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## Our Aim

To provide the most effective and efficient physical, emotional and social care possible to those for whom we are responsible.

## Our Mission

To enhance the health of individuals and our community by providing the highest standard of skilled and compassionate care within the limitations of the hospital's resources, in a climate which is friendly and supportive to patients and staff, and enhances staff commitment, development and morale.

## Our Objectives

**Patient / Resident Care** – To afford relief, including maintenance and care of, or attention to, any disease or ailment, or any injuries or conditions in the Acute Care, Day Therapy, Hostel Care and Nursing Home Care to such individuals as are entitled thereto under the Governing Acts.

**Community Health** – To promote, provide and assist with health education and ill health prevention for the community.

**Staffing** – To select staff so that the hospital can maintain the highest standard of health care through working together in promoting an atmosphere of co-operation and support.

**Education and Training** – To promote educational and training opportunities for all staff to assist them in the future development of patient/resident care and to provide for education and training of such persons associated with the hospital as may be approved.

**Facilities** – To provide adequate, well maintained and safe facilities, equipment and supplies for carrying out investigations and care of ailments, disease, injuries or other conditions affecting the human body.

**Improving Performance / Continuous Improvement** -To promote best practice and encourage an environment of continuous quality improvement throughout all areas of the organisation.



# Report to the community



Clive McCann,  
Board President

On behalf of the Board of Management of the Maldon Hospital I am pleased to present this 151st Annual Report to the community. This Report provides an outline of the Hospital's activities over the year, including the audited Financial Report and the Quality of Care Report. It is especially pleasing that the Hospital can report all its successes in this special year when it is celebrating 150 years of serving the community. For what is now the smallest hospital in Victoria, Maldon Hospital shows that it can operate successfully, remain financially viable, provide a high standard of care and continue to provide an invaluable facility for the region.

The Board of Management continues to be professional and enthusiastic, providing the expertise and experience to fulfil the legal obligation to oversee and manage the Hospital. As a group of volunteers, Board members are expected to attend meetings, workshops, seminars and a variety of educational activities, and in the last year, excluding meetings, Board members attended 157 hours of educational activities. The last year has seen appointment dates for members change from 1st November to 1st July and this resulted in the new Board members, Cheryl Axel, Sarah Ferguson, Helen McBurney and Alan Shepherd being appointed on different dates.

The staff are again to be congratulated for the care they provide, their professionalism and dedication. Under the management of the Director of Nursing,

Jan Hutchinson, the Hospital is maintained and functions to provide the highest quality of care, and as will be reported later, has retained full accreditation in all its areas of operation.

The Board would also like to thank our Chief Executive Officer, Graem Kelly, and his management staff for the service they provide for Maldon Hospital. Graem has now been in his position for eighteen months and the ideas and changes that he has introduced have challenged and excited the Board.

Some acknowledgements and events that occurred for this year:

- The Board established a committee to organise the celebration of the 150th anniversary of the establishment of the Hospital. The events include a reunion of people associated with the Hospital, an Open Day and a celebratory Ball.
- The audited financial statement shows that the Hospital is again financially sound with a final net result of \$162.676
- The Hospital was assessed during the year on four occasions by ACHS and ACSAA and given full accreditation in all areas.
- The Board commissioned a Strategic Analysis of the Hospital's operations and its place in the community. This analysis formed the basis for the Strategic Plan that was developed.
- The Board and management attended a workshop to develop the Strategic Plan that will decide the direction the Hospital will take for the next five years.





- The committee structure of the Board has been revised, with an Audit Committee now being the only ongoing committee of the Board. We would like to thank Ian French and Ben Rodda for their commitment as community members of this important committee.
  - The Hospital awarded it's first scholarship for a student undertaking a course in health care. The recipient was Tania Flavell who started a course in midwifery and the scholarship will assist her for the three years of her course.
  - Students at Maldon Primary School participated in a competition, submitted projects that expressed their view of Maldon Hospital and its importance in providing health care for the community. Two prizes were awarded, with the winning students selecting their own prize, an item that needed to be health related.
  - Two large water tanks were installed. The water will be used for maintaining the garden and, if necessary, for fire-fighting.
  - The implementation of new information technology options has commenced with a high speed internet connection, video conferencing facilities, two computers and Management Advantage, the first of the software management packages.
  - The Hospital was successful in two grant submissions that provided for the installation of a security camera system and a new x-ray machine. The Minister for Health, Daniel Andrews, attended to present the grant, tour the Hospital and meet some of the residents.
  - Our thanks go to the Department of Human Services and fellow health providers in the region. We especially appreciate the continued medical care provided during the year to the residents and the patients of the Maldon Hospital by Dr Chris Fowler.
  - Also, our special thanks go to the many local community groups, individuals, and the students of Maldon and Baringhup Primary Schools who have given their support throughout the year. Maldon Primary School students visit the Hospital regularly and they are completing a project titled "I Remember", which is a visual presentation of some of the residents and their recollections.
  - Maldon Hospital has contracted its banking requirements with the Maldon Community Bank Branch of the Bendigo Bank.
- For the year ahead we can expect:
- The staff work area and computer stations will be completed, as well as the secure after hours entry area, and the new "Quiet Lounge".
  - The publication of the Strategic Plan.
  - A comprehensive review of the Hospital's bush fire plan.
- The Board of Management and Staff of Maldon Hospital look forward to another exciting year and its challenges. The Hospital is in good hands.



# Report to the community



Graem Kelly, PSM  
CEO

It has been a year which has challenged the Board and staff to reflect on the Hospital's rich 150 year history, and through a comprehensive service planning analysis, define its course for the future. Early in this financial year we will

release a comprehensive Strategic Plan which will give us direction for the next five years. In this Plan, Maldon Hospital is challenged to expand community services and mature collaborative relations with other health services and key stakeholders to ensure that the health and wellbeing needs of the community are met.

The professionalism and continued heartfelt dedication to quality care and services being relevant to an individual's needs, has again been met with Maldon Hospital receiving a full three year Aged Care Accreditation and is well placed for its review and reaccreditation under the Australian Health Care Standards "EQUIP" later this year.

The service was again, through careful expenditure and efficient management by the staff, able to achieve a healthy surplus. Through negotiations and defining a service need, Physiotherapy and Podiatry services now regularly visit Maldon Hospital from Mt Alexander Hospital. Also, under the Commonwealth funded More Allied Health Program and in association with our local General Practitioner, Dr Chris Fowler, and the local Bendigo Division of General Practice, a half day per week Physiotherapy session is now supported.

Under the local leadership and management of Director of Nursing (Matron) Jan Hutchinson, staff have continued to engage in continuing education and attend training and education programs. We welcome Patricia Kelly the new Nurse Unit Manager (Charge Nurse) and have seen her actively engage in the quality systems management and review of internal practices against what is contemporary best practice. All the staff are important in the continued success of the special personalised and friendly care given at Maldon. They are to be acknowledged for their efforts. In no particular order, all staff including the cleaners, kitchen staff, clerical staff, nurses, maintenance workers, day care, district nursing and not least the local doctor should be proud of the work they have done.

The 150 year celebrations are an important occasion for this year and a Board subcommittee

has done a sterling job in putting this together. As part of this, we have refreshed garden areas, applied touch up paint and the like to ensure that the service remains well maintained. The Board has again provided great support under the leadership of Clive McCann and has for the next year expanded to 11 members for 2009 onwards of which all are well qualified and committed to the Maldon community.

A thank you is extended to our retiring Board member, George Stolk. George will be missed at our monthly Board meetings, but will be still active as a volunteer. Welcome to all the new Board members, they are noted in the Board Presidents report. To all the volunteers who spend many hours in the gardens, transport and other activities you are truly the unsung heroes who allow Maldon Hospital to be all it can. Thanks must also go out to residents and families and the general community for their continued support.

The list of achievements for the year have been many as the Board President has listed. We are also pleased to have secured the services of a new Medical Director Dr Al Rudock commencing 1 July. Dr Rudock will undertake medical reviews and support us in achieving clinical best practice for the hospital.

This, whilst not including everything, shows the Board and staff have been busy addressing issues as they arise. To all of the people I have forgotten to acknowledge, my apologies as all your hard work is important to us. Thanks to Dr Chris Fowler and his team for their professional services and continuing support and I ask that everyone take the opportunity to read our Strategic and Service Plans for 2009 to 2014 when they are released.



