

2018 | 2019



CARE, QUALITY AND CHOICE

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Vision

Exceptional care of every person, every time.

Mission

A well run and trusted organisation that engages with the community to provide high quality health services.

Values

Integrity

We engage with others in the highest degree of dignity, equity, honesty and trust.

Care

We treat people with respect, are compassionate, thoughtful and responsive to their needs.

Unity

We work as a team and in partnership with our communities.

Excellence

We are committed to achieve our Vision.

Acknowledgements and Feedback

We wish to thank everyone who contributed to this report – staff, members of the community, volunteers and clients. We value your comments and feedback, so please get in touch:

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Our services are delivered on the traditional lands of the Dja Dja Wurrung people.

Year in review

In accordance with the Financial Management Act 1994, we are pleased to present the report of operations for Castlemaine Health for the year ending 30 June 2019. Throughout the past year, Castlemaine Health has continued to serve the community extremely well, with all services fully accredited and new standards established for both residential aged care and acute. Our patient and resident feedback indicators show ongoing excellence in service delivery. Our work with consumers is enriching our organisation and our capabilities. We've continued to engage the community across several fronts, in particular around our strategic directions.

Since our Shaping the Future consultation in 2017 we have continued to strengthen relationships in the community and use the insight gathered to inform future directions. In September 2018, we invited the community to join us for a 'search conference'. We sent over 200 individual invitations to local community and advocacy groups and health sector partners. We published open invitations in the local papers and invited our staff and volunteers. On the day we welcomed over 80 guests who took part in the creative visioning workshop. It was an incredibly lively day, full of ideas, history, 'aha' moments and many opportunities to meet and explore concepts with new friends and old.

The outcome is the *Castlemaine Health Strategic Plan 2019-21*. The plan has four pillars: Unwavering Care, Brilliant Together, Sustainable Future and Forever Curious. Together they underpin a way of working that embraces openness, partnerships and innovation. The plan is a framework for action directing our efforts towards the goals outlined in the Government's Health 2040; Advancing Health, Access and Care Guidelines. It calls for enhanced partnerships with health and wellbeing agencies and describes a future where community is a core part of our leadership. It's brief, clear and simple with some stretch in it but that's always an essential component of a good strategic plan. We are excited about the direction it sets for Castlemaine Health.

Throughout the year our consumers' perceptive and insightful questions have continued adding new dimensions to our committees and working groups. We have maintained consumer membership of the Community Consultative Committee, Clinical Governance and Quality Committee and Board Sub-Committees. While we bid farewell to some consumers and welcomed others, consumers' ongoing presence in these important forums has enabled them to lead discussions about services, access, quality and health literacy. They have helped us advance matters that are important to the community and looking ahead, we anticipate consumers, in particular disability advocates, being part of the car park redevelopment project scheduled for 2019-20.



It has been a significant year for aged care with the Federal Government's Royal Commission into Aged Care Quality. We were one of 1000 aged care providers invited to provide an early written submission and we have continued to work with the Royal Commission as it has progressed. Our Board welcomes the opportunity to take any learning from the inquiry that will enable us to improve the care to our residents.

Master planning for the health and wellbeing precinct has commenced and the updated schedule suggests that it will take six months to complete. We received approval to enter tendering in late 2018 and since that time we have interviewed and selected preferred architects, engineers and quantity surveyors.

The project will involve strong engagement with community, staff, Visiting Medical Staff, DHHS' Building Authority, DHHS, local service providers and regional partners once it formally begins.

The Mount Alexander Health and Wellbeing Partnership continues to focus on improving health outcomes for our community. The partnership comprises Castlemaine Health, Castlemaine and District Community Health, Maldon Hospital and Mount Alexander Shire Council, and as the major regional provider of health services, Bendigo Health is also represented.

The partnership was formed in response to a clear message from the 1800 people that were directly engaged through our community consultation who wanted better access and more integrated services. There was a genuine commitment by the agencies involved to set aside organisational agendas to work together to create an integrated care model to achieve community health and wellbeing benefits and outcomes. Together, the agencies jointly recognise that health and wellbeing is a continuum.

The partnership's first major project will be to oversee the master planning and feasibility study. A Project Manager – Health and Wellbeing Precinct has been recruited and the role will provide cross-organisational support. In line with DHHS requirements, Castlemaine Health also continues to be an active member of the Loddon Mallee Health Partnership, Loddon Health Partnership and Central Victorian Primary Care Partnership.

We would like to express our thanks to the Executive Directors for their leadership and hard work over the past year. We'd also like to thank Carolyn Wallace and Sharon Fraser for their nine years of service on the Board, and also to Anna Skreiner for her contribution. We've welcomed new Board members Anna Macleod, Margaret Lewis and Jeffery Rigby, who are already bringing a wealth of experience and knowledge to our organisation's leadership.

We'd like to thank our donors who've supported our fundraising drives and the community groups and businesses who have chosen Castlemaine Health as the beneficiary of their own fundraising. It is thanks to them that we're able to continue improving facilities and equipment to benefit our patients, residents, visiting families and staff.

As ever, we rely absolutely on the commitment and outstanding efforts of our staff and volunteers, and the experienced and dedicated GPs who bring a significant range of specialisms to Castlemaine Health. With the exciting developments in our very near future, it's a great time to be part of this organisation. Thanks for a great year.



Sharon Fraser
Board Chair



Ian Fisher
CEO

Catchment

Castlemaine Health offers a comprehensive range of services for residents of Mount Alexander Shire, as well as sub-regional community services for residents of Mount Alexander, Mount Macedon and Goldfields Shires. Our surgical services also play an important role in reducing waiting times for people within the Loddon Mallee region.

Services

Acute/Sub-acute

(50 staffed beds)

- Medical
- Obstetric
- Paediatric
- Rehabilitation
- Geriatric Evaluation and Management
- Surgical
- Urgent Care

Residential Aged Care

High Care (90 beds)

- Ellery House (60 beds)
- Thompson House (30 beds)

Low Care (67 beds)

- Spencely (20 beds)
- Penhall (32 beds)
- Thompson House (15 beds)
- Transition Care (6 beds/places)

Rehabilitation (4 beds)

- Community (2 places)
- Respite

Community

- District Nursing Services and Palliative Care
- Adult Day Service
- Community Rehabilitation Centre
- Health Independence Programs (HIP) including Sub-acute Care Services (non-admitted SACS), Complex Care, Post-Acute Care
- Volunteer Program and Patient Transport
- Early Childhood Intervention Program

Client Services

- Medical
- Nursing and Personal Care
- Social Work
- Podiatry
- Occupational Therapy
- Physiotherapy

- Speech Pathology
- Dietetics
- Continence Advisory Service
- Pharmacy
- Psychiatry
- Pastoral Care
- Infection Control
- Recreational activities
- Pathology (provided on site by Australian Clinical Labs)
- Radiology and ultrasonography (provided on site by Bendigo Radiology)

