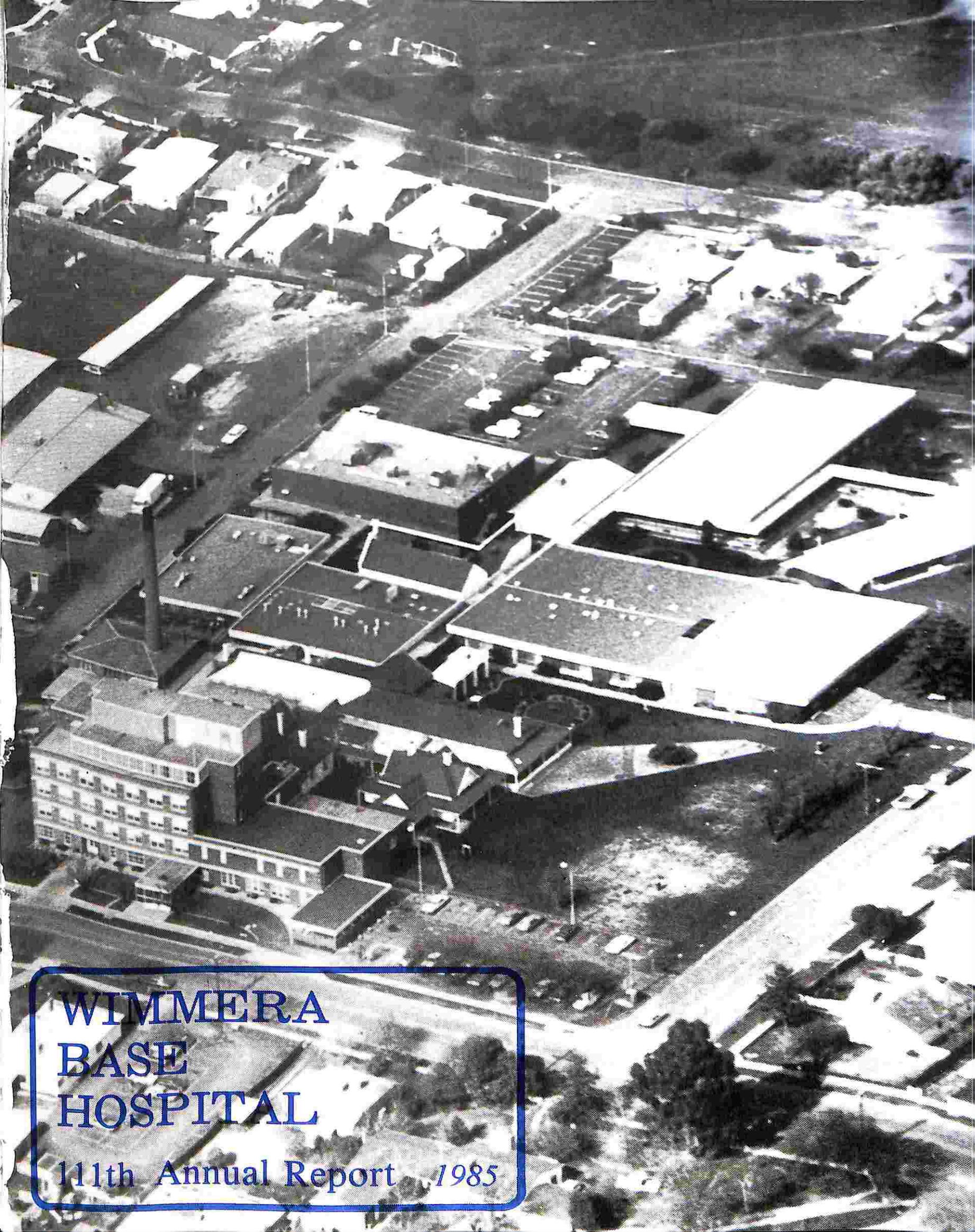


LOOKING TO THE FUTURE

IN THE YEAR TO COME THE HOSPITAL LOOKS FORWARD TO:

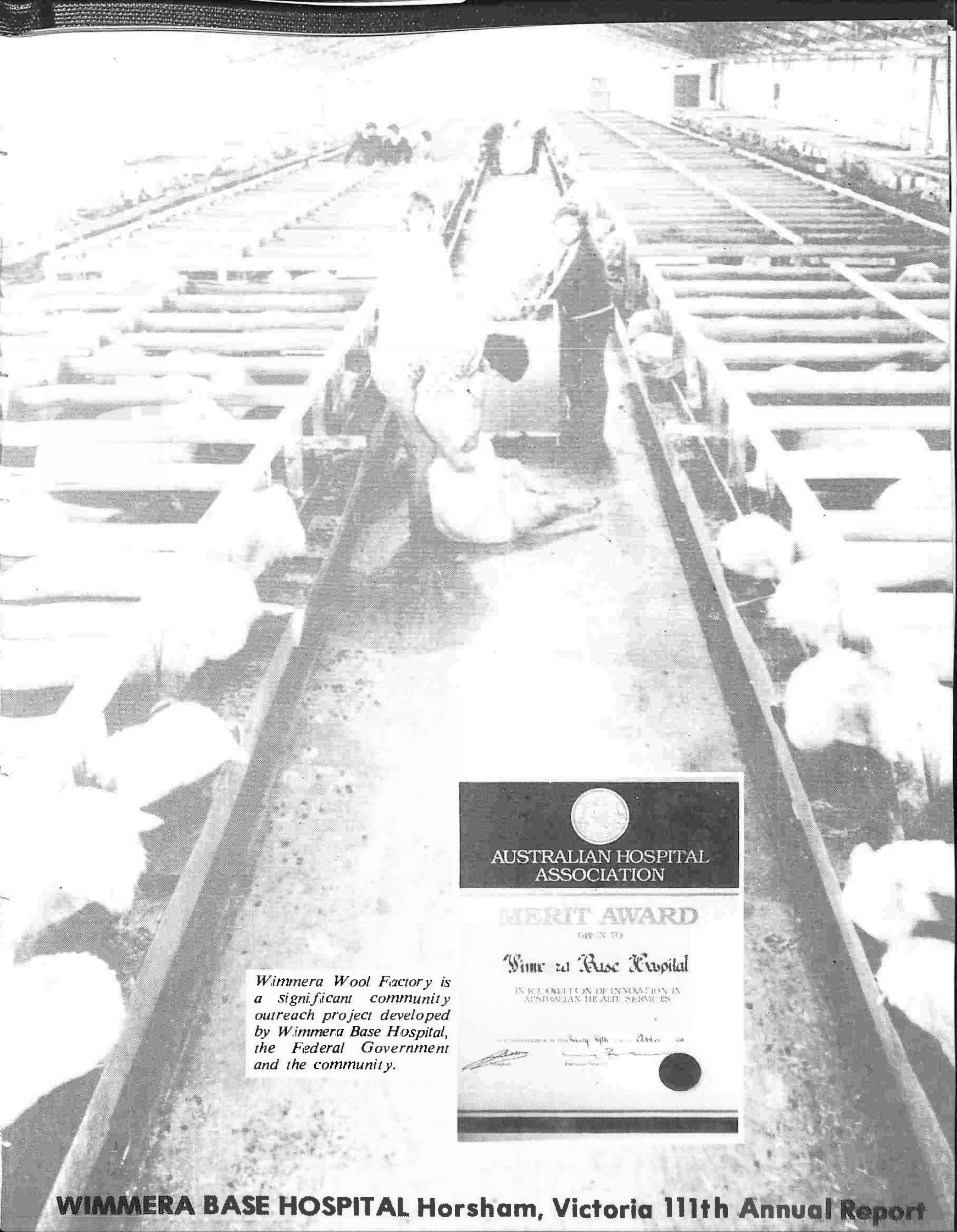
- * The implementation of regionalisation.
- * The completion of the hospital chapel.
- * The further planning of the 30-bed extension to the existing nursing home accommodation.
- * The further expansion of the healthy lifestyle project.
- * The further consideration of the need for psychiatric treatment facilities on the hospital site.
- * The ongoing provision of high quality health care services to the people of the Wimmera Community.



**WIMMERA
BASE
HOSPITAL**

111th Annual Report 1985

THE WIMMERA BASE HOSPITAL was established in 1874 as the Horsham Hospital and was incorporated by authority of the Hospitals and Charities Act (No. 5300) on 27th August, 1877. The name was changed in 1950 to Wimmera Base Hospital with the approval of the Hospitals and Charities Commission of Victoria.



Wimmera Wool Factory is a significant community outreach project developed by Wimmera Base Hospital, the Federal Government and the community.



OUR HOSPITAL'S OBJECTIVES

The registered objects of the Wimmera Base Hospital are:

- To afford relief, including maintenance and the treatment or cure of, or attention to, any disease or ailment, or any injury consequent on any accident, medical and/or surgical attendance, medicine, nursing assistance support or aid of any kind in any form to such persons as are entitled thereto under the Hospitals and Charities Act.
- To provide facilities for the treatment of private and hospital patients or either of them.
- To provide facilities for the carrying out of investigations into ailments, diseases, injuries or other matters affecting the human body.
- To provide facilities for the training of medical, para-medical, nurses and other hospital personnel as approved.

PRINCIPAL OFFICERS

Manager

Mr S. B. Capp, B. Comm. (Melb.),
M. Admin. (Mon.), A.H.A., AASA CPA

Medical Administrator

Dr. A. M. Wolff, M.B.B.S.,
Dip. R.A.C.O.G.

Director of Nursing

Mrs. G. M. Curran, Dip. Theatre Man., F.C.N.A.

Assistant Manager

Mr. R. N. Royle, B.A. (UNSW),
M.H.A. (UNSW), A.H.A. (Prov.)

Architects

Demaine Partnership Pty. Ltd.