# Board of Management



**Mr Clive McCann**  
*President*  
appt 31.10.1999

## BOARD MEMBER PROFILE – CLIVE McCANN

My wife Kaye and I moved to Maldon in 1997 and were soon welcomed into the community. In 1999 it was suggested that I should consider joining the Board, and even though my appointment should have been in November 1999, with the change in government, the appointment was delayed until January 2000. This means I have now been a member of the Board for approximately ten years, making me current longest serving Board member. During my time on the Board I have held the positions of Treasurer, Vice-President and President. In this ten year period, the Hospital has: added the Mountview wing and the George Ray wing; completely renovated the older section of the Hospital; seen changes in the Director of Nursing and the Chief Executive Officer; achieved ongoing accreditation in all areas; achieved outstanding financial results each year; and has continued to be a valued asset for Maldon. I have now completed my third term as President and the position will be taken over by another Board member. I can say that I have enjoyed my time as President and being involved with these exciting changes and I will continue on as a Board member working for the Hospital.



**Mr Stephen Wright**  
*Vice President*  
appt 31.10.2003



**Mr John Fitton**  
*Treasurer*  
appt 01.11.2004



**Ms Cheryl Axell**  
*Board Member*  
appt 01.07.2008



**Mrs Barbara Ford**  
*Board Member*  
appt 01.11.2003



**Mrs Sarah Ferguson**  
*Board Member*  
appt 01.11.2008



**Mr Michael Grimes**  
*Board Member*  
appt 31.10.2004



**Dr Helen McBurney**  
*Board Member*  
appt 01.11.2008



**Mr Alan Sheppard**  
*Board Member*  
appt 01.11.2008



**Mr George Stolk**  
*Board Member*  
appt 01.11.2006  
retired 30.06.2009

## Committee Representation

### Quality and Clinical Risk Management Committee

John Fitton (chair)  
George Stolk

### Safe Practices & Environment

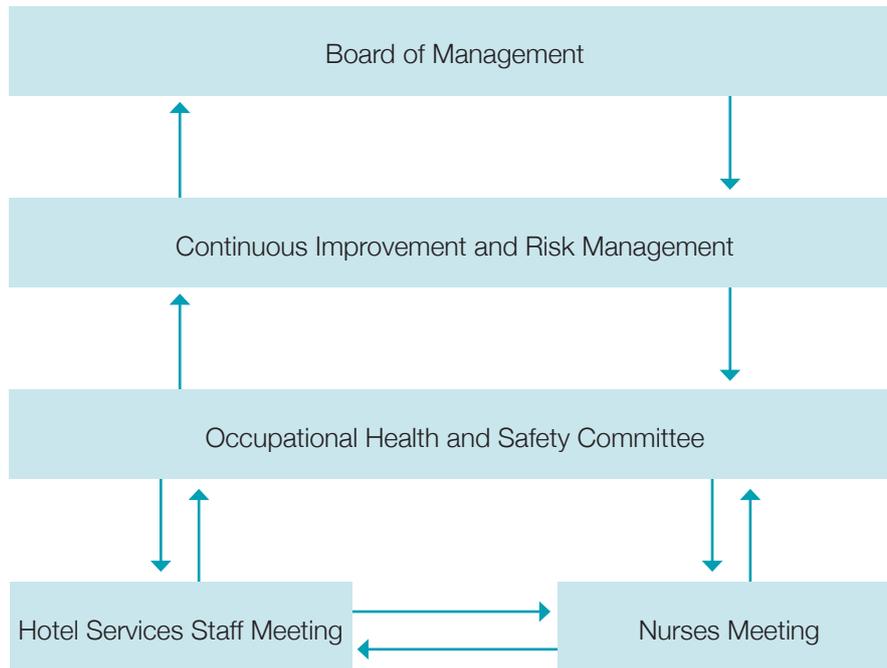
Stephen Wright (chair)  
Michael Grimes

### Continuous Improvement and Risk Management

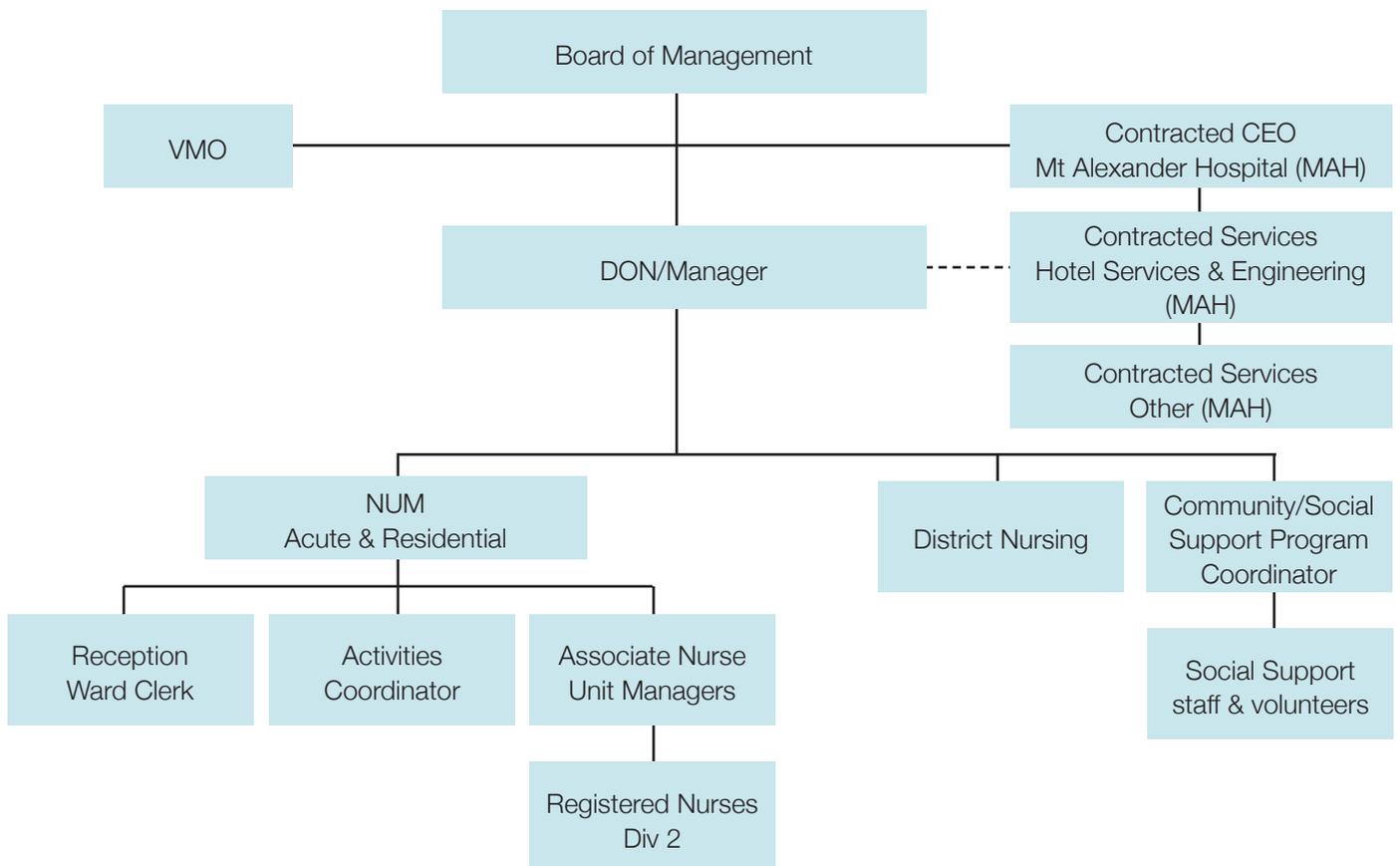
Stephen Wright (Chair)  
Cheryl Axell  
Barbara Ford  
Helen McBurney



# Committee Reporting Mechanism



# Organisational Chart



## Overview

### Our community

Maldon is located 137 kilometres north-west of Melbourne or about 90 minutes by vehicle via the Calder Highway. Maldon gained pedigree, when in 1969 it was given the title Australia's first "notable town". This is because of its well-preserved 19th century buildings. Visitors take a trip back in time to find a town with broad footpaths shaded by corrugated iron verandas, buildings and cottages made from local stone, old-fashioned shop fronts and deep stone gutters. Its character is greatly enhanced in summer with High Street being cool and leafy because of the many deciduous European trees. In autumn the same street strikes a brilliant colour which makes a Maldon a much desired place