Corporate Services

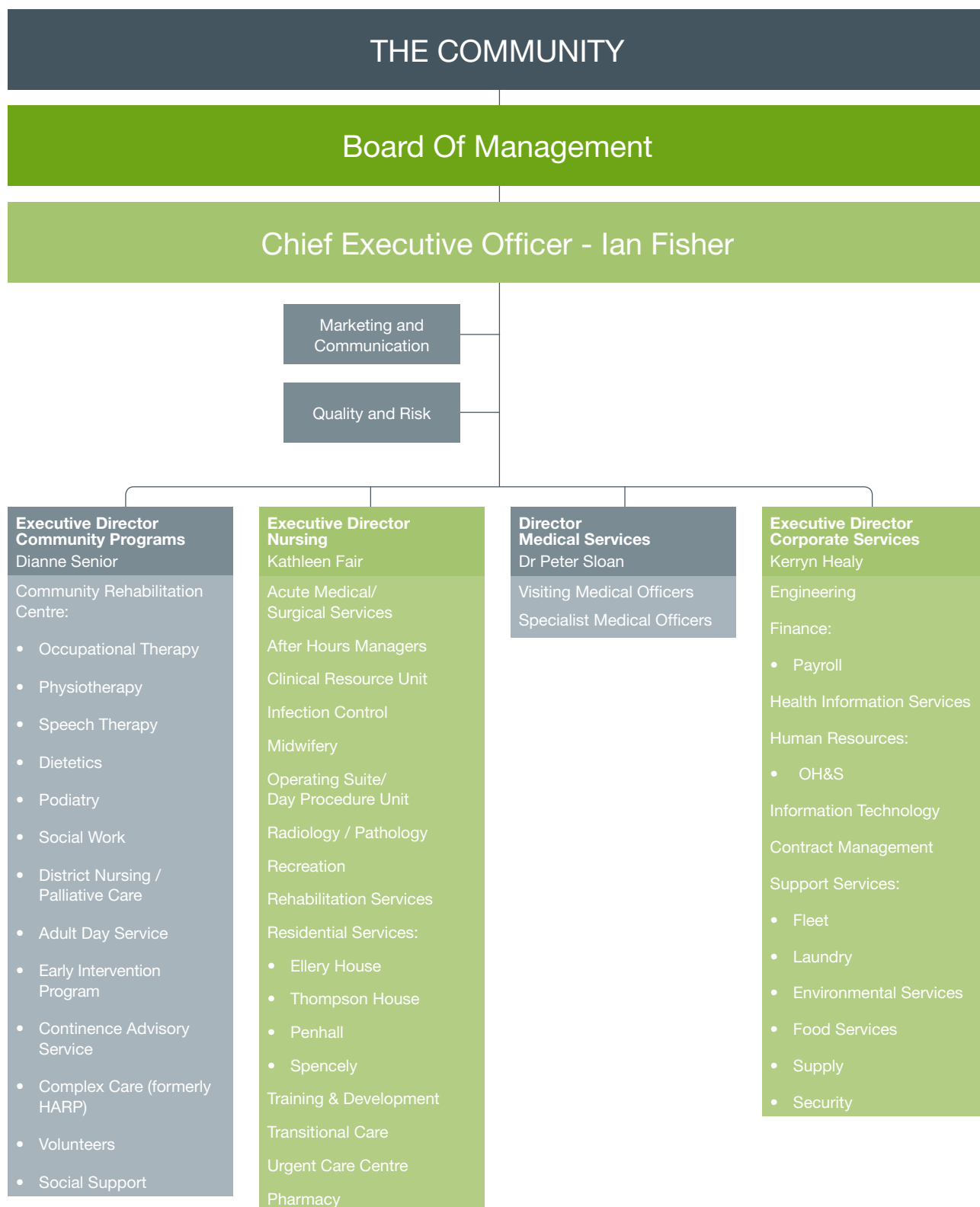
- Engineering
- Supply
- Transport
- Human Resources
- Health Information Services
- Marketing, Communications and Fundraising
- Finance
- Occupational Health and Safety
- Quality and Risk
- Food Services
- Payroll
- Laundry
- Environmental Services
- Information Technology

Training and Development

- Staff Education and Professional Development
- Traineeships in Administration
- Graduate Nurse Program
- Goldfields Hub, Monash University 4th Year MBBS
- Health promotion
- Student placement program with numerous Australian Universities and registered training organisations
- Work Experience Program

Governance and Structure

Organisation chart



Governance and Structure (continued)

Responsible Bodies Declaration

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 2019.



Sharon Fraser,
Board Chair

8 July 2019,
Castlemaine

Manner of establishment and relevant ministers

Castlemaine Health is a public hospital incorporated under the Health Services Act 1988. It has a variety of programs and services funded by the State Government. Our ministers for 2018-19 are as follows: Hon. Jill Hennessy MP, Minister for Health and Ambulance Services (1 July 2018 to 29 November 2018); the Hon. Martin Foley MP, Minister for Mental Health, Housing, Disability and Ageing (1 July 2018 to 30 June 2019); the Hon. Luke Donnellan, Minister for Disability, Ageing and Carers (December 2018 – 30 June 2019); the Hon. Jenny Mikakos, Minister for Health and Ambulance Services (29 November 2018 to 30 June 2019).

Board of Management

The Board of Management oversees the governance of the health service and ensures that services provided comply with *Health Act 1988* requirements and Castlemaine Health by-laws.

The Act requires members to act with integrity and objectivity at all times. They must declare a pecuniary interest during Board debate when applicable and withdraw from proceedings. There were no occasions that required declaration this year. Conflict of interest is declared during Board proceedings, in accordance with Castlemaine Health's by-laws.

Board members serve in a voluntary capacity. A number of sub-committees consisting of board members, staff, Visiting Medical Officers and community members advise and recommend on relevant matters.

The Board of Management meets on the last Monday of each month to deal with a formal agenda and the Chief Executive Officer reports on the health service's performance. Meetings commence at 6.30pm in the Board Room at Castlemaine Health and are open to the public.

Board Members

Ms Sharon Fraser

Chair



MBA (Management), Bachelor of Applied Science (Speech Pathology)

Sharon is a principal consultant for Sharon Fraser Consulting. She has hands-on experience implementing Collective Impact within the Australian context.

Through her work she explores

new ways of connecting people, ideas, sectors, languages, leadership approaches and wisdom to introduce long-lasting change. Sharon's appointment expired 30 June 2019.

Mr Garry Fehring

Vice Chair



Bachelor of Nursing, Grad. Dip. Nursing Management, Registered Nurse, Cert. Oncology Nursing, Cert. Rehabilitation Nursing

Garry is a Registered Nurse whose background includes professional experience at The Alfred, Peter MacCallum

Institute, Royal Talbot Rehabilitation Centre (Austin Health) and the Epworth Hospital. Garry's appointment expires 30 June 2020.



Ms Margaret Peggy Ronnau

Bachelor of Social Science, GAICD

With a Bachelor Degree in Social Science and a keen interest in community wellbeing, Margaret brings strong knowledge of the service sector and experience

as a corporate services executive. She has long been an advocate for improved mental services and has worked with homeless people in inner Melbourne who experience mental illness and in the Local Government sector, encouraging others to redesign their work roles to build better jobs. Margaret's appointment expires 30 June 2021.

Governance and Structure (continued)

Ms Carolyn Wallace



Master of Public Policy & Management, BA, Grad. Dip. Education

Carolyn has 20 years' experience in regional development, health and community services. Her specific interest is around how the public, private and community

sectors can work together to improve access to services, resources and opportunities for growth. Carolyn's appointment expired 30 June 2019.

Mr Venkata Peteti



MBA; Master of Financial Management; Bachelor of Commerce.

Venkata has 10+ years' experience in local government, community empowerment and social justice. His focus is on creating agile, forward-thinking local authorities that make a

real difference to communities through integrity-driven leadership, strong governance and positivity. Venkata's appointment expires 30 June 2021.

Ms Margaret Lewis



Diploma of Teaching

Margaret has wide-ranging experience on community boards and committees, and extensive experience in education, having been a teacher for 21 years and a Principal for 18 years. Margaret's appointment expires 30 June 2021.

Ms Anna Skreiner



LLB, Grad. Dip. Applied Corporate Governance

Anna's areas of expertise are financial services, corporate governance, stakeholder management, regulation and compliance, and dispute resolution. She has extensive legal practice and government

experience. Anna resigned on 30 June 2019.

Ms Vicky Mason



Master of Public Health, MBA, GAICD

Vicky is an innovative, adaptive and resilient leader with significant experience in a range of executive roles across Victorian State and local governments, health and community services and

the private sector. She is committed to continuous improvement and applying her learnings to the benefit of organisations and communities. Vicky's appointment expires 30 June 2020.

Ms Kerry Anderson



Grad. Dip. Direct Marketing, Dip. Training & Assessment, GAICD

Kerry is a central Victorian author, businesswoman, and community advocate. She is passionate about rural and regional Australia. She empowers businesses, groups and communities to embrace

change and create new opportunities for themselves. Kerry's appointment expires 30 June 2020.

Mr Jeffrey Rigby



Grad. Dip. Applied Corporate Governance; Adv. Cert. Risk Management; MBA; Master of Engineering Science; Bachelor of Engineering.

An accomplished leader with 35 years' experience in the water sector, Jeffrey has led transformational change,

delivered significant infrastructure projects and has proven leadership at sector level, with numerous national and state appointments to industry boards, committees and taskforces. Jeffrey's appointment expires 30 June 2021.

Ms Anna MacLeod



Grad. Dip. Legal Practice; Bachelor of Laws; Masters of Applied Science; Bachelor of Science; Dip. Applied Science.

Anna is an experienced strategic and operational leader, with extensive experience in risk management, governance, and legal and indemnity matters.

Anna brings over 20 years' experience in health and insurance industries.

Anna's appointment expires 30 June 2021.

Governance and Structure (continued)

Dr. Simon Judkins



MBBS, Fellow of the Australasian College of Emergency Medicine (ACEM)
Simon is the Deputy Director of Emergency Medicine at Austin Health. He has a passion for resource stewardship and health sustainability and is also a peer support coach, supporting

clinicians through challenging situations. Simon is a strong advocate for equity and access to healthcare for all. Simon resigned on 16 September 2018.