Bankers

National Australia Bank

Auditors

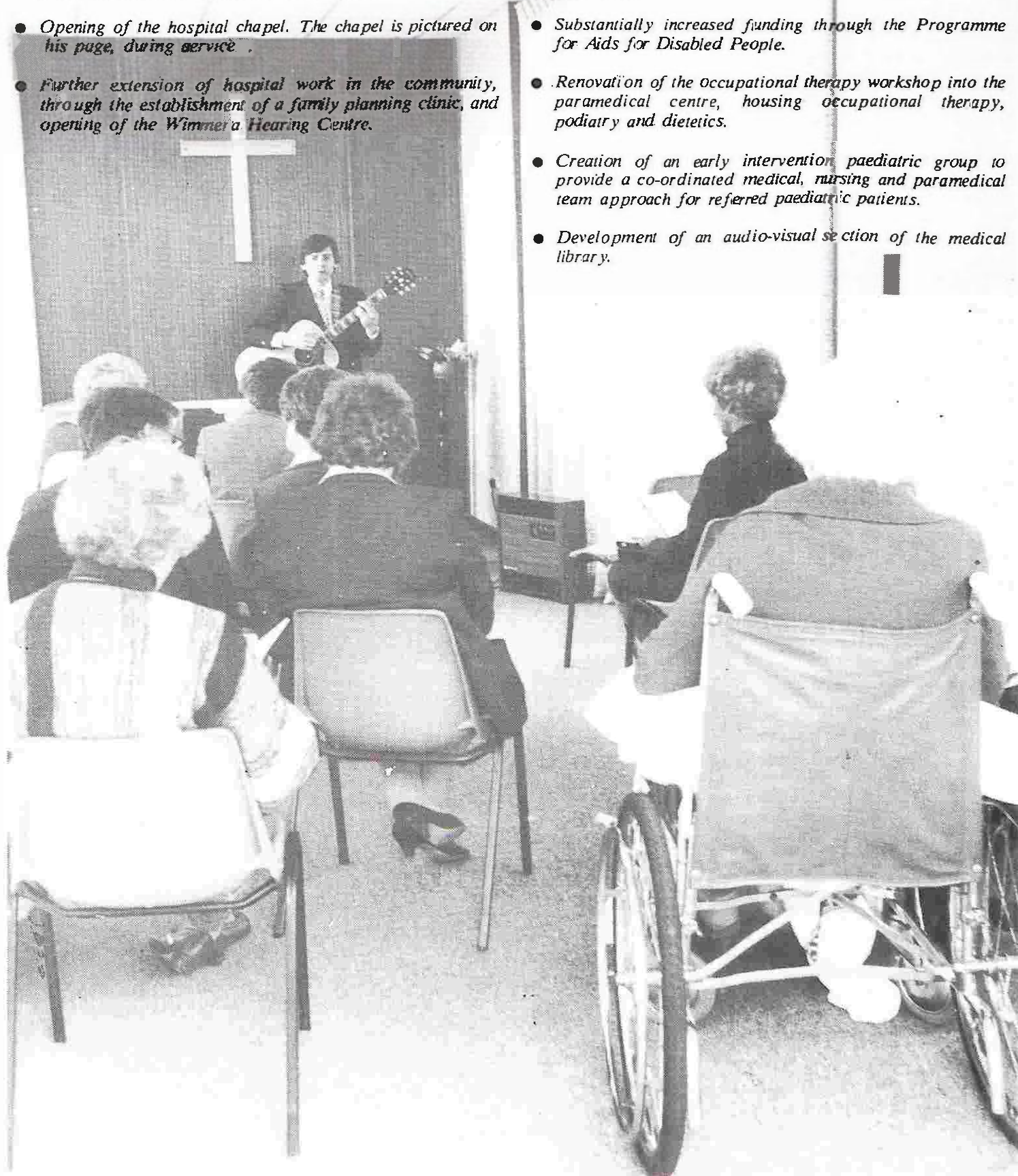
Green, Taylor, Ainsworth and Ryan

Solicitors

Power and Bennett

Highlights of the Year

- *Acceptance of a community outreach award in recognition of innovation in Australian health services.*
- *Opening of the hospital chapel. The chapel is pictured on his page, during service .*
- *Further extension of hospital work in the community, through the establishment of a family planning clinic, and opening of the Wimmera Hearing Centre.*
- *Attendance by charge nurses at a creative management workshop.*
- *Substantially increased funding through the Programme for Aids for Disabled People.*
- *Renovation of the occupational therapy workshop into the paramedical centre, housing occupational therapy, podiatry and dietetics.*
- *Creation of an early intervention paediatric group to provide a co-ordinated medical, nursing and paramedical team approach for referred paediatric patients.*
- *Development of an audio-visual section of the medical library.*



Your Board Reports to its Community

Industrial unrest, budget constraints, waiting lists and nursing shortages have ensured that hospital issues remain prominent in the public arena. There is scarcely a week goes by without the daily press bringing to our notice yet another crisis in our health system.

We in the Wimmera should consider ourselves very fortunate to have the hospital system which is provided for us. The problems mentioned are generally not in the same order of magnitude in the Wimmera as in other parts of the state, particularly in Melbourne. We have a generous supply of hospitals and hospital beds with professionals to provide a service which is second to none. At Wimmera Base Hospital we provide a range of services which enables us to cater for most of the health needs of our community. We have a caring and professional staff which, despite the pressures placed upon it, have responded extremely well to continue the high quality of care for which we have developed a fine reputation. The atmosphere within the hospital and the goodwill which has been evident has meant that all difficulties have been overcome. This in itself gives cause for optimism that the maladies of the public hospital system can be cured to the satisfaction of the majority. Given the goodwill of the public and all those who provide the service, the challenges can be met and overcome. Our health system is too precious and fundamental for us to do otherwise.

The Board of Management, as the governing body of the hospital, has a responsibility to ensure that the hospital's objectives are met and that the services provided are maintained, and expanded to meet the changing needs of the Community. The board is conscious of the need to look beyond the hospital's physical boundaries to provide these services and has devoted resources to developing a comprehensive community outreach programme. One of the projects to which much support has been given is the Wimmera Wool Factory. It was very rewarding to be granted a national award for our work in establishing the Wimmera Wool Factory. The Community Outreach award was granted by the Australian Hospital Association for innovation in health services. However, this is but one of a number of services designed to assist those who have a need. We hope that in the course of reading this report other services will become obvious to you.

BOARD MEMBERSHIP

The membership of the board was changed in 1984 when Ms Marion Matthews was appointed to replace Mrs Ann Dickson. Although Mrs Dickson had only a brief stay on the board, she displayed a very caring approach to her responsibilities for



The hospital's manager, Mr Stan Capp, seated, discusses hospital affairs with the president, Mr Reece Burgess.

which the board expresses its appreciation. Members re-appointed in 1984 for a further three years were Messrs Graeme Lind, David McFarlane and Ron Shepherd.

Previous annual reports have referred to the need for improved facilities for patients and staff in our general ward areas. This report will be no different because these deficiencies remain one of the hospital's greatest weaknesses.

Successive governments have failed to recognise that a minimum level of facilities must be provided to meet the expectations of the community. Small, noisy and inefficient wards not only make the hospital expensive to operate, but are the major detraction from an otherwise excellent service.

The formal announcement of the McClelland Report implementation continues to be deferred and this report, heralded as the salvation of

capital works planning, is obviously highly sensitive with undoubted political implications for the government. It is clear that many of the initiatives of Mr McClelland's first report have indeed been commenced and a more structured and comprehensive capital works programme has been implemented through the state budget. However, the areas of the report with significance to this hospital remain undisclosed and we await the release of information with interest. In particular, we seek an upgrading of all ward facilities and the construction of a new kitchen complex. You may be assured that the board will continue to press strongly for these facilities which have potential savings in operating costs and very real benefits in terms of patient care.

One project carried out during the year has been the establishment of a hospital chapel. The absence of a quiet area for prayer, meditation and worship has been a cause for concern for several years and it was pleasing to be able to utilise the original entrance to the hospital for this purpose. When our support group, Barkuma, went into recess, it was suggested that the group's funds could go towards a hospital chapel, and this donation substantially met the building costs.

Other major projects opened during the year were the Wimmera Hearing Centre and our family planning clinic. Both facilities provide much needed service to the people of the Wimmera and it is encouraging to see how well they are being utilised.

HOSPITAL ACTIVITY

Hospital activity has reduced in 1984-85 with an average of 63 per cent of acute beds being occupied. This figure is somewhat misleading because, included in the total acute beds are specially designated beds for intensive care, obstetrics and children's units. When these specialised areas are excluded, our occupancy figures increase to over 80 per cent. The key to better utilisation is to create more flexibility in our ward design, and positive steps are being taken in this direction.

Financial management of the hospital has maintained a high standard with expenditures being contained within budget targets. This has been due to a number of initiatives by hospital staff and in part to the lower occupancy. The board approved a new system of budgeting and department heads have assumed a far greater role in assessing departmental requirements. Consistent with this delegation is that responsibility for reaching budget targets clearly rests with the department head. Response from all areas of the hospital has been most positive.

Revenue raisings directly depend on the number of patients electing to be treated privately. Medicare has meant a significant swing away from private classification and only 25 per cent of patients admitted elect for this



The Wimmera's first family planning clinic opened in 1985. In the photograph, Mrs Sue Brown advises a client in confidence.

option. This compares to 47 per cent two years ago. Debt collection rates have improved markedly over the past year and the staff involved in this difficult role are to be commended.

The board has been advised that all nurse education is to be transferred to colleges of advanced education by 1993. This means that the last intake into hospital-based schools of nursing will be in 1990.

The transfer will occur progressively and some schools have already closed. The major implication for this hospital is that we will be unable to recruit students directly into our employ. This will result in people who wish to be registered nurses moving to Ballarat, Melbourne or other centres where there are colleges of advanced education. The family and social impact of this is well recognised by the board. Furthermore, the loss of the school in Horsham will increase the pressures of recruiting registered nurses who will be required to replace

the student nurse in the work situation. The board recognises the benefits which will flow from having qualified and trained staff through the college-based programmes. The content of these programmes constitutes a broadening of the education process and grants nurses a professional status which has not previously been afforded. The board is anxious to ensure that the perceived advantages of the new system be maximised and that, in the meantime, the transitional arrangements are satisfactorily funded to enable the ongoing service role of the hospital to be maintained.

In addition to hospitals, the Health Commission of Victoria has received its share of criticism. Under the leadership of the Minister of Health, Mr David White, the commission is undergoing significant change and a likely outcome is that it will be replaced by another form of organisation. Concurrent with this change, the regionalisation of health services is being implemented.

REGIONAL ORGANISATION

Our regional director, Ms Liz Kelly, has shown herself to be a person of considerable empathy and intellect. In her regional responsibilities Ms Kelly has frequently visited Horsham and other parts of the Wimmera and has demonstrated a keen awareness of the needs of all health services. The principle underlying the regional model is to bring the decision-making closer to the service provider. We have every confidence that this model can be successfully implemented and not be simply another level of bureaucracy. The board looks forward to working with Ms Kelly in the development of regionalisation throughout the Wimmera.

A senior appointment made by the board during the year was that of Mr Richard Royle to the position of assistant manager. Mr Royle has joined us from the Royal Children's Hospital, Melbourne, where he was involved in medical and general administration. The board is pleased to have been able to select such an excellent administrator as Mr Royle.

This report would be incomplete without reference to the industrial action taken by registered and student nurses in support of their decision not to undertake activities defined as being 'non nursing duties'. This dispute, which proceeded for several weeks, was based upon the belief that the time of the nurse was better occupied on direct patient care than on activities of a cleaning, catering, portering and clerical nature. Although the dispute did not affect this hospital as greatly as many others, it did require a call to the public for volunteer support. This call was unprecedented in recent times and the community response was excellent. The board would like to acknowledge the many hours of voluntary work given by members of our community to enable the hospital to continue normal activities.



A good hospital flourishes in good surroundings. In the foreground apprentice gardener Miss Clare Herson tends annuals, and head gardener Graham Jennings hoes weeds.

There are many in the hospital field who were sympathetic to the plight of the nurses. The increased pressures brought about by higher technology and more-sophisticated medical procedures has highlighted the need for a type of nurse different from that of years ago. It is disappointing that industrial action was required before this was recognised and rectified. Despite this, at a local level, we were pleased with the co-operation and attitude of our staff over what was a very difficult period.

The year was significant for three of our longer-serving employees. Mrs Gillian Curran, Mrs Margaret Jobe and Mr Barry McCourt have completed 25 years' service to the hospital, and we thank them for their dedication.

In concluding this report, we wish to thank the various organisations and individuals who support our hospital throughout the year. In particular special mention must be made of the Ladies Auxiliary which has once again supported the hospital very generously.

Mention should also be made of radio stations 3WV and 3WM, the Wimmera Mail-Times and BTV6 which have assisted us greatly in enabling us to get our message to the community.

To all members of staff, thank you for your continued support in making this hospital an effective and innovative health care facility.

Reece Burgess
President

Stan Capp
Manager

The Board of Management



Mr. Reece Burgess
President
P.H.C., M.P.S.
Businessman
Appointed 1971



Mr. Graeme Lind
Senior Vice-President
Manager - Sheltered
Workshop
Appointed 1975



Rev. Allan Thompson
Junior Vice-President
B.A., B.D.
Minister of Religion
Appointed 1983



Mr. Keith Lovett
Treasurer
F.A.S.A., F.I.M.A.,
L.M.A., J.P.
Retired
Appointed 1949



Dr. Rodney Abud
M.B.B.S., F.R.A.C.P.
Physician
Appointed 1970



Mr. Max Cuddihy
M.A. (Leeds),
L.A.C.S.T., T.P.T.C.,
M.A.A.S.H.
Primary school teacher
Appointed 1973



Mr. David McFarlane
Businessman
Appointed 1967



Ms. Marion Matthews
B.A.
Department of
Community Services
Appointed 1984



Dr. Mark O'Brien
M.B.B.S.,
F.R.A.C.G.P.
General practitioner
Appointed 1954



Mrs. Dolores Orchard
Home duties
Appointed 1984



Mr. Ron Shepherd
J.P.
Businessman
Appointed 1950



Mr. Euan Thompson
B. Jur., L.L.B.
Solicitor
Appointed 1983

Medical Division

The medical division has been involved in a number of activities over the past year, many of which require a comment.