#### COMMUNITY AND CORPORATE SUPPORT

On behalf of the Board of Management, residents, patients and staff of the Maldon Hospital, it is a pleasure to acknowledge the kind and generous support of;

Gleeson family raffle \$242.50

Memory of Jessie Moore \$340 for hearing assistance equipment purchase

DJ Symons \$100

Maldon & District CERT team \$250

Maldon Lions Club \$500 for support of "Chook" project

Mrs Val Molina \$1000

### SERVICES PROFILE – Hotel Services Toni McGregor

I commenced work in 1977 as a relieving kitchen hand. At that time the kitchen was a part of the old hospital and was physically large with a long steel bench with a scrap muncher in the middle that shredded all the food scraps and drained them away. At that time Hilda Skinner was the full time cook with Bonnie Patterson the 2nd Cook and Jessie Allan the relieving cook. All the cooking was done on site. There were no frozen vegetables they were all peeled and cooked as needed. All food was sourced locally. Meat was from the local butcher, bread from the bakery, fresh daily, and groceries from either Brookes Store or the supermarket. In those days we used to serve the patients and residents things like tripe and cutlets and they would have been the favourites. You could have scrambled eggs for breakfast in those days. At Christmas time the kitchen used to cook all their own Christmas cakes, puddings and minced pies. The puddings would hang all around the kitchen for weeks before Christmas. You couldn't do that these days. We didn't wear hats or gloves, only aprons, didn't test the temperature of food and I don't recall having seen a health inspector until one came up from Melbourne all dressed in hat and overshoes. This was when Maggie Oliver was matron in the old hospital. This year we have been overwhelmed with inspections, accreditation twice, Workcover, external safety audit and the Shire health inspector. I can't remember that we have ever had a problem with food safety. Never a problem with contamination or infection.



In 1998 Mt Alexander Hospital contracted to provide food services to the Maldon Hospital and have provided cook chill meals ever since. Staffing levels remained pretty much the same but the shifts changed a little. We moved to a temporary kitchen in Jessie Bowe House whilst the old kitchen was demolished and they built the new kitchen which we are currently using in Mountview Home. We moved into the new kitchen in June 2000.

The meals are now cooked in the kitchens of Mt Alexander Hospital, refrigerated and trucked out to Maldon in the mornings. Staff now heat the meals and then serve them to the residents and patients. The kitchen staff all pride themselves on the level of hospitality they offer, with an unsurpassed level of courteousness and friendliness. We thank them all.



“ I am satisfied and happy being in the home and have a good view from my window, I spend time sitting on the balcony with all my plants. I have a bird bath in the garden which is well used.”

Resident Satisfaction Survey June 2009.

to be. Located in Victoria’s Goldfields region, Maldon is a quaint goldmining town that looks like it still belongs in the 19th century.

The Hospital networks with a range of local and regional agencies, including Mt. Alexander Hospital in Castlemaine, the Castlemaine Community Health Centre and the Bendigo Health Care Group.

There is one General Practitioner located in Maldon, Dr Christian Fowler who is employed by the hospital as the Visiting Medical Officer. His surgery is located on the Oswald Wing, making interaction and communication between the hospital and Dr Fowler convenient and practical for both staff and the clients.

## Our services

### ACUTE

Inpatient care and treatment for acute medical conditions, convalescence and palliative care is provided in the 4-bed George Ray Wing. There were acute 754 bed days, which equates to 51.6% occupancy. 113 bed days were nursing home type clients who remained in the acute wing until a suitable bed became available in either of the residential units.

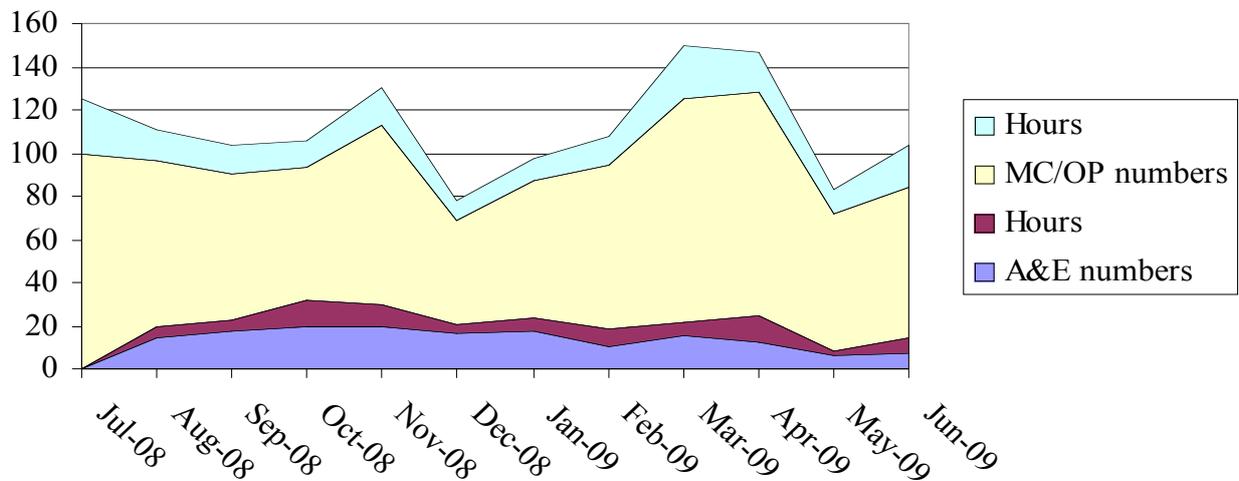
### Acute Bed Days

	2008/2009	2007/2008	2006/2007	2005/2006	2004/2005
Jul	85	85	47	58	89
Aug	93	73	53	77	53
Sep	92	45	21	49	39
Oct	72	61	15	89	46
Nov	47	86	15	43	59
Dec	35	60	15	53	73
Jan	54	31	54	60	74
Feb	81	73	31	34	17
Mar	47	59	16	42	87
Apr	40	65	24	31	73
May	57	48	39	29	76
Jun	51	52	19	55	96
Total	754	738	349	620	782

### NON INPATIENTS

Support and assistance is provided to members of the community who present at the hospital with a medical emergency. Services are limited to basic nursing assessment and medical intervention, due to available resources. Clients are stabilised and receive first aid and emotional support whilst waiting for transfer to another health service if required. The total number of Accident & Emergency presentations for 2008 – 2009 was 153, with 82.12 hours of nursing time.

## Accident & Emergency and Medical Clinic Outpatients 2008 – 2009



## Nursing Services

The hospital provides a registered nurse one morning a week to take blood for pathology on behalf of the medical clinic, saving members of the community the need to travel to other locations such as Castlemaine or Bendigo for blood tests.

Nursing support provided by the hospital to the Medical Clinic (in the form of taking blood samples, assisting the doctor with minor procedures, ECG's and wound dressings etc) for the 12 months totalled 918 episodes, taking 188.68 hours.

### RESIDENTIAL AGED CARE

Long-term residential care is provided for members of the community who are no longer able to manage independently at home, with 12 low care places at Jessie Bowe House and 16 high care places at Mountview Home.

The prerequisite for going on the waiting list for the residential homes is an assessment by the Aged Care Assessment Team (ACAT), who assess the client's capabilities and needs and allocates them to either low care or high care. The length of time a person may be on the waiting list varies greatly and every attempt is made to consider the needs of Maldon locals as a priority.

While living in Jessie Bowe House and Mountview Home-residents continue to access allied health professionals, such as physiotherapist, podiatrist, speech pathologist, dietician, visiting geriatrician and adult mental health services.

During the year, there was a 99.63% occupancy rate in Mountview Home and 98.13% occupancy in Jessie Bowe House.

### Director of Nursing Report



Jan Hutchinson  
Director of Nursing

The last twelve months have been a time of change, and the staff at Maldon Hospital have taken on the challenges that change brings without it affecting the ongoing care they provide to residents, patients and members of the

local community. We have farewelled staff from both the nursing team and hotel services. Some of these workers having been here for up to 25 years.

Under the guidance of Graem Kelly, CEO, plans for an after hours admission area, larger nurses office, and a replacement Quiet Lounge for the residents have been developed with building to commence later in 2009. The connection to Loddon Mallee Health Alliance means the introduction of computer programs for incident reporting and risk management called 'RiskMan'. In the residential aged care facilities 'Management Advantage' a total package for assessment, care planning and reporting for resident needs is being implemented. 'Cambron' for Human Resource Management including professional development register and staff appraisals has been introduced.