Sub-committees

Board Executive

Ms Sharon Fraser, Chair
Ms Margaret Peggy Ronnau, Vice Chair
Ms Carolyn Wallace, Past Chair
Mr Garry Fehring, Chair Clinical Governance & Quality
Ms Kerry Anderson, Chair Finance Committee

Credentials and Medical Appointments Advisory Committee

Ms Margaret Peggy Ronnau (Chair)
Dr Richard Mayes (Independent Member)
Mr Garry Fehring

Chief Executive Officer Evaluation Committee

Ms Carolyn Wallace
Ms Sharon Fraser
Ms Margaret Peggy Ronnau
Mr Garry Fehring

Finance Committee

Ms Kerry Anderson, Chair
Mr Rod Lester (Independent Member)
Mr Venkata Peteti
Ms Carolyn Wallace

Community Consultation Committee

Ms Elizabeth Grainger, Chair (Independent Member)
Ms Ann Roman (Independent Member)
Ms Bev Orgill (Independent Member)
Mr Bob Forde (Independent Member)
Ms Marlene Bell (Independent Member)
Ms Moira Kean (Independent Member)
Ms Joan Casley (Independent Member)
Mr Paul Kent (Independent Member)
Ms Margaret Rasa (Independent Member, resigned January 2019)
Mr Mark Little (Independent Member, resigned January 2019)

Ms Margaret Peggy Ronnau

Ms Vicky Mason

Ms Carolyn Wallace

Ms Margaret Lewis

Audit and Risk Management Committee

Mr Rod Lester (Independent Chair)

Ms Anna Skreiner

Mr Jeffrey Rigby

Mr Venkata Peteti

Ms Vicky Mason

Clinical Governance and Quality Committee

Ms Margaret Peggy Ronnau (Chair)

Mr Garry Fehring

Ms Anna MacLeod

Dr Helen Dewhurst (Medical Staff Group)

Ms Liz Grainger (Independent Member)

Mr David Stratton (Independent member)

Executive Management

Executive directors meet with the Chief Executive Officer weekly to discuss strategic and operational issues relating to the management of the organisation. Our executive directors are:

Mr Ian Fisher, Chief Executive Officer

Ms Kerry Healy, Executive Director of Corporate Services

Ms Dianne Senior, Executive Director of Community Programs

Ms Kathleen Fair, Executive Director of Nursing Services

Dr Peter Sloan, Director of Medical Services

Statement of Priorities Report

Part A: Strategic Priorities

Goals	Strategies	Health Service Deliverables	Status
Better Health A system geared to prevention as much as treatment Everyone understands their own health and risks Illness is detected and managed early Healthy neighbourhoods and communities encourage healthy lifestyles	Better Health Reduce statewide risks Build healthy neighbourhoods Help people to stay healthy Target health gaps	Identify and explore opportunities to work co-operatively through the Mount Alexander Strategic Health and Wellbeing Partnership to address targeted health and wellbeing gaps in the Shire. Develop a Community Engagement Plan to ensure the community is well informed and progressively take a greater role in what and how services are delivered at Castlemaine Health.	Achieved A strong partnership has continued to develop with participating partners Castlemaine District Community Health, Mount Alexander Shire, Maldon Hospital, and Bendigo Health together considering opportunities for integrated community services. Achieved The community engagement plan has been completed, with findings used to support the Mount Alexander Shire Health and Wellbeing Partnership strategies, inform Castlemaine Health's strategic directions and influence master planning.
Better Access Care is always there when people need it More access to care in the home and community People are connected to the full range of care and support they need There is equal access to care	Better Access Plan and invest Unlock innovation Provide easier access Ensure fair access	Identify and explore community based service opportunities through the Mount Alexander Strategic Health and Wellbeing Partnership to develop an integrated health and wellbeing hub in Castlemaine by June 2019. Review the Castlemaine Health Better Access Plan and develop further strategies that reinforce access equity to all services. Encourage and create opportunities for the development of an innovative integrated model of care through the Castlemaine Health master planning process.	Achieved Planning continues for an integrated health and wellbeing hub, with master planning underway. Achieved Following an assessment to identify the populations that find accessing services difficult, an <i>Access and Inclusion Plan 2018-21</i> was developed and its actions are being implemented to provide a responsive and welcoming service for all. Achieved Master planning commenced in June 2019 with an initial focus on integrating community-based services and establishing a Health and Wellbeing hub.

Statement of Priorities Report (continued)

Part A: Strategic Priorities (continued)

Goals	Strategies	Health Service Deliverables	Status
Better Care Target zero avoidable harm Healthcare that focusses on outcomes Patients and carers are active partners in care Care fits together around people's needs	Better Care Put quality first Join up care Partner with patients Strengthen the workforce Embed evidence Ensure equal care	Progress the development of reporting to Castlemaine Health's Clinical Governance and Quality Committee that aligns with statutory reporting requirements. Review the credentialing and reporting arrangements to ensure they are consistent with the Safer Care Victoria guidelines. Review procedures and policies to ensure the employment of staff is equitable and reflective of the demographics and cultural backgrounds of our community. Progress the implementation of the Castlemaine Health Workforce Plan 2018 to strengthen workforce capability and resilience. Build partnerships with Kyneton District Health and Maryborough District Health Service to establish a regional approach to recruitment of General Practitioner Obstetricians and explore development of a shared rostering model.	Achieved The Clinical Governance and Quality Committee dashboard and other data continues to be reported and considered against benchmarks. Achieve An action plan was created to monitor the progress of aligning Castlemaine Health's credentialing processes with the Safer Care Victoria guidelines. Achieve Reviewed employment policies to ensure they reflect the recruitment of staff on a fair and equitable manner. Achieved The Workforce Plan has been completed. A summary of the key organisational wide issues have been identified while the specific issues for individual Castlemaine Health departments are to be addressed the respective Executive. Continuing We have hosted visits from potential graduates, welcoming them to Castlemaine Health and the local area to promote the benefits of working for Castlemaine Health and living in our region.

Statement of Priorities Report (continued)

Part A: Strategic Priorities (continued)

Goals	Strategies	Health Service Deliverables	Status
Specific 2018-19 priorities (mandatory)	Disability Action Plans Draft disability action plans are completed in 2018-19.	Submit a draft Disability Action Plan to the Department by 30 June 2019. The draft Plan will outline the approach to full implementation within three years of publication	Achieved Castlemaine Health's Disability Plan is incorporated into the Access and Inclusion Plan 2018-21. Actions that have occurred include: <ul style="list-style-type: none"> - website developed and launched to educate our community and promote our NDIS services for all ages - two programs fully accredited against Disability Standards - signage and wayfinding reviewed to identify improvements that better support people with a disability - Intake staff have been educated regarding our programs that support disability.
	Volunteer engagement Ensure that the health service executives have appropriate measures to engage and recognise volunteers.	Review recruitment and engagement arrangements for volunteers and implement changes to better support and recognise their value and contribution.	Achieved Recruitment is via the local newspaper, word of mouth, social media and Castlemaine Health website. A specific Castlemaine Health volunteer induction has increased from three to four times a year. Volunteers receive regular emails regarding training, events, flu vaccinations, new roles and a regular newsletter. Volunteers are recognised on National Volunteer Week and International Volunteer Day with a screen saver, poster and newsletter article. We also publish a notice in the local paper thanking them. Twice a year we hold a get together to celebrate events.
	Bullying and harassment Actively promote positive workplace behaviours and encourage reporting. Utilise staff surveys, incident reporting data, outcomes of investigations and claims to regularly monitor and identify risks related to bullying and harassment, in particular include as a regular item in Board and Executive meetings. Appropriately investigate all reports of bullying and harassment and ensure there is a feedback mechanism to staff involved and the broader health service staff.	Review and improve on current processes regarding the education, investigating, feedback and reporting mechanism related to bullying and harassment.	Achieved The review has resulted in amendments to processes to provide feedback to the parties concerned. Education for bullying and harassment continues to be improved and is mandatory.

