

Stawell District Hospital

132nd Annual Report 1990-91

Hospital Profile

<i>Hospital Name:</i>	Stawell District Hospital
<i>Address:</i>	Sloane Street, Stawell 3380 Victoria
<i>Phone:</i>	053 - 58 2255
<i>Facsimile No.:</i>	053 - 58 3553
<i>President:</i>	Mr G. B. Fuller
<i>Chief Executive:</i>	Mr M. B. Delahunty
<i>Minister for Health (Vic.):</i>	The Honourable Maureen Lyster M.L.C.
<i>Originally Established:</i>	Pleasant Creek February 1859 Relocated to Sloane Street June 1934
<i>Approved Operating Budget:</i>	\$5.8 million
<i>Accreditation Status:</i>	Fully Accredited to September 1992
<i>Employees:</i>	Full Time 73 Part Time 119
<i>Approved Beds:</i>	Hospital 40 Nursing Home Beds 30

Functions of the Board of Management:

- (a) To direct the affairs of the Hospital.
- (b) To ensure the services provided by the Hospital comply with the requirements of the Health Services Act 1988 and objects of the Hospital.

Health Services Act 1988:

The Hospital does not administer any Acts. The Health Services Act 1988 is the vehicle by which Hospitals are incorporated and prescribes the manner in which they are regulated.

Board of Management



This report is presented to you
with the Compliments
of the
President and Committee
of the
**STAWELL DISTRICT
HOSPITAL**
in appreciation of your support and interest

OFFICER BEARERS 1990-91

PRESIDENT:
Mr Graham Fuller

VICE-PRESIDENTS:
Mrs Joan Brilliant and Mrs Janet Witham

TREASURER:
Mr Ivan McDonald

BOARD OF MANAGEMENT
Mrs M. I. Blake, Mrs J. M. Brilliant,
Dr R. N. Castle, Dr A. H. Cunningham,
Mr K. W. Dadswell, Mr G. B. Fuller,
Mr J. D. McCracken, Mr I. A. McDonald,
Mr R. I. McMillan, Mr M. D. Spencer,
Mr R. C. Stone, Mrs J. H. Witham

EXECUTIVE STAFF
Chief Executive Officer
Mr M. B. Delahunty, B.Ec., A.A.S.A., C.P.A., M.H.A., A.F.C.H.S.E., C.H.E.

NURSING DIRECTOR
Mr K. B. Fowkes, R.N., D.N.E., B.A.(Soc.Sc.), W.S.Cert., F.C.N.A.

MEDICAL DIRECTOR
Dr A. Wolff (consulting)
Dr N. Castle (Sessional)

AUDITOR
Auditor General

BANKERS
Australian and New Zealand Banking Group Ltd.

ARCHITECT
Balcombe Griffiths Pty. Ltd.



Mr Graham Fuller
President



Mrs Janet Witham
Vice-President



Mrs Joan Brilliant
Vice-President



Mr Ivan McDonald
Treasurer

Report of the Board of Management

It is my honour to present on behalf of the Board of Management the 132nd Annual Report and Financial Statements for the year ended June 30, 1991.

The year under review saw the finalisation of the hospital's major building programme which brought a great deal of satisfaction to the Board as plans from past years came to fruition. The building programme commenced in 1984 when the kitchen was upgraded (\$380,000) and has included in 1986 an eleven bed extension to the nursing home (\$520,000), 1987 the establishment of a new twenty-four bed medical wing (\$1.6m), in 1988 an upgraded radiology complex (\$337,000) and finally this year the opening of Simpson Wing (\$3.7m).

South Ward Development

The Board of Management in recognition of the large bequest from the estate of Allan and Ivy Simpson resolved to name the new wing the "Allan and Ivy Simpson Midwifery/Surgical Wing". This new wing comprises a sixteen bed midwifery/surgical ward, new front foyer reception area, upgrading of the theatre suite, new pharmacy department. Included in the total project was the establishment for the first time at the hospital a purpose built staff dining room. This new extension was occupied by patients on Monday June 3, 1991 and officially opened by the Premier of Victoria the Hon. Joan E. Kirner A.M. M.P. on Friday July 12, 1991.

The attendance at the opening ceremony of staff (both past and present) and persons from the community of Stawell and District was outstanding. The Premier was most impressed by the support of the community towards their local hospital.

The commissioning of the new wing has proceeded very smoothly. The Commissioning Committee chaired by Mrs M. Blake, and staff of the hospital are to be commended for ensuring the commissioning occurred so smoothly and efficiently. I would particularly wish to thank the staff who have worked in Grampians Ward since 1985. The Ward was established as a temporary ward in 1985 to accommodate acute patients during the building programme. The difficulties of both staff and patients in nursing patients in this temporary area is acknowledged and the gratitude of the Board is extended to all concerned for this six year period.

Also I wish to thank members of the "Simpson Wing Project Control Group". This committee comprised hospital staff, Board Members, Architect and representatives from the Health Department. The committee met at least monthly from February 1990 and was responsible for the efficient construction of the Simpson



Unit Nursing Manager Mrs P. Fowkes in remodelled theatre suite.

Wing. Indeed in the recent auditors report to the Auditor General it was stated and I quote: "During the year the hospital spent in excess of \$3.0m on the South Ward (Simpson) Wing project. As part of the audit actual expenditure against budget was considered and it was pleasing to note that aside from some additional works which the hospital and Health Department decided to carry out during the course of the project, overall project costs were in line with budget. It was particularly pleasing to note that in a number of instances actual costs were in fact below budget. The hospital is to be commended on the way in which it has controlled this significant project."

Health Service Agreement

The Board continues to support the Health Service Agreement process in helping to define the short and long term goals of the hospital. However full achievement of a number of the yearly objectives are dependent on additional financial resources being provided by the Health Department. Given the extremely tight financial situation there is a degree of frustration at Board level at the lack of advancement of a number of objectives due to the paucity of available funds. The Board will continue to participate in this programme by considering alternative, innovative methods of funding agreed objectives. Of the nine objectives set last year the Board is pleased to report that three have been fully achieved. A detailed report on both this years and last years objectives is provided later in the annual report.

Board of Management

The Board was extremely grateful to receive three excellent applications

for Board Member vacancies from persons from the local community. The three vacancies were created due to the resignation of Mrs M. McConchie, Mr D. Reid and Mr W. O'Driscoll. The nominations which were subsequently approved by the Governor-in-Council were Dr A. Cunningham (Medical Practitioner), Mr R. McMillan (Engineer) and Mr M. Spencer (Bank Manager). All these gentlemen have taken up their responsibilities with great interest and enthusiasm. To all members of the Board I would like to express my appreciation for their attendance at the many Board sub-committee meetings, and seminars held throughout the year.

Staff

During the year under review only eleven individual staff members resigned from their position and one person retired. Of these twelve people only three had full time appointments. Of the twelve farewelled one was Mrs Bobby McIntosh who retired after twelve years service to the hospital in the food service area. Her pastry and sweet delights are sadly missed. Another farewelled was Mrs Lyn Humphrey who had been a valued member of our registered nursing team for in excess of six years.

In October Miss Carolyn Gellert was appointed to the Medical Record Administrator position. Miss Gellert has been an excellent appointment to the staff and has made a significant contribution to co-ordinating the hospital's quality assurance activities which comprises 50% of her responsibilities.

To all staff of the hospital I would like to take this opportunity of thanking

Report of the Board of Management

them, in all departments for their co-operation and dedication.

Medical Staff

I wish to thank all members of the hospital's medical staff group for their co-operation and dedication to maintaining our high level of patient care. In particular I thank the six local medical officers for their willingness to contribute and assist with the many issues referred to them from the Board of Management.

On December 14, 1990 we farewelled Dr S. Pilbeam who retired from his position of Regional Director of Pathology. He was responsible for the establishment of a Pathology Laboratory at this hospital in the 1970's and its subsequent growth to its present role including the provision of a blood banking service. In recognition of this invaluable service the Board resolved to name the new Pathology Laboratory which hopefully will be constructed in the next twelve months in honour of Dr Pilbeam. During the year the Board reviewed all medical appointments to the hospital, and the list appears later in this annual report. All new appointments are highlighted. It is particularly gratifying to the Board the number of medical specialists who are willing to travel to Stawell to provide their medical speciality to patients of the hospital.

Finance and Statistics

Given that there was some restriction to the hospital during the building programme, including the closure of the operating theatre for four weeks the activity levels reported are highly commendable. The hospital had 2,036 admissions which was only 73 (3.4%) less than the previous year. The average length of stay for each admission was the same as the previous year 5.5 days. Now that the number of available beds has stabilised with the finalisation of our building programme the Board will be seeking to stabilise the number of patients the hospital is able to treat given its limited staffing and financial resources.

A highlight of the year was the 18% increase in births from 125 to 147. In the financial area the hospital's cash payments increased by 6.5% from \$5.7m to \$6.1m. One of the most pleasing aspects in this area is that the hospitals workcare premium was at the industry levy rate in 1990/91 and in 1991/92 the hospital will enjoy a financial bonus. The assistance of Mr Robert Hemley and the positive attitude of all staff is acknowledged for the hospital to achieve this bonus.

Increasingly the Board is required to consider methods of increasing revenue to maintain services. For the first time this year a facility fee of \$5 per physiotherapy attendance was charged and recently a fee was

adopted for equipment loaned by the hospital. Along with these measures the Board has appealed to patients who have private insurance to elect to be treated as a private patient on admission to the hospital. Electing to be treated as a private patient will significantly assist the hospital's finances by increasing bed day receipts and reducing medical officer payments made from the hospital operating budget.

A detailed report of the total agency's financial and statistical data is provided later in this report.

Bequests and Donations

The final distribution from the estate of Mr Allan Simpson was received during the year. The total amount of this bequest is \$445,000. The hospital has carefully invested these funds and over time they will be applied to areas of the Nursing Home and Hospital as directed by Mr Simpson's Will. The hospital was extremely grateful to receive a total of \$113,800 in donations (excluding the Simpson Bequest), and these are listed elsewhere in the report.

General Issues

Smoke Free Policy

The Board was pleased to endorse a recommendation from the Occupational Health and Safety Committee that all hospital and nursing home buildings be smoke free effective from July 1, 1991. The Board is grateful to the staff and public for the support it has received in implementing this policy.

Catering Department Review

A review of the Catering Department was undertaken by a consultant with his report finalised in October 1990. This report has been adopted by the Board of Management and is the "blue print" by which changes will occur in the Department as circumstances permit.

Victorian Health System Review

The Board awaits with interest the recommendations that are to be made as a result of this review. To date the Board has made a submission to the review and has had discussions Community Health Centre. Suffice to say at this juncture that the Board's strong view is that individual Board's of Management must be retained as the body responsible for managing public hospitals. By having an effective and diligent Board of Management the interests of both the government and local community are best protected.

Hospital By-Laws

New Hospital By-Laws as approved by the Health Department were adopted by the Board effective from January 29, 1991.

Additional Nursing Home Beds

One of the most important objectives of the Board will be to establish additional nursing home beds on the hospital campus. Additional beds are required to provide appropriate facilities for the local community's ageing population. With the support recently received from the appropriate authorities the Board is optimistic of achieving this objective in the not too distant future. Additional nursing home beds will provide further economies of scale to allow an easier adjustment for the nursing home to efficiently operate under the CAM:SAM funding principles.

Conclusion

The hospital continues to provide a high level of patient care in a difficult economic climate. To achieve this I offer my warmest appreciation and thanks to:

- Mrs Kerrie Cross and her staff at the regional office of the Health Department.
- Members of the Hospital Ladies Auxiliary and Y-Zetts for their generosity, enthusiasm and support.
- Members of volunteer groups in the community including the Red Cross Society for co-ordinating the blood banking service.
- Other essential groups on which the hospital is dependent: Clergy, Fire Brigade, Police and Stawell Times-News.

I am grateful to my colleagues on the Board of Management for the support and assistance they have given me during my three years as President. Also to our Chief Executive Michael Delahunty, and the many members of staff for their support, thank you. It has been a stimulating and rewarding time and to the incoming President I extend my best wishes.

On behalf of the
Board of Management,

Mr G. B. FULLER
President

The Year in Review

Following is a review of specific short term goals agreed between the Board of Management as part of the Hospital's Health Service Agreement for the year 1990/91;

Goal No. 1

Commence treating inpatients in Allan and Ivy Simpson Wing prior to July 1, 1991.

Result : Achieved: Treatment of patients commenced in the new Wing on Monday June 3, 1991.

Goal No. 2

To establish a process by which the hospitals level and type of acute clinical services are reviewed and future requirements can be determined in conjunction with the Regional Office of the Health Department Victoria.

Result : One meeting has been held between Board Members, Medical Staff and chaired by the Regional Director of Health Mrs K. Cross. This goal is an ongoing objective of both the Board of Management and the Health Department.

Goal No. 3

In consultation with State and Federal authorities to review the need for additional Nursing Home beds.

Result : Discussions have been held with the relevant authorities with the support of the Regional Geriatrician Dr J. Hurley. Further discussions will be held with the office of Psychiatric Services with the objective of establishing specialist type nursing home beds on hospital campus.

Goal No. 4

To have Australian Council on Hospital Standards undertake a survey on our quality assurance programme.

Result : Achieved: The successful survey of our quality assurance programme was undertaken by the Australian Council on Health Care Standards on October 6, 1990.

Goal No. 5

Improve access for eligible persons from the Stawell community to the public denture scheme by providing a co-ordinating and transport service for eligible clients to attend dental clinic at Ararat Hospital.

Result : Achieved

Goal No. 6

Develop strategies to increase access to Allied Health Services.

Result : Achieved. With the support of the regional office staff a review has been finalised.

Goal No. 7

Determine the most suitable option for providing accommodation for the following departments who are currently in temporary accommodation whilst the South Ward is being constructed: Physiotherapy, Occupational Therapy, Social Worker, District Nurses, Day Centre and Pathology.

Result : Planning briefs for each department have been finalised and it is expected that master plan review will be finalised during the financial year 1991/92.

