



**BALLARAT BASE HOSPITAL**

# **COMMUNICATOR**

**NO: 1      OCTOBER - NOVEMBER**

# FROM THE C.E.O.'S DESK



Elsewhere in this bulletin you will read of innovative changes to encourage a greater involvement of all staff at all levels in the important process of developing the image of the hospital, not only to the community but to everybody involved, including the many staff groups that make up the hospital family.

Part of this process is to build on activities which can promote a greater understanding of the role of every group in the hospital. Some of these initiatives which have been going for a number of years include the following.

1. Quarterly Board/Staff Functions involving the members of the Board and a cross section of the staff. It is hoped that ultimately every member of staff will have had the opportunity to be invited to these functions.
2. The development of the Long Service Leave Badge Presentation Ceremony held in February each year, to recognise those members of staff who have had 10 years service with the Base and recognise additional 5 year increments.
3. The development of Orientation Programmes for all staff in the hospital. Recently these programmes have been revamped and put on a more formal basis under the administrative control of the School of Nursing.
4. The development of a higher Public Relations profile through the establishment of a regular series of articles in the Ballarat Courier, supported by BTV 6. Importantly, these articles concentrate on specific services provided by the hospital, and the people who run them.

5. The promotion of a more public Annual Meeting of the Board of Management at which all staff have been invited along with special guests from the community.
6. Finally, our latest initiative has been to commence a "Meet the Executive", forum at which the Senior Executive of the hospital including myself, provide time for an informal chat and an invitation to questions from any member of staff who wishes to attend. The first of these functions was held on Wednesday the 16th September and it was pleasing to see that over 50 members of staff took the opportunity to participate.

At the last "Meet the Executive" meeting, I canvassed a number of the issues which are currently effecting the hospital. These included:-

- Progress in the renovation of many of the facilities funded under the special \$3 million special works programme approved by the Government in 1986 including Accident & Emergency, Coronary Care, Limited Care Dialysis, Midwifery and the various safety projects in the Nurses' Home and Yuille House, as well as the removal of the asbestos from throughout the hospital.
- The Major Redevelopment Programme of the hospital proper, the subject of a Government funded Feasibility Study which concluded in December, 1986. Large sections of the hospital need to be redeveloped if the hospital is to meet its role as being the Major Referral Centre for Region 2.
- The development of the Action Group to suggest ways in which better communication can be promoted throughout the hospital.

- Developments in proposed rehabilitation services to take advantage of the revised Government policies in Workcare and accident rehabilitation.
- The installation of the in-house television service which will provide individual television services to every bed in the hospital.
- Progress in the hospital's quest to have the classification under the Registered Nurses' Board reviewed and upgraded to be equivalent to other major hospitals in the State such as PANCH, Western General and Box Hill.

The meeting also produced many questions that members of staff had covering a broad spectrum and it is the wish of the Executive that such questions be encouraged at future meetings. The next meeting will be held in October and details of this will be announced on staff bulletin boards.

Over the years the Base has developed a reputation, not only locally, but throughout the State as providing services of exceptionally high quality and very efficiently. This is in no small measure due to the enthusiasm of all the staff that make up our "family". This support has enabled us to ride out many difficult periods and to continue on without disruption.

With the increasing pressure from Governments, at Federal and State level, with emphasis on reducing taxes and reliance on the Government purse for funding to public utilities such as hospitals, it is important that in the coming years we continue to demonstrate to the public our concern to provide high quality service efficiently and effectively.

The Executive sees this revised and updated bulletin as another means of keeping you informed of what is happening.

E.D. Macaulay,  
Chief Executive Officer.

....Continued/

# ACTION GROUP

The Hospital recently held a Senior Staff Management workshop at Hall's Gap over a weekend. It was the first time in the 101 year history of Ballarat Base Hospital that such a meeting had occurred.

The purpose of the workshop was three fold:-

1. Identify current problems facing Hospital.
2. Identify future strategies for the direction of the Hospital.
3. Team building.