Statement of Priorities Report (continued)

Part A: Strategic Priorities (continued)

Goals	Strategies	Health Service Deliverables	Status
	Occupational violence Ensure all staff who have contact with patients and visitors have undertaken core occupational violence training annually. Ensure the department's occupational violence and aggression training principles are implemented.	Ensure the Department of Health and Human Services' occupational violence and aggression training principles are being implemented, reported and systems are in place to ensure all staff who have contact with patients and visitors receive core occupational violence training.	Achieved We have increased our focus by reporting through to the Board, encouraging staff to report incidents, Code Grey training, implementing action plans to minimise the occurrence of occupational violence and maintaining oversight through the Workplace Health and Safety Committee.
	Environmental Sustainability Actively contribute to the development of the Government's policy to be net zero carbon by 2050 and improve environmental sustainability by identifying and implementing projects including: <ul style="list-style-type: none"> - workforce education, to reduce material environmental impacts with particular consideration of procurement and waste management, and - publicly reporting environmental performance data, including - measureable targets related to reduction of clinical, sharps and landfill - waste, water and energy use and improved recycling. 	Review strategies and reset targets in Castlemaine Health's Environmental Sustainability Plan.	Achieved Castlemaine Health has participated in a review of its Environmental Sustainability Plan from which recommendations will be actioned.
	LGBTI Develop and promulgate service level policies and protocols, in partnership with LGBTI communities, to avoid discrimination against LGBTI patients, ensure appropriate data collection, and actively promote rights to free expression of gender and sexuality in healthcare settings. Where relevant, services should offer leading practice approaches to trans and intersex related interventions.	Continue to monitor progress of LGBTI action plan and ensure Castlemaine Health's policies, protocols and practices are consistent to those required for a Rainbow Tick by June 2020.	Achieved An LGBTI working party was convened to develop inclusive statements in our position descriptions and advertisements that acknowledge the LGBTI community. Castlemaine Health was represented on the "Let's Get Proud Group". The group is implementing the <i>Mount Alexander Shire LGBTIQ+ Strategic Plan 2019</i> . Castlemaine Health also had a stall at the Castlemaine Pride picnic and held an afternoon tea with guest speaker for IDAHOBIT (International Day Against Homophobia, Biphobia and Transphobia) Day.

Statement of Priorities Report

Part B: Performance Priorities

High quality and safe care

Key Performance Indicator	Target	2018-19 result
Accreditation		
Accreditation against the National Safety and Quality Health Service Standards	Accredited	Full compliance achieved across all standards
Compliance with the Commonwealth's Aged Care Accreditation Standards	Accredited	Full compliance not achieved across all standards*
Infection Prevention and Control		
Percentage of healthcare workers immunised for influenza	80%	87.9%
Compliance with the Hand Hygiene Australia Program	80%	91%
Patient experience		
Victorian Healthcare Experience Survey – percentage of positive patient experience responses – Quarter 1	95% positive experience	99%
Victorian Healthcare Experience Survey – percentage of positive patient experience responses – Quarter 2	95% positive experience	99%
Victorian Healthcare Experience Survey – percentage of positive patient experience responses – Quarter 3	95% positive experience	99%
Victorian Healthcare Experience Survey – percentage of positive responses to questions on discharge care – Quarter 1	75% very positive experience	89%
Victorian Healthcare Experience Survey – percentage of positive responses to questions on discharge care – Quarter 2	75% very positive experience	88%
Victorian Healthcare Experience Survey – percentage of positive responses to questions on discharge care – Quarter 3	75% very positive experience	81%
Victorian Healthcare Experience Survey – patient perception of cleanliness – Quarter 1	70%	87%
Victorian Healthcare Experience Survey – patient perception of cleanliness – Quarter 2	70%	93%
Victorian Healthcare Experience Survey – patient perception of cleanliness – Quarter 3	70%	91%
Maternity and Newborn		
Rate of severe foetal growth restriction (FGR) in a singleton pregnancy undelivered by 40 weeks	≤28.6%	N/A ⁺

* For standard 3.2 Regulatory compliance a “not met” was received in Quarter 2 associated with mandatory reporting. This was reclassified as “met” in January 2019 following review of procedures, changes to compulsory reporting register processes, introduction of an incident checklist, staff education and compliance auditing.

⁺ Less than 10 cases of severe foetal growth restriction in singleton pregnancy recorded.

Statement of Priorities Report (continued)

Part B: Performance Priorities (continued)

Strong governance, leadership and culture

Key Performance Indicator	Target	2018-19 result
Organisational culture		
People Matter survey – percentage of staff with an overall positive response to safety and culture questions	80%	93%
People Matter survey – percentage of staff with a positive response to the question “I am encouraged by my colleagues to report any patient safety concerns I may have”	80%	97%
People Matter survey – percentage of staff with a positive response to the question “Patient care errors are handled appropriately in my work area”	80%	96%
People Matter survey – percentage of staff with a positive response to the question “My suggestions about patient safety would be acted upon if I expressed them to my manager”	80%	96%
People Matter survey – percentage of staff with a positive response to the question “The culture in my work area makes it easy to learn from the errors of others”	80%	93%
People Matter survey – percentage of staff with a positive response to the question “Management is driving us to be a safety-centred organisation”	80%	95%
People Matter survey – percentage of staff with a positive response to the question “This health service does a good job of training new and existing staff”	80%	81%
People Matter survey – percentage of staff with a positive response to the question “Trainees in my discipline are adequately supervised”	80%	85%
People Matter survey – percentage of staff with a positive response to the question “I would recommend a friend or relative to be treated as a patient here”	80%	95%

Effective financial management

Key Performance Indicator	Target	2018-19 result
Finance		
Operating result (\$m)	-0.30	0.21
Average number of days to paying trade creditors	60 days	62 days
Average number of days to receiving patient fee debtors	60 days	41 days
Public and Private WIES ¹ activity performance to target	100%	102.8%
Adjusted current asset ratio	0.7 or 3% improvement from health service base target	0.87
Actual number of days a health service can maintain its operations with unrestricted available cash, measured on the last day of each month	14 days	-2.6
Measures the accuracy of forecasting the Net result from transactions (NRFT) for the current financial year ending 30 June	Variance ≤\$250,000	\$470,000

¹WIES is a Weighted Inlier Equivalent Separation

Consultancies

Details of consultancies (under \$10,000)

In 2018-19, there were no consultancies where the total fees payable to the consultants were less than \$10,000.

Details of consultancies (valued at \$10,000 or greater)

In 2018-19, there was one consultancy where the total fees payable to the consultants were \$10,000 or greater. Details of individual consultancies can be viewed at www.castlemainehealth.org.au

Consultant	Purpose of Consultancy	Start Date	End Date	Total approved project fee (excluding GST)	Expenditure 2018-19 (excluding GST)	Future Expenditure (excluding GST)
Conversant Asia Pacific	Strategic Plan	July 2018	Dec 2018	\$33,650	\$32,933	Nil

Statement of Priorities Report

Part C: Activity and Funding

Funding type	2018-19 activity achievement
Acute Admitted	
WIES Public	2,399.78
WIES Private	487.43
WIES DVA	35.51
WIES TAC	0.97
Acute Non-Admitted	
Specialist Clinics	2,690
Subacute & Non-Acute Admitted	
Subacute WIES – Rehabilitation Public	147.91
Subacute WIES – Rehabilitation Private	61.19
Subacute WIES – GEM Public	85.25
Subacute WIES – GEM Private	31.30
Subacute WIES – DVA	20.19
Subacute Non-Admitted	
Health Independence Program – Public	16,133
Aged Care	
Residential Aged Care	52,226
HACC	2,128
Other	
Health Workforce	8

Nursing and Midwifery Care, Pharmacy & Staff Development



Kathleen Fair, Executive Director Nursing

It has been another very busy year for the Nursing Directorate at Castlemaine Health. We continue to strive to meet the community's expectation of excellent clinical and residential care, while reviewing and

updating current services to ensure ongoing quality and safety.

Achievements

- Preparation for National Standards (Acute and Subacute) accreditation in August 2019
- Over 3,400 procedures in our Operating Suite, an increase of almost 3%
- The Sub-Regional Elective Surgery Initiative (SESI) continues, assisting in the reduction of regionally waitlisted surgical procedures by approximately 240 cases
- Almost 6,400 people treated in Urgent Care Centre (UCC), an increase of over 3%
- Three staff completed RIPERN (Rural and Isolated Practice Endorsed Registered Nurses) training
- Incorporation of the Safer Care Victoria document *Maternity and Newborn Capability Framework* with *Castlemaine Health Maternity Services Roadmap 2018-2023*
- Replacement of majority of patient and resident beds as a result of 2018 grant for \$780,000
- Successful management of mass influx of staff from Don KR following a large ammonia leak
- Successful sustained management of unprecedented heat wave conditions in all clinical areas
- Very low hospital acquired infection rates, targets met for hand hygiene, and exceeded the target for staff influenza vaccinations

Operating Suite

We've once again increased the number of surgeries performed over this financial year. Part of this increase is attributable to the Sub-Regional Elective Surgical Initiative (SESI), which meant undertaking more low risk procedures at Castlemaine Health that would have remained on the waiting list at Bendigo Health.