Goal No. 8

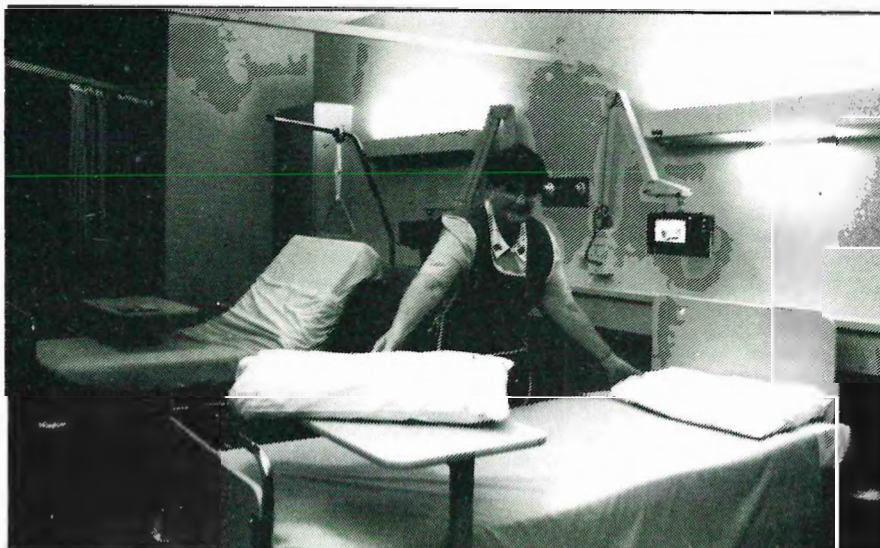
That the position of Accountant forms part of the hospitals budgeted staffing profile as necessitated by the requirements of the Annual Reporting Act.

Result : Due to financial constraints this objective was not achieved.

Goal No. 9

Develop a strategic information systems plan.

Result : This objective was not achieved as model guidelines were not released by the Health Department.



Mrs Rita Dunn - Allan & Ivy Simpson Ward.

Looking to the Future

The Board of Management and the Health Department have agreed to the following goals as part of the 1991/92 Health Service Agreement:

A. PATIENT CARE

1. *Goal:* Determine the role of the hospital within the context of the regions clinical services planning process.

Indicators: (1) Nominate representatives to the Regional Medical Advisory Panel.
(2) Participate in sub-regional clinical services planning meetings to discuss Medical Advisory Panel recommendations.

Targets: (1) Representatives nominated to attend meeting in November 1991.
(2) Attend sub-regional meetings in February 1992.

2. *Goal:* In consultation with the Regional Office of the Health Department, Regional Geriatrician and the Office of Psychiatric Services seek to establish at least ten (10) psychogeriatric beds on the hospital site.

Indicator: Agreement of the above parties to the integration of psychiatric services and general hospital services on the Stawell Hospital Campus.

Target: Agreement determined by March 1, 1992.

3. *Goal:* In consultation with the Midwifery Unit and appropriate Medical Officers, develop a process to implement relevant recommendations of the Birthing Services Final Report.

Indicator: (1) Date Birthing Services Implementation Committee with community representatives considered by Board of Management.
(2) Date written information for mother available including philosophy of care, care options, facilities and practices.
(3) Date written aims and objectives for child birth education programmes.
(4) Date early discharge guidelines as outlines in Review of Birthing Services.
(5) Date early discharge options offered to women who meet the guidelines.
(6) Date review of facilities.

Target: (1) Birthing Services Implementation Committee considered by Board of Management by December 1991.
(2) Written information for mothers including: philosophy of care, care options, facilities and practices to be considered by December 1991.
(3) Written aims and objectives for child birth education programmes to be considered by December 1991.

(4) Early discharge guidelines as outlined in Review of Birthing Services considered by November 25, 1991.

(5) Early discharge options offered to women who meet the guidelines by December 31, 1991.

(6) Review of facilities conducted by June 1992.

4. *Goal:* Develop strategies to increase access to the following Allied Health Services: Physiotherapy, Occupational Therapy and Social Worker.

Indicators: (1) Position Descriptions revised to accurately reflect the priorities for each Allied Health position.
(2) Prioritise Allied Health positions to which access is limited.
(3) In consultation with the Regional Director determine strategies by which access may be improved.

Target: (1) Position Descriptions revised by December 1, 1991.
(2) Prioritisation finalised by February 1, 1992.
(3) Strategies agreed with Regional Director by May 1, 1992.

B. ORGANISATIONAL DEVELOPMENT AND ADMINISTRATION

5. *Goal:* Undertake a review of Hospital Master Plan which will determine most suitable options for building modifications, new buildings and car parking.

Indicators: (1) Scope of Master Plan review agreed with Regional Director.
(2) Master Plan review completed.

Targets: (1) Scope agreed to by October 1, 1991.
(2) Review completed by January 1, 1992.

6. *Goal:* Review the operations of the 30 bed Nursing Home (Syme and Perry) pending the implementation of CAM:SAM funding principles.

Indicator: Review undertaken and business plan submitted to Regional Director.

Target: CAM:SAM business plan agreed with Regional Director by December 1, 1991.

7. *Goal:* Develop a strategic information systems plan.

Indicator: Plan formulated and agreed to with Regional Office of Health Department.

Target: Plan developed as per model guidelines by March 1, 1992.

Chief Executive's Report

Public hospitals are now required to present their annual reports in uniformity with the Annual Reporting Act 1983 and in accordance with the Annual Reporting (Contributed Income Sector) Regulations 1988 as amended. The financial statements detailed later in this report are the minimum level of detail to comply with the regulations. Following is additional detail relating to statistical and financial data.

1. Activity Statistics

	1987/88	1988/89	1989/90	1990/91
Accommodation - Available Beds (Hospital)	40	40	40	40
Patients Treated in Hospital				
Public - No Charge	1,328	1,461	1,565	1,561
Nursing Home Type	21	30	11	11
Private/Third Party	553	578	533	464
Total Patients Treated	1,902	2,069	2,109	2,036
Total Patient Days in Hospital				
Public - No Charge	8,310	7,891	7,880	7,752
Nursing Home Type	1,246	1,224	868	928
Private/Third Party	2,802	3,082	2,935	2,559
Total Patient Bed Days	12,358	12,197	11,683	11,239
Daily Average of Occupied Beds	33.9	33.4	32.0	30.8
% Occupancy	84.4	83.5	80.0	77.0
Average Length of Stay (Days)	6.5	5.9	5.5	5.5
Babies Born	118	121	125	147
Operations	568	639	677	641
Patient Mix (Hospital Bed Days)				
Public No Charge %	77.3	74.7	74.9	77.2
Private/Third Party %	22.7	25.3	25.1	22.8
NURSING HOME				
	1987/88	1988/89	1989/90	1990/91
Bed Days	10,962	10,922	10,801	10,886
Daily Average Occupied Beds	30.03	29.92	29.59	29.83
Outpatient Services				
Number of Attendances				
Casualty	4,136	4,020	3,757	3,304
Occupational Therapy	2,562	2,608	2,940	2,978
Physiotherapy	6,079	6,761	4,015	4,789
Podiatry	1,748	1,913	2,062	1,978
Pathology	5,442	6,207	6,271	6,279
Radiology	2,860	2,922	3,042	3,171
Day Centre	2,761	3,039	3,630	3,429
Social Welfare	1,406	892	1,554	1,706
Total Outpatient Attendances	26,994	28,362	27,271	27,634
District Nursing				
Persons Visited	496	525	737	815
Number of Visits	9,256	9,416	12,649	12,293
Catering				
Patient Meals	64,831	67,492	71,323	77,438
Staff Meals	7,605	7,280	7,760	8,115
Meals on Wheels	4,063	4,728	4,686	4,303
Total Meals Served	76,499	79,500	83,769	89,856

Chief Executive's Report

PATIENTS TREATED BY CATEGORY (Hospital Section)

	Actual	Target
Same Day Procedure	528	580
More than One Day Stay:		
Medical	869	873
Surgical	481	520
Obstetrics	147	125
Nursing Home Type	11	12
	2,036	2,110

COMBINED HOSPITAL/NURSING HOME RECEIPTS

	1986/87	1987/88	1988/89	1989/90	1990/91
	\$	\$	\$	\$	\$
Govt. Grants & Payments	3,122,731	3,402,359	3,728,601	4,195,647	4,520,021
Patient Fees	777,193	1,168,055	1,234,520	1,216,608	1,168,363
Fee Sharing (Path/Radiol)	81,688	96,095	97,775	126,732	144,906
Income from Sundry Sources	3,871	7,739	8,526	10,212	11,468
Meals & Accommodation	23,273	19,342	18,709	19,342	19,808
Non-Operating Receipts	20,863	8,180	22,640	171,057	196,712
Deficiency	63,745	140,646	56,782	5,365	58,907
Total	4,093,364	4,842,416	5,167,553	5,744,963	6,120,185

PAYMENTS

Salaries & Wages	2,866,613	3,424,979	3,596,501	3,868,899	4,145,103
Superannuation	60,089	69,552	152,588	175,739	199,795
Workcare Premium	64,775	88,068	108,885	160,594	148,263
V.M.O. Payments	148,123	216,542	234,177	279,611	289,774
Food Supplies	104,499	132,438	140,699	144,231	151,053
Medical & Surgical Supplies	94,997	110,332	98,540	107,417	117,564
Special Service Departments	48,008	62,741	69,034	71,082	73,501
Drug Supplies	35,001	47,990	50,863	61,326	70,356
Fuel, Light & Power	65,580	83,538	88,702	101,750	100,798
Domestic Charges	150,940	164,997	174,955	175,234	177,099
Repairs & Maint/Contracts	195,801	162,757	174,963	183,300	180,751
Admin. Expenses	123,405	153,770	155,690	178,948	227,399
Ambulance	44,782	42,871	34,049	30,421	29,350
Equipment - Minor Works	36,000	43,000	39,500	17,000	16,000
SAAS Employment Payments	33,964	30,661	25,591	18,354	—
Other Non-Operating Payments	20,787	8,180	22,816	171,057	193,379
Total	4,093,364	4,842,416	5,167,553	5,744,963	6,120,185

UNIT COSTS

	\$	\$	\$	\$	\$
Hospital Av. Daily Bed Cost					
Inpatient	261.54	267.22	297.40	301.40	345.23
Hospital Av. Cost					
Inpatient Treated	1,693.77	1,736.24	1,753.30	1,669.70	1,905.70
Nursing Home Av. Daily Bed Cost					
Inpatient	112.52	118.55	116.00	127.90	107.32
Nursing Home Av. Cost					
Inpatient Treated	22,710.19	19,905.14	29,230.00	24,238.60	22,043.40
Av. Cost Outpatient Attend	12.37	13.45	17.80	20.25	36.48
Av. Cost per Day Centre Attend	16.78	10.77	8.07	26.90	27.36
Av. Cost per District Nursing Visit	7.97	9.40	8.90	12.90	16.03
Av. Net Cost per Meal	—	4.40	5.20	5.50	7.35
Av. Net Cost per Meals on Wheels	—	2.35	2.95	2.95	3.40

Chief Executive's Report

2. Staffing Levels

The comparison between staffing levels by classification for the year under review and the previous year is as follows:

	<i>Paid E.F.T.*</i> 1989/90	<i>Paid E.F.T.*</i> 1990/91
Nursing	66.1	65.6
Administration & Clerical	11.5	12.4
Medical Support	10.1	11.2
Hotel & Allied	45.3	43.7
Medical	0.4	0.2
	133.4	133.1

* E.F.T. = Equivalent Full Time

3. Hospital Publications

The majority of publications produced by the hospital relate to the internal management of the hospital, however persons requiring further information about the hospital publications are encouraged to contact the Chief Executive Officer.

4. Revenue Indicators

	<i>Average Days to Collect</i>	
	<i>1989/90</i>	<i>1990/91</i>
Private Inpatient Fees	46.86	79.48
TAC Inpatient Fees	63.41	43.48
ACC Inpatient Fees	164.07	158.14
DVA Inpatient Fees	141.50	—
	70.56	104.98

DEBTORS OUTSTANDING AS AT JUNE 30, 1991

	<i>Under</i>			<i>Over</i>		<i>Total</i> 1990/91	<i>Total</i> 1989/90
	<i>30 Days</i>	<i>31-60 Days</i>		<i>61-90 Days</i>	<i>90 Days</i>		
Private Inpatients	29,579 (32)	15,192 (20)	2,168 (7)	2,852 (12)	48,791 (71)	42,323 (51)	
TAC Inpatients	225 (1)	—	—	392 (2)	617 (3)	1,850 (3)	
ACC Inpatients	900 (1)	1,361 (5)	11,025 (2)	2,722 (4)	16,008 (12)	9,851 (6)	
DVA Inpatients	—	—	—	—	—	35,227 (19)	
					65,416 (86)	89,251 (79)	

Note:(a) Numbers in brackets indicate number of individual accounts in each category.

(b) T.A.C. is Transport Accident Commission
 A.C.C. is Accident Compensation Commission
 D.V.A. is Department of Veteran Affairs

5. Pecuniary Interests

Members of the Board of Management are required under the Hospital By-Laws to declare their pecuniary interest in any matter that may be discussed by the Board or Board Sub-Committees.

6. Freedom of Information

The Hospital received no requests for information under the Freedom of Information Act 1982.

7. Hospital Fees

The Hospital charges fees in accordance with Health Department directives issued under Section 8 of the Hospital and Charities (Fees) Regulations 1986, as amended.

Chief Executive's Report

8. Equipment Purchases

Each year an extensive amount of equipment is required for all areas of the hospital to assist both staff and patients to have the best possible facilities for patient care. The Hospital depends on various sources for funding the purchasing of new equipment including specific donations, bequests/donations, interest on investments, specific purpose funds managed by the Hospital and Government Grants. Major equipment purchased during the year is itemised below including the department for which the equipment was purchased:

	\$	
Anaesthesia Unit	7,500	Theatre
Vaporiser x 2	4,944	Ward Areas
Oxi Lap Monitor	12,600	Ward Areas
Ventilator	5,800	Ward Areas
C.O.2 Absorber	2,509	Ward Areas
Security Camera	1,236	Ward Areas
Wheel Chairs x 3	1,908	Ward Areas
Computer	3,150	Administration
Theatre Lights	18,000	Theatre
Cell Counter	26,000	Pathology
Dynamap	5,630	Ward Areas
High/Low Beds x 16	29,312	Simpson Wing
Overhead Tables x 16	1,792	Simpson Wing
Bedside Tables x 16	4,400	Simpson Wing
Instrument Washer	8,516	Theatre
Birthing Bed	19,900	Midwifery Ward
Mobile Chair Scale	1,595	Ward Areas
Food Trolley	973	Food Services
Computer Equipment	1,175	Administration
Dishwasher	3,910	Nursing Home
Tray Trolley	993	Food Services
Multi-Vision Processor	1,095	Ward Areas
Recovery Trolley	2,194	Theatre
Drug Trolley	1,132	Pharmacy
Cellular Phone x 4	6,720	On-Call Staff
Patient Trolley	1,166	Ward Areas
Compactus Unit	10,250	Medical Records
Defibrillator Monitor x 2	13,200	Theatre
Operating Table	32,457	Theatre
Soft Furnishings	41,400	Simpson Wing
	271,457	

9. Staff Training

From July 1, 1990 this hospital was required to spend 1% of its gross salaries, equivalent to \$41,000 to comply with the Commonwealth Training Guarantee Act. Whilst the Board of Management have a sustained record of supporting staff training, the requirement to spend \$41,000 was double the normal allocation from the hospitals budget for this purpose. This Commonwealth legislation which has been legislated for very worthwhile purposes has placed a considerable burden on this hospital to comply with due to the state government reducing our expenditure budget in real terms. It caused particular difficulties for this hospital compared to a number of other hospitals because it did not have a nurse training school funded by the Health Department. The cost of which could have been applied towards meeting the requirements of the Training Guarantee Act. This hospital will be making representation to the authorities to seek exemption from all or part of this legislation which is scheduled to increase to 1.5% from July 1, 1992.