All those who attended the workshop agreed that it exceeded their expectation and achieved Points 1 and 3. To ensure the second point is achieved an Action Group has been formed. This group is comprised of Mr. Barry Bolger (Finance Manager), Mrs. Maria Stickland (Deputy Director of Nursing) and Mr. Allan Bath (Medical Administrator). The group has the responsibility of co-ordinating the ways and means of solving the current problems facing the hospital that were identified and devising the future strategies for the direction of the hospital.

To this end, a number of Key Groups have been formed relating to specific issues. Meetings of the Key Groups will be open to all members of staff. Please watch the message sign and check your notice boards for meeting times. These are genuine invitations and each of you is urged to attend and contribute to the way the hospital will operate in the future.

One of the major initiatives to emerge from the weekend was the recently held Staff Information Luncheon where the Executive of the hospital met with staff members in an open forum and were available to answer any questions that arose. These meetings will occur monthly from now on and again you are urged to attend and ask as many and as difficult questions as you think of.

Ballarat Base Hospital is embarking on an exciting period of change. It is our wish that every member of staff is involved in this process. Please don't let us down! The hospital will be a better hospital for the Ballarat Community and a better place for each of you in which to work.

B.M. Bolger,  
Acting Director of General Services



Action Group Members from the left are Maria Stickland (Deputy Director of Nursing), Allan Bath (Medical Administration) & Barry Bolger (Acting Director of General Services).

# GREEN THUMB

Spring has sprung, but don't let it fool you. This weather might be very nice for people, but the nights are often frosty, and echoes of Winter are lurking around until mid November. Keep your frost tender goodies under wraps for a while yet, if you value them.

Vegetables of the hardier kinds can be sown now, especially things like carrots, onions, salsify, silver beet and its coloured forms, and a few other things. Don't put out your tomatoes as yet, they will keep until things warm up a bit, and the same with their relations.

Perennials have mainly started to grow now, and for many it is too late for disturbing their roots unduly, although if they are in tapered containers then they can be tipped out with minimal disturbance and planted at any time.

Spring flowering shrubs must not be pruned until after their flowering time, otherwise you will be removing your coming display.

If planting native trees, I advise avoiding quick-growing types. Most of these ones are forest plants and are easily knocked down by the wind, or have their branches broken by it. Most people are of the "instant garden" type, and they go to the nurseryman and ask him for something which is good in flower and grows quickly. All too often he hands them an acacia. I see an increasing number of these things wherever I go, and this is said to be almost world-wide. Our acacias are popular, but they are a deadly serious problem to many asthmatics. Apart from having roots shallow enough to damage your lawn from below and being subject to borer damage, I believe that from the public health angle they should simply never be planted.

Most annuals for the Summer and Autumn display should now be sown for planting out in October and November. Try dahlias from seed, you won't regret it.

# FOCUS ON STAFF

## PAT BARRY



### A SMILE COSTS NOTHING

Pat is employed in our Domestic Services area and for the past 8 years has worked in Pathology. She has just completed 15 years service with us and loves working within the Pathology area as she finds the staff very friendly. She says that they are all "very different" and have accepted and treated her very well.

Pat came to the Hospital from a Proprietorship at the Gordon Roadhouse. She is married to husband Bill and they have 3 girls who are now "all off our hands". Outside interests include Golf which she has recently taken up with her husband, and she is a supporter and helper of the Gordon Football Club.

Pat loves meeting people and believes if you are happy in your work you do your work better.



# ENGINEERS DESK

## COMPUTERS!

On a recent trip to Melbourne, I had the dubious privilege of riding on one of Melbourne's Public Transport Buses. I happened to sit next to a nice old man who was saying how he had had nothing to do with computers and that he was planning to keep it that way.

Just then, our mobile punishment machine was waiting at the traffic lights which, I mused, were controlled by a micro-processor computer located just 6 meters away, which in turn was part of the RTA station computer in Hawthorn, which was controlling our travelling progress.