We have had two of our much-loved surgeons retire over the past year: Mr. Travis Perera (Orthopaedics) and Mr. Njalu Havea (ENT - Ear, Nose and Throat). We wish them all the best in their retirements.

The Operating Suite staff once again coordinated and volunteered their time toward the Annual Christmas Tree project. The mission collects non-perishable food items and toiletries for distribution to residents of our community in need at Christmas.

The Operating Suite was the successful recipient of two major grants in 2019. One was \$30,000 for replacement of ageing equipment, and over \$160,000 for a Reverse Osmosis system, which is a new requirement for our sterilisation processes beginning 2020. The preparatory works for the Reverse Osmosis system were completed in January and the final installation is scheduled for 2019.

Connolly Subacute

The Connolly Subacute unit continues to provide excellent team care in rehabilitation and Geriatric Evaluation and Management (GEM) services.

The Transitional Care Program (TCP) moved into Spencely Hostel to ensure patients are provided services in an environment that's more like what they will experience when they return home, rather than care under a more medical model.

More acute patients received care in the Connolly Unit during the year due to a shift to a more flexible model that is helping ensure efficiency and better patient flow in both units.

We completed our second year with geriatrician services three days per fortnight from Bendigo Health. This has provided numerous benefits, including more cohesive patient management with Bendigo Health, decreased length of stay, improved patient flow and more comprehensive care for patients.

The majority of patient beds were replaced in the Connolly Unit as a result of the Infrastructure grant received at the end of last year. This has led to increased patient comfort and reduced occupational health risks by providing the latest in technology.

Dr. Bob Long retired from the Connolly Unit in May after 12 years of service. We wish Dr. Long all the best in his retirement.

Geroe Acute

A new ward clerk/admission clerk position was added to the Geroe unit roster to provide better coverage over more hours. This has assisted with workload and more timely admission processes.

The majority of patient beds were replaced in the Geroe Unit as a result of the Infrastructure grant received at the end of last year.

Urgent Care Services

The number of visits to our Urgent Care Centre (UCC) continues to grow with almost 6,400 presentations this year, an increase of more than 3% over last year, with increasing patient acuity. The unit continues to be provided medical service by local GPs who work with UCC staff to provide care for our community.

Three nurses in the unit completed RIPERN (Rural and Isolated Practice Endorsed Registered Nurses) training this year, increasing the number of endorsed

Nursing and Midwifery Care, Pharmacy & Staff Development (continued)

nurses to four. This will continue to support the knowledge and skill of the dedicated UCC staff.

The Telehealth capability has been expanded to include Ambulance Victoria and they have participated in triage and patient care remotely while evaluating whether dispatching ambulance crews is required.

Maternity Services

We had 50 babies born and a further 21 mums and babies transferred back to us from higher level services. Castlemaine Health has two birthing suites available, with an additional third suite to accommodate post-natal mums and their bubs. A new maternity bed (and accompanying sofa for partners) was purchased to replace an ageing bed.

Safer Care Victoria published their long-awaited *Maternity and Newborn Capability Framework* in March 2019. This document helps determine requirements and expectations for our service which has been evaluated as a Level Two (low risk) birthing centre. Castlemaine Health will ensure that all new requirements laid out in this document will be implemented over the next 12 months.

Castlemaine Health has partnered with Northern Health and Safer Care Victoria to participate in the development of a Shared Care governance model that will be rolled out across the state once complete.

Residential Aged Care

Castlemaine Health has responded to an invitation to submit evidence of our care to the Royal Commission in Aged Care announced in October 2018. The final report from the commission is expected in April 2020.

A student photographer from Melbourne with a link to Castlemaine Health submitted a photo that was taken of a Penhall resident (after many hours of getting to know the residents and their stories and gaining permission to do so) to the National Photographic Gallery competition. Her photo was chosen from 5,000 entries to be used for the advertising banner for an exhibit toured Australia. She also won the People's Choice award for the photo.

Ellery House was privileged to unveil a new garden that was made possible due to a fundraising initiative by one of our nurses, Juliet Guy. Juliet raised funds through donations made during her El Camino walk.

During 2018 the Volunteer unit enhanced their services by adding floristry, life story and additional pet visits in Aged Care. We are grateful for the ongoing support of our community in providing meaningful engagement for our residents.

Ageing in Place in our Residential Aged Care units is being facilitated by purchases of additional equipment, additional education for our staff, and altering recruitment efforts to reflect our changing

requirements. Ensuring that residents have every opportunity to remain in their Aged Care home is a goal for Castlemaine Health. We are also undertaking a Model of Care Redesign project to ensure that we are providing the best care that we can, with the right skills and at the right time. The Transition Care Program (TCP) was moved from the Subacute Unit to Spencely Hostel during the year, to more accurately reflect the transitional needs of our patients and ensure the best possible outcome for the transition to home.

Pharmacy

Our onsite Pharmacy service dispenses medication to acute and subacute services. Over 3,500 scripts are dispensed annually, along with medication information and education for patients on discharge.

Last year we replaced our intravenous (IV) pump fleet which required significant training for staff. This year this was expanded to the pumps used in theatre for anaesthetics and patient controlled analgesia (PCA). This was accomplished by pharmacy developing protocols to be programmed into these machines according to the prescriptions requested by anaesthetists which was completed at the end of this year. A drug library was also developed and implemented into the machines, enabling formatted rates and volumes of drugs which will reduce potential errors. These works have seen the completion of the IV pump replacement program which began almost two years ago.

Infection control

Hospital acquired infection rates continue to be very low and we continue to work hard to reduce the risk of infection for patients. We consistently achieve the targets set by DHHS for hand hygiene. Staff influenza vaccination rates were exceeded for the 2019 influenza season.

The Infection Control Consultant was involved in several particularly big projects over the year. The first was management of Infection Control-related practices during major works in the theatre department which took place over the Christmas break. The second was the tender process for the Reverse Osmosis purchase, funds for which were made available as a result of a successful Infrastructure grant application.

Staff development

Ongoing education is a critical element of providing high quality care and services to our patients, clients and residents. As a teaching hospital we support clinical experience for medical, nursing, allied health, pharmacy and personal care students.

The Education department continues to support our clinical staff through the Graduate Nursing program,

Nursing and Midwifery Care, Pharmacy & Staff Development (continued)

a partially funded initiative that provides support for eight new nurses yearly and exposes them to nursing in several areas of the hospital over twelve months. Most graduate nurses who complete this program with us continue on to permanent employment with Castlemaine Health.

One of the Education team's key achievements this year has been the purchase and development of an education portal called MAEC (Mount Alexander Education Collaborative). This provides an all-in-one portal to complete mandatory education requirements, record non-compulsory internal and external education, and house performance appraisals. It has also been made available to Maldon Hospital and Mount Alexander Shire as a regional initiative.

Community Programs



Di Senior, Executive Director Community Programs

Our community programs provides a range of multidisciplinary services including outpatient rehabilitation, functional assessment, therapeutic intervention, home nursing

and palliative care, care coordination and social support to clients of all ages in the Mount Alexander, Macedon Ranges, and Goldfields Shires.

Achievements

- Reviewed all services to improve alignment with funding guidelines and to meet targets associated with introduction of the NDIS, which has created a different focus for our allied health teams.
- The Cancer Survivorship project funded by the DHHS Victorian Cancer Survivorship Program (VCSP) ran from July 2018 to July 2019. It trialed a model of care within our existing Cancer Rehabilitation service which included a Nurse Practitioner (Older Persons) clinic to provide older people living with cancer access to tailored supports and intervention. The model also recognises and supports carers of older people with cancer in our community. The project has also explored the experience of older people with cancer living in residential care facilities at Castlemaine Health. Initial outcomes were presented at the Clinical Oncology Society of Australia Survivorship conference in Sydney in March 2019. This multidisciplinary cancer rehabilitation service is fully integrated into the existing outpatient services at Castlemaine Health.
- Almost 100 young people with disabilities, their siblings and parents and carers rocked out during National Carers Week thanks to Castlemaine Health. Research shows that siblings of young people with a disability play a huge role in supporting their brothers and sisters' social and emotional well-being. So we wanted to say 'thank you'. Siblings Rock invited families to enjoy a free day out on the town, make some new friends and take home some pretty special memories. Held at seven different venues across Bendigo, adults and kids chose their ideal day out...then ran with it.
- Adult Day Service partnered with Carers Support Service to hold a carers couple holiday in Mornington. The carers' couple holiday allows for carers to have time out while their loved one is supported by our staff. Feedback was extremely positive.
- Castlemaine Health underwent the NDIS accreditation audit for the Adult Day Service

'Out and Out' Program and Early Childhood Intervention Services. The surveyors recommended that Castlemaine Health receive a 'MET' rating on all criteria. This was a significant achievement for an organisation going through NDIS accreditation for the first time. The surveyors stated that the clients and families with whom they spoke provided "glowing feedback" in relation to the services. They also commented on the enthusiasm and commitment of all staff they spoke to and the "can do" attitude that is clearly evident.