MICHAEL B. DELAHUNTY
Chief Executive Officer

Nursing Division

The end of this financial year also marked the completion of the ward redevelopment programme. The sixteen bed combined surgical/midwifery Simpson Ward was occupied by patients on Monday June 3, 1991. We now have two acute wards which are very functional and which offer a high standard of patient facilities. Patients being nursed in the new ward are highly appreciative of the facilities available.

There has been virtually no change in our staffing arrangements during this year. The year has been marked by a diminished level of sick leave and a diminished level of workcare claims.

A strong educational emphasis, fuelled by the training guarantee levy has brought considerable benefits to the nursing division. Staff have undertaken both inhouse and extra-mural courses and the benefits of these are already flowing through to patient care. An excellent mini-Coronary Care Course was conducted by Mrs J. Kayler-Thomson. A highly successful study day on "Change" was held at the hospital on June 11, 1991. Fifty registered nurses from both Stawell Hospital and surrounding hospitals took part in what was a very valuable study day. The educational emphasis during the coming year will be directed particularly at the Associate Charge Nurses' role. Management and clinical skills will be strongly addressed, and it is believed that as a result of this further education, both management and clinical arms of the nursing division will be strengthened at this level.

The hospital has again been the recipient of generous donations and fund raising from the hospital auxiliaries and some private individuals. The impact of valuable new equipment on patient care and staff morale cannot be over emphasised.

With the dislocations of the building programme now behind us the nursing division looks forward to the prospect of the unhampered pursuit of quality patient care. In this we are assisted by the other hospital departments who are pursuing similar objectives.

I acknowledge the valuable contribution made to the nursing divisions efforts by the nursing staff of all categories, in their various roles. I pay tribute to the co-operation received from the medical staff and heads of other departments.

BRUCE FOWKES
Nursing Director



Mrs C. Dufty and Mr B. Fowkes making patient comfortable in Simpson Wing.

Nursing Department Heads

Nursing Supervisors

Ms D. Perry, R.N., R.M.
Ms M. Henderson, R.N., R.M.
Ms N. Sidebottom, R.N., R.M.
Ms J. Sherwell, R.N., R.M.
Ms B. Meumann, R.N., R.M.
Ms P. Gaffney, R.N., R.M.

Unit Nursing Managers

Ms L. Carey, R.N., Gerontological Nursing Cert. (Nursing Home)
Ms R. Dunn, R.N. (Simpson Ward)
Ms P. Fowkes, R.N., Ster. & Infection Control Cert. (Theatre & C.S.S.D.)
Ms P. Pianta, R.N., R.M. (Midwifery)
Ms J. Kayler-Thomson, R.N., C.C. Cert. (Castle Wing)

Continuing Education Teacher (Part Time)

Ms K. Redford, R.N., I.C.U. Cert.

Visiting Medical Officer's Report

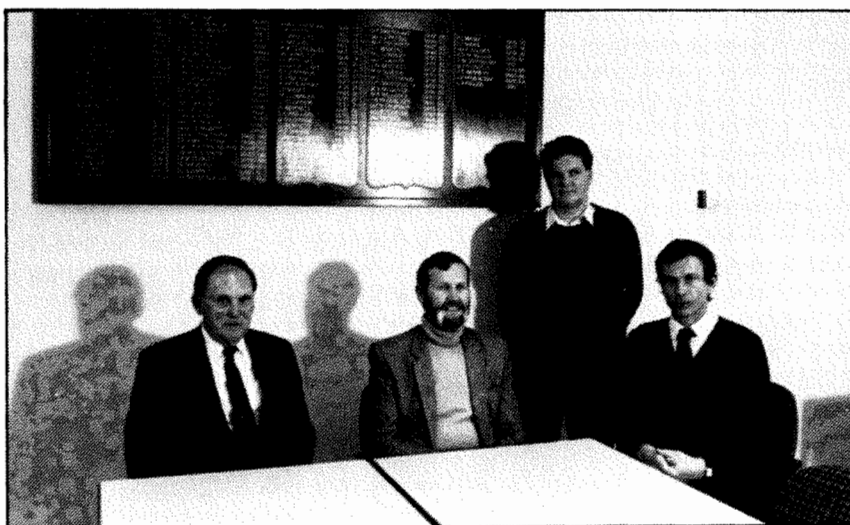
The hospital has continued its whirlwind changes since the revolution in the early 1980's. The Medical Staff have continued serving the hospital well (I believe), and have charged along with the hospital. The last year has seen extra-ordinary changes with the opening of the superb Simpson Wing (equivalent to a five star hotel), the changed theatre complex with its new recovery room, new anaesthetic machine and theatre table to mention but a few of the changes.

Midwifery's move from the modern temporary Castle Wing area to its spacious, light and cheery permanent house in Simpson Wing allows us to be justifiably proud. The Midwifery Ward is, I believe, second to none in equipment compared to hospitals of our size and, of course, is the nearest thing to being at home because of its facilities, atmosphere and staff. I need to mention the great improvement attained for labouring women by the use of the comfortable adaptable new labour ward bed.

We six locally residing Visiting Medical Officers continue to meet monthly to exchange ideas for the mutual benefits of ourselves and the hospital. We continue to welcome the Visiting Consultants who offer

excellent services and save patients the inconvenience, expense and danger of travel to hospitals elsewhere.

DR A. H. CUNNINGHAM
President - V.M.O. Group



Doctors R. N. Castle, A. H. Cunningham, G. O'Brien, M. Gregg.
(Absent) W. Lax, R. Warne.

Medical Staff

Visiting Medical Officers

Dr R. N. Castle, M.B., B.S.
Dr A. H. Cunningham, M.B., B.S., Dip.Obst., R.C.O.G.
Dr M. Gregg, M.B., B.S.
Dr W. Lax, M.B., B.S.
Dr G. M. O'Brien, M.B., B.S., Dip.R.A.C.O.G.
Mr R. B. Warne, M.B., B.S., F.R.A.C.S., F.R.C.S.(Eng.),
F.R.C.S.(Edin.)

Visiting Consultant Anaesthetist

Dr S. D. Giddy, M.B.Ch.B., F.F.A.R.A.C.S., D.A.,
D.Obst.R.C.O.G.

Visiting Geriatrician

Dr J. Hurley, M.B., B.S., L.R.C.P., M.R.C.S.,
Dip.Obst.R.C.O.G., M.R.C.P.(UK)
Dr C. Clark,* M.B.B.S., F.R.A.C.P.
Dr M. Giles,* M.B.B.S., M.R.C.P.(UK)
Dr A. VanderKnyff,* M.B.B.S., Dip.Geriatric Medicare
(Melb.)

Visiting Consultant Gynaecologist

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

Visiting Consultant Ophthalmologist

Dr S. Siebert, M.B., B.S., F.R.A.C.O., F.R.A.C.S.

Visiting Consultant Orthopaedic Surgeon

Dr J. Nelson, M.B., B.S., F.R.A.C.S.

Visiting Consultant Paediatrician

Dr M. Brown, M.B., B.S., F.R.A.C.P.

Visiting Pathologists

Dr C. M. Pilbeam, B.Med.Sc., M.B., B.S., Ph.D.,
F.R.C.P.A.
Dr S. T. H. H. Pilbeam, M.B., B.Ch., F.R.C.P.A.,
F.R.C.Path., D.C.P., Dip.Path. (Resigned 14/12/90)
Dr N. A. Roberts, M.B., B.S., M.R.C.Path., F.R.C.P.A.
Dr J. Donlon,* M.B.B.S., F.R.C.P.A.

Visiting Consultant Physicians

Dr A. Ambikapathy, M.B., Ch.B., D.T., M.&H., M.R.C.P.,
F.R.A.C.P.
Dr J. Stickland, M.B., B.S., F.R.A.C.P.
Dr G. Phelps,* M.B.B.S., F.R.A.C.P.

Visiting Consultant Psychiatrist

Dr T. B. Stephens, B.Sc., M.B.B.Chr., F.R.C.P.,
F.R.C.Psych., F.R.A.N.Z.C.P.

Visiting Oncologist and Haematologist

Dr R. Bell,* M.B.B.S., F.R.A.C.P., F.R.C.P.A.

Visiting Consultant Radiologist

Dr R. House, M.B., B.S., Dip.Obst., R.C.O.G., M.R.A.C.R.
Dr R. Wilkie,* M.B.B.S., M.R.A.C.R., F.R.A.C.R.
Dr J. Mullany,* M.B.B.S., M.R.A.C.R.
Dr I. Goy,* M.B.B.S., F.R.A.C.R., F.R.A.C.P.

Visiting Consultant Rheumatologist

Dr K. Boyden, M.B., B.S., F.R.A.C.P.

Visiting Dental Staff

Dr D. L. Lye, B.D.S., B.D.Sc.
Dr C. G. Reid, B.D.S.
Dr J. F. H. Williams, B.D.S., F.R.A.C.D.S.
Dr M. Zabik,* B.D.S.
Dr G. Robertson,* B.D.S.

* New appointments 1991

Department Heads 1990/91

Deputy Nursing Director

Mrs J. Meek, R.N., R.M., A.C.N.(N.S.W.)

Physiotherapy

Ms L. Douglas, Dip.Physio., M.A.P.A.

Mrs D. Evans, B.App.Sci.Physio; M.A.P.A.

Miss C. Wade, B.App.Sci.Physio; M.A.P.A.

Radiology

Mrs S. Veroude, M.I.R.

Podiatry

Mrs H. Davidson, H.A.Pod.A.

Dietitian

Mrs P. Marshman, B.Sc., Grad.Dip.Diet.

Audiologist

Miss M. Kalantzis, B.Sc.(Hon.), Dip.Aud.

Diabetic Educator

Mr F. Blake, R.N.

Occupational Therapist

Mrs J. Fuller, Dip.N.Z.O.T.

Social Worker

Mrs E. Bowen, B.A., Dip.Soc.Stud., T.S.T.C.

Medical Record Administration

Miss C. Gellert, B.A.Sc. M.R.A. (comm. 1/10/90)

Pharmacist

Mrs S. Gunnell, B.Pharm. (comm. January 1990)

Hospital Scientist

Ms R. Jansma, B.Sc., Haematology

Deputy Chief Executive Officer

Mr I. R. Calvert, Dip.Bus.Studies(Acc); A.A.S.A; C.P.A.

Administrative Officer (Accounting)

Mr L. Kent

Administrative Officer (Hospital Hygiene/Safety)

Mr R. Hemley

Executive Chef

Mr F. Upston (comm. 6/5/91)

Pay Officer

Mr M. P. Hosking

Engineering Foreman

Mr G. Martin

Buying Officer

Mr D. Guy



Members of disbanded Croquet Club presenting title of land to Foundation Chairman Mr Ken Dadswell.

Radiology

The Radiology Department has experienced another very busy year, achieving a 1.1% increase in patient attendances and total examinations performed compared to the previous year.

Tuesdays continue to be a very busy day with the screening and ultrasound session supervised by the Visiting Radiologist.

The purchase of a mobile phone for the Department has eased the burden of being on-call and allows for a far less restricted private life, as well as aiding in quicker communication and response time.

I look forward to commencing long service leave in October and Debbie Prout from Royal North Shore Hospital, Sydney, has been appointed as our locum.

SANDY VEROUDE
Medical Imaging Technologist



	<i>Patients</i>	<i>Examin.</i>	<i>Cost</i> \$	<i>Cost/Attend</i> \$	<i>Cost/Examin.</i> \$
88/89.	2,920	3,554	86,176	27.80	22.80
89/90.	3,036	3,666	105,799	34.85	28.86
90/91.	3,169	3,919	113,821	35.91	29.04

Pathology

Another busy and profitable year has passed in pathology. The Blood Bank collected 565 units of blood from generous donors, we are ever grateful to Evelyn Mason and her team of willing volunteers, without whom the laboratory would be greatly inconvenienced.

Quality Assurance has been on everybody's lips of late, and the laboratory is no exception. We undertake extensive quality control with every test performed and participate in external quality control pro-

grammes. With the current trend in this area, we find a greater portion of our time being allocated to this aspect of the laboratories function.

A major purchase in 1990/91 was the Sysmex K1000 automated blood cell analyser. This instrument replaced the eight year old analyser which required serum manual dilution, thereby increasing our exposure to the specimens.

The K1000 includes a LAB-REPORTER software package that has enhanced our reporting facilities

in terms of design and readability. The acquisition of a QC-REPORTER later in the year has streamlined the collating and graphing of all QC data, in accordance with the National Association of Testing Authorities (N.A.T.A.) requirements.

The year 1991/92 promises to be exciting, with the proposed resiting of the laboratory downstairs, and acquisition of further instrumentation to expand our testing capabilities.

REBECCA JANSMA
Hospital Scientist

	<i>Patient</i> <i>Attendance</i>	<i>I/P</i>	<i>O/P</i>	<i>Tests/</i> <i>Patient</i>	<i>Cost/</i> <i>Attendance</i>
1988/89	6,207	1,525	4,682	10.2	\$16.07
1989/90	6,271	1,776	4,495	9.0	\$18.60
1990/91	6,279	1,791	4,488	11.6	\$23.02

Physiotherapy

The Physiotherapy Department has had another busy twelve month period. Inpatient services (including Midwifery) continue to be the main function of the Physiotherapy Department and outpatient services areas always, a demanding area. There have been regular weekly physiotherapy sessions in Syme and Perry Wing over the past six months.

In October 1990, Doreen Bath a Masseur, joined our staff and works 2.5 days per week. Her services have been a welcome and successful addition to our department. At the time of Doreen's employment, Stawell District Hospital was the first public hospital in Victoria to employ a masseur.

During the latter part of the year Marie Cray, our physiotherapy assistant began her long service leave. For that period of time she has been replaced by two very competent part time assistants, Debbie Rathgeber and Elizabeth Notting.

The Pain Management Group was once again run successfully and as this report goes to print another Arthritis Self Help Course is being conducted. Concurrently being run is a new course on Osteoporosis Prevention and Self Management. This has proven to be extremely successful with so much interest shown that more classes will be run in the coming year. These two courses are run in conjunction with the Occupational Therapy Department. Introduced late in 1990 was a cardiac rehabilitation course, which is run by staff from nursing, physiotherapy and also the community health nurses from Grampians Community Health Centre. Physiotherapy continues to be involved in the hydrotherapy group each week with an increasing number of clients attending.