The old man, anxiously awaiting the decision of the computers to let us proceed, looked like he was a pensioner, and that would mean he would have a file in the Social Security Department's computers, and the Federal Department of Health's computers for his health card. It was a safe bet he also had some sort of bank account which was monitored by the bank's computer and as an ex serviceman, a record on the Defence Department's computer. The computer now is a part of all our daily lives, either directly or indirectly. Take any family: It has to eat, obtain transportation, entertainment, pay its way, educate members and finally, have them buried or cremated.

To feed the family, we mostly buy food from supermarkets. Every major supermarket and warehouse that supplies the local shops, use computers for stock control, costing, recording etc. So much so, that if their computers were to fail, I believe that the supply of food and goods to our shops would soon be in a shambles. The reliance on the devices is so great, I doubt that a manual method of stock control and distribution would be quickly possible. The resulting chaos can only be imagined.

Similarly, the clothes which the family wears are probably manufactured from computer controlled machines using computer generated patterns.

The registration of the birth of the family's children will also be recorded by computer.

Even the petrol used to fuel the car in which the father drove his wife to hospital for the birth of the children was refined and distributed by computer controlled equipment. Probably the car he was driving had at least one on-board computer to control the fuel and ignition systems. Maybe even a trip computer which monitored his progress as he sped between these computer controlled traffic lights.

While he waits for his lady to increase the world population, he can drive home and watch T.V., which is receiving broadcasts from a computer controlled and almost totally automated television station. He probably receives a phone call from the hospital near the end of the late, late movie (children always arrive at the most convenient time) so he leaps back into his car and heads for the hospital. On the way, he crashes and ends up in hospital himself. His admission details are recorded on the hospital computer. His pathology and radiology tests are probably undertaken on computer controlled machines.

If after all the help of medical technology fails him, he shuffles off to assist ZPG (zero population group), he then has to be buried.

Many crematoria and cemeteries now record the location of the "loved one" on micro computers.

Meanwhile, the mother back in hospital, may feel the need for a little spiritual comfort. If she writes to the Billy Graham organisation, she will almost certainly get back to counselling letter prepared by a computer.

But back to the old man sitting next to me on the bus, one wonders if he really believed that he had nothing to do with computers. The things are with us from birth and even beyond at both ends of the spectrum.

**L.D. Grigg**  
**Chief Engineer**

# LAUGHS

The following are actual statements found on insurance forms where car drivers attempted to summarize the details of an accident in the fewest possible words. The instances of faulty writing serve to confirm that even incompetent writing may be highly entertaining:

Coming home I drove into the wrong house and collided with a tree I don't have.

Another car collided with mine without giving warning of its intention.

I thought my window was down, but I found out it was up when I put my head through it.

I collided with a stationery truck coming the other way.

A truck backed through my windshield into my wife's face.

A pedestrian hit me and went under my car.

The guy was all over the road. I had to swerve a number of times before I hit him.

I pulled away from the side of the road, glanced at my mother-in-law and headed over the embankment.

In an attempt to kill a fly, I drove into a telephone pole.

I had been shopping for plants all day and was on my way home. As I reached an interestion a hedge sprang up, obscuring my vision and I did not see the other car.

I had been driving for 40 years when I fell asleep at the wheel and had an accident.

# LAUGHS

I was on my way to the doctor with rear end trouble when my universal joint gave way causing me to have an accident.

As I approached the intersection a sign suddenly appeared in a place where no stop sign had ever appeared before. I was unable to stop in time to avoid the accident.

To avoid hitting the bumper of the car in front I struck the pedestrian,

My car was legally parked as it backed into the other vehicle.

An invisible car came out of nowhere, struck my car and vanished.

I told police that I was not injured, but on removing my hat found that I had a fractured skull.

I was sure the old fellow would never make it to the other side of the road when I struck him.

The pedestrian had no idea which direction to run, so I ran over him.

I saw a slow moving, sad faced old gentleman as he bounced off the roof of my car.

The indirect cause of the accident was a little guy in a small car with a big mouth.

I was thrown from my car as it left the road. I was later found in a ditch by some stray cows.

The telephone pole was approaching. I was attempting to swerve out of the way when I struck the front end.