- We continue to offer a Lymphoedema service in the Community Rehabilitation Centre (CRC) which has demonstrated excellent outcomes for local people living with lymphoedema. This local service has reduced the need for travel to Bendigo or Melbourne for lymphoedema management. Early in 2019 a second lymphoedema practitioner joined the team following the successful completion of the training by one of the CRC physiotherapists.
- The CRC was successfully granted funding through the Cancer Council to establish a cancer information and resource space, which was constructed in June 2019.
- We are completing a project funded by Loddon Mallee Integrated Cancer Services (LMICS) which aims to partner with health services in the Macedon Ranges Shire to trial innovative community-based models of care for people living with cancer in the region.
- A new multidisciplinary wound service was introduced this year in the CRC which uses a collaborative and holistic approach to support healing and prevention of chronic wounds for people with chronic and complex health conditions. The team includes District Nursing, Occupational Therapy, Dietitian, Podiatrist and HARP-Complex Care Coordinators.
- An abstract was presented at the Annual Meeting of the Multinational Association of Supportive Care in Cancer and the International Society of Oral Oncology, which took place in San Francisco (California, USA), June 21-23, 2019. The presentation covered the model of care and client outcomes for the Cancer Rehabilitation Service.

Health Independence Programs

Health Independence Programs (HIP) funding is a primary funding source for Castlemaine Health's allied health and nurse-led outpatient programs, and services are open to people from across Macedon Ranges, Mount Alexander and Central Goldfields shires. A key aspect of HIP services is the provision of goal-directed care coordination and multidisciplinary intervention.

Community Programs (continued)

These services are specifically designed to support those who require rehabilitation following significant injury, surgery or illness, or who need coordinated multidisciplinary support to manage chronic conditions. Our multidisciplinary teams provide highly coordinated care and expertise in specific clinical rehabilitation areas such as:

- neurological rehabilitation
- hand therapy
- musculoskeletal disorders/orthopaedic rehabilitation
- cardiac rehabilitation
- pulmonary rehabilitation
- falls and balance
- cognitive rehabilitation
- pain management
- cancer rehabilitation and survivorship
- continence management
- lymphoedema clinic
- vestibular rehabilitation service
- Healthy Hearts cardiac failure program

Children's Services

To better promote our children's services a new microsite was developed as part of the Castlemaine Health website. This site promotes our children's programs and our skilled staff, and presents the information in a bright and easy-to-read format.

District Nursing and Palliative Care Service

The District Nursing Service continues to evolve to accommodate the many changes arising from the implementation of My Aged Care. We have amended processes to enable us to capture the information required and ensure we continue to accept referrals in a timely manner. We continue to have a high level of expertise in wound care and other technical tasks. The District Nurses also support the Aged Care facilities where appropriate and continue to be as responsive as possible to our hospital needs and the many regional and metropolitan patient discharges.

District Nursing and the Allied Health team have commenced a 'tissue care clinic' which adopts a multidisciplinary approach to wound care. There are many clients who are now receiving Aged Care packages and we have agreements with all the appropriate agencies.

The implementation of the new Unity Software has been a challenge but we now feel confident that our staff are proficient and that the system is up to date. Our Commonwealth Home Support Targets and Home and Community Care for Younger People are being met.

The Palliative Care Service continues to increase the number of contacts for Palliative Care clients. Closer partnerships have been developed with Loddon Mallee Regional Palliative Care Consortium (LMRPCC) and all clinical areas of Castlemaine Health, including aged care and hostels. The Clinical Coordinator role has significant expertise in Palliative Care and this has been a great bonus for our team. All the Victorian Integrated Non-Admitted Health (VINAH) data, clip reports, and VHES surveys have been successfully reported throughout the year.

Family violence

The Strengthening Hospital Response to Family Violence project funding will cease at the end of this financial year. Bendigo Health has been the regional lead for this project. This project has seen many of our staff receive training on family violence and develop confidence in our sensitive enquiry model. Our social work department has been specifically trained so that they can better support our staff to understand the referral pathways.

Diversity

The *Castlemaine Health Access and Inclusion Plan 2018-21* includes action plans for: people with a disability; Aboriginal and Torres Strait Islander people; culturally and linguistically diverse people; those living with dementia; the Lesbian, Gay, Bisexual, Transgender and Intersex community; and communities and individuals affected by family violence. Progress is reported at the Business and Operations Committee meeting and a copy of the plan is available on the staff intranet.

Corporate Services



Kerry Healy, Executive Director Corporate Services

Corporate Services support the care delivery areas of Castlemaine Health to deliver great services to our community. The support services include Health Information, Information Technology, Human Resources,

Food and Environmental, Finance, Payroll, Supply and Resident Laundry.

Achievements

- The Unified Communications project was successfully rolled out across the organisation. This project required a change in phone number for Castlemaine Health which involved significant communication with the community and our other stakeholders.
- Rolled out mental health awareness training and Fitness Passport to support staff health and wellbeing.
- Implemented an upgraded financial reporting and budgeting tool.
- Commenced planning for a major revamp of the front entrance to Castlemaine Health, which will include the provision of 70 additional car parking spaces to improve access for our patients, clients and visitors.

Finance and Payroll

The Financial and Payroll reporting and analysis tool used across Castlemaine Health has been upgraded and includes Dashboard and other automated reporting to Department Managers. This makes budget management and department analysis easier for the managers across Castlemaine Health – allowing Managers to have a greater focus on their primary roles managing the operational aspects of their departments.

Finance continues to develop a multi-skilled team to support leave replacement and succession planning. During 2018-19 the Finance team has welcomed three new finance team members in Joshua Gundry CPA (Financial Accountant and Team Coordinator), Emma Kellett (Accounts Payable) and Michelle Whaley (Accounts Receivable and Finance Administration Coordinator).

The Payroll Department fulfils its role as a sub-regional provider and offers payroll processing services to six other health services. The strategy to provide sub-regional services is designed to ensure the provision of a skilled and balanced payroll service to our customers – both internal and external.

Fundraising

Run the Maine celebrated their 10th anniversary in October and raised \$14,000. Our Murray to Moyne cycle relay teams the Castlemaniacs and Castlemaine Rouleurs together raised \$24,826. Our June Tax Appeal raised \$9,135. We were well supported by community groups too with the Castlemaine Rods bi-annual Rod Run event raising \$3,500 and the Campbells Creek Senior Citizens Club donating \$4,535.35. We were again supported by the Colliers Charitable Foundation, receiving \$30,000.

Gifts in Wills

We were sincerely grateful to receive a generous Gift in Will from the Estate of the late Daphne Edwardson for \$10,000.

Donations

We are deeply thankful to Mrs Marjorie Drury for a donation of \$10,000 in memory of her late husband Peter. We are also very grateful to Dr. Rebecca Dale, who generously donated \$15,000 for the future development of Castlemaine Health.

We would like to thank our donors, committees, supporters and the local community who have supported any of the fundraising efforts over the past 12 months.

Human Resources

During 2018-19 Human Resources continued operating a shared services model for the sub-region, providing a range of support to other health agencies including Maldon Hospital, Maryborough District Heath, Inglewood and Districts Health Service and Heathcote Health.

A focus on Castlemaine Health staff health and wellbeing was maintained and enhanced. During this period we introduced Fitness Passport. Fitness Passport is a corporate health and fitness program that allows its members to access a wide range of their local health and fitness suppliers. Our purpose is to inspire a greater number of people to start regular exercise to improve their overall health and reduce

Hospitals labour category	June current month FTE		June YTD FTE	
	2018	2019	2018	2019
Nursing	189.41	189.71	182.12	186.73
Administration and Clerical	65.50	73.99	65.91	69.45
Medical Support	19.72	5.22	20.63	6.31
Hotel and Allied Services	85.17	95.44	92.16	92.61
Medical Officers (including Hospital Medical Officers)	1.35	1.20	1.16	1.17
Sessional Clinicians	.39	.28	.27	.28
Ancillary Support (Allied Health)	37.91	40.48	37.61	40.38
Total	399.45	406.32	399.85	396.92

Corporate Services (continued)

the need to have sick leave. We provided mental health awareness training to support our managers and staff. Human Resources also attended numerous professional development days to ensure their skills are up to date.