In an attempt to provide high quality and immediate medical treatment, the division has been actively involved in discussions to enable an updated internal-external beeper communication system to be set up at the hospital. It is hoped this will be operational in the near future and will provide improved accessibility of on-call medical staff.

Following a number of disasters within Victoria, the Health Commission has decided that each region should have a regional medical Displan. This hospital is actively involved in creating such a plan for the region. Hopefully this will be finalised in the near future. The plan will be integrated with the hospital's disaster plan.

Our ophthalmological service is being provided in Ballarat and Melbourne as a result of the resignation of our visiting ophthalmologist, Dr David Kaufman. It has been recognised for a long time that a full-time ophthalmologist is required in Horsham to service the Wimmera. A very detailed submission has been sent to the Health Commission requesting funding for such a position. A decision is expected shortly.

An integral part of the delivery of emergency health care in the region is provided by the ambulance service. After discussions with the service it has been decided to set up a training Programme in the hospital theatre under the direction of Dr Rex Bennett, to train ambulance officers in airway management and cardiac resuscitation. This programme has just recently begun and it is hoped that it will be the forerunner of a long and successful programme.

Another area in which there is a very significant role to be played, is that of regional geriatrician. The position has been unfilled since the retirement of Dr Max Griffith, and it is hoped for a part-time appointment in the near future, possibly a full-time appointment will be made at a later date.

This year marked the establishment of a new service provided on the hospital site with the introduction of a family planning clinic. Funding was obtained from the Health Commission for the clinic, which has provided a very useful role, especially with family planning education.

Submissions have also been made to the Health Commission for the formation of a health promotion unit. It is felt that this should follow the success of the healthy lifestyle programme held two years ago. It is hoped that approval from the commission will be received shortly.

Paramedical, medical and nursing staff have combined as a co-ordinated team, reviewing hospital inpatients and particular community groups. The team conducts fortnightly geriatric



Dr Alan Wolff, Medical Administrator.

assessment meetings and weekly rehabilitation meetings, reviewing all long-term patients and inpatients undergoing rehabilitation. Paediatric patients referred from within the region are discussed weekly by the team in the newly created early intervention paediatric group.

A number of smaller programmes have been begun in the hospital, and warrant brief mention. These include the creation of an E.C.G. service, a central ambulance booking system, and a thirteen-week intern teaching programme, begun with the assistance of some members of the medical staff group on Wednesday afternoons.

An on-going clinical review programme has been set up under the direction of the clinical review committee. The first clinical review meeting was a review of obstetric services, held in March this year. Further reviews of various other areas in the hospital are planned for later in the year.

In addition, Dr Jo Horwood has been appointed area co-ordinator for the family medicine programme in this region and has started general practitioner postgraduate education sessions on Thursdays throughout the year. It is hoped that next year this programme will be expanded to include a number of seminars with visiting speakers from Melbourne.

Unfortunately in February of this year the hospital received the resignation of Mr David Brownstein, our regional audiologist. David had the very difficult task of starting this department from scratch, requiring a large amount of work and organisation that has already begun to bear fruit. We thank David for the first-class service he provided and wish him well in Melbourne. A replacement audiologist has been difficult to find. However Mr John Ho from New Zealand will be taking up the position in September. We wish to thank the Health Commission for providing a temporary service while the position was unfilled.

This year saw the setting up of the accident and emergency department committee, to provide a very active review of the department's current activities as well as planning development. This area, as well as the intensive care unit have come under very close scrutiny this year from the Critical Care Services Review Committee which has been established by the Minister of Health. This committee believed that a number of areas such as patient capacity, equipment and staffing will need extra resources. Further details will be available later this year.

With the rationalisation of hospital meetings, a number of medical meetings such as the medical records review committee and the pharmaceutical advisory committee are now meeting on a regular basis as recommended in the accreditation survey.

Most recommendations made by the last accreditation survey have been reviewed by the relevant committees, and in most cases appropriate action has been taken.

ACTIVE DEPARTMENTS

Within departments in the division, activity levels have been very high. The dietetic department has moved to new premises in the paramedical building, along with occupational therapy and podiatry. The improved facility has resulted in a better work environment for staff and patients. In addition, the provision of a receptionist has allowed more effective use of patient and administration time. The service to patients continues to expand with full utilization of the regional service provided one day a week. In Warracknabeal it has been extended to include support for the Woodbine Centre. In addition the department has been involved in establishing a weight control programme at the aboriginal co-operative.

It was with regret that the resignation of receptionist Aileen Hower from the dental clinic was received. Aileen has now moved to live in Echuca after a 17-year association with Wimmera Base Hospital, and her efficiency and enthusiasm in the clinic are greatly missed. Also during the year Zane Bell graduated as an advanced dental technician, and Jeff Umbers completed his training as a dental technician, graduating in first place. He was awarded the Bailem Award by the Prosthetic Laboratory Association. It is given to the top apprentice in his field. Jeff was also nominated as the Victorian Apprentice of the Year, and the selection panel commended him favourably. As part of the up-dating programme in the dental clinic, a new dental chair has been placed in the second surgery.

New developments in the medical library this year include installation of a photocopier and the gradual accumulation of audio-visual material. Some 380 new books have been added to the library catalogue this year. Many of them are held in various hospital wards and departments to ensure easier access for staff. This means the library shelf space remains adequate for the present.

In addition to organising the distribution and processing of books, journals and photo-copying material, borrowing from other libraries and the lending of our videos is increasing, and this is expected to continue as our holdings grow.

The past financial year has been an extremely active one for the medical records department. A review of the completeness of medical records has been carried out, as well as a review of paramedical department records. The department has continued to supervise medical record and associated information and education in the regional hospitals. Records are being microfilmed since receiving approval from the Public Records Office to destroy pre-1975 histories. A programme to streamline and review all forms used in the medical record department has been undertaken. As well, there has been increased involvement in statistical reconciliation due to Medicare information requirements.

SPEECH PATHOLOGY

The speech pathology department has been involved in large scale screening and subsequent management of pre-school children's speech and language. As well, there have been expanded health promotion activities including lectures to service clubs, professional groups and the public, with items in the newspaper and on radio. Renovations and extensions will allow increasing clinical work to be undertaken at 75 Baillie Street, and it is hoped that these renovations will be completed this year. The department has also established links with the South Australian Institute of Technology and has become a centre for speech pathology student training.

During the year Stephen Hill has carried out research and publication, including presentation of a paper at the 1985 annual conference of the Australian Association of Speech and Hearing. Additionally there has been increased frequency and size of regional fluency programmes, significantly reducing the three-year waiting list.

The past twelve months have seen a number of changes in the occupational therapy department. The building has been transformed into a paramedical centre, with half the building continuing to house the occupational therapy woodwork and general activities area, and the other half being converted into offices, treatment rooms and a waiting area for the three departments — occupational therapy, podiatry and dietetics.

The employment of a receptionist has greatly facilitated the working of the paramedical centre. Several staff changes have also occurred in the past year, during which the department has maintained its services to inpatients, outpatients, domiciliary and extended care patients. With the achievement of a full quota of three qualified occupational therapists in January 1985, after many months with only one or two therapists, it has been possible to develop a paediatric service, and to increase input into the geriatric unit, Sir Robert Menzies Nursing Home, and the regional centres covered by Wimmera Base Hospital. A service has also been provided to Nhill and Kaniva while the Nhill Hospital was without an occupational therapist. The two areas of greatest growth during the past twelve months have been the paediatric and domiciliary services.

Development of occupational therapy services for children has come about due to the specific interest of one of the therapists and a move within the Wimmera to integrate all paediatric services through the Paediatric Services Review Committee.

The boom in local and regional domiciliary services has been due to the Federal Government making available substantial funding for aids and equipment through its Programme of Aids for Disabled Persons. This has involved the occupational therapists in an increasing number of home assessments and in arranging for the supply of hand rails, bath and shower modifications, commode chairs, manual and electric wheel chairs. These aids are free of charge through the PADP scheme to assist in maintaining disabled people of all ages in their own homes.

A major equipment change in the pathology department has been the recent purchase of a Cobas Fara random access analyser for biochemistry. It is now handling the bulk of routine chemistry work as well as programming emergency work. With the first full year of Medicare the total workload from the region has increased by 10 per cent, following a fairly steady level for the past two years.

The ICL computer has been extended to cover the store accounting as well as the laundry. The first stage of joining the pharmacy to the system is under way, and during August and September the long-awaited patient management system should be installed for evaluation. The year has seen a steady stream of visits to observe the computer functions both within and without the laboratory and the various machine interfaces which have been established.

During the past year pharmacy services have been maintained, with a slight decrease in items issued at the Wimmera Base Hospital and a 10 per cent increase in items issued to regional hospitals. A total 126,709 items has been issued.

The department was able to complete an imprest system in the accident and emergency department during the year, as well as undertaking surveys to monitor drug usage in the areas of analgesics, laxatives and antibiotics. The hospital was selected by the Post-Graduate Medical Foundation to carry out a survey in surgical antibiotic prophylaxis.

During the year, a review of all imprest systems was undertaken, and there was an updating of the prescribers guide. In addition, all ward areas were issued with copies of the antibiotic guidelines. The year also marked the introduction of plastic intravenous containers and on-going drug utilisation surveys, with a subsequent reduction in the number of superseded drugs held in stock.

A large amount of groundwork has been carried out to enable further computerisation of pharmacy operations. Planning is also well in hand to extend the pharmacy to allow the introduction of a cytotoxic and intravenous additive cabinet and also to provide urgently needed space to ensure an efficient pharmacy service.

There have been several staff changes in the physiotherapy department. The physiotherapy outpatient department is now staffed permanently by an experienced physiotherapist instead of being part of the general rotation. In addition, two staff exchanges of three months duration have taken place between the Alfred Hospital and Wimmera Base Hospital physiotherapy staff. This has been very successful, providing Alfred Hospital staff with interesting and varied country experience and Wimmera Base Hospital staff with specialist unit experience.

EDUCATION

In the area of staff education, two all-day seminars have been run for Wimmera physiotherapists, visiting medical officers and state registered nurses. One was on transcutaneous electrical nerve stimulation, and the other was giving a cardio-thoracic update.

Back care, posture and sports injury prevention have been the department's major emphasis in community and staff education this year. This has been carried out via a stand at the

Wimmera Machinery Field Days, visits to a number of grades at Horsham primary schools, a significant input into the Hospital's staff safety week, and talks held with sports trainers and coaches at Wimmera Sports Assembly evenings. With involvement with other paramedical staff, paediatric services in the region have increased with the commencement of a play group and one physiotherapist doing all long-term individual treatments one day per week.

A number of items of new equipment have been purchased. These include a Rotogym and ankle exerciser for resistant exercise, a Vitalograph with printer for testing lung function, and a video camera and Porta-pak for recording patient progress.

This department has also been involved with student teaching, with four third year physiotherapy students each having completed three-week placements at the Hospital. An extensive maintenance programme is under way within the department, with major repainting having just been carried out.

This year the podiatry department has moved on to bigger and better things. At the beginning of May the move was made to the newly-refurbished occupational therapy department with a larger, more-private room. This, plus the services of a receptionist, have made it possible for appointment times to change from every thirty minutes to every twenty minutes. Numbers have continued to increase over the past year, with the possibility of expansion of the regional service in the next twelve months.

During the year the Health Commission approved plans for the radiology department to re-equip its Ultrays room with a new Toshiba X-ray diagnostic unit at a cost of \$67,500. This unit provides an up to date casualty X-ray room. Radiation doses to patients will automatically be monitored and a tomographic facility is included.

In the past twelve months the social work department has changed its focus from a predominantly hospital-based service to a community health approach. The workers service the hospital inpatients as a first priority, but also spend their time in the community on health, welfare and social work issues. Some of these include a commitment to a child maltreatment interest group, Community House, Wimmera Volunteers, family planning, stillbirths and neonatal death support, and emergency accommodation committee.

Within the hospital a good rapport has been established with ward staff, which has in turn increased the number of people who are now utilising the social work service. Overall, the department aims to extend casework responsibilities to a community health and preventative social work concept. The outcome of this aim is to ultimately provide the users of the service with a much wider scope of options and resources from which to choose.

There have been a number of changes to the visiting medical staff during the year. Joining the staff has been Dr Yvonne Cymbalist, who previously worked at the hospital as a resident medical officer. She has already taken an active role in the family planning clinic and in nursing and resident medical officer education.

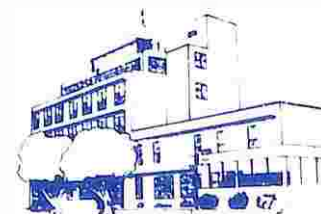
A number of resignations were received with regret during the year; Dr David Kaufman, who provided a monthly ophthalmology visiting service for almost seven years, did not apply for re-appointment. Dr Kaufman believes that the region requires a full-time ophthalmologist. We thank him for the enormous work load that he has carried during this time and his services are already sorely missed. As mentioned earlier, discussions are under way with the Health Commission to possibly obtain a full-time replacement.

Our two orthopaedic surgeons, Mr Andrew McQueen and Mr David Bracy, also did not wish to renew their appointment, with travelling time being a large problem for them. It is well recognised that if Horsham had a daily plane service that a number of these specialists could be enticed back to the hospital. This matter is currently under investigation.

On a brighter note, the hospital has received funding from the Health Commission for an extra senior resident who will undertake training in anaesthetics at the hospital, and also provide support for the intern medical staff, starting in August 1985. The appointment of such a doctor will allow for two resident medical officers to be rostered on a twenty-four hour, seven-day week service for the accident and emergency department and the hospital, and will obviously further raise the already high standard of medical care that is given to all patients.

To all staff in the hospital, I would like to extend my thanks for their assistance to all the areas within the medical division. There is a very high level of co-operation within the hospital which allows projects benefiting patients and people within the community to be undertaken. I am sure that this working environment and attitude will continue, and allow the medical division to be able to expand its already wide range of activities.

Dr. Alan Wolff
Medical Administrator



MEDICAL STAFF

Medical Administrator

A. M. Wolff, M.B., B.S., Dip., R.A.C.O.G.

Director of Pathology

G. Humphries, M.A., B.M., Ch.B., D.T.M. and H.,
D.R.C. Path., M.R.C. Path

Director of Radiology

L. Wong Shee, M.B., Ch.B., F.R.A.C.R.

Director of Anaesthesia and Intensive Care

R. C. Bennett, M.B., B.S., D.A.(Lond.),
M.F.A.R.C.S.

VISITING MEDICAL STAFF

Consulting Staff

R. A. M. Taylor, M.B., B.S.,(Lond.), L.M.S.S.A.
M. M. O'Brien, M.B., B.S., F.R.A.C.G.P.

Consulting Pathologist

G. B. Leyton, M.A., M.D., D.C.P., F.R.C.Path.,
F.R.C.P.A.

Consulting Surgeon

E. G. Brownstein, M.B., Ch.B., F.R.C.S.(Edin.),
F.R.A.C.S.

Obstetrician and Gynaecologist

E. T. Miller, M.B., B.S., F.R.A.C.O.G.

Ophthalmologist

D. Kaufman, M.B., B.S., F.R.A.C.S.
(resigned November, 1984)

Oral Surgeon

P. Bowker, M.D.Sc., F.D.S.R.C.S.(Eng.), B.D.Sc.

Orthopaedic Surgeon

A. McQueen, M.B.B.S., F.R.A.C.S.
(resigned November, 1984)
D. Bracey, M.B.B.S., F.R.A.C.S.
(resigned November, 1984)

Paediatrician

M. Brown, M.B., B.S., D.C.H., F.R.A.C.P.

Physician

R. E. Abud, M.B., B.S., F.R.A.C.P.

Psychiatrist

I. V. Jackson, M.B., B.S., D.P.M., M.R.C.Psch.
M.R.A.N.Z.C.P.

Otolaryngologist

R. L. Thomas, M.B., B.S., F.R.A.C.S.,
F.R.C.S.(Eng.)

Surgeon

G. S. R. Kitchen, M.B., B.S., F.R.A.C.S.

Vascular Surgeon

I. A. Ferguson, M.B., B.S., F.R.A.C.S.,
F.R.C.S.(Lond.)

Medical Officers

C. H. Foord, M.B., B.S., Dip.Obst., R.C.O.G.
P. P. Haslau, M.B., B.S., F.R.A.C.G.P.
A. Horwood, M.B., B.S., Dip.Obst., R.A.C.O.G.
G. M. Jenkinson, M.B., B.S.
J. Jenkinson, M.B., B.S.
D. Leembruggen, M.B., B.S., F.R.A.C.G.P.
R. M. Lloyd, M.B., B.S., Dip. R.A.C.O.G.
A. McBain, M.B., B.S.
G. A. O'Brien, M.B., B.S., Dip.Obst., R.C.O.G.
J. R. Williams, M.B., B.S., D.C.H., D.A.,
D.R.C.O.G.
Y. P. Cymbalist, M.B., B.S., Dip.
R.A.C.O.G. (from November,
1984)

Dental Surgeons

B. Bourke, B.D.Sc., L.D.S.
D. Lye, B.D.Sc., L.D.S.
J. McCombe, B.D.Sc., L.D.S.
M. Monk, B.D.S.(Lond.), L.D.S.
C. W. Pearson, B.D.Sc., L.D.S.
E. Wollff, M.D.Sc., L.D.S., F.R.A.C.D.S.

PARAMEDICAL STAFF

Chief Pharmacist

Mr. I. Gerlach, Ph.C., M.P.S., F.S.H.P.

Chief Radiographer

Mr. H. Kortman, M.I.R., A.R.M.I.T.

Chief Physiotherapist

Mrs. J. Ellis, B.App.Sc. (Phty), M.A.P.A.

Chief Speech Pathologist

Mr. S. D. Hill, B.App.Sc. (Sp.Path'y), M.A.A.S.H.

Chief Medical Records Administrator

Mrs. C. Dooling, Assoc. Dip. (Medical Records
Administration)

Medical Librarian

Mrs. J. Sheldon, B.A.

Chief Occupational Therapist

Mrs. J. Jarred, B.App.Sc. (O.T.), M.V.A.O.T.

Dietitian

Mrs. P. Marshman, B.Sc. (Monash), Grad.
Dip. Diet.

Podiatrist

Miss C. Tynan, Dip.App.Sc. (Podiatry)

Audiologist

Mr. D. Brownstein, B.Sc., Dip. Aud.
(resigned February, 1985)

Laboratory Manager

Mr. R. Starr, B.Sc., M.A.A.C.B.

Nursing Division



The Director of Nursing, Mrs Gillian Curran.

The year 1984-85 has been eventful for the nursing division in many ways.

Charge nurses have been mindful of the need for expertise in modern management techniques in order to co-ordinate the many and varied services and activities taking place in their wards and departments. The requirement that nurses must be responsible for budgeting for the financial resources expected to be expended on equipment and supplies has added another dimension to the nurses' role. The Board of Management has given support to the charge nurses to enable them to attend seminars in Melbourne and Horsham, where they have shared and gained knowledge with their counterparts from all over Victoria.

The hospital has experienced a decrease in daily bed occupancy but the activity level has been maintained by a shorter length of patient stay. Nursing staff have maintained their commitment to the provision of high standards of care and their continued interest in the training of students of nursing. Our students

continue to achieve excellent results in the nurse training programme with the following nurses graduating at our annual graduation ceremony, on March 22, 1985:

Janette Leanne Allsop
Elizabeth Margaret Cameron
Karren Lynne Clayton
Megan Cooper
Patricia Mary Dodson
Edna Elizabeth Downes
Susan Maree Edgerton
Sharon Lynette Fry
Janette Helen Fuller
Shirley Anne Johnston
Beverley Anne McCrae
Rhonda Kaye McKenzie
Malcolm John Mibus
Leanne Elizabeth Miller
Susanne Margaret Pearce
Gabrielle Mary Pekin
Sharron Gaynor Swaby
Alison Dulcie Tod
Karen Leanne Van Der Pols
Angela Helen Walker

Miss Imas Jurk, relieving manager for Wimmera Hospitals and also a registered nurse, was guest speaker.

The T. F. Ryan Nursing Prize was awarded to Angela Walker, the Wimmera Base Hospital Past Trainees Prize was awarded to Patricia Dodson, and the award for academic excellence was awarded to Edna Downes.

New students to commence training this year were:

Group 884

Susan Gaye Barnes
Julie Maree Culhane
Lisa Christine Dart
Leanne Joy Flavel
Maree Gayle Marshman
Ivor Thomas McLean
Susan Mary O'Day
Amanda-Jane Roberts
Janine Elizabeth Rodgers
Jan Catherine Smith
Clare Swaby
Lisa-Jane Woodman

Group 285

Sonya Marita Barbary
Nicole Rosaline Barr
Anne Maree Boland
Graeme Charles Cox
Christina Joy Lewer
Margaret Anne McDonald
Donna Maree Mulraney
Bruce William Rentsch
Claire Catherine Sharry
Roxanne Joy Tucker



Anatomy in the School of Nursing. Students work with Skeleton George and a manikin. From left: Student nurse Helen Morgan, Sueanne Kavanagh, Tony Tuohey, senior nurse teacher Mrs Pauline Keyte, student Kim Mitchell.

The federal and state governments have announced support for the transfer of nurse training to colleges of advanced education and this will proceed gradually with no students entering hospital-based courses after 1990. This is of great concern to our hospital as there will be no local training facility for Wimmera students.

Many registered nurses continue to undertake post-graduate studies as off-campus students. Mrs Pauline Keyte and Mrs Lorraine Mentha have graduated from Armidale College of Advanced Education with Diploma of Teaching (Nursing). Mrs Margery Pannan and Mrs Beverley Taylor successfully completed their Graduate Diploma of Educational Administration at Hawthorn Institute of Advanced Education, and Mrs Jillianne Waixel and Mrs Janis Scarlett have successfully completed the Diploma of Health Administration (Nursing Strand) at Mitchell College of Advanced Education.

Our congratulations and special thanks go to Mrs Margaret Jobe who has completed twenty-five years service to Wimmera Base Hospital. In this time she has worked in almost all the departments of the hospital, on both day and night duty, but has spent the past ten years as charge nurse on ward 2, the main surgical ward. Margaret has developed and maintained an excellent surgical nursing service for the patients in her ward. She has taken a personal interest in each student nurse and the results of her training and support are seen in the excellent results our nurses achieve. Thank you Margaret, we look forward to your continued contribution to our hospital.

Miss Jocelyn Lade, from the Alfred Hospital, was appointed to the position of assistant director of nursing in September.

Mrs Pamela Muszkietta has been appointed to the School of Nursing as clinical teacher, Mrs Delwyn Johnson has also joined the school staff and Miss Nanette Moran has been appointed to the position of charge nurse of the midwifery ward.

Mrs Anne Raven resigned from her position as night nurse in charge in order to take up the position as director of nursing at the Coleraine and District Hospital.

We experienced the trauma of the first industrial action ever undertaken by nurses in this hospital. It has become apparent to nurses that because they form such a large part of the hospital staff, their requests for more resources to assist in dealing with the extra demands brought about by new technology and increased complexity of medical treatment, are not well understood and are difficult to meet. The action was not undertaken without a great deal of soul searching by all staff members and it was ensured that patient care and safety was never at any time in jeopardy. We thank those people who came to assist in the hospital during this troubled time. The nursing staff are very appreciative of the support staff who have relieved them of duties unrelated to patient care, allowing them to devote more time to their patients. The exercise has demonstrated a sense of great co-operation between staff of all the departments involved.

The year 1985 has been special for me too, as I have also completed twenty-five years service to Wimmera Base Hospital. I am proud to have been associated with the hospital and to have played a part in its development. May I take this opportunity to sincerely thank all those people who have supported and encouraged me over the years.

One of the highlights of my career was the challenge of introducing the district nursing service to Horsham in 1968. The service had very

small beginnings and it took several months for it to become accepted and established. This is in contrast to the present service which now has approximately 62 visits daily with a staff of 5.6 registered nurses providing a service from 8 am to 9 pm daily. The service is to be extended further to provide an on-call visiting service for patients with terminal illnesses who wish to remain in their own homes.

The hospital continues to receive support from the Ladies Auxiliary and many service clubs. This is becoming especially evident as we look towards a successful appeal to raise funds to build a new thirty-bed nursing home. We thank you all for your continued interest in the hospital.

I must thank nursing staff for their dedication and support throughout a most difficult year; and on their behalf I express appreciation to the Board of Management and the staff of all hospital departments for working together with us to provide a high standard of care for our patients.

G. M. Curran
Director of Nursing

NURSING STAFF

Director of Nursing

Mrs. G. M. Curran, Dip. Th. Man., F.C.N.A.

Deputy Director of Nursing

Mrs. J. I. Waixel, Assoc.Dip.H.Admin.

Assistant Directors of Nursing

Miss J. Lade, Dip.App.Sc.(N.Admin.)

Mrs. S. Wines

Supervisory Sisters

Mrs. J. Yarwood

Miss C. Lamenta

NURSE TRAINING SCHOOL

Principal Nurse Teacher

Mrs. M. Pannan, Assoc.Dip.N.Ed.,
 Grad.Dip.Ed.Admin.

Deputy Nurse Teacher

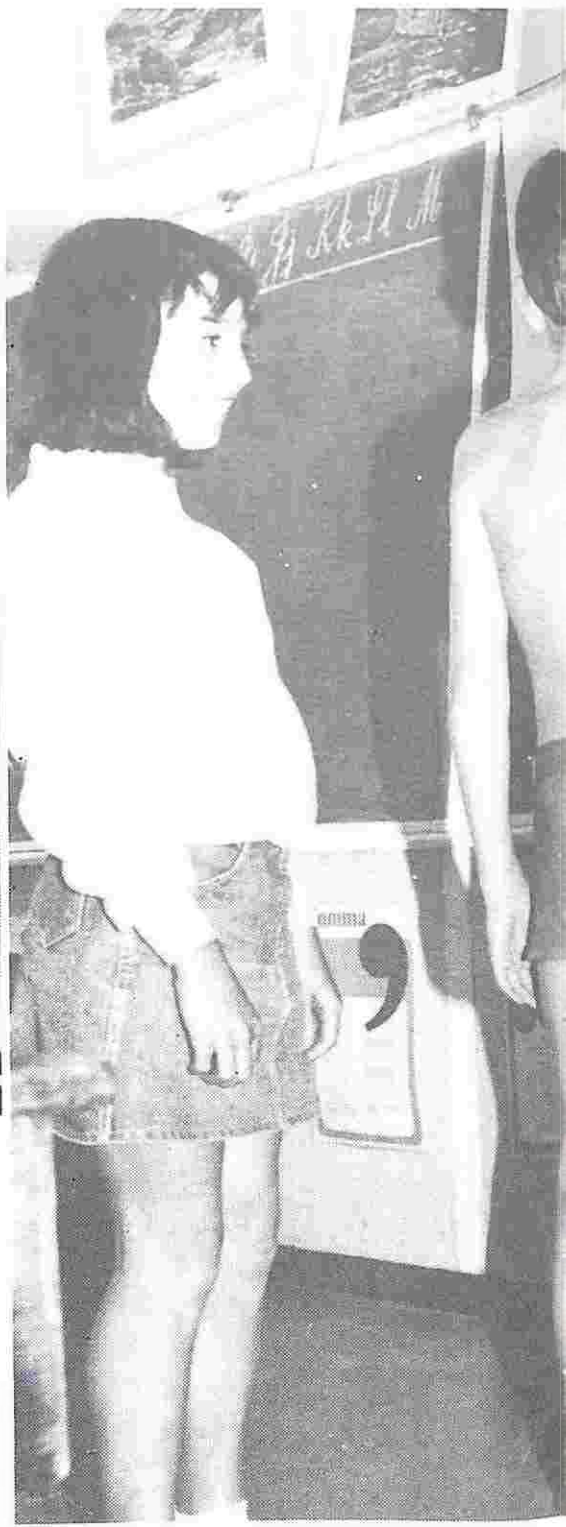
Mrs. B. Taylor, Assoc.Dip.N.Ed.,
 Grad.Dip.Ed.Admin.

The 1985 graduates: Top, from left, Megan Cooper, Shirley Johnson, Susanne Pearce, Karren Clayton, Rhonda McKenzie, Pat Dodson, Gay Pekin; centre, Karen Van Der Pols, Sharon Fry, Alison Tod, Malcolm Mibus, Leanne Miller, Elizabeth Cameron, Sharron Swaby; bottom, Angie Walker, Bev McCrae, Jan Allsop, Edna Downes, Sue Edgerton.





Reaching out. Mrs Pat James off on her rounds as a district nurse, reaching out to people in their homes.



Reaching out. Physiotherapist Miss Carol Horsham West Primary School shows the right time, good posture. Reaching out by preventing problems at a time, good posture.

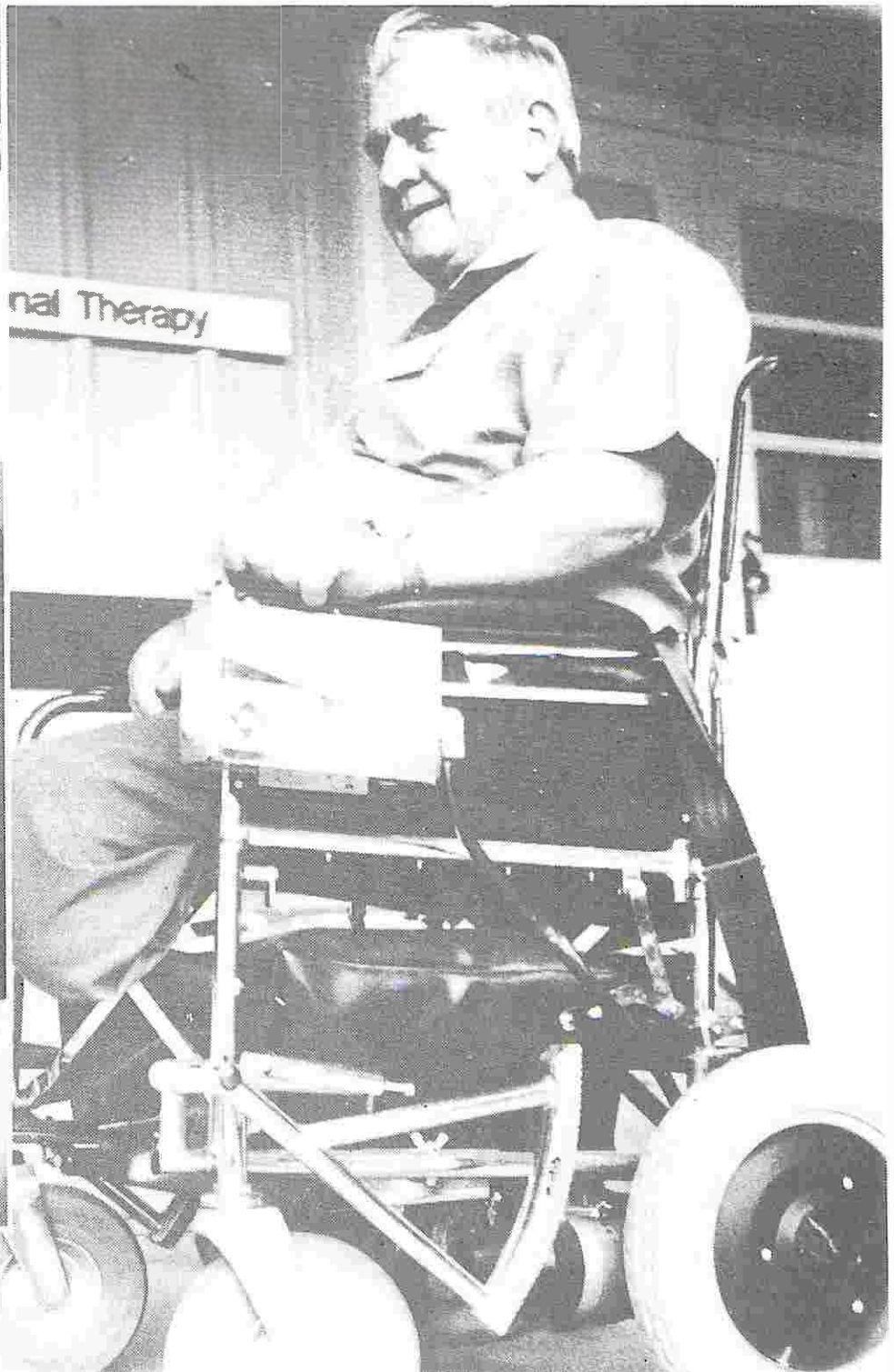


Three ways we reach out














Phyllis Phillips at
the way to stand,
the Kollmorgen.
early age; this

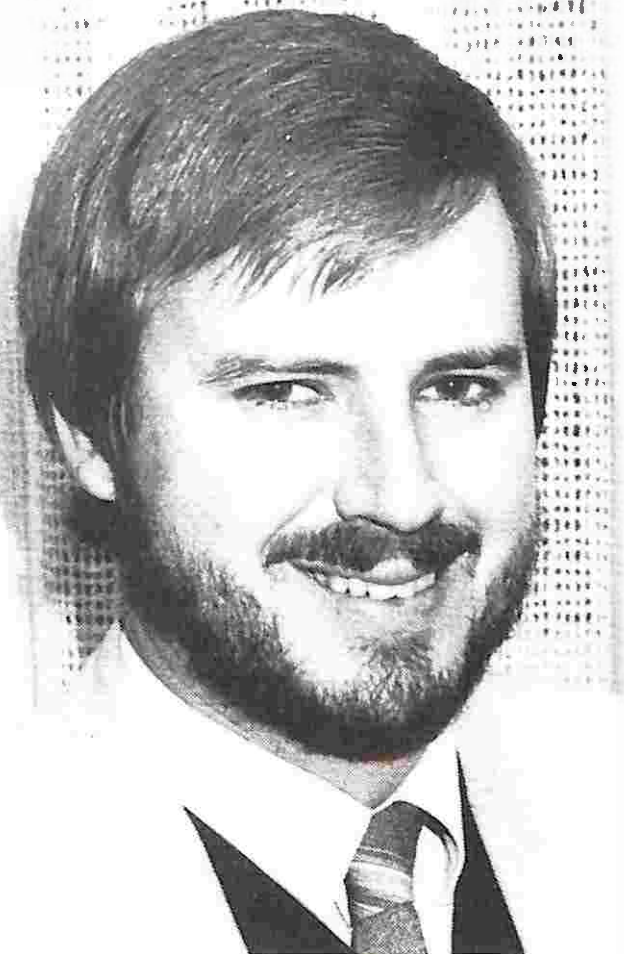
Reaching out. Mr Leo Heard with his \$4000 wheelchair, from the hospital's work with the Programme for Aids for Disabled People. Reaching out by helping people in their community.



Facts and Figures

| | 1984-85 | 1983-84 | 1982-83 |
|---|---------|---------|---------|
|  ADMISSIONS | 3,499 | 3,634 | 3,546 |
|  AVERAGE LENGTH OF STAY Days | 6.6 | 7 | 7.2 |
|  BIRTHS | 319 | 314 | 337 |
|  ACCIDENT AND EMERGENCY Attendances | 6,835 | 7,681 | 9,926 |
|  DISTRICT NURSING Visits | 21,145 | 20,132 | 19,901 |
|  DAY CENTRE Attendances | 5,593 | 6,319 | 5,750 |
|  PATHOLOGY Attendances | 21,664 | 20,609 | 21,999 |
|  X-RAY Examinations | 7,389 | 7,677 | 7,319 |
|  THEATRE OPERATIONS | 1,591 | 1,734 | 1,608 |
|  MEALS PREPARED | 208,988 | 245,851 | 244,953 |
|  PARAMEDICAL ATTENDANCES | | | |
| Occupational therapy treatments | 13,283 | 14,926 | 17,091 |
| Physiotherapy attendances | 3,920 | 3,751 | 3,973 |
| Podiatry attendances | 2,732 | 2,406 | 1,862 |
| Speech pathology attendances | 2,389 | 2,720 | 2,750 |
| Social work consultations | 2,209 | 2,832 | 2,721 |
| Audiology attendances | 804 | 475 | |
| Dental clinic attendances | 3,884 | 3,790 | 4,134 |
| Dietetics consultations | 3,715 | 2,906 | 1,955 |
| Pharmacy items supplied | 138,155 | 146,839 | 132,709 |

Administrative Division



The Assistant Manager, Mr Richard Royle.

The administrative services division functions to provide support services and administrative back-up to the staff of the hospital involved in direct patient care. The administrative back-up is provided through the finance department, which incorporates purchasing and supply functions, and the personnel department. The support services include the key areas of food services, engineering and general services. Laundry services are provided through the Wimmera Hospitals Group Linen Service.

The year has seen a number of senior staff changes. Mr John Airey took up his position as finance manager in July 1984 following the resignation of Mr Gary Mason. Mr Michael Toone commenced in May 1984 as the general services and laundry manager. In February 1985, Mr Stuart Schneider left on ten months' study leave to complete a Master of Health Planning course at the University of New South Wales. This led to a substantial re-organisation of existing staff, which has included Mr Paul

O'Connor taking over the safety officer role, as well as being the hospital's security and special projects officer. Mr Peter O'Beirne assumed responsibility for payroll and personnel recording, as well as administering one of the annexe hospitals, and Mr Philip O'Connor took over the responsibility of paymaster.

In October 1984 we welcomed Ms Imas Jurk who took up the position of regional relieving manager, vacated by Mr John Walker. This is a service designed for annual leave relief of the region's district hospital managers, and Ms Jurk has spent all but a few weeks relieving in a number of district hospitals.

The non-nursing duties dispute and a subsequent agreement to employ extra staff to cover those non-nursing duties saw a significant workload for a number of administrative departments, and my thanks go to all staff who assisted in ensuring the smooth running of the hospital at all times during the dispute.

The food services department continues to provide for the catering needs of patients and staff within a tightly restricted budget, and utilising kitchen facilities that have long been regarded as inadequate for the hospital's requirements. The McClelland Report into capital works recognised this as a high need area, and it is hoped that redevelopment can occur in the near future thus enabling a more efficient food service to operate.

We were all saddened at the sudden death of Mrs Marjory Hardingham who retired from the food services department in 1983 after completing thirty-nine years of service to the hospital. Mrs Hardingham was made a life-governor in 1979 for her dedication to the hospital.

During the year, the department employed Miss Rhonda Sampey as the first female apprentice chef at the hospital. Miss Sampey joins Mr Gavin Pavey and Mr Rohan Motton as the apprentice team of the food services department.

The department is involved in the upgrading of patient and staff menus, a process which is involving the entire department's staff to ensure the most effective result. Thanks must go to Mrs Barbara Peskett, assistant catering manager, for an excellent performance throughout the year.

The Engineering department continues to provide a high standard of maintenance to the hospital's buildings, equipment and grounds, as well as providing the hospital with steam and hot water from the boilers. The highlight of the year was the construction of a chapel incorporating the original main entrance to the hospital. This was undertaken using hospital engineering staff, and the success of the project has been reflected in its high degree of use.



Ironing in the laundry. The new hood is a cover over the rollers behind the staff. In the picture, from left, are: Mrs Rene Matthews, Mrs Heather Klemm, Mrs Joyce Schultz, Mrs Thelma Wrigley, Miss Jenny Balm and General Services Manager Mr Michael Toone.

During the year, Mr John Hudson, assistant engineer, resigned his position to return to England and we have been pleased to welcome Mr Peter Crammond into this position.

The general services department, responsible for cleaning, domestic and orderly duties throughout the hospital, has had a particularly busy year. The successful resolution of the non-nursing duties dispute resulted in additional staff being employed within the general services department, and my thanks are extended to Mr Michael Toone, general services manager, and Miss Kathy Flack, domestic services supervisor, for ensuring the successful integration of these staff into the hospital. Morale within the department remains high, which reflects good leadership shown by all those in supervisory positions within the department.

The group linen service, which services twenty-four health related institutions throughout the Wimmera region, continues to provide an excellent, vital service that is not as well recognised as some other hospital departments. The average length of service for the laundry's full-time staff has reached nearly eleven years, with no change of staff over the past twelve months. This stability of staff is one of the major reasons for the high level of team

work and good productivity from the laundry. During the year an ironer hood was purchased and fitted which, as well as assisting production, has made conditions for staff much more pleasant.

The hospital's personnel department is involved in staff selection, training and the processing of payroll for twelve health care organisations throughout the Wimmera. As the result of Mr Stuart Schneider's leave of absence, a number of changes were made within this area and it is pleasing to note that all staff associated with these changes have performed well in their new areas.

The finance department is responsible for the control of all financial activities at the hospital, as well as at the annexe and associated hospitals. This year has seen the department introduce full departmental involvement in the development of their own budgets, resulting in hospital staff developing a greater awareness of the cost of health care. The hospital completed the year with a pleasing financial result, expenditure being contained within budget targets.

A part of the finance department is the purchasing and supply department which is responsible for the purchase of all goods and materials needed for the day to day running of

the hospital and its annexed and associated institutions. Further development of a computerised stock control system has enabled the department's staff to maintain a firm control over an ever-increasing level of stock items required to keep the hospital operational.

The hospital also administers six other health care institutions in the Wimmera. Mr Bernie Waixel administers the Goroke Community Health Centre, Minyip and District Hospital, Murtoa Hospital and Rupanyup and District Hospital. Mr Peter O'Beirne administers the Jeparit Hospital, and Mr Ron Cox is administrator of the Kaniva and District Hospital. Each of these staff members also undertakes other functions within Wimmera Base Hospital. The year has seen an increase in activity for some of these smaller hospitals as the result of nursing homes being constructed, as in the case of Jeparit and Rupanyup, or officially opened as occurred at Kaniva.

I wish to thank all staff for contributing towards a successful year. The high level of co-operation which exists between all staff contributes to an excellent standard of care for members of the Wimmera region who utilise the services of the hospital.

Richard N. Royle
Assistant Manager

ADMINISTRATIVE STAFF

Assistant Manager

Mr. R. N. Royle, B.A.(UNSW), M.H.A.,
(UNSW), A.H.A.(Prov.)

Finance Manager

Mr. J.M. Airey, B.Bus., AASA CPA
M.I.A.A.

Administration Officer

Mr. R. S. Cox, A.F.C.I.A., M.I.H.C.

Administrative Officers

Mr. P. T. O'Connor

Mr. S. M. Schneider, B.Sc., Dip.Ed.,
B.Ed.(Admin.) (study leave from Feb, 1985)

Mr. B. N. Waixel

Mr. P. M. O'Beirne (from February 1985)

General Services Manager

Mr. M. J. Toone

Chief Engineer

Mr. T. R. Martin, M.I.H.E., M.A.I.R.A.H.

Regional Relieving Manager

Ms. I. H. Jurk, RN, RM, B.H.A.(UNSW), A.H.A.

Purchasing Officer

Mr. M. J. O'Connor, J.P.

Preparing for lunch. Mrs Mary Antonoff, food services supervisor, works at a stove. On the opposite side of the bench is chef Ken Reichelt. In the centre background is assistant catering manager Mrs Barbara Peskett.



NOTES TO AND FORMING PART OF THE ACCOUNTS

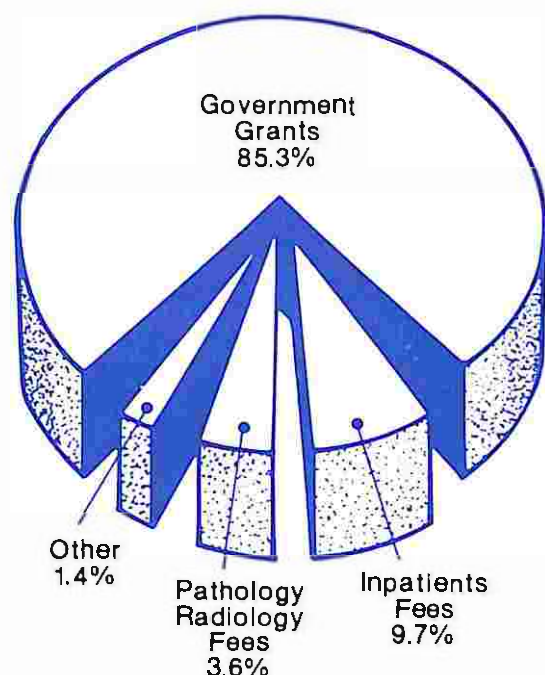
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|--|--------------------|-----------|----------------|--------|--------------------|-------|-----------------|--------|------|---------|------------|--------|----------------------|--------|--------------------------------|---------|--|--------------------|-----------------------|--|----------|---------|----------------------|-----------|-------------------------|--------|--|--------------------|--------------|---------|--------------------------------|---------|-----------|---------|------|---------|----------------|--------|----------------|-----|--|------------------|---------|---------|--------------------------|---------|------------------------|---------|--|--------------------|--|---------|---------|----------------------|---------|----------------------|--------|--------------|--------|-------------------|--------|--|------------------|---|---------|---------------------------------------|--------|---|---------|---|--|--------------------------|--------|----------------------------|--------|----------------------|---------|--|-----------------|
| <p>(1) Grants received were:</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Ordinary</td><td style="text-align: right;">9,245,800</td></tr> <tr><td>Collective buy</td><td style="text-align: right;">15,240</td></tr> <tr><td>Works and services</td><td style="text-align: right;">4,976</td></tr> <tr><td>Visiting nurses</td><td style="text-align: right;">48,122</td></tr> <tr><td>PADP</td><td style="text-align: right;">119,660</td></tr> <tr><td>Employment</td><td style="text-align: right;">77,125</td></tr> <tr><td>Home nursing subsidy</td><td style="text-align: right;">47,661</td></tr> <tr><td>Costs met by Health Commission</td><td style="text-align: right;">369,430</td></tr> <tr><td></td><td style="text-align: right;"><u>\$9,928,014</u></td></tr> </table> <p>(3) Nursing Home revenue</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Grants received were:</td><td></td></tr> <tr><td>Ordinary</td><td style="text-align: right;">293,500</td></tr> <tr><td>Department of Health</td><td style="text-align: right;">1,174,040</td></tr> <tr><td>Pharmaceutical benefits</td><td style="text-align: right;">29,536</td></tr> <tr><td></td><td style="text-align: right;"><u>\$1,497,076</u></td></tr> </table> <p>(5) Other expenses</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Depreciation</td><td style="text-align: right;">101,603</td></tr> <tr><td>Costs met by Health Commission</td><td style="text-align: right;">369,430</td></tr> <tr><td>Ambulance</td><td style="text-align: right;">131,191</td></tr> <tr><td>PADP</td><td style="text-align: right;">157,813</td></tr> <tr><td>Collective buy</td><td style="text-align: right;">15,240</td></tr> <tr><td>Decrease stock</td><td style="text-align: right;">460</td></tr> <tr><td></td><td style="text-align: right;"><u>\$775,737</u></td></tr> </table> <p>(7) Investments</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Capital</td><td style="text-align: right;">415,000</td></tr> <tr><td>Special purposes medical</td><td style="text-align: right;">560,000</td></tr> <tr><td>Specific purposes fund</td><td style="text-align: right;">340,800</td></tr> <tr><td></td><td style="text-align: right;"><u>\$1,315,800</u></td></tr> </table> | Ordinary | 9,245,800 | Collective buy | 15,240 | Works and services | 4,976 | Visiting nurses | 48,122 | PADP | 119,660 | Employment | 77,125 | Home nursing subsidy | 47,661 | Costs met by Health Commission | 369,430 | | <u>\$9,928,014</u> | Grants received were: | | Ordinary | 293,500 | Department of Health | 1,174,040 | Pharmaceutical benefits | 29,536 | | <u>\$1,497,076</u> | Depreciation | 101,603 | Costs met by Health Commission | 369,430 | Ambulance | 131,191 | PADP | 157,813 | Collective buy | 15,240 | Decrease stock | 460 | | <u>\$775,737</u> | Capital | 415,000 | Special purposes medical | 560,000 | Specific purposes fund | 340,800 | | <u>\$1,315,800</u> | <p>(2) Inpatient fees</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Private</td><td style="text-align: right;">438,220</td></tr> <tr><td>Motor Accident Board</td><td style="text-align: right;">138,519</td></tr> <tr><td>Workers compensation</td><td style="text-align: right;">27,596</td></tr> <tr><td>Repatriation</td><td style="text-align: right;">71,268</td></tr> <tr><td>Nursing home type</td><td style="text-align: right;">48,163</td></tr> <tr><td></td><td style="text-align: right;"><u>\$723,766</u></td></tr> </table> <p>(4) Salaries and wages includes:</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Additional provision for long service leave</td><td style="text-align: right;">132,753</td></tr> <tr><td>Additional provision for annual leave</td><td style="text-align: right;">59,529</td></tr> <tr><td>Decrease provision for accrued days off</td><td style="text-align: right;">(7,133)</td></tr> <tr><td>Prior year salaries and wages has been adjusted by corresponding transfers from other expenses.</td><td></td></tr> </table> <p>(6) Prior year adjustments</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Prior year deficit grant</td><td style="text-align: right;">73,526</td></tr> <tr><td>Asset register adjustments</td><td style="text-align: right;">11,566</td></tr> <tr><td>Creditors adjustment</td><td style="text-align: right;">(1,557)</td></tr> <tr><td></td><td style="text-align: right;"><u>\$83,535</u></td></tr> </table> <p>(8) Future valuations of property will bring reporting into line with Australian accounting standards and the objectives of the Annual Reporting Act, which does not yet extend to the public hospitals sector.</p> | Private | 438,220 | Motor Accident Board | 138,519 | Workers compensation | 27,596 | Repatriation | 71,268 | Nursing home type | 48,163 | | <u>\$723,766</u> | Additional provision for long service leave | 132,753 | Additional provision for annual leave | 59,529 | Decrease provision for accrued days off | (7,133) | Prior year salaries and wages has been adjusted by corresponding transfers from other expenses. | | Prior year deficit grant | 73,526 | Asset register adjustments | 11,566 | Creditors adjustment | (1,557) | | <u>\$83,535</u> |
| Ordinary | 9,245,800 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Collective buy | 15,240 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Works and services | 4,976 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Visiting nurses | 48,122 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PADP | 119,660 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employment | 77,125 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Home nursing subsidy | 47,661 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Costs met by Health Commission | 369,430 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <u>\$9,928,014</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Grants received were: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ordinary | 293,500 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Department of Health | 1,174,040 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pharmaceutical benefits | 29,536 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <u>\$1,497,076</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Depreciation | 101,603 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Costs met by Health Commission | 369,430 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ambulance | 131,191 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PADP | 157,813 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Collective buy | 15,240 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Decrease stock | 460 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <u>\$775,737</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Capital | 415,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Special purposes medical | 560,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Specific purposes fund | 340,800 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <u>\$1,315,800</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Private | 438,220 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Motor Accident Board | 138,519 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Workers compensation | 27,596 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Repatriation | 71,268 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nursing home type | 48,163 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <u>\$723,766</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Additional provision for long service leave | 132,753 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Additional provision for annual leave | 59,529 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Decrease provision for accrued days off | (7,133) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prior year salaries and wages has been adjusted by corresponding transfers from other expenses. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Prior year deficit grant | 73,526 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Asset register adjustments | 11,566 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Creditors adjustment | (1,557) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <u>\$83,535</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

COMPARATIVE STATEMENT OF OPERATING REVENUE AND EXPENDITURE 1980-81 to 1984-85

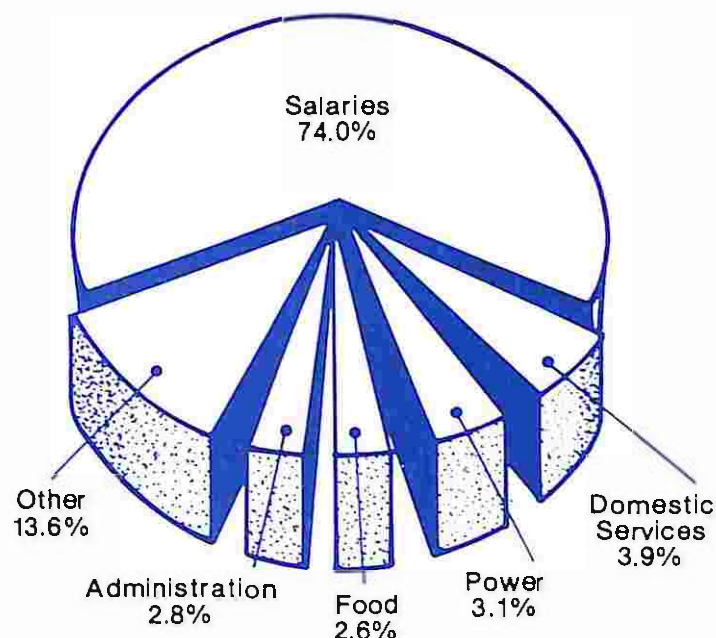
| REVENUE | 1981 (CASH) | 1982 (ACCRUAL) | 1983 (ACCRUAL) | 1984 (ACCRUAL) | 1985 (ACCRUAL) |
|-----------------------------|--------------------|--------------------|---------------------|---------------------|---------------------|
| Government grants | \$6,661,371 | \$7,760,851 | \$8,923,136 | \$9,658,286 | \$11,425,090 |
| Patient fees | 1,434,624 | 1,934,821 | 2,416,419 | 2,254,518 | 1,713,472 |
| Other | 174,760 | 130,453 | 156,223 | 192,180 | 136,535 |
| TOTAL REVENUE | <u>\$8,270,755</u> | <u>\$9,826,125</u> | <u>\$11,495,778</u> | <u>\$12,104,984</u> | <u>\$13,275,097</u> |
| EXPENDITURE | | | | | |
| Salaries and wages | \$5,784,724 | \$6,805,355 | \$8,147,084 | \$8,754,569 | \$9,638,277 |
| Other expenditure | 2,496,620 | 2,651,830 | 3,313,715 | 3,701,362 | 3,780,663 |
| TOTAL EXPENDITURE | <u>8,281,344</u> | <u>9,457,185</u> | <u>11,460,799</u> | <u>12,455,931</u> | <u>13,418,940</u> |
| Operating surplus (deficit) | (10,589) | 368,940 | 34,979 | (350,947) | (143,843) |
| | <u>\$8,270,755</u> | <u>\$9,826,125</u> | <u>\$11,495,778</u> | <u>\$12,104,984</u> | <u>\$13,275,097</u> |

Any analysis of the trends demonstrated in this statement should take account of the different bases of accounting used over the five-year period as well as the different systems of health care financing in that time.

Receipts



Payments



SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of significant accounting policies and principles followed by the Wimmera Base Hospital is given below to assist in evaluating the financial statements and other data in this report.

- (a) The financial statements for the year ended June 30, 1985 have been prepared on the accrual basis and, in accordance with the requirements of the Health Commission of Victoria and normally accepted accounting principles, with exceptions being:
 - (i) No provision has been made for the depreciation or revaluation of buildings. Buildings are recorded in the capital fund at cost.
 - (ii) The financial statements have been prepared on the basis of the historical cost convention.
- (b) Income and investments
 - (i) Income from capital investments has been credited directly to the capital account
 - (ii) Income from investment of specific purposes funds have been credited directly to the relevant trust fund.
 - (iii) Income from short term investment of operating funds has been credited directly to the specific purposes fund.
 - (iv) Income from investments has been brought to account in determining the year's operating result. This is a departure from previous years, but has not materially affected the financial statements.
- (c) Stock on hand
Stocks on hand include all stores in the General Store and Pharmacy.
Stocks on hand are valued at latest purchase price, which is consistent with prior years.
- (d) Preference has been given to producing a consolidated balance sheet, and revenue and expenditure statements. This is consistent with the Health Commission's preferred policy, as they follow modern conventional accounting practices.
- (e) Depreciation of plant and equipment is determined on the basis of the straight-line method, taking into consideration the anticipated economic usefulness of the assets.
- (f) Provision for long service leave has been calculated at employees current rates of pay. Entitlements, calculated with reference to relevant awards, recognise the liability from the date of legal entitlement, which is generally after 10 years of service.
- (g) Assets funded from operating moneys have been credited against operating expenditure and capitalised as part of asset register requirements.

Wimmera Hospitals' Group Linen Service

REVENUE STATEMENT FOR YEAR ENDING JUNE 30, 1985

| 1983-84 | 766,637 | INCOME | 1984-85 | 803,503 |
|---------------|-----------------|--|---------------|-----------------|
| | | Less Direct Expenses | | |
| 393,704 | | Laundry | 419,416 | |
| 151,629 | | Linen Service | 181,328 | |
| 39,368 | | Maintenance | 26,726 | |
| <u>23,360</u> | 608,061 | Sewing | <u>30,663</u> | 658,133 |
| | <u>158,576</u> | Gross Operating Margin | | <u>145,370</u> |
| | | Less Indirect Expenses | | |
| 60,654 | | Transport | 66,689 | |
| 81,464 | | Administration | 66,629 | |
| <u>22,238</u> | 164,356 | Cleaning Costs | <u>23,043</u> | 156,361 |
| | (5,780) | Net Operating Margin | | (10,991) |
| | 26,606 | Non Operating Income | | 43,878 |
| | <u>\$20,826</u> | Net Operating Surplus/(Deficit) | | <u>\$32,887</u> |

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

(1) The movement in the Operating Fund balance during 1984-85 is explained as follows:-

| | |
|---|--------------------|
| Balance at beginning of year | (53,573) |
| Operating Fund Surplus 1984-85 | 32,887 |
| Prior year adjustment Re:- Long Service Leave | 2,000 |
| | <u>\$ (18,686)</u> |

(2) Stores on hand include:-

| | |
|---------------|-----------------|
| Bulk Linen | 73,966 |
| Bulk Material | 8,110 |
| | <u>\$82,076</u> |

(3) Investments are recorded at cost and are held as follows:-

| | |
|--------------------------|------------------|
| Pyramid Building Society | 236,000 |
| Victorian Savings & Loan | 41,000 |
| | <u>\$277,000</u> |

(4) No provision has been made for depreciation of buildings which are included at cost price in accordance with Health Commission of Victoria policy guidelines.

BALANCE SHEET AS AT 30 JUNE, 1985

| 1983-84 | CAPITAL FUNDS | 1984-85 |
|------------------|--|------------------|
| 513,170 | Laundry Capital | 513,170 |
| 164,303 | Asset Replacement Reserve | 200,303 |
| (53,573) | Operating Fund (1) | (18,686) |
| <u>\$623,900</u> | | <u>\$694,787</u> |
| | These funds are represented by: | |
| | CURRENT ASSETS | |
| 31,762 | Cash on Hand | 50 |
| 79,184 | Debtors | 95,943 |
| 96,186 | Stores on Hand (2) | 82,076 |
| | Other Debtors | 5,350 |
| 207,132 | | 183,419 |
| 150,000 | INVESTMENTS (3) | 277,000 |
| | FIXED ASSETS | |
| 323,363 | Buildings (4) | 323,362 |
| 384,709 | Plant and Equipment | |
| 289,919 | 389,509 | |
| | Less Provision for Depreciation | 75,435 |
| 418,153 | | 398,797 |
| <u>\$775,285</u> | TOTAL ASSETS | <u>\$859,216</u> |
| | LESS CURRENT LIABILITIES AND PROVISIONS | |
| 7,613 | Bank Overdraft | 1,124 |
| 17,815 | Creditors | 15,271 |
| 48,758 | Accrued Expenses — Salaries and Wages | 22,288 |
| 74,235 | Annual Leave | 50,556 |
| 2,150 | Provision for Long Service Leave | 72,702 |
| 814 | Provision for Accrued Days Off | 2,488 |
| | Other Creditors | |
| 151,385 | | 164,429 |
| <u>\$623,900</u> | NET ASSETS | <u>\$694,787</u> |

Auditors' Report

We report that we have examined:

- (a) the accounts of the Wimmera Base Hospital and Sir Robert Menzies Nursing Home for the year ended 30th June, 1985.

Our examination included auditing procedures and tests of the records which we considered necessary in the circumstances.

In preparing the financial statements, the hospital has not provided for depreciation of buildings (refer to accounting policies). This is a departure from a statement of accounting standards issued by the Institute of Chartered Accountants in Australia and Australian Society of Accountants.

Subject to the above, in our opinion, the accounts are properly drawn up in accordance with the requirements of the Health Commission of Victoria so as to give a true and fair view of the institution's financial affairs as at 30th June 1985 and of the results of its operations for the year ended on that date.

The accounting and other records examined by us have been properly maintained in accordance with the provisions of the Health Commission of Victoria's Cost Centre Accounting and Budgeting Systems Procedures Manual.

- (b) the accounts of the Wimmera Hospitals' Group Linen Service for the year ended 30th June, 1985.

Our examination included such auditing procedures and tests of the records which we considered necessary in the circumstances.

In preparing the financial statements, the organisation has not provided for depreciation of buildings. This is a departure from the statement of accounting standards issued by the Institute of Chartered Accountants in Australia and the Australian Society of Accountants.

Subject to the above, in our opinion, the accounts are properly drawn up so as to give a true and fair view of the organisation's financial affairs at the 30th June, 1985 and of the results of its operations for the year ended on that date.

GREEN, TAYLOR, AINSWORTH AND RYAN,
CHARTERED ACCOUNTANTS
M. W. RYAN, FCA
PARTNER

Dated at Horsham 20-8-85

STATEMENT OF RESPONSIBLE ACCOUNTING OFFICER

I, John Maxwell AIREY, being the officer responsible for the preparation of the accompanying accounts of Wimmera Base Hospital, comprising:

- (a) The attached consolidated balance sheet of hospital funds and consolidated statement of revenue and expenditure for hospital and nursing home together with notes to and forming part of those accounts for the year ended June 1985;
- (b) The attached balance sheet and statement of revenue and expenditure of the Wimmera Hospitals' Group Linen Service for the year ended 30th June, 1985;

and state that to the best of my knowledge and belief such accounts have been prepared in accordance with the requirements of the Health Commission of Victoria so as to give a true and fair view of the Institutions financial affairs as at 30th June 1985 and of the results of its financial operations for the year ended at that date.

JOHN M. AIREY, AASA CPA

BOARD OF MANAGEMENT

The consolidated balance sheet, statement of revenue and expenditure, explanatory notes and supplementary information of Wimmera Base Hospital, Sir Robert Menzies Nursing Home and Wimmera Hospitals' Group Linen Service to the best of our knowledge and belief, have been prepared in accordance with the requirements of the Health Commission of Victoria so as to give a true and fair view of the Institution's financial affairs as at the 30th June 1985 and of the results of its financial operations for the year ended at that date.

S. B. Capp
Manager

K. H. Lovett
Honorary Treasurer

R. R. Burgess
President

Donations

| | \$ | | |
|------------------------------------|-----------|--|-----------|
| Alcoholics Anonymous | 50.00 | Nixon, F. W. and A. E. | 30.00 |
| Anderson, M. G. | 20.00 | Parker, K. | 4.00 |
| Anderson, V. M. | 50.00 | Pethard Tarax Charitable Trust | 400.00 |
| Anonymous | 30.00 | Pickering, E. | 100.00 |
| Anonymous | 10,000.00 | Potter, C. | 10.00 |
| Anonymous | 5.00 | Reece Burgess Pty. Ltd. | 1,000.00 |
| Bayles, M. | 100.00 | Reynolds, P. | 10.00 |
| Chequer, Mrs. | 10.00 | Russell, A. | 30.00 |
| City of Horsham | 400.00 | Salvation Army Home League | 363.22 |
| Collier Custodian Corporation | 3,000.00 | Smith, Miss M. | 250.00 |
| Cosgriff, B. | 10.00 | Snibson, H. G. | 500.00 |
| Curran, Mrs. | 25.00 | Stewart, Mrs. R. | 20.00 |
| Dickins, Mrs. J. | 100.00 | Troeth, P. | 149.81 |
| Dooen Ladies Guild | 21.00 | Vandyk, J. and R. | 6,000.00 |
| Estate of A. L. Hadden | 886.25 | Victoria Hotel Social Club | 1,000.00 |
| Estate of A. M. Grant | 1,500.00 | Walker, Mrs. | 5.00 |
| Fortington, P. | 20.00 | Weir, G. | 10.00 |
| Freijah, J. and A. | 200.00 | West Wimmera Netball Association | 515.32 |
| Giddings, A. and I. | 30.00 | White, Mrs. H. | 5.00 |
| Guest, A. and J. | 100.00 | Wimmera Base Hospital Ladies Auxiliary | 13,447.60 |
| Handby, Mr. and Mrs. | 25.00 | Wimmera Mallee Radio Appeal Committee | 100.00 |
| Hopkins, Miss E. | 100.00 | Wood, L. | 10.00 |
| Horsham Darts Association | 300.00 | | |
| Horsham Uniting Church Tennis Club | 500.00 | | |
| Horwood, J. and L. | 200.00 | | |
| Humphries, Dr. G. | 200.00 | | |
| James, R. T. | 10.00 | | |
| Kemp, E. O. | 50.00 | | |
| Kroschel, D. A. | 10.00 | | |
| Laharum Ladies Guild | 500.00 | | |
| Lewis, B. and M. | 20.00 | | |
| Lovett, K. | 500.00 | | |
| Lutze, Mrs. E. A. | 1,000.00 | | |
| M. D. and J. John Pty. Ltd. | 2,000.00 | | |
| McKay, A. | 25.00 | | |
| Meagher, D. M. | 50.00 | | |
| Mitchell, H. and L. | 20.00 | | |
| Murtoa High School | 50.00 | | |

Donations are to the hospital and Horsham and District Nursing Home Society.



Supporting Services

RED CROSS LIBRARY

It is my pleasure to present the annual report of the Red Cross Library. It has been a busy year delivering books to the patients. We also have a picture library; these prints have been hung in the Sir Robert Menzies Nursing Home, geriatric unit and the Day Centre. They are very much admired by the patients and the many visitors to our hospital. The prints are changed every three months.

Eighteen months ago we moved from our library on the 4th floor to the hospital house over the road where we are sharing a room. This was most inconvenient but now we are moving back to a room in the Sir Robert Menzies Nursing Home which we are most grateful for and will now be able to handle our picture library again.

Our library consists of many interesting books, including the large print books which are very much appreciated by the aged patients.

At Christmas we had our geriatric party where the patients were provided with afternoon tea including a Christmas cake which was served by the members of the unit. They were also given a gift, these gifts being bought from the money from our monthly stall at our meetings. Our thanks go to Mr Ray Buckley for entertaining everyone. Gifts were also given to the RSL, which were wrapped and sent from headquarters.

Our services at the hospital help in many ways. Red Cross certainly gives a lot of pleasure through helping others in need and the patients get much happiness from our visits and assistance which is very rewarding.

I would like to thank my assistant Miss Crafter for her help at all times, to Mr Capp for help and advice he gave during the year, and to the engineer, Mr Martin. My thanks also go to matron, sisters and nursing staff for their kindness and co-operation and Miss Maureen White, director of hospital services, is again thanked for her assistance and to all others concerned a special thanks, as this certainly makes our library work a very happy and rewarding one.

Thelma Cain
Librarian

LADIES AUXILIARY

I have much pleasure in presenting the annual report for 1984-85 of the Wimmera Base Hospital Ladies Auxiliary.

The total amount we gave to the hospital for the year was \$13,406.60. This money will be put towards the building of the new nursing home.

Our Opportunity Shop has been most successful this year with the record sum of \$10,000 being raised. To the shop committee, the people of Horsham and district and the organisations who have supported the shop this year we give our sincere thanks, for without their support it would not have been possible to raise this magnificent amount. Our thanks also goes to the two radio stations and the Wimmera Mail-Times for their publicity of our functions throughout the year.

We held four successful functions this year. They were a coffee morning at Mr and Mrs J. Vandyk's home, a cocktail party at Mr and Mrs T. Dawson's home and a coffee party and luncheon on the 4th floor at the hospital. We thank these people and the hospital for enabling us to hold these functions.

I would like to say thank you to all the ladies of the auxiliary who have given me their wonderful support during the past year. I wish the incoming office-bearers a most rewarding year ahead.

Joy Murch,
President

Governors

LIFE GOVERNORS

Abud, Dr. R. E.
Anderson, Mrs. A.
Aumann, Mr. R. E.
Beynon, Mr. J. H.
Boehm, Mrs. G. E.
Boyd, Miss B.
Bridge, Dr. A. L.
Brownbill, Mrs. K.
Butler, Mr. L. H.
Cain, Mrs. T.
Carter, Mrs. V. A.
Cathcart, Miss D.
Corner, Mrs. P.
Courtney, Miss A. R.
Craig, Miss M. E.
Draffin, Mr. I.
Garth, Mr. D. J.
Gill, Mr. W.
Hanna, Mr. W. T.
Harfield, Mrs. D.
Healey, Miss N.
Hoffman, Miss L.
Hopkins, Miss E. V.
Johns, Rev. A. A.
Kroker, Mrs. C. O.
Leith, Mr. C.
Leivesley, Mr. A. G.
Leyton, Dr. G. B.
Lovett, Mr. K. H.
McFarlane, Mr. D.
McIntyre, Miss V. C.
Montgomery, Mrs. L.
Moore, Mr. L. G.
O'Brien, Dr. M. M.
O'Connor, Mr. K. J.
Pascall, Mrs. L. G.
Phillips, Mr. A. W.
Pietsch, Mr. E. B.
Powell, Mrs. J.
Robertson, Mr. P.
Russell, Mrs. E. W.
Russell, Mr. M. S.
Schultz, Mr. F. P.
Schurmann, Miss N. J.
Shepherd, Mr. R. W.
Smith, Miss M. A. R.
Stewart, Mrs. R. V.
Stenhouse, Miss L.
Tippett, Mrs. A. M.
Troeth, Mr. P.
Walpole, Dr. T. V.
Webster, Prof. R. W.
Wik, Mrs. W. M.

CENTENARY GOVERNORS

Bethell, Mr. R.
Brownstein, Mr. E. G.
Chisholm, Mr. G.
Coutts, Mr. P. A.
Crellin, Mrs. E.
Cuddihy, Mr. M. W.
Edwards, Mr. R. G.
Eldridge, Mr. E.
Finch, Mr. A.
Francis, Mr. S.
Grant, Mr. R. G.
Heard, Mr. G. B.
Hill, Mrs. D.
John, Mr. M. D.
Lind, Mr. G. B.
Matuschka, Mr. E.
Moore, Mr. L. G.
Muhl nickel, Mr. V. F.
O'Brien, Dr. M. M.
Patterson, Mr. R.
Rodda, Mrs. H.
Rogers, Mr. B.
Smith, Miss M. A. R.
Taylor, Mr. M. H.
Vandyk, Mr. J. A.



Reaching out. The hospital's Day Centre allows elderly persons, and younger persons needing special help, to remain at home in the community, and benefit from hospital services as well.