# NURSING

The Nursing Division welcomes the new format of the Staff Bulletin, and the opportunity for all nurses to have a say in it, one way or another.

1987 is proving to be a year of change for the Nursing Division. Some changes such as the new faces and new uniforms are quite obvious (who could have missed our "girls in blue" at the last Hospital Revue!).

Some changes, such as those in various roles and functions of certain people, may not have been so obvious, but are nevertheless still happening.

Many changes have occurred with much involvement from staff. Over 500 ideas were sent in to help put together the Nursing Division's submission for the Hospital Agreement. The affects of this input is still being felt. The introduction of "Hi-Low" beds has gained a high priority and negotiations for a longer night duty shift are well in hand.

Change isn't always easy, it can be uncomfortable at times, but as people become involved and work together the changes can occur with few hiccoughs and on some occasions the process may even become quite exciting.

Here's to the future!

MISS E.A. BRADY,  
DIRECTOR OF NURSING.

# DID YOU KNOW?

Mary McKenzie's horse came 4th at Bendigo recently.

Barbara Burton, who is the Family Planning Clinic expert, recently gave birth to a bouncing baby boy - well done.

Is there any truth in the rumour that certain Senior Nursing Staff were so impressed with the spa bath facilities at Hall's Gap that on returning they promptly had one installed.

Mary Tubb recently attended the International Congress of Midwives at "The Hague", in the Netherlands. She is also catching up with friends and relatives in Great Britain.

Liz Brady dislocated her big toe at the Annual General Meeting when she really put her foot down.

Vic Sargent has now retired. He is progressing very well after a recent heart attack. Good luck Vic.

## GUESS WHO

### Clues

1. Often rides a bike
2. Hates buying petrol
3. Is not overweight - built like a racing tadpole
4. Commenced at the Hospital in 1958
5. Born in 1932
6. Loves swimming and competed at state level
7. Lives in Wendouree
8. Drives a Commodore
9. Has 3 children and 5 grand children
10. Is about 5'4" tall
11. Sex is just a memory
12. Has taken two sickies in his/her lifetime
13. Dislikes people with more hair, computers, beepers, work experience people and apprentices.
14. Favourite saying - Gooooood Morning.

\* Answer somewhere else.

# SOCIAL CLUB NEWS

The Social Club's expansive clubroom has many facilities. Our Social Club Room has a snooker table with Allan (Demon) Bath and Jim (On Drugs) Burns - the current champions at the hospital. Table Tennis tables are provided with bats and balls as well as a colour television set and a Piano.

A discount sheet and general information sheet is available from Pay Office. This sheet details some of the many activities our hard working Committee organize for our staff at the hospital.

## WE WANT 100% MEMBERSHIP

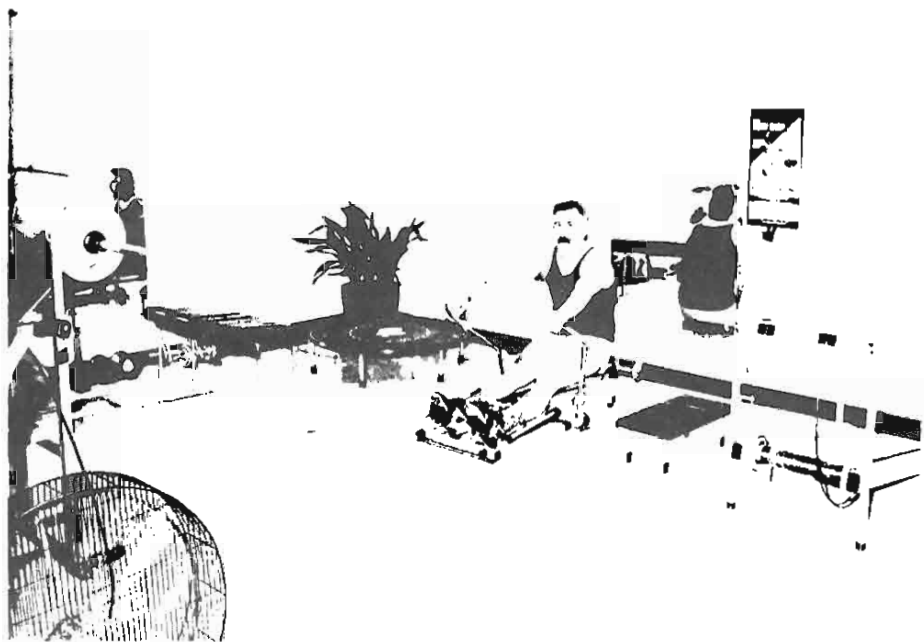
At only 50c per week deductible through your pay it's cheap but better still join and get to know staff from other departments. You never know - your next husband or wife might work at the hospital! (If you're single).