The Employee Assistance Program continues to be well used and the choice of providers it offers has been well received. The on-site one day per week continues to make it easier for staff to access the confidential counselling service.

Human Resources continue to be involved in the rollout the Lead to Achieve program, which is based on Studer principles. The program helps establish and track key performance indicators for the organisation. It also promotes employee engagement by encouraging leaders to regularly meet with their direct report staff for rounding conversations with the aim of creating and/or maintaining open and candid communications.

Continuous improvement was also a focus, with the Human Resources team regularly dedicating time to reviewing, streamlining, and (when necessary) overhauling processes, procedures and policies. The team is aiming to operate paperless whenever possible. All new employee files are managed electronically and forms intended for completion on-screen and approved electronically rather than printing to hard copy have been created.

The annual People Matter Survey achieved a record 79% participation rate. One of the strategies from Executive as a result of the People Matters survey is that focus groups will be held with the CEO and a representative from Human Resources.

Application of employment and conduct principles

Castlemaine Health is committed to upholding the principles of merit and equity in all aspects of the employment relationship. To this end, we have policies and practices in place to ensure all employment related decisions, including recruitment, promotion, training and retention, are based on merit. Any complaints, allegations or incidents involving discrimination, vilification, bullying or harassment are taken seriously and addressed. All staff are provided with education and training on their rights and responsibilities and are provided with the necessary resources to ensure equal opportunity principles are upheld.

Workplace Health and Safety

The safety, health and wellbeing of our staff remains an organisational commitment that is supported through key initiatives from the Workplace Health and Safety (WHS) strategy, with an emphasis on fostering and developing staff engagement at all levels across the organisation in health and safety management.

Over the past 12 months we have put in place a range of targeted actions that have helped continually improve our WHS management and culture. These include:

- building on our manager's leadership capabilities through specialised education sessions on managing supportive return to work processes for staff and Occupational Health and Safety education for managers incorporating incident and risk management

Occupational violence statistics	2018-19
Workcover accepted claims with an occupational violence cause per 100 FTE	0
Number of accepted Workcover claims with lost time injury with an occupational violence cause per 1,000,000 hours worked.	0
Number of occupational violence incidents reported	46
Number of occupational violence incidents reported per 100 FTE	11.58
Percentage of occupational violence incidents resulting in a staff injury, illness or condition	17%
The following definitions apply:	
– Occupational violence - any incident where an employee is abused, threatened or assaulted in circumstances arising out of, or in the course of their employment.	
– Incident – an event or circumstance that could have resulted in, or did result in, harm to an employee. Incidents of all severity rating must be included.	
– Accepted Workcover claims – Accepted Workcover claims that were lodged in 2017-18.	
– Lost time – is defined as greater than one day.	
Injury, illness or condition – This includes all reported harm as a result of the incident, regardless of whether the employee required time off work or submitted a claim.	

Occupational Health and Safety statistics	2016-17	2017-18	2018-19
Total number incident reports (including hazard and near miss) for the year per 100EFT staff members	58	54	56
Number 'lost time' standard claims for year per 100EFT staff members	3.5	3	2.28
Average cost per claim for year	\$69,154	\$37,155	\$45,906

Corporate Services (continued)

- focusing on manual handling injury prevention by undertaking a review of our current practices and engaging in a comprehensive manual handling programme that incorporates clinical, allied health and non-clinical areas with nominated staff to be trained and supported in undertaking coaching roles
- continued work on our Occupational Violence and Aggression prevention and management plan, focusing on documentation and communication processes across the organisation and conveying a clear message that occupational violence is not OK
- building on our mental health management and awareness through availability of resources, specific event days and education events for staff
- ongoing internal auditing of our WHS management system
- developing and improving on processes for monitoring and reporting on our health and safety performance

Engineering

A major Government funded project is the car park redevelopment. The project will involve the construction of a purpose built Supply and resident Laundry facility and the relocation of the Engineering department. These moves will involve demolition of buildings that open up the main entrance to Castlemaine Health. An additional 70 car parking spaces will be provided as a result. The project is expected to be completed by October 2020 with the ground works starting in August 2019.

Castlemaine Health has been approved to receive a cash advance to install a 200kw of solar PV power solution with repayment to be made from future savings. The installation is expected to be completed by December 2019. This project is consistent with Castlemaine Health's commitment to environmental sustainability.

The gas burner on the steam boiler has been upgraded to improve the boiler's efficiency and is expected to also reduce consumption. This will contribute to a reduction in Castlemaine Health's environmental footprint.

The Operating Theatre complex requires a Reverse Osmosis water plant to meet new standards (AS 4187). The plumbing has been installed, with the

plant to be installed within the first six month of the 2019-20 financial year.

At the end of 2018, Phil Looney, one of the Engineering team's plumbers left Castlemaine Health to work in Bendigo. We are pleased to welcome Braydon Smith as his replacement. Braydon is a great asset to the department and comes with a wealth of knowledge in the plumbing field.

There have been numerous minor projects undertaken across the site to help accommodate the ever increasing services provided by Castlemaine Health. The highly skilled Engineering team have provided quality input and delivered these works with minimal disruption to services while at the same time having to address growing numbers of maintenance request which go hand-in-hand with aging buildings.

Information Technology

The IT Department has been very busy over the last twelve months with numerous upgrades to network infrastructure, applications and other projects.

Other major projects IT have completed include:

- Completing the upgrade of our phone system, transferring our phone system from a very old PABX platform onto a VoIP (Voice over Internet Protocol) system. The Unified Communications project has resulted in all Castlemaine Health phone numbers being within one number range instead of the previous five different number ranges.
- Installing new server infrastructure, which allows us to upgrade all of our servers to newer versions of operating systems to ensure we have removed all Server 2008 installs prior to its end of life in January 2020.
- Planning for the upgrade over 270 of our computers to Windows 10 and Office 2019 prior to the January 2020 end of life for these products.
- Responding to over 2,000 requests submitted by staff through the upgraded Help Desk.

Support Services

The previous twelve months has been yet another busy year for our Support Services departments, which includes Food Production and Delivery, Environmental Services, Supply, Laundry and Fleet Management.

Business As Usual (BAU) ICT expenditure	Non-Business As Usual (non-BAU) ICT expenditure	ICT expenditure	
Total (excluding GST)	Total=Operational expenditure and Capital Expenditure (excluding GST) (a) + (b)	Operational expenditure (excluding GST) (a)	Capital expenditure (excluding GST) (b)
1,064,312	195,184	0	195,184

Corporate Services (continued)

Our new head chef commenced in August 2018. After taking onboard feedback that we have received from patients, residents and families and in consultation with the Dieticians, a new menu was developed and implemented in March 2019. With our new menu we have taken the bold step to make it a live menu. This means if we receive sufficient or relevant feedback on a particular dish the chefs will alter it to accommodate such comments. This approach reinforces the Castlemaine Health goal to provide a person-centred care approach to service delivery. Our food services departments have once again met the Food Safety standard requirements, as attested to by external auditors and council officers.

There has been an increase in the number of customer services awards given to our food services personnel. These awards are given based on feedback received from patients, residents and their colleagues and are based on the level of commitment to service and customer relations. In excess of 300,000 meals are provided each year across both Castlemaine Health and Maldon Hospital and our staff can be justifiably proud of their achievements.

Our environmental service consistently achieves cleaning standards once again exceeding the state average AQL (acceptance quality limit) scores. Our auditor's report indicates that our hospital's average score was 89.5 against the state average AQL 86.6 – a great result delivered by our dedicated staff. Since the introduction of steam for our cleaning regimen in 2017 we have continued to achieve results against cleaning standards while, at the same time, fulfilling our commitment to reducing dependency on chemicals. This supports our goal of providing a safer environment for staff, patients and residents alike and supports our Environmental Sustainability Plan objectives. Our Environmental/Security personnel have undertaken MOCA (Management of Clinical Aggression) training in the past year to improve security provision, especially at night.

Barcoding of supplies remains a large focus for our supply department. Barcoding helps ensure we have the correct stock in place, we minimise wastage and eliminate unnecessary purchases. We are working with Maryborough District Health Services to improve their supply requirements and roll out barcoding, which is proving to be a mutually beneficial collaboration.

Fleet management is undergoing some changes as we move towards use of VicFleet services to lease our fleet vehicles. Our resident laundry services continue to go from strength to strength. We now offer a quicker, more responsive service for our residents. This has fulfilled our plan to deliver a more personalised service to our residents which is evidenced by the positive feedback that we receive.