Work with the Schools' Integration Programmes this year has increased with one student at 502, three at Stawell West and two at Secondary College, all being seen on a regular basis. This work involves close liaison with integration teachers and aides, parents, school support centre, physiotherapists and nursing staff from Royal Children's and the Austin Hospitals, also the Occupational Therapist from Pennyweight Park in Ballarat.

Local facilities such as the gym and the pool at the Leisure Centre, and the gym at the Secondary College are a great asset. Some advances over the past twelve months are: a seven year old's ability to walk with crutches for the first time instead of

a large frame, the commencement of standing at eight years by another student, and several handicapped students learning to swim and be independent in the water.

The Physiotherapy Department is also involved with ongoing staff education on various topics, e.g. back care, correct transferring and lifting.

In the last year, we have had three physiotherapist students from Latrobe University, second, third year and fourth year, also involved in the training of an Allied Health Assistant student and on occasions work experience students were in our department to observe the role of the physiotherapist.

All physiotherapists have attended various ongoing educational programmes throughout the year. We have also held regular inservice sessions amongst ourselves on several topics. A video recorder acquired during the year has been used on some of these occasions. Wimmera Physiotherapy Group meetings are held once bi-monthly and regularly attended.

In October 1990, a \$5 facility fee per physiotherapy visit was introduced.

Late June 1991 saw us begin our move into Grampians Ward. The increased area allows for a much more private office area, larger treatment space and a storage facility. The pre-fab annexe will be used as a rehabilitation/gym area. It will become available to hospital staff to use as a gym also.

The department has been grateful for the donations of a portable mirror and model spinal column from groups within the community.

We look forward to the next twelve months in our extended premises.

	Patient Attendances	Cost per Attendance
1988/89 . .	7,348	\$11.10
1989/90 . .	4,497	\$18.66
1990/91 . .	5,098	\$23.07

CAROLINE WADE
LEIGH DOUGLAS
DEBBIE EVANS
Physiotherapists



Members of Allied Health Team - Ms C. Gellert, Mrs J. Fuller, Ms H. Davidson, Mrs S. Gunnell, Ms R. Jansma and Mr G. Savage.

Stawell District Hospital



FINANCIAL STATEMENTS

1990-91

CERTIFICATION

In our opinion the Financial Statements of the Stawell District Hospital comprising statement of sources and application of funds, balance sheet, consolidated statement of changes in equity, revenue and expense statement and notes to the financial statements have been prepared in accordance with the provisions of the Annual Reporting Act 1983 and the Annual Reporting (Contributed Income Sector) Regulations 1988 as amended.

In our opinion the Financial Statements present fairly the financial transactions during the year ended June 30, 1991 and the financial position as at that date of the Stawell District Hospital.

At the date of signing the Financial Statements we are not aware of any circumstances which would render any particulars included in the Statements to be misleading or inaccurate.

MR G. B. FULLER,
Chairperson

MR M. B. DELAHUNTY,
Chief Executive Officer

MRS J. A. BRILLIANT,
Member

MR I. R. CALVERT,
Principal Accounting Officer

Dated the 27th Day of August 1991

Stawell District Hospital

STATEMENT OF SOURCES AND APPLICATIONS OF FUNDS FOR THE YEAR ENDED JUNE 30, 1991

	<i>Notes</i>	<i>Total 1990/91 \$</i>	<i>Total 1989/90 \$</i>
SOURCES OF FUNDS			
Funds from operations			
Gross inflows of funds		6,456,293	6,294,182
Less Gross outflows of funds		6,303,082	5,810,531
Net funds from operations		153,211	483,651
Contributed Equity			
— Capital Grants	13	2,941,983	244,617
— Donations		308,176	257,183
		3,250,159	501,800
Decrease in Assets			
Current Assets			
— Cash at Bank and on Hand		—	1,445
— Patient Fees Receivable		14,070	—
— Stores		5,354	8,110
— Debtors and Accrued Revenue		—	52,317
		19,424	61,872
Non-Current Assets			
— Investments		736	292
— Plant and Equipment		1,446	4,920
— Vehicles		30,090	65,917
		32,272	71,129
Increase in Liabilities			
Current Liabilities			
— Creditors		162,427	—
— Accrued Expenses		85,287	16,136
— Patient Trust Accounts		1,067	—
		248,781	16,136
TOTAL SOURCES OF FUNDS		3,703,847	1,134,588

Stawell District Hospital

STATEMENT OF SOURCES AND APPLICATIONS OF FUNDS FOR THE YEAR ENDED JUNE 30, 1991

	<i>Notes</i>	<i>Total 1990/91 \$</i>	<i>Total 1989/90 \$</i>
APPLICATIONS OF FUNDS			
Increase in Assets			
Current Assets			
— Cash at Bank and on Hand		51,324	—
— Patient Fees Receivable		—	36,956
— Debtors and Accrued Revenue		17,959	—
— Short Term Investments		222,880	500,000
		292,163	536,956
Non-Current Assets			
— Land		60,000	64,727
— Buildings		2,937,234	166,294
— Plant and Equipment		239,909	65,171
— Office Furniture and Equipment		31,949	86,014
— Vehicles		35,992	108,453
		3,305,084	490,659
Decrease in Liabilities			
Current Liabilities			
— Creditors		—	30,553
— Patient Trust Accounts		—	2,805
— Bank Overdraft		59,642	17,843
		59,642	51,201
Payment of Long Service Leave		46,958	55,772
TOTAL APPLICATION OF FUNDS		3,703,847	1,134,588

Stawell District Hospital

BALANCE SHEET AS AT JUNE 30, 1991

	Notes	Hospital \$	Nursing Home \$	Total 1990/91 \$	Total 1989/90 \$
EQUITY					
Capital					
Contributed Capital		7,913,551	420,034	8,333,585	5,213,894
Funds held for Restricted Purposes	3	884,913	—	884,913	523,767
Funds held in Perpetuity		1,205	—	1,205	1,205
Retained Surplus/(Accumulated Deficit)		(1,088,883)	(235,623)	(1,324,506)	(971,098)
TOTAL EQUITY		<u>7,710,786</u>	<u>184,411</u>	<u>7,895,197</u>	<u>4,767,768</u>
CURRENT LIABILITIES					
Bank Overdraft		—	—	—	59,642
Creditors	2	256,794	17,844	274,638	112,211
Accrued Expenses	5	363,826	130,313	494,139	408,852
Provision for Long Service Leave	4	48,500	11,500	60,000	60,000
Monies held in Trust	6	—	7,053	7,053	5,986
TOTAL CURRENT LIABILITIES		<u>669,120</u>	<u>166,710</u>	<u>835,830</u>	<u>646,691</u>
NON CURRENT LIABILITIES					
Provision for Long Service Leave	4	442,795	103,668	546,463	479,257
TOTAL NON-CURRENT LIABILITIES		<u>442,795</u>	<u>103,668</u>	<u>546,463</u>	<u>479,257</u>
TOTAL LIABILITIES		<u>1,111,915</u>	<u>270,378</u>	<u>1,382,293</u>	<u>1,125,948</u>
TOTAL EQUITY AND LIABILITIES		<u>8,822,701</u>	<u>454,789</u>	<u>9,277,490</u>	<u>5,893,716</u>
CURRENT ASSETS					
Cash at Bank and on Hand		51,913	61	51,974	650
Patient Fees receivable	7	92,726	58,734	151,460	165,530
Stores	8	39,731	—	39,731	45,085
Debtors and accrued revenue	9	361,515	(308,830)	52,685	34,726
Short-Term Investments	10	1,102,390	76,490	1,178,880	956,000
TOTAL CURRENT ASSETS		<u>1,648,275</u>	<u>(173,545)</u>	<u>1,474,730</u>	<u>1,201,991</u>
NON-CURRENT ASSETS					
Investments	10	4,404	—	4,404	5,140
Land	11	146,727	—	146,727	86,727
Buildings	11	5,977,222	481,805	6,459,027	3,521,793
Plant and Buildings	11	796,862	146,529	943,391	819,912
Office Furniture and Equipment	11	117,654	—	117,654	111,822
Motor Vehicles	11	131,557	—	131,557	146,331
TOTAL NON-CURRENT ASSETS		<u>7,174,426</u>	<u>628,334</u>	<u>7,802,760</u>	<u>4,691,725</u>
TOTAL ASSETS		<u>8,822,701</u>	<u>454,789</u>	<u>9,277,490</u>	<u>5,893,716</u>

Stawell District Hospital

CONSOLIDATED STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED JUNE 30, 1991

	<i>Notes</i>	<i>Contri- buted Capital</i>	<i>Funds Held for Restricted Purposes</i>	<i>Funds Held in Perpetuity</i>	<i>Retained Surplus Accum. Deficit</i>	<i>Total 1990/91</i>	<i>Total 1989/90</i>
		\$	\$	\$	\$	\$	\$
Balance at beginning of the year		5,213,894	523,767	1,205	(971,098)	4,767,768	4,285,744
Surplus/(Deficit) for the year		—	—	—	(122,730)	(122,730)	(19,776)
Capital Receipts							
— Donations	1(p)	102,171	206,005	—	—	308,176	257,183
— Capital Grants	13	2,941,983	—	—	—	2,941,983	244,617
Transfers to Reserves	12	—	230,678	—	(230,678)	—	—
Other							
Transfer between funds		75,537	(75,537)	—	—	—	—
Balance at end of the year		8,333,585	884,913	1,205	(1,324,506)	7,895,197	4,767,768

Stawell District Hospital

REVENUE AND EXPENSE STATEMENT FOR THE YEAR ENDED JUNE 30, 1991

	Notes	Hospital \$	Nursing Home \$	Total 1990/91 \$	Total 1989/90 \$
OPERATING REVENUE PROVIDING FUND INFLOWS					
HSA/Budget Sector					
Government Grants	13	4,377,971	293,260	4,671,231	4,299,458
Indirect contributions by Health Department Victoria.	14	46,829	11,707	58,536	66,342
Patient Fees	7	372,997	800,291	1,173,288	1,264,879
Recoupment from private practice for use of hospital facilities.		146,855	—	146,855	178,069
Other Revenue.	15	69,882	—	69,882	112,177
Abnormal income - prior year grant	19	(3,400)	3,400	—	(700)
Services supported by Hospital and Community Initiatives					
Private practice fees		59,305	—	59,305	73,619
Interest		161,722	—	161,722	129,417
Other Revenue.	16	115,474	—	115,474	170,921
TOTAL OPERATING REVENUE PROVIDING FUND INFLOWS.		5,347,635	1,108,658	6,456,293	6,294,182
LESS OPERATING EXPENSES REQUIRING FUND OUTFLOWS					
HSA/Budget Sector					
Direct Patient Care Services		2,101,129	693,995	2,795,124	2,490,259
Diagnostic and Medical Support Services		576,409	32,510	608,919	579,006
Administration and Quality Assurance.		615,717	24,254	639,971	555,391
Engineering and Maintenance		230,035	28,425	258,460	298,456
Domestic and Catering Services.		931,492	305,317	1,236,809	1,183,370
Corporate Costs Funded by HDV		46,829	11,707	58,536	66,342
Workcare and Superannuation.		276,282	80,247	356,529	328,225
Teaching and Research.		4,715	—	4,715	21,969
Community Services		218,916	—	218,916	177,826
Other - Day Care Centre		115,345	—	115,345	97,714
Services supported by Hospital and Community Initiatives					
Private practice diagnostic services.		9,758	—	9,758	11,973
TOTAL OPERATING EXPENSES REQUIRING FUND OUTFLOWS	18	5,126,627	1,176,455	6,303,082	5,810,531

Stawell District Hospital

REVENUE AND EXPENSE STATEMENT FOR THE YEAR ENDED JUNE 30, 1991

	<i>Notes</i>	<i>Hospital</i>	<i>Nursing Home</i>	<i>Total 1990/91</i>	<i>Total 1989/90</i>
		\$	\$	\$	\$
OPERATING SURPLUS (DEFICIT) ATTRIBUTABLE TO FUND ITEMS		221,008	(67,797)	153,211	483,651
Less Operating Expenses Not Requiring Fund Outflows					
Depreciation	11	143,426	18,351	161,777	128,016
Long Service Leave Entitlements					
— Current Year		78,461	35,703	114,164	95,396
— Abnormal Item	1(g)	—	—	—	280,015
OPERATING SURPLUS (DEFICIT) ATTRIBUTABLE TO NON FUND ITEMS		221,887	54,054	275,941	503,427
Operating (Deficit) Surplus for the Year		(879)	(121,851)	(122,730)	(19,776)
Retained surplus (Accumulated Deficit) at July 1, 1990		(857,326)	(113,772)	(971,098)	(752,544)
Amount available for appropriation		(858,205)	(235,623)	(1,093,828)	(772,320)
Aggregate of amounts transferred to reserves	12	(230,678)	—	(230,678)	(198,778)
Retained surplus (Accumulated Deficit) at June 30, 1991		(1,088,883)	(235,623)	(1,324,506)	(971,098)

Stawell District Hospital

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1991

NOTE 1: STATEMENT OF ACCOUNTING POLICIES

The financial statements of the hospital have been prepared in accordance with the provisions of the Annual Reporting Act 1983 and the Annual Reporting (Contributed Income Sector) Regulations 1988 as amended. The Regulations incorporate by reference relevant accounting standards issued jointly by the Institute of Chartered Accountants in Australia and the Australian Society of Certified Practising Accountants.

(a) Accrual basis

Except where otherwise stated, these financial statements have been prepared on the accrual basis whereby revenues and expenses are recognised when they are earned or incurred, and brought to account in the period to which they relate.

(b) Historical cost basis

The financial statements have been prepared on the historical cost basis whereby assets are recorded at purchase price plus costs incidental to the acquisition and do not take into account changing money values nor the current cost of non-current assets (unless specifically stated).

(c) Rounding off

All amounts shown in the financial statements are expressed to the nearest dollar.

(d) Investments

Investments are valued at cost and are classified between current and non-current assets based on the Hospital Board of Management's intentions at balance date with respect to timing of disposal of each investment. Interest revenue from investments is brought to account when it is earned.

(e) Depreciation

Assets with a cost in excess of \$1,000 are capitalised and depreciation has been provided on depreciable assets so as to allocate their cost or valuation over their estimated useful lives using the diminishing value method. This depreciation charge is not funded by the Health Department Victoria.

The Annual Reporting (contributed Income Sector) Regulations require buildings to be depreciated in accordance with Australian Accounting Standard AAS 4 Depreciation of Non-Current Assets. Arrangements are being made with the Valuer-General to value the land and buildings so that a basis for depreciation can be established. This valuation has not, as yet, been undertaken. Consequently, buildings have not been depreciated in the 1990/91 financial statements. The effect of this departure from the accounting standards on the accounts has not been quantified.

(f) Stores

Inventories are stated in the Balance Sheet at the lower of cost and net realisable value. Cost is determined principally by first-in, first-out method.

(g) Employee Entitlements

Long Service Leave

Provision for long service leave is made on a pro-

rata basis for all employees who have completed five or more years of service. Generally, the entitlement under various awards becomes payable upon completion of ten years service. The proportion of long service leave estimated to be payable within the next financial year is included in the Balance Sheet under Current Liabilities. The balance of the provision is classified as a Non-Current Liability. An adjustment to the provision of \$280,015 was required in 1989/90 to recognise long service leave entitlements for employees with in excess of five years service, as previously only entitlements for employees with ten years service or more was recognised.

Annual Leave

The hospital's accrued liability for annual leave at June 30, 1991 is classified as a current liability.

Accrued Days Off

The Hospital's obligation in respect of accrued days off not yet taken at June 30, 1991 is classified as a current liability.

(h) Superannuation

All eligible employees contribute to the Hospital's Superannuation Fund established under section 10 of the Hospital Superannuation Act 1965.

(i) Nursing Home

The Perry Wing Nursing Home is controlled by a separate Committee of Management and is substantially funded from Commonwealth bed day subsidies.

The Nursing Home operations are an integral part of the hospital and share its resources. An apportionment of land and buildings has been made based on floor space. The results of the two operations have been segregated based on actual revenue earned and expenditure incurred by each operation.

(j) Donations

Donations for capital purposes are recognised as Contributed Capital in the Balance Sheet and Consolidated Statement of Changes in Equity.

(k) Fund Accounting

The Hospital operates on a fund accounting basis and maintains three funds, operating, specific purpose and capital funds. The Hospital's Capital and Specific Purpose Funds comprise unspent capital donations and receipts from fund-raising activities conducted solely in respect of these funds. Separation of these funds from the Operating Fund is required under the Health Services Act 1988.

Stawell District Hospital

(l) Health Services Agreement/Budget Sector and Services supported by Hospitals and Community Initiatives

The activities classified under the Health Services Agreement/Budget Sector are affected by Health Department Victoria funding while the Hospital and Community initiatives are funded by the Hospital's own activities or local initiatives.

(m) Revenue Recognition

Revenue is recognised at the time when goods are sold or services rendered.

(n) Non-Current Assets

The gross proceeds of sale of non current assets have been included as operating revenue providing inflows while the written down value of the assets sold has been shown as an operating expense requiring fund outflows.

(o) Private Practice Fees

The apportionment of private practice fees between the hospital and medical practitioners is based on

the average of arrangements between the above parties.

(p) Stawell District Hospital Foundation

The Stawell District Hospital Foundation was established pursuant to a trust deed dated 18/12/89. The Foundation is administered by seven trustees. Contained within the trust deed is the requirement that the hospital be the sole beneficiary of the trust.

Consequently the affairs of the Foundation have been incorporated into the Financial Statements of the Hospital as from July 1, 1990. Its assets, liabilities, revenue and expenses have been included at the values shown in their audited annual financial statements. The amounts are disclosed as Funds held for Restricted Purposes. The accumulated funds of the Foundation at 1/ 7/1990 of \$57,326 have been included as capital donations in Funds held for Restricted purposes.

NOTE 2: CREDITORS AND BORROWINGS

Creditors*		<i>Less than 1 Year</i>
		\$274,638

* No amount is owing as a result of public borrowing or financial accommodation.

NOTE 3: FUNDS HELD FOR RESTRICTED PURPOSES

	1990/91	1989/90
	\$	\$
Capital Replacement	457,297	306,390
Education	1,082	1,964
Other — Pathology Fund	211,208	180,600
Other — Radiology Fund	51,980	33,467
Other — Physiotherapy Fund	10,472	1,346
Other — Foundation	152,874	—
Total	884,913	523,767

NOTE 4: PROVISION FOR LONG SERVICE LEAVE

	<i>Current</i>	<i>Non- Current</i>	<i>Total</i>	<i>Total</i>
	\$	\$	1990/91 \$	1989/90 \$
Long Service Leave	60,000	546,463	606,463	539,257

NOTE 5: ACCRUED EXPENSES

	1990/91	1989/90
	\$	\$
Accrued Salary and Wages	156,733	125,377
Annual Leave	323,209	272,950
Accrued Days Off	14,197	10,525
Total	494,139	408,852

Stawell District Hospital

NOTE 6: MONIES HELD IN TRUST

	1990/91	1989/90
	\$	\$
Patient monies held in trust	7,053	5,986

The hospital does not maintain a separate bank account for these funds. The amount is contained within the Hospital's Operating Account.

NOTE 7: PATIENT FEES

	<i>Patient Fees Raised</i>		<i>Patient Fees Receivable</i>	
	<i>1990/91</i>	<i>1989/90</i>	<i>As at 30/6/91</i>	<i>As at 30/6/90</i>
	\$	\$	\$	\$
Inpatients	333,216	471,353	88,825	102,851
Outpatients	22,445	16,088	6,307	8,252
Nursing Home	800,291	761,067	58,734	58,306
Day Care Centre and District Nursing	17,336	16,371	—	—
Total	1,173,288	1,264,879	153,866	169,409
Less Provision for doubtful debts			2,406	3,879
Net patient fees receivable			151,460	165,530

Commonwealth Nursing Home inpatient benefits are included inpatient fee revenue. During the year, bad debts of \$4,106 were written off against the provision for doubtful debts for patient fees.

NOTE 8: STORES

	1990/91	1989/90
	\$	\$
Pharmaceuticals	12,592	14,255
Catering supplies	5,926	7,072
Housekeeping supplies	2,365	2,440
Medical and surgical lines	18,632	21,067
Engineering stores	216	251
Total	39,731	45,085

NOTE 9: DEBTORS AND ACCRUED REVENUE

	<i>Less than 1 Year \$</i>	<i>Greater than 1 Year Less than 2 Years \$</i>	<i>Total 1990/91 \$</i>	<i>Total 1989/90 \$</i>
Pathology and Radiology Debtors	25,200	189	25,389	35,300
HDV Grants	17,400	—	17,400	(16,300)
S.A.A.S. Grant	—	—	—	3,333
Accrued Interest	13,278	—	13,278	17,070
Total			56,067	39,403
Less Provision for doubtful debts				
— Pathology & Radiology Debtors			3,382	4,677
Net debtors & accrued revenue			52,685	34,726

During the year, bad debts of \$4,791 were written off against the provision for doubtful debts for Pathology and Radiology.

Stawell District Hospital

NOTE 10: INVESTMENTS

	Capital Fund \$	Specific Purpose Fund \$	Endowment Fund \$	Found- ation \$	Total 1990/91 \$	Total 1989/90 \$
Current						
Bank Term Deposits	474,980	615,000	—	88,500	1,178,480	956,000
S.E.C.	400	—	—	—	400	—
	475,380	615,000	—	88,500	1,178,880	956,000
Non-Current						
Victoria Bonds	—	—	1,205	—	1,205	1,205
S.E.C.	3,199	—	—	—	3,199	3,935
	3,199	—	1,205	—	4,404	5,140
Total	478,579	615,000	1,205	88,500	1,183,284	961,140

NOTE 11: NON-CURRENT ASSETS

	At Cost \$	Deprecia- tion for 1990/91 \$	Accum. Deprecia- tion at 30/6/91 \$	Net Assets 30/6/91 \$	Net Assets 30/6/90 \$
Land	146,727	—	—	146,727	86,727
Buildings	6,459,027	—	—	6,459,027	3,521,793
Plant and Equipment	1,865,603	114,985	922,212	943,391	819,912
Office Furniture & Equipment	184,973	26,117	67,319	117,654	111,822
Motor Vehicles	148,409	20,675	16,852	131,557	146,331
Total	8,804,739	161,777	1,006,383	7,798,356	4,686,585

NOTE 12: TRANSFERS TO RESERVES

	1990/91 \$	1989/90 \$
Income derived by Foundation	95,448	—
Income derived by Special Purposes Account	135,230	198,778
Total	230,678	198,778

The above income represents the Net Surplus on the Foundation Account and the Special Purposes Account after taking into account all Income and Expenditure.

Stawell District Hospital

NOTE 13: GOVERNMENT GRANTS

	1990/91	1989/90
	\$	\$
HDV Ordinary Grants	4,493,700	4,121,900
HDV Other Grants		
— Home Nursing	93,084	82,417
Grants received from other State Departments		
— Subsidised Wages Scheme	—	18,828
— Day Care Centre	84,447	76,313
Total Operating Grants	4,671,231	4,299,458
Capital Grants		
— Minor Works	16,000	17,000
— Building	2,860,103	212,617
— Furniture & Equipment	65,880	15,000
Total Capital Grants	2,941,983	244,617
TOTAL GOVERNMENT GRANTS	7,613,214	4,544,075

Grants for capital purposes are included in the statement of changes in equity and are included in the balance sheet as contributed capital.

NOTE 14: INDIRECT CONTRIBUTION BY HEALTH DEPARTMENT VICTORIA

The Health Department Victoria makes certain payments on behalf of the hospital. These amounts have been brought to account in determining the operating result for the year by recording them as non-cash revenue and expenses.

	1990/91	1989/90
	\$	\$
Audit Fees	7,760	12,170
Workcare threshold insurance (to Dec. 31, 1989)	—	5,417
Insurance	36,112	34,123
Industrial Relations Service	1,555	1,443
Hospital computing service charges	13,109	13,189
Total	58,536	66,342

NOTE 15: OTHER REVENUE - HSA/BUDGET SECTOR

	1990/91	1989/90
	\$	\$
Meals & Accommodation	19,808	19,342
Meals on Wheels	13,340	12,323
Bad Debts Recovered	975	1,118
Proceeds from sale of non-current assets	34,703	75,391
Sale of surplus goods	1,056	4,003
Total	69,882	112,177

The profit on sale of non-current assets was \$3,167.

Stawell District Hospital

NOTE 16: OTHER REVENUE - HOSPITAL AND COMMUNITY INITIATIVES

	1990/91 \$	1989/90 \$
Commission	360	464
Rent Equipment	9,360	9,360
Donations (excluding capital receipts)	102,379	158,736
Sundry	3,375	2,361
Total	115,474	170,921

NOTE 17: SEGMENT REPORTING

	Segment Revenue \$	Surplus/ Deficit \$	Segment Assets \$
Segment			
Hospital	5,252,087	(126,808)	8,669,827
Nursing Home	1,108,658	(121,851)	454,789
Total Hospital and Nursing Home	6,360,745	(248,659)	9,124,616
Foundation	95,548	95,448	152,874
Total consolidated amount	6,456,293	(153,211)	9,277,490

NOTE 18: OPERATING EXPENSES

	1990/91 \$	1989/90 \$
Direct Patient Care Services		
Wards	1,894,453	1,581,655
Theatre	133,211	150,290
Nursing Home	693,995	679,418
Outpatients	73,465	78,896
Total	2,795,124	2,490,259
Diagnostic and Medical Support Services		
Pharmacy Supplies	99,214	85,057
Medical Records	60,600	42,368
Diagnostic Laboratory Service	147,723	172,679
Organ Imaging - Radiography	113,408	108,113
Allied Health/Tech. Support	187,974	170,789
Total	608,919	579,006
Administration and Quality Assurance		
General Administration	520,206	466,104
Nursing Administration	119,765	89,287
Total	639,971	555,391
Engineering and Maintenance	258,460	298,456
Domestic and Catering Services		
Food and Dietary Services	698,140	493,117
Domestic Services	373,432	534,839
Residences	12,930	12,050
Linen Laundry Sewing	152,307	143,364
Total	1,236,809	1,183,370

Stawell District Hospital

NOTE 19: ABNORMAL ITEMS

	1990/91	1989/90
	\$	\$
Abnormal income		
— Prior year grant	—	(700)

NOTE 20: CAPITAL WORKS COMMITMENTS

	1990/91	1989/90
	\$	\$
South Ward Development	20,731	3,031,714
Staff Cafeteria	80,697	163,311
Total	101,428	3,195,025

NOTE 21: UNFUNDED SUPERANNUATION LIABILITY

- (i) The Stawell District Hospital contributes to the Hospitals' Superannuation Fund for all eligible employees.
- (ii) The notional share of unfunded superannuation liability attributable to the Stawell District Hospital as at June 30, 1991 as advised by the Hospital's Superannuation Board is \$811,000.
- (iii) During the 1990/91 financial year the Stawell District Hospital's contributions to the Hospitals' Superannuation Fund totalled \$203,651.
- (iv) There are no contributions outstanding in respect of the 1990/91 financial year payable by the Stawell District Hospital to the Hospitals' Superannuation Fund.
- (v) In accordance with Section 20(2)(a) of the Hospital's Superannuation Act 1988, contributions of the institution are calculated as a percentage of the employee's salary. Separate contributions are determined for basic benefits and optional contributory benefits in accordance with Section 29(3). The rates for 1990/91 are, for all Class A participating institutions:

<i>Basic Benefit</i>	<i>Contributory</i>	
	<i>Employee</i>	<i>Employee</i>
3.5%	3%	5.5%
	6%	11.5%

Auditor-General's Report



AUDITOR-GENERAL'S REPORT

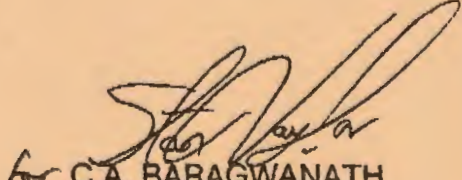
The accompanying financial statements comprising revenue and expense statement, balance sheet, statement of sources and applications of funds, consolidated statement of changes in equity and notes to the financial statements of the Stawell District Hospital have been audited as required by the *Annual Reporting Act 1983* and in accordance with Australian Auditing Standards.

The Hospital did not maintain a record of the value of Crown land under its control and consequently this asset was not included in the balance sheet. As the Crown land represents a significant resource utilised by the Hospital in the carrying out of its activities, it is my opinion that the land should have been valued and recorded as an asset in the balance sheet.

The Hospital has not provided for depreciation on buildings valued at \$6 459 027 in the balance sheet. This practice is a departure from Australian Accounting Standard AAS4 *Depreciation of Non-Current Assets*. In my opinion, depreciation, which allocates the cost of an asset over its useful life, should have been provided on these items and included as an operating expense in the revenue and expense statement.

In my opinion, except for the effect on the financial statements of the matters referred to above, the financial statements comply, in all material respects, with the requirements of the *Annual Reporting Act 1983*, and present fairly the state of the affairs of the Stawell District Hospital as at 30 June 1991 and the results of its operations for the year ended on that date in accordance with Statements of Accounting Concepts and Australian Accounting Standards.

MELBOURNE
8 / 10 / 1991


for C.A. BARAGWANATH
Auditor-General

Occupational Therapy

This department is a continually expanding one. We have now had a full year with the Day Centre in its present venue, in Wimmera Street, and extended client times.

Clients attendances have increased and the Day Centre is an important part of the community for a growing number of people.

Day Centre Co-Ordinator Zena Appleby has been on study leave since April and in this time has been very ably replaced by Fran Anyon.

The Nursing Home Activity Programme has been varied and interesting throughout the year. With the closing of the Grampians Wing as a ward, this department plans to extend into that area and run a Day

Activity Centre for both nursing home and hospital patients. It will also provide an area for daily living skills assessment and activities to be carried out.

The outpatient service continues to grow and will be a continually expanding area as people remain longer in their own homes and in the future will require the services of a full time Occupational Therapist.

During the year I have attended regional occupational therapy meetings and attended appropriate workshops and seminars. We have had students seeking work experience in the occupational therapy field and an Allied Health Assistant in training.

Classes for Arthritis Self Management

have been held and a first Osteoporosis Prevention and Self Management Course is underway. These and the Hydrotherapy Group are run in conjunction with physiotherapy.

Again I have been involved with three Healthy Lifestyle Holidays.

Being in a part time position I greatly appreciate and rely on the support and assistance given to me by other allied health team members and the staff under the Occupational Therapy umbrella.

JOCELYN FULLER
Occupational Therapist

Day Centre

Funded with assistance from the Home and Community Care Programme the Stawell District Hospital Day Centre aims to provide a service to our ageing population as well as to younger members of our community who may need a support network which aims to encourage socialisation, offers opportunity for the learning of new skills and provides an environment which may act as a respite care service to our community's "carers".

During the 1990/91 year our centre has offered one or all of the above services to over fifty members of our community. Members attend up to five days of each week and experience activities ranging from physical exercise and mental stimulation to

craft activities and outings in our community and its districts. Members are provided with a meal, prepared in our hospital kitchen, which ensures at least one substantial meal in our members day: often this being an important aspect of their day at Day Centre.

In our Day Centre we are fortunate to have the support of a most dedicated staff in Elizabeth McKenzie, Bev Spencer, Moira Hateley, Rose Hale, Graham Carr and, of course, Zena Appleby (presently on study leave), all of whom contribute greatly to the success of the programmes offered to members each day and in meeting our aim of providing a welcoming, homely atmosphere.

I am sure that during the past year Day Centre has provided much support to its members, helping each member in many and varied ways toward maintaining their lives in our community, but more importantly in their own homes.

Special thanks are extended to Kingston's Bus Service, Stawell Taxis and our Hospital kitchen staff for their assistance over the past year.

FRAN ANYON
Acting Co-Ordinator

Pharmacy

The financial year has once again come to an end and I find that the Pharmacy Department has had a busy and expensive year. Drug expenditure has been on the increase due to a definite increase in the use of more expensive drugs.

Three areas where there has been a significant increase are:

- The use of Ciproxin. A new antibiotic drug used to replace other injectable medications, because of a decrease in side effects and better patient compliance.
- Significant increase in theatre cases. The Stawell District Hospital conducts more day cases, by visiting specialist than many major hospitals. As a result an-

aesthetics which are expensive drugs are on the increase.

- Increase in the use of Streptokinase, a life saving drug used for myocardial infarction.

Due to an ever increasing incidence of cardiac conditions in our society, the use of this drug is on a definite increase and will continue to do so over the coming years.

Streptase is the cheapest of all drugs in this class at \$190 per dose, however other more expensive drugs of this type may need to be stocked in the future.

The end of June saw the completion of the new Pharmacy Department on the ground floor of the hospital. The

new department will enable easier access by all staff concerned. A pharmacy computer system will be set up early in the new financial year, which will enable greater control and distribution of stock throughout the hospital.

Over the next twelve months the Pharmacy Department will continue to minimise stock levels, which will 'enable us' to minimise expense and minimise out of date stock.

I wish to thank all nursing staff for their co-operation over the last twelve months.

SUSAN GUNNELL
Pharmacist

Medical Record Administrator

The 1990/91 financial year has seen some changes in both personnel and facilities of the Medical Record Department.

I commenced work in October 1990 following the resignation of Pamela Williams earlier in the year. Many thanks to Kaye Henry, Nhill Hospital who maintained the medical record service in the absence of a permanent Medical Record Administrator.

Debbie Rathgeber has joined Rhonda McDonald, and Kim Collins has returned from maternity leave, to cover weekends and public holidays as a Ward Clerk. The week day Ward Clerk position is held by Darrelyn Gray.

The front office continues to provide valuable assistance in obtaining documentation for patients admissions and retrieval of medical records.

The completion of the Allan and Ivy Simpson Wing has enhanced the facilities offered by the hospital. The medical record storage has been relocated near the front office providing quick retrieval of records. Retention of my office in this area enables the entire record process to be completed in the one area.

The front office is upgraded and in a permanent position since moving three times in the last year and experiencing less than optimum working

conditions. Within the office a room to admit patients is provided for privacy.

Installation of a computer system has improved the storage and retrieval of hospital information, making greater efficiency of the medical record system.

As Quality Assurance Co-Ordinator I have continued the work Jan Kayler-Thomson has done so well in establishing a hospital-wide Quality Assurance Programme. During the forthcoming year all hospital departments will conduct studies that monitor their quality of patient care, either directly

or indirectly. Introductory sessions held for all staff and the regular departmental meetings actively involve all staff in quality assurance.

As the medical record is a vital source of information for quality assurance studies, a continual high standard in record keeping is essential to allow studies to be an accurate measure. This is an ongoing source of quality assurance in the Medical Record Department.

CAROLYN GELLERT
Medical Record Administrator



Geriatric Assessment Team

The Geriatric Assessment Team continues to provide assessment and support for frail, elderly people in the community as well as the Hospital. During the year ended 30/7/91 - seventy-five elderly persons have been assessed.

The Regional Geriatric Assessment Team, headed by Dr John Hurley is ably supported by the local team which is comprised of senior nursing staff, community nurses, social work, occupational therapist, physiotherapist, hostel supervisor and domiciliary services co-ordinator. Dr Hurley, with Sr June Lugg, visit Stawell fortnightly.

The Assessment process is a means of helping elderly persons, their families and their treating doctor make decisions about the elderly persons care at home or in making a move into hostel or nursing home care. The Assessment Team can assist in the implementation of those decisions.

The Geriatric Assessment Team works closely with the co-ordinator of the Linkages Programme, providing assessment of elderly people referred to the programme. The service has been important in targetting resources and services to those in greatest need and preventing too early an inappropriate admissions to

care.

With the ageing of the population, and with the rapid increase in numbers of persons aged 80 years plus, in this area, it is important that cost-effective services are planned to support people in the community.

EILEEN BOWEN
Convener

Social Work

Social work assistance to patients and their families has continued in the same way as in previous years. The provision of an office in the newly built wing makes the work easier and myself more accessible.

Over the past twelve months there has been involvement with an average of thirty patients per month, with an average of 128 contacts per month. This compares with the previous year, given fewer working hours.

The work includes assistance to patients with practical and financial matters, accessing resources and services and counselling. Convening the Discharge Committee and the

Geriatric Assessment Committee forms an important part of the workload, brings me into contact with patients and their families, and involves liaison with medical, nursing and allied health professional staff.

Stawell is fortunate to have had a Linkages Project established here. Linkages not only co-ordinates services but assists financially, enabling some people to remain in their own homes longer, deferring institutional care. There has been some overlap with the social workcase load, and I work closely with the Linkages Co-ordinator.

Support for nursing home residents continues through the "Friends of the

Nursing Home", as well as in practical matters and social stimulation activities.

In order to develop greater awareness and skills in the area of social casework, this year I have attended a Crisis Intervention Workshop, seminars on Death and Dying, and Grief Counselling. The "Great Expectations" Conference hosted by Queen Elizabeth Geriatric Centre focused on the needs of the elderly and provision of services.

EILEEN BOWEN
Social Worker



Members of Grampians Heart Beat group presenting cheque for \$2,000.
L to R: Mr R. Rickard, Mrs J. Brilliant, Ms J. Meek, Mr L. Kent and Mr R. Sanders.

Hygiene Department

The Hygiene Department has experienced another year in an uncertain economic climate.

Congratulations to the staff and supervisor Mrs Mullane who continue to provide a very high standard of service especially when their numbers have been reduced as a part of the 1990 cost saving initiative.

In achieving these staff reductions, it was necessary for all staff within the department to adopt a flexible approach to the work, and their input into the decision making process was invaluable in overcoming the many difficulties and problems as they occurred.

The Department continues to upgrade its equipment and during the year we introduced an ergonomic mop and bucket system and four cleaners' trolleys were also purchased.

Goals

The Department faces its biggest challenge to date with the need to operate more efficiently and economically due to strict budgetary controls.

Our main objectives for the forthcoming financial year are :

- To continue to conduct regular staff meetings
- To continue to develop our quality assurance programme

- To review and monitor chemicals usage
- To monitor and reduce linen usage
- To review the department work practices and resources
- Finally, we confirm our commitment to continue to provide the highest possible standard of disinfection, general clean appearance at a minimum cost.

R. D. HEMLEY
Admin. Officer

Catering Department

The objectives of the Food Services Department under the guidance of its new Executive Chef, Frank Upston, are to provide all residents and patients a well balanced, nutritious meal that should at all times be hot and well presented.

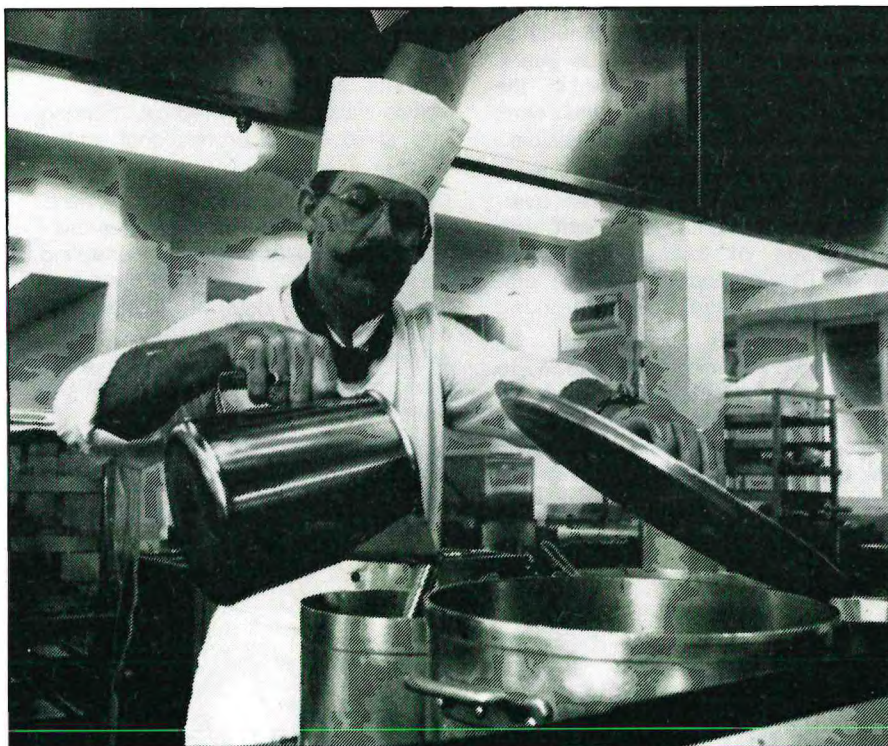
The departments role for the forthcoming year is to re-evaluate its aims and objectives, the introduction of formalised 'Quality Assurance' programme throughout the department whilst maintaining a high quality of meal service. Regular food service audits will be conducted on residents and patients meals.

Food purchases have remained within budget due mainly to bulk purchases of supplies and selectivity in the choice of suppliers according to the best price.

I would like to take this opportunity to thank the Y-Zetts for their kind donation of our new menu board for our new staff dining room which opened in June of this year.

Appreciation is expressed to all food service staff who work diligently to maintain a high standard of food service, cleanliness and safety.

FRANK UPSTON,
M.I.H.C., A.G.P.C.,
Executive Chef



Engineering and Gardening

The role of the Engineering Department is to maintain hospital buildings and structures in first class condition and to maintain equipment, furnishings and fittings for optimum availability and service. Also to ensure a safe hazard free and pleasant environment for patients, staff and visitors to the hospital. To achieve this the Engineering Department have developed a preventative maintenance programme for all plant, equipment, buildings and grounds. The programme appears to be working with 584 requisitions for service being completed in the past twelve months. This being 122 fewer than the previous year.

The Engineering Department have also worked closely with the builders and architects of the Simpson Wing, providing relevant information on existing services etc. to minimise disruption to the hospital during the period of redevelopment.

To further upgrade the hospital a new public and staff toilet block was built by the maintenance staff to replace toilets demolished to make way for a new medical records storage room. Extensive painting was also carried out in the Castle Wing area and Outpatients, Nursing Home and external areas of the hospital.

The Department also fitted non-slip safety vinyl to Nursing Home showers providing a safer environment for patients and staff.

The Gardening staff's function is to

create and maintain the hospital grounds in a safe and pleasant environment for the enjoyment of both patients and staff. Because of the steep incline all around the hospital this task is very difficult. The front entrance to the hospital is almost complete and should be of benefit in the future.

The completion of the Simpson Wing and Cafeteria has created large areas

to be landscaped so the gardeners will be very busy in the future.

In conclusion we would like to thank all departments, contractors and suppliers for their co-operation and support in the past year.

GARRIE MARTIN
Engineering Foreman



L to R: S. Rickard, D. Guy, S. Healy, G. Martin, P. Holmes and L. McClure.

Supply Department

Once again the Supply Department has experienced a very busy year, as a result of high activity levels in all Departments throughout the Hospital.

Prices generally have risen marginally on lines that are not included in contract arrangements with our major buying group The Victorian Hospitals Association, however on all goods supplied on contract arrangements, prices have remained steady on an

overall basis.

The major event of course that occurred during the year was the opening of Simpson Wing for surgical and midwifery patients. We have in operation the supply store to cover all requirements for this area, and we are pleased that the set up is working in a satisfactory manner to all parties concerned.

Another important happening was the

hospital being granted Accreditation.

Thanks to all staff for their help and co-operation during the year.

DAVID GUY
Buying Officer

Occupational Health and Safety

The Occupational Health and Safety Committee's dedication to accident prevention and rehabilitation of injured staff members has been rewarded with a 1.6155% workcare bonus for the 1991/92 financial year.

The Board of Management in ac-

knowledging the Safety Committees efforts have invited suggestions for where these funds may be applied to further improve the safety of our workplace.

One major issue facing the Safety committee in the forthcoming year

will be waste disposal as our gas fired incinerator may no longer be licenced from January 1, 1992.

R. D. HEMLEY
Safety Officer

Long Service Awards

In recognition of long and valued service to the hospital, the Board of Management is pleased to present long service awards to the following staff members:

RECOGNITION OF 10 YEARS SERVICE 1990/91:

Mrs D. Blackman10 Year Service Badge
 Mrs C. Brightwell10 Year Service Badge
 Mrs M. Cray10 Year Service Badge
 Mrs A. Davis10 Year Service Badge
 Mr R. Hemley10 Year Service Badge
 Mrs G. Owen10 Year Service Badge
 Mrs K. Petch10 Year Service Badge
 Mrs E. Peters10 Year Service Badge
 Mrs B. Redford10 Year Service Badge
 Mrs B. Savage10 Year Service Badge
 Miss Shirley Summerhayes . . .10 Year Service Badge
 Mrs M. Teasdale10 Year Service Badge
 Miss Julienne Upson10 Year Service Badge

PREVIOUS LONG SERVICE AWARDS:

Presented 1990:

Mrs R. Dunn20 Year Service Badge

Presented 1990:

Mrs A. Baulch10 Year Service Badge
 Mrs L. Boak10 Year Service Badge
 Mrs H. Delley10 Year Service Badge
 Mrs K. Holmes10 Year Service Badge
 Mr G. Pulley10 Year Service Badge

Presented 1982:

Mrs D. Evans20 Year Service Badge
 Mrs B. Smith20 Year Service Badge
 Mrs M. Allan10 Year Service Badge
 Mrs H. Jerram10 Year Service Badge
 Mrs N. Trask10 Year Service Badge

Presented 1983:

Mrs L. Carey10 Year Service Badge
 Mrs R. Dunn10 Year Service Badge
 Ms L. Ellen10 Year Service Badge
 Mrs M. Forster10 Year Service Badge
 Mrs F. Goodinge10 Year Service Badge
 Mrs M. Graham10 Year Service Badge
 Mrs K. Holloway10 Year Service Badge
 Mrs V. Kennedy10 Year Service Badge
 Mrs M. Kindred10 Year Service Badge
 Ms J. Mortyn10 Year Service Badge

Mrs G. Rickard10 Year Service Badge
 Mrs D. Simmons10 Year Service Badge
 Mrs J. Skurrie10 Year Service Badge
 Mrs F. Stewart10 Year Service Badge
 Mrs L. Willcock10 Year Service Badge

Presented 1984:

Mrs Betty (Isobel) Smith25 Years Gold Watch
 Mrs J. Boothman10 Year Service Badge
 Mrs L. (Sally) Howell10 Year Service Badge
 Mrs M. Perry10 Year Service Badge

Presented 1985:

Mrs L. Clayton10 Year Service Badge
 Mr K. Collins10 Year Service Badge
 Mrs S. Fletcher10 Year Service Badge
 Mr L. Kent10 Year Service Badge
 Mrs M. Prydderch10 Year Service Badge
 Mrs S. Rowe10 Year Service Badge

Presented 1986:

Mrs A. Bibby10 Year Service Badge
 Mrs R. D'Arcy10 Year Service Badge
 Mrs P. MacKay10 Year Service Badge
 Mrs P. Potter10 Year Service Badge
 Mrs Y. Richards10 Year Service Badge
 Mrs R. Smith10 Year Service Badge
 Mrs E. Wilson10 Year Service Badge

Presented 1987:

Mrs P. Cook10 Year Service Badge
 Mr D. Guy10 Year Service Badge
 Mrs C. Murphy10 Year Service Badge

Presented 1988:

Mrs M. Binger10 Year Service Badge
 Ms A. Cooper10 year Service Badge
 Mrs J. Gavin10 Year Service Badge
 Mrs M. McGaffin10 Year Service Badge
 Mrs B. McLeod10 Year Service Badge
 Mrs B. Naylor10 Year Service Badge
 Mrs K. Olerhead10 Year Service Badge
 Ms N. Sidebottom10 Year Service Badge
 Mrs D. Wilson10 Year Service Badge

Presented 1989:

Mrs D. Barry10 Year Service Badge
 Mrs P. Humphrey10 Year Service Badge
 Mrs C. Mullane10 Year Service Badge

Guest Speaker

PETER MICHAEL BYRNE, LLB

Peter Byrne was born in Ballarat in 1946 and his father had a legal practice known as T. E. Byrne & Co.

He was educated at Xavier College and in 1969 graduated with a Law Degree from Melbourne University.

He is a partner in a family firm of Byrne, Jones and Torney and has been President of the Ballarat and District Law Association and has also served as a member of the Victorian Law Institute Council.

In Peter's early years he specialised in business management. He has had a number of trips to the United States where he has studied. He has written and delivered a number of papers on Business Management which have been published in Australia, United States and United Kingdom.

In 1978 he was a key note speaker with the International Bar Association conference. Peter has specialised in advise to small business and is presently the Ballarat President of the Australian Small Business Association and a member of the Victorian Australian Small Business Association Council. He is a part time lecturer on small business management at the School of Mines in Ballarat, Inskill and Skill Share.

Peter is a member of the Wendouree Rotary Club and Past President of the Ballarat Apex Club.

Peter is married with five children and his hobbies include gardening, tennis, swimming, scuba diving and under water photography.



Members of Stawell Ladies Charity Group presenting cheque of \$1,122 for purchase of drug medication trolley.
L to R: Ms J. Meek, Mrs J. Healy and Mrs B. Court.

Foundation Chairman's Report

On behalf of my fellow Trustees, it gives me great pleasure to present the second annual report of Stawell District Hospital Foundation. The Foundation was established by deed, dated December 18, 1989. Since that date, the Foundation has received excellent support from individuals, groups and businesses from the local community.

The highlight for the year ended June 30, 1991, was the decision of the Stawell Croquet Club to transfer their land in Sloane Street to the Foundation. Members of the Croquet Club resolved in 1990 to disband their club due to lack of members, and rising costs. Whilst it is sad the club has disbanded members should be comforted in the knowledge that the funds from the sale of the land will benefit the local community. The Trustees resolved to place the land on the market and local real estate agents have been commissioned to undertake this task.

Another highlight of the year was the decision of the proprietors of the Wallaroo Wild Life Park, Liz and Colin Koenig to donate the benefits of their annual "Art of Wildlife" art exhibition to the Foundation. This was an extremely successful exhibition conducted during the Easter period, and the benefit to the Foundation was \$3,373 along with valuable promotion of the Foundation's objectives.

The Trustees were delighted that Western Mining Corporation Ltd. - Stawell Joint Venture renewed their pledge of \$9,000 for another year. This generous decision means that this corporation will have, by 1992, donated \$18,000 to the Foundation. The Trustees are appreciative of the Resident Manager, Mr. David Sheffield for his interest and support.

The first bequest to the Foundation occurred this year. This bequest of \$10,000 was from the estate of E. M. Gray. These funds are now securely invested and the principal will earn interest that will be applied at the Trustees' discretion to benefit and advance the Stawell District Hospital. This is one of the most attractive aspects of the Foundation, in that funds from estates will not be spent. The funds are pooled with the rest of the Foundation money and only the interest earned may be spent at some later date.

To all donors and supporters of the Foundation I extend the Trustees heartfelt thanks. It is apparent that adequate funding of our public hospitals is becoming increasingly difficult for governments. The objective of the Foundation is to provide an independent viable source of funds to be applied exclusively to assist in securing the present and future best interests of the Stawell District Hospital.

In conclusion I commend the attached financial report for reading.

You will note that the total income to the Foundation during the year was \$95,548. This total is a result of the Croquet Club land valued at \$60,000, donations \$27,787 and interest on investments of \$7,761.

The ongoing support of the community is sought and should further information be required, then please contact any of the Trustees or Foundation Secretary Michael Delahunty.

MR K. W. DADSWELL
Chairman of Trustees

BALANCE SHEET AS AT JUNE 30, 1991

	Notes	1990/91 \$	1989/90 \$
CURRENT ASSETS			
Cash at Bank . . .		3,453	16,367
Accrued Interest .		921	1,059
Investments 3		88,500	40,000
		92,874	57,426
TOTAL CURRENT ASSETS			
NON CURRENT ASSETS			
Land		60,000	—
		152,874	57,426
TOTAL ASSETS			
TRUST FUND			
Settled Sum		100	100
Accumulated		152,774	57,326
Surplus		152,874	57,426

The accompanying notes form part of and should be read in conjunction with these accounts.

PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED JUNE 30, 1991

	Notes	1990/91 \$	1989/90 \$
INCOME			
Donations		87,787	55,208
Interest		7,761	2,118
		95,548	57,326
LESS EXPENDITURE			
Audit Fees		100	—
		95,448	57,326
SURPLUS FOR THE YEAR			
ADD ACCUMULATED SURPLUS AT BEGINNING OF YEAR		57,326	—
ACCUMULATED SURPLUS AT END OF YEAR		152,774	57,326

The accompanying notes form part of and should be read in conjunction with these accounts.

Foundation Chairman's Report

NOTES TO AND FORMING PART OF THE ACCOUNTS FOR THE YEAR ENDED JUNE 30, 1991

1. STATEMENT OF ACCOUNTING POLICIES

The accounts of the foundation have been drawn up in accordance with the deed of settlement, the accounting standards and disclosure requirements of the Australian accounting bodies, and the requirements of law. They have been prepared on the basis of historical costs and do not take into account changing money values. Except where stated, the accounting policies have been consistently applied. Set out below is a summary of the significant accounting policies adopted by the trust in the preparation of the accounts.

(a) Accrual Accounting

The accounts have been prepared on an accrual basis, whereby income is recognised as earned and expenditure as incurred.

(b) Income Tax

The foundation is exempt from the requirement to pay Income Tax pursuant to Section 23 (j) (ii) of the Income Tax Assessment Act.

(c) Investments

Investments are valued at cost. Interest revenue from investments is brought to account as it is earned.

2. CREATION OF TRUST

A deed of settlement was executed on December 18, 1989 to establish The Stawell District Hospital Foundation. The purpose of the foundation is to establish a public charitable fund to which any person, corporation or association may contribute for the purpose of providing money, property and benefits to the Stawell District Hospital.

3. INVESTMENTS

	1990/91	1989/90
	\$	\$
Interest bearing bank deposits . . .	88,500	40,000

4. COMMITMENTS AND CONTINGENT LIABILITIES

At balance date, the trustees are unaware of any commitments or contingent liabilities not recorded or disclosed as at June 30, 1991.

AUDITOR'S REPORT TO THE TRUSTEES

We have audited the financial statements set out on pages 3 to 5 in accordance with Australian Auditing Standards.

In our opinion, the financial statements present fairly the financial position of the Stawell District Hospital Foundation at June 30, 1991 and the results of its operations for the year then ended in accordance with Australian Accounting Standards and comply with the provisions of the Deed of Settlement dated December 18, 1989.

COOPERS & LYBRAND
Chartered Accountants

G. D. Harry
Partner

Date : 7th September, 1991

THE STAWELL DISTRICT HOSPITAL FOUNDATION STATEMENT BY TRUSTEES

We, Graeme Smalbroke Bennett, Robert Norman Castle, Kenneth William Dadswell, William David O'Driscoll, Mary Patricia Gray, John David McCracken, and Christopher William Tilley, being the trustees of The Stawell District Hospital Foundation:

- (a) Believe the accounts set out on pages 3 to 5 give a true and fair view of the state of affairs of the trust as at June 30, 1991 and of its results for the year ended;
- (b) Believe we have complied with the terms of the Deed of Settlement, dated December 18, 1989.


Signed at Stawell this second day of September 1991.


G. S. BENNETT

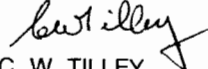

R. N. CASTLE


K. W. DADSWELL


W. D. O'DRISCOLL


M. P. GRAY


J. D. McCRACKEN


C. W. TILLEY



L to R: Dr N. Castle, Mr A. Howells (Founder), Mr K. Dadswell, Mr C. Tilley, Mrs P. Gray, Mr W. O'Driscoll, Mr D. McCracken, Mr G. Bennett.

Y-Zetts Report

It is with pleasure that I present the Stawell District Hospital Y-Zetts 14th Annual Report.

Once again, thanks to our hard working volunteer members we have managed to finish the year financially successful, which in itself is no mean feat considering the economic climate of the past twelve months.

I would like to personally thank our hospital Chief Executive Officer Michael Delahunty and his staff, Frank Upston and the kitchen staff for their invaluable help and co-operation whenever we needed them. Certainly our catering functions were greatly helped by the kitchen staff and we thank them most sincerely.

Our lolly trolley continues to provide a valuable service to the patients, thanks to the girls who have manned it and also my thanks to the Hospital Ladies Auxiliary and the Red Garters for their help also. We were fortunate to have had offered to us the services of the Stawell Charity Group who are willing to provide a back up service for us when at times our numbers get a little thin, we thank them most sincerely for their kind offer.

Our alternative day/night meetings seem to be the most popular option, allowing members to attend meetings at least once every two months if one or the other does not suit.

A big thank you also must go to Val Kennedy for providing the cake to be raffled at our monthly meeting and likewise to Rhonda Mellor for providing the cake to be raffled at Bingo. These raffles bring good revenue over twelve months.

The opportunity arose for us to take over the running of afternoon Bingo every alternate Wednesday. Due to the efforts of Sue Jennings this is now an up and running event providing us with a steady income each fortnight, thanks Sue.

Y-Zetts received a request from the Hospital for a new birthing bed and after consideration from members it was agreed to purchase same and for it to be our major project for the year. The final cost was \$19,000. The bed came into operation in November 1990 and is now in the new wing.

A payment of \$10,000 was handed over this year with the remaining amount to be paid within two years.

October 1990 saw the start of our fund raising activities for the year. A wedding with 136 guests followed by the Ladies Annual Grange Golf Club Dinner. Profits from these two func-

tions being \$2,316.

Early November saw the running of our Annual Oaks Day Luncheon. My thanks go to Lyn and Tony Kopacz for once again providing the venue at Magdala Lodge. Whilst not considered to be a fund raising event we never the less benefited to the sum of \$371 and a good time was had by all.

Our Christmas break-up and meeting was held at Casper's Mini World Restaurant, we then went into recess until February 1991.

March saw the running of several fund raisers, the first being to cater for a wedding for 117 guests and then the Ladies Tennis Club Dinner for 78. Comments were very favourable from both quarters with the amount raised being approximately \$2,188.

In June we catered for 420 Rotarians at their District Convention, special thanks to the very hard working members, their efforts were rewarded when we realised a profit of \$4,543.

The opening of the new Allan and Ivy Simpson Wing was the highlight of July and the Y-Zetts can feel proud that several items of equipment plus

the new bed have been funded by our organisation.

A small private function was also catered for at the end of the month, we provided a small supper which netted a profit of \$168.

As a token of our appreciation for all the help that we receive from the kitchen it was decided that we would fund the new Menu Board in the staff dining room. This has now been completed and compliments the dining room very well.

The Hospital gained a new Life Governor back in August and our congratulations go to Joan Brilliant on her well earned position.

My sincere thanks go to my executive, Myriam and Sue and to the deputies for their support and co-operation, likewise to all fellow members. I wish the incoming executive a very successful year.

ROSEMARY PERRY
President



Members of Y-Zetts presenting new birthing bed to Mr G. Fuller.
L to R: Mrs J. Crouch, Mrs J. Brilliant, Mr G. Fuller and Mrs R. Perry.

Ladies Auxiliary Annual Report

It is my pleasure to present the annual report of the Stawell District Hospital Ladies Auxiliary for 1990/91.

With the generous efforts of Auxiliary members and the continued support of the community of Stawell and District, we have again been able to run a variety of functions that have been well attended.

Many of our functions have become annual events.

Each year a luncheon followed by a parade of spring fashions is arranged by Mrs Earle and very well received. Our wine and savoury evenings, and dinner at the Magdala Motor Lodge, both boost our finances, and are great social nights for all.

We were pleased to accept the offer of Mrs June Price, for the use of her home for a morning coffee party. Visitors also much admired the beautiful garden.

Thanks to Mrs Edith Breier's expertise, our two card afternoons have proved very popular; keen card players travelling quite some distance. We again conducted a stall at the Lion's family fair. It was well stocked and helped our funds.

Auxiliary members catered for the lunches of Shire councillors for two months, also a supper after the visit of Dr Christopher Green.

A cosmetics demonstration after our last meeting was enjoyed by members and friends.

Our auxiliary is fortunate to have the continued support of organisations and individuals. The Stawell Bowling Ladies and Stawell Golf Lady Bowlers each donated the proceeds of their hospital days to us. Mr Herb Skurrie does a wonderful job with his collection tin. Many others help with goods for stalls, raffles etc. and an extra hand when needed. This help is very much appreciated.

We were very pleased to recently hand over a cheque for \$9,701 to the hospital for equipment and some adjustable chairs that will be of more comfort to patients. At the same time we were able to see through the new

wing of the hospital. This is a wonderful asset to our city and I congratulate all concerned.

My thanks to all office bearers and auxiliary members for their help throughout the year, all who have helped with the hospital trolley, the Stawell Times-News and the wonderful public of Stawell and District. My best wishes to all office bearers for the next twelve months.

BETTY HOWDEN
President



Members of S.D.H. Ladies Auxiliary presenting Dynamap blood pressure machine, costing \$6,000, to hospital.

Life Governors

BIBBY Mrs Mona
BENNETT Mr J. M.
BLAKE Mrs M.
BOATMAN Mrs Carol
BRILLIANT Mrs J. M.
CAMPBELL Mr N. C. A.
CASTLE Mrs E.
CASTLE Dr R. N.
COOTE Mrs J. C.
CROUCH Mrs J.
CROUCH Mrs N.
DADSWELL Mr K.
DAVIDSON Mrs H.
EIME Mrs A.
EVANS Mrs D. M.
EVANS Mrs M.
FRASER Mr W. G.
FRY Mrs D.

GAVAN Mrs I.
GILES Mrs Dorothy
GLOVER Mr J.
GRAY Mrs P.
GROSS Mrs B.
GYLES Mrs J.
HOWDEN Mrs B.
HOWELLS Mr A.
HUGHES Mrs J.
HUNT Mrs Betty
HUTCHINGS Mr C. J. (M.B.E.)
HUTCHINGS Mrs E. L.
JERRAM Mrs H. C.
KENNEDY Mrs V.
KINGSTON Mr F.
KUEHNE Mrs E.
LANGSFORD Miss J. G.
McKEY Mrs M.

McMULLIN Mr R. K.
MILLER Mrs K.
MIRANDA Mr C.
NEIL Mrs Edna
NEILSEN Mrs B.
NEUMANN Mrs I.
PICKERING Mrs M. D.
POTTER Mrs V.
ROBSON Mr M.
ROBSON Mrs M.
SMITH Mrs B. I.
STONE Mr R. C.
TEASDALE Mrs Kaye
WARD Mr F. C.
WEBB Mr J. H.
WEST Mrs Jan
YOUNG Mrs K.

Contributors

ANDERSON Mr & Mrs E. 27.75	GRAY Athole 500.00	S.D.H. Y-ZETTS 17,992.00
ANONYMOUS 5.00	GREAT WESTERN OLD TIME DANCE CLUB 200.00	SHIMITRAS Mr & Mrs J. M. 20.00
ANONYMOUS 8.00	HALLS GAP COMMUNITY COMMITTEE 1,800.00	SIBBETT Mrs 20.00
ANONYMOUS 20.00	HAMPTON D. & J. 5,000.00	SIMPSON - estate of late Allan Simpson 148,579.00
AUSTERBERRY Nartce 50.00	HELEN M. SCHUTT TRUST 35,000.00	SPRAKE Janet 25.00
AUSTRALIAN NATIVES ASSOC. 15.00	HINES H. W. & V. C. 20.00	SPRAKE Jim 25.00
BARTON Mr. 13.00	HOUSE Dr Bob. 500.00	STAWELL CLUB 313.00
BLAKE Rod & Meg. 20.00	HURLEY Mr & Mrs L. 25.00	STAWELL GOLF BOWLING CLUB 25.00
BREIER Mr & Mrs P. 50.00	KENNEDY J. W. & A. C. 100.00	STAWELL SHEEPBREEDERS ASSOC. 20.00
BRESNAHAN Charles 50.00	LANDSBOROUGH UNITING CHURCH LADIES GUILD 30.00	STEWART J. N. & M. D. 50.00
CARMICHAEL Mrs Ida. 5.00	LARKENS Mr R. 40.00	SWIFTS FOOTBALL CLUB 500.00
CLAYTON J & F. J. 10.00	LITTLE ATHLETICS CLUB. 20.00	SPIRAL MONEY FOUNTAIN 436.01
COMBINED PENSIONERS ASSOC. 500.00	LOATS Leslie R. 50.00	STAWELL SLIMMING CLUB 100.00
COURT ORDERS. 2,850.00	McINTOSH R. & M. 20.00	THE GEORGE ALEXANDER FOUNDTION 1,000.00
CROSS Doreen & Eric. 60.00	McKAY G. 100.00	THOMAS K. E. & M. D. 30.00
CROUCH Mr & Mrs K. F. 50.00	McPHERSON R. & N. 50.00	TOLLIDAY L. H. S. & V. L. 75.00
C.W.A. STAWELL BRANCH. 200.00	MULLANY Dr J. 250.00	TOWN HALL HOTEL. 1,100.00
DADSWELLS BRIDGE HALL LADIES AUX. 50.00	NEWALL Mrs L. 70.00	TWEEDIE Edith. 30.00
DRISCOLL Mrs G. A. 20.00	NEWTON - in memory of the late H. Newton	VARIETY CLUB OF VICTORIA 29,745.00
DRISCOLL Mrs N. 25.00	ANONYMOUS 35.00	WEST Phillip 3.00
DUNN - estate of late C. W. Dunn 2,000.00	AUSTIN Mrs M. 20.00	GIFTS IN KIND
EVANS Mr & Mrs E. 5.00	NEWTON S. 50.00	WAITES ROBSON MEMORIALS & STONE CO. 1,275.00
FRIEND Nancy B. 50.00	O'CALLAGHAN Mr & Mrs S. 10.00	(Official Opening Stones for Allan & Ivy Simpson Wing)
GLENORCHY GOLF CLUB INC. 100.00	PICKERING Mrs Neta 25.00	
GRAHAM Mrs M. 50.00	POMONAL S.S. MOTHER'S CLUB. 20.00	
GRAMPIANS HEART BEAT GROUP 2,000.00	RICKARD Mr & Mrs R. 20.00	
GRAMPIANS INDOOR BIAS BOWLS 100.00	ROBSON Mr M. 100.00	
GRANGE GOLF CLUB - Hospital Day (1991) 200.00	ROWE Shirley. 50.00	
	SAVAGE Mr R. G. 20.00	
	S.D.H. LADIES AUXILIARY 9,701.00	

Contributors - Foundation

BAKER Mr & Mrs Frank 10.00	HYSLOP Mr Ken 1,000.00	SEMMLER F. A. 100.00
BENNETT Mrs M. E. 250.00	ILLIG Mr & Mrs M. C. 100.00	SEMMLER H. G. 100.00
BENNETT N. 100.00	KENNEDY J. W. & A. E. 100.00	SLEE Mrs Marjorie 50.00
BRAME Mrs M. 2,000.00	LIGHTFOOT Mrs T. M. 200.00	SLEE Mr Ronald 50.00
COURT ORDERS. 1,435.00	LOATS Allan 200.00	STAWELL JOINT VENTURE. 6,000.00
C.W.A. - Glenorchy Branch 100.00	McMILLAN Miss I. 100.00	STAWELL TIMES NEWS. 1,000.00
C.W.A. - Stawell Branch. 50.00	MURRAY TO MOYNE BIKE RIDE 902.29	TOLLIDAY L. & V. 75.00
FULLER Graham Pty. Ltd. 316.65	NEWELL Mrs & Mrs C. 20.00	WESTERN T. 25.00
GRAY - estate of the late Edna M. Gray 10,000.00	RAFFLE 3,352.99	
HURLEY Mr & Mrs L. 100.00	SANDERS Mrs L. B. 50.00	

Stawell District Hospital Seeks Your Support

The Hospital has a continuing need for keeping its facilities and equipment abreast of the highest modern standards, to adequately cater for the needs of the local community. The range and quality of services presently provided by your Hospital is a tribute to the strong support of the community over many years.

To ensure the hospital continues to provide high quality care, we seek your financial support to purchase new and improved equipment, and to assist in the improvement of facilities.

Donations of \$2.00 or more are allowable as deductions for Income Taxation purposes. All donations will be acknowledged by letter, and listed in the Annual Report. Enquiries regarding the donation of specific items and equipment will be welcomed by the Chief Executive Officer.

Please address donation to:

Mr M. B. Delahunty
Chief Executive Officer
Stawell District Hospital
P.O. Box 116
STAWELL, VIC. 3380

Please find enclosed my donation for \$.....
to assist the Stawell District Hospital in:
undertaking building projects/the provision of new equipment/specifically for:

.....
(Please delete as appropriate)

Mr/Mrs/Miss.....

Address:

Form of Bequest

When making or altering your Will, please remember the constant needs of Stawell District Hospital in its efforts to provide for the sick and aged persons in our Community.

Please Consult with your solicitor or trustee company.

For your assistance we set out a suitable Form of Bequest:

I.....
Name

of.....
Address

"I GIVE AND BEQUEATH unto Stawell District Hospital of Sloane Street, Stawell in the State of Victoria the sum of \$.....and I DECLARE that the receipt of the Treasurer for the time being of the said Hospital shall be sufficient discharge for my Executor or Trustee."

Stawell District Hospital,
Sloane Street, Stawell, Vic. 3380,
Telephone (053) 582255

A BRIEF HISTORY OF THE STAWELL HOSPITAL

The Stawell District Hospital is in its 132nd year of community service. It is Stawell's oldest continuing Community Institution.

Prior to the discovery of gold in 1853, many large sheep holdings had started in the area. In 1856, the gold mining was on in earnest, and an estimated population of 20-30,000 people were in the area.

Sickness was rife and the mortality high. In July 1858, several concerned citizens met initially and three men, who could be regarded as the founders of the Stawell District Hospital, namely Mr James Playford, Mr A. R. Clemes and Mr R. H. Buchanan tirelessly visited all parts of the district to raise money for the hospital.

On August 2, 1858 a public meeting was held. A total of 500 pounds was raised in three months and by February 1859 a 16 bed hospital was ready for occupation. It had three rooms and was made of bark and calico construction. Its first patient was admitted on February 28, 1859 with a spinal injury suffered at the gold mine.

The hospital had cost 365 pounds to build, 130 pounds for the furniture inside and was debt free on completion. The population at this time was between 8,000 and 10,000 people.

The first annual meeting was held in June 1860 and it was reported that 67 patients had been admitted during the year, of which 42 were cured or relieved, 14 were still in the hospital and 11 had died.

At the time Maryborough and Portland were the only other hospitals west of Ballarat, and Stawell was one of the first 18 hospitals in Victoria.

A better hospital was built at Pleasant Creek in 1861, which is now Pleasant Creek Training Centre.

In 1887, the first ward to care specially for the aged (like our present nursing home ward) was built. It cared for the aged and the friendless. In 1874 hospitals were built in Horsham and St. Arnaud resulting in a loss of large subscriptions to the Stawell District Hospital.

In 1884, a drought and a severe economic depression hit the colony involving mining, agriculture and pastoral. This saw a cut in government grants and therefore the Hospital Committee was forced to restrict the number of admissions and to reduce the salaries and wages of the staff.

In 1930 Stawell Hospital was declared a Community Hospital on one condition of the new status being that no needy or poor patients were to be denied admission through paying patients occupying the beds.

The hospital at this time had become too small and old. A government grant of 4,000 pounds was offered for renovations and extensions but the committee of that time persuaded the government that a new hospital was necessary and so the present hospital was built on the site which was then known as the St. George Sands. The old hospital was taken over by the Mental Health Authority.

The present site was prepared by voluntary labour at the cost of 275 pounds. Plans were prepared and approved and the hospital opened in June 1934 by Sir W. Irvine, Governor of Victoria.

Services Provided by the Hospital Include:

- AUDIOLOGY
- MEDICAL AND SURGICAL
- PAEDIATRIC
- OBSTETRIC SERVICES INCLUDING:
ANTE-NATAL EDUCATION
- NURSING HOME
- ACCIDENT AND EMERGENCY DEPARTMENT
- BLOOD BANK
- DIETETICS
- MEALS ON WHEELS
- OCCUPATIONAL THERAPY
- PHARMACY
- PODIATRY
- ADULT DAY ACTIVITY AND SUPPORT SERVICE
- PATHOLOGY LABORATORY
- RADIOLOGY DEPARTMENT
- PHYSIOTHERAPY
- DISTRICT NURSING SERVICE
- WELFARE SERVICES
- GERIATRIC ASSESSMENT AND PLACEMENT
- VISITING OPHTHALMOLOGIST
- VISITING DIABETIC HEALTH EDUCATOR
- EDUCATION PROGRAMMES INCLUDING:
INSERVICE PROGRAMMES
ONGOING EDUCATIONAL PROGRAMMES
- LIBRARY FACILITIES
- APPRENTICESHIP TRAINING
- WORK EXPERIENCE FOR SCHOOL STUDENTS