So get on down to the Pay Office and join up!



Social Club Committee Members above are Carol Karstens, Vicki Everard, David Mercer, Aileen Horgan, Dennis Waight & Leanne Wilson. Absent were Aileen Martin & Denise Shannon.

# NEW GYMNASIUM OPENS



## JOIN UP TODAY!

The Gymnasium is situated in the basement area.

Our recently completed gymnasium is free to all members to use between the hours of 8.00am and 5.00pm. As shown in the picture the facilities are top quality with a wide range of equipment to suit all types of exercises from walking to running, rowing, skipping, riding, bouncing on the mini trampoline or weight lifting. Whether you body build or just tone up we hope you will appreciate and enjoy the equipment provided.



# AFTER HOURS



## NIKI GILBERT

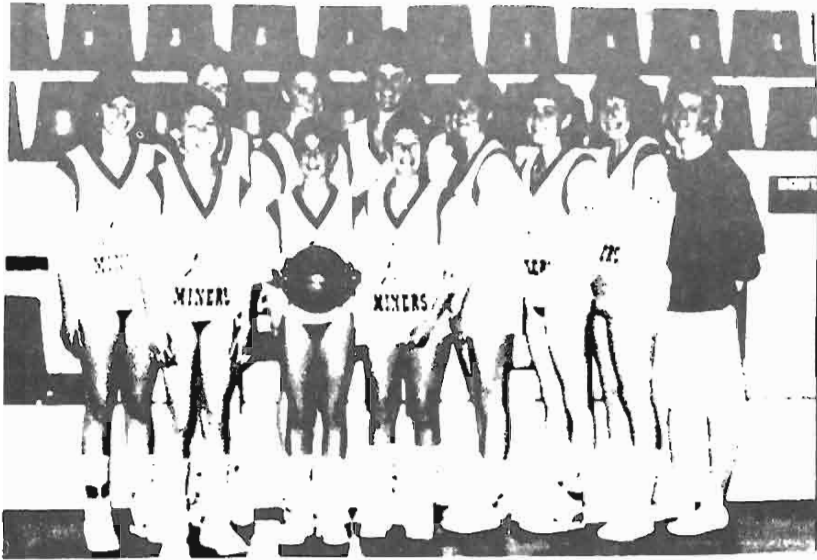
For the past 2 years Niki has worked in the Biochemistry area of Pathology as a Laboratory Assistant. Hidden behind that quiet unassuming nature is a very successful sporting career.

After hours Niki has committed herself to coaching the Ballarat under 14 Basketball Team. She gave up her position in the Ballarat Ladies Miners side to do so. She is involved with the initial selection of some 40 girls from Ballarat and District from which a final list of 10 are selected after practice matches, training sessions and club games. This squad is called the Ballarat Combined Side. The ambition of this squad is to win the Victorian Country Championships which are held in Melbourne against all other country teams throughout the State. Niki's team was successful in April when the Ballarat side defeated Sunraysia to win the final 45 - 16. The next step for the team is to compete at the Australian Championships in Canberra. To enable the team to compete the girls have to raise \$5,000. Last year Ballarat came 4th beating the team who won the event, and only missed out on the final by one point. Good luck this year.

Niki is taking one day at a time in striving to achieve her coaching ambitions and finds her involvement with Juniors has given her a lot of personal satisfaction. She certainly has their respect as they are very attentive and disciplined at training.