Health Information Service

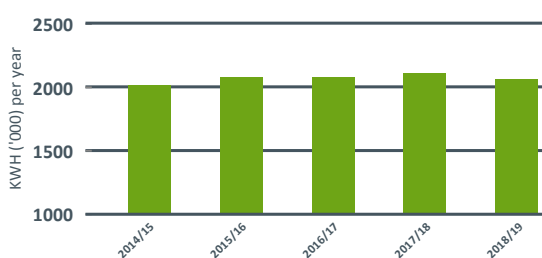
Castlemaine Health continues to provide clinical coding services to Inglewood, Heathcote, Boort and the East Wimmera group. As part of developing and supporting our workforce, we have supported an existing staff member to successfully complete her Certificate IV in Clinical Classification. The additional coding resource this has provided to our Health Information Services team has helped to address the ever growing workload requirements.

In March 2019 we began uploading discharge summaries to My Health Record. Education sessions regarding funding streams and the supporting documentation requirements were provided to clinical staff. HIS continues to work with program managers to develop the information provided to them, with many improvements made to data reports over the past year, especially in relation to outpatient activity.

Environmental Performance

Castlemaine Health continues to implement strategies from our *Sustainability and Environmental Plan 2016-21*. These strategies focus on waste reduction and recycling, energy reduction and resource efficiency. Implementation of strategies is hampered due to the constraints and inefficiencies associated with ageing infrastructure.

Electricity Consumption



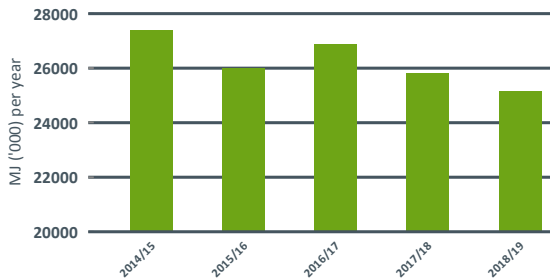
Electricity consumption is down 1.8% compared to the previous year.

We continue to roll out movement lighting sensor and undertake plant upgrades to reduce energy consumption.

A 200kwh Solar PV installation is expected to be in place by the beginning of 2020 which will significantly reduce our electricity consumption.

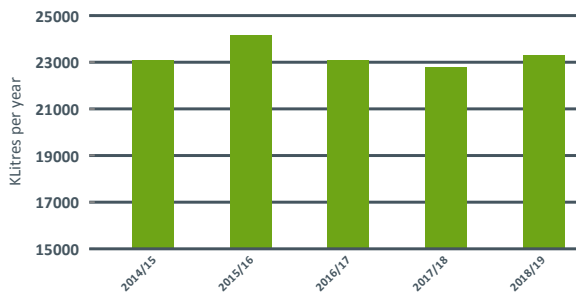
Corporate Services (continued)

Natural Gas Consumption



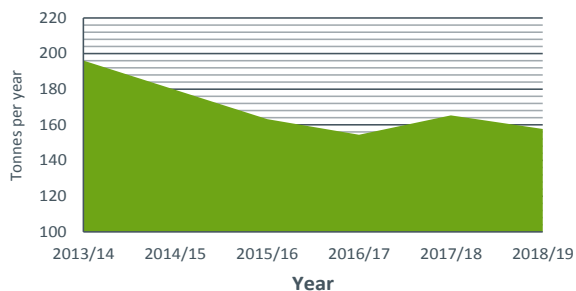
Natural Gas consumption is down by 2.7% compared to the previous year.

Water Consumption



Water consumption is up by 2.2% compared to the previous year.

CO² Emissions – Motor Vehicle Fleet



CO² emissions are reduced slightly compared to the previous year as a result of replacing some older fleet vehicles. The move to a VicFleet leased system should see the CO² emissions continue to fall.

Statutory Compliance

Attestations

Conflict of Interest: I, Ian Fisher, certify that Castlemaine Health has put in place appropriate internal controls and processes to ensure that it has complied with the requirements of hospital circular 07/2017 Compliance reporting in health portfolio entities (Revised) and has implemented a 'Conflict of Interest' policy consistent with the minimum accountabilities required by the VPSC. Declaration of private interest forms have been completed by all executive staff within Castlemaine Health and members of the Board, and all declared conflicts have been addressed and are being managed. Conflict of interest is a standard agenda item for declaration and documenting at each executive Board meeting.

Data Integrity: I, Ian Fisher, certify that Castlemaine Health has put in place appropriate internal controls and processes to ensure that reported data accurately reflects actual performance. Castlemaine Health has critically reviewed these controls and processes during the year.

Integrity, fraud and corruption: I, Ian Fisher, certify that Castlemaine Health has put in place appropriate internal controls and processes to ensure that Integrity, fraud and corruption risks have been reviewed and addressed at Castlemaine Health during the year.

Financial Management Compliance: I, Ian Fisher, on behalf of the Responsible Body, certify that Castlemaine Health has complied with the applicable Standing Directions 2018 under the *Financial Management Act 1994* and Instructions.

Health Purchasing Victoria (HPV) Health

Purchasing policies: I, Ian Fisher, certify that Castlemaine Health has put in place appropriate internal controls and processes to ensure that it has complied with all requirements set out in the HPV Health Purchasing Policies including mandatory HPV collective agreements as required by the *Health Services Act 1988 (Vic)* and has critically reviewed these controls and processes during the year.



Ian Fisher, Accountable Officer
Castlemaine Health, 8 July 2019

Disclosures

Building Act 1993: All building works have been undertaken in accordance with the Department of Health and Human Services Guidelines and comply with the *Building Act 1993* and the Building Code of Australia 1996.

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

DataVic Access Policy: Consistent with the DataVic access policy issued by the Victorian Government in 2012, the information contained in all data tables in this Annual Report will be available at <http://www.data.vic.gov.au/> in machine readable format.

Freedom of Information Act 1982: 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 in writing to the Chief Executive Officer, Castlemaine Health, PO Box 50, Castlemaine, 3450. Application forms are available at www.castlemainehealth.org.au or by phoning 5471 3555. Application charges and fees apply. Twenty requests were received under Freedom of Information in 2018-19. These requests were all valid. All were processed within the required timeframes without any exemptions. More information about Freedom of Information can be found at www.foi.vic.gov.au.

National Competition Policy: Castlemaine Health applies competitive neutral costing and pricing arrangements to significant business units within its operations. These arrangements are in line with Government policy and the model principles applicable to the health sector.

Protected Disclosure Act 2012: This Act enables people to make disclosures about improper conduct within the public sector without fear of reprisal. The Act aims to ensure openness and accountability by encouraging people to make disclosures and protecting them when they do. The procedures established by Castlemaine Health under Part 9 are available in the Protected Disclosure Policy. There were no disclosures notified to the IBAC under section 21(2) in 2018-19.

Safe Patient Care Act 2015: Castlemaine Health has nil matters to report in relation to its obligations under section 40 of the *Safe Patient Care Act 2015*.

Local Jobs First Act 2003: During the year there were no contracts requiring disclosure under the Local Jobs First Policy.

Additional information available on request: The items listed below have been retained by Castlemaine Health and are available to the relevant Ministers, Members of Parliament and the public on request (subject to freedom of information requirements, if applicable):

- declarations of pecuniary interests have been duly completed by all relevant officers

Statutory Compliance (continued)

- details of shares held by senior officers as nominee or held beneficially
- details of publications produced by Castlemaine Health about itself, and how these can be obtained
- details of changes in prices, fees, charges, rates and levies charged by Castlemaine Health
- details of major external reviews carried out on Castlemaine Health
- details of major research and development activities undertaken by Castlemaine Health that are not otherwise covered either in the report of operations or in a document that contains the financial statements and report of operations
- details of overseas visits undertaken including a summary of the objectives and outcomes of each visit
- details of major promotional, public relations and marketing activities undertaken to develop community awareness of Castlemaine Health and its services
- details of assessments and measures undertaken to improve the occupational health and safety of employees
- a general statement on industrial relations within Castlemaine Health and details of time lost through industrial accidents and disputes, which is not otherwise detailed in the report of operations
- a list of major committees sponsored by Castlemaine Health, the purposes of each committee and the extent to which those purposes have been achieved
- details of all consultancies and contractors including consultants/contractors engaged, services provided, and expenditure committed for each engagement.

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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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FRD 22H	Activities, programs and achievements for the reporting period	15-24
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FRD 22H	Workforce data/employment and conduct principles	21
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FRD 22H	Subsequent events	Refer to AFS*
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* AFS – Attached Financial Statement. If the statement is not attached to this report, please call 03 5471 3401.



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