provide information sessions on behaviour, hearing and other developmental skills for families and community early childhood workers on a regular basis.

#### Castlemaine & District Accommodation Resource Group (CADARG)

#### Achievements

- Duress Alarm installed immediate response by police.
- Outreach policy and procedure reviewed and formalised.
- Successful application for funds and employment of Enhanced Youth Housing Support Worker.
- Reception area and client interview rooms refurbished.
- Implementation and improvement of secure messaging and referral.

#### **Future Directions**

- Youth Caravan Project Funding received from St Lukes will purchase a caravan primarily to be used for young people at risk of homelessness.
- Better collaboration with real estate agents and Mount Alexander Shire Council.
- Board Providers Program initiated by St Lukes, aims to place homeless young people with responsible adults who have a spare room.
- Peer Group supervision and support for CADARG staff.



Five year old Riley has a play in the waiting room of the refurbished Castlemaine Health Children's Centre.

# 2013

#### Home Support Services

(Adult Day Service & Volunteers, Case Management Service & Allied Health HACC Programs)

#### Achievements

- Dementia Working Group (interdisciplinary) initiated in July 2012. Evaluation of DWG June 2013 has identified the need to improve transition points to care, from onset through to end of life.
- Successful expansion of continence nursing and occupational therapy services to build the capacity of the local community care work force.
   Participation in regional consultations regarding continence support.
- Participation in shire-wide Healthy Communities project and subsequent inclusion of Castlemaine Health social support, respite and healthy lifestyle programs in booklet/website.
- Staff presented Social Support assessment at Regional forums.
- Case manager successfully completed Diploma of Community Services Co-ordination. Participation in consultations pertaining to reform. Preliminary work relating to consumer directed home care packages.

Our volunteers have once again contributed around 20,000 hours of voluntary service to Castlemaine Health. Volunteers have significantly enriched service provision and quality outcomes for residents, patients, community clients and support services.



Long time volunteer, Nancy, shares her volunteer time enthusiastically between the café and the lolly trolley. Nancy also knits fingerless gloves and scarves for sale in the café as a fundraiser for the Hospital.

- Client satisfaction survey completed, results analysed and action determined.
- Staff members have commenced training at Gay and Lesbian Health Victoria.

#### **Future Directions**

- Monitor the co-location of Occupational Therapist with Mount Alexander Shire Council assessment service as exciting new initiative.
- Review Adult Day Service program structure and the 'housing' of programs given costs of rental and transport and increasing needs of clients and carers.

- Development of Case Management Service Practice Guide and upgrade of database to incorporate and support new government Home Care Package Program guidelines.
- Co-ordinate a dementia awareness community event.
- Increase internal liaisons in relation to transition points of care.
- Allied Health self-assessment against Community Care Common Standards.
- Revision of transport options.
- Implement iPM patient management database.



# Corporate Services

The Corporate Services team comprises approximately 140 staff and is responsible for the financial management of the organisation, procurement and supply of materials and equipment, information technology services, linen processing and distribution services, food preparation and catering (including Council Meals on Wheels), cleaning, waste disposal and security services, patient transport and vehicle fleet management.

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In addition, most of these services are also provided to Maldon Hospital on a contractual basis.

#### Finance

The finance team saw a number of further personnel changes in 2012/13 as we undertook a mini-restructure, partly due to our accountant Carla Minster taking maternity leave. A number of improvements have been affected in financial systems and processes, most notably the introduction of monthly online financial reporting to department managers, which had been non-existent for several years. While training has been required to familiarise Managers with the software and our requirements, the progress in use has culminated in Managers directly entering their budgets and taking responsibility for the financial performance of their departments which has been a great leap forward.

A range of further projects are planned for the coming year as we consolidate the team and seek to review and improve the rigour and consistency of many of the financial processes employed across the hospital. These advances will benefit not only Board members via improved reporting but also Managers and Directors charged with monitoring and managing performance.

#### Food

Our Food Services department continued their quality work in the past year. The team of approximately 35 staff provide more than 275,000 meals each year to patients, residents, visitors and staff at Castlemaine Health and Maldon Hospital, including almost 11,000 for the Council's Meals on Wheels program.

Customer feedback and official surveys consistently report excellent results, and ex-patients continue to provide free advertising by speaking highly of the meals enjoyed during their stay with us.

#### Supply

Our Supply team has consolidated behind their new Co-ordinator Carolyn Chislett after the previous Manager was not replaced, gaining valuable efficiency savings. This small team works tirelessly to collate requisitions from staff, place orders, receive and dispatch materials to all areas across the Castlemaine site, as well as to Maldon Hospital.

Some significant savings were achieved this year after some extensive research into available alternative suppliers and products, namely the extensively used chemicals as well as several important meal components.

#### Information Technology

The IT Department has been very busy in the last twelve months with numerous upgrades to network infrastructure and many other projects. In addition to rolling out new network switches, our small IT team have also installed a number of uninterruptible power supplies to safeguard the continuing operation of network and computer-based equipment. They have also installed a number of time

clocks around the hospital as part of the Kronos Time & Attendance project, as well as a new security server which complements the Kronos system.

Seven Computers on Wheels (COWs)



Rick Munari Executive Director of Corporate Services

have been installed across a number of areas within the hospital to improve computer access and over one hundred computers have been upgraded or refreshed.

As part of the redevelopment of the hospital, the IT Department has been quite involved in a number of relocations of equipment and staff to facilitate the ongoing operations of the affected departments, including setting up a new remote facility for two departments as building works continue.

There has also been significant work done in a number of areas to reduce costs whilst providing better services, especially in the areas of printing and telecommunications.

#### Transport & Fleet Management

A web-based fleet management system was fully deployed over the year, allowing managers and staff to search for availability and to book fleet vehicles for business travel. The system provides comprehensive analysis and reporting of our fleet operation and has allowed for improved utilisation and cost management.

### Engineering

### Environmental & Security Services

Our large team of Environmental Services staff continued their quality work delivering excellent results across the facility and ensuring the very demanding national cleaning standards were met and often exceeded. The following results were achieved, indicating the consistent performance of this important team:

Very high risk areas	$\ensuremath{N/A}$ (due to theatre
	closure)
High risk areas	91.1%
Moderate risk areas	89.5%

The introduction of a steam cleaner has enabled the team to enhance our infection control practices, reduce manual handling risks and allow for earlier re-admittance into rooms. It also has a reduced impact on the environment due to the reduction in chemical use.

In June we successfully applied for funding to improve our security measures; these funds will be used to increase our CCTV coverage and to purchase wireless duress alarms for relevant staff.

#### Linen & Laundry Services

The laundry staff underwent a very tough year as questions lingered over the future viability of our on-site service. Competitive pressures demanded we seek more viable means of delivering this important service to our residents and patients and an external consultant was engaged to undertake a very thorough and honest assessment.

The laundry staff has been very cooperative and constructive during this difficult time and have worked hard to ensure the laundry's survival and their own job security. A working party consisting of management and laundry personnel has now been formed to investigate the potential for a range of improvements to be made and in the coming months these initiatives will be trialled and evaluated. Engineering completed over 6,515 programmed and requested work orders for the 2012/13 year.

The engineering department workers compensation lost time continues to remain at 0 hours, a wonderful result in keeping our work place a safe place to be. Thanks to our staff that place a high priority on safety.

The average monthly number of work orders on the system awaiting attendance has dropped from 400 to 356, a good result and an indication that work is being completed within the allocated time.

Refurbishment works have placed further requirements on the engineering department. We have taken the opportunity to replace some no longer fit for purpose equipment and services. Continued quality improvements and innovation are helping to keep our buildings viable for a sustainable future in health services delivery. Environment









Power consumption for the financial year 2012/13 shows a 17.7% increase over the 2011/12 consumption back to the 2010/11 level. Natural gas consumption has also increased to just under the 2010/11 level. Water consumption has increased by 11% over the 2011/12 level. Building work within Theatre and Acute will be affecting the utilities usage and on completion newly install energy efficient equipment should see a positive result for the 2013/14 data.



Hospital redevelopment works will include a second emergency theatre, a modern day surgery ward and recovery area, an improved front entrance and relocation and refurbishment of the accident and emergency department.

# Human Resources

The Human Resources Department is managed by Bruce Duncan who has been in this position since January 2011. The Human Resources Department includes the functions of recruitment and retention, professional development, employee support, payroll, emergency management, risk management and occupational health and safety (including WorkCover).

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#### Achievements

- KRONOS Time & Attendance and Rostering Project commenced implementation in September 2012. Under the Loddon Mallee Health Alliance, Castlemaine Health joined forces with Bendigo Health to implement this system and as of June 2013 there is 90% of Castlemaine Health staff clocking in and out of work. The implementation has seen more streamlined electronic rostering and approval practices across the health service which has undoubtedly resulted in more accurate payment of wages.
- Currently implementing the online recruitment software which is being offered by the State Services Authority (SSA). The software is revealing benefits to human resources staff, managers and potential applicants through a more streamlined online application process. Through the partnership with SSA, all Castlemaine Health vacancies are now displayed on the Victorian Government careers website which has broaden the scope of potential applicants.
- The updated HR Strategic Plan is a broad based strategic plan which has been enhanced by a detailed Department Action Plan.
- The supply of payroll services to Inglewood & District Health Services commenced prior to Christmas 2012 and Boort payroll is due to be taken over in the new financial year. The Heathcote Health payroll service

agreement was renegotiated. The Castlemaine Health payroll team now supply services to five organisations across the Loddon Mallee region.

- Successfully introduced a more streamlined system for flexible working arrangements through the implementation of the Purchased Leave Procedure. A number of staff have taken up purchased leave contracts.
- A revised procedure on unacceptable workplace behaviours which includes bullying and harassment was developed. Major work on the Contact Officer network was also processed to ensure a greater number of contact officers are available to staff.

#### **Future directions**

- Further enhance the online recruitment that has been implemented during 2012/13.
- Implement the Employee Self Service module of KRONOS, to allow employees to log into KRONOS from work or home to view their own timesheets (past and present), apply for leave and enter availability.

#### Graduate nurse program 2013

Castlemaine Health offers a comprehensive Graduate Nurse Program combining rotations through our acute unit, rehabilitation and aged care units. The program also includes short supernumerary placements in District Nursing. Four full time positions are offered annually for newly graduated Registered Nurses and offers are made through the regions computer match service.

#### Staff training and development

Education is an ongoing commitment at Castlemaine Health and assists our staff to maintain, improve and broaden their knowledge, expertise and competence in their area of expertise. The new lecture and training rooms provide an excellent setting for traditional and interactive education sessions. Earlier this year a trial began for our Hotel Service staff to attend a rostered study day to complete all of their annual training inclusive of hand hygiene refresher, manual handling and emergency procedure. A similar day was trialed the previous year for our Personal Care Workers and was also quite successful.

#### Industrial relations

The Workplace Consultative Committee continues to meet monthly and provides a forum for open communication between management, staff representative and unions and focuses on providing the opportunity to table proposed changes and assists with planning for the future.

#### Staff support services

Professional pastoral care and bereavement support is provided to all Castlemaine Health staff, as well as clients and their families, as individual needs are identified. Confidentiality is strictly maintained and staff appointments with the pastoral care coordinator are available on request. Memorial services and services such as the "Time of Peace Place of Reflection" service are held, providing opportunities for staff to reflect and process grief and loss issues in the workplace. The Pastoral Care Coordinator also trains nursing graduates in identifying the pastoral and emotional needs of clients.

Employees are also provided with access to Prevention of Bullying and Harassment Contact Officers, Employee Assistant Program services as provided by The Commonwealth Rehabilitation Service, a staff gymnasium and short term accommodation.

#### **Emergency preparedness**

We have continued to send out regular bulletins to staff advising them of any risk situations and the new screen savers on all computers across the organisation have worked well by informing staff of any situations that arise in a timely manner. In the past there have been screen savers posted relating to flooding (advising staff of closed roads and areas affected), heat waves and fires.

#### **Risk and Safety**

Castlemaine Health is committed to the health and safety of its employees, visitors, clients and contractors. Management and employees work together to ensure the legislative requirements of the Occupational Health and Safety Act 2004 (Vic) are met. The Safety Health and Environment Committee provide a high level consultative forum for health & safety issues. The elected Health & Safety Representatives provide active involvement of employees at a local level.

The 2012/2013 financial year saw completion of the three year Safety, Health and Environment Strategic Plan by the Risk and Safety Team. The Plan was signed off by WorkSafe in June 2013.

#### Achievements include:

#### **Occupational Health and Safety**

- Implementation of Noise Management Project – Testing of High Risk Areas & Hearing Testing
- Implementation of the Chemical Management Project – Identifying & monitoring of chemical toxicity & usage

#### Emergency Management

 Implementation and Continual review of Emergency Management Response & Recovery Procedures

#### **Risk Management**

 Implementation of the Risk Management Strategy including revising the Risk Register to capture all organisational risk.

#### Staff Profile as at 30 June 2013

Labour category	Month ending June 13 FTE*		Year ending June 13 FTE*	
	2012	2013	2012	2013
Nursing	170	158	164	163
Administration and Clerical	64	63	61	63
Medical Support	15	11	15	10
Hotel and Allied Services	116	122	119	126
Medical Officers (inclusive of hospital medical officers)	1.2	1.2	1.22	1.17
Ancillary Staff (allied health)	33	26	34	26
TOTAL	399.2	381.2	394.22	389.17

\*Full time equivalent

#### Workcover

Premiums					
Year	Premium (\$)	% of Remuneration			
12/13	911,416	2.9987			
11/12	692,323	2.5191			
10/11	530,144	1.9928			
09/10	465,390	2.1113			
08/09	414,971	1.9363			
07/08	353,124	1.6879			

WorkCover days				
Year	Days compensation paid			
12/13	615			
11/12	907			
10/11	616			
09/10	517			
08/09	480			
07/08	294			

Workcover claims				
Year	New claims lodged			
12/13	10			
11/12	15			
10/11	10			
09/10	6			
08/09	10			
07/08	4			

#### Equal Employment Opportunity (EEO) Act (VIC) 2010

To comply with this legislation we have effectively developed systems that ensure

- Open competition in recruitment, selection, transfer and promotion
- All employment decisions are based on merit
- Employees are provided with a reasonable avenue of redress against any unfair treatment

# Statutory Compliance

**<u>Risk Management:</u>** I, Glenn Sutherland, 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.

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НЕАГТН

#### Glenn Sutherland Board President

#### 12 July 2013

Attestation on Data Accuracy: I, Glenn Sutherland, certify that Castlemaine Health has put in place appropriate internal controls and processes to ensure that the Department of Health is provided with data that reflects actual performance. Castlemaine Health has critically reviewed these controls and process during the year

Chalance

#### Glenn Sutherland Board President

#### 12 July 2013

**Ex-Gratia Payments:** Castlemaine Health made zero ex-gratia payments for the year ending 30 June 2013.

<u>Freedom of Information Applications:</u> All applications were processed in accordance with the provision 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 the website www.castlemainehealth.org.au, or by phoning 5471 1555. Application charges and fees apply. Nineteen requests were received under Freedom of Information in 2012/13. All requests were processed within the required timeframes.

**Compliance with Building and Maintenance Provisions of Buildings Act 1993:** All building works have been designed in accordance with the Department of Health's Guidelines and comply with the Building Act 1993 and the Building Code of Australia 1996.

Victorian Industry Participation Policy Act 2003 (FRD 25): During the year there were no contracts completed at Castlemaine Health that VIPP applied.

Statement on National Competition Policy (FRD22C):CastlemaineHealthcompliedGovernmentpoliciesregardingneutralityrequirements with regards to all tender applications.

**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 that applies to Board Members, officers 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 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 Heath has completed an Access and Inclusion Plan that incorporates requirements of the Disability Act 2006.

#### Consultancies

consultancies						
Consultant	Purpose of	Start	End	Total approved	Expenditure	Future
	consultancy	date	date	project fee	2012-13	expenditure
				(ex GST)	(ex GST)	(ex GST)
Aspex Consulting	Service plan	20/2/13	20/2/13	\$22,085.46	\$22,085.46	\$65,000
Angela Ballard	Process review	10/1/13	10/1/13	\$14,337.50	\$14,337.50	nil
D K Sonin & Assoc	Culture & mediation	9/8/12	9/4/13	\$105,370.80	\$105,370.80	nil
	processes					

In 2012-13, Castlemaine Health engaged 4 consultancies where the total fees payable to the consultants were less than \$10,000.00 with a total expenditure of \$14,081.82 (excluding GST).

## Acknowledgements

We wish to thank everyone who contributed to the writing and production of this annual report. This includes staff, members of the community, volunteers and clients.

Printing: Bendigo Modern Press

**Cover graphic design and page layout template:** Billington Prideaux Partnership

Editor: Laura Keogh

Support data:

Bank: Bendigo Bank

Auditor: Auditor-General, Victoria

**External Auditor's agents:** Richmond Sinnott and Delahunty

**Internal auditor:** Accounting and Audit Solutions, Bendigo

Castlemaine Health welcomes your valuable comments and feedback regarding our annual report.

#### **Contact details:**

Castlemaine Health P O Box 50 Castlemaine VIC 3450 Email: ceo@castlemainehealth.org.au

Website: www.castlemainehealth.org.au





# Disclosure Index

The annual report of Castlemaine Health is prepared in accordance with all relevant Victorian legislation. This index has been prepared to facilitate identification of the Department's compliance with statutory disclosure requirements.

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Financial Statement attached. If the statement is not attached please contact Tina White, PA to the CEO on (P) 03 54711401



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