WELL DONE NIKI.

# THE QUIET ACHIEVER



## HOSPITAL CHRISTIAN FELLOWSHIP

Many hospital staff recently viewed the film about Mrs. Timms who had decided to donate some money to a particular hospital, but because of the poor attitudes of some hospital staff she changed her mind. The film highlighted areas of which our hospital, to its credit, is trying to improve upon.

When we meet someone with strong attitudinal problems we often think they will never change. How wrong we often are. By turning to Christ He gives us the strength, help and guidance to break the habits we often become slaves too. Many of us try continually to do it on our own. We sometimes hide our failures and often block out Jesus refusing to discuss Him, His life and His teachings.

The Hospital Christian Fellowship meets each Tuesday at 12.45 pm in the last lecture room on the 2nd floor next to the Professional Staff Group Room. There are no barriers, just come as you are, when you want, and ask the questions that need to be answered. You can be assured of a friendly caring atmosphere and we hope you might enjoy our fellowship.

Dust off your Bibles and read about love in 1st Corinthians Chapter 13.

# PROJECTS REPORT

## 1. After School Hours Child Care

The hospital has received a grant through the Department of Community Services which will contribute towards the establishment of an After School Hours Child Care Programme.

It is expected that the programme will be located at St. John of God Hospital on the Mair Street side, and that it will be a joint venture with St. Johns.

The Programme will run for three hours per day, five days per week for the 42 school weeks in the year. Users will be required to contribute towards the cost of the programme. The fees structure to apply will be recommended by an Advisory Committee to the Hospital Executive.

The programme will cater mainly to the staff of Ballarat Base and St. John of God Hospitals, but will be required to be accessible to the wider community. Initially, the programme will cater for up to 30 children.

The age group at which the programme is to be targetted is the primary school bracket, ages 5-12 years.

By the end of October, all potential uses and other interested parties will be invited to assist in the establishment of an Advisory Committee. It is envisaged that this committee undertake the following tasks:-

- a. Set the hours of operation.
- b. Recommend the fee structure
- c. Advertise for and employ staff.
- d. Establish entry criteria and recommend assessment priorities.

In the longer term the committee will meet regularly to undertake the day to day management of the programme.

## 2. Interior Decoration

Ms. Jennie Hawkin, an Interior Design Consultant, has been engaged to prepare a master plan for the interior design (including decoration) for all public areas for the Hospital. Jennie will make the main foyer her first priority, as it is hoped to commence work in October to create a more attractive environment at the Hospital's "Front Door". It is expected that the design will include a new central Reception Area/Security Station in the room which was previously the kiosk store. Other features will include a sitting out area where kiosk patrons can enjoy a cup of coffee.

The other major project which will be undertaken this financial year is to redesign and redecorate the Outpatients entrance on Sturt Street, and to establish an Outpatients waiting lounge in the area previously occupied by Medical Records on the first floor.

## CAPITAL WORKS PROJECTS

### Coronary Care Unit

It is expected that the new Coronary Care Unit will accept it's first patients in early October. The major features of the six bed unit are:-

- a. A "state of the act" monitor system.
- b. A relaxing, warm environment created by carpeting, selection of furniture and fittings and colour selection.
- c. A much larger and better appointed visitors waiting area.

The unit is handed over from the architect, a programme of staff information tours will be instituted to display the area to all interested personnel.

## Midwifery Stage II

The project to renovate the private and semi-private rooms in Ward E1 will be completed in early October. All rooms now have access to private or share ensuite facilities and continued access to the balcony where possible.

A one bed special care/isolation ward has been established to be adjacent to the sisters station and a new milk room constructed adjoining the nursery. All staff will be invited to inspect the area prior to its re-occupation.

## Limited Care Dialysis

The Hospital owned house at 1 Windermere Street North, has been tranformed into a Limited Care Dialysis Unit capable of providing dialysis for up to 4 patients at one time. Initially the unit will operate only during the day shift, Monday to Friday and patients of Royal Melbourne Hospital Renal Unit, resident in Ballarat and District, will be able to attend and be dialysed in a homely, relaxed atomsphere. This will restore the normal day which provides quality in their lives.

