

BETTER

Community Consultation

TOGETHER

"...It is important to be in touch with what's going on in the health area as it concerns all members of the public"

Maureen
CC Committee

"...The whys and wherefores of reaching a decision are not always readily apparent when you are on the outside looking in."

Marlene
CC Committee

"Good physical, emotional and social health of the individual leads to healthy families and healthier communities."

Judy
CC Committee

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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.

Better together

Without the consumers and the community, we could not do what we do here at Castlemaine Health.

Consumers provide us with a unique perspective, allowing us to make decisions that reflect the needs of our community. They help us to provide a safe and quality service for all, constantly reminding us that we are here to enhance the consumer experience.

There are a number of ways that consumers can contribute, ranging from participation in the Consumer Consultation Committee through to involvement in specially selected projects.

Our aim is to create a service that reflects the diverse needs of our community. If you are interested in providing input as a consumer and/or would like to find out more, please contact the Public Relations Department on 5471 1505.



Key achievements

- Commissioning the new Operating Suite and Urgent Care Centre.
- CADARG became an accredited service, meeting all standards.
- Introduction of a physiotherapy led pain management program in residential aged care.
- Older Person's Nurse Practitioner successfully endorsed this year.
- Further development of Children's Centre, expansion of Allied Health services for school age children.
- Whole of Student Services Placement (WoSSP) program a finalist at Inaugural People in Health Awards.
- Out and Out Club celebrated twenty one years as a program for younger adults with a disability living in the Mount Alexander Shire.
- Improved management of the deteriorating patient / resident with the development of new processes, systems along with staff education.
- Appointment of Visiting Geriatrician and Rehabilitation Specialist to Connolly Rehabilitation Unit.
- Continuation of external peer support for General Practitioner Obstetricians and Midwives.
- Clinical placement of second and fourth year pharmacy students from Latrobe University.
- Introduction of the National Medication Management Plan to improve communication between health care clinicians about patient medications.
- Introduction of a Hospital Medical Officer role to the Connolly Rehabilitation Unit via Bendigo Health.
- Overall improvement in Infection Control Organisational compliance to 95% in 2013-14.
- Upgrade of Intake and Reception offices within the Community Rehabilitation Centre.
- Planning and implementation of the Allied Health Graduate Program.
- Review of HIP Programs (Health Independence Programs) in preparation for Activity Based Funding.
- Client surveys were completed with 95% happy with the service received in the Community Rehabilitation Centre.
- Pathway review for HARP clients in order to provide a more seamless service.
- A Bladder Scanner has been purchased for use in the community.
- Podiatry Department has established a paediatric clinic located in the Children's Centre.
- Merging of the Palliative Care and District Nursing Service to provide more streamlined community service.
- Pre-school assessments by an Occupational Therapist and Physiotherapist have been introduced.
- Implemented the Board Providers Program partnering with St Lukes.
- Purchase of two caravans by CADARG to be used primarily for young people at risk of homelessness.
- New Adult Day Service Active Tuesdays, Active Choices program trialed and reviewed.
- Development of an Individualised Budget Software program to meet standards for consumer directed care.
- Online recruitment software implementation completed.
- Castlemaine Health payroll team now supplies services to five organisations across the Loddon Mallee region.

Performance Priorities

ACTIVITY	Target	2013-14 actuals
WIES Activity Performance		
WIES (public and private) performance to target %	2151	1875 (88%) estimate
Acute admitted		
WIES public	1640	1440 estimate
WIES private	407	382 estimate
TOTAL WIES (public and private)	2047	1822 estimate
WIES DVA	99	69 estimate
WIES TAC	5	3 estimate
WIES TOTAL	2151	1894 estimate
Acute non-admitted		
Emergency Services	-	4691
Subacute and Nonacute Admitted		
GEM DVA	430	250
GEM Private	219	634
GEM Public	1387	824
Palliative Care DVA	-	41
Palliative Care Private	-	N/A
Palliative Care Public	-	14420
Rehab DVA	636	678
Rehab Private	2274	2052
Rehab Public	4700	5624
Transition Care – bed days	1946	1502
Transition Care – home days	792	745
Aged Care		
Residential Aged Care	Full compliance	Full compliance
HACC	95%	Full compliance
Quality and safety		
Health service accreditation	Full compliance	Full compliance
Residential aged care accreditation	Full compliance	Full compliance
Cleaning standards:		
High Risk areas	85%	95.5%
Moderate Risk areas	85%	96.3%
Health care worker immunisation - influenza	75%	59.7% to June 30th
Submission of data to VICNISS	100%	100%
Hospital associated infection surveillance (Acute):		
Methicillin Resistant Staphylococcus Aureus	0	0
Vancomycin Resistant Enterococcus	0	0
Clostridium Difficile	0	3
Occupational Exposure	≤6	9
Hand hygiene (rate)	70%	89.1%
Staphylococcus aureus Bacteraemia rate per occupied bed days:		
Healthcare associated	0	0
Community associated	0	1
Victorian Patient Satisfaction Monitor (Jan – Jun 2013)	73	82.5
Consumer Participation Indicator (Jan – Jun 2013)	73	83.0
Victorian Hospital Experience Measurement Instrument (Jan – June 2014)	Yet to be implemented	Yet to be implemented
People Matter Survey	50%	32%
Maternity		
Percentage of women with prearranged postnatal home care	100%	100%
Percentage of eligible newborns screened for hearing deficit before one month	100%	100%

Overview of Services Provided

Acute/sub acute (50 staffed beds)

- Medical
- Obstetric
- Paediatric
- Rehabilitation
- Geriatric evaluation and management
- Respite
- Surgical
- Accident and emergency

Residential Aged Care

High care (90 beds)

- Ellery House
- Thompson House

Low care (75 beds)

- Spencely
- Penhall
- Thompson

Transitional care (6 beds)

- Thompson House (4 beds)
- Community (2 beds)

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 and Social Support Program
- Castlemaine and District Accommodation and Resource Group (CADARG)
- Early Intervention Program
- Community Aged Care Packages
- Continence Service

Client Services

- Medical
- Nursing and 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 HealthScope Pathology)
- Radiology and ultrasonography (provided on site by Bendigo Radiology)

Corporate Services

- Engineering services
- Supply department
- Human Resources
- Health Information Services
- Information Services
- Public Relations / Fundraising
- Finance Department
- Environmental / Laundry services
- Occupational Health and Safety
- Quality Department
- Catering
- Emergency Risk and Compliance
- Payroll
- Transport
- Laundry

Training and Development

- Training and development Apprenticeships and Traineeships
- Graduate Nurse Program
- Initial Registration of Overseas Nurses Program
- Return to Practice Nurses Program
- Public Health Programs / Health Promotions
- Staff Education / Professional Development
- Undergraduate Program
- Work Experience Program

Castlemaine Health is a public hospital incorporated under the Health Services Act 1988 and has a variety of programs and services funded by:

Department of Health (Federal)

Minister for Health

The Hon Peter Dutton MP

Minister for Social Services

The Hon Kevin Andrews MP

Minister for Indigenous Affairs

Senator the Hon Nigel Scullion

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 and Early Childhood Development (Victoria)

Minister for Education

The Hon Martin Dixon MP



Report to the Community

It is always a useful and positive experience to pause to take stock and reflect on the previous twelve months. I focus my reflections in this report on the organisation, the community and the board.

It has been a big year for the organisation. Staff have had to deal with a great deal of change as well as the building program and have risen to the challenge in an impressive way. The building works have been a major focus and it was a pleasure to celebrate the completion of all works at the opening on 30 May 2014 with the Minister for Health the Hon David Davis. We now have two modern operating theatres, a much improved entry and urgent care centre and improvements to our day surgery facilities. I would also like to thank our neighbouring health services: Bendigo Healthcare Group, Kyneton District Health Service, Maryborough District Health Services and Hepburn Health Service for working so cooperatively to take our surgical patients during the construction period. Credit must also go to the project control group chaired by our former president Glenn Sutherland which included representatives from the Department of Health, staff, the Board, the construction company and the architectural firm.