Patricia (Tricia) Kelly commenced in the position of Nurse Unit Manager in June 2008. Her interest in Quality Management and her skill for producing quality written procedures has resulted in clearly defined and easy to follow procedures for staff to

### RESIDENT PROFILE – ERNIE O'DONNELL Mountview Home

Ernie moved to Lawrence Street Maldon 88 years ago and he lived there all his life until he moved into Mountview Home in September 2008. Prior to his failing health in these latter years he had only been in hospital once when a tractor fell on him. Ernie is a delight to have as a resident and enjoys recounting his memories of his life in Maldon. Ernie's fondest memory is that Maldon was always known for the 3 G's! Goats, Geese and Girls (he wasn't sure in which order). Ernie turns 94 years old this New Years Eve and we all enjoy his quiet demeanour and his beautiful smile.



## RESIDENT PROFILE – ROBERT NEVILL Jessie Bowe House



Mr Nevill is only a recent addition to our household arriving in April this year. Bob is a well known local who was born on a farm at Gower, out on the Castlemaine Road near the bike track. Bob was the third of eight children born on the farm which included twins that didn't survive infancy. He was 18 ½ when he left home and moved to Melbourne to become an apprentice roof tiler. Bob joined the army on 15 November 1941, just before the bombing of Pearl Harbour. He served in the army for 5 years, some of that time was in New Guinea. When Bob left the army they sponsored him in a retraining scheme and he commenced his training as a painter and decorator and studied signwriting at night school. The course of his training was to take him all over the state. From Stawell to Melbourne, Warrigal and Bendigo. Whilst living in Bendigo and visiting home on weekends he courted his wife Betty and at the age of 29 married. Betty and Bob were to eventually return to Maldon and lived with their five little children in a one bedroom cottage at the back of Pond Drive. With the assistance of the Dept of Veterans Affairs he was able to secure a loan and he and Betty built a house in Parkins Reef Rd and moved in months before their sixth and last child was born. For 46 years they lived there and raised their children until this year when Bob's failing health has seen him come to live with us in Jessie Bowe House.

refer to and follow in the day to day provision of care. She has overseen a complete revamp of the documentation and reporting of presentations to accident and emergency, ensuring appropriate information is available in the event of a request for follow up after the event.

I would like to thank the departments at Mt Alexander Hospital for their ongoing support and the quality of service provided to us through our contractual arrangements. The Engineering Department always provide the highest level of cooperation and are obliging with the requests we make to their department. Personnel are willing to answer out of hour calls when things go wrong and are prompt and efficient with everyday enquiries. Members of the Finance team answer constant queries and direct enquiries from our resident's families, meeting with them to assist in the multitude of paperwork required for admission to the aged care facilities. Hotel Services include catering, cleaning, laundry, and maintenance. The laundry manager visits frequently to undertake audits and ensure the Material Safety Data Sheets are up to date in line with Occupational Health & Safety requirements. Supply Department are very tolerant of our frequent enquiries and requests and provide us with a regular supply of our everyday needs. Mt

Alexander Hospital Pharmacy maintain our imprest medications for acute services and offer advice and support in relation to medication administration for our residential homes. Human Resources provide a various array of support from payroll to staff counselling. Without their support and willingness to listen, staff morale may not be as high. Through the Community Rehabilitation Services, hospital clients and people from the community have access to Physiotherapy, Occupational Therapy, Podiatry, Speech Pathology and Dieticians. The Medical Records department 'code' acute medical files to fulfil the requirements of the Department of Human Services and have been available for support and advice when needed. We have also been able to access transport services at Mt Alexander Hospital when unable to arrange vehicles for travel for our clients. Participation at the weekly Director's meeting at Mt Alexander Hospital ensures that the needs of Maldon Hospital are always considered.

### Home and Community Care Activities

HACC Planned Activity Groups (PAGs), and volunteer assisted Social Support activities facilitate participation in community activities by frail aged and younger people with a disability. Our aim is to





maximise health and resilience, by having programs where friendly interactions happen and there are appropriate physical and social activities. These occur even though at the same time changes are happening related to advancing age, altered or diminished physical function, and loss of friends and loved ones. Most of our programs are short duration, usually one hour, with an emphasis on physical activity and social connection and wellness.

In September 2008 we were able to take 4 clients to Melbourne for a 2 night / 3 day getaway break. Benefits from a venture such as this continue on for a long time afterwards.

STATISTICAL summaries show that this past year total program hours have exceeded the funding targets. The two years prior to that were below target. The goal for the coming year is to achieve outputs within 2% of funded program hours.

### VOLUNTEERS

Volunteers are involved in all areas of hospital life: in community programs, with residents' activities, with acute patients and with maintenance of hospital grounds. Their involvement enriches their own human experience and contributes to the lives of people they come into contact with.

I would like to make special mention this year of the volunteers who assist with Planned Activity Groups. Jan Moore and Angela Schmitzer have been the Monday Club volunteer staff. Peter Lovett assisted weekly with transporting PAG clients and Bill Moore has continued to instruct Tai Chi.

46 community clients and 5 residents have been assisted by volunteers to participate in community activities away from the hospital.

### OTHER GROUPS WHO REGULARLY VISIT THE HOSPITAL INCLUDE:

- Clergy and Pastoral Care visitors from the local churches
- Library Volunteers who deliver library services to residents and community clients
- Church ladies who deliver flowers to residents of Mountview Wing.
- Twice a week kiosk trolley providing tissues, lollies, etc

### HEALTH PROMOTION

Activities include Pole Walking Groups, Tai Chi, volunteering and partnerships with Maldon Men's Shed, Maldon Laughter Club, and the newly formed Bridge Club that has made its home at the Community Centre in the senior citizens' room.

### DISTRICT NURSING

The Maldon District Nursing Service continued delivering home based nursing support, health education and promotion seven days a week throughout the year. Our nurses travel from Welshmans Reef to Laanecoorie, Baringhup to Walmer and everywhere in between.

The service passed accreditation with a very high rating in September 2008 and will continue to try and improve. The Nurses have upgraded their skills in many areas such as wound care, palliative care, dementia, health promotion, oncology, legal issues, emergency and assessment.

	Total Hours	No. of Visits	Kilometres
2006/2007	2591	2617	12420
2007/2008	1810	3807	17539
2008/2009	1503	3807	18687



## Maldon Hospital Staff Structure

### Statement of Merit and Equity and Workforce Data Disclosures (FRD 22B)

Maldon Hospital is committed to the employment principles that reinforce the public sector values. These principles ensure:

- Employment decisions are based on merit
- Employees are treated fairly and reasonably
- Equal employment opportunity is provided
- Human Rights are upheld in accordance with the Charter of Human Rights & Responsibilities Act 2006

- Employees have a reasonable avenue of redress against unfair or unreasonable treatment

Only one of these employees was permanent part time and after 17 years of service will be missed by both staff and residents.

Maldon Hospital	New Employees	Resignations
	9	12

Maldon Hospital employs 48 staff which is 19.1 equivalent full time positions.

96% are female and 4% male

6% of staff are full time, 94% part time or casual.

	FULL TIME	PART TIME	CASUAL	TOTAL
Medical			1	1
Nursing	3	28	14	45
Clerical		1	1	2
Total	3	29	16	48

### Portfolios / Resource Groups

Contenance Co-ordinator	Karen Adamson	RN Div 2
Continuous Quality Improvement	Patricia Kelly	Nurse Unit Manager
	Jan Hutchinson	DON / Manager
Dementia Focus Group	Jan Hutchinson	DON / Manager
	Jenny Parker	Social Support & Volunteer Program Co-ord.
	Fran Reed	RN Div 1 – District Nurse
	Helen Yates	Lifestyle Co-ordinator
	Elaine Lakey	Hotel Services
Infection Control	Kathy Harding	RN Div 1
	Amelia Scarlett	RN Div 2
Lifestyle Co-ordinator	Helen Yates	
No Lift	Joan Sartori	RN Div 2
	Judy Bari	RN Div 2
	Lyn Dalton	RN Div 2
	Eileen Grindley	RN Div 2
Occupational Health & Safety Representatives	Marg O’Keeffe	RN Div 2
	Peter Buckler	Hotel Services
	Natalie Grant	RN Div 1
	Eileen Grindley	RN Div 2
RACS Documentation Co-ordinator	Kellie O’Hara	RN Div 1
Social Support and Volunteer Program	Jenny Parker	RN Div 1
	Yvette Newton	RN Div 2



## Our Facilities

The original hospital building was constructed in 1859. The Maldon Hospital facilities were redeveloped during 2001, at the cost of \$3.7 million, and successfully integrated the acute hospital and the high and low care residential facilities. The building was also refurbished to include a medical clinic, a therapy room for community based services, boardroom and staff amenities.