## Intensive Care Unit

This 4 bed unit will be establshied in the existing Intensive Therapy Unit area. The most modern aids will assist the staff in case of the critically ill patients. A major advance will be ability to dialyse one patient whilst being treated in the unit.

W. Wallace,  
Projects Officer.

# HEALTH & SAFETY

## INCIDENT REPORT FORMS - THE WHO, WHAT, WHEN, WHERE, HOW AND WHY?

"I didn't know I had to fill in an incident report" or "Yeah, but I only visited Casualty for a scratch and you want me to fill out a WorkCare and Incident form!" or simply "What incident report form?"

These are just some of the comments noted in the past, so the following information has been compiled to aid staff completing incident reports in the future.

- Who:** designed to collect factual information on Staff, Patient and Visitor incidents.
- What:** forms are in triplicate - white (original), pink and green. Carbon paper is required between copies.
- When:** as soon as practicable after the incident. If staff need to visit Casualty as a result of the incident, both a WorkCare and Incident report must be completed.
- Where:** pads of forms are available in every ward and department with replacement pads available from stores.
- How:** to complete a form provide as much factual details as possible and read a complete all relevant sections, things like ward/department are important. The three copies of the forms must be handed to the Department Head/Supervisor for further processing without delay.
- Why:** to allow a record of the incident to be made, this is also valuable when investigations are undertaken with a view to prevent recurrence, Incident statistics are compiled and analysed periodically, this allows for identification of trends on an injury/department basis etc.

**DAVID BORYS**  
Occupational Health and Safety Officer

# FAVOURITE RECIPES

## BROAD'S BREWS

### CURRY SOUP (low calorie)

1-2 litres water  
1 Cauliflower (med. size)  
2 Chicken cubes  
1 tablespoon curry powder (more or less, according to taste)

Simmer all together until cauliflower is soft. (5 minutes in pressure cooker). Then process in blender.

**DELICIOUS ON COLD WINTER'S NIGHT!**

### CHINESE STYLE CORN SOUP

1 tin creamed corn (440gm)  
1 tin water  
1 chicken cube

Bring all to boil, then remove from heat and immediately add 1 egg (previously beaten), stirring well. Serves 4. Soup has a "clotted" appearance.

### POTATO AND LEEK SOUP (not for those on low-cholesterol diets!)

3 medium sized potatoes, peeled and cubed  
3 leeks (sliced)  
1 onion (diced)

Saute vegetables in 2oz margarine, add 1 litre water, 2 chicken cubes and bring to boil. Simmer for 10 minutes until vegetables are soft.

Process in blender, add 300mls cream and reheat. Serves 6 - 8.

GUESS WHO - Answer - Norm Lee

# COMPETITION - WHO IS IT?



If you think you know the name of this "cute kid" who is currently working at our hospital, jot the name together with yours onto paper and send it to Gary Greville in Medical Administration by the end of October. One entry will be drawn from the correct entries and will win a \$20.00 counter meal for two at the Golden City Hotel, compliments of the Social Club. The winner will be notified in early November and staff will be advised of the winner in our next edition.

SO - BE IN IT TO WIN IT.



*"It looks like your operation will break us, Wendell - unless, of course, we get lucky and they botch it so we get the malpractice money."*



## BREATHE EASY FROM 1ST JANUARY, 1988

No more BUTS, As from the 1st January, 1988 staff will be able to breathe easy and enjoy a smoke free environment.

Ballarat Base Hospital encourages the reduction of smoking which is clearly the most preventable cause of ill health in Australia. Making the hospital smoke free will greatly assist employers, patients and visitors in becoming healthier or remaining healthy.

Smoking in the workplace is also becoming a major occupational health and safety issue. Passive smoking is a cause of ill health. The Hospital is taking a leading role in making the workplace safer by providing a smoke free environment for its employees.

Smokers prepared to make the commitment to give up smoking will have the opportunity to attend Quit programs to be conducted at the Hospital during December, 1987 by Mr. Ian Pimblett, Community Health Education Officer with the Health Department of Victoria.

Remember this is a team effort.

Let us see that it works.

### MEMORIES



# ODD SPOT

Reliable sources have advised that a certain unnamed Safety Officer, responsible for the "Smoke Free Environment" campaign and well known for his athletic achievements, was recently said to have been seen "puffing, coughing and spluttering".

## AUDIOLOGY

When you're The Leader Of The Free World, there's no such thing as privacy. Last week the American media published a report from Ronald Reagan's doctors that they had found traces of blood in the Presidential stools. They had put Mr. Reagan on a special diet to see if his eating habits were causing the blood traces to show up in their tests. Now the White House Assistant Press Secretary, Robin Gray, has announced that the President will start wearing a hearing aid in his left ear. Mr. Reagan started wearing a hearing aid in his right ear more than a year ago, and Mr. Gray said the left ear aid was part of "an experimental effort to balance his hearing". Mr. Gray said "he is experimenting with two hearing aids on a trial basis off and on". He said that the President's hearing was essentially the same as five years ago.



# CREDIT UNION

## Information Sheet Effective from 1st July, 1987

### Interest rates - (Effective from 1st July, 1987)

<u>Savings</u>	- On Call	10%
	- Fixed Deposit (6mth term)	14% \$500min
	- Christmas Club	10%
	- Fixed Deposit (12mth term)	14% \$500min
	- Short Term (2mths maximum)	10% (\$2000 minimum transaction. Daily interest).

### Loans

Maximum Loan	- after 1 year membership	\$10,000
	- up to 1 year membership	\$ 5,000
Interest on Loans		1.3% per month. (15.6% p.a)

### Loan Applicants must -

- Be a member for a minimum of 2 months.
- Have an established savings pattern with the credit Co-operative before application will be considered.
- Provide proof of Comprehensive Insurance where required.
- Have the loan application to the Credit Co-operative by the Monday prior to the Board Meeting.
- Loans will not be available until the Monday following the Board Meeting.

# COMMUNICATION

## COMMUNICATION BREAKDOWN

The Divisional General Manager sent the following memo to the Factory Manager.

On Friday evening at approximately 5.00pm Halley's Comet will be visible in this area, an event which occurs only once every 75 years. Please have the employees assemble in the area outside the factory; in safety helmets, and I will explain this rare phenomenon to them. In case of rain we will not be able to see anything so assemble the employees in the canteen and I will show them a film of it.

### **Factory Manager to Assistant Manager:**

By order of the Divisional General Manager, on Friday at 5.00pm Halley's Comet will appear above the area outside the factory. If it rains please assemble the employees in safety helmets and proceed to the canteen where this rare phenomenon will take place, something which occurs only every 75 years.

### **Factory Manager to Personnel Manager:**

By order of the Divisional General Manager in safety helmets at 5.00pm on Friday the phenomneal Halley's Comet will appear in the canteen. In case of rain in the area outside the factory the Divisional General Manager will give another order, something which occurs once every 75 years.

### **Personnel Manager to Foreman:**

On Friday at 5.00pm the Divisional General Manager will appear in the canteen with Halley's Comet, something which happens every 75 years if it rains. The Divisional General Manager will order the Comet into the area outside the Factory.

P.T.O.

## Foreman to Employees:

When it rains on Friday at 5.00pm the phenomenal 75 year old Bill Haley accompanied by the Divisional manager will drive his Comet through the area outside the factory of the canteen.

## GOSSIP

At the recent "Meet the Executive" Mr. Macaulay offered the challenge to staff to "bowl" down a question. Is there any truth in the rumour that Ewan MacDonald was heard to say "I wouldn't mind a bat".

## INPUT.

The Communicator is produced every two months for the staff at our hospital. Input by Staff from all areas within the Hospital would be most appreciated and should be addressed to Gary Greville, Medical Administration.

Special thanks to Frank Gray for his photography expertise.



GARY GREVILLE  
Production Manager



PETER LANE  
Editor In Chief