In order to respond to our financial deficit, the organisation undertook a complete service review in October 2013. Again, I acknowledge the challenge of this and thank staff for their full cooperation. The report had numerous recommendations which have informed our Financial Management Improvement Plan. We are working through this and aim to have a balanced

budget by June 2015. This has required changes to service delivery and staff levels and many difficult decisions have been faced. The Board is of the view that these changes are setting us on a path to a sustainable future.

I would like to acknowledge the exemplary leadership of our CEO and his strong work ethic. He is well supported by his executive team and senior staff. In May 2014 our senior team led the organisation through a mock accreditation for the National Safety and Quality Health Service Standards. Whilst we performed well, there is work ahead of us to achieve accreditation when the real audit occurs in September 2014.

Castlemaine Health is very fortunate to enjoy a high level of community support. I know that much of this is due to the great care and love our staff show to patients and residents, which is highly valued. There is a great team of volunteers who provide social support to many of our clients. We also appreciate the fundraising of a number of dedicated community groups and look forward to this continuing. Community and consumer participation is going to be a much stronger focus for Castlemaine Health over the next 12 months as we find more ways to include consumers and community members in our service planning and delivery.

Finally, I would like to thank and acknowledge the work of my fellow Board members. Our governance role requires us to be well informed, attend training, participate in board sub-committees and keep up with material presented to us. We farewell two of our



Carolyn Wallace, President

long standing board members, Dr Les Fitzgerald and Ms Lee Bower. Their questioning, challenging and commitment to our organisation has made them valuable Board members. In July we will welcome four new members to our Board. They will bring a range of skills in the areas of finance, clinical governance, risk management, governance and strategy. Castlemaine Health is about to finalise its Strategic Plan for the next three years, building on the service planning and organisation review that took part in the late part of 2013. I am looking forward to working with the Board, staff and our community and embracing our new strategic directions.

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 2014.

Carolyn Wallace
President

Report to the Community

Last year I wrote that Castlemaine Health would face a number of significant challenges in 2013 / 2014 related to the redevelopment of our operating theatres and the associated relocation of our theatre surgical cases, preparation for the National Standards survey, ongoing financial pressures and a review of our current health service profile. Each of these challenges has been a focus of the organisation this year. Our capital works were successfully completed and whilst we are still facing other challenges, there is an air of growing confidence that we are making good progress to returning Castlemaine Health back to being a top performing health service.

Theatre, urgent care and associated capital works

Our \$10M capital project was officially opened on the 30 May 2014 by the Minister of Health and Ageing the Honorable David Davis. The project which was commenced in February 2013 has created a new front entrance, new main reception, operating theatre suite with two new theatres, refurbished urgent care and improved acute reception. Also, parts of the acute ward were refurbished and medical imaging relocated to new rooms. Many challenges were faced such as keeping the urgent care and acute services functioning, dealing with rock and maintaining access. Another challenge was construction of new facilities that needed to align to a building that was built around the 1860's. Numerous other latent conditions were discovered during the demolition phase and keeping the project to budget and timeframe was very difficult. However, with all major parties working

co-operatively the project came in on budget and the total project was only marginally delayed. The project was a great success and now Castlemaine Health can start receiving the benefits from its new facilities.

A special thank you to Rod Woodford, Chief Engineer and the engineering staff for their contribution to the project and all staff who put up with disruption to their work environment during the construction phase.

Service Plan

Castlemaine Health engaged Aspex Consulting to assist the Board in developing strategic health service directions to meet its anticipated community needs in the future. The Service Plan completed included an environmental analysis of factors that will influence future service provision, regional and statewide health improvement strategies, an assessment of the current facilities and the effectiveness of the current range of services.

The Service Plan identified a range of options that will be considered as part of the new Strategic Plan 2014 / 2019.

Strategic Plan

Castlemaine Health has commenced the development of our new Strategic Plan 2014 / 2019 which will be finalised by September 2014. This is an opportunity to use this consultative process to review current services, determine what the community wants our role to be in the Loddon Mallee Region and to discuss how we can get there.

For the year 2013 / 2014 our current Strategic Plan (2009 to 2014) as reported last year guided our decisions and actions.



Ian Fisher, CEO

Financial position

Castlemaine Health's declining financial status at the end of 2012/2013 was a major concern for the Board and the Department of Health. While the temporary closure of the operating theatre was a contributing factor, there were other factors that adversely affected the financial result. With the assistance of the Department of Health, the Board and Executive have progressively implemented a range of strategies to improve our financial performance. These include a financial improvement plan, financial reporting framework, restructured finance department and most importantly education and consultation with Department Heads on the budgeting and monitoring of performance. Our actions have resulted in an improved financial result this year and provide a foundation for an even better result in 2014/2015.



Board, Executive, Staff and Visiting Medical Staff

Again the successes of Castlemaine Health cannot be achieved without a skilled and committed Board of Management, Executive and staff. I would like to express my appreciation to Board President, Carolyn Wallace, Board Vice President Sharon Fraser and Treasurer Ian McKenzie and other Board members for volunteering an increasing amount of their time to meet their governance responsibilities and ensuring the community served by Castlemaine Health continues to have access to a wide range of quality services.

The Board is actively striving to improve its governance through a range of education and developmental activities. These include attending Victorian Health Alliance (VHA) and Department of Health Board round tables and forums, undertaking the Australian Centre for Healthcare Governance (ACHG) evaluation and assessment to identify areas for further improvement, strategies for recruitment of specialised skills and allocation of time at each meeting for further development.

“A special thank you to Rod Woodford, Chief Engineer and the engineering staff for their contribution to the project and all staff who put up with disruption to their work environment during the construction phase.”

Ian Fisher
CEO

A united, happy and committed Executive team is essential to ensure our delegated responsibilities are met well. I acknowledge the work of the Executive team: Executive Director of Nursing Services Amanda Edwards and Executive Director of Community Programs Rhonda Williams, for their commitment and effort throughout the year. Also thank you to Executive Director of Corporate Services Rick Munari and Executive Director of Medical Services Dr Glenn Howlett who both resigned during the year.

To improve our safety, quality and financial position we have identified and made numerous changes across the organisation this year. Many of these changes have adversely impacted on individual staff, some of whom have worked at Castlemaine Health for many years. I acknowledge the contribution of these staff and all staff in general for their ongoing commitment and spirit in which they have engaged in the processes we have implemented to introduce changes.

The community of Castlemaine is well serviced by local and other visiting medical practitioners. We are extremely fortunate to have professional and committed General Practitioners to provide the majority of our inpatient and urgent care services.

We are also well serviced by a growing number of specialists who are keen to maintain and, where we have the capacity, to expand their services.

Volunteers

A special thank you to all our volunteers who have again this year continued to provide a vast array of assistance across the organisation. The work of our volunteers is a very important part of the services we deliver and also provides an opportunity for community members to be engaged with their health service.

Future

Our new Strategic Plan will guide the directions of the organisation and how we will manage your organisation to progress Castlemaine Health's vision and achieve its strategic goals. Being an organisation that can demonstrate it is delivering person centered care, has a culture that seeks to continually improve the safety and quality of our services and is financially sustainable will ensure that the community will enjoy access to needed health services.

Again with the Board, Staff, visiting medical officers and volunteers we are well placed for a successful future.

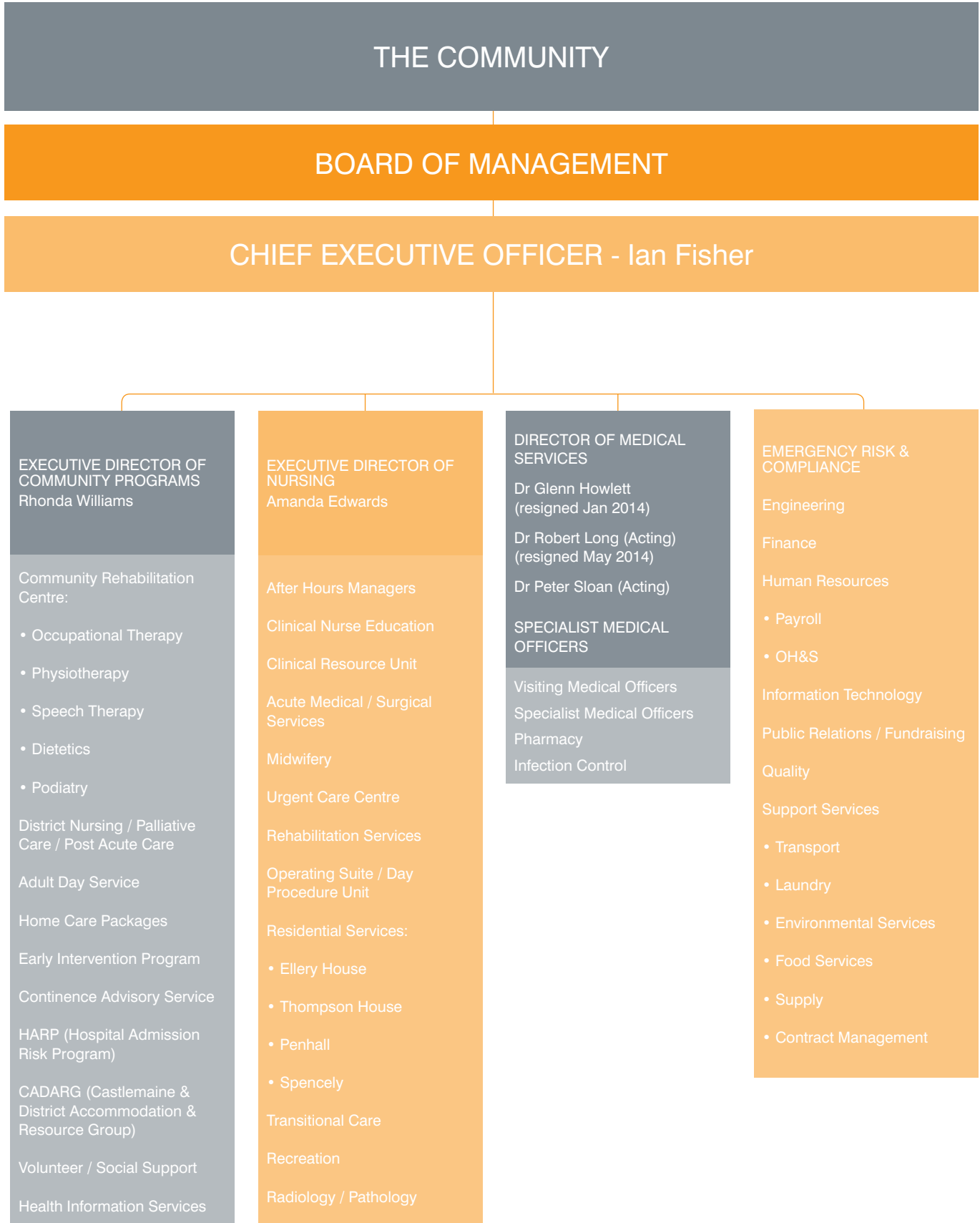
Ian Fisher
CEO

Strategic Plan

State and CH Priorities	Action	Deliverable	Status
Developing a system that is responsive to people's needs	<ul style="list-style-type: none"> Implement formal advance care planning structures and processes that provide patients with opportunities to develop review and have their expressed preferences for future treatment and care enacted. Configure and distribute services to address the health needs of the local population. 	<ul style="list-style-type: none"> Advanced care planning structures and processes implemented. Reports to provide baseline data of care plans in place by June 2014. Strategies developed by December 2013 to reconfigure and redistribute services as identified in the 2013 Service Plan. Implement strategies. 	<p>In line with national standards advanced care plans are being progressively developed and implemented.</p> <p>Agreed with Department of Health to consider CH's future services profile through engaging the CH community in the strategic planning process.</p> <p>Implementation will occur in line with Strategic Plan.</p>
Improving every Victorian's health status and experiences	<ul style="list-style-type: none"> Improve thirty-day unplanned readmission rates. Collaborate with key partners such as Medicare Locals, community health services and other providers to support local implementation of the Victorian Health and Wellbeing Plan 2011-2015. Use consumer feedback to improve person and family centred care and patient experience. 	<ul style="list-style-type: none"> Implement processes to reduce thirty-day readmission rate, demonstrated by service data reports by June 2014. Mount Alexander Shire Public Health and Wellbeing Plan 2013 – 2018 reflects priorities identified by Castlemaine Health. Contribute to plan. Implement processes to obtain regular consumer feedback - strategies to achieve improvements identified by March 2014. 	<p>Process introduced to reduce occurrence noting the operating theatres were closed for 8 months of the financial year due to redevelopment.</p> <p>Plan released. CH and CDCH participated in process with the Shire in developing the plan.</p> <p>CH a partner in co-location option being considered for early childhood services.</p> <p>Consumers now included in membership of key committees and participate in processes that impact on strategic and service changes.</p> <p>Development of actions to meet National Standards in acute, aged and home care services. Consumer participation will establish processes for further inclusion of consumers in organisational activities and decisions.</p>
	<ul style="list-style-type: none"> Identify service users who are marginalised or vulnerable to poor health, and develop interventions that improve their outcomes relative to other groups, for example, Aboriginal people, people affected by mental illness, people at risk of elder abuse, refugees and asylum seekers. 	<ul style="list-style-type: none"> In collaboration with Mount Alexander Shire and Castlemaine and District Community Health Service establish a working group that develops local employment opportunities and better access to health and well being services for Aboriginal people by March 2014. 	<p>Strategies to attract and recruit Aboriginal people were developed and resulted in successful employment.</p>
Expanding service, workforce and system capacity	<ul style="list-style-type: none"> Work collaboratively with the Department on services and capital planning to develop service and system capacity. 	<ul style="list-style-type: none"> Develop priorities identified through the 2013 Service Plan directions. Develop implementation Plan. 	<p>Theatres, urgent care and acute facilities upgraded to increase capacity, safety and efficiencies.</p> <p>Department of Health funded a review of CH's services including a detailed analysis of aged residential services.</p>
Increasing the system's financial sustainability and productivity	<ul style="list-style-type: none"> Reduce variation in health service administrative costs. Identify opportunities for efficiency and better value service delivery. 	<ul style="list-style-type: none"> Work with other health services to identify and participate in at least one shared service by June 2014. Financial Improvement Plan (FMIP) developed by October 2013. Consider findings for implementation. 	<p>Agreement in principle reached with BHCG to provide procurement services.</p> <p>FMIP developed, strategies implemented and are being monitored.</p>
Implementing continuous improvements and innovation	<ul style="list-style-type: none"> Develop and implement improvement strategies that optimise access, patient flow, system coordination and the quality and safety of hospital services. 	<ul style="list-style-type: none"> Collaborate with Kyneton District Health Service and Bendigo Health to ensure surgical services remain available to Castlemaine patients while operating theatres are redeveloped. Develop and implement plan for acute and subacute bed management by October 2013. Develop plan by November 2013 for increased surgical throughput when new theatres are available from April 2014. 	<p>CH also contracted with Hepburn Health Service to ensure continuity of surgical services.</p> <p>Relocated surgery contracts completed.</p> <p>Visiting Medical Staff and operating theatre staff retained.</p> <p>Bed management plans implemented and monitored through daily bed management meetings to enable throughput to be achieved in both acute and sub-acute where beds were reduced.</p> <p>Operating sessions fully allocated for one theatre and process commenced to utilize the second theatre.</p>
Increasing accountability & transparency	<ul style="list-style-type: none"> Prepare for the National Safety and Quality Health Services Standards, as applicable. Increase transparency and accountability in reporting of accurate and relevant information about the organisation's performance. With the support of Government, develop Board capacity to ensure all Board members are well equipped to effectively discharge their responsibilities and deliver against the outcomes articulated in the VHPF. 	<ul style="list-style-type: none"> National Safety and Quality Health Services plan completed and progress report submitted to the Board each month. Revision of internal reporting to Castlemaine Health Board by Department Heads on financial, activity and quality performance by June 2014. Implementation of revised reporting. Develop and implement a plan to improve the Board of Management's governance capability, understanding of the health sector, services and compliance by June 2014. 	<p>Monthly reports to the Board and sub committees occurring monthly. Board, Department Heads and staff completed.</p> <p>Financial reporting framework adopted by Board. Internal financial reports significantly improved. Independent financial expertise appointed to the Audit and Risk Management Committee and Finance Committee.</p> <p>ACHG package obtained and consultant conducted a Board evaluation and assessment. Action plan has resulted to targets governance areas requiring further development.</p>
Improving utilisation of e-health and communications technology	<ul style="list-style-type: none"> Maximise the use of health ICT infrastructure. Work with partners to better connect service providers and deliver appropriate and timely services to rural and regional Victoria. 	<ul style="list-style-type: none"> Maintain active participation in the Loddon Mallee Health Alliance. Identify and implement opportunities to sustain and improve services through greater use of ICT. 	<p>CEO remains Director of (LMHA).</p> <p>Project Officers appointed by region to expand use of telehealth and strengthen health services through e-health opportunities.</p>



Organisational chart



Corporate Governance

Board of Management

PRESIDENT

Ms Carolyn Wallace

Director

Graduate Diploma of Education, Bachelor of Arts, GAICD

Appointment expires 30 June 2016

VICE PRESIDENT

Ms Sharon Fraser

General Manager

Master of Business (Management)
Bachelor of Applied Science (Speech Pathology), GAICD

Appointment expires 30 June 2016

TREASURER

Mr Ian McKenzie

Bach of Pharmacy

Bachelor of Pharmacy

Pharmacist / Wine Maker

Appointment expires 30 June 2016

BOARD MEMBERS

Dr Les Fitzgerald

RN, RM, Dip (Teach Nurs), BA Ed, MN (Nurs Studies), PhD

Senior Lecturer in Health Sciences

Appointment expires 31 October 2014

Ms Elizabeth Grainger

Trained Infant Teachers Cert

Grad Dip, Education

Appointment expires 30 June 2015

Ms Lee Bower

BSc (Monash)

Employment & Training Consultant

Appointment expires 30 June 2014

Mr Glenn Sutherland

BA, Di Ed, Grad Dip Ed, Administration, Grad Dip Management, FAIM

GAICD, Advanced Diploma of Business, Cert. 1V Project Management

Retailer and Exporter

Appointment Expires 30 June 2016

Mr Adam Sevdalis

Managing Director

Bachelor of Economics, MBA

Appointment Expires 30 June 2015

Ms Maria Simpson

BA Master of Business (Administration)

Diploma of Education

CEO

(Resigned December 2013)

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 to deal with a formal agenda and reports on the Health Service 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

Chief Executive Officer Evaluation Committee

Ms Carolyn Wallace (President)

Ms Sharon Fraser (Vice President)

Mr Ian McKenzie (Treasurer)

Mr Glenn Sutherland (Past President)

Finance Committee

Mr Ian McKenzie (BOM)

Mr Glenn Sutherland (BOM)

Ms Carolyn McKenzie (BOM)

Community Consultation Committee

Ms Carolyn Wallace (BOM)

Audit & Risk Management Committee

Mr Ian McKenzie (BOM)

Mr Glenn Sutherland (BOM)

Ms Carolyn Wallace (BOM)

Clinical Governance and Quality Committee

Ms Sharon Fraser (Chair)

Ms E Grainger (BOM)

Ms M Simpson (resigned December 2013)

Executive Management

The Executive Directors meet with the Chief Executive Officer three times per month to discuss strategic and operational issues relating to the management of the organisation.

CHIEF EXECUTIVE OFFICER

Mr Ian Fisher

MBus, GradDipAcc, PGradDip Health Administration

EXECUTIVE DIRECTOR OF COMMUNITY PROGRAMS

Mrs Rhonda Williams

RN, B Pub Health, Grad Dip Health Services Management

EXECUTIVE DIRECTOR OF NURSING SERVICES

Ms Amanda Edwards

MHSM, PGDAN (Emergency), PGDAN (Mid), RN

DIRECTOR OF MEDICAL SERVICES

Dr Glenn Howlett (Resigned January 2014)

MB BS, LLB, FRACGP

Dr Robert Long

(Acting – Resigned May 2014)

MB BS, Bed, FRACGP, Dip Obst RCOG

Dr Peter Sloan (Acting)

MB BS, MBA, FRACMA

EXECUTIVE DIRECTOR OF CORPORATE SERVICES

Mr Rick Munari

(Resigned November 2013)

BB Business (Accounting)

CPA AIMM



Nursing Care and Education

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 Urgent Care services.

Building works were completed this year and our Operating Suite Doctors and Nurses were very happy to return to Castlemaine in March and we welcome them back with open arms. Surgery successfully continued at neighbouring Hospitals to ensure that people living in Mount Alexander Shire received the surgery that they needed. I would like to extend our heartfelt thanks to Kyneton District, Bendigo and Hepburn Health Services for their flexibility in accommodating us within their services. The new Operating Suite area is a pleasure to work in and we have received positive feedback from patients having their surgery here.

We also opened the newly renovated Urgent Care Centre and front reception area. This allows people to access the hospital from a flat surface which is always a welcome thing on our hilly site! Again the area is bright and light and gives additional space to provide care for people presenting for urgent care.

Achievements

- Introduction of a physiotherapy led pain management program in residential aged care. This program offers massage and heat treatment therapies along with exercise regimes to reduce resident pain and maximize movement and function.



Graduate nurses Rochelle and Jillian on the acute ward

- Jude Bulten, our Older Person's Nurse Practitioner, successfully became endorsed this year. Jude works with older patients in our Acute and Rehabilitation to strengthen the quality of care. Jude is now able to prescribe medications, admit patients to the Rehabilitation Unit, refer to specialists and undertake a range of diagnostic tests.
- Whole of Student Services Placement model of clinical student education is a one of a kind program that brings students of Medicine, Podiatry, Physiotherapy and Nursing professions to learn together. Both Monash and Latrobe Universities work with Castlemaine Health to deliver the education. Students work with clients who have chronic disease conditions as a group and gain valuable experience of working within a multidisciplinary team to ensure the client goals are met. The program was a finalist for the Health Minister's inaugural People in Health Awards this year.
- Commissioning the new Operating Suite and Urgent Care Centre.
- Improved management of the deteriorating patient / resident with the development of new processes, systems along with staff education.

Future Directions

- Aged care workforce review. The face of residential aged care is changing. Residents are able to stay in the community longer and are entering our homes and hostels with more complex medical conditions. It is time to change the way we do the work and deliver care to ensure that the skills of our staff and the systems we have in place meet the needs of the residents in a way that helps staff do their job better.
- We were successful in a submission to fund a collaborative program with the Community Health Centre and Mt. Alexander Shire to develop a skilled volunteer group who can enhance the lives of residents and older people in the community. Volunteers will be matched with older people they have similar interests to and help them be more included in social activities.
- Introduce the Best Practice Clinical Learning Environment into our education activities to ensure that students and staff receive the best education and training available.
- Consolidate the financial improvement projects undertaken over the past 18 months to ensure sustainable and viable clinical and residential services into the future.

Nursing Care and Education

CONTINUED

Medical Services

Dr Howlett left Castlemaine Health in January 2014 after accepting a position at Echuca Regional Health Service. Dr. Bob Long, Rehabilitation physician, kindly stepped up to take the Director of Medication Services role until May when Acting Director of Medical Services Dr Peter Sloan was appointed to oversee the management of medical staff, pharmacy and infection control. The Director of Medical Services chairs the Clinical Services Committee and Infection Control Committee, and provides regular updates to the Board's Clinical Governance Committee. He regularly attends meetings of the Medical Staff Group and provides recommendations to the Credentials and Medical Appointments Advisory Committee.

Achievements

- Appointment of Visiting Geriatrician and Rehabilitation Specialist to Connolly Rehabilitation Unit.
- Continuation of external peer support for General Practitioner Obstetricians and Midwives.
- Introduction of peer review program for General Practitioners.
- Clinical placement of second and fourth year pharmacy students from Latrobe University.
- Introduction of the National Medication Management Plan to improve communication between health care clinicians about patient medications.

- Introduction of a Hospital Medical Officer role to the Connolly Rehabilitation Unit. Doctors rotate from Bendigo Health Service every three months and work with our doctors and nurse practitioner to provide care.
- Major improvements in the infection control management systems and processes. Outcomes have been an improvement in hand hygiene rates and reduction in infectious outbreaks such as Gastroenteritis.

Future directions

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

Pharmacy

- Pharmacy technician completed Certificate 3 in Hospital/ Health Services Pharmacy Support
- Clinical Placement of second and fourth year pharmacy students from LaTrobe University
- Completion of building works in pharmacy area
- Implementation of National Medication Management Plan into acute and rehabilitation areas
- National Standards working group working towards verification of compliance with national standards

Infection control

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

Major achievements include: the overall improvement in Infection Control Organisational compliance from 77% 2012-13 to 95% in 2013-14, improvement in Clinical Compliance from 79% in 2012-13 to 93.5% in 2013-14, reduction

in the number and severity of gastroenteritis and respiratory outbreaks through education and improved management processes during an outbreak. Hand Hygiene standards remain high at Castlemaine Health and Hospital Acquired Infection rates very low.

The development and increased effectiveness of the Infection Control Liaison Team and the training of two staff in Hand Hygiene Auditing has greatly enhanced the capabilities to support auditing and reporting processes and reduction in the risk of Healthcare Associated Infections. Castlemaine Health also supported the Infection Control Clinical Nurse Consultant to successfully complete Certificate studies in Infection Control and Sterilisation. Significant improvements and innovations have been implemented to ensure accreditation standards are met in Residential, Community and Acute Care areas.

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.

This year we have been fortunate to have medical staff who come to us on rotation from Bendigo Hospital.

The hospital medical officers work with Dr Stobie and Dr Long on Connolly ward. This is an exciting new development for us and we look forward to closer links with Bendigo Health services group on the future.



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.

Departments

Early Intervention Service, Physiotherapy, Occupational Therapy, Podiatry, Dietetics, Speech Therapy, HARP (Hospital Admission Risk Program), PAC, (Post Acute Care) Continence Service, District Nursing /Palliative Care, Adult day Service / Volunteers, CADARG, Case Management

Health Independence Programs

Physiotherapy, Occupational Therapy, Podiatry, Speech Pathology, Dietetics, Continence Service, HARP (Hospital Admission Risk Program), PAC (Post Acute Care Program)

Achievements

- Further development of Children's Centre, expansion of Allied Health services for school age children.
- Upgrade of Intake and Reception offices within the Community Rehabilitation Centre and co-location of staff.
- Planning and implementation of the Allied Health Graduate Program.
- Review of HIP Programs (Health Independence Programs) in preparation for Activity Based Funding.

- Client surveys were completed with 95% Of clients happy with the service received in the Community Rehabilitation Centre.
- Dietetic Department submitted a proposal for Chef Max Food Service IT system and completed a plate wastage audit across the organisation.
- Participation of allied health students in the WoSSP Program.
- Reviewing pathways for HARP clients in order to provide a more seamless service.
- HARP staff play a major role in the selection of clients for students in the WoSSP Program.
- Increased funding allowed an expansion of the Continence Service to Central Goldfields Shire.
- A Bladder Scanner has been purchased for use in the community.
- Podiatry Department has established a paediatric clinic located in the Children's centre.
- Appointment of a Post Acute Care Coordinator.

Future directions

- The Appointment of a Paediatrician will enable coordinated services for Castlemaine and surrounding communities.
- Commencing on July 1st 2014 Castlemaine Health will become the fund holder for the Post Acute Care (PAC) Program across Mount Alexander, Macedon Ranges, and Central Goldfields Shires.
- HARP will work closely with PAC staff to ensure a smooth transition for the clients.

- Plans are in place to increase consumer involvement in the Community Rehabilitation Centre services and operations.
- The Dietetics Department have made recommendations which would align menus with the Aged Care Nutrition Standards.
- Liaise with Doctors, Health and Community Services to provide education relating to continence issues.

District Nursing Service

Achievements

Following the resignation of the Palliative Care Nurse Practitioner, restructuring has occurred. The Palliative Care and District Nursing Service will merge.

Future Directions

- Manage the changes in data reporting to align with Activity Based Funding.
- Further develop the Hospital In The Home Program (HITH).
- Review the Shared Care Protocols with Mount Alexander Shire.

Community Care

CONTINUED

Early Intervention

Achievements

- Assessments by an Occupational Therapist and Physiotherapist have been introduced for pre-school children. Allied health Paediatric services are well utilised; local schools are consistently referring to Occupational Therapy.

Future Directions

- To become providers for "Helping Children with Autism and Better Staff" funding.
- Further develop allied health screening clinics.
- Further develop coordinated care for clients through Case Management meetings with Allied Health staff and Paediatrician.

Castlemaine & District Accommodation Resource Group (CADARG)

Achievements

- CADARG became an accredited service meeting all standards.
- Implemented the Board Providers Program partnering with St Lukes.
- Utilising funding received from St Lukes, purchased two caravans to be used primarily for young people at risk of homelessness.
- Stronger relationships with real estate agents have been developed
- Peer group supervision with staff at Castlemaine Health.

Future Directions

- Promotion of CADARG.
- Attract additional sources of funding.

Adult Day Service & Volunteers

Achievements

- New program trialed and reviewed "Active Tuesdays, Active Choices" which allows clients to be involved in a range of programmed themed outings.
- "Out and Out" Club celebrated twenty one years as a program for younger adults with a disability living in the Mount Alexander Shire.

Future Directions

- Ensure the ongoing availability of quality respite options for carers of people with dementia and the frail elderly.
- Explore options to ensure the sustainability of effective social support and respite programs available within the Mount Alexander Shire.

Case Management Service

Achievements

- Update of consumer information as a result of changes in industry terminology related to consumer directed care.
- Regional representative on our peak body (LASA) Community Care Taskforce.
- Development of an Individualised Budget Software program to meet industry standards for consumer directed care.

Future Directions

- Review of policy and processes in the management of Brokered Service Provider Contracts.



Castlemaine Health CEO Ian Fisher accepts a donation of \$2,000 from Castlemaine Hot Rod Club President Geoff Knappe and Castlemaine Hot Rod Centre Chairman Larry O'Toole.



Corporate Services

Support Services

The Support Services team comprises of approximately 100 staff and is responsible for Hotel Services: Catering, Linen and Environmental Services.

Support Services also includes Supply, Security Services, Patient transport and Fleet management.

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

Food Services

Our Food Services department continued their quality work in the past year. The team of approximately 40 staff provides more than 275,000 meals each year to patients, residents, visitors and staff at Castlemaine Health and Maldon Hospital, including almost 13,000 for the Council's Meals on Wheels program. We have secured the Meals on Wheels contract for a further 2 years.

We are looking to enhance our food service with varied projects promoting Customer Service and Person Centred Care objectives over the next year.

We secured over \$400,000 in government grants to upgrade the kitchen with modern state of the art equipment. The results have been well received by our cooks; the catering equipment includes a new freezer, bratt pans and large mixers and pans. From grant money secured we will also introduce ChefMax, a new menu management system that will be risk adverse and ensure patient meals are monitored closely regarding diets and meal texture requirements.

Environmental Services

The Environmental Services staff of approximately 25 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 a consistent performance:

- Very high risk areas
N/A (due to theatre closure)
- High risk areas 95.5%
- Moderate risk areas 96.7%

Staff have also taken part in Manutention Training and Safety Champions have been selected to promote safety in the work place by speaking out about work place safety and being proactive in reporting potential hazards and ensuring staff manual handling techniques are performed correctly.

Linen Services

The laundry staff continue to work effectively after the previous year's restructure. Through this review the staff worked as a united team that now delivers a service with quality outcomes to Castlemaine Health and also contracted services to external clients. We continue to ensure personal linen is managed with the delicate precision for our residents in Residential Services.

Transport and Fleet Management

A web-based fleet management system was fully deployed over the previous year, allowing managers and staff to search for availability and to book fleet vehicles for business travel. Ongoing review of the system ensures we tailor the product for effective streamlined services for all our Castlemaine Health customers.

Supply

Our Supply team continues to manage a busy department meeting the high demands across Castlemaine Health. A small team of three, they work 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.

Information Technology

It has been another busy year for the IT Department with a number of projects on the go. Two of our largest projects commenced in February of the previous financial year, one to upgrade all 250 PCs to Windows 7 prior to April 2014, the other being the network and communications components of the hospital redevelopment project. In addition to the 100 plus PCs refreshed or upgraded to Windows 7 last year, another 140 were completed prior to the April 2014 cutoff. The redevelopment project also presented us with a number of opportunities to improve our data network, especially into the Theatre and Acute areas of the hospital. We now have greater redundancy and disaster recovery capabilities and a more resilient automated data backup system. Our wireless network also received a substantial expansion with an additional 20 Wireless access points installed into the new Theatre and Acute precincts along with another 6 Wireless Access points installed into the Community Rehabilitation Centre. This has provided staff with far greater flexibility with how they work and where they work.

Corporate Services

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Finance

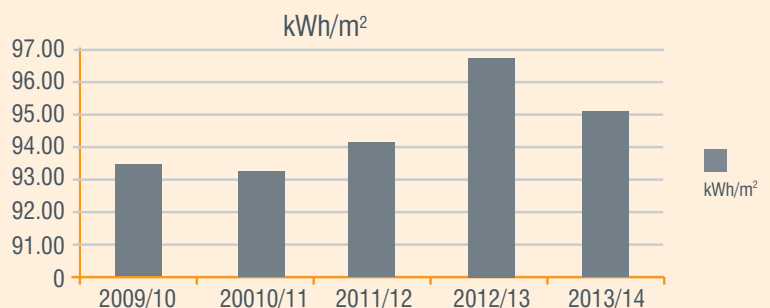
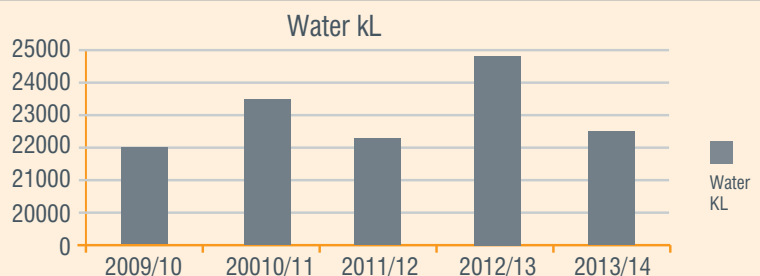
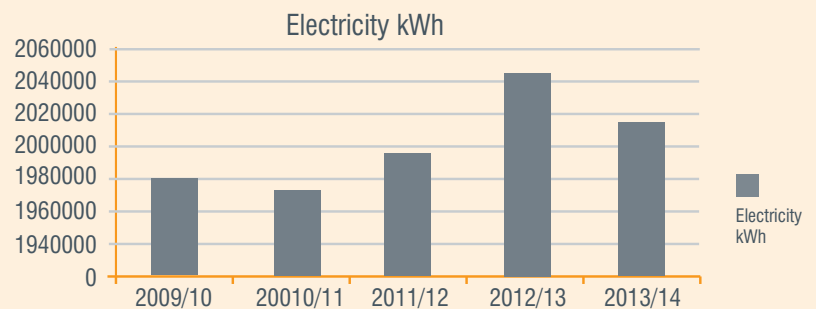
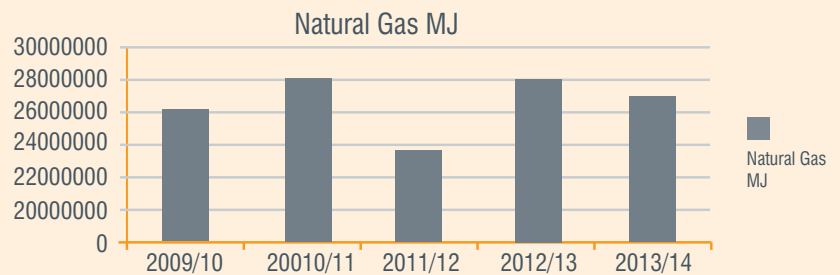
The Finance Team underwent a number of personnel changes in 2013/2014, with the introduction of a new Finance Manager, as well as a new Accountant. Significant improvements to the accounting function have taken place including the streamlining of Financial and Payroll reporting systems, a new program and cost centre structure and increased compliance with the Department of Health account structure. Department of Health monthly and quarterly Financial Reporting and the Annual Reports were previously performed by an external firm and these are all now completed in-house. These capabilities have assisted in enabling the Board Reporting to be built upon significantly. Significant modifications to the budgeting tool and a detailed and supported Budget build process have enabled a thorough 2014/15 Budget build, which also incorporated significant training and education to Department Managers. In the context of Castlemaine Health's current climate of Financial Improvement, these system and information improvements have been, and will continue to be, crucial investments into Castlemaine Health's future viability.

Engineering

Engineering completed over 6,322 programmed and requested work orders for the 2013/14 year. The engineering department workers compensation lost time continues to remain at 0 hours, a wonderful result in keeping with our track record and 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 increased from 356 to 462 as a result of the added work load from the Theatre and Acute project and the reduction in engineering EFT by 1.4. Some general maintenance has been contracted out to reduce the back log.

Power consumption for the financial year 2013/14 shows a 1% decrease from the 2012/13 consumption, natural gas consumption has decreased by 2.2% and water consumption also decreased by 4.7%. Building works for the redevelopment of Theatre and Acute completed in May 2014 included the installation of a high efficiency chiller and upgraded control system. Overall a good result for 2013/14.





Human Resources

The Human Resources Department includes the functions of recruitment and retention, professional development, employee support, payroll and occupational health and safety (including WorkCover).

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, 90% of Castlemaine Health staff are 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.
- The implementation of an online recruitment software which is offered by the State Services Authority (SSA) has now been completed. 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 broadened the scope of potential applicants.
- 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

- 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.

Aboriginal Employment Plan

- In collaboration with Castlemaine Health and Echuca Regional Health, Bendigo Health was successful in securing additional funding to support implementation of our Aboriginal Employment plan. Activities associated with implementation of the plan to date have included delivery of cultural awareness and mentoring programs, adaptation of recruitment policies to include Karreeta Yirrimboi and examination of several traineeship models.

Graduate nurse program 2014

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. We have seen a significant improvement in non-clinical staff attending compulsory training this year. Bullying and Harassment training has been rolled out to all staff with high attendances, Manutention training has been held for facilitators from clinical and non-clinical areas across Castlemaine Health. Our Whole of System Student Placement (WoSSP) program was nominated for one of the categories at the inaugural People in Health Awards which acknowledged excellence in health education, training and development across Victoria.

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.

Human Resources

CONTINUED

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 Counselling Bendigo, 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 in 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.

Occupational Health & Safety

Castlemaine Health provides a healthy and safe workplace which is fundamental to responsible management and the operation of a successful rural health service. Castlemaine Health has an uncompromising commitment to the

safety and health of our patients, residents, employees, contractors, agency staff and the public. We ensure that in the pursuit of excellence in providing patient and resident care we do not jeopardise the safety or health of our employees. Castlemaine Health encourages genuine participation by all employees and their representatives to share ownership and accountability for health and safety through a productive Safety Health and Environment committee (SHE). The membership of this committee includes a broad range of staff and management from across the hospital.

Castlemaine Health does:

- Comply with the requirements of relevant legislation and supporting regulations.
- Hold managers accountable for providing a healthy and safe environment for their teams to work in.
- Manage work related injury and illness not only within its legal obligations but also within the framework of Castlemaine Health's Values.
- Maximise the potential of return to work for all employees who have suffered a work related injury or illness.

Workplace injury and disease are preventable but if in the course of work an employee is injured then as a preeminent Australian Rural Health Service, Castlemaine Health prides itself in helping injured employees to wellness and return-to-work (RTW) through simple, sustainable and effective injury and return to work management strategies.

Achievements

SHE Committee

Increased engagement from the membership of the Safety Health and Environment committee where each Health and Safety Representative (HSR) now gives an update on issues in their Designated Work Group (DWG). The agenda has been streamlined for this committee to allow the Health and Safety Representatives time to discuss what is happening in their DWG.

Manutention

Castlemaine Health began the implementation of a sustainable, organisation wide manual handling injury risk reduction program in May 2014. The program aims to reduce injuries resulting from manual handling incidents to within industry standards by 2016. This was a great opportunity for both clinical and non clinical staff to attend training and become facilitators for this organisation wide program. The program was supported and continues to be supported by the Executive and is led by the Education and OHS Departments. In addition to the face to face training, structures to support ongoing adherence to the program have been put in place including:

- Policies and procedures.
- Facilitators within work units with a formal time resource allocation to undertake assessments, audits and complete ongoing training.
- Funding to support facilitators.

Feedback from one non clinical participant: "The training itself was very beneficial in that it gets you thinking about different and better ways of doing things – even in your private home lives".



Injury Preventative Program

The OHS Department has implemented a voluntary referral process for any staff member who has a work or non work related injury. This new process is coming to the end of its trial, and to date has had 14 staff participate in voluntary treatment at the hospital, usually with our own physiotherapists. By getting involved as soon as possible, injury information can be collected and used to set the employee on the right course of treatment.

Overall, an early intervention approach enables Castlemaine Health to facilitate proactive injury management, quality care, and early return-to-work outcomes.

Voluntary Return to Work Arrangements

The OHS Department has implemented Voluntary Return to Work Plans for any staff member who has had a non work

related injury or illness. To date there have been seven staff who have voluntarily participated in the development of a these RTW Plans with engagement from their manager and the RTW Coordinator. This has provided much needed support and structure around staff who may have had a non work related injury but who have returned to work in some capacity.

The Year Ahead

Continue with a Positive Trend in the Reduction of Workers Compensation Claims

Castlemaine Health has begun implementing effective and innovative ways to improve workers' compensation results. Over the next 12 months the OHS Department will continue to focus their approach and leverage early intervention such as prompt reporting, proactive claims management, and integrated return-to-work coordination to

continue to improve performance. These strategies are designed to manage work-related injuries right from the start and bring about best possible outcomes.

Emergency Risk Management

Castlemaine Health has a strong commitment to managing risk and has actively worked to increase sound risk management practice throughout the organisation. The review of the Risk Management Framework in 2013 aligns business opportunities and supports managers and staff in the identification and treatment of risks as they arise. Risk Management is overseen at operation level by the Clinical Services and the Quality & Risk Committees and at a Governance level by the Audit & Risk and the Clinical Governance & Quality Committees.

WorkCover

Insurance Year	Remuneration or Wages	Actual Premium Paid inc GST ¹	Actual Premium Paid exc GST ²	Premium \$ Movement	% of Remuneration	Average Industry Rate	Days Comp Paid ³	Days Comp Paid Movement	Time Lost Claims ⁴	Total Standard Claims ⁵	Total Claims Movement
2009/2010	\$22,767,430	\$506,749	\$ 460,681		2.23%	1.32%	292		5	5	
2010/2011	\$23,983,099	\$525,389	\$477,626	▲	2.19%	1.36%	* 2,425	▲	16	18	▲
2011/2012	\$23,233,490	\$ 643,373	\$584,885	▲	2.77%	1.35%	* 2,258	▼	11	16	▼
2012/2013	\$25,615,414	\$922,181	\$838,346	▲	3.60%	1.28%	* 1,393	▼	16	17	▲
2013/2014	\$25,915,382	\$741,477	\$ 674,070	▼	2.86%	1.22%	* 354	▼	8	11	▼

1. 2013/2014 premium may be subject to adjustment in October 2014 when remuneration has been confirmed
2. Actual Premium paid by Castlemaine Health is exclusive of GST and may include discount for upfront payments
3. Days Comp Paid is the Victorian WorkCover Authority (VWA) Days only, and excludes employer under excess days (1st 10 days lost)
4. Time lost claims reflect claims with either full or partial lost days.
5. Standard claims are claims that have either exceeded 10 days lost time or have medical expenses incurred above employer excess amount (currently \$642 per claim) or both of these

* Numbers fluctuate due to claims in each year remaining open/active and continuing to accumulate lost time days

Human Resources

CONTINUED

Emergency Response and Recovery Planning Committee

The Emergency Response and Recovery Planning Committee meets on a monthly basis to plan from October to March each year and then on an as needs basis. The committee has joint membership with Maldon Hospital.

Emergency Response & Recovery Plan

The Emergency Response & Recovery Plan (ERRP) has been extensively revised to incorporate the changes in the State Health Emergency Response Plan (SHERP) published in December 2013. The ERRP documents the arrangements for the prevention of, response to and recovery from an incident, emergency or crisis that may impact upon Castlemaine Health, its staff, the community, stakeholders or physical assets. It is expected that knowledge of and adherence to these procedures will ensure that all clients, visitors and Staff are guaranteed the highest possible standards of health and safety whilst in Castlemaine Health.

All identified risks are aligned with ten high level corporate risks:

Clinical	Risks related to the clinical care delivery of all patients, resident & clients.
Corporate	Risk related to sound & effective corporate governance.
Emergency Preparedness & Business Continuity	Risks associated with readiness to sustain minimum business functionality and an organised response to a crisis or unexpected event.
Financial	Risks associated with the financial management, reporting, accounting and administration of funds.
Governance & Legislation	Risks associated with non compliance to legislation, regulations and maintaining standards.
Human Resources	Risks associated with ensuring policies, procedures and processes are in place for the recruitment, retention, management of staff.
Infrastructure & Equipment	Risks related to ensuring infrastructure and equipment are maintained in an appropriate manner to be safely and effectively used.
Knowledge & Systems	Risks associated with IT systems, management and protection of information and corporate knowledge.
Public Relations/Reputation	Risks associated with engaging customers and the community.
Safety Health & Environment	Risks associated with ensuring a secure and safe working environment for all staff, contractors, visitors and compliance with the <i>Occupational Health & Safety Act 2004</i> .

Staff Profile as at 30 June 2014

LABOUR CATEGORY	June current month FTE*		June YTD FTE*	
	2013	2014	2013	2014
Nursing	158	161	163	162.30
Administration and Clerical	63	61	63	60
Medical Support	11	12.4	10	12.85
Hotel and Allied Services	122	115.63	126	111.60
Medical Officers (inclusive of hospital medical officers)	1.2	1.35	1.17	0.50
Sessional Clinicians	0	0	0	0
Ancillary Staff (allied health)	26	33.30	26	33.70
TOTAL	381.2	384.68	389.17	380.95

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

Risk Management: I, Carolyn Wallace, 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.

Attestation on Data Accuracy: I, Carolyn Wallace, 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.

Attestation for Compliance with the Ministerial Standing Direction 4.5.5.1: I, Carolyn Wallace, certify that Castlemaine Health has complied with Ministerial Direction 4.5.5.1 – Insurance.

Carolyn Wallace
Board President
12 July 2014

Ex-Gratia Payments: Castlemaine Health made zero ex-gratia payments for the year ending 30 June 2014.

Freedom of Information Applications: 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.

Twenty-one requests were received under Freedom of Information in 2013/14. All requests were processed within the required timeframes.

Specific Information Requirements (SD 4.2 (g)): This report provides users with general information about the entity and its activities, operational highlights for the reporting period, future initiatives and other relevant information not included in the financial statements.

Disclosure of Major contracts: There were no contracts greater than \$10 million entered into during the year ended June 2014.

Carers Recognition Act 2012: Castlemaine Health has taken all practical measures to comply with its obligations under the Act.

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 25A): A \$10m redevelopment capital project was completed at Castlemaine Health during the year ended 30 June 2014. The capital works were funded and works arranged through the Department of Health Capital Projects and Service Planning (CPSP) Branch, and the VIPP report has been completed and reported by the Department of Health.

Statement on National Competition Policy (FRD 22C): Castlemaine Health complied with all Government policies regarding neutrality requirements 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 Health has completed an Access and Inclusion Plan that incorporates requirements of the Disability Act 2006.

Consultancies

Consultant	Purpose of consultancy	Start date	End date	Total approved project fee (ex GST)	Expenditure 2013-14 (ex GST)	Future expenditure (ex GST)
Workwell Consulting	Strategic Plan	Apr 14	Sep 14	\$25,000	\$12,500	\$12,500
Aspex Consulting	Service Plan	Feb 13	Oct 13	\$50,000	\$23,185.29	Nil
Health Metrics	Revenue Review	Jul 13	Jun 14	\$31,630.71	\$31,630.71	As required
Department of Transport	Revaluation of Assets	Jun 14	Jun 14	\$10,000	\$10,000	0
P2 Group	WorkCover Management	Feb 14	Jun 14	\$13,700	\$13,700	Nil

In 2013-14, Castlemaine Health engaged 5 consultancies where the total fees payable to the consultants were less than \$10,000.00 with a total expenditure of \$17,814.85 (excluding GST).

Acknowledgements / Maps

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.

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Internal auditor: Accounting and Audit Solutions, Bendigo

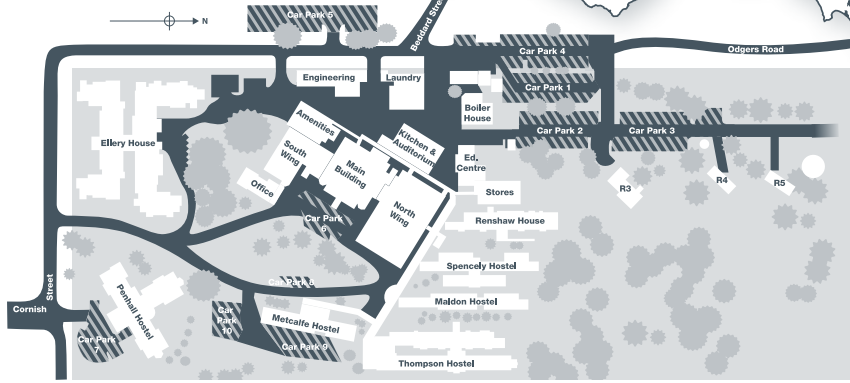
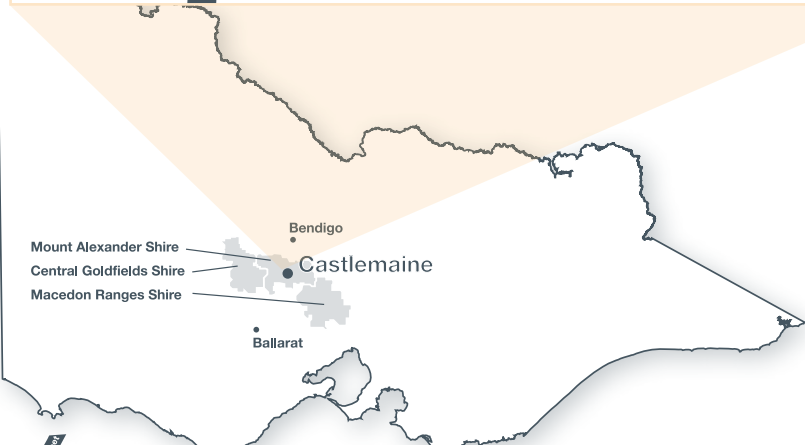
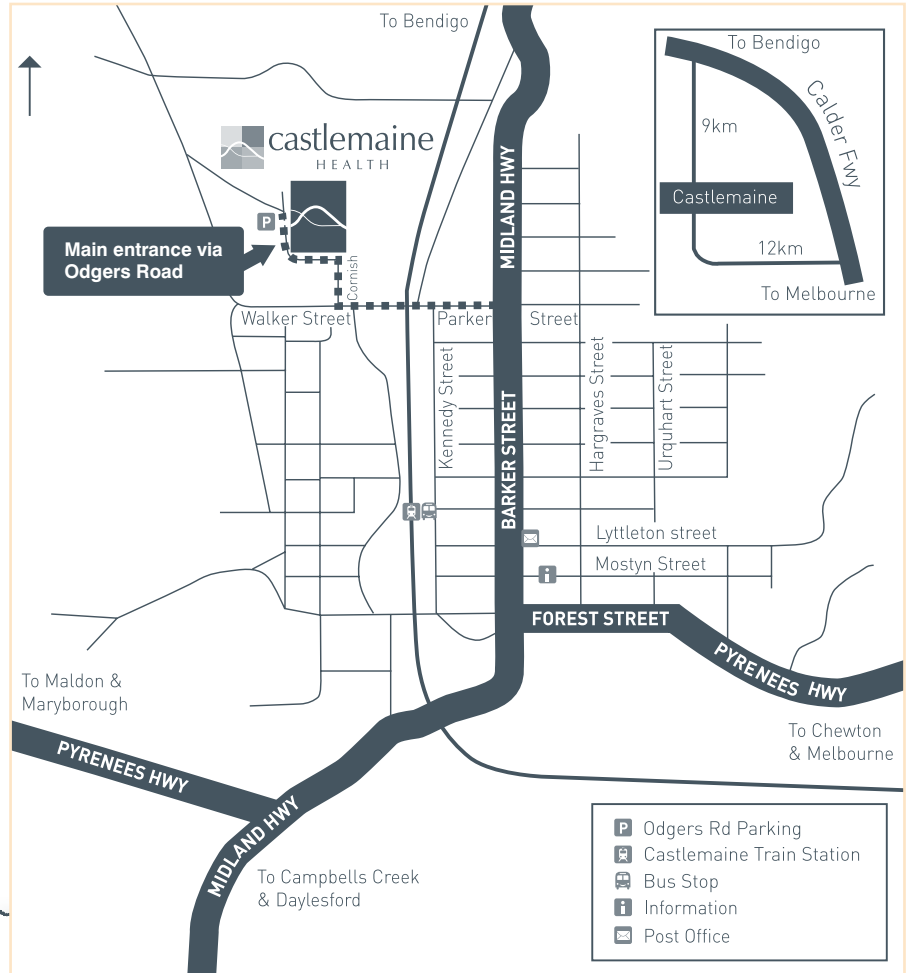
Feedback:

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

Financial statements attached. If the statement is not attached please contact Tina White, PA to the CEO on (p) 5471 1401.



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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AFS - Attached Financial Statement; IF - Inside Front



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