<b>Maldon Hospital manages assets valued at over \$7 million:</b>	
Land	200,000
Buildings	7,015,002
Plant & Equipment	179,969
Motor vehicles	94,818
<b>Total</b>	<b>7,489,789</b>

### Quality of Care Accreditation

Maldon Hospital has full accreditation under ACHS (The Australian Council of Health Care Standards). The four year period is from July 2006 until September 2010. This means that the services we provide for the community meet standards required of a health provider at a national and international level.

Jessie Bowe House has three years accreditation under the ACSAA (Aged Care Standards and Accreditation Agency). The accreditation period is until June 2012. To achieve accreditation an aged

care facility needs to be compliant in 44 expected outcomes.

Mountview Home also has three years accreditation under ACSAA for the period of May 2007 until May 2010. The ACSAA can undertake unannounced support visits to any aged care facility to ensure standards are being maintained and these will usually occur at least once a year. Both facilities received unannounced support visits early in 2009 and both units continue to be compliant with all 44 expected outcomes.

### Risk Management

The Risk Management Plan was originally developed in 2005 and is reviewed annually. The Plan was developed to identify any risk, so that the organisation can put into place strategies and interventions to prevent or reduce the occurrence of events that may put the organisation at risk. This ensures the ongoing smooth running of the hospital, and compliance with legislative requirements.

### Occupational Health & Safety

Maldon Hospital recognises its moral and legal responsibility, in particular to the Occupational Health and Safety Act 2004, to provide a safe and healthy work environment for employees, contractors, clients and visitors. Employees are encouraged to regard accident prevention and working safely as a collective and individual responsibility. Over the past twelve months there has been a greater focus on incident

## STAFF PROFILE – Eileen Grindley

I emigrated to Australia from England with my husband and son on April 21st 1971. On our arrival we were stationed at the Maribyrnong Hostel. Three months later we moved to Maldon and have lived here ever since (38 years plus).

I worked for a while at the Maldon Shoe Factory, but when my son was older I decided to pursue my ambition to be a nurse.

I did my training at Mt Alexander Hospital in Castlemaine and worked there for 18 years. After managing to get a permanent position at the Maldon Hospital on May 6th 2001 I have worked here now for 8 years plus. I began working in the Old Hospital then we transferred into the new section.

It has been really lovely working in the town where I live. All the staff are really great to work with and are very dedicated to their individual roles at the hospital. It's a great place to work, very friendly. In the little spare time that I have, I enjoy a game of golf.



reporting and addressing the outcomes of such incidents. This has heightened the awareness of staff and their response to Occupational Health and Safety issues.

This year we were successful in securing State Government funding for the installation of security cameras throughout the complex. This funding came from the Preventing Violence and Aggression in the Workplace Funding round announced by Minister Daniel Andrews State Minister for Health in April at the hospital. This system has been installed and is fully operational giving staff and residents the ability to observe comings and goings around the hospital particularly after hours.

The Occupational Health and Safety (OH&S) Committee meets monthly and consists of four elected OH&S representatives, two employee representatives, two management representatives and the OH&S Officer from Mt Alexander Hospital. The committee maintains an active role in the development and review of policies and safe work procedures.



## Workcover

No Workcover claims were lodged for this reporting period.

## Staff Development and Performance Management

Maldon Hospital invests in its employees through professional development and training. All employees are required to undertake annual mandatory training and participate in performance management on a regular basis to achieve high standards of client care. In October 2008, 40 employees (including seven Hotel Service staff from Mt Alexander Hospital) attended mandatory training, which included CPR and Basic Life Support, Fire and Emergency Procedures, OH&S update and Risk Management, in total 320 hours to achieve 100% compliance in mandatory training.

During the year staff also attended professional development at both in-service presentations and at external locations ranging from one hour sessions to a three day course. In total there were 102 attendances at 31 education/training sessions for a total of 584 hours. Topics ranged from cardiac emergencies, palliative care, oncology, food safety, dementia care, behaviour management, foot care, wound management, mental health first aid, open disclosure, documentation and legal issues.

## Infection Control

Kath Harding continues to represent us as our Infection Control Officer and Vaccination Nurse. Kath has her Pre and Post HIV counselling certificate to support staff who may suffer a needle stick injury and has put in place systems to manage and prevent the occurrence of same.

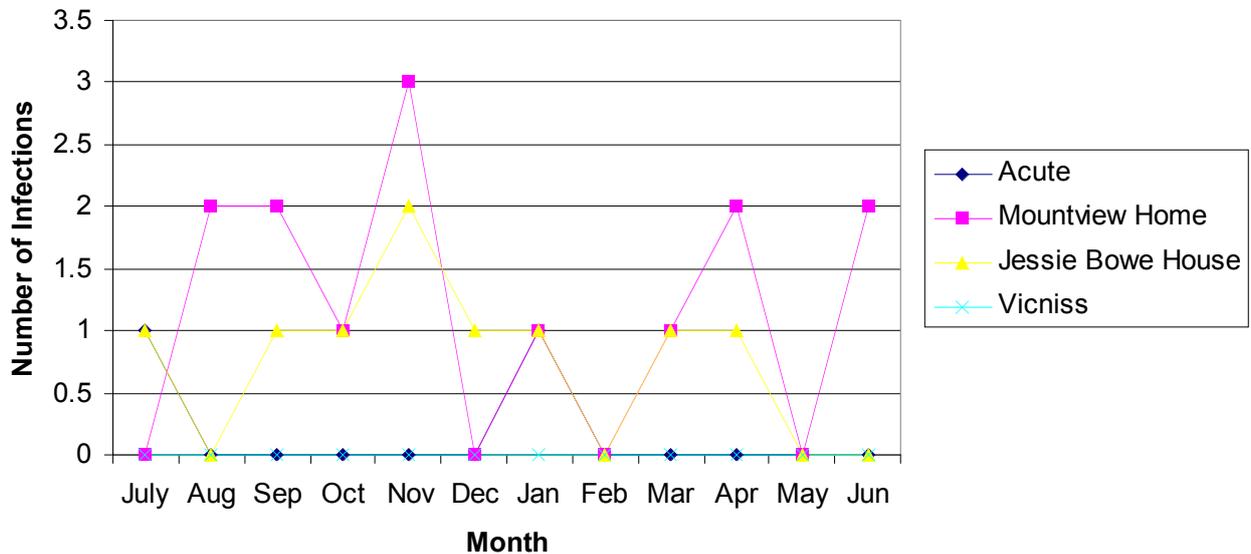
Hand hygiene remains the most important aspect of infection control and we have scored very highly in our three audits for the year. These results are reported to the Hand Hygiene Co-ordinator based at the Austin Hospital.

The Immunisation program has been very successful this year. Most residents participated and we had 70% of staff vaccinated against influenza. The DHS target is still 60%.

There have been no influenza, gastroenteritis or respiratory outbreaks to date.



## Hospital Acquired Infections



### Staff Health Program

Staff vaccinated for Influenza. DHS target 60%

2007	53%
2008	61.5%
2009	70%

### Activities to Maximise Residents' Lifestyle

Helen Yates Activities Co-Ordinator continues to provide activities that are tailored to meet the individual needs of residents at Maldon Hospital. After admission and some adjustment time to new surroundings, residents and family members are visited about past and present interests and lifestyle. Information obtained is then placed in a personal care plan. Annually and at regular resident meetings

the residents give feedback as to programs that they enjoy and what they would like to see more of. Regular activities that are provided are Bus Outings, Bingo, Happy Hour, Trivia, Maldon Memories, Memory time, Exercise, Games, Book Club, Movies and Popcorn. We receive regular visits from Maldon Primary School, Athenaeum Library, Local Church Groups, Local Musicians and numerous volunteers who share their talents. We have volunteers who also take a trolley around offering supplies such as lollies, tissues and personal needs items. Outings to the community Senior Citizens for lunches or special functions are much enjoyed and also to functions that are of individual interest, thus making it enjoyable to still be a part of the Maldon Community and to be a "Resident of Maldon"!



## Continuous Quality Improvement

Continuous Quality Improvement is a major focus of accreditation for both the Australian Council of Health Care Standards (ACHS) and Aged Care Standards and Accreditation Agency (ACSA).

Clinical and non-clinical data is collected and collated to evaluate the outcomes of the care provided. Throughout the year staff review documentation, care plans and clinical practice to ensure best practice is achieved and the hospital meets the expectation of government departments and clients. During the year 32 quality projects were carried out. This is an increase on the number of quality projects carried out last year due to the diligence of the Nurse Unit Manager who has the portfolio for quality management.

Reporting to the Board of Management committees have been combined and rationalised to form the new Continuous Improvement and Risk Management Committee. This committee consists of representatives from contracted departments from Mt Alexander Hospital and Heads of Departments from Maldon Hospital with Board of Management members attending for reporting requirements. We now have no duplication of reporting and much smoother time management.

During the twelve month period major purchases made to improve the level of care and provide a safe work environment are as follows;

- Lift Care Bed for resident safety
- Digital weigh chair for comfortable and safe weighing of frail residents.
- Overlay pressure relieving mattress.
- Replacement of mobile phones to improve coverage for district nurses and volunteers
- Lift Care bed funded by State Government
- Ongoing replacement and upgrading of medical equipment in the Accident and Emergency Department.

## Falls Monitoring & Prevention

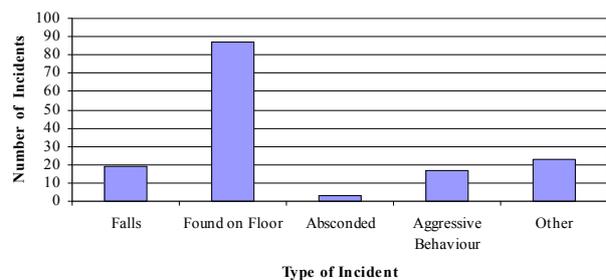
Falls are a major cause of injury for older persons, and on their admission to hospital a full assessment by nursing staff and the doctor is undertaken to determine any factors that might be contributing to the falls, such as infection, medication, poor vision or inadequate nutrition.

The Maldon Hospital staff are aware of the risk of falls and make every effort to assist clients to move about safely without denying them the right to take risks and maintain independence. All incidents are reported to and discussed at the monthly Occupational Health and Safety meeting to review current care plans and strategies to reduce and /or prevent further incidents.

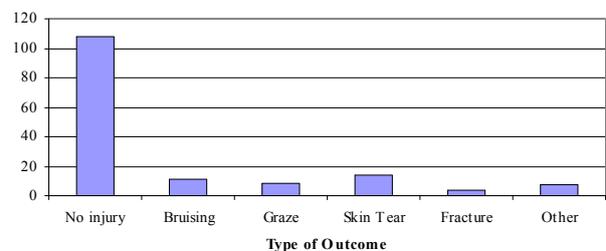
As a way of informing both the resident and their family about the risks and prevention of falls, an information booklet has been produced and it is included in the ‘Resident Information Package’ that is provided to residents on admission to Jessie Bowe House and Mountview Home. Ongoing activity programs for the community are conducted by the hospital to strengthen physical capacity to prevent falls.

During 2008 – 2009 there were a total of 106 incidents reported across the hospital relating to falls, being 19 confirmed / witnessed falls and 87 incidents where the client was found on the floor. During the 12 month reporting period four fractures occurred, these incidents are reported through the Public Sector Residential Aged Care Services Quality Indicators reporting system.

## Combined Incidents for 12 Month Reporting Period



## Outcome of Incidents



## Staff Incidents

Any injury or near miss that a member of staff experiences is also reported through the incident



reporting system. The registered nurse on duty will provide first aid and depending on the injury the staff member will be referred to their local doctor for further treatment. Nine incidents have been reported over the twelve months, as a result two members of the nursing team required a short time off duty.

## Medication Variances

Medication administration is an essential part of the professional duty of registered nurses. To ensure minimal medication errors occur and the correct patient / resident receives the right medication at the right time, audits are carried out regularly on the recording of medication administration.

Medication variances are reported by the registered nurse. These are then investigated by the Nurse Unit Manager and / or the DON and subsequently reported through the Continuous Improvement Risk Management committee to the Board of Management. During the past 12-month period, there were 4 reported medication variances. No harm occurred to any patient or resident because of these medication variances.

## Pressure Wound Monitoring and Prevention

Monitoring and preventing pressure ulcers is undertaken by using the internationally recognised Braden Pressure Risk Score on all patients and residents on admission and if clinically indicated when a change in condition occurs. The use of special pressure-relieving mattresses and frequent change of position for at risk people means minimal pressure ulcers occur at the hospital. These occurrences are reported for the residential services three monthly in the public sector Residential Aged Care Services Quality Indicators. The quarterly two point prevalence reports for George Ray Wing indicated no incidents of pressure ulcers during the 12 month reporting period. Any incidents of pressure ulcers are reported through the monthly Continuous Improvement and Risk Management Committee.

## Client Feedback

This year we were pleased to have had enough responses to the independent survey conducted by UltraFeedback. This is a government commissioned survey whereby we ask permission to forward an acute patients name and address to the UltraFeedback and they forward survey documents.

Responses were honest and helpful. Some were favourable. "Excellent treatment." "Liberal visiting hours." "Best of care." Other comments were less favourable. "The particular room needed sound proofing". "I felt that I was treated like a "piece of cattle' rather than a person."

## Resident Satisfaction Survey

To ensure the organization is meeting the needs and expectations of the residents at Jessie Bowe House and Mountview Home, an annual satisfaction survey is undertaken giving residents and their families the opportunity to give us feedback on how they perceive the organisation to be functioning.

The areas covered in the satisfaction survey include nursing care, physical environment, staff attitudes, freedom of choice and respect of privacy. For those residents unable to complete the survey, we ask the appointed next of kin or representative to complete the survey on the resident's behalf. Areas of concern identified through the responses on the survey are used for quality improvement projects.

(90.90% of the surveys returned in Jessie Bowe House and 85.71% in Mountview Home in July 2009 this is the same response rate as last year.)

## Nursing Services

March 2008 saw a significant change in the funding tool for residential aged care services, a move from the RCS (Resident Classification Scale) to the ACFI (Aged Care Funding Instrument), from initial assessments this new funding tool will have a significant negative impact on our low care facility income. The next 6 months will be a challenge for staff to perfect the assessment tools to ensure maximum funding can be achieved to maintain the level of care we have been used to providing in Jessie Bowe House.

## Organisation Representation

Maldon Hospital is represented at several regular networking committees within the region ensuring ongoing positive linkages with other organisations;

- Loddon Mallee Accreditation / Quality Network
- Loddon Mallee Regional Directors of Nursing Forum
- Loddon Mallee Residential Aged Care Services Managers Network
- Loddon Mallee Infection Control Network



- Loddon Mallee Mental Health Network
- Mt. Alexander Hospital Infection Control Committee
- Mt. Alexander Hospital Medication Advisory Committee
- Mt. Alexander Hospital Residential Care Committee
- Loddon Mallee District Nurse Best Practice Committee
- Local and Aged Care & Disability Advisory Committee
- Loddon Mallee Planned Activities Social Support Network
- Healthy & Active Living for Seniors

## Regulatory Compliance

All health providers, whether they are acute services or residential aged care, must meet minimum standards for accreditation, and are also audited on Food Safety, Cleaning and Security Standards. The results of the Maldon Hospital audits were as follows:

### Food Safety Audit

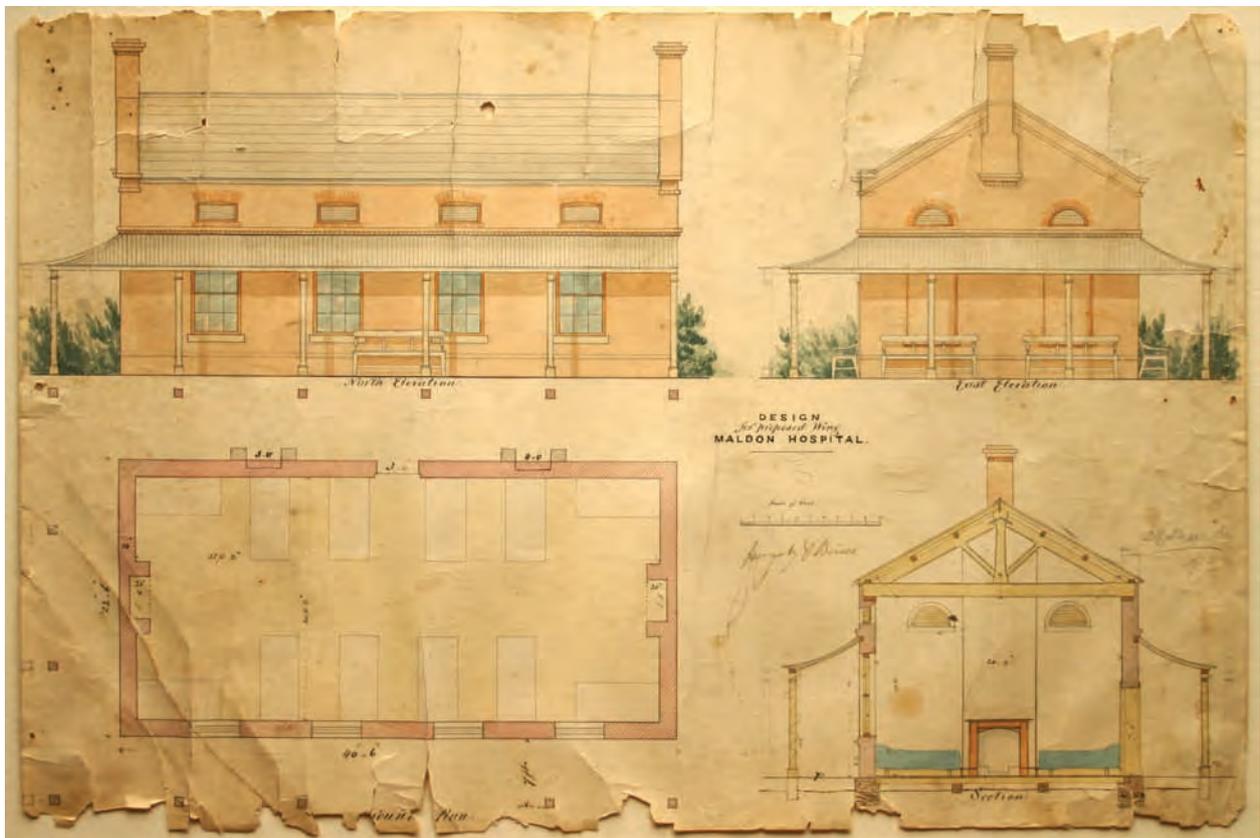
- 19th May 2009 – External audit by Catering and Hospitality Management Services Pty Ltd, compliant in all 44 processes, with no recommendations.
- 27th June 2009 – Unannounced inspection from Mt Alexander Shire, compliant in the 35 criteria inspected with no recommendations.

### Cleaning Audit

- An external audit of 13 rooms was performed in March 2009 with a result of 93.85% (no recommendations)
- An internal audit was performed on 131 rooms during the reporting period with a result of 92.3% (no recommendations)

### Security Audit

The security audit forms a part of the overall Risk Management Plan for the hospital and this year we achieved a score of 97.15% out of a possible 100% due to the installation of the security cameras and reviewing of procedures relating to staff and property security.



# Building & Maintenance

## Building & Maintenance

During the last financial year the fire service was upgraded to ensure compliance with our essential services obligations. This involved upgrading the tapping to the water main in Adair Street and replacing the 80mm line with a 100mm line. In addition a busport was constructed to provide shade for the bus.

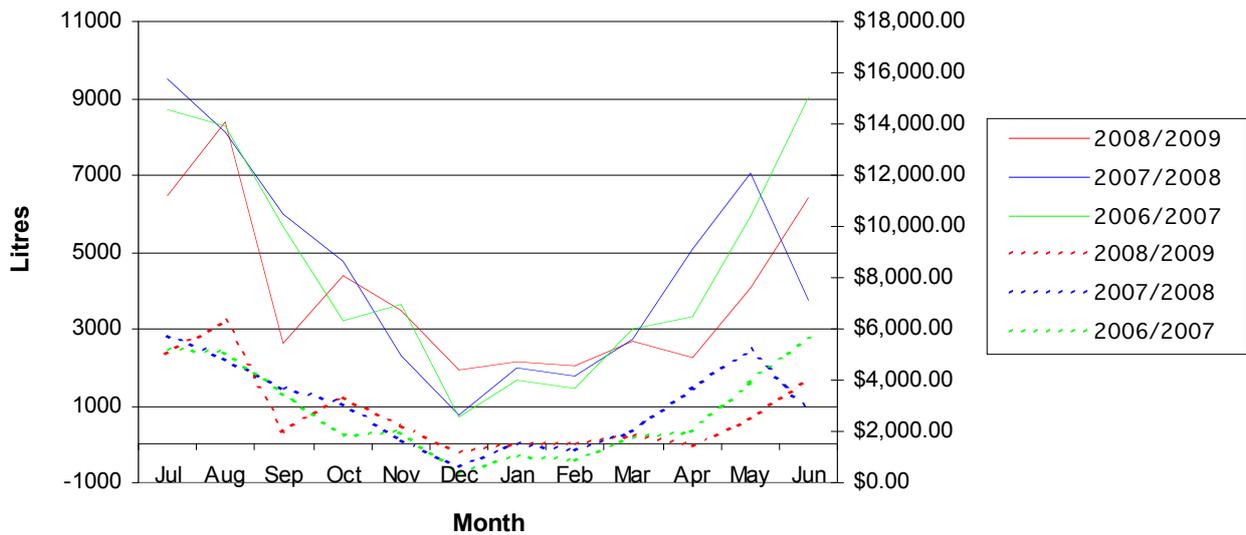
Electrical consumption for 2008/2009 was 197,175 kW/h at a cost of \$28,381 excluding GST.

LPG Gas consumption for 2008/2009 46,820 litres at a cost of \$29,994 excl. GST.

Water consumption for 2008/2009 was 1687 kL at a cost of \$4,890.



## LPG Consumption



# Disclosure Index

The annual report of the Maldon is prepared in accordance with all relevant Victorian legislation. This index has been prepared to facilitate identification of the Department's compliance with statutory disclosure requirements.

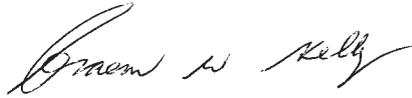
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<b>Management and structure</b>		
FRD 22B	Organisational structure	6
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FRD 10	Disclosure index	20
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## Mandatory Reporting

### Attestation on Compliance with Australian / New Zealand Risk Management Standard

I, Graem Kelly, certify that Maldon Hospital has risk management processes in place consistent with the Australian / New Zealand Risk Management Standard and an internal control system is in place that enables the executives to understand, manage and satisfactorily control risk exposures. The audit committee verifies this assurance and that the risk profile of Maldon Hospital has been critically reviewed within the last 12 months.



GRAEM W KELLY, PSM  
Chief Executive Officer

### Ex-gratia Payments

Maldon made no ex-gratia payments for the year ending 30 June 2009.

### Freedom of Information Applications

All applications were processed in accordance with the provisions of the Freedom of Information Act 1982, which provides a legally enforceable right of access of information held by Government agencies. Maldon provides a report on these requests to the Department of Justice.

Freedom of Information requests can be submitted to the Chief Executive Officer, Maldon Hospital, Chapel Street, Maldon 3463. Application Forms are available by phoning 5475 2000. Application fees and charges apply

One request was received under Freedom of Information in 2008/09 and the request was processed within the required timeframe.

### Whistle Blower's Act

The Whistle Blower's Protection Act 2001 provides protection for any person who would like to make a disclosure of improper or corrupt conduct by an official of a public entity. Maldon Hospital received no complaints under this Act during the year.

### Compliance with Building and Maintenance Provisions of Building Act 1993

All building works have been designed in accordance with the Department of Human Service's Guidelines and comply with the Building Act 1993 and the Building Code of Australia 1996.

### Victorian Industry Participation Policy Act 2003

There were no contracts commenced or completed at Maldon Hospital under the Victorian Industry Participation Policy Act 2003 during this year.

### Statement on National Competition Policy

Maldon Hospital complied with all Government policies regarding neutrality requirements with regards to all tender applications

### Consultancies for Year ended 30 June 2008

- Consultancies in excess of \$100,000 – 0
- Consultancies costing less than \$100,000 – 2
- Number of consultants engaged – 2

Total cost of engagements \$46,674.49 incl GST

### Fees Charged for Service

All fees and charges charged by Maldon Hospital are regulated by the Commonwealth Department of Health & Ageing and the Hospitals & Charities (Fees) Regulations 1986, as amended and as otherwise determined by the Department of Human Services, Victoria.

### Ethical Standards

The Board of Management promotes the continued maintenance of corporate governance practice and ethical conduct by the Board members and employees of Maldon Hospital. The Board has endorsed a code of conduct with applies to Board members, officer and all employees.

### Pecuniary Interests

Members of the Board of Management of Maldon Hospital are required to notify the President of the Board of any pecuniary interests, which might give rise to a conflict of interest in accordance with Maldon Board's code of conduct.

### Tax Deductible Gifts

Maldon Hospital is endorsed by the Australian Taxation Office as a Deductible Gift Recipient. Gifts to Maldon Hospital as a Public health service qualify for a tax deduction under item 1.1.1 of section 3-BA of the Income Tax Assessment Act 1997.



# Life Governors

ABBOTT, Rev.	CAIN, R.	FAULKNER, W.J.	HANRAHAN, T.
ADDLEM, H.T.	CAMPBELL, Miss J.	FENN, Mr Brian	HARPER, W.
ADDLEM, N.G.	CAMPBELL, J.R.	FITZPATRICK, Mrs Beth	HARTLEY, Mrs R.
AHERN, H.	CAMPBELL, N.	FITZPATRICK, Mrs G. Snr.	HASLEM, Miss M.J.
ALLAN, J.Y.	CAMPBELL, P.J.	FITZPATRICK. H.	HAYBITTEL, A.S.
ALLAN, Mrs Jessie	CAMPBELL, W.	FITZPATRICK, Mrs Hugh	HAYES, T.
ALLAN, R.G.	CATTLIN, Miss W.D.	FITZPATRICK, J.	HENRY, J.R.
ALLEN, Mr Alex	CHAMPION, Dr W.L.	FITZPATRICK, Miss J.M.	HERD, Miss S.
ANDERSON, Miss G.	CHISHOLM, Miss N.	FITZPATRICK, J.V.	HIBBERT, J.B.
ANNAND, Miss F.	CLARK, Mr I.W.	FITZPATRICK, Mrs J.V.	HIBBERT, Miss M.
APPERLY, W.B.	CLARK, Miss S.	FITZPATRICK, Mrs K.	HILL, Mr G.
AUSTIN, E.	COLLARD, Chas.	FITZPATRICK, Miss P.	HODGE, F.S.
AUSTIN, Mrs E.	COLLARD, Mrs H.	FITZPATRICK, Miss S.A.	HOPMAN, H.C., C.B.E.
AUSTIN, Miss L.	COLLARD, H.N.	FLEISCHER, Mrs W.M.	HORRIGAN, J.
BACKWAY, W.J.	COLLARD, N.	FORDHAM, C.	HORRIGAN, M.
BANNON, Miss C	COOPER, Mrs E.	FORDHAM, J.	HOSKING, H.
BARTELS, J	COOPER, M.	FOSTER, Miss J.I.	HOSKING, J.
BARRANGER, Miss J	COUCHMAN, J.T.	FRASER, L.J.	HOSKING Mrs S.
BATSON, Mrs V	COURTIN, F.E.	FREEMANTLE, C.J.	HUGHES J.R.G.
BAXTER, Hec.	COUSINS, A.A.	FREEMANTLE, J.	HUIISH, J.J.
BAXTER, W.R.	COUTTS, R.	FRIEDRICH, Miss A.M.	HUIISH, Jas.
BELL, Miss K.	COWLING, Mrs C.	FRIEDRICH, Miss H.	HUNT, Miss L.
BELL, Mrs T.	CRAWLEY, Mrs W.I.	FRIEDRICH, Mrs J.A.	HUNT, Miss R.
BELL, T.	CROKE, T	FRIEDRICH, Miss M.L.	HUNTER, Mrs R.
BETTIE, L.	CROSS, J.C.	FROST, George M.L.A.	HUNTER, R.H.
BIENVENU, Miss R.L.	DABB, A.R.W.	GALLAUGHER, J.J.	HUTTON, Miss A.
BORCHERS, C.R.	DABB, H.H.	GALLAUGHER, Miss C.	HUTTON, Miss E.O.M.
BOREHAM, A.H.J.	DAVIES, Mrs E.	GALLAUGHER, S.	HUTTON, R.
BOWE, Mrs E.J.	DAVIES, Mrs N.	GAYNOR, J.	HYDE, Miss G.
BOWE, Mrs I.	DAVIES, T.R.	GAYNOR, Mrs A.E.	IVESS, J.
BOWE, Mrs J.E.	DAVIES, W.E.	GILES, J.	JACKA, Miss M.
BOWE, Mr Len	DAVISON, T.B.	GINNAINE, P.	JEFFREY, Miss I.
BOWE, P.W.	DENNIS, Miss E.	GOLDSMITH, J.	JOHNSON, Miss M.
BOWEN, J.	DENNIS, Miss L.	GOULEN, J.F.	JONES, Miss A.
BOWEN Mrs W.	DESMOND, Eric	GRAY, Dr. C.	JONES, Mrs O.
BOYD, Mrs J.	DONALDSON, B.K.	GRAY, Miss H.L.	JONES, O.
BRIEN, Miss M.A.	DONOHOE, Rev. H.	GRAY, Mrs A.	JONES, P.O.
BROOKS, Miss C.	DOUDNEY, J.	GRIGG, Miss B.	JONES, R.P.
BROWN, Mrs R.	DUNKIN, M.	GRIGG, Miss H.	JOYNT, C.A.
BROWN, Miss S.	DUNKINSON, Mrs V.A.	GRIGG, Mrs K.	KINROSS, J.J.
BROWNBILL, A.	EASTMAN, Miss B.	GRIGG, Mrs R	KINROSS, Mrs S.M.
BROWNBILL, Mrs A.	EDHOUSE, A.E.	GRIGG, R.A.	LAITY, A.
BRYSON, H.	EDHOUSE, Mrs R.	GRIGG, T.H.	LAITY, Mr A.L.
BRYSON, J.	EDWARDS, C.	GRISOLD, Miss H.	LAITY, Mr K.M.
BUGBIRD, Miss V.	EDWARDS, Mrs J.	HAIR, Miss M.	LAITY, L.G.
BURCHELL, Mrs W.	EDWARDS, J.P.	HALE, Miss R.	LAITY, Mrs M.
BURCHELL, W.	EHLER, Wm.	HALL, Rev. W.	LAITY, Mrs Myra
BURKE, R.	EVANS, Mrs B.	HANBY, J.R.	LAITY, Miss S.L.
BURTON, Miss W.	FARR, Dr. A.J.	HANRAHAN, Mrs T.	LAKEY, Miss R.



LAWSON, G.D.  
LAWSON, Hon. H.S.W.  
LEACH, Mrs H.  
LEACH, Mrs L.J.  
LECKIE, Mrs L.K.  
LEWIS, Miss D.  
LEWIS, S.L.  
LEWIS, W.  
LOFTUS, H.C.  
LONERGAN, J.P.  
LONG, I.  
LONG, J.I.  
LONG, Mrs B.L.  
MacDONALD, D.M.  
MacLAREN, A.S.  
MacLEAN, Mrs E.M.  
McARTHUR, Miss I.  
McDONALD, Miss R.  
McFARLANE, Mrs J.  
McFARLANE, J.J.  
McGLASHAN, Miss M.  
McINTYRE, J.  
McLEAN, Mrs E.M.  
McLEOD, J.J.  
McNEICE, Miss M.  
MCNEICE, Wm.  
MADDERN, J.P.  
MALE, Miss J.J.  
MALONE, J.J.  
MALONEY, Mrs J.J.  
MALONEY, S.J.  
MANIFORD, T.C.  
MASON, J.L.  
MASSEY, J.W.  
MEAD, Walter  
MEE, L.R.  
MEREDITH, Mrs I.R.  
MERLO, Miss C.  
MERLO, Miss L.  
MERLO, Mrs L.  
MEYER, A.C.  
MITCHELL, W.  
MOORE, W.  
MORAN, Mrs J.  
MORRIS, H.A.  
MOYLAN, Mrs R.  
MOYLAN, T.  
MUIR, L.E.  
MURRAY, A.G.

MURRAY, L.J.  
MUSGROVE, L.  
NEEDS, Matron B.  
NEILSEN, Mrs M.  
NEILSEN, N.  
NEILSON, G.  
NEVILL, H.  
NEWMAN, B.  
NICHOLLS, L.  
NIELSEN, Mrs M.  
O'BYRNE, C.  
O'HARA, A.  
OLIVER, Miss A.  
OