

ANNUAL REPORT 2015



Our Vision Exceptional care of every person, every time



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, Care, Unity and Excellence.

Exceptional Care of Every Person, Every Time

Last year we developed a new vision, mission and set of values to underpin all the work we do here at Castlemaine Health. It is both a framework that guides our actions, and a firm commitment that we make to our community.

Our vision is 'exceptional care of every person, every time'. Whether we are caring for our residents, assisting a person to get well or rehabilitate, helping people in their own homes, or consulting with the community on a wide range of health issues, we are committed to providing exceptional care of every person, every time.

Our mission is to deliver 'a well run and trusted organisation that engages with the community to provide high quality health services'. This is something that our community expects and we constantly strive to deliver. Community consultation is key to ensuring our success in this regard – the unique perspective that consumers provide is vital in helping us enhance the customer experience.

Finally, everything that we do is conducted according to our key values – 'integrity, care, unity and excellence'. We believe that if we as an organisation epitomise these attributes, we can function effectively and better achieve our goals.

Thank you for being part of the Castlemaine Health community. We hope that you see these goals and values reflected in the work that we do. If you have any feedback, please contact the Community Engagement Coordinator on 5471 1505.

Key Achievements

- Developed and implemented a new strategic plan, vision, mission and values to underpin the way we operate and care for our community.
- Received positive results from external auditors, with all services remaining fully accredited.
- Increased the number of surgical procedures to 65 sessions per month and approximately 1000 major and 1400 minor surgeries per year, due to the expansion of the Operating Suite in March 2014.
- Reviewed and implemented a new model of nursing workforce within the Residential Aged Care Units, creating efficiencies and improved levels of care.
- Continued our pattern of improved infection control, increasing our organisational compliance by almost three per cent in the last 12 months, achieving 97.7% compliance.
- Implemented a new system for provision and recording of staff orientation and mandatory education.
- Developed a collaborative project between Castlemaine Community Health Centre, Mount Alexander Shire and Maldon Hospital providing training and education for over 100 staff in Dementia Essentials.
- Implemented an antimicrobial stewardship program with traffic light prescribing indications for antibiotics.
- Further improved our infection prevention measures, with alcohol hand rub made available in all aged care areas, and auditing of hand hygiene in these areas occurring for the first time.
- Established a partnership with Charles Sturt University, with commitments to supervise and train third and fourth year dietetics students on a regular basis.
- Introduced the Active Tuesday program which, under the principles of Active Service Model, promotes connecting people to the wider community.
- Established an agreement with Bendigo Health on the purchase of medical and surgical supplies, enabling greater access to expert advice, a broader product evaluation forum and improved pricing.
- Extended our Continence Service to the Central Goldfields Shire, which has been promoted and received well in this community.
- Restructured our Support Services department, creating efficiencies and enabling improvements in customer service.
- Improved our Information Technology capabilities, with numerous upgrades to network infrastructure and applications.
- Implemented the Commonwealth's Living Longer, Living Better reform, giving older people easier access and better care in our aged care facilities.
- Strengthened our commitment to preventing injuries in the workplace, including engaging a Manutention expert to train clinical and non-clinical staff members to become Injury Prevention Facilitators.
- Developed a Security Framework to ensure better protection of consumers, residents, visitors and staff in the event of a security incident or crisis.

Manner of Establishment and Relevant Ministers

Castlemaine Health is a public hospital incorporated under the Health Services Act 1998 and has a variety of programs and services funded by the State Government.

The Hon Jill Hennessy MLA, Minister for Health, Minister for Ambulance Services
4 Dec 2014 to 30 Jun 2015

The Hon Martin Foley MLA, Minister for Mental Health, Minister for Housing, Disability and Ageing
4 Dec 2014 to 30 Jun 2015

The Hon Jenny Mikakos MLC, Minister for Families and Children
4 Dec 2014 to 30 Jun 2015

The Hon David Davis MLC, Minister for Health, Minister for Ageing
1 Jul 2014 to 3 Dec 2014

The Hon Mary Wooldridge MLC, Minister for Mental Health, Minister for Community Services, Minister for Disability Services and Reform
1 Jul 2014 to 3 Dec 2014

The Hon Wendy Lovell MLC, Minister for Children and Early Childhood Development
1 Jul 2014 to 3 Dec 2014

OVERVIEW OF SERVICES PROVIDED

Acute/sub acute

(50 staffed beds)

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

Residential Aged Care

High care (90 beds)

- Ellery House
- Thompson House

Low care (63 beds)

- Spencely
- Penhall
- Thompson House

Transition Care (6 beds/places)

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

Community

- District Nursing Services / Palliative Care
- Adult Day Services
- Community Rehabilitation Centre / Allied Health departments and Continence Service
- Health Independence Programs: Subacute Care Services - non-admitted (SACS), Complex Care (formerly known as Hospital Admission Risk Program - HARP), Post Acute Care (PAC)
- Volunteers Program
- Castlemaine and District Accommodation and Resource Group (CADARG)
- Early Childhood Intervention Program
- Case Management Service (Home Care Packages)

Client Services

- Medical
- Nursing and Personal Care
- Social work
- Podiatry
- Occupational Therapy
- Physiotherapy
- Speech Pathology
- Dietetics
- Continence service
- Volunteers Program
- Pharmacy
- Psychiatry
- Pastoral care
- Infection control
- Recreational activities
- Pathology (provided on site by St John of God Pathology)
- Radiology and ultrasonography (provided on site by Bendigo Radiology)

Corporate Services

- Engineering
- Supply
- Transport
- Human Resources
- Health Information Services
- Public Relations / Fundraising
- Finance
- Occupational Health and Safety
- Quality and Risk
- Food Services
- Payroll
- Laundry
- Environmental Services
- Information Technology

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

REPORT TO THE COMMUNITY

It is a pleasure to reflect on what we have achieved in the past year and to also consider what is in store for us next at Castlemaine Health. In our last annual report I indicated we were about to commence strategic planning. We now have a five year strategic plan that outlines five clear directions for Castlemaine Health to focus on. The plan is based on a sound reflection and analysis of health data, consideration of the factors that influences our service delivery environment, and takes account of the views and capacity of other health and community organisations in our region.

Our vision for 'exceptional care of every person every time' encapsulates our focus on genuine care for each person who attends Castlemaine Health as well as a focus on high quality services and continuous service improvement. Our mission is for 'a well run and trusted organisation that engages with the community to provide high quality health services'.

The notion of community engagement and indeed engagement with other health and community service stakeholders has become an increasing priority for the board. We recognise that good health is determined by a range of factors, many of which are well beyond the reach of Castlemaine Health. We also recognise that we need to more actively seek a range of views and perspectives on how we deliver and develop our services.

We have strong relationships with local and regional health and community services as well as local government. Our strategic plan was influenced by their input and now as we deliver it we need to continue to build in ways of hearing and responding to community expectations and ideas.

The Annual Report highlights many of our direct achievements over the past twelve months and I encourage you to read the entire report to get a better understanding of all that Castlemaine Health delivers.

I would like acknowledge the skills, dedication and care that the staff members bring to their work to make a positive impact on the people who utilise our service. I also again acknowledge the contribution of our volunteers and our Board members and thank all for their great input. There are many ways we can work together to improve the health and wellbeing of our community.

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 2015.



Carolyn Wallace
President



Carolyn Wallace, President

Our vision for 'exceptional care of every person every time' encapsulates our focus on genuine care for each person who attends Castlemaine Health as well as a focus on high quality services and continuous service improvement.

REPORT TO THE COMMUNITY

On many fronts 2014-15 has been a successful year for Castlemaine Health. Our financial position is improving, all services are fully accredited, our new and refurbished facilities are working well, our patients and residents rated our services highly, our consumers and community are more engaged and we completed a new Strategic Plan that will guide us to a bright future.

We have completed our first full year of functioning in our refurbished theatre suite and upgraded reception, urgent care, medical imaging and parts of the acute ward. Our staff, clients and visiting medical officers have all appreciated the facilities which have enhanced our capacity to deliver high quality and safe care.

Our operating theatres in particular have worked very well which has been shown by an increase in surgical patients, a wider range of surgical procedures performed, and enabled us to meet our acute targets for the first time in many years. Our capacity to take on further cases and deliver care successfully has been acknowledged through the Travis Review which approved funding for additional patient throughput for Castlemaine Health in the 2015-16 financial year.

During the year we completed a new five year strategic plan, 2014-2019. For the first time in many years the organisation has developed a set of values that reflect the manner in which the Board, Management and Staff will conduct our business. Integrity, Care, Unity and Excellence were the values identified by staff as key for Castlemaine Health to function effectively.

Our new strategic focus is about ensuring that Castlemaine Health effectively and efficiently provides a broad range of health services that enables our community to have access to services locally. As stated in our vision, our goal is also to maintain your safety, deliver care according to your desire, and ensure the expected outcome is achieved.

This year has been unusual in that all inpatient, residential and most of community services went through an accreditation process. Each area was surveyed by external surveyors against the relevant standards, including the new National Standards for our acute and subacute services. While ensuring and maintaining standards is an ongoing process, participating in an accreditation involves a significant workload to be survey ready. We passed all of the accreditation surveys well which was a great result for staff and our Quality Team.

Castlemaine Health acknowledges the importance and expertise of other agencies both within and external to the Shire necessary for our community to deliver a broad range of health and community services. There is a good spirit between the agencies and a common desire to work together to improve the health and wellbeing of our communities. For example with major capital works to be completed at Bendigo Health within 18 months it will provide our community access to a significant range of high level tertiary services, and provide Castlemaine Health with opportunities to provide services that compliment and support the health needs of the region.

Our financial position is continuing to improve due to support of the State Government, implementation of numerous financial improvement strategies and greater consistency and accuracy in our financial reporting. Our Department Heads now participate in the annual budgeting process and have monthly access to reliable performance monitoring reports. Delegating and accountability for meeting activity targets, quality and financial management is key to our improved results.

I would like to thank our Board of Management for their time and commitment to fulfill their Board roles and responsibilities. The Board has over the last two years focused our new strategic directions to position the organisation to meet future care standards and community needs. The Board of Management's membership has been constantly reviewed to ensure the desired skill set is achieved, ongoing Board education and development occurs and our sub-committees operate effectively and keep the Board informed. The Executive and staff acknowledge the contribution of the Board and the leadership of Board President, Carolyn Wallace, Board Vice President, Sharon Fraser, and Treasurer, Adam Sevdalis.

When there is constant change occurring within the organisation and a necessity for improved performance the pressure is often on the Executives to identify and implement strategies while ensuring care is not compromised and the support of staff is retained. I acknowledge the hard work of the Executive team – Executive Director of Nursing Services, Amanda Edwards, Executive Director of Community Programs, Rhonda Williams, Executive Director of Corporate Services, Kerryn Healy, and Executive Director of Medical Services, Dr Peter Sloan for their achievements this year.

There are numerous forms of receiving feedback from people who have experienced our care. The overwhelming theme from feedback we receive is that the staff members were wonderful and very caring. Thank you to every staff member for your great work and the positive relationships that you have built with our consumers.

Our local medical staff members have again made a significant contribution to Castlemaine Health. We are extremely lucky as a community to have such a dedicated group of medical practitioners who maintain a very high level of professional competence and provide coverage necessary for Castlemaine Health to offer access to such a broad range of services. We also appreciate the visiting specialist medical staff for their contribution.

The involvement of volunteers is a good barometer to measure the engagement of the community in the Health Service. We are extremely proud to have such large numbers and participation in many aspects of our service. We thank all of our volunteers and look forward to your continued work with our staff, patients and residents.

Next year will again raise many challenges but there is a growing confidence that we have the will and capacity to maintain our positive direction. We are entering an exciting era for Castlemaine Health and I look forward to working with all stakeholders to achieve our common goals.



Ian Fisher

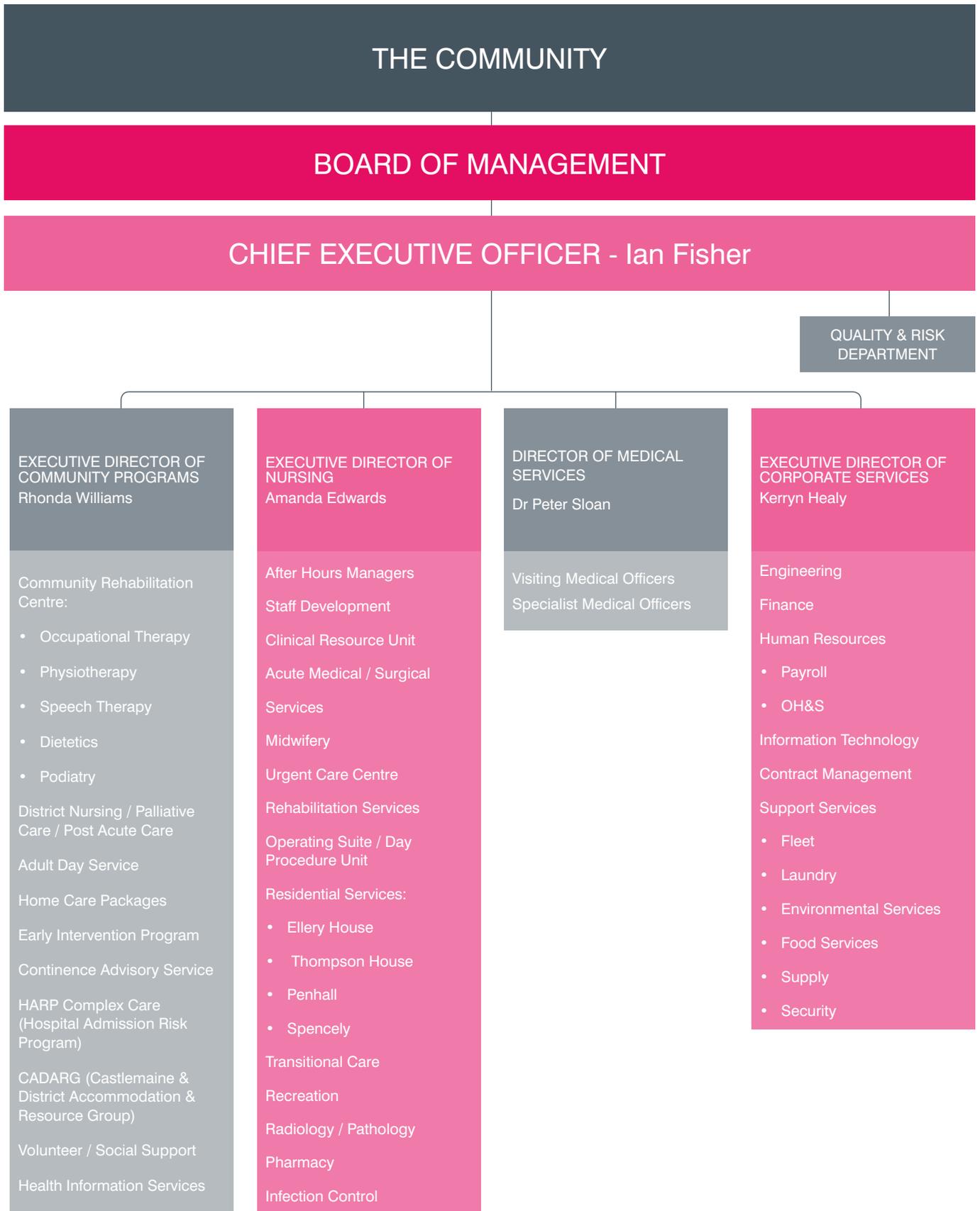
Chief Executive Officer



Ian Fisher, CEO

'Our operating theatres in particular have worked very well, demonstrated by an increase in surgical patients, a wider range of surgical procedures, and an achievement of our acute targets.'

ORGANISATIONAL CHART



CORPORATE GOVERNANCE

Board of Management

PRESIDENT

Ms Carolyn Wallace

Regional Director
Graduate Diploma of Education, Bachelor of Arts, GAICD
Master of Public Policy and Management
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 (from Nov 2014)

Mr Adam Sevdalis

Managing Director
Bachelor of Economics, MBA
Appointment Expires 30 June 2015

TREASURER (to Nov 2014)

Mr Ian McKenzie

Pharmacist/Wine Maker
Bachelor of Pharmacy
Appointment expires 30 June 2016

BOARD MEMBERS

Dr Les Fitzgerald (Retired)

Senior Lecturer in Health Sciences
RN, RM, Dip (Teach Nurs), BA Ed, MN (Nurs Studies), PhD
Appointment expired 31 October 2014

Ms Elizabeth Grainger

Teacher
Trained Infant Teachers Cert
Grad Dip, Education
Appointment expires 30 June 2015

Mr Glenn Sutherland

Retailer and Exporter
BA, Di Ed, Grad Dip Ed, Administration, Grad Dip Management FAIM
GAICD, Advanced Diploma of Business, Cert. 1V Project Management
Appointment expires 30 June 2016

Ms Janet Cropley

Small Business Mentor
BA (Social Sciences)
Dip in Business Studies, Grad Cert if Industry and Training
Appointment expires 30 June 2017

Mr Garry Fehring

Director of Clinical & Site Services
RN BN
Cert Oncology Nursing, Cert Rehabilitation Nursing
Grad Dip Nursing Management
Appointment expires 30 June 2017

Mr Rony Caspi

Psychotherapist
BA Counselling
Adv Cert (Gestalt Psychotherapy)
Appointment expires 30 June 2015

Ms Kate Hamond

Primary Regulator
Diploma of Teaching
Appointment expires 30 June 2017

Board of Management Structure & Function

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

Members are required by the Act to act with integrity and objectivity at all times. They are required to declare a pecuniary interest, when applicable, during Board debate and withdraw from proceedings. There were no occasions that required declaration this year. Conflict of interest is declared during Board proceedings, in accordance with the By-Laws of Castlemaine Health.

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 Services' performance as reported by the Chief Executive Officer. Meetings commence at 6.30pm in the Board Room, Castlemaine Health and are open to the Public.

Board of Management membership of Sub-committees

Credentials and Medical Appointments Advisory Committee

Ms Elizabeth Grainger

Chief Executive Officer Evaluation Committee

Ms Carolyn Wallace
Ms Sharon Fraser
Mr Garry Fehring

Finance Committee

Mr Adam Sevdalis
Mr Ian McKenzie
Mr Glenn Sutherland
Ms Janet Cropley

Community Consultation Committee

Mr Rony Caspi
Ms Janet Cropley

Audit and Risk Management Committee

Mr Adam Sevdalis
Mr Ian McKenzie
Ms Kate Hamond
Ms Carolyn Wallace

Clinical Governance and Quality Committee

Ms Sharon Fraser
Ms Elizabeth Grainger
Mr Garry Fehring

Executive Management

The Executive Directors meet with the Chief Executive Officer weekly 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 Peter Sloan
MB BS, MBA, FRACMA

EXECUTIVE DIRECTOR OF CORPORATE SERVICES

Mrs Kerryn Healy (Appointed October 2014)
BBus (Accounting) CPA, GAICD

REPORTING AGAINST THE STATEMENT OF PRIORITIES

Part A: Strategic Priorities

| State and CH Priorities | Action | Deliverable | Status |
|--|---|---|---|
| Developing a system that is responsive to people's needs | <ul style="list-style-type: none"> Develop an organisational policy for the provision of safe, high quality end of life care in acute and subacute settings, with clear guidance about the role of, and access to, specialist palliative care. | <ul style="list-style-type: none"> Policy for the provision of safe, high quality end of life endorsed by Board of Management and implemented. | <ul style="list-style-type: none"> An organisation policy for the provision of safe, high quality, end of life care in acute and sub acute settings was developed and approved. Work has been undertaken to improve access to palliative care services for more of our patients both in the community setting and within the clinical care areas. Castlemaine General Practitioners and staff in the clinical areas provide high quality end of life care and undertake ongoing professional development in this area. Castlemaine Health accesses specialist palliative care support and advice through the Bendigo Regional Palliative Consultancy Services. Castlemaine Health also provides community palliative care services to people within the Mount Alexander area. |
| | <ul style="list-style-type: none"> Implement an organisation-wide policy for responding to clinical and non-clinical violence and aggression (including Code Grey) that aligns with Department's Guidelines. | <ul style="list-style-type: none"> Security Policy (including Code Grey) endorsed by the Board of Management and implemented. | <ul style="list-style-type: none"> Security Procedure (including Code Grey) has been adopted. Train the trainer for Code Grey has been arranged. |
| | <ul style="list-style-type: none"> Implement formal advance care planning structures and processes, including putting into place a system for preparing and/or receiving, and documenting advance care plans in partnership with patients, carers and substitute decision makers. | <ul style="list-style-type: none"> Advance Care Planning structure and processes fully implemented. | <ul style="list-style-type: none"> The Advanced Care Planning (ACP) Working Group commenced in January, 2015. An Action Plan was developed and is currently being implemented across the organisation, and the Advanced Care Policy and Procedure has been written and approved. A suite of forms has been also been approved for use in the organisation, as has a system for ensuring all clinicians have easy access to the ACP in the patient record. Education is being rolled out across the organisation to ensure all staff members understand the policies and procedures. Most residents have an ACP in place and GPs are having the conversation with more patients prior to their admission. |
| Improving every Victorian's health status and experiences | <ul style="list-style-type: none"> Use consumer feedback to improve person and family centred care, health service practice and patient experience. | <ul style="list-style-type: none"> Consistent with accreditation standards provide evidence that consumer feedback has led to improved services. | <ul style="list-style-type: none"> Castlemaine Health has participated in accreditation surveys of acute, aged residential and community services where standards of consumer participation and person centered care were demonstrated. Patient, resident and client surveys all demonstrated very high satisfaction levels. |
| | <ul style="list-style-type: none"> Support local implementation of the Victorian Health and Wellbeing Plan 2011-2015 through collaboration with key partners such as Local Government, Medicare Locals, community health services and other agencies (for example Women's Health Victoria and VACCHO). | <ul style="list-style-type: none"> Participating in local forums supporting the implementation of the Victorian Health and Wellbeing Plan. | <ul style="list-style-type: none"> Joint projects were established with Mount Alexander Shire, Macedon Ranges Community Health and Kyneton District Health Service. Castlemaine Health is a member of the Central Victorian Primary Care Partnership, with the Castlemaine Health CEO as Chair. The Healthy Ageing Project was implemented as a collaborative between Castlemaine Health, Maldon Hospital, Castlemaine District Community Health and Mount Alexander Shire Council. Castlemaine Health, Mount Alexander Shire, Castlemaine and District Community Health, Maldon Hospital and Windarrang have agreed to jointly develop a service plan for the Shire. |
| | <ul style="list-style-type: none"> Optimise alternatives to hospital admission. | <ul style="list-style-type: none"> Options to further reduce hospital admissions identified and implemented. | <ul style="list-style-type: none"> Strategies were implemented to strengthen and better target clients that meet the Hospital Admission Risk Program profile. Changes were made to the Post Acute Care Program to provided consistency of service delivery. |

Part A: Strategic Priorities Continued

| State and CH Priorities | Action | Deliverable | Status |
|---|--|--|--|
| Expanding service, workforce and system capacity | <ul style="list-style-type: none"> Develop and implement a workforce immunisation plan (WIP) that includes pre-employment screening and immunisation assessment for existing staff that work in high risk areas in order to align with Australian infection control and immunisation guidelines. | <ul style="list-style-type: none"> Workforce Implementation Plan developed and implemented. | <ul style="list-style-type: none"> The workforce immunization plan was developed with all new staff undertaking pre-employment screening and immunization assessment. All clinical staff members are being progressively reviewed for immunisation status. |
| | <ul style="list-style-type: none"> Build workforce capability and sustainability by supporting formal and informal clinical education and training for staff and health students, in particular inter-professional learning. | <ul style="list-style-type: none"> Whole of System Clinical Placement program reviewed and improvements recommended for clinical education and training developed. | <ul style="list-style-type: none"> Review undertaken and changes to the clinical placement program commenced. Best Practice Clinical Learning Environment (BPCLE) framework completed and implemented. |
| | <ul style="list-style-type: none"> Optimise workforce productivity through identification and implementation of workforce models that enhance individual and team capacity and support flexibility. | <ul style="list-style-type: none"> New nursing workforce model implemented across Residential Aged Care by January 2015. | <ul style="list-style-type: none"> Changes implemented in Spencely and Penhall while Ellery and Thompson Houses workforce models are currently being evaluated. |
| Increasing the system's financial sustainability and productivity | <ul style="list-style-type: none"> Identify and implement practice change to enhance asset management. | <ul style="list-style-type: none"> New asset management system implemented. | <ul style="list-style-type: none"> Review of asset management occurred under the oversight of the Audit and Risk Management Committee and new arrangements were implemented to enhance security, valuation and management of assets. |
| | <ul style="list-style-type: none"> Reduce health service administrative costs. | <ul style="list-style-type: none"> Review of administrative roles completed and actions to achieve savings implemented. | <ul style="list-style-type: none"> Administrative positions were reviewed and reductions made where possible. |
| Implementing continuous improvements and innovation | <ul style="list-style-type: none"> Develop a focus on 'systems thinking' to drive improved integration and networking across health care settings. | <ul style="list-style-type: none"> Participate in Strengthening Health services projects including shared services. | <ul style="list-style-type: none"> Active participant in the Strengthening Health Services project. Castlemaine Health's CEO sat on Governance Committee. |
| | <ul style="list-style-type: none"> Drive improved health outcomes through a strong focus on patient-centred care in the planning, delivery and evaluation of services, and the development of new models for putting clients first. | <ul style="list-style-type: none"> Structures and systems implemented and evaluated that demonstrate a strong focus on patient centred care. | <ul style="list-style-type: none"> Consumer Participation Framework adopted. Community representatives on Board subcommittee and operational committee and focus groups. |
| Increasing accountability and transparency | <ul style="list-style-type: none"> Undertake an annual board assessment to identify and develop board capability to ensure all board members are well equipped to effectively discharge their responsibilities. Demonstrate a strategic focus and commitment to Residential Aged Care by responding to community need as well as the Commonwealth Living Longer Living Better reforms. | <ul style="list-style-type: none"> Annual Australian Centre for Healthcare Governance (ACHG) assessment completed. Strategies to improve the sustainability of aged care residential services implemented. | <ul style="list-style-type: none"> Annual assessment completed and action plan to address gaps identified adopted by the Board of Management. Financial modeling of aged residential care services completed. Resident care plans and funding aligned resulting in revenue increase. Internal committee established to review Castlemaine Health service profile including Service Plan recommendations. |
| Improving utilisation of e-health and communications technology. | <ul style="list-style-type: none"> Utilise telehealth to better connect service providers and consumers to appropriate and timely services. | <ul style="list-style-type: none"> New telehealth program implemented. | <ul style="list-style-type: none"> Castlemaine Health in conjunction with Loddon Mallee Health Alliance has developed strategies to further utilize telehealth. |
| | <ul style="list-style-type: none"> Ensure local ICT strategic plans are in place. | <ul style="list-style-type: none"> ICT Strategic Plan completed. | <ul style="list-style-type: none"> Castlemaine Health in collaboration with Loddon Mallee Health Alliance has identified strategic directions. Funding has been received to implement Wi/Fi into Residential Aged Care Units. |

REPORTING AGAINST THE STATEMENT OF PRIORITIES continued

Part B: Performance Priorities

| Safety and quality performance | | |
|--|-----------------|-----------------|
| SOP Measure | Target | 2014-15 actual |
| Patient experience and outcomes | | |
| Percentage of women with prearranged postnatal home care | 100 | Full compliance |
| Governance, leadership and culture | | |
| Patient Safety Culture | 80 | Achieved |
| Safety and quality | | |
| Health service accreditation | Full compliance | Full compliance |
| Residential aged care accreditation | Full compliance | Full compliance |
| Cleaning standards (Overall) | Full compliance | Achieved |
| Cleaning standards (AQL-A) | 90 | Achieved |
| Cleaning standards (AQL-B) | 85 | Achieved |
| Cleaning standards (AQL-C) | 85 | Achieved |
| Submission of data to VICNISS | Full compliance | Full compliance |
| Hand hygiene (rate) – quarter 2 | 75 | 89.1 |
| Hand hygiene (rate) – quarter 3 | 77 | 87.4 |
| Hand hygiene (rate) – quarter 4 | 80 | 85.8 |
| Health care worker immunisation – influenza | 75 | 72 |

| Financial sustainability performance | | |
|---|-----------------|-----------------------------|
| SOP Measure | Target | 2014-15 actual |
| Finance | | |
| Annual Operating Result (\$m) | 0 | Not available. Refer to AFS |
| Creditors | <60 days | |
| Debtors | <60 days | |
| Percentage of WIES (public and private) performance to target | 100 | 107.3 |
| Asset management | | |
| Basic Asset Management Plan | Full compliance | Full compliance |

Part C: Activity*

| Funding type | Target | 2014-15 Activity Achievement |
|--|---------------|-------------------------------------|
| Acute admitted | | |
| WIES public | 1,711 | 1,789 |
| WIES private | 438 | 518 |
| TOTAL WIES (public and private) | 2,149 | 2,307 |
| WIES DVA | 54 | 95 |
| WIES TAC | 4 | 19 |
| WIES TOTAL | 2,207 | 2,421 |
| Subacute and Non Acute Admitted | | |
| GEM DVA | 141 | 40 |
| GEM Private | 662 | 137 |
| GEM Public | 967 | 426 |
| Rehab DVA | 681 | 629 |
| Rehab Private | 1,456 | 1,830 |
| Rehab Public | 5,356 | 5,601 |
| Subacute Non-Admitted | | |
| Health Independence Program | 16,130 | 15,687 |
| Aged Care | | |
| Residential Aged Care | 55,324 | 53,936 |
| HACC | 23,868 | 23,623 |

*Activity achievement is subject to confirmation.

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 community has come to expect. A broad range of services are provided within the Directorate including Residential Aged Care, Rehabilitation, Acute Medical and Surgical, Midwifery and Accident and Urgent Care services and Clinical Education.

Achievements

- Due to the expansion of our Operating Suite in March 2014 from one operating theatre to two, we have increased the number of surgical procedures undertaken. We now conduct 65 sessions per month and approximately 1000 major and 1400 minor surgeries per year. We also added a broader range of urology procedures with the commencement of a new urology surgeon.
- As part of the Aged Workforce Review, we have changed our staffing skills mix and work practices to better match the changing needs of our residents. This has improved medication management and work flow within the units.
- We have kept current with best practice and the latest evidenced-based research via our staff education department. This year we have reviewed the way that we orientate new staff to the organisation and how we ensure that every staff member completes the required updates for their area at the required time. More staff members are now able to access learning and attend education sessions than in previous years.

- Last year we received funding to undertake a collaborative project with Castlemaine Community Health Centre, Mount Alexander Shire and Maldon Hospital to improve and streamline the care for elderly people in residential care and those out in the community that need support to maintain social contact with the community. The collaborative has seen the establishment of a combined volunteer group and provided training for over 100 staff in *Dementia Essentials*. We are also planning to implement a specialised program called Montessori for Dementia to educate carers, nurses and volunteers to deliver care in a way that optimizes people's abilities, improves brain and motor function and includes them in community and social activities.

Medical Services

Medical Services at Castlemaine Health has had another successful year. The local general practitioners continue to work cooperatively with the hospital caring for inpatients and emergency presentations at the Urgent Care Centre.

Following the renovation of the operating suite, our elective surgery service has returned from Kyneton District Health Services. With the addition of a second theatre, this has allowed us to expand our surgical services. Urology, general surgery and gynaecology now have additional lists.

The new facilities have been warmly welcomed by the surgeons, anaesthetists and nurses.

The Connolly rehabilitation service continues to accept rehabilitation and geriatric referrals from across the state. In early 2015, Professor Michael Murray from Austin Health undertook a review of the service. The feedback to the health service was largely positive, praising the high standard of care being provided in a team environment. As a result of the review we plan to expand our subacute services both within the hospital and for patients at home.

As part of quality assurance processes, we check key indicators to ensure our quality of care. Our hand hygiene and infection audits show that the risk of hospital acquired infection at Castlemaine Health is extremely low. All inpatient deaths at the hospital are reviewed. Nearly all deaths are expected and are palliative in nature. Transfers are also reviewed, indicating that when patients need more advanced care that cannot be provided locally they are transferred in a timely and appropriate manner.

Pharmacy

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

Infection control

The Infection Control Department manages the risk of infection transmission for staff, patients, residents and visitors to Castlemaine Health. In terms of infection control, our pattern of improved compliance over the last few years has continued in recent months. In particular we:

- improved organisational compliance from 77% in 2012-13, to 95% in 2013-14 and 97.7% in 2014-15; and
- improved clinical compliance from 79% in 2012-13, to 93.5% in 2013-14 and 93.8% in 2014-15.

Hand hygiene and cleaning standards remain high at Castlemaine Health and Hospital Acquired Infection rates are very low.

Significant improvements and innovations have been implemented to ensure accreditation standards are met in residential, community and acute care areas. An antimicrobial stewardship program with traffic light prescribing indications for antibiotics has been successfully implemented. Further improvements in infection prevention occurred, with alcohol hand rub made available in all aged care areas and auditing of hand hygiene in these areas occurring for the first time.



Operating Suite

The introduction of single patient use tourniquets and safety needles have been other risk reduction strategies implemented. Further development of the Infection Control Liaison Team to assist in audits and education of staff has assisted in staff knowledge development and the ability to respond and cope effectively in challenging situations such as outbreaks.

As part of quality assurance processes, we check key indicators to ensure our quality of care. Our hand hygiene and infection audits show that the risk of hospital acquired infection at Castlemaine Health is extremely low.

COMMUNITY PROGRAMS

Castlemaine Health Community Programs provide a range of multidisciplinary services including outpatient rehabilitation, functional assessment, therapeutic intervention, care coordination, case management and social support to clients of all ages from the Central Goldfields, Macedon Ranges and Mount Alexander Shires.

Departments

Community Program departments include: Early Childhood Intervention Service, Physiotherapy, Occupational Therapy, Podiatry, Dietetics, Speech Pathology, HARP/Complex Care (Hospital Admission Risk Program – Complex Care), PAC (Post Acute Care), Continence Service, District Nursing, Palliative Care, Adult Day Service, Volunteers Program, CADARG and Case Management Service.

Health Independence Programs

The Health Independence Programs (HIP) are a suite of services that offer time-limited coordinated intervention for people to support their transition from hospital to home, recovery from illness, and management of complex or chronic conditions. The HIP services available to eligible clients across our region include: Post Acute Care (PAC), outpatient Subacute Care (SACS) and HARP-Complex Care (Hospital Admission Risk Program - HARP). HIP services involve specialist staff from Physiotherapy, Occupational Therapy, Podiatry, Speech Pathology, Dietetics, Continence Nurse

Advisors and Registered Nurses. All HIP services are based in the Community Rehabilitation Centre (CRC).

Achievements

- A significant re-organisation of CRC SACS-funded programs has taken place this year to improve alignment with Health Independence Program (HIP) guidelines. This has led to the introduction of additional multidisciplinary clinics designed to enhance the coordination of clients with complex needs and to maintain a rehabilitation focus. New multidisciplinary outpatient streams include: Neuro/Acquired Brain Injury, Orthopaedic Rehabilitation, Lower Limb Clinic, Hand and Forearm clinic, and Cognitive Disorders program. These clinics are in addition to existing CRC multidisciplinary programs such as Better Balance, Pain Management, Cardiac Rehabilitation and Pulmonary Rehabilitation.
- The review and reorganisation of programs in the CRC also aims to improve HIP service access across the Macedon Ranges over the coming 12 months.
- A CRC Community Feedback Forum was held on 14 October, with positive feedback from participants. An action plan has been developed to address the suggestions for improvement. The success of the forum has led to plans to hold this consumer focus group annually.
- In July 2014, Castlemaine Health took over as the fund holder for Post Acute Care (PAC) services from Bendigo Health, as part of the Department of Health's disaggregation of PAC services regionally. The PAC service is co-located alongside other Health Independence Programs (HIP) services in the Community Rehab Centre. The outcome for Castlemaine Health is a strengthened ability to offer an increased range of HIP funded services across Mount Alexander, Macedon Ranges and Central Goldfields Shires.
- The Allied Health Graduate Program was run again this year, with Allied Health graduates attending from Castlemaine Health and the sub-regional cluster. An occupational therapy graduate from Cobaw Community Health participated in the program, along with 6 allied health graduates from the Community Rehabilitation Centre (CRC).
- Ongoing involvement with supervision and training of Allied Health undergraduate students across all allied health disciplines. Dietetics has commenced a new partnership with Charles Sturt University, with commitments to take third and fourth year students regularly.

Future directions

- Improve regional access to the Health Independence Programs provided by Castlemaine Health.
- Continue to review and develop SACS programs.
- Increase the focus on staff education and initiatives in the areas of consumer participation, health literacy and diversity.

- Ongoing consumer input into development of our services and programs.
- Continue to explore options for partnerships and joint initiatives to improve service coordination and access with local health organizations.

Home and Community Care (HACC) programs

A range of HACC-funded programs are offered at Castlemaine Health, including: Allied Health (Podiatry and Occupational Therapy), District Nursing Service, Adult Day Service and Continence service.

Achievements

- Successful review against the Community Care Common Standards. This is the first time that all of the HACC funded services at Castlemaine Health have gone through this system of review.
- Redesign of the district nursing and palliative care services. This has allowed for staff to focus their skills in specific clinical areas.
- Bendigo oncologist Dr Becky Chapman is working with the palliative care team to provide clinical support including fortnightly case conferencing of palliative clients.
- Introduction of Active Tuesday program which under the principles of Active Service Model promotes connecting people to the wider community.
- Recruited 11 new volunteers to undertake important work at Castlemaine Health.
- Volunteers and staff attended dementia awareness training.
- Castlemaine Health Volunteers were celebrated with an afternoon tea at Skydancers and those involved in Aged Care Services in Mount Alexander Shire enjoyed a community celebration.
- Occupational Therapy's co-location program has resulted in a close and strong working relationship with Mount Alexander Shire staff. The program is guided by the active service model principles and aims to assist clients to do as much for themselves as possible, in order to remain independent in their own home with a greater sense of well being.
- Podiatry in home foot care program continues to expand. This service supports personal care staff being involved in foot care in a safe environment with close support from the podiatry team.
- The program has seen the development of a Shire wide diversity plan ensuring consultation and consideration when addressing diversity. It also supports us in building strong partnerships with other local HACC providers.
- The Continence service has received extra funding to provide services to Central Goldfields Shire. This has been promoted through the Central Goldfields Shire with great success.
- Promotion of the Continence service has seen staff present on community radio.
- Staff attended Gay, Lesbian, Bisexual, Transgender and Intersex (GLBTI) training and discussions have begun around providing further opportunities for training staff and improvements.

National Respite for Carers Program (NRCP)

- All standards were met in the Home Care Standards Quality review in May 2015.
- 100% carer satisfaction with respite house program.

Case Management Services (CMS Home Care Packages)

- Involvement with Alzheimers Australia and MIND Australia to bring the MINDdog training program to regional Victoria, as a pilot for clients with early onset dementia.
- The Bendigo Branch received funding to implement a volunteer visitor program to recipients of Home Care Packages across the Bendigo, Central Goldfields and Macedon Ranges Shire regions.
- CMS has been working over the last two years to provide clients with information and education on the consumer directed model of care, which came into full effect from 1 July 2015. This gradual introduction of how the new model will affect the future delivery of their service has allowed clients to absorb information in small doses and provide valuable feedback to the CMS.
- All standards were met successfully in the Home Care Standards Quality review in May 2015.

COMMUNITY PROGRAMS continued

Children's Services

Early Childhood Intervention Program

- Ongoing service provision to families of children 0-6 years with complex needs.
- Services continue to extend across the Mount Alexander and Central Goldfields Shires.
- Received Professional Development grant from the Department of Education and Training which enabled staff to attend training on Bridges out of Poverty, Managing Emotions in Children and the Victorian Autism Conference.
- Currently investigating future options for continuing to deliver high quality services to families and children under the National Disability Insurance Scheme (NDIS).

Allied Health

- Ongoing service provision to children of Mount Alexander Shire.
- Services offered include Speech Pathology, Physiotherapy, Occupational Therapy, Dietetics, Podiatry and Continence Service.
- Regular case conferencing and coordination of care meetings are held with the Allied Health team and Paediatrician.

Paediatrician

- Dr Anne Dawson was appointed July 2014. Services are provided on a monthly basis at the Castlemaine Health Children's Centre.

Castlemaine & District Accommodation Resource Group (CADARG)

Achievements

- Expansion of outreach services to community lunches, events and invited functions.
- Partnership with Cantwells Realty to extend access to our emergency accommodation and housing establishment service.
- Partnership with local schools to raise awareness of homelessness and its effects.

Future Directions

- Further partnership development to address recurring homelessness and risk of homelessness.
- Work with Department of Health and Human Services to combine with state-wide Services Connect Initiative for a more comprehensive service.

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.

Hotel Services, Supply and Fleet Management are also provided to Maldon Hospital on a contractual basis.

There was a restructure of these services undertaken over the past year. We would like to acknowledge the staff for their assistance during this time of significant change.

Food Services

Our Food Services team of approximately 60 staff provides more than 305,000 meals each year to patients, residents, visitors and staff at Castlemaine Health and Maldon Hospital, and in excess of 15,000 meals for the Council's Meals on Wheels program.

The \$400,000 kitchen upgrade was completed resulting in a modern, state-of-the-art kitchen. A new menu system is currently been implemented which will ensure patient meals are monitored closely regarding diets and meal texture requirements.

The delivery method for meals to our low care Residential Aged Care facilities, Penhall and Spencley, has changed with the meals now being plated and served to residents in the facilities providing a more home-like feel to their dining experience.

The Food Services Coordinator has been meeting with residents and working with the Dieticians to develop a new menu taking into account resident preferences

whilst ensuring nutritional requirements are addressed. The new menu is currently being finalised and will be implemented in the near future.

Environmental Services

The Environmental Services staff of approximately 30 continues 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 an excellent performance:

- Very high risk areas
Achieved 98.8% Target 90%
- High risk areas
Achieved 94.6% Target 85%
- Moderate risk areas
Achieved 92.2% Target 85%

Laundry Services

The laundry services staff of 10 continues 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 contracted services to external clients. We continue to endeavor to ensure that personal linen is managed with the required care for our residents in Residential Services.

Transport & Fleet Management

The transport and fleet management services were restructured during the year. Castlemaine Health is working with our fleet management system provider to address the replacement of our aging fleet and to provide information on the environmental performance of the Castlemaine Health vehicle fleet.

Supply

In line with the ideals of the Strengthening Health Services project, which encourages Health Services to work together wherever possible, Castlemaine Health has entered into an arrangement with Bendigo Health to provide materials management services for the purchase of medical and surgical supplies and domestic services products. This arrangement will enable Castlemaine Health to access expert advice, a broader product evaluation forum and improved pricing.

Our two member Supply team continues to work tirelessly to collate requisitions from staff, place orders, receive and dispatch materials to all areas across the Castlemaine Health site, as well as to Maldon Hospital.

Information Technology

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

These projects included:

- Significant work behind the scenes to reduce costs, mainly in the area of mobile phones, as well as replacing key parts of the network infrastructure to improve speed, reliability and performance.
- A new backup system has also been introduced to allow greater control over the backup process, as well as faster recovery and restore times.

CORPORATE SERVICES continued

- iPads have also been introduced to the Community Rehabilitation Centre, which provides staff with far greater flexibility with how they work and where they work.

A large project is also currently underway that will see some major improvements to the way network services are provided in the future.

Finance

The Finance team enjoyed a year of stability from a personnel perspective. This has enabled further strengthening of skills and knowledge, with a key focus also on cross-training staff.

Financial reporting has been strengthened at all levels from individual Departments/Units through to Board reporting. The turnaround of monthly financial reporting has also been improved which provides further opportunity for analysis and operational discussion.

The Commonwealth's Living Longer, Living Better reform was implemented on 1 July 2014. These reforms represented a significant change with financial implications for residents entering Residential Aged Care. Education and knowledge-building around these reforms required major effort from the relevant finance staff.

The appointment of a new Internal Auditor in January 2015 has further strengthened the organisation's financial governance and capability, with a positive collaborative working relationship established.

The Finance staff will further develop knowledge and skills to support continuing improvement in 2015/16. A key focus will be further development of our IT systems to improve efficiencies, which will enable a strengthened management accounting function.

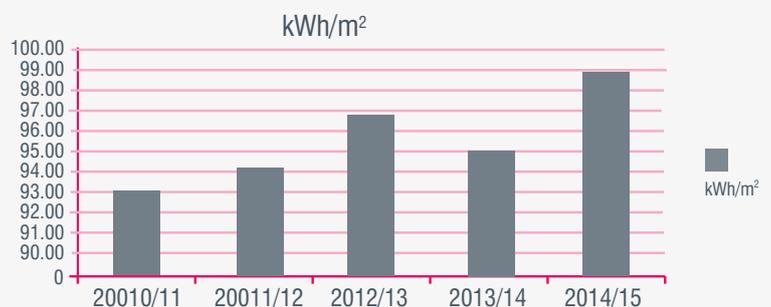
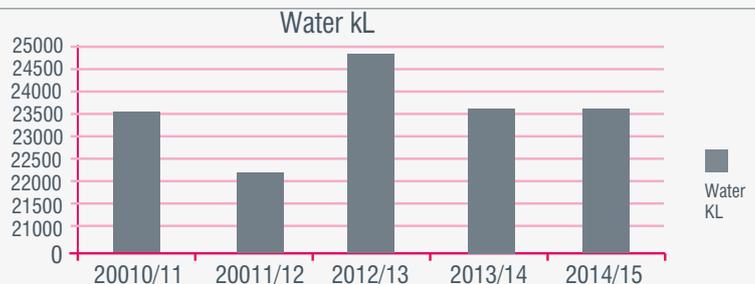
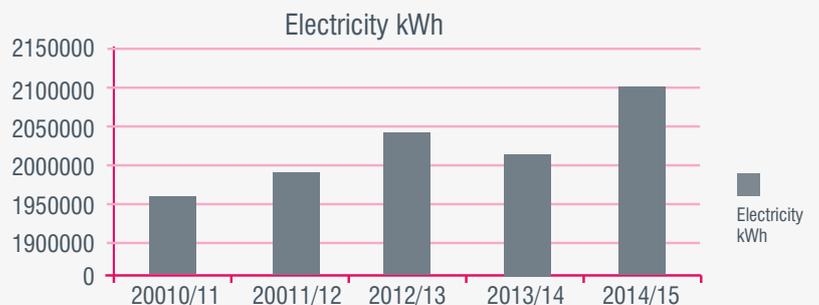
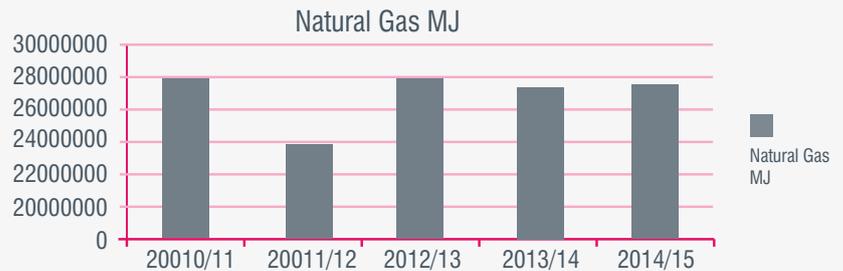
Engineering

Engineering completed 6,344 programmed/requested work orders for the 2014/15 year. Our staff gardener retired in late 2014 and we have engaged a contractor to provide this service into the future. The Engineering Department continues to maintain a high safety standard with no time lost to accidents.

The average monthly number of work orders on the system awaiting attendance has decreased by 6.1% to 434 from last year's average of 462/month. Power consumption has increased by 3.9%, natural gas by 0.6% and water consumption is steady in comparison to the 13/14 year. We continue to monitor energy usage and strive to improve efficiency where possible.

We have had improvements in boiler, heating and air-conditioning controls through the residential buildings that are increasing our ability to maintain a comfortable temperature range for our residents. Overall, a consistent result for the 14/15 year was achieved.

Utilities consumption charts



Human Resources

The Human Resources Department is made up of professional and dedicated staff members that have continued to provide a value added service to staff at Castlemaine Health. The Human Resources Team is lead by Vicky Mellington who commenced in this role in May 2015, replacing Bruce Duncan who was in the role from January 2011. The Human Resources Department includes the functions of recruitment and retention, employee support, payroll and occupational health and safety (including WorkCover).

Future Directions

- Implement the Employee Self Service module of the Kronos time and attendance system, 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.
- Develop the Self Service component of SAP Payroll system, to enable employees to update their personal information.
- Consult with managers on required areas of training – for example Kronos, SAP, PowerBudget, Performance Management, Conflict Resolution and Inductions.
- Develop succession planning strategies including staff retention and employee engagement.
- Implement health and wellbeing strategies for staff.
- Introduce exit interviews to gather feedback.
- Maintain regular communication with staff via internal staff newsletter.
- Review staff Performance Management System.
- Improve the induction process for managers and staff by developing checklists and training sessions.

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, adaption of recruitment policies to include Karreeta Yirrimboi and examination of several traineeship models. Bendigo and Castlemaine were unsuccessful in obtaining continuing funding for this program.

Graduate Nurse Program 2015

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 region's computer match service.

Industrial Relations

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

Staff Support Services

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

Employees are also provided with access to Prevention of Bullying and Harassment Contact Officers, Employee Assistant Program services provided by Counselling Bendigo, a staff gymnasium and short term accommodation. Occupational Health & Safety

Staff profile as at 30 June 2015

| Labour category | June current month FTE* | | June YT FTE* | |
|---|-------------------------|---------------|---------------|---------------|
| | 2014 | 2015 | 2014 | 2015 |
| Nursing | 161.00 | 162.30 | 162.30 | 166.10 |
| Administration and Clerical | 61.00 | 57.90 | 60.00 | 59.40 |
| Medical Support | 12.40 | 14.70 | 12.85 | 14.30 |
| Hotel and Allied Services | 115.63 | 111.05 | 111.60 | 107.78 |
| Medical Officers (inclusive of hospital medical officers) | 1.35 | 1.80 | 0.50 | 2.10 |
| Sessional Clinicians | 0 | 0 | 0 | 0 |
| Ancillary Staff (allied health) | 33.30 | 38.60 | 33.70 | 36.00 |
| TOTAL | 384.68 | 386.35 | 380.95 | 385.68 |

Statement of Merit and Equity

Castlemaine Health ensures a fair and transparent process for recruitment, selection, transfer and promotion of staff. It bases its employment selection on merit, and complies with the relevant legislation. Policies and Procedures are in place to ensure staff are treated fairly, respected and provided with avenues for grievance and complaint processes.

CORPORATE SERVICES continued

Occupational Health & Safety

Castlemaine Health continues to build a culture of accountability and improved and sustained performance in the area of Occupational Health and Safety (OH&S). With a marked decrease in the number of average days lost per work related injury and effective rehabilitation it has meant that injured staff members have been able to have an earlier return back to work.

Managers are embedding a proactive reporting culture with their staff for all of our OH&S incidents and hazards. We have now implemented a paper-based reporting form which staff can utilise in some departments to address the lack of access to computers to input an electronic reporting incident.

There has been an increase in the number and quality of completed investigations as a result of an OH&S incident or hazard as managers are taking ownership for OH&S in their area of control.

Our aim is to continue to have healthy and resilient employees by supporting them through Early Intervention initiatives which have a high focus on musculoskeletal and psychological health concerns/issues.

Over the past 12 months Risk Management funds obtained through our insurer have assisted Castlemaine Health in being able to consult with expert external consultants to visit and undertake appropriate reviews across a range of areas and issues.

These have included a workflow analysis of the kitchen operations at Castlemaine Health, specifically to:

- Identify potential gaps in systems and processes within the kitchen operation.
- Ensure compliance with legislative obligations.
- Review manual handling processes within the kitchen.
- Review Safe Work Procedures (SWPs).
- Prepare an initial roadmap towards sustained performance improvement.

This assessment was conducted through the collection and analysis of relevant data from a review of documentation pertaining to the management of OH&S and Food Safety at Castlemaine Hospital along with an extensive on site review of the kitchen. All meal times and production times were assessed over a two day period.

Recommendations were identified out of this report. Of note is that all manual handling tasks which were observed during the two days of the kitchen assessment were carried out in a safe way by the kitchen staff. It was identified that they are very good at using trolleys, engaging other staff members to assist with lifting heavy items and storing heavy products or commonly used items on the correct shelves.

The OH&S Department secured additional Risk Management funding through CGU to review Castlemaine Health's current policies and procedures for managing safety against the requirements of a formal management system standard (in this instance AS 4801:2001). This review assessed conformity with system requirements as well as regulatory compliance and contemporary safety issues such as contractor management and bullying.

The purpose of the risk management funding was to:

- Identify areas for improvement in the areas of safety/workplace risks and suggest a performance improvement plan for the next 12 months.
- Identify opportunities for improved safety/workplace risk for the purpose of reducing the client's insurance premium in 2014/15.
- Identify threats against maintaining current safety/workplace risks.
- Make recommendations for performance improvement.

Castlemaine Health was given a substantial report which includes a range of recommendations which the OH&S Department are working through across multiple departments in the hospital.

Injury Prevention Week – November 2014 and May 2015

Over the past three years more than 300 injuries affecting staff have occurred at Castlemaine Health. A large proportion of these injuries were as a direct result of manual handling incidents. Some of these injured staff members could not return to their pre-injury role and could not continue in their chosen careers.

In response, in 2014 Castlemaine Health engaged the services of a manutention expert to train a range of both clinical and non-clinical staff members to become Injury Prevention Facilitators (IPF's).

Manutention is a practice that teaches us – when undertaking manual handling tasks – to move our bodies in ways that protect us both at work and home. The role of IPF's is to ensure that staff know how to approach manual handling tasks in a way that keeps them safe and

reduces the risk of injuries. Castlemaine Health now has a broad range of motivated, enthusiastic and positive IPF's who are leading the hospital in making a positive difference in their respective work areas and at home.

Particularly impressive during the training sessions was how staff members could adapt the theories they had learnt to their individual working areas/tasks. Many of the IPF's have since contacted the OH&S Department to discuss safety improvements and changes they are making in their work areas since the training.

It is apparent that many Castlemaine Health staff members are passionate about improving work place safety, and open to better or different ways of doing things. It is clear that amongst the IPF's we have some excellent presenters who are engaging, funny and enthusiastic. All

the IPF's could identify areas outside their normal area of expertise that they could train others in – as manutention techniques are easily adaptable to a range of areas/tasks.

Our IPF's have been presented with their certificates of completion by representatives of the Executive Office and Senior Management, and recently took part in a practical demonstration at a Department Heads Meeting, emphasising that safe bending, lifting and reaching techniques apply to all of us in the workplace.

Our first Injury Prevention Week (IPW) occurred in November 2014 and our second in May 2015 where our IPF's continued to assess their colleagues against the manual handling competencies for both clinical and non-clinical work areas.

Workers Compensation Baseline Risk Assessment*

| Insurance Year | Remuneration or Wages ¹ | Premium Paid inc GST ² | Claims Costs Paid | Average Premium Rate ³ | Weighted Average Industry Rate ⁴ | Days Comp Paid ⁵ | Time Lost Claims ⁶ | Total Standard Claims ⁷ |
|----------------|------------------------------------|-----------------------------------|-------------------|-----------------------------------|---|-----------------------------|-------------------------------|------------------------------------|
| 2010/2011 | \$23,983,099 | \$525,389 | \$550,389 | 2.19% | 1.36% | * 2,438 | 16 | 18 |
| 2011/2012 | \$23,233,490 | \$643,373 | \$390,026 | 2.77% | 1.35% | * 2,377 | 11 | 16 |
| 2012/2013 | \$25,615,414 | \$922,181 | \$242,636 | 3.60% | 1.28% | * 1,393 | 16 | 17 |
| 2013/2014 | \$26,269,785 | \$751,623 | \$93,205 | 2.86% | 1.22% | * 354 | 8 | 11 |
| 2014/2015 | \$27,146,362 | \$862,132 | \$60,304 | 3.18% | 1.77% | *228 | 10 | 11 |

* Data supplied by CGU and correct as at 27 June 2015

1. 2014/2015 premium may be subject to adjustment in October 2015 when remuneration has been confirmed

2. Actual Premium paid by Castlemaine Health is exclusive of GST

3. Average Premium Rate is the premium amount paid as a percentage of remuneration

4. Weighted Average Industry Rate is calculated by WIC Code and remuneration distribution across workplaces by VWA

5. Days Comp Paid is the VWA Days only, and excludes employer under excess days (1st 10 days lost)

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

6. Time Lost Claims reflect claims with either full or partial lost hours

7. Total Standard Claims are claims that have either exceeded 10 days lost time and/or have medical expenses incurred above employer excess amount

CORPORATE SERVICES continued

Risk Management

Emergency Response and Recovery Plan

The Emergency Response and Recovery Plan 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.

The Emergency Response and Recovery Plan is tested throughout the year through fire drills and desktop exercises.

Emergency Response and Recovery Planning Committee

The Emergency Response and Recovery Planning Committee (ERRPC) has joint membership with Maldon Hospital. The committee's role is to evaluate, advise and make recommendations with

respect to policies and strategic matters related to the Emergency Response and Recovery Plan (ERRP) consistent with the Emergency Response and Recovery policies of both Castlemaine and Maldon Hospitals.

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.

Security Framework

2014 saw the development of a Security Framework to ensure a proactive approach in the protection of patients, residents, visitors, staff and health system assets and an appropriate response to, and recovery from, an incident, emergency or crisis that is the result of a security incident. The framework is collaboration of Castlemaine Health and Maldon Hospital.

Security Liaison Committee

The Security Liaison Committee is a consultative committee that provides advice to the Board and Executive of

Castlemaine Health and Maldon Hospital on issues relating to existing, new and emerging issues within the community that may impact on the health and safety of hospital staff and care recipients.

The committee has membership from both hospitals as well as Bendigo Health, Victoria Police, Mount Alexander Shire, Loddon Prison Service, Castlemaine Community Health Centre and contracted Security Company (WorkforceEX).

Risk Management Framework

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

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

| | |
|---|--|
| Clinical | Risks related to the delivery clinical care of all patients, resident and clients. |
| Corporate | Risk related to the sound and effective corporate governance. |
| Emergency Preparedness and 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 and 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 and Equipment | Risks related to ensuring infrastructure and equipment are maintained in an appropriate manner to be safely and effectively used. |
| Knowledge and 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 and Security | Risks associated with ensuring a secure and safe working environment for all staff, contractors, visitors and compliance with the <i>Occupational Health and Safety Act 2004</i> . |

STATUTORY COMPLIANCE

Attestation for Compliance with the Australian/New Zealand Risk Management Standard: 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 executive to understand, manage and satisfactorily control risk exposures. The Audit & Risk Management committee verifies this assurance and that the risk profile of Castlemaine Health has been critically reviewed within the last 12 months.

Attestation on Data Integrity: I, Carolyn Wallace, certify that Castlemaine Health has put in place appropriate internal controls and processes to ensure that reported data reasonably 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 - Insurance: I, Carolyn Wallace, certify that Castlemaine Health has complied with Ministerial Direction 4.5.5.1 – Insurance.



Carolyn Wallace
Board President

12 July 2015

Ex-Gratia Payments: Castlemaine Health made no ex-gratia payments for the year ending 30 June 2015.

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-two requests were received under Freedom of Information in 2014/15. All requests were processed within the required timeframes.

Specific Information Requirements: 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.

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

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. Castlemaine Health has received no complaints under this Act in the 2014/15 financial year

Disclosure of Major contracts: There were no contracts greater than \$10 million entered into during the year ended June 2015.

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: During the year there were no contracts completed requiring the application of VIPP.

Statement on National Competition Policy: 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.

Availability of Other Information: Castlemaine Health confirms that it retains additional information specified in Financial Reporting Direction 22F and that this information is available to the relevant Ministers, Members of Parliament and the public on request (subject to the provisions of the *Freedom of Information Act 1982*, if applicable).

Consultancies

| Consultant | Purpose of consultancy | Start date | End date | Total approved project fee (ex GST) | Expenditure 2014-15 (ex GST) | Future expenditure (ex GST) |
|---------------------|------------------------|------------|----------|-------------------------------------|------------------------------|-----------------------------|
| Workwell Consulting | Strategic Plan | Apr 14 | Sep 14 | \$ 25,000 | \$ 12,500 | Nil |
| Provider Assist | Revenue Review | Jul 14 | Jun 15 | \$141,550 | \$141,550 | As required |
| Dominion Group | Asset Audit | Jan 15 | Jun 15 | \$ 23,336 | \$ 23,336 | Nil |
| ImpRes | Process Improvement | Apr 15 | Jun 15 | \$ 22,460 | \$ 22,460 | As required |

In 2014-15, Castlemaine Health engaged 18 consultancies where the total fees payable to the consultants were less than \$10,000.00 with a total expenditure of \$62,219.09 (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.

Printing: Bendigo Modern Press

Cover design and page layout template: Billington Prideaux Partnership

Editors: Chris Mitchell and Kate O'Connor

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External Auditor: Auditor-General, Victoria

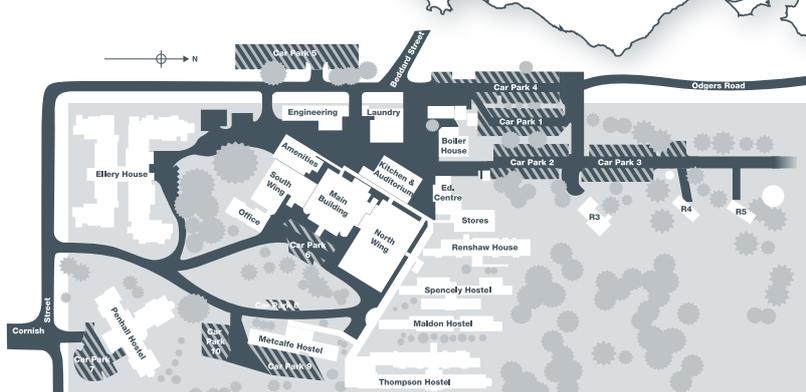
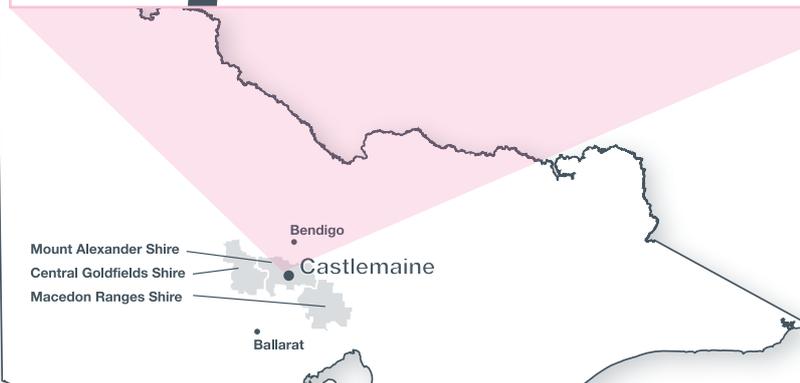
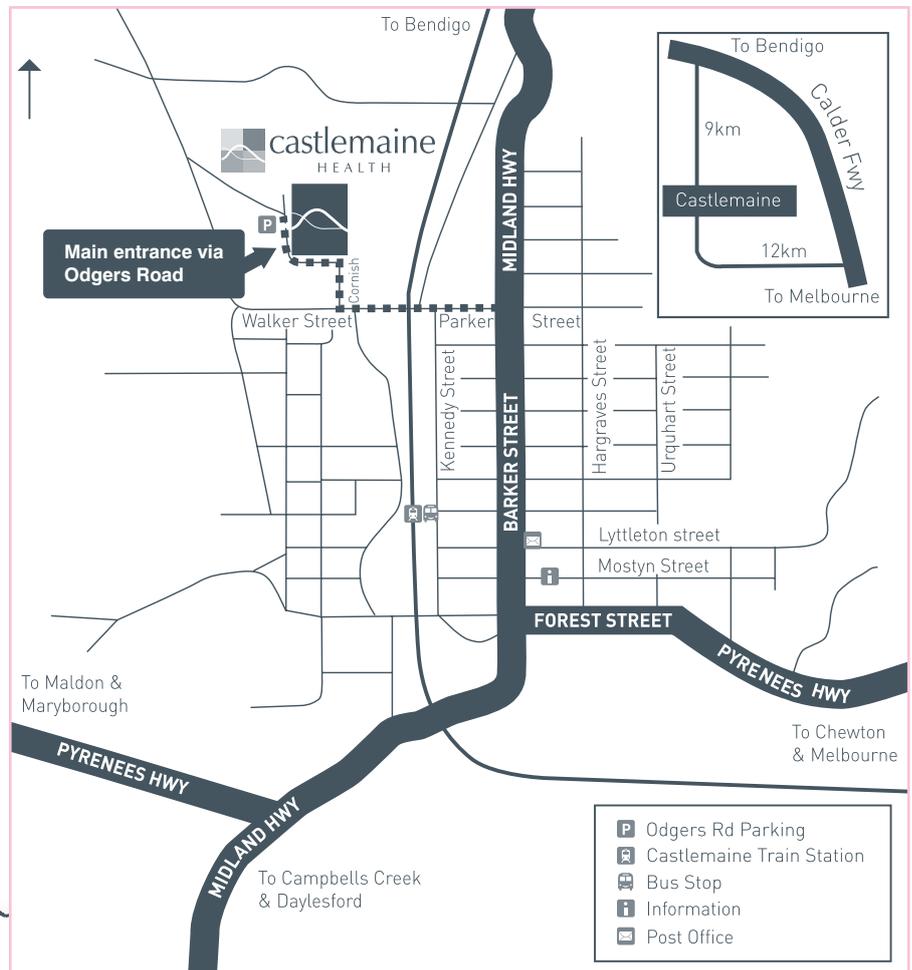
External Auditor's agents: Richmond Sinnott and Delahunty

Internal auditor: Accounting and Audit Solutions, Bendigo / AFS and Associates Pty Ltd, Bendigo

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

Contact details:

Castlemaine Health
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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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| <i>Building Act 1993</i> | | |
| <i>Financial Management Act 1994</i> | | |

AFS – Attached Financial Statement; IF – Inside Front

Financial statements attached. If the statement is not attached please contact Personal Assistant to the Chief Executive Officer on (03) 5471 1401



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