

STAWELL DISTRICT HOSPITAL



Annual Report
1997/98



**STATEMENT OF BUSINESS
MISSION**

Stawell District Hospital provides a complete continuum of integrated health and related services, by providing the highest quality facilities and skills delivered in a personalised and caring environment.

Stawell District Hospital will achieve this business mission by its commitment to the following strategic directions:

Embracing the principles of continuous quality improvement in everything we do.

Ensuring the agency remains financially viable thus enabling the re-investment of resources into the continued development of core services.

Developing the concept of 'single entry' into the community's health service continuum of care. (ie. once a person enters the system they will be guided to the appropriate service without re-entering the system)

Being active in the process of attracting supporting and retaining health professionals to the Stawell community.

Continuing the process of developing the Grampians Health Alliance into a purposeful entity that supports the development of services in this sub-region.

Providing a well co-ordinated range of community services that integrate with other care streams.

Providing an appropriate range of age care facilities and services that integrate with other care streams.

Developing our acute care facilities to meet the requirements of Stawell and District, and meet the changing face of medical technology and practice.

Being entrepreneurial in our approach to developing business activity allied to our core services that support and enhance the value of the organisation as a whole.



139th Annual Report 1997/98

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Cover
City of Stawell from Big Hill

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BOARD OF GOVERNANCE

Board of Governance

Mr. Gary Thomas (*President*)
Dr. Andrew Cunningham (*Vice President*)
Mr. Graham Fuller (*Vice President*)
Mr. Neville Dunn (*Treasurer*)
Mrs. Meg Blake
Mrs. Joan Brilliant
Dr. Norman Castle
Mr. Ken Dadswell (*res:13/11/97*)
Mrs. Sandra Wilkins (*res:2/12/97*)
Mrs. Janet Witham
Mr. Gary Withers

Chief Executive

Mr. Michael Delahunty, B.Ec., A.A.S.A.,
CP.A., M.H.A., A.F.C.H.S.E., C.H.E.

Clinical Services Manager

Mr. Bruce Fowkes, R.N., B.A., Dip.N.Ed.,
G.Dip.H.S.Manag; Dip.Occ.Hlth&Safety; Ster.&Inf.Con
t.Cert; W.S.Cert; F.R.C.N.A; Cert.C.Q.I.

Medical Director

Dr. Alan Wolff (*Consulting*)
Dr. Norman Castle (*Sessional*)

Auditor

Auditor General

Bankers

Australian and New Zealand Banking Group Ltd.

Stawell District Hospital

Originally Established

Pleasant Creek : February 1859
Relocated to Sloane Street : June 1934

Approved Operating Budget \$8.6m

Accreditation Status Fully accredited to 1999

Employees Male 22 :: Female 144

Approved Beds Hospital 40 Nursing Home 30

Highlights 1997/98

- ◆ Record number of hospital admissions of 2,382
- ◆ Commencement of new General Surgeon, Mr. Ben Yokhanis
- ◆ Statewide Patient Satisfaction Survey confirms high quality of hospital services
- ◆ Organisation reports accrued surplus of \$135,000
- ◆ Official opening of helipad, co-located ambulance station and St. John of God Pathology Laboratory
- ◆ Adoption of Grampians Health Alliance "Needs Analysis and Service Plan"
- ◆ Successful periodic EQUIP review undertaken
- ◆ Consultants appointed to commence planning of required building redevelopments
- ◆ Regional Information Technology Plan developed
- ◆ Western Victorian Teleradiology System commences
- ◆ Ante-natal classes commence in hospital facilities
- ◆ Very successful public relations/fundraising functions conducted : Hospital Appeal Sunday; Golf Days, and Hospital Race Day

BOARD OF GOVERNANCE

On behalf of the Board of Management, it is my pleasure to present the 139th Annual Report of the Stawell District Hospital and Helen Schutt Nursing Home, for the year ended June 30, 1998.

Highlights

The year 1997/98 provided many highlights, not the least being a very positive performance by the health service in regard to both its financial and activity results. The "bottom line surplus" of \$135,000 is an outstanding result, particularly given the budget reduction imposed on the hospital programme at the commencement of the year and the general stringent financial conditions experienced by all programmes.

The excellent financial result is worthy of high commendation, given the record levels of activity across all programmes, particularly hospital admissions which experienced a further increase of 3% on top of the 3% hospital increase of the previous year. Hospital admissions for the year were a record 2,382 eclipsing the previous record in 94/95 of 2,344 admissions.

Further highlights during the year included:

- Appointment of a new general surgeon to the sub-region, Mr. Ben Yokhanis. Mr. Yokhanis commenced with the hospital in February 1998 and with his wife Ileen, has been a most welcomed addition to the community.
- Official opening of a number of capital improvements including the hospital helipad in September 1997, by the Premier Mr. Kennett, and the opening of the co-located Ambulance Station and the St. John of God Pathology Laboratory by Minister of Health, Mr. Knowles, in November 1997.
- Adoption of Grampians Health Alliance "Needs Analysis and Service Plan" in December 1997, which consolidated the relationship between this health service and the East Grampians Health Service based at Ararat. This report completed by KPMG Consulting Pty. Ltd. resulted in the announcement in April 1998, that both hospitals had formally agreed to investigate a merger possibility.
- Successful periodic EQulP review was undertaken by ACHS in September 1997.
- State Government approval received to allow appointment of consultants to commence planning for a redevelopment of hospitals theatre, wards and day procedure facilities.
- Antenatal classes formally commenced at the hospital in January 1998.
- Hospital commits to regional information technology system that will serve all public hospitals in Grampians region.

Grampians Health Alliance

The Board have continued to place high priority on the development of the Alliance to ensure its

primary objective of high quality - accessible and efficient health care is available in the sub-region serviced by the Stawell, Ararat and Willaura Health Services. Representatives from each hospital meet monthly and one of the Alliance's major achievements this year was the finalisation of the "Needs Analysis and Service Plan". The direction provided by that report resulted in the joint announcement in April 1998, that each Board had agreed to investigate the possibility of a merger. The following statement of principles have been agreed to as fixed pre-requisites that must be complied with should a merger proceed:

1. Retention of existing core services
2. Retention of community funds
3. Establishment of Advisory Committees
4. Commencement of Capital Works Projects

Business Mission Strategic Directions

The Board formally reviewed its Business Mission and Strategic Directions document in December 1997 and were pleased with the progress being made, particularly in the areas of:

- Quality Improvement
- Financial Viability
- Retention of Health Professionals
- Entrepreneurial Activities

A detailed review of the plan is provided in this annual report.

Medical Staff

The hospital is appreciative of the quality and scope of medical services provided by both our local medical officers and a large number of visiting specialists. The spirit of co-operation between the hospital and its medical staff is viewed as a strength of the organisation as demonstrated by the medical staff attendance at a large number of Board of Management sub-committees and the prompt finalisation of medical staff contracts during the financial year. The Board was disappointed to receive the resignation of Dr. Ambikapathy during the year, due to increased commitments in Ballarat. However, the Board is pleased to advise that both Dr. Jon Watson and Mr. Bruce Stewart have recently been appointed to ensure the endoscopic service is maintained.

Board of Governance

The Board have experienced a most demanding year in terms of their time commitment to the hospital. However, the excellent financial position and general performance of the hospital is the reward the members strive for in carrying out their duties. Two Board Members, namely : Mr. K. Dadswell (8 years service) and Mrs. S. Wilkins (1 year service), resigned their positions during the year. The hospital is very appreciative of the service given by these two members during their time on the Board.

BOARD OF GOVERNANCE

Finance and Performance

As mentioned earlier, the hospitals inpatient admissions increased to a record level of 2,382. This 3% increase over the previous year reflects the increased demand for inpatient services and the range of medical specialities provided which to a large extent is meeting the community's demand for medical services. The average length of time that an acute inpatient remained in hospital, decreased by 10% from 4.1 days in the previous year, to 3.7 days. This reduction was achieved without loss of quality because of an efficient discharge planning arrangement and the excellent "Post Acute Care" programme that ensures appropriate support is provided to "at risk" patients post discharge. The increased emphasis on community based services is confirmed by the overall increase of 16% on these type of services compared to the previous year with particularly significant increases in the areas of : Radiology 6%; Casualty 10%; Speech Therapy 11%; Audiology 44%; District Nursing 20%; Day Centre 48%. To all the "non-residential" care services the Board acknowledges their excellent efforts in servicing the increased demand placed on them.

Helen Schutt Nursing Home

The Board wishes to particularly acknowledge the staff under the leadership of Mrs. Carey for the excellent standard of care provided in our nursing home. The aged care sector throughout Australia has faced significant change during the past year and I am pleased to report that our nursing home has complied with all the new regulations and will continue to meet the expectations of Stawell and district in the provision of residential aged care services. The quality of care provided by the dedicated staff of the nursing home is confirmed by the increasing requests for placement in the nursing home by persons who have lived large distances from Stawell.

Staff

The organisation is fortunate to have highly motivated, dedicated and professional staff. The outstanding results both financially and qualitative could not have been achieved in these times of increased productivity demands without the support of our staff to whom we express our appreciation. The Board wishes to acknowledge the contribution of the following staff who resigned their positions during the year after an extended period of service : Coral Brightwell, Cheryl Burke, Pat Gaffney, Robert Hemley, Lorraine Heslop, Sally Sleep and Roslyn Slorach. We were pleased to welcome Lee Belcher (*Pharmacist*) and Viv Pye (*Social Worker*), and we trust their time with us is both stimulating and rewarding.

State Wide Patient Satisfaction Survey

The hospital was pleased to participate in the statewide patient satisfaction survey funded by the Victorian State Government. This survey was conducted in the period July to December 1997. The board was delighted with the results achieved as advised in a most comprehensive report received in May 1998. From the report the following were noted in relation to this hospital.

	SDH	State Average
Patients "very satisfied" with their care provided	88%	85%
Courtesy of Nurses: Excellent or Very Good	99%	92%
Restful atmosphere of hospital: Excellent or Very Good	83%	71%
Comfort during hospital stay: Excellent or Very Good	91%	83%
Food Quality: Excellent or Very Good	81%	66%

The Quality Improvement sub-committee of the Board have used the report to further identify areas where improvement could be made.

Hospital Auxiliaries

The hospital is fortunate to have the Ladies Auxiliary and the Y-Zetts committed to supporting the objectives of the hospital. We look forward to their invaluable service continuing into the future.

Conclusion

The year 1997/98 can be described as a very successful year for the hospital. The next year 1998/99 will be a year on which we plan to further strengthen the organisations commitment to the key government criteria of access, quality and efficiency.

The Board particularly looks forward to advancement in the following areas with the ongoing support of senior staff of the Department of Human Services, namely: Ron Tiffen, Geoff Iles, and Sylvia Barry:

- Advancement of Hospital Master Plan to provide the urgently required upgrade of the hospital's operating theatre and day surgery facilities;
- Establishment of Grampians Region Information Technology System;
- Successful organisation wide EQulP survey by the Australian Council on Healthcare Standards in March 1999;
- Further strengthening of partnerships with other healthcare providers in Stawell and district;

BOARD OF GOVERNANCE

- Establishment of "value adding projects" to the benefit of our community. eg. Telehealth System; Out of Hours Medical Advice Service, and Industrial Medical Surveillance Service.

On behalf of the Board of Management.

Gary Thomas
President

Michael Delahunty
Chief Executive

Where Our Patients Came From

Stawell	1,871
Pomonal, Halls Gap, Barkly	75
Ararat, Great Western, Moyston	126
Navarre, Marnoo, Landsborough, Glenorchy, Dadswells Bridge	97
Beaufort	32
St. Arnaud	27
Rupanyup	9
Horsham, Nhill, Dimboola, Minyip, Avoca, Donald, Ouyen, Elmhurst	50
New South Wales	6
Other States	13
Other Victorian Areas	76
Total	2,382



Hospital Charity Race Day : Sunday December 7, 1997

From left: Bruce Howden (*Howden Holden Major Sponsor*), Gary Thomas (*Board of Management President*), Graeme McQueen (*Horse Trainer*), Michael Delahunty (*Chief Executive*)

1997/1998 OVERVIEW AT A GLANCE

Strategic Directions

Objective

Embracing the principles of continuous quality improvement in everything we do

- Maintain Accreditation Status with Australian Council on Health care Standards(ACHS)

Ensuring the agency remains financially viable thus enabling the re-investment of resources into the continued development of core services.

- Seek to have annual financial surplus.
- Maintain and where appropriate, increase hospital's market share of acute care required by residents of Stawell and district.
- Define hospital core services.

Developing the concept of 'single entry' into the community's health service continuum of care

- Once a person enters the Stawell Health System, they will be guided to the appropriate service without re-entering the system.
- Seek to provide 24 hour health advice service.

Being active in the process of attracting supporting and retaining health professionals to the Stawell community

- Seek to retain health professionals.
- Increase number of rural students entering health professional studies.
- Assist development of health services in Papua New Guinea (PNG).

Continuing the process of developing the Grampians Health Alliance into a purposeful entity that supports the development of services in this sub-region.

- Expand range and viability of health services in sub-region

Achievements

- Successful periodic EQUIP review undertaken in September 1997 by the Australian Council on Healthcare Standards (ACHS).
- Statewide patient satisfaction survey conducted by the Victorian State Government, confirms high quality of patient services. With four (4) key measures out of a possible 22, significantly above other similar hospitals, this hospital had the highest number of positive results obtained in our category.
- Helen Schutt Nursing Home receives certification score of 79 (*minimum score required 57*), from the Commonwealth Department of Health and Family Services. This certification process assessed nursing home's building and care standards.

Future

- Organisation wide EQUIP accreditation survey to be undertaken by ACHS in March 1999.
- Continue to develop a culture of continuous quality improvement in all services and activities.

- Organisation reports accrued surplus for the year ended June 30, 1998.
- New General Surgeon, Mr. Ben Yokhanis, commenced in February 1998.
- Access to medical/specialist services maintained.

- Seek to again report a financial surplus.
- Review the range of medical services provided that will meet customer demand, comply with quality requirements, gain efficiency and raise revenue.

- The outstanding success of the Post Acute Care Programme has facilitated effective service relationships with other health care agencies servicing Stawell and district.
- Discharge planning involves all other service providers and meets weekly to ensure community services meet patients needs on discharge from hospital.
- Aged Care Assessment Team meets fortnightly to ensure aged and disabled clients have services provided as required.

- Continue to promote benefits to the consumer of the integration of the hospital and community based services in Stawell and district.
- Seek to establish expanded range of 24 hour health advice service provided locally, particularly in the area of medical advice.

- All allied health positions maintained during the year. Successful recruitment and appointment of Pharmacist, Physiotherapist and Occupational Therapist.
- Three senior nurses visited from Papua New Guinea.
- Conducted Allied Health Careers Expo.

- Strengthen role of Staff Welfare Committee.
- Establish formal relationship with statewide organisations such as the Co-ordinating Unit for Rural Health in Victoria.
- Continue to retain and attract high calibre professional staff.

- "Needs Analysis and Service Plan" finalised and adopted in December 1997.
- Sub-regional patient transport contract finalised.
- Exchange of specialist staff.
- Allocation of Rural Speciality grants
- Agreement to investigate possibility of merger

- Continued development of the Alliance to ensure its primary objective of high quality, accessible and efficient health care is available to the residents serviced by the Alliance.

1997/1998 OVERVIEW AT A GLANCE

Strategic Directions

Objective

Providing a well co-ordinated range of community services that integrate with other care streams

- Services are prioritised and co-ordinated.
- Provide a quality trauma service.

Providing an appropriate range of aged care facilities and services that integrate with other care streams

- Expand availability of, and access to aged care services.

Developing our acute care facilities to meet the requirements of Stawell and district, and meet the changing face of medical technology and practice

- Develop five (5) year plan for Acute Services.
- Upgrade theatre, sterilising and day surgery facilities.

Being entrepreneurial in our approach to developing business activity allied to our core services that support and enhance the value of the organisation as a whole

- Expand the facilities financial infrastructure.
- Achieve per diem funding for Palliative and Rehabilitation inpatient care.
- Establish teleconferencing/telemedicine facilities.

Achievements

Future

- Hospital's organisational structure modified, whereby the Allied Health staff now report to Patient Services Manager to ensure integration and co-ordination of clinical care streams.
- Establishment of hospital helipad.
- Majority of medical staff have completed Early Management of Severe Trauma Course.
- Establishment of hospital trauma committee.

- Continue to improve service delivery of community based services through reviewing service relationships.

- Day Centre increases client numbers by 48%.
- District Nursing provide an additional 2,929 community visits : an increase of 20%.
- Meals on Wheels numbers increase by 2,030 : an increase of 19%.

- Develop policies in line with government standards in relation to Aged Care.
- Commence planning with both State and Commonwealth Departments of aged care to expand number of nursing home beds available at the Helen Schutt Nursing Home.
- Continue to strengthen relationships with other providers in Stawell and district, to improve integration and co-ordination of aged care services.

- A grant of \$20,000 received from State Government to upgrade infection control equipment.
- Consultants appointed to commence planning of required building redevelopment in the areas of Theatre, Central Sterile Department, Day Surgery beds, Accident and Emergency, and other associated departments.
- Purchase of new "state of the art" anaesthetic monitor.

- Establishment of peri-operative clinic for elective surgery.
- Arrange purchase and installation of infection control equipment in operating suite to comply with contemporary standards.
- Advancement of plans to meet government funding requirements to allow building redevelopment to occur.
- Maintain acute care services.

- Sub-regional Post Acute Care programme expanded to both St. Arnaud and Beaufort.
- Successful submission in partnership with West Vic Division of General Practice for two projects:
 - fall prevention programme : budget \$100,000
 - after hours primary medical care trial : budget \$210,000
- Established new room and upgraded equipment for teleconferencing facilities.

- Increased usage by a range of programmes of teleconferencing facilities.
- Pursue per diem funding of Palliative and Rehabilitation inpatient care.
- Identify future opportunities for appropriate expansion of facility's financial infrastructure.

REPORT OF OPERATIONS

PERFORMANCE INDICATORS

Activity Statistics	1993/94	1994/95	1995/96	1996/97	1997/98
Accommodation-Available Beds	40	40	40	40	40
Patients Treated in Hospital					
Public-No Charge	1,655	1,843	1,768	1,869	2,006
Nursing Home Type	12	18	19	24	23
Private/Third Party	486	483	474	431	353
Total Patients Treated	2,153	2,344	2,261	2,324	2,382
Total Patient Days in Hospital					
Public-No Charge	7,518	7,381	6,910	7,464	7,316
Nursing Home Type	482	622	2,232	1,541	1,373
Private/Third Party	2,559	2,380	1,801	2,286	1,598
Total Patient Bed Days	10,559	10,383	10,943	11,291	10,287
Daily Average of Occupied Beds	28.93	28.44	29.98	30.93	28.18
% Occupancy	72.32	71.10	74.95	77.33	70.45
Average Length of Stay (Days)	4.9	4.4	4.83	4.85	4.32
Babies Born	130	111	115	105	98
Operations	910	1,016	1,129	1,167	1,191
Patient Mix (Hospital Bed Days)					
Public No-Charge %	75.8	76.40	81.55	81.20	86.32
Private/Third Party %	24.2	23.60	18.45	18.80	13.68
Nursing Home					
Bed Days	10,933	10,902	10,922	10,950	10,814
Daily Average Occupied Beds	29.9	29.87	29.92	30.0	29.6
Outpatient Services					
Number of Attendances					
Casualty	899	731	928	2,645	2,917
Occupational Therapy	3,393	2,712	1,669	1,955	1,732
Physiotherapy	5,296	5,112	5,342	6,107	5,330
Podiatry	2,609	3,254	3,553	3,747	3,714
Pathology	6,528	8,263	3,239	--	--
Radiology	3,345	3,666	4,048	4,324	4,585
Day Centre	4,205	4,431	5,004	4,667	6,946
Audiology	--	242	260	244	351
Speech Therapy	227	191	425	404	448
Diabetic	--	78	53	--	--
Dental	--	240	548	159	--
Total Outpatient Attendances	27,509	28,920	25,069	24,252	26,023
District Nursing					
Persons Visited	974	977	1,094	1,103	1,144
Number of Visits	16,394	13,405	13,463	15,071	18,000
Catering					
Patient Meals	72,333	75,198	69,176	65,666	65,683
Staff Meals	10,720	11,225	10,812	11,869	19,580
Meals on Wheels	2,701	1,968	1,502	10,473	12,503
Pleasant Creek Centre	--	85,454	76,500	57,988	52,690
Total Meals Served	85,754	173,845	157,990	145,996	150,456
Patients Treated by Category					
Same Day	555	609	668	715	725
More than One Day Stay					
Medical/Surgical	1,456	1,537	1,417	1,415	1,452
Obstetrics	130	180	157	170	182
Nursing Home Type	12	18	19	24	23
	2,153	2,344	2,261	2,324	2,382

REPORT OF OPERATIONS

CASEMIX DATA	1994/95	1995/96	1996/97	1997/98
Total Weighted Inlier Equivalent Separations	2,150	2,049	2,169	2,123
Average Inlier Equivalent DRG Weight	0.8715	0.8366	0.7983	0.7692
Cost per DRG Weighted Admitted Patient	\$ 2,120	\$ 2,300	\$ 2,259	\$ 2,447

UNIT COSTS	1993/94 \$	1994/95 \$	1995/96 \$	1996/97 \$	1997/98 \$
Hospital Av. Daily Bed Cost					
Inpatient	412.00	470.59	489.41	434.53	504.90
Hospital Av. Cost					
Inpatient Treated	2,020.60	2,073.50	2,249.75	2,133.15	2,201.75
Nursing Home Av. Daily Bed Cost					
Inpatient (inc Psychogeriatric 95/96)	105.80	105.55	113.93	117.28	112.24
Nursing Home Av. Cost					
Inpatient Treated	38,686.00	38,524.00	47,275.00	42,807	41,006
Av. Cost Outpatient Attendance	48.90	48.34	52.45	46.36	47.27
Av. Cost Day Centre Attendance	35.91	36.52	39.62	37.71	28.94
Av. Cost per District Nurse Visit	10.84	17.11	18.56	17.12	15.58
Av. Cost per Meal	6.56	6.31	6.84	5.89	5.28

Revenue Indicators

Average Collection Days

	1997/98	1996/97
Private	73	76
TAC	29	35
VWA	225	60
Other Compensable	16	25
Nursing Home	34	35

Debtors Outstanding as at June 30, 1998

	Under 30 Days	31-60 Days	61-90 Days	Over 90 Days	Total 30/ 6/98	Total 30/ 6/97
Private	14,454	17,408	3,209	12,500	47,571	48,600
TAC	8,143	931	--	1,875	10,949	6,000
VWA	2,013	5,318	--	3,513	10,844	7,865
Other Compensable	--	431	--	--	431	2,770
* Nursing Home	22,891	1,863	296	1,283	26,333	30,805

Abbreviations: 'TAC' - Transport Accident Commission :: 'VWA' - Victorian Workcover Authority

Staffing Levels

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

	Paid EFT 1994/95	Paid EFT 1995/96	Paid EFT 1996/97	Paid EFT 1997/98
Nursing	62.04	64.04	63.65	62.87
Administration and Clerical	14.40	15.30	14.47	14.56
Medical Support	7.50	8.00	7.29	8.36
Hotel and Allied	32.62	33.00	31.16	28.99
Medical				0.41
	116.56	120.34	116.57	115.19

Statistic Summary of Work Accidents and Costs

Employment Code	1995/96		1996/97		1997/98	
	Claims	Costs	Claims	Costs	Claims	Costs
Hygiene/Food	3	9,637	5	1,172	5	424
Nursing	1	147	5	16,563	4	224
Maintenance	--	--	--	--	--	--
Allied Health	--	--	--	--	--	--
	4	9,784	10	17,735	9	648

REPORT OF OPERATIONS

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.

Freedom of Information

Part II Publications Statement

Introduction

This statement is prepared to meet the reporting requirements stated in the:

- ◆ Freedom of Information Act 1982
- ◆ Freedom of Information Amendment Bill 1993

Reference in some instances is made to other sections of the 1998 Annual Report for statements required in this Part II Publications Statement.

Three (3) requests for access to Hospital documents were received during 1997 under the Freedom of Information Act 1982.

F.O.I. Arrangements

Access

Requests for access to written information kept by Stawell District Hospital should be made in writing to:

Chief Executive
Stawell District Hospital
Sloane Street
STAWELL Vic 3380

Requests to access documented information require a F.O.I. Request Form to be completed by the applicant (and consent authorisation of the person involved if applicant is a third party).

Publicity Services

Publications

Stawell District Hospital Annual Report
Patient Information Booklet
Guide to Client Services

Legislative Changes

A number of Acts have been passed during the 1997/98 financial year. The most significant are:

Acts

- Accident Compensation (Miscellaneous Amendment) Act 1997
- Ambulance Services (Amendment) Act 1998
- Drugs, Poisons and Controlled Substances (Amendment) Act 1997
- Drugs, Poisons and Controlled Substances (Amendment) Act 1998
- Health Acts (Statute Law Revision) Act 1998
- Health Services (Amendment) Act 1997
- Health Services (Amendment) Act 1998

- Mental Health (Victorian Institute of Forensic Mental Health) Act 1997
- Public Sector Reform (Miscellaneous Amendments) Act 1998
- Tribunals and Licensing Authorities (Miscellaneous Amendments) Act 1998

Regulations

- Adoption Regulations 1998
- Cancer (Reporting)(Amendment) Regulations 1997
- Dangerous goods (General Amendment) Regulations 1998
- Drugs, Poisons and Controlled Substances (Amendment) Regulations 1997
- Freedom of Information (Exempt Offices)(Interim) Regulations 1997
- Freedom of Information Regulations 1998
- Health (Infectious Diseases)(Children's Services Centres) Regulations 1998
- Health Services (Private Hospitals and Day Centres)(Amendment) Regulations 1998
- Human Tissue (Prescribed Institutions) Regulations 1997
- Infertility Treatment Regulations 1997
- Occupational Health & Safety (General Amendment) Regulations 1998
- Physiotherapists (Qualifications) Regulations 1998
- Physiotherapists (Qualifications)(Amendments) Regulations 1997
- Psychologists Registration (Amendment) Regulations 1997

Hospital Fees

The Hospital charges fees in accordance with the Department of Human Services Victoria directives.

Consultants Engaged and Their Cost

KPMG Consulting P/L
"Needs Analysis Service Plan" \$ 13,667
Victorian Hospital Industrial Assoc. \$ 4,250

Public Authorities Equal Employment Opportunity Act 1990

The Stawell District Hospital has an ongoing commitment to eliminate discrimination and inefficient work practices, and to promote Equal Employment Opportunities in its workplace in accordance with the Public Authorities (Equal Employment Opportunity) Act of 1990.

Responsibility for the Equal Employment Opportunity programmes has been conferred upon the Pay Officer.

REPORT OF OPERATIONS

Staffing Profile

Employee Analysis by Tenure and Gender

	Male	Female	Total
Full Time	15	35	50
Part Time	5	93	98
Casual	2	16	18
Total	22	144	166

Employment by Australian Standards Classifications of Occupation

	Male	Female	Total
Administration Professionals	6	8	14
Para Professionals	5	54	59
Trades	2	1	3
Clerical	2	12	14
Personal Service	1	37	38
Manual	6	32	38
Total	22	144	166

Staff Training/Development

Department	Hours	Cost
Administration	108	1,560
Food Services/Hygiene	68	1,045
Health Professionals	256	4,252
Nursing	637	8,008
Maintenance	—	—
Total	1,069	14,865

Competitive Neutrality

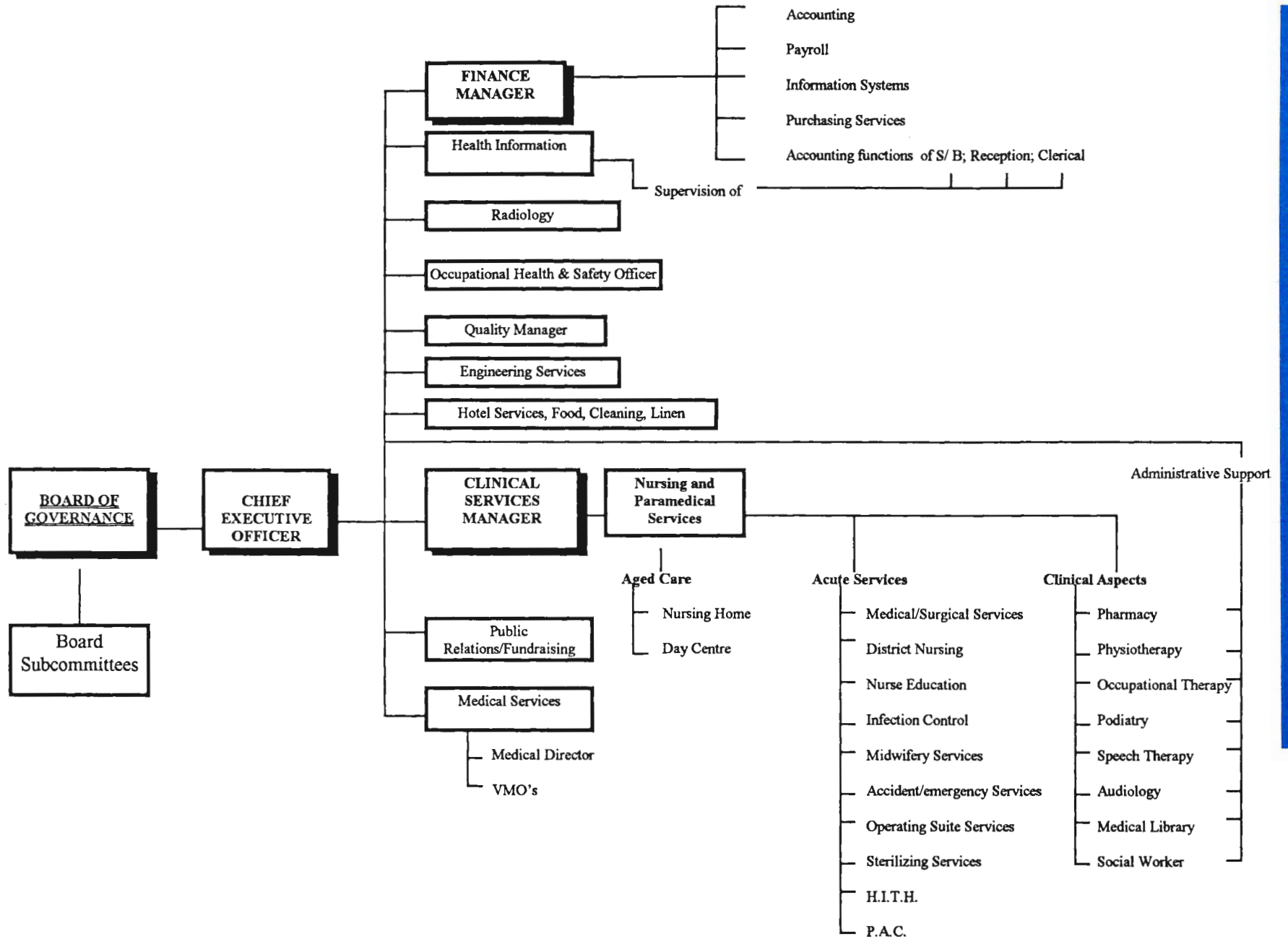
Stawell District Hospital acknowledges the Governments commitment to Competitively Neutral Pricing Policies.

Competitive Neutrality "aims to ensure government businesses do not enjoy any net competitive advantage by virtue of Public Sector ownership".

Stawell District Hospital has taken steps during the year, to adopt competitively neutral pricing principles to its significant business activities.



First patient transported from Hospital's Helipad : March 1998



VISITING MEDICAL OFFICERS

The VMO Group have continued to meet monthly during the year, to primarily ensure that the highest possible quality of care is provided to patients of the hospital. The group reviews reports and quality improvement studies and makes recommendations to the Board of Management in areas where care provided may be improved. In addition, the group regularly reviews treatment protocols and identifies changes where appropriate.

To further assist the objective of continuous quality improvement, medical officers accept invitations to be on the following patient care committees : Quality Improvement, Pharmacy, Grampians Health Alliance, Infection Control/Theatre, and as required, the Credentials Committee and Anaesthetic committee.

Visiting Medical Officers

Dr. P. Carter, MB, BS; Dip. Obs. R.A.C.O.G.; F.R.A.C.G.P.
 Dr. R.N. Castle, M.B., B.S.
 Dr. M.J. Connellan, M.B., B.S., D.R.A.C.O.G.; F.R.A.C.G.P.
 Dr. A.H. Cunningham, M.B., B.S., Dip. Obst., R.C.O.G.
 Dr. L. Hemingway, M.B., B.S.
 Dr. K. Ho, M.B., B.S.
 Dr. K. Kandasamy, M.B.Ch.B.(UK); B.Sc.(UK)
 Dr. W. Lax, M.B., B.S.
 Mr. G.J.T. Lewis, M.B., B.S.; M.R.C.S., L.R.C.P., F.R.C.S.(Edin)
 Dr. D. Lia, MB, BS; D.Av.Med.
 Dr. F. Maughan, MB, BS; Dip.R.A.C.O.G.
 Dr. G.M. O'Brien, M.B., B.S., Dip.R.A.C.O.G.
 Dr. N. Provis-Vincent, B.Med.Sc.(Hons); M.B.B.S.
 Dr. M. Sheehan, M.B., B.C.H., N.U.I.
 Mr. R.B. Warne, M.B., B.S., F.R.A.C.S., F.R.C.S.(Eng.), F.R.C.S.(Edin.)
 Dr. P. Wood, M.B., B.S.
 Mr. B. Yokhanis, M.B.Ch.B; Dip.Gen.Surg; F.R.C.S.(Eng); F.R.A.C.S.

Visiting Consulting Anaesthetist
 Dr. J. Oswald, M.B., B.S.; F.A.N.Z.C.A.
 Dr. G. Wajszel, M.D., Cert. Anaes; A.M.C.

Visiting Consulting Cardiologist
 Dr. H.K. Chaudhary, M.B.B.S., F.R.A.C.P.

Visiting Consulting Geriatrician
 Dr. M. Giles, M.B., B.S., M.R.C.P.(UK)
 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); F.A.F.R.M.
 Dr. A. Vander Knijff, M.B., B.S., Dip.Geriatric Medicare(Melb)
 Dr. M. Yates, B.S., F.R.A.C.P.

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

Visiting Consulting Ophthalmologist
 Dr. D.G. McKnight, M.B., B.S., F.R.A.C.S., F.R.A.C.O.
 Dr. M.G. Toohy, M.B., B.S., F.R.A.C.S., F.R.A.C.O.

Visiting Consulting Orthopaedic Surgeon
 Mr. R. Miller, MB, BS; M.Sc; F.R.A.C.S.
 Mr. J. Nelson, M.B., B.S., F.R.A.C.S.

Visiting Consulting Pathologists
 Dr. P.J. Bedford, M.B., B.S., F.R.C.P.A.

The Medical Staff Group wish to particularly acknowledge the following positive outcomes that have been achieved during the past year : purchase of new "state of the art" anaesthetic monitoring system costing \$43,500; commencement of additional resident General Surgeon, Mr. Ben Yokhanis; reduction in average length of stay by 10%, and the excellent service provided by staff to ensure patients discharge from hospital is as smooth as possible, eg. Post Acute Care and Hospital in the Home.

I wish to thank all hospital staff, particularly the Nursing Division, for their professionalism and co-operation and the Board of Management for their ongoing support to ensure the hospital meets the expectations of its patients.

Dr. Gary O'Brien : Chairman

Dr. C.M. Pilbeam, B.Med.Sc., M.B., B.S., Ph.D., F.R.C.P.A.
 Dr. S.T. Pilbeam, M.B., B.S.; M.R.C.S.; L.R.C.P.; F.R.C.Path; F.R.C.P.A.

Visiting Consulting Physicians

Dr. A. Ambikapathy, M.B., Ch.B., D.T., M.&H., M.R.C.P., F.R.A.C.P.
 Dr. T.W. Howison, M.B., B.S.; M.R.A.C.P., F.R.A.C.P.
 Dr. J. Stickland, M.B., B.S., F.R.A.C.P.; M.R.A.C.P.; F.A.C.R.M.

Visiting Consulting Psychiatrist

Dr. D. Green, M.B.B.S., F.R.A.N.Z.C.P.(I); Dip.Psych.
 Dr. J. D. Little, M.B., Ch.B.
 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 Consulting Oncologist and Haematologist

Dr. G. Kannourakis, M.B., B.S., B(Med)Sc., PhD., F.R.A.C.P.

Visiting Consulting Radiologist

Dr. M. Bennett, M.B.B.S.
 Dr. P. Graham, M.B., B.S.; F.R.A.C.P.; Dip.Diag.Ultrasound
 Dr. E.H. Kolner, M.D.

Dr. B.J. Lightfoot, M.B., B.S.; F.R.A.C.R.
 Dr. A.M. McLaughlan, M.B., B.S.; F.R.A.C.R.; B.Ag.Sc.

Dr. P. Tauro, M.B., B.S.(Radiol)

Dr. P.F. Walker, M.B.ChB; C.R.C.P.C.; F.R.C.P.C.; D.O.N.

Dr. R. White, M.B., B.S.; F.R.A.C.R.

Dr. L. Wong Shee, M.B.ChB., F.R.A.C.R.

Visiting Consulting Urologist

Mr. K.J. Braslis, M.B., B.S.; M.S.; F.R.A.C.S.Urol.

Mr. R. McMullin, M.B., B.S., F.R.A.C.S.

Dr. J. Watson, B.A.(UK); B.M.B.Ch.(UK); M.A.(UK); M.R.C.P.(UK); Ph.D.(UK)

Visiting Consulting Surgeon

Mr. D.E. Deutscher, B.Sc., M.B., B.S., F.R.A.C.S.

Visiting Consulting E.N.T. Specialist

Mr. P. Thomson, M.B., B.S., F.R.A.C.S.

Visiting Consulting Rheumatologist

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

Visiting Consulting Dental Staff

Dr. D.L. Lye, B.D.S., B.D.sc.

Dr. G.G. Robertson, B.D.S.

PATIENT SERVICES

Nursing Division

Our pursuit of enhanced quality and easier access to our services for our clients, has continued this year. Special emphasis has been given to streamlining systems for day patients, and obtaining feedback on their hospital experience. Feedback received has been very favourable.

Theatre Services and District Nursing have again been the services under most pressure this year, with record levels of service provided by both services.

Our Quality Improvement and Staff Education Programmes continue to provide impetus in gaining the improvement we seek.

The Hospital Auxiliaries have greatly assisted us by providing us with those equipment "extras" which improve our ability to provide good care. In particular, the donation of a Bladder Scan Ultrasound will enable us to monitor patients with residual urines, often eliminating the need for catheterisation.

My thanks to all nursing staff for their continuing effort, to my colleagues in other departments for their co-operation and the medical staff for their support.

B. Fowkes : Clinical Services Manager

Mr. K. B. Fowkes, R.N., B.A., Dip.N.Ed.,
G.Dip.H.S.Manag;Dip.Occ.Hlth&Safety;Cert.in
C.Q.I;Ster.&Inf.Cont.Cert;W.S.Cert.,F.R.C.N.A.

Quality Audit Manager

Ms. S. Warren, R.N,B.N.

Nursing Supervisors

Ms M. Henderson, R.N.,R.M.
Ms B. Meumann, R.N.,R.M.
Ms D. Perry, R.N.,R.M.
Ms J. Sherwell,R.N.,R.M.
Mr. J. Bowen,R.N.,R.M.,I.C.Cert.

Unit Team Leaders

Ms L. Carey, R.N., Gerontological Nursing Cert.
(Nursing Home)
Ms P. Pianta, R.N., R.M. (Simpson Wing)
Ms P. Mackay, R.N. (Castle Wing)
Ms. C. Shorten, R.N., Peri-Operative N. Cert.,
C.S.I.C.N. (Theatre)
Ms. J. Sherwell, R.N., R.M.(HITH)
Ms. J. Gunn, B.A.,B.N.,R.M.,M.R.C.N.A.Cert.of
Inf.Dis.Ns;Cert.Fam.Planning

Infection Control Officer

Ms P. Fowkes, R.N., Ster.& Infection Control
Cert.

Education Co-Ordinator

Ms J. Farrer, R.N.

Post Acute Care

Ms. L. MacKenzie, R.N., R.M., Dip. Rehab.



Clinical Services Manager, Bruce Fowkes(*left*), with members of the Ladies Auxiliary and Y-Zetts pictured, donating a Bladder Ultrasound to the impressive list of equipment at the Hospital

PATIENT SERVICES

Midwifery/Surgical Services

Over the past twelve months, we have implemented the standards of the EQuIP Programme.

The Clinical Pathways (*plans of care which reflect best clinical practice and the expressed needs of the customers of the pathway*), have been progressively introduced. Multidisciplinary health care teams can better co-ordinate care and use resources efficiently, and help customers meet expected outcomes within a prescribed length of hospital stay.

Improvements to the ward are ongoing. Bathrooms have been improved, and a glass enclosure provided for the front desk, to ensure confidentiality.

There have been increased day stay surgical cases due to services of visiting specialists : Endoscopy, ENT, Ophthalmology, Urology and Orthopaedics.

Midwifery have seen the birth of ninety-eight babies during 1997/98, with the average length of stay being 4.1 days. We have a Domiciliary Midwifery Service which is co-ordinated with the District Nursing Service.

Pam Pianta : Simpson Wing Unit Team Leader

Medical Nursing Service

This year has passed very quickly. All the staff are very aware and involved in Quality Improvement. Much work has been put into Coronary Care and Cardiac Rehabilitation. For the past six months, I have met with Allied Health each morning to discuss patients and impending discharges. This has proved successful for all concerned.

It has been of great value to have a Social Worker and Pharmacist. We look forward to meeting with our new Occupational Therapist, due to commence shortly.

Many thanks to all nursing staff for the pursuit of quality care.

Pam MacKay : Castle Ward Unit Team Leader

Operating Suite

Once again the year has been both challenging and very busy. This year has seen the expansion of the orthopaedic service to three days per month, the expansion of the gynaecological

service, together with the appointment of a new surgeon. Mr. Ben Yokhanis commenced with us in February 1998, and has been keeping us busy since then.

This year has also seen the resignation of Dr. Ambikapathy from Stawell District Hospital, as a result of his appointment to the position of Medical Director at St. John of God Hospital, Ballarat. Dr. Ambi will be missed by the peri-operative nursing staff and we also thank him for the donation of a fiberoptic Fujinon gastroscope to the hospital. As a result of Dr. Ambi's resignation, there are now two new faces in the endoscopy service : Dr. J. Watson and Mr. Bruce Stewart, and we look forward to a close working relationship with them.

The major purchase for this financial year has been in the area of anaesthetic equipment. As a result of consultation with our Consultant Anaesthetist, Dr. John Oswald, we purchased a state of the art anaesthetic monitoring system. This enables us to further comply with best practice in anaesthesia and to adhere to the new standards for the delivery of anaesthetic agents as recommended by the Australian and New Zealand College of Anaesthetists. This purchase was generously supported by the community at Radio Appeal time and again we thank the public for their continued support.

This year has also seen the throughput for the operating suite exceed all expectations. In May, we had an all time record, which we exceeded in June, which helped in ensuring the viability of the service in the future. I wish to thank all my staff for their mighty effort, particularly over the final two months of this financial year.

Chris Shorten : Unit Nursing Manager



Chris Shorten (Operating Suite UNM), during Fire Training

PATIENT SERVICES

Hospital In The Home

HITH services deliver acute health care usually provided in hospital inpatient settings, to people in their own homes. Clients receiving care under this programme are expected to meet the minimum criteria for admission with the care provided, representing a substitute for acute ward-based inpatient care.

Initially the government provided incentive funding for public hospitals interested in undertaking pilot projects, and Stawell District Hospital submitted a project proposal in July 1996.

Our HITH Programme commenced in December 1996, offering home-based acute care to clients needing IV antibiotic therapy, wound care, acute back pain management and earlier discharge of several types of post-operative clients. Other client types are also assessed on an individual basis for admission to the programme.

Since its inception, sixty-four patients have received acute care under the HITH programme and the feedback from the Quality Management Surveys indicate a high level of patient satisfaction.

Jan Sherwell : HITH Co-Ordinator

District Nursing Service

The last year has seen an every increasing demand for our services in the community. Despite the transferring of much 'personal care' to Linkages and Local Government Personal Care Attendants, the annual number of visits has increased by 3,000 to 18,000. Working closely with Post Acute Care and Hospital in the Home we attended an average of ninety-eight clients per month.

We are part of the community team of service providers that provide ongoing care, if required, following hospital discharge; sometimes supporting the same clients for a considerable time.

Staff continue to update their skills, with Merrilyne Middleton, our continence specialist, attending regional education days, and Barb Oates undertaking a Diabetes programme. Special thanks go to Merrilyne for heading our Hospital in the Home contingent, ably assisting Jan Sherwell in running the programme. Sadly we farewelled long serving staff member, Lorraine Heslop, who retired in April 1998.

Veteran Affairs changes have seen a great increase in paperwork for these clients.

The District Nursing Manual has been re-written and an Orientation Day Plan is currently being established. We continue to participate in Regional meetings and education programmes, hosting days in turn with other agencies. Altogether, another busy and productive year.

Julie Gunn : District Nurse Team Leader

Central Grampians Post Acute Project

The Post Acute Care Project has successfully operated for two years at both Ararat and Stawell. In 1997/98 the numbers of clients supported post-discharge from hospital has increased considerably in both areas.

The area of coverage for Post Acute Care has steadily increased throughout the State and this has included expansion within our Project. There are now Case Managers in Ararat, Stawell, St. Arnaud, and Beaufort/Skipton which has ensured clients have support throughout this large area.

Post Acute Care continues to be well accepted in the Grampians region. It is anticipated that approximately 950 clients will have accepted and received post acute care support in the past twelve months within the project.

*Lyn MacKenzie, RN, RM, Grad. Dip. Rehab;
Grad. Dip. Health Admin.
Post Acute Care Co-Ordinator*



Merrilyne Middleton farewelling fellow District Nurse, Lorraine Heslop in April 1998

Pharmacy

The hospital was without a Pharmacist from July, until my appointment in October 1997, and I should like to thank all the staff, and in particular, the Nursing and Medical staff for making me feel so welcome and supporting my efforts to reinstitute the clinical pharmacy service. Medical chart reviews are now undertaken each day on Castle and Simpson Wards, and I aim to counsel every patient about their medications prior to discharge where appropriate, supplying written medication lists and other compliance aids when necessary. I liaise with the community Pharmacists to ensure continuity of medication on discharge.

We have set up an imprest system for medication supply to the wards of commonly used items with weekly top-ups, and we have an extensive range of drugs available in the after-hours cupboard. Through the Pharmacy Advisory Committee, we have introduced a new laxative policy and a heparin protocol, and made some significant formulary changes which have enabled us to reduce stock holdings in the pharmacy, whilst reducing wastage due to expired stock.

I also take part in the Cardiac Rehabilitation Programme, attend the Discharge Committee meetings and this year was guest lecturer for the Psychiatric Pharmacy section of the Graduate Diploma in Hospital Pharmacy at the Pharmacy College of Victoria.

Lee Belcher : Director of Pharmacy

Social Worker/ACAT Team

The Social Work Department has been very busy since I started work on September 29, 1997. Prior to this, the hospital had been without a social work service for more than twelve months, although the local ACAT assessments had been admirably undertaken by Denise Brennan.

The role of the hospital Social Worker is to lessen the impact of hospitalisation on patients by practical help and counselling, and working closely with Occupational Therapy, Physiotherapy, Post Acute Care, District Nursing, Doctors and Unit Nursing Managers, to implement a smooth and successful discharge from hospital. Thus the social work service offered to patients and their relatives include general counselling, financial and bereavement/grief counselling, assistance with transport and costs for treatment in other cities and providing general information, eg. pensions.

A Client Satisfaction Survey was carried out earlier this year with pleasing results, although it appears the social work office is difficult to find.

The Rural Hospital Social Workers' Group meet quarterly. The group includes staff from Nhill, Hamilton, Horsham, Warrnambool, Stawell and Mt. Gambier Hospitals.

The Aged Care Assessment Service provides information and assessment for elderly people and their relatives about aged care, the costs involved and the choices open to them. With new legislation being proclaimed in October 1997, costs, eligibility and what, if any, choices of care are available, have become very unclear and confusing for many elderly people and their carers. The ACAT (*Aged Care Assessment Team*) Geriatrician (*Dr. Mark Yates*) and Co-ordinator (*Alison Dalziel*), visit Stawell from Ballarat at least twice monthly. An average of fifteen clients per month are seen by the ACAT.

In the past twelve months I have attended courses on Post Traumatic Stress Disorder, "The Ageing Mind and Brain" and a conference at Monash University on "Death, Dying and Bereavement".

My thanks to staff in all other departments for their co-operation, support and patience as I settled into the job.

Vivienne Pye : Social Worker BA,BSW

Staff Welfare

The Staff Welfare Committee consists of representatives from all areas of the hospital. It has met over the year on an irregular basis, and has dealt with issues relevant to staff satisfaction. A sub-group of the committee has met with members of the Hospital Board of Management to discuss ways of promoting staff satisfaction. An aim of the committee has been to provide a venue for discussing feedback from staff regarding their work environment, and it has also performed a supportive role for the Nurse Educator in organising the Papua-New Guinea visit and the Rural Health Careers Expo. There are three areas of activity by the committee that are worth noting:

- The committee has explored ways of welcoming new staff and facilitating their sense of belonging to the Stawell District Hospital community. These include starting a registry of staff recreational interests, a "buddy system", holding a morning tea to welcome new staff members, and a staff newsletter.

PATIENT SERVICES

- Groups of staff have participated in the Insights Programme, an ongoing series of short workshops centering around facets of stress management.
- Staff members have continued to make use, in groups and as individuals, of the confidential psychological consultation service provided by the hospital, and the Critical Incident Stress Debriefing procedure has been put into practice.

Margot Murphy : Psychologist

Education

Once again a very busy year in the Education Department. Nurses were involved in the accreditation process for Hospital in the Home (HITH), emergency procedure, as well as Basic and Advanced Life Support.

A continuous epidural infusion can now be offered to patients for post-operative pain relief and all RN Division 1 Nurses were required to undergo training/accreditation to enable safe practice in the care of these patients.

Individual and departmental needs analysis provided information on staff training needs and study days on Wound Management and Paediatric Care will be held in the second half of 1998.

International visitors were a highlight this year with two German medical students and three nurses from PNG, spending time with staff. Our PNG visitors gained much information in the area of middle management and will be implementing these processes in our 'twin' hospital at Madang.

An association with Co-Ordinating Unit of Rural Health Education Victoria (CURHEV), has been developing and as a result a "Health Careers Expo" was held at Stawell District Hospital in May. This involved twenty-six health professionals providing information and insights to secondary school students on working as a health professional in a rural area. There is now a Regional Network Advisory Group set up in the Wimmera region to further develop retention and recruitment of health professionals to the country.

Over twenty new staff have undertaken a formal induction programme during the year. These staff were from a variety of departments.

Jenny Farrer : Nursing Education Co-Ordinator

Quality Improvement Programme

Stawell District Hospital's Quality Improvement Programme continues to consolidate as we work through the new style Hospital Accreditation Programme - EQUiP. Assessment of Organisational Performance is at eighteen month intervals and focuses on outcomes for the customer. Using broad standards, the performance of the teams (*across departments*) involved in customer care and service is assessed.

Stawell District Hospital's Quality Improvement Committee (QIC) maintains its statutory immunity as an approved Quality Assurance Body, under Section 139 of the Health Services Act, after its name change in June 1997, from the Combined Continuous Quality Improvement/Standards/Accreditation Committee.

During the last calendar year, the Quality Improvement Programme has been active with over sixty-five reports being completed. Fourteen wards/departments conducted at least two Quality Projects. Two multidisciplinary studies were conducted, one on Hysterectomy, the other Caesarean Section. Of the number of activities/studies that were not completed, many have been re-scheduled for the 1998 Quality Plan.

Departments new to the Quality Improvement Programme in 1997, who introduced ongoing Patient Satisfaction Surveys were the Accident and Emergency Department, Speech Pathology and the Dietitian, with Audiology surveying local GP's who referred to the service, Administration conducting a Board Member Orientation Feedback Survey, and the ACAT Co-Ordinator conducting a survey asking families and carer's of those patients being transferred to the Queen Elizabeth Centre (QEC), if they had received enough information.

Following are listed some benefits achieved through continual assessment of hospital activities and customer satisfaction that have provided improved patient outcomes and hospital services during 1997:

- The distribution of Rehabilitation Services Information Booklet to families/carers, prior to patients transfer to this facility;
- The assessment and achievement of maintaining the Cardiac Rehabilitation Programme against the National Heart Foundation Minimal Standards;
- Streamlining and Improving the Podiatry Service to Intellectually Disabled Clients;

PATIENT SERVICES

- Introduction of the final draft of the Peri-Operative Nursing Care Plan and Midwifery and Surgical Clinical Pathways.

Presently twenty-nine hospital wards/departments, including Allied Health Services are working through their 1998 Yearly Quality Plans. These plans nominate activities which these wards/departments have decided for a number of reasons, to address. The emphasis being on quality not quantity of activities. Many extra activities have been added throughout the year as improvement opportunities from EQulP sub-committee meetings. The task of completing these activities by the nominated time frame is proving a continuing challenge!

To date a number of Quality Improvement Reports have been completed, which have resulted in increased efficiencies and improved customer care and outcomes. Some of these are:

- The development and introduction of Surgical Clinical Pathways, Day Surgery Form and Integrated Care Plan;
- Review of Emergency Switchboard Procedures in conjunction with the Hospital Emergency Manual;
- Patient Confidentiality Survey to Staff;
- Staff Questionnaire on Standard Infection Control Precautions, Physiotherapy Progress Reports to Medical Officers and Post Operative Day Case Discharge Information Sheets.

All wards/departments have developed Satisfaction Surveys which provide information about what patients/customers think can be done to improve the quality of the hospital service and give them a good outcome from their health care.

The Medical Quality Improvement Programme has been further advanced by involvement in assessing Clinical Indicator results and other speciality studies throughout the year.

To assist with information sharing and communication, Department Head meetings were recently extended to one hour, with a specific time slot in which Quality Improvement could be addressed. This has benefited all departments, as everyone now knows what each area is striving for and achieving. The bi-monthly 'Just a Work' newsletter also allows dissemination of information about the Quality Improvement Programme, completed reports and pending EQulP study days to all hospital staff.

The build up to the March 1999 Organisational Wide Survey began in earnest with the ACHS Periodic Review on September 11, 1997. Ms. G. Clarke was our ACHS Surveyor on this day. The periodic review proved to be a fairly daunting task

for some, mainly because the format of presenting information has changed. A verbal presentation on a specific standard at a specified time length was given, to present supporting data on how our hospital has achieved that standard. Standards addressed were from the Continuum of Care and Quality Improvement.

Ms. Clark presented us with a very detailed report, listing suggestions, comments and recommendations. Particular commendations went to Stawell District Hospital's range of community outreach programmes.

A number of Ms. Clark's suggestions have been further developed. These are:

- The development and implementation of Day Surgery/Procedure Patient Satisfaction Questionnaires;
- Post discharge phone contact to randomly chosen Day Surgery patients;
- Curbside Consultations;
- Highlighting of a particular Quality Issue addressed in the Quality Improvement Programme; and more recently
- A draft was presented to the QIC on developing and conducting consumer focus Groups.

Earlier this year, after what seemed a very long wait, Stawell District Hospital received results from the Victorian Statewide Patient Satisfaction Survey conducted in August/September 1997 by TQA Research.

Overall satisfaction and care rating for Stawell District Hospital, indicated a high level of patient satisfaction at the hospital. There were a number of areas of relative strength. These related to living conditions, personnel and communications, and length of stay of overnight patients. The three areas highlighted for review are currently being discussed.

I would like to thank Mr. B. Fowkes (CSM), who provides continual support, as do many other staff members who ably assist in the collection of necessary data. My personal thanks to Meg Blake (PRO) and Ladies Auxiliary Members, for their assistance with the 'Curbside Consult', and to the 'upstairs' clerical staff who visibly sag when they see me approaching with more typing!

Sarah Warren : Quality Manager

PATIENT SERVICES

Infection Control

A strong staff health immunisation programme is being maintained. Computerised data bases of our immunisation programme have been completed this year.

An Infection Control Audit conducted by Coopers-Lybrand during the year, indicated that infection control has a high priority in our organisation.

Pam Fowkes : Infection Control Officer

Occupational Health and Safety

Further Ergonomics Reviews have been conducted during the year, and improvements made.

A Victorian Workcover Audit indicated that our Safety System functions well.

Further acquisitions of electric beds, and a higher capacity electric lifting machine are making patient transfers easier.

A review of chemicals has been completed and a move will be made to an integrated chemicals system.

Bruce Fowkes : OH&S Co-Ordinator

Helen Schutt Nursing Home

Stawell and District have now been serviced by a nursing home for twenty-five years, the last three being in the Helen Schutt Nursing Home, which was opened to residents on August 1, 1995.

The elderly are able to remain in their own homes much longer now due to the many and varied services that are provided, therefore are in need of a higher level of nursing care on entry to the nursing home than in the past. This is now placing greater demands on the staff.

Education has been ongoing with staff participating in various seminars throughout the year - Palliative Care, Wound Management, Occupational Health and Safety, Management of Aggressive Behaviour, Quality Assurance, Human Resource Management and Documenting for the RCS Funding.

This year two of our staff successfully completed a post basic course in Psychogeriatric Nursing for RN Division 2 nurses. Congratulations to Karen and Leanne.

A distance education course in dementia care funded by the commonwealth and run by South Eastern Branch of South Australian TAFE, consisting of seventy-two hours of study for each participant, was successfully completed by twenty-two of the staff, nursing, kitchen and hygiene.

The nursing students from Ballarat continue to visit the home for study blocks of two weeks three times a year and gain practical skills under the guidance of Ann Bibby.

This year has seen the appointment of a part time Ward clerk to the nursing home, which relieves the nursing staff of many clerical duties and gives more time for resident care.

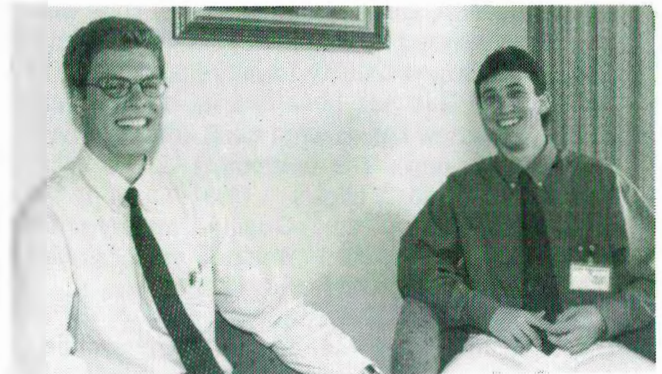
Our thanks go to the Ladies Auxiliary and the Y-Zetts for their continued support in providing necessary equipment for the comfort and safety of our residents.

My congratulations and thanks go to all nursing home staff for the mammoth task of running a street stall and raffle which raised in excess of \$2,000. This was a great team effort. These funds, together with the funds raised by the Sprockets (*thanks Team*), in the annual Murray to Moyne, will be put towards a gazebo for the use of the residents and relatives.

Thank you to the volunteers who assist us in varied ways, your contribution is greatly appreciated by both staff and residents. A special thank you to Mr. Ted Nicholson, who visits the home every evening to assist the less able residents to eat their meal. Ted has been assisting in this way for many years.

To management, medical staff, nursing home staff, and staff of all other departments, thank you for your valuable contribution towards the efficient operation of the nursing home.

Lorna Carey : Nursing Home Supervisor



Student Doctors from Germany, Florian Kessler (*left*) and Christian Habelt (*right*), during their time at the Hospital

Supply

The last twelve months have been both a positive and challenging time for the Supply Department with the installation of many new services throughout the hospital. These have included : PABX system, first floor modifications, Steri system and Steriliser for Theatre.

All the above and many other projects have kept the Supply Department busy in all respects, from generating purchase orders to ensuring goods are Year 2000 compliant. As people would be aware, the new millennium is approaching. This requires all goods that have an embedded electronic chip to be Year 2000 compliant. Items include : computers, biomedical equipment, electronic maintenance equipment, vehicles and plant equipment.

There has also been disruptions with deliveries from HSA, with the updating of their warehouse and computer system. This disruption caused many delays and headaches in the Supply Department. Thankfully, all staff were patient and understanding, as it was explained that once the updated system was operational it would provide a quicker and more efficient service to all concerned.

Finally, I would like to take this opportunity to thank all departments for their support over the last year and the Supply Department endeavours to keep up the excellent service it provides to the Stawell District Hospital.

Todd Dunne : Buying Officer

Medical Records

Medical Records provides the vital communication link to the treating health professionals by providing the patients past and present medical history.

The medical record is initiated upon admission, as either an emergency or an elective patient. The trend of the previous years continues with the number of admissions increased from 2,428 in 1996/97 to 2,483 in 1997/98, an increase of 55 patients.

Co-ordination of admission requirements of the various Visiting Specialists and local Doctors who treat at the hospital, provides constant demands for the Admissions and Medical Record staff. The Admission Office has been modified, within the limitations of its size, to allow more space for patients and admission staff.

October saw six administration staff successfully complete a short course in medical terminology and broaden their skills in this area.

A major quality improvement for the Department has been the successful design and implementation of a Day Surgery medical form, which combines seven separate forms into the one. This has provided not only cost savings in medical records but also time efficiencies for treating staff by reducing the amount of paperwork which has to be completed.

Much work has been completed by the switchboard staff in identifying improvements needed to the phone system for both patients and staff. These benefits will be realised early in the next financial year, such as phones by all patient beds.

Further changes and challenges in the forthcoming year will be the implementation of a new computer system and accreditation.

Thanks to the staff who provide the backbone to the Medical Records/Admissions service and Switchboard/Reception and all Departments whom we work closely with throughout the year.

Carolyn Prescott : Health Information Manager

Catering/Hygiene

Catering Services

All Catering Staff are to be congratulated for the excellent result in the Statewide Satisfaction Survey of Group C Hospitals. We achieved equal top billing with Benalla District Memorial hospital which is also a Fresh-Cook operation.

The 1997/98 financial year was again busy with a small increase in output. We successfully tendered for the Pleasant Creek meal contract; this will decrease significantly over the course of the contract.

Our standards have again been monitored in all areas with questionnaires that provide valuable information for service improvements. One improvement in particular is the method of supply to the Senior Citizens. We now serve meals directly to the plate from a bain-marie at the Senior Citizens Hall instead of using standard foil containers. This has resulted in an on average 100% increase of customer numbers.

Out staff levels decreased with the departure of Sally Sleep after eight years of service. I would like to congratulate all Catering staff for the way in which they shouldered the remaining workload. It is hoped our current flexible staffing mix will assist us over the next twelve months.

PATIENT SERVICES

In last years report, I was remiss in thanking our Junior staff who provide valuable service to patients in the evenings. We farewelled Matt Freeland, Skye Ferguson, Melinda Binger, Paul Brisbane-Webb, and Ebonie Delahunty; and welcomed Emma Carr, Megan Cunningham, Sandra McPhee, Hayden Croton, Sarah Williamson, Lauren Hutton, Taryn Sibson, Elise Thomas, and Kathryn Hart.

We look forward to another busy year and would like to thank all hospital staff for assistance given during the year.

Hygiene Services

The positive result in the Statewide Satisfaction Survey reflects the standards Hygiene staff apply to their work. All staff are to be congratulated on a excellent result.

Duties were again refined during the year with the non-replacement of staff during annual and long service leave. Along with roster changes, this assists in providing a cost-effective cleaning service that maintains a clean and hygienic environment.

The laying of carpet in Perry Wing is eagerly anticipated. This will provide a safer and cleaner workplace for staff in this area and allow Hygiene staff to focus some time in other areas.

Thanks to all other staff for co-operation and assistance given throughout the year.

Glenn Pulley : Catering/Hygiene Supervisor

Occupational Therapy

The Occupational Therapy Department has seen some changes over the past year. A new Occupational Therapist is soon to be appointed, following my resignation as of July 10, 1998.

The visiting service to St. Arnaud once per fortnight has ceased, and a local Occupational Therapist has taken up the position. This change has allowed time for meeting additional demands in Stawell, due to increase in client needs.

The Occupational Therapy Service at Stawell District Hospital continues to be provided by one full time Occupational Therapist Service provision, which includes inpatient discharge planning, home assessments and rehabilitation for a predominantly aged clientele.

Liaison with outside agencies continues, including Health and Community Services, Veterans Affairs, TAC and Workcare. Service of these agencies often requires travel to the rural city of Ararat.

Occupational Therapy has involvement with community groups including the Cardiac Rehabilitation Programme, Arthritis Support Group, Senior Adult Planning Group and Healthy Lifestyle Holidays.

Additionally, Occupational Therapist attended the Australian Rural and Remote Allied Health Professionals Conference with Podiatry in October 1997. The conference, hosted by Whyalla, SA, provided much information on recruitment, retention and professional development for Allied Health Professionals working in rural and remote Australia.

Day Centre (ADASS) consistently receives good attendance, while staff - Moira Hateley, Norma Barton and Elizabeth McKenzie have been joined by Di Wilson and Jacinta Lambert to assist with leave breaks.

Activities enjoyed by clients include crafts, games, quizzes, exercises, singing, outings and wheelchair dancing.

Kylie Nolan : Occupational Therapist

Physiotherapy

The Physiotherapy Department has had a busy year and seen several changes to staffing and programmes. We commenced the year with one full time and three part time staff, however, this has significantly altered. Stuart Millar was appointed to the Chief Physiotherapist position in February,; Caroline Hamilton left on a year's maternity leave in June; Mia Pithie worked for a few months before moving to Ballarat; and with Leigh Douglas' extended absence due to ill health, the Department was left short staffed. The appointment of Sharon Pearce in April on a full time basis has helped to relieve some of the short falls.

The Department has strived hard to continue to provide all services. Inpatients were seen by Stuart Millar each week day and although our involvement in areas such as HITH, home visits, etc. has decreased, we successfully extended our involvement in Hydrotherapy Sessions, Cardiac Rehabilitation Programmes, Ane-Natal Classes, Post Acute Care and community education and joint assessments with the Occupational Therapist. The Department has also endeavoured to play an active role in discharge planning and maintained a strong involvement with the ACAT Team.

Quality activities are ongoing and resulting in a number of improvements to our Department in areas of Patient Histories, Progress Reports to

PATIENT SERVICES

Medical Practitioners and patient satisfaction with regard to our service.

New initiatives include the purchase and establishment of gymnasium equipment incorporating weights and a treadmill machine which has been installed and provided invaluable aid in the successful rehabilitation of many conditions, especially the multitude of orthopaedic surgical cases being conducted by the hospital and the very successful Cardiac Rehabilitation Programme.

Further education has continued throughout the year with staff attending courses such as Upper Limb Symposium, McKenzie Lumbar Spine Course and ongoing meetings with the Western Regional Physiotherapy Group. The Department also continues to hold regular Inservices to enhance our expertise.

Our clerical team, Carol Mullane and Jane Kibble continue to meet our administrative needs and always provide a cheerful and efficient reception./secretarial service.

Stuart Millar : Chief Physiotherapist

St. John of God Pathology

The last year has been a momentous one for the department, moving in and settling down in the new laboratory jointly developed by St. John of God and Stawell District Hospital. The new lab has been named in honour of our Pathologist Dr. Stan Pilbeam, and worthily acknowledges thirty years of dedicated service both to this hospital and the region. The lab was opened by the Minister for Health and Community Services, Mr. Rob Knowles on November 28, 1997 in the presence of the public and representatives of the Order of St. John of God from as far afield as Perth (WA). Apart from a few teething problems the move has seen a dramatic increase in patient satisfaction as shown by our patient satisfaction survey.

The ease of access and close proximity to parking in the new site appears to have assisted in a rapid increase in patient attendances, with the department seeing over 1,000 patients, for the first time ever, in April. This increase continued into succeeding months resulting in a total of 11,204 attendances for the twelve month period, a doubling of our workload in four years. Such an increase could not be sustained without the dedicated hard work of all members of the department, Jeff Savage, Christine Dunn and Maree Parkin to whom my thanks and appreciation are extended.

In addition, we were called on to identify and prepare a report for accreditation authorities on the illegal operations of a roving heart/health check van run by a bogus community health scheme in our municipality. This served as a warning to all in the community to examine the standards and accreditation of anyone performing pathology tests. Any registered laboratory will attract Medicare rebates and patients should experience minimum out of pocket expense. We at St. John of God as a non-profit organisation, will bulk bill any patient whose circumstances prevent direct payment or who will be disadvantaged by paying the "gap" between the bill and what Medicare pays.

Once more we have been able to extend our range of inhouse services and invest in more new equipment. This year has seen our laboratory established as the reference centre for renal stone analysis for St. John of God in Victoria. This has resulted in samples from thirteen hospitals/laboratories throughout Victoria being referred to Stawell for analysis. We have also seen the completion of our capital equipment upgrading with the purchase of a new state of the art haematology analyser, only the second such machine installed in Australia. As well, the recent ordering of a new Holter Monitor, will see the department offer that service in the near future.

*R.D.Hutchinson B.App.Sc., Cert.Th., M.A.I.M.S.,
Laboratory Supervisor*

Podiatry

The Podiatry Department is continually expanding and has had a very busy twelve month period with the number of patients increasing and presenting with referrals from a wider area.

Podiatry services continue at the Helen Schutt Nursing Home on a monthly basis. Home visits have increased with services to include the Eventide Cottages. One day per month is spent supplying Podiatric services to the Eventide Hostel and one morning per month at Kingston Lodge. Pleasant Creek methods are changing due to the fact that clients are moving towards Integrated Living within the community although some are still being ferried from Pleasant Creek to the Hospital for treatment.

Continuing Education is still a priority. Some of the subjects covered throughout the year have been : Serial Casting, Principles of Podiatric Orthoses, Ankle Pain, Sporting Injuries to Feet and Ankles. In May the Australian Podiatry Conference was held in Adelaide. Through a series of Papers presented by Australian and International Speakers over a period of five days,

PATIENT SERVICES

the subjects were many and varied, covering such subjects as : Trauma Recovery, Sports Podiatry, Orthoses, Biomechanics, Paediatric Podiatry, Podiatric Surgery, Diabetes, Forensic Podiatry and Radiography.

In September of 1997 the Australian Conference for Services to Australian Rural and Remote Allied Health (SARRAH) was held in Whyalla, SA. The range of subjects covered was immense and gave us an insight into the problems faced by Rural, Remote and Isolated People when trying to access all Health Services. The Podiatry Department is also associated with the Co-ordinating Unit for Rural Health Education Victoria, (CURHEV). We also participated in the recent Rural Health Week, being part of the Hospital's Health Careers Expo.

It was pleasing to be the inaugural winner of the Certificate of Achievement for Quality Improvement.

Thanks to all the Allied Health Team who have been so co-operative during the past twelve months.

Helen Davidson : Podiatrist

Administration

The 1997/98 financial year commenced with staff adapting to a restructuring process which the Administration and Finance Department undertook at the end of the previous financial year. This involved both a rationalisation, and a restructuring of the duties and responsibilities of all departmental staff, with all staff responding positively to their new challenges.

This financial year saw the introduction of significant changes in the Aged Care area, with the introduction of the new Aged Care Act 1997. Many legislative aspects of Aged Care, including quality of accommodation, quality of care and financial management, have changed significantly, and policies and procedures have had to be changed to reflect this new Aged Care environment.

Information technology continued to play an integral role in hospital data management during the year. The Hospital has been systematically upgrading the computer hardware, with more staff gaining access to the Hospital's systems. Achievements this year include the upgrade of the file server, the posting of an Internet home page which can be accessed by the public from the World Wide Web (<http://www.netconnect.com.au/~sdhosp>), and

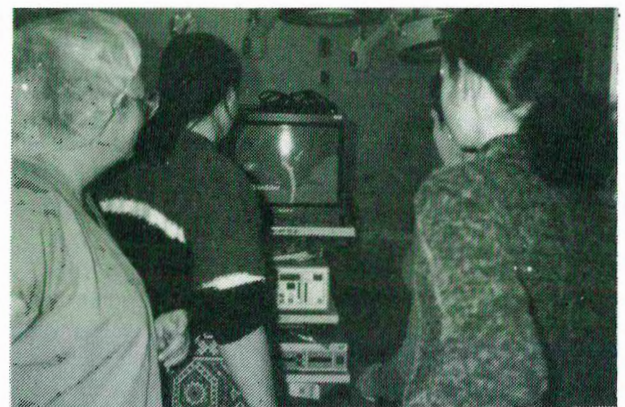
the formal establishment of a Year 2000 committee.

The issue of Year 2000 Compliance (*the effect of Year 2000 rollover and its potential effects on hospital's computer, bio-medical and building service systems*) involves detailed planning and careful analysis. A new contractor, Mr. John Treseder, has commenced on a part time basis and is working as technical support, allowing the Hospital's Information Technology Officer, Scott Milan, to concentrate on administrative issues regarding the Year 2000 changeover, regional IT changes, and implementation strategies for the new computer system. Strategies are in place for meeting the challenge of ensuring that all hospital equipment is Year 2000 compliant and departmental staff are working with other departments to ensure that no major disruptions will occur to operations during the millennial changeover.

Stawell District Hospital has been an active participant in the Grampians Rural Hospital Information Technology Alliance, which involves all hospitals in the Grampians region. Strategies to significantly upgrade the Hospital's IT capability with modern hardware and software and network infrastructure, in a manner consistent with the region, have recently been approved by the Hospital Board.

The Hospital has exceeded its Health Agreement Service targets this financial year, and together with close attention to budgetary control and cost containment strategies, has posted a healthy surplus this financial year.

Robert Parker : Finance Manager



Chris Shorten (*Operating Suite UNM*) demonstrating theatre equipment to students during the Hospital's Health Careers Expo held in June 1998

PATIENT SERVICES

Radiology Department

The year just gone was the first with Dr. Paul Walker, Dr. Rohan White and their associates contracted to provide Radiology services. These services were expanded as compared with those available for the previous year. Attendance sessions are now conducted twice per week with our local doctors able to discuss any cases of interest at those times. Film reporting is conducted in those sessions and by teleradiology to Horsham at other times. This allows a faster return of reports, than was available prior to this year.

Dr. Walker's group installed a private Computerised Tomography (C.T.) scanner in September, 1997. In the nine month period there have been 342 patients examined with this equipment, when previously these patients needed to travel to other centres for the same procedures. Emergency C.T. scans have been necessary on a number of occasions and these have been supervised by a Radiologist using the teleradiology system for off-site viewing and reporting of those images.

One of the advantages of the new agreement has been the provision of medical imaging relieving staff for leave requirements. Sandy Worsley has been employed by Dr. Walker to undertake radiography and C.T. sessions when necessary and we welcome her back into this role.

An overall increase in patient throughput of 4% was recorded for the year. This incorporates an increase in the complexity and time requirements involved with the C.T. examinations. The changes introduced over the year have made for a busy but interesting time for Radiology staff with the year to come promising more of the same.

Peter Schenk : Medical Imaging Technologist



From left, PNG Visitors Valentine Kupi and Christine Gawi, checking out the Maintenance Workshop with Paul Tangey and Simon Healy

Engineering And Maintenance

The Engineering Department is staffed by three full time staff : Garrie Martin (*Supervisor*), Simon Healy (*Carpentry, Painting, Building, Plant & Equipment maintenance*), and Paul Tangey (*Building & Plant Preventative Maintenance & Vehicle maintenance*).

The Engineering Department is also responsible for the supervision of individuals and companies under contract to perform specialised services to equipment, plant, buildings and grounds.

Major projects completed in 1997/98 were the remodelling of part of the Syme Wing to accommodate the Victorian Ambulance Service. A garage was also constructed at the read of the Syme Wing to house two ambulances.

Refurbishment of the Radiology Department was also completed in 1997/98.

Engineering staff also completed in excess of 800 requisitions for service to equipment, buildings, plant and vehicles, that the department is responsible for.

I would like to take this opportunity to thank Simon and Paul and all other Departments and Contractors for their support in 1997/98.

Garrie Martin : Maintenance Supervisor

AWARDS

Staff

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:

1998

25 Years

Gold Watch

Mrs. L. Carey

20 Years Service

Mrs. S. Fletcher

Mrs. J. Gavin

Mrs. M. McGaffin

10 Years Service

Mrs. N. Barton

Mrs. P. Dunn

Mrs. J. McSparron

Ms. D. Trengove

10 Years Service

1997

Ms. F. Baker

Ms. C. Dufty

Mrs. S. Grainger

Mrs. C. Kreunen

Ms. T. Pianta

Mr. P. Tangey

Mrs. L. Waller

1996

Mrs. C. Christian

Ms. V. Cockburn

Mrs. S. Fontana

Ms. J. Gunn

Mrs. Y. Harding

Mrs. M. Henderson

Mrs. R. Kalms

Mrs. J. Marrow

Mrs. L. McLaughlin

Mrs. K. Moncrieff

Ms. D. Noble

Ms. R. Storch

Mrs. S. Warren

1995

Mrs. H. Buckingham

Mrs. C. Burke

Ms. L. Douglas

Mrs. S. Douglas

Mrs. S. Dunn

Mrs. J. Fiscalini

Mrs. K. Gibson

Mrs. L. Heslop

Mrs. J. Maddocks

Mrs. E. Meumann

Mrs. M. Middleton

Mrs. N. Nicholson

Ms. D. Perry

Mrs. J. Ryan

Mrs. J. Sherwell

1994

Mrs. S. Dalziel

Mrs. P. Fowkes

Mrs. D. Gray

Mr. S. Healy

Ms. B. King

Mr. G. Martin

Ms. J. Meek

Ms. C. Smith

Mrs. R. Zanker

1993

Mr. B. Fowkes

Mrs. J. Healy

Mrs. H. Thomas

1992

Mrs. E. Baulch

Mrs. L. Bond

Mrs. N. Crawford

Mr. M. Delahunty

Mrs. S. Jones

Mrs. P. Pianta

Mrs. S. Veroude

1991

Mrs. D. Blackman

Mrs. C. Brightwell

Mrs. M. Cray

Mrs. A. Davis

Mr. R. Hemley

Mrs. G. Owen

Mrs. K. Petch

Mrs. E. Peters

Mrs. B. Redford

Mrs. B. Savage

Ms. S. Summerhayes

Mrs. M. Teasdale

Miss J. Upson

1990

Mrs. A. Baulch

Mrs. L. Boak

Mrs. H. Delley

Mrs. K. Holmes

Mr. G. Pulley

1989

Mrs. D. Barry

Mrs. P. Humphrey

Mrs. C. Mullane

1988

Mrs. M. Binger

Ms. A. Cooper

Mrs. J. Gavin

Mrs. M. McGaffin

Mrs. B. McLeod

Mrs. B. Naylor

Mrs. K. Olerhead

Ms. N. Sidebottom

Mrs. D. Wilson

1987

Mrs. P. Cook

Mr. D. Guy

Mrs. C. Murphy

1986

Mrs. A. Bibby

Mrs. R. D'Arcy

Mrs. P. MacKay

Mrs. P. Potter

Mrs. Y. Richards

Mrs. R. Smith

Mrs. E. Wilson

1985

Mrs. L. Clayton

Mr. K. Collins

Mrs. S. Fletcher

Mr. L. Kent

Mrs. N. Prydderch

Mrs. S. Rowe

1984

Mrs. J. Boothman

Mrs. L. (Sally) Howell

Mrs. M. Perry

1983

Mrs. L. Carey

Mrs. R. Dunn

Ms. L. Ellen

Mrs. M. Forster

Mrs. F. Goodinge

Mrs. M. Graham

Mrs. K. Holloway

Mrs. V. Kennedy

Mrs. M. Kindred

Ms. J. Mortyn

Mrs. G. Rickard

Mrs. D. Simmons

Mrs. J. Skurrie

Mrs. F. Stewart

Mrs. L. Willcock

1982

Mrs. M. Allan

Mrs. H. Jerram

Mrs. N. Trask

20 Years Service

1997

Mrs. L. Clayton

Mrs. C. Murphy

Mrs. L. Willcock

1996

Mrs. M. Binger

Ms. P. MacKay

Mrs. P. Potter

Mrs. N. Prydderch

Mrs. Y. Richards

Ms. S. Rowe

1994

Mrs. M. Perry

1993

Mrs. L. Carey

Ms. L. Ellen

Mrs. G. Rickard

Mrs. D. Simmons

1992

Mrs. K. Holloway

Mrs. M. Graham

Mrs. V. Kennedy

1990

Mrs. R. Dunn

1982

Mrs. D. Evans

Mrs. B. Smith

25 Years

Gold Watch

1997

Mrs. M. Graham

Mrs. K. Holloway

Mrs. V. Kennedy

1996

Mrs. G. Rickard

1984

Mrs. Betty (Isobel) Smith

AWARDS

Life Governors

BENNETT, Mr. J.M.
BLAKE, Mr. R.
BLAKE, Mrs. M.
BOATMAN, Mrs. C.
BRILLIANT, Mrs. J.M.
CASTLE, Dr. R.N.
CASTLE, Mrs. E.
COOTE, Mrs. J.C.
CROUCH, Mrs. J.
CROUCH, Mrs. N.
DADSWELL, Mr. K.
DAVIDSON, Mrs. H.
DELAHUNTY, Mrs. M.
EARLE, Mr. G.
EARLE, Mrs. J.D.
EIME, Mrs. A.
EVANS, Mrs. D.M.
EVANS, Mrs. M.
FRASER, Mr. W.G.

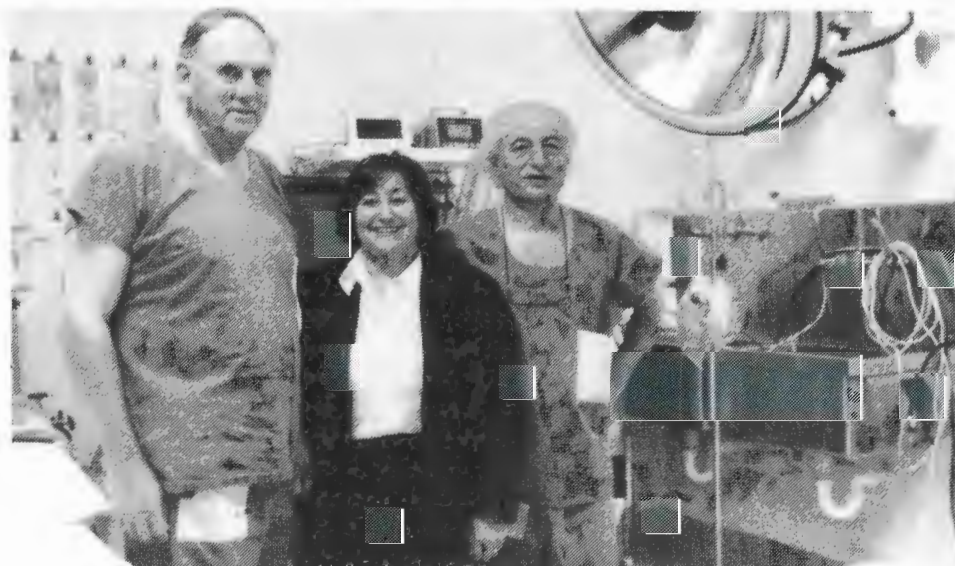
FRY, Mrs. D.
GAVAN, Mrs. I.
GAYLARD, Mr. R.
GLOVER, Mr. J.
GRAY, Mrs. P.
GROSS, Mrs. B.
GYLES, Mrs. J.
HOWDEN, Mrs. B.
HUTCHINGS, Mr. C.J.(MBE)
JERRAM, Mrs. H.C.
KENNEDY, Mrs. V.
KINGSTON, Mr. F.
KRELLE, Mrs. s.
KUEHNE, Mrs. E.
LANGSFORD, Miss J.G.
McCRACKEN, Mr. J.D.
McDONALD, Mrs. N.
McMULLIN, Mr. R.K.
MILLER, Mrs. K.

MIRANDA, Mr. C.
NEILSEN, Mr. V.C.
NEILSEN, Mrs. B.
NORTON, Mrs. R.
PERRY, Mrs. R.
POTTER, Mrs. V.
PRICE, Mrs. J.
ROBSON, Mr. M.
ROBSON, Mrs. M.
SCHWARTZ, Mrs. W.L.
SCOTT, Mrs. M.
SIBSON, Mrs. J.
SMITH, Mrs. B.I.
STONE, Mr. R.C.
TANGEY, Mr. W.J.
TEASDALE, Mrs. K.
WARD, Mr. F.C.
WEST, Mrs. J.
YOUNG, Mrs. K.

Guest Speaker

The hospital is delighted to have Mr. Benyamin Yokhanis as guest speaker at this years annual meeting. Mr. Yokhanis and his wife Ileen, have lived in Stawell since February 1998 when he commenced his surgical practice in the district. Their two sons, Alan and Martin, remain in Melbourne completing their tertiary studies.

Mr. Yokhanis completed his surgical training in England in 1978. From 1979 to 1993 he practiced in Iraq before moving to Melbourne. He has been appointed a Fellow of the Royal Australian College of Surgeons, having worked at a number of centres in Melbourne, including Monash Medical Centre, PANCH and Frankston Hospitals.

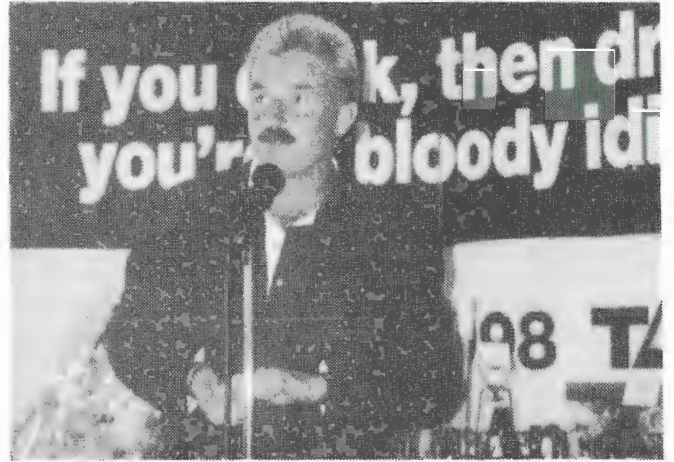


New Surgeon Mr. Ben Yokhanis (right) pictured with his wife Ileen (centre), and Dr. Norman Castle

PUBLIC RELATIONS/FUNDRAISING



From left, Ms. Mary Delahunty, guest at Hospital Charity Race Day, with Lady of the Day Winner, Leah Brain



Tim Moore, Vice Chairman of PGA at 1998 Golf Pro-Am, Stawell Golf Course



Charity Race Day Wins Community Award
Meg Blake, Public Relations/Fundraising Officer, receiving the Award from Shire Mayor, Cr. Don Gardiner



Y-Zetts Janine Sibson and Rosemary Perry, with Clinical Educator, Jenny Farrer and Publicity Officer, Meg Blake, following donation of Resusci-Anne by the Y-Zetts



Ruth Gilding of Ararat receiving her prize of a painting donated by Mrs. Eileen Glover. Eileen and husband John, have been donating paintings for the hospital's fundraising for several years

Fundraising

The sourcing of donations and gaining profits from specially conducted fundraising events is becoming increasingly important.

To maintain a standard of excellence of care and service for our patients, it is essential to continually provide and upgrade equipment so that our doctors can treat patients in the most beneficial ways. So much of the equipment and technology required has large price tags, which cannot generally be purchased via normal hospital operating funds.

In this financial year two (2) PGA Pro-Am's and one (1) Charity Race Day and Hospital Radio Appeal Day, supported specific projects such as the Telemedicine project and a new anaesthetic monitor, with \$52,000 being raised.

Sponsorship from businesses, including Race Day Major sponsor, Howden Holden, Brix Hotel and Brix Sports and Social Club and Traffic Accident Corporation (TAC) for the Pro-Am's, together with the many others, are a vital part of these events.

The general public contribute, along with service clubs and organisations, gifts in kind and voluntary help and service, which plays a significant role in the day to day life of the hospital.

A band of willing volunteers support hospital functions and services on a regular, including Telethon, Race Day Luncheon, Meals on Wheels Delivery, Lolly Trolley Roster, to name just a few.

This department acknowledges and congratulates the contribution made by members of the "Kingston's" Murray to Moyne Sprockets, Hospital Ladies Auxilliary and Y-Zetts for their tireless efforts in manpower and fundraising, ensuring the continual upgrade of services and equipment for our patients.

The hospital is grateful for the people who make donations in memory of deceased loved ones, and for those people who make the same consideration via pledges or wills.

Public Relations

Work experience has developed very well over the past year with numerous students from local colleges being on placement in various departments throughout the hospital.

Our local publication "Your Hospital and You" newsletter has become a regular mail-out to all contributors.

The acknowledgment of groups and organisations, has been publicised through co-operation with Editor and Staff of the Stawell Times News, and a programme has recently been undertaken to eventually upgrade all hospital beds with electric models. Where appropriate, small acknowledgment plaques are placed on donated equipment.

Rural Health Week, the visitation of three health professionals from Madang, PNG, Community Curbside Consultations surveying perception of hospital services, new staff profiles, Good News media releases, and speaking engagements and hospital tours have contributed to a full, but enjoyable year.

Meg Blake : Public Relations/Fundraising Officer



Herb Skurrie and Rae Greer are regular volunteers for the Hospital. They are pictured working at the Hospital Pro-Am in March 1998

Ladies Auxiliary

This year marks the 70th anniversary of the functioning of the Stawell District Hospital Ladies Auxiliary. Quite an extensive period of history in any organisation's life and a tribute to the ladies, who, during all this time, have held it together and worked in harmony and goodwill, establishing a tradition of service and support for an institution every citizen acknowledges as one of the most important facilities in any community.

In presenting this summary of the activities of the Auxiliary, it gives me the greatest pleasure in saying that 1997 has been a happy, busy and successful one.

The attendance has been good at monthly meetings. Members have supported all functions generously with both time and effort and deserve sincere thanks for work well done.

One of the most constant jobs is that of catering. The ladies have taken part in a roster system providing councillors with evening meals. Food was provided for an Olive seminar, and refreshments at the Charity Race Meeting food plays a large part in fundraising. A cake stall was held during the Radio Appeal Day, whilst a stall held in the Mall stocked special Christmas fare. In connection with this a monster Christmas Hamper, to which members had donated the goods, was promoted in the Mall for three days and was a very successful venture. Mrs. Ollie Naylor presented a lovely knitted shawl whilst Mrs. Brereton donated a basket of silk roses. These were raffled.

A very enjoyable as well as profitable evening took place at the Trackside Bistro when

the Auxiliary entertained friends at dinner. On this occasion, the management kindly donated a Dinner for Two to be raffled.

Another very pleasant function which took place recently was an Easter Bonnet Parade during which Mrs. Ruth Cornwall displayed a collection of hats worn mainly during the 40's, reviving some nostalgic memories. Our thanks go to Ruth for the display and to Mrs. Iris Gavan who donated prizes for the parade.

Once again there has been very generous financial support from both the Stawell Golf Lady Bowlers and the Stawell Bowling Club. The Auxiliary sincerely thanks them for this annual support. Without it, our coffers would be considerably lower.

The Auxiliary acknowledges, with gratitude, the wonderful support and interest of the community of Stawell and district, both in attendance at functions and in donations of various kinds. Without these the Auxiliary could hardly function, so we are indeed most appreciative of all who have contributed.

During the year a heavy duty wheelchair and a Urinalysis Machine were purchased for the hospital, and a pager, sensor mats and a special table for the Helen Schutt Nursing Home. Auxiliary Members also regularly take turns at trolley duty.

We were sorry to receive the resignation of Mrs. Edith Breier, who has been a valuable member over a very long time. Members farewelled her at an afternoon tea.

From time to time invitations are received from another city organisation. The Auxiliary is grateful for these and

endeavours to be represented at these functions.

The Auxiliary acknowledges the support of the businesses of Stawell, particularly the Stawell Times News which publishes and advertises events, and Fuller Insurances which picks up the advertising bills. Without these people's willing and ready responses, the Auxiliary would be the poorer.

A word of appreciation must be said to Mrs. Meg Blake and Mrs. Lynette Bond of the hospital staff, for generous help on all matters whenever called upon.

I could not close this report without some words about the stirring work of committee members, especially the treasurer, Mrs. Betty Gross; secretary Mrs. Jocelyn Fuller, and the media reporter, Mrs. Sadie Krelle. To all the members of the Auxiliary, a very sincere thank you for all the work you have so cheerfully, uncomplainingly and co-operatively done during this twelve month period. I know we can look forward to a further period of pleasant working together to promote, as well as we may, the best interests of Stawell District Hospital.

Edna Kuehne : President



Kaye Teasdale (left), who was awarded a certificate recognising 39 years service, cuts the Ladies Auxiliary 70th Birthday Cake with Shire Mayoress, Bev Hall in June 1998

PUBLIC RELATIONS/FUNDRAISING

Y-Zetts

I believe we, as a community, should support Stawell District Hospital for our own selfish reasons. We want the best care and equipment available right here in Stawell and we want the best Doctors.

Also, we have the opportunity to support one of Stawell's largest employers and that has got to be good for Stawell and district, therefore good for us all.

Even so, I am continually amazed at the generosity of the people of Stawell and District - so many people willingly give time, money, food, etc.

During the year the Stawell District Hospital Y-Zetts supported the hospital in many ways. We helped at Hospital TAC Pro-Am, Hospital Chairty Race Day, Radio 3WMM Appeal Sunday, the Variety Night at the Gourmet Weekend in Halls Gap, run by Meg Blake and the Hospital.

Also, to promote our interest in health, we supported the Lions club with donations of supper and word of mouth advertising for their "Men's Health Night" which was a huge success.

Thanks to several wonderful gardeners in Stawell and Great Western, (*Wine Village Nursery, Leekes, Pooles at Great Western; Grinhams, Clementsons, Beelitzes and Freeland/Sleep in Stawell*) - we held a very profitable Garden Show. Over 200 people had the chance to see the great talents these people have. This day was ably supported by Sherelle Nicholson, The House of Crete, Wine Village Nursery, Gumnut Nursery and David O. Jones. Lunch was served at Seppelts which gave everyone a chance to look over their

beautiful gardens too. We have had so much feedback from this day, we are putting on another Garden Show on November 1, 1998.

A hilarious night was the very cheeky film "The Full Monty". Thanks go to Bests, Foodworks, Garden Gully Vineyard, IGA, Seppelts, Stawell Goldmines, The Diamond House, The Lolly shop and Glen Pulley and the Kitchen Staff at the Hospital, who all helped to make it a successful night.

On May 31, every available member and a few honorary members worked very hard to feed 375 Rotarians at their District Conference. We must thank Stawell Rotary for allowing us this opportunity as it was a huge job to raise funds for a bladder ultrasound. Rosemary Perry did a wonderful job co-ordinating it all. Also thanks to the Stawell Bakery, Stawell District Hospital Kitchen Staff and the Halls Gap Hotel.

During this year we have donated \$5,000 to the Telemedicine Unit which is being well utilised. Together with the Ladies Auxiliary we have donated \$4,500 each to purchase the ultrasound and we are donating \$300 to the Helen Schutt Nursing Home for day to day equipment.

Two of our members, Myriam Scott and Janine Sibson, received their Life Governorship Awards which is for ten continuous years service to Stawell District Hospital. They have both done a great job and I wish to congratulate them - well done! This brings our Life Governor's count to fourteen which is again terrific.

Over the past two years, eleven new members have joined and everyone has settled in well and worked very hard.

Thank you very much to Rosemary and Myriam for all their extra work. To the twenty-seven women who attended the meetings - thanks for the hard work and the good times we have shared.

I hope you have enjoyed the fellowship and commitment that goes with being a Stawell District Hospital Y-Zett Member.

Sam Norton : President



Y-Zetts Members, Shirley Rowe (*left*) and Janine Sibson (*right*), with Patient Services Manager, Bruce Fowkes, following donation of \$5,000 towards the Telemedicine Project

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 Schenk Mr. & Mrs. P.
 Tulloch Mrs. B.
\$11- \$50
 Anonymous
 Baker Mr. W.F.
 Broadwood HW & TM
 Broadwood Ms. S.
 Caris Mr. G.
 CWA Halls Gap
 Fotheringham Rev D & A
 Hill-Smith Mr. A.J.
 Landsborough Unit Ch
 May Mrs. V.
 Snibson Mr. B.
 Spyer Mr. & Mrs. S.
 Thiele Mr. B.
 Wal Wal Ladies Aux
 Willy Mr. & Mrs. P.
 Woodcock Mrs. M.
\$51 - \$100
 Fowkes Mr. K.B.
 Ginn DR & Barker GR
 Grimison T. & S.
 Morgan Mr. & Mrs. A.
 Richards Ms. A.
 Schwartz Mrs. W.
\$101 - \$500
 Anonymous
 Anonymous
 Blachford B. & N.
 Grace Mr. L.
 Happy Wanderer D/Grp
 National Heart Found
 Seng Hpa's
 Stawell Westside Carp
Over \$500
 SDH Ladies Auxiliary
 SDH Y-Zetts
 Stawell Rotary Club
 Stawell Secondary Coll
 Stawell Snr Citiz Club

GARDEN PHOTOS
 Disher Mrs. A.
 Lewis Ms. J.
 Rowe Mr. C.
 Simmons Ms. S.
**MURRAY TO
 MOYNE**
\$1 - \$10
 Davidson Mr. J.
 Grant Mr. R.
 Hosking Ms. D.
 Maio Mr. & Mrs. P.
 McCarthy Mr. D.
 Mitchell Mr. D.
 Rahley Mr. K.
 Robertson Mr. J.
 Shaw Ms. K.
 Smart Ms. C.
 Williamson Ms. P.
\$11- \$50
 Bennett Mrs. M.E.
 Castle Dr. R.N.
 Comitti R.W. & M.H.
 Geoff Illig Wind Clean
 Henderson Steel P/L
 Holmes RC&LJ Fruit
 Krause Brickworks
 Martins Smash Repairs
 Mocka's Garden Serv
 Peter Norton Ford
 Poultry Palace Distrib
 Rhodes Plumbing
 Stawell Auto Wreckers
 Stawell Building & Join
 Stawell Curtain Centre
 Stawell Paint Centre
 Stawell Rotary Club
 Stawell Upholstery
 Waites Robson S/mason
 Wrought Iron
 WW & KF Skinner Elec
\$51- \$100
 Helen Schutt N/H Staff
 Robson M. & M.
\$101-\$500
 Stawell Lions Club
RACE DAY 1996
\$101 - \$500
 Earles Lic S/Market
RACE DAY 1997
\$11- \$50
 Advanced Tech Lab.
 Altmann G.R. & W.J.
 Anonymous
 ANZ Banking Grp Ltd
 Bennett R. & L.
 Blizzard & Assoc P/L
 Coffey J.
 Concept Cleaning Supp
 Curtis & Thomas
 Doctor DC Auto Elect
 Eggintons Garage
 Garden Gully Vineyard
 Garel Attrills Florist
 Gold Reef Clothing
 Grampians Gardens C/P
 Grampians Physio
 Grampians W/Land Cab
 Hemleys Aerated Water
 Karindean Australia
 Kennedy Bricklayers
 LWR Info Bus. Support
 McIntyre Mrs. J.
 Motel Stawell
 Newton Bros Butchers
 Overall Mr. & Mrs. R.
 Prescott G. & C.

CONTRIBUTORS

R&M Kelly Built Home
Rutter Ms. G.
Salon 74
Sheer Illusions
Skinner WW&KF E/C
Smith T.W. & J.M.
Stawell Browse In
Stawell Build & Joinery
Stawell Park C/P
Stawell Toyworld
Waldrons Foodworks
Weldon Mrs. M.
West Mrs. P.
Williamson Bus Service

\$51-100

Air Liquide Australia
Cahill Mrs. N.
Central Park Motel
CRT Store Marnoo
Holmes RC&LJ Fruit
Larkin Mr. & Mrs. W.B
Mirams Mr. R.V.
Mocka's Garden Serv
Robertson Dental Surg
Schwartz Mrs. W.
Stawell Athletic Club
Stawell Gold Mines P/L
Stawell Steel Fabric.
Town Hall Milk Bar

\$101-\$500

Achison Mr. K.
Bests Wines P/L
Blachford GR&DL P/L
Blay J.A. & G.D.
Carlton&United Brew
Collection Tin
Earles Lic S/Market
Feilding Discount Var.
Frewstal P/L
Kingston's Coach Tours
Lohse Mrs. L.
Martin Mr. D.
Minors Pic&Civic Store
Network Vision System
Northern Gramp. Shire
Paulet & Hancock A/C
Perry's Shoex
SDH Ladies Auxiliary
Simmons J. & D.
Smith A. & B.
Stawell Apex Club
Stawell Electrics
Walker Dr. P.
Wimmera Racing
Woolman Petroleum

Over \$500

Howdens of Stawell
Peter Norton Ford
Raffle Proceeds
Westside Carpet Choice

PRO-AM 1997

\$11- \$50

Axten Mr. P.
Bachelor Mrs. K.
Bennett Mr. & Mrs. G.
Binger Mr. B.

Binger Mr. C.
Blachford GR& DL P/L
Blackman Mr. G.
Boak Mr. & Mrs. J.
Concept Cleaning Supp
Cooper Mr. A.H.
DelahuntyMr.&Mrs.MB
Franklin Mrs. P.
Grampians Exc&S/Yard
Guerra Mr. A.
Halls Gap Garden Cen
Holmes RC& LJ Fruit
Hosking Mr. L.
Hunter D. & S.
Hurley Mr. & Mrs. B.
Jones Mr. P.
McGrath The Hon. W.
McLeod Ms. J.
Melbourne J. & W.
Mueck Mr. L.
O'Callaghan Ms. C.
Pollock Ms. A.
Powerlett Plumbing
Price C.E. & J.I.
Prydderch Upholstery
Robson Ms. D.
Sammy's Pizzeria
Savage J. & B.
Stawell Electrics
Stawell Gram Gate C/P
Stawell Upholstery
Stewart Mr. H.
Walker Mr. R. & Mrs. S.
Walter Mr. L.
Walter Mr. R.

\$51 - \$100

Ambikapathy Dr. A.
Chamberlain Mr. B.
Gunnut Nursery
Krause Brickworks
Newton Bros Butchers
Savage R.G. & V.J.
Wallaloo Golf Club

\$101 - \$500

Barham Elect Cont
Castle Dr. R.N.
Coca Cola Amatil
Commonwealth Bank
Dave's Lawn Aerating
Frewstal Pty. Ltd.
Glenorchy Golf Club
Graham Dr. P.
Graham Fuller P/L
Grampians Exc&S/Yard
Halls Gap Col M/Inn
Howdens of Stawell
Independent Gas Serv
Maher Mr. G.
Nalder Car Sales
Norwellan Textiles
O'Brien Dr. G.
Pynappels Mr. L.
Scott De Costa Mrs. T.
SkinnerWW&KF E/Con
Stawell Dom App Rep
Stawell Farm Supplies
Stawell Newsagency

Walker Dr. P.

Over \$500

Brix Hotel
Brix Hotel Spts&S/Club
St. John of God Hospital

PRO-AM 1998

\$11- \$50

Anderson Mr. N.
Bacon Mr. R.
Blachford G.R. & D.L.
Blackman Mr. G.
Boak Mr. & Mrs. J.
Cheesman Mr. G.
Delahunty Mr&Mrs MB
Delley P. & J.
Dunne Mr. T.
Franklin Mrs. P.
Harris J. & K.
Hemingway Dr. L.
Holmes RC & LJ Fruit
Inglis Mrs. A.
Ivan McDonald H/Dress
Kewish Mr. & Mrs. R.
Lock Ms. B.
McInerney Mr. L.
McIntosh Mr. N.
McLeod Mrs. J.
Miller Mr. R.
Norwellan Textiles
O'Rourke Mrs. F.
Pollock Ms. A.
Price C.E. & J.I.
Prydderch Upholstery
Raitts Sportspower
Savage J. & B.
Sibson Mr. & Mrs. I.
SkinnerWW&KF E/Con
Stawell Aviation Serv
Stawell Taxis
Stewart Mr. H.
Walker T. & L.

\$51 - \$100

Applegren Mr. C.
Dyno Nobel Asia Pac
Grampians Exc&S/Yard
Hall Mr. & Mrs. C.
Mackeys Peak Hol Unit
Rickard Mr. S.

\$101 - \$500

Barham Mr. J.
Binger Mr. W.
Briall Investments
Butler Mr. D.
Callaway Mr. D.
Carlton&United Brew
Castle Dr. R.N.
Commonwealth Bank
Dunlop Skega
Earles Lic Supermarket
Esanda Investments
Frewstal Pty. Ltd.
Goulburn Valley Insur
Graham Dr. P.
Grampians Exc&S/Yard
Halls Gap col M/Inn
Howdens of Stawell

Illawarra Country Furn
Independent Gas Serv
Kenworthy-Smith Ms W
McGrath The Hon. W.
Milestone Chem P/L
Nalder Car Sales
National Hotel
Nelthorp Mr. P.
O'Brien Dr. G.
Pioneer Concrete
Pynappels Mr. L.
SkinnerWW&KF E/Con
Stawell Building & Join
Stawell Medical Centre
Stawell Times News
Stawell Windows&Glas
Stoney Creek Bakery
Timeless Timber Gall
U/ground Diam Drilling
Western DeepHole Drill

Over \$500

Brix Hotel
Brix Hotel Spts&Soc/ C
Stawell Gold Mines P/L

IN MEMORIAM

Anonymous
Anonymous
Blachford Mr. & Mrs. J.
Cahill Mrs. N.
Chester Mrs. M.
Currie Mrs. R.
Hill C. & K.
Holmes Mr. & Mrs. J.
Houston Mr. & Mrs. A.
Kierce Mr. & Mrs. R.J.
Lea Mrs. I.
Munchenberg Mrs. L.
Nikkelson Mr. T.
Peters Mr. & Mrs. A.R.
Phillips Mrs. M.
Streeter Mr. & Mrs. M.
Vict Rifle Assoc Inc
Whelan Mr. & Mrs. H.
Whelan N. & Family
Wilson Mr. R.M.
Wilson Mrs. D.

TRUSTS & BEQUESTS

Rutter Ms Mary Ann H.
Rutter Ms. Bernice Est.

TELEMEDICINE

\$11- \$50

Glenorchy CWA
Howard Mrs. J.

Over \$500

Anonymous
SDH Y-Zetts

HELIPAD

\$1 - \$10

Glenorchy CWA

GOURMET FUNCTION

Over \$500

COURT FINES

Over \$4000


Stawell District Hospital And Its Controlled Entities Certification

In our opinion the Report of Operations and the consolidated Financial Statements of the Stawell District Hospital and its controlled entities comprising a Revenue and Expense Statement, Balance Sheet, Statement of Cash Flows and Notes to the Financial Statements have been prepared in accordance with the provisions of the Financial Management Act 1994 and the Directions of the Minister for Finance - Part 9 Reporting Provisions.

In our opinion the Financial Statements present fairly the financial transactions for the year ended June 30, 1998 and the financial position as at that date of the Stawell District Hospital and its controlled entities.

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.


Chairperson
(On behalf of the Board of Management)
G.J. Thomas


Chief Executive
M.B. Delahunty

Dated the Twenty-fourth day of August 1998

Auditor-General's Report



**VICTORIAN
AUDITOR-
GENERAL'S
OFFICE**

*Auditing in the
Public Interest*

Audit scope

The accompanying financial statements of the Stawell District Hospital for the year ended 30 June 1998, comprising a revenue and expense statement, balance sheet, statement of cash flows and notes to the financial statements have been audited. The members of the Hospital's Board of Management are responsible for the preparation and presentation of the financial statements and the information they contain. An independent audit of the financial statements has been carried out in order to express an opinion on them as required by the *Audit Act 1994*.

The audit has been conducted in accordance with Australian Auditing Standards to provide reasonable assurance as to whether the financial statements are free of material misstatement. The audit procedures included an examination, on a test basis, of evidence supporting the amounts and other disclosures in the financial statements, and the evaluation of accounting policies and significant accounting estimates. These procedures have been undertaken to form an opinion as to whether, in all material respects, the financial statements are presented fairly in accordance with Australian Accounting Standards and other mandatory professional reporting requirements and comply with the requirements of the *Financial Management Act 1994*, so as to present a view which is consistent with my understanding of the financial position of the Stawell District Hospital and the results of its operations and its cash flows.

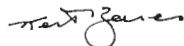
The audit does not provide any assurances that the Hospital's systems, or any other systems that the Hospital relies on in the conduct of its activities such as those of suppliers and service providers are year 2000 compliant, or whether plans and associated actions are adequate to address the year 2000 issue. The year 2000 issue has been addressed only in the context of existing audit responsibilities under Australian Auditing Standards to express an opinion on the financial statements.

The audit opinion expressed on the financial statements has been formed on the above basis.

Audit opinion

In my opinion, the financial statements present fairly the financial position of the Stawell District Hospital as at 30 June 1998 and the results of its operations and its cash flows for the year ended on that date in accordance with Australian Accounting Standards and other mandatory professional reporting requirements and comply with the requirements of the *Financial Management Act 1994*.

MELBOURNE
27 / 8 / 1998


C.A. BARAGWANATH
Auditor-General

Stawell District Hospital
Revenue and Expense Statement for the Year Ended 30 June 1998

	Note	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
REVENUE					
Services supported by Health Service Agreement					
Government Grants		6,372	5,920	6,372	5,920
Indirect Contributions by Dept. of Human Services		107	87	107	87
Patient Fees		1,620	1,571	1,620	1,571
Other Revenue		48	90	48	90
	2	<u>8,147</u>	<u>7,668</u>	<u>8,147</u>	<u>7,668</u>
Services Supported by Hospital & Community Initiatives					
Business Units		849	690	849	690
Donation & Bequests		98	87	98	87
Interest		98	104	125	129
Property Income		60	40	60	40
Other Revenue		24	2	58	11
	3	<u>1,129</u>	<u>923</u>	<u>1,190</u>	<u>957</u>
TOTAL REVENUE		<u>9,276</u>	<u>8,591</u>	<u>9,337</u>	<u>8,625</u>
EXPENDITURE					
Services supported by Health Service Agreement					
Employee Entitlements		5,111	4,855	5,111	4,855
Fee for Service Medical Officers		730	585	730	585
Supplies and Consumables		828	704	828	704
Other Expenses		1,101	1,138	1,101	1,138
		<u>7,770</u>	<u>7,282</u>	<u>7,770</u>	<u>7,282</u>
Services Supported by Hospital & Community Initiatives					
Employee Entitlements		399	319	399	319
Fee for Service Medical Officers		1	16	1	16
Supplies and Consumables		394	264	394	264
Other Expenses		173	107	175	107
	3	<u>967</u>	<u>706</u>	<u>969</u>	<u>706</u>
TOTAL EXPENDITURE	4	<u>8,737</u>	<u>7,988</u>	<u>8,739</u>	<u>7,988</u>
Surplus/(Deficit) for the Year before Capital Purpose Income, Depreciation, Amortisation, and Abnormal Items		539	603	598	637
Capital Purpose Income	5	101	60	101	60
Depreciation and Amortisation	6	505	488	505	488
Operating Surplus/Deficit for the Year		<u>135</u>	<u>175</u>	<u>194</u>	<u>209</u>
Retained Earnings at 1 July		8,591	8,416	8,958	8,749
Aggregate of amounts transferred from Reserves		-	-	-	-
Amount available for Appropriation		8,726	8,591	9,152	8,958
Aggregate of amounts transferred to Reserves		-	-	-	-
Retained Earnings at 30 June		<u>8,726</u>	<u>8,591</u>	<u>9,152</u>	<u>8,958</u>

This Statement should be read in conjunction with the accompanying notes

Stawell District Hospital
Balance Sheet as at 30th June 1998

	Note	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
EQUITY					
Special Purpose Reserve					
- Funds held in Perpetuity	7	1	1	1	1
		<u>1</u>	<u>1</u>	<u>1</u>	<u>1</u>
Retained Earnings	22	8,726	8,591	9,152	8,958
Total Equity		<u>8,727</u>	<u>8,592</u>	<u>9,153</u>	<u>8,959</u>
LIABILITIES					
Current Liabilities					
Bank Overdraft	17	142	-	142	-
Payables	8	496	326	496	326
Employee Entitlements	9	719	666	719	666
Monies Held in Trust	10	8	90	8	90
Other	11	168	208	168	208
Total Current Liabilities		<u>1,533</u>	<u>1,290</u>	<u>1,533</u>	<u>1,290</u>
Non-Current Liabilities					
Employee Entitlements	9	593	611	593	611
Total Non-Current Liabilities		<u>593</u>	<u>611</u>	<u>593</u>	<u>611</u>
Total Liabilities		<u>2,126</u>	<u>1,901</u>	<u>2,126</u>	<u>1,901</u>
Total Equity and Liabilities		<u>10,853</u>	<u>10,493</u>	<u>11,279</u>	<u>10,860</u>
ASSETS					
Current Assets					
Cash at Bank and on Hand	17	-	222	42	231
Inventory	12	44	43	44	43
Prepayments		-	9	-	9
Receivables	13	410	282	424	295
Investments	14	2,237	1,442	2,607	1,787
Monies Held in Trust	10	8	90	8	90
Total Current Assets		<u>2,699</u>	<u>2,088</u>	<u>3,125</u>	<u>2,455</u>
Non-Current Assets					
Investments	14	1	1	1	1
Land	15	481	481	481	481
Buildings	15	3,972	4,144	3,972	4,144
Helen Schutt Nursing Home	15	1,729	1,751	1,729	1,751
Plant and Equipment	15	1,621	1,681	1,621	1,681
Motor Vehicles	15	200	203	200	203
Office Furniture and Fittings	15	150	144	150	144
Total Non-Current Assets		<u>8,154</u>	<u>8,405</u>	<u>8,154</u>	<u>8,405</u>
Total Assets		<u>10,853</u>	<u>10,493</u>	<u>11,279</u>	<u>10,860</u>

This Statement should be read in conjunction with the accompanying notes

Stawell District Hospital
Statement of Cash Flows for the Year ended 30 June, 1998

	Note	Total 1997/98 \$'000 Inflows (Outflows)	Total 1996/97 \$'000 Inflows (Outflows)	Consolidated 1997/98 \$'000 Inflows (Outflows)	Consolidated 1996/97 \$'000 Inflows (Outflows)
Cash Flows from Operating Activities					
Receipts					
Government Grants		6,784	6,017	6,784	6,017
Patient Fees		1,620	1,571	1,620	1,571
Interest Received		89	101	115	121
Other		701	876	735	885
Total Receipts		<u>9,194</u>	<u>8,365</u>	<u>9,254</u>	<u>8,594</u>
Payments					
Employee Entitlements		(5,476)	(4,863)	(5,476)	(4,863)
Other		(3,070)	(2,948)	(3,072)	(2,948)
Total Payments		<u>(8,546)</u>	<u>(7,811)</u>	<u>(8,548)</u>	<u>(7,811)</u>
Net Cash Flows from Operating Activities	16	<u>648</u>	<u>754</u>	<u>706</u>	<u>783</u>
Cash Flows from Investing Activities					
Purchase of Property, Plant & Equipment		(269)	(423)	(269)	(423)
Proceeds from Sale of Property, Plant & Equipment		53	115	53	115
Purchase of Investments		(795)	(151)	(821)	(171)
Net Cash used in Investing Activities		<u>(1,011)</u>	<u>(459)</u>	<u>(1,037)</u>	<u>(479)</u>
Net Increase/Decrease in Cash Held		<u>(363)</u>	<u>295</u>	<u>(331)</u>	<u>304</u>
Cash at 1 July		221	(74)	231	(73)
Cash at 30 June	17	<u>(142)</u>	<u>221</u>	<u>(100)</u>	<u>231</u>

This Statement should be read in conjunction with the accompanying notes

STAWELL DISTRICT HOSPITAL**Notes To And Forming Part Of The Financial Statements For The Year Ended June 30, 1998****Note 1 Statement of Accounting Policies**

The consolidated general purpose Financial Statements of the Hospital and its controlled entities have been prepared in accordance with the provisions of the Financial Management Act 1994. These requirements incorporate relevant accounting standards issued jointly by The Institute of Chartered Accountants in Australia and the Australian Society of Certified Practising Accountants and other mandatory professional reporting requirements.

(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 are 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 their 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 thousand dollars.

(d) Principles of Consolidation

The assets, liabilities, revenues and expenses of all controlled entities of the Hospital have been included at the values shown in their audited Annual Financial Statements. Any inter-entity transactions have been eliminated on consolidation. The consolidated Financial Statements include the audited Financial Statements of the following entities.

- Stawell District Hospital
- Stawell District Hospital Foundation

(e) Investments

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

(f) 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 straight-line method. This depreciation charge is not funded by the Department of Human Services. The following table indicates the expected useful lives of non current assets on which the depreciation charges are based:

Buildings	-	up to 40 years
Plant & Equipment	-	up to 15 years
Furniture & Fittings	-	up to 10 years

(g) Inventories

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

(h) Employee Entitlements

Based on pay rates current at balance date. On-costs such as Workcover and Superannuation are included in the calculation of leave provisions.

Long Service Leave

The provision for long service leave is determined in accordance with Accounting Standard AAS30. 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 a current liability. The balance of the provision is classified as a non-current liability measured at the present value of the estimated future cash outflow arising from employee's services to date.

Wages and Salaries, Annual Leave and Accrued Days Off

Liabilities for wages and salaries, annual leave and accrued days off are recognised, and are measured as the amount unpaid at the reporting date in respect of employee's services up to that date.

(i) Nursing Home

The Helen Schutt Nursing Home has 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) Intersegment Transactions

Transactions between segments within the Hospital have been eliminated to reflect the extent of the Hospital's operations as a group.

(k) Donations

Donations are recognised as revenue when the cash is received.

(l) 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 include unspent capital donations and receipts from fund-raising activities conducted solely in respect of these funds.

(m) Services Supported by Health Services Agreement and Services Supported By Hospital and Community Initiatives

The Activities classified as *Services Supported by Health Services Agreement* are substantially funded by the Department of Human Services while *Services Supported by Hospital and Community Initiatives* are funded by the Hospital's own activities or local initiatives.

(n) Comparative Information

Where necessary, the previous years figures have been classified to facilitate comparisons.

STAWELL DISTRICT HOSPITAL

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1998

Note 2 : Revenue from Services Supported by Health Service Agreement

	Note	Acute Care \$'000	Mental Health \$'000	Aged Care \$'000	Co-Ordinated Care \$'000	Other \$'000	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Government Grants										
- Department of Human Services		5,417	123	453	379	-	6,372	5,920	6,372	5,920
- Commonwealth Government		-	-	-	-	-	-	-	-	-
		<u>5,417</u>	<u>123</u>	<u>453</u>	<u>379</u>	<u>-</u>	<u>6,372</u>	<u>5,920</u>	<u>6,372</u>	<u>5,920</u>
Indirect Contributions by Human Services										
- Insurance		107	-	-	-	-	107	87	107	87
Patient Fees	2a	301	-	1,252	67	-	1,620	1,571	1,620	1,571
Other Revenue		48	-	-	-	-	48	90	48	90
Total		<u>5,873</u>	<u>123</u>	<u>1,705</u>	<u>446</u>	<u>-</u>	<u>8,147</u>	<u>7,668</u>	<u>8,147</u>	<u>7,668</u>

Indirect Contributions by Human Services

Department of Human Services makes certain payments on behalf of the Hospital. These amounts have been brought into account in determining the operating result for the year by recording them as revenue and expenses.

Note 2a : Patient Fees

	Patient Fees Raised		Patient Fees Receivable	
	1997/98 \$'000	1996/97 \$'000	1997/98 \$'000	1996/97 \$'000
Acute	<u>301</u>	<u>396</u>	<u>67</u>	<u>78</u>
- Inpatients	297	392	67	75
- Outpatients	4	4	-	3
- Other	-	-	-	-
Mental Health	-	-	-	-
Aged Care	<u>1,252</u>	<u>1,106</u>	<u>23</u>	<u>29</u>
- Nursing Homes	1,115	1,063	23	29
- Other	137	43	-	-
Co-Ordinated Care	<u>67</u>	<u>65</u>	<u>-</u>	<u>-</u>
Other	-	4	-	-
Total	<u>1,620</u>	<u>1,571</u>	<u>90</u>	<u>107</u>
Less Provision for Doubtful Debts			15	-
Net Patient Fees Receivable			<u>75</u>	<u>107</u>

Commonwealth Nursing Home inpatient benefits are included in patient fee revenue.
The Hospital charges fees in accordance with Department of Human Services directives.

	Acute Care \$'000	Mental Health \$'000	Aged Care \$'000	Co-Ordinated Care \$'000	Other \$'000	1997/98 \$'000	1996/97 \$'000
Bad and Doubtful Debts							
Inpatients	20	-	-	-	-	20	1
Outpatients	-	-	-	7	-	7	-
Other	-	-	-	-	1	1	-
						<u>28</u>	<u>1</u>

STAWELL DISTRICT HOSPITAL

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1998

Note 3 : Services Supported by Hospital & Community Initiatives

Business Units	Total	Total	Consolidated	Consolidated
	1997/98	1996/97	1997/98	1996/97
	\$'000	\$'000	\$'000	\$'000
Revenue				
Diagnostic Imaging	451	378	451	378
Catering	373	312	373	312
Surgical Services	25	-	25	-
	<u>849</u>	<u>690</u>	<u>849</u>	<u>690</u>
Property and Rental Income	60	40	60	40
Interest Income	98	104	125	129
Fundraising Activities	98	87	98	87
Other	24	2	58	11
	<u>280</u>	<u>233</u>	<u>341</u>	<u>267</u>
	<u>1,129</u>	<u>923</u>	<u>1,190</u>	<u>957</u>
Expenses				
Diagnostic Imaging	413	300	413	300
Catering	347	347	347	347
Surgical Services	88	-	88	-
Other	119	59	121	59
	<u>967</u>	<u>706</u>	<u>969</u>	<u>706</u>

Note 4 : Operating Expenses

	Acute	Mental	Aged	Co-Ordinated	Other	Total	Total	Consolidated	Consolidated
	Care	Health	Care	Care		1997/98	1996/97	1997/98	1996/97
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
Services supported by Health Services Agreement									
Employee Entitlements	3,466	123	1,346	176	-	5,111	4,855	5,111	4,855
Salaries and Wages	3,094	113	1,213	160	-	4,580	4,269	4,580	4,269
Workcover	38	2	15	2	-	57	50	57	50
Departure Packages	-	-	-	-	-	-	-	-	-
Long Service Leave	96	2	33	3	-	134	178	134	178
Superannuation	238	6	85	11	-	340	358	340	358
Fee for Service Medical Officers	730	-	-	-	-	730	585	730	585
Supplies and Consumables	611	9	133	75	-	828	704	828	704
Drug Supplies	111	-	4	-	-	115	105	115	105
Medical And Surgical	440	-	58	74	-	572	424	572	424
Food Supplies	60	9	71	1	-	141	175	141	175
Other Expenses	939	7	143	12	-	1,101	1,138	1,101	1,138
Domestic Services	101	-	36	3	-	140	152	140	152
Administrative Expenses	465	7	85	7	-	581	532	581	532
Repairs and Maintenance	113	-	22	2	-	120	106	120	106
Audit Fees	8	-	-	-	-	8	9	8	9
Patient Transport	40	-	-	-	-	40	38	40	38
Other	212	-	-	-	-	212	301	212	301
Sub Total	<u>5,746</u>	<u>139</u>	<u>1,622</u>	<u>263</u>	<u>-</u>	<u>7,770</u>	<u>7,282</u>	<u>7,770</u>	<u>7,282</u>
Services Supported by Hospital & Community Initiatives									
Employee Entitlements	-	-	-	-	399	399	319	399	319
Salaries and Wages	-	-	-	-	351	351	283	351	283
Workcover	-	-	-	-	4	4	3	4	3
Long Service Leave	-	-	-	-	19	19	9	19	9
Superannuation	-	-	-	-	25	25	24	25	24
Fee for Service Medical Officers	-	-	-	-	1	1	16	1	16
Supplies and Consumables	-	-	-	-	394	394	264	394	264
Medical And Surgical	-	-	-	-	226	226	132	226	132
Food Supplies	-	-	-	-	168	168	132	168	132
Other Expenses	-	-	-	-	173	173	107	175	107
Domestic Services	-	-	-	-	14	14	3	14	3
Administrative Expenses	-	-	-	-	63	63	29	65	29
Repairs and Maintenance	-	-	-	-	33	33	21	33	21
Other	-	-	-	-	63	63	54	63	54
Sub Total	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>967</u>	<u>967</u>	<u>706</u>	<u>969</u>	<u>706</u>
Total Expenses	<u>5,746</u>	<u>139</u>	<u>1,622</u>	<u>263</u>	<u>967</u>	<u>8,737</u>	<u>7,988</u>	<u>8,739</u>	<u>7,988</u>

STAWELL DISTRICT HOSPITAL

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1998

Note 5 : Capital Purpose Income

Note	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
State Government Grants	65	-	65	-
Commonwealth Government Grants	19	-	19	-
Donation & Bequests	-	38	-	38
Other	17	22	17	22
5a				
Total	101	60	101	60

Note 5a : Other Capital Purpose Income

	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Revenue from disposal of Physical Assets				
Proceeds from Disposal	53	115	53	115
less Written Down Value of Assets Sold	36	93	36	93
Net Revenue from Disposal of Physical Assets	17	22	17	22

Note 6 : Depreciation and Amortisation

	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Buildings	235	211	235	211
Plant & Equipment	193	204	193	204
Furniture & Fittings	30	30	30	30
Motor Vehicles	47	43	47	43
Total	505	488	505	488
Allocation of Depreciation/Amortisation				
Services supported by Health Service Agreement	444	398	444	398
Services Supported by Hospital & Community Initiatives	61	90	61	90
Total	505	488	505	488

Note 7 : Special Purpose Reserve

	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Funds held in Perpetuity	1	1	1	1

STAWELL DISTRICT HOSPITAL

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1998

Note 8 : Payables

	Current \$'000	Non Current \$'000	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Trade Creditors	320	-	320	245	320	245
Accrued Expenses	176	-	176	81	176	81
Total Payables	496	-	496	326	496	326

Note 9 : Employee Entitlements

	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Current				
Annual Leave	434	404	434	404
Accrued Salaries & Wages	119	100	119	100
Accrued Days Off	14	12	14	12
Long Service Leave	152	150	152	150
Total Current	719	666	719	666
Non Current				
Long Service Leave	593	611	593	611
Total	1,312	1,277	1,312	1,277
Movement in Long Service Leave:				
Balance July 1, 1997	761	686	761	686
Provision made during the year	148	211	148	211
Settlement made during the year	(164)	(136)	(164)	(136)
Balance June 30, 1998	745	761	745	761

Note 10 : Monies Held in Trust

	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Current				
Patient Monies held in Trust	8	90	8	90
Total	8	90	8	90
Represented by				
Cash at Bank	8	90	8	90
Total	8	90	8	90

Note 11 : Other Liabilities

	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Department of Human Services Grants in Advance	168	208	168	208
Total	168	208	168	208

STAWELL DISTRICT HOSPITAL

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1998

Note 12 : Inventory

	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Pharmaceuticals	14	8	14	8
Catering Supplies	4	5	4	5
Housekeeping Supplies	5	3	5	3
Medical and Surgical Lines	16	23	16	23
Administration Stores	4	3	4	3
Other	1	1	1	1
Total	44	43	44	43

Note 13 : Receivables

	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Inter Hospital Debtors	11	3	11	3
Trade Debtors	118	128	118	128
Patient Fees	90	107	90	107
Accrued Investment Income	9	18	23	31
Accrued Revenue				
- Department of Human Services	106	-	106	-
- Other	91	26	91	26
Total	425	282	439	295
less Provision for Doubtful Debts				
Inter Hospital Debtors	-	-	-	-
Trade Debtors	-	-	-	-
Patient Fees	15	-	15	-
Total	15	-	15	-
Net Debtors and Accrued Revenue	410	282	424	295

Note 14 : Investments

	Total 1997/98 \$'000	Total 1996/97 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Current				
Investments - Banks	2,237	1,442	2,607	1,787
Non Current				
Investments - Government Instrumentalities	1	1	1	1
Total	2,238	1,443	2,608	1,788
Analysed as follows:				
Current				
Aust.Dollar Term Deposits	2,237	1,442	2,607	1,787
Non Current				
Inscribed Stock	1	1	1	1
Total	2,238	1,443	2,608	1,788

STAWELL DISTRICT HOSPITAL

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1998

Note 15 : Fixed Assets

	Gross Cost/ Valuation 1997/98	Accumulated Depreciation 1997/98	Written Down Value 1997/98	Written Down Value 1996/97	Additions 1998	Disposals 1998
At Cost						
Buildings	1,859	130	1,729	1,751	25	-
Plant & Equipment	3,338	1,717	1,621	1,681	137	1
Furniture & Fittings	382	232	150	144	25	-
Motor Vehicles	276	76	200	203	89	35
Sub Total	5,855	2,155	3,700	3,779	276	36
At Valuation						
Land	481	-	481	481	-	-
Buildings	4,715	743	3,972	4,144	17	-
Total	11,051	2,898	8,153	8,404	293	36

The basis of valuation of land is fair market value based on existing use. The basis of buildings is the current replacement cost (State Valuation Basis). The 1994 valuations were carried out by the Office of the Valuer - General.

Note 16 : Reconciliation of Net Cash Used in Operating Activities to Operating Result

	Total 1997/98 S'000	Total 1996/97 S'000	Consolidated 1997/98 S'000	Consolidated 1996/97 S'000
Operating Surplus/(Deficit) for the Year less income designated for capital purposes	135	175	194	209
Operating Surplus/(Deficit) prior to capital items	135	175	194	209
NON CASH MOVEMENTS				
Depreciation	505	488	505	488
Provision for Doubtful Debts	15	-	15	-
Increase/(Decrease) in Payables	170	64	170	64
Increase/(Decrease) in Employee Entitlements	35	123	35	123
Net Revenue from Sale of Plant and Equipment	(17)	(22)	(17)	(22)
(Increase)/Decrease in Receivables	(143)	(76)	(129)	(76)
(Increase)/Decrease in Other Current Assets	30	(74)	15	(79)
Increase/(Decrease) in Monies held in Trust	(82)	76	(82)	76
NET CASH FROM OPERATING ACTIVITIES	648	754	706	783

Note 17 : Reconciliation of Cash

For the purposes of the Statement of Cash Flows, the Hospital considers cash to include cash on hand and in banks.

	Total 1997/98 S'000	Total 1996/97 S'000	Consolidated 1997/98 S'000	Consolidated 1996/97 S'000
Cash on Hand and in hand	-	221	42	231
Bank Overdraft	(142)	-	(142)	-
	(142)	221	(100)	231

STAWELL DISTRICT HOSPITAL

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1998

Note 18 : Commitments

As at June 30 1998 the Stawell District Hospital has no major outstanding commitments.

Note 19 : Contingent Liabilities

As at June 30 1998 the Stawell District Hospital has no knowledge of any contingent liabilities.

Note 20 : Superannuation

- i) The Stawell District Hospital contributes to the Hospitals Superannuation Fund for all eligible employees.
- ii) During the 1997/98 financial year, the Stawell District Hospital's contribution to the Hospital's Superannuation Fund totalled \$ 364,088 (1996/97 - \$ 382,761).
- iii) There are no contributions outstanding in respect of the 1997/98 financial year payable by the Stawell District Hospital to the Hospital's Superannuation Fund.
- iv) In accordance with Section 20(2)(a) of the Hospital's Superannuation Act 1988 and the State 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).
- v) There have been no loans made to the Stawell District Hospital from employee superannuation funds.

As at 30th June 1998, based on advice from the Department of Treasury and Finance, the Hospitals Superannuation Fund will be fully funded.

Note 21 : Segment Reporting

Segment	Segment Revenue \$'000	Segment Expenditure \$'000	Surplus/ Deficit \$'000	Segment Assets \$'000	Segment Liabilities \$'000	Segment Equity \$'000
Hospital	8,033	7,891	142	9,100	1,879	7,221
Nursing Home	1,344	1,351	(7)	1,753	247	1,506
Sub - Total	9,377	9,242	135	10,853	2,126	8,727
Foundation	61	2	59	426	-	426
Total	9,438	9,244	194	11,279	2,126	9,153

Note 22 : Reconciliation of Changes in Equity

	Retained Earnings		Total	
	1997/98 \$'000	1996/97 \$'000	1997/98 \$'000	1996/97 \$'000
Balance at Beginning of Reporting Period	8,591	8,416	8,591	8,416
Operating Surplus/(Deficit) for the Year	135	175	135	175
Transfers to Reserves	-	-	-	-
Transfers from Reserves	-	-	-	-
Transitional Adjustments	-	-	-	-
Balance at End of Reporting Period	8,726	8,591	8,726	8,591

STAWELL DISTRICT HOSPITAL

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1998

Note 23 : Responsible Person Related Disclosures

(a) Responsible Persons

Mr. R. Knowles MLC	Dr. A.H. Cunningham	Mr. G.J. Thomas
Mrs. M.I. Blake	Mr. K.W. Dadswell	Mrs. J.H. Witham
Mrs. J.M. Brilliant	Mr. N.S.Dunn	Mrs. S.J. Wilkins
Dr. R.N. Castle	Mr. G.B. Fuller	Mr.G.S.Withers
		Mr. M.B. Delahunty

(b) Remuneration of Responsible Persons

The numbers of Responsible persons are shown in their relevant income bands

Income	1997/98 No.	1996/97 No.
\$20,000 - \$29,999	1	1

Total remuneration received, or due and receivable, by Responsible Persons from the reporting entity amounted to -

1997/98 \$'000	1996/97 \$'000
28	26

(c) Retirement Benefits of Responsible Persons

No benefits were paid in connection with the retirement of Responsible Persons

(d) Other Transactions of Responsible Persons and their Related Entities

	1997/98 \$'000	1996/97 \$'000
Dr R.N. Castle and Dr A.H. Cunningham provide Visiting Medical Officer services.	159	140

(e) Other Receivables from and Payables to Responsible Persons and their Related Parties

	1997/98 \$'000	1996/97 \$'000
Aggregate amount payable at Balance Date	17	14

(f) Amounts attributable to other Transactions with Responsible Persons and their Related Parties

There are no amounts attributable to other Transactions with Responsible Persons and their Related Parties.

(g) Executive Officer Remuneration

The number of Executive Officers whose total remuneration exceeded \$100,000 are shown below in their relevant income band.

	1997/98 No.	1996/97 No.
\$100,000 - \$109,999		
\$110,000 - \$119,999	1	1

	1997/98 \$'000	1996/97 \$'000
Total remuneration for the reporting period for Executive Officers included above amounted to :	112	109

STAWELL DISTRICT HOSPITAL

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 1998

Note 24 : Financial Instruments

a) Interest Rate Exposure

The Hospital's exposure to interest rate risk, which is the risk that a financial instruments value will fluctuate as a result of changes in market interest rates and the effective average interest rates on classes of financial assets and financial liabilities, is as follows :-

	Weighted Average Interest Rate	Floating Interest Rate \$'000	1 Year or Less \$'000	1 to 2 Years \$'000	Over 5 Years \$'000	Non Interest Bearing \$'000	Total 1997/98 \$'000	Consolidated 1997/98 \$'000	Consolidated 1996/97 \$'000
Financial Assets									
Cash	2.90%	-	-	-	-	-	-	42	231
Receivables	0.00%	-	-	-	-	410	410	424	295
Investments	5.69%	-	2,237	-	-	-	2,237	2,607	1,787
Total Financial Assets		-	2,237	-	-	410	2,647	3,073	2,313
Financial Liabilities									
Bank Overdraft	10.00%	142	-	-	-	-	142	142	-
Payables	0.00%	-	-	-	-	496	496	496	326
Total Financial Liabilities		142	-	-	-	496	638	638	326
Net Financial Assets/(Liabilities)		(142)	2,237	-	-	(86)	2,009	2,435	1,987

b) Credit Risk

The maximum exposure to credit risk, excluding the value of any collateral or other security, at balance date to recognised financial assets is the carrying amount, net of any provisions for doubtful debts, as disclosed in the balance sheet and notes to the financial statements. The Hospital does not have any material credit risk exposure.

c) Market Value

	Total Book Value 1997/98 \$'000	Total Net Market Value 1997/98 \$'000	Consolidated Book Value 1997/98 \$'000	Consolidated Net Market Value 1997/98 \$'000
Financial Assets				
Cash	-	-	42	42
Receivables	410	410	424	424
Investments	2,237	2,237	2,607	2,607
Total Financial Assets	2,647	2,647	3,073	3,073
Financial Liabilities				
Bank Overdraft	142	142	142	142
Payables	496	496	496	496
Total Financial Liabilities	638	638	638	638
Net Financial Assets/(Liabilities)	2,009	2,009	2,435	2,435

Cash, deposit investments, cash equivalents, and non-interest bearing financial assets and liabilities (trade debtors, other receivables, trade creditors, and advances) are valued at cost which approximates net market value.

Note 25 : AFS (CFR) Eliminations

	Intra Health Portfolio \$'000	Inter Health Portfolio \$'000
Assets	62	-
Liabilities	19	9
Revenue	6,749	21
Expenses	263	106

This data is required to enable consolidation across the Health Portfolio and to ensure proper elimination of intra and inter department portfolio transactions.

INTERNATIONAL EXCHANGE PROGRAMME

During 1998, the Stawell District Hospital underwent a Shared Development Programme with Modilon Hospital, Madang in Papua New Guinea.

The party arrived in Stawell on Friday June 5, and stayed for three weeks.

Numerous objectives had been set for the programme and one of the expected key outcomes was that Stawell Hospital would help Modilon Hospital to increase and assist the capacity of middle level managers.

The visitors, all of whom had nursing backgrounds, examined all facets of the nursing division, including quality assurance, delivery of care, infection control, admission and discharge procedures, patient outcomes, post acute and nursing home care.

The programme encompassed many departments as well as nursing, where the team worked through procedure manuals, job descriptions and operational systems with department heads from finance, stores, pharmacy, catering, engineering and medical records.

At the conclusion, the programme underwent an official review to determine its effectiveness.

Christine Gawi, Valentine Kupi and Yakos Tuh were hosted by hospital staff to a variety of social events and outings, including being guests of Stawell Rotary, who co-sponsored the programme.



Valentine (*left*), and Christine with Clinical Nurse, Zenny Davidson in Simpson Wing



Valentine, Yakos and Christine, with Nurse Educator, Jenny Farrer (*left*), during a tour of the local gold mine



Yakos making a presentation to Chief Executive, Michael Delahunty, prior to returning to PNG

A BRIEF HISTORY OF THE STAWELL HOSPITAL

The Stawell District Hospital is in its 139th 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 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*) 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 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.

Major capital developments since then include:

1956 : Nurses home built (*currently occupied by Grampians Community Health Centre*)

1967 : X-Ray/Theatre Wing opened

1973 : Nursing Home beds first established

1976 : Day Centre building (*Grampians Wing*) officially opened

1984 : Kitchen upgraded

1987 : Castle Wing (*24 bed Medical Wing*) opened

1988 : New Radiology complex officially opened

1991 : Simpson Wing (*16 bed Surgical/Midwifery Wing*) officially opened

1995 : Helen Schutt 30 Bed Nursing Home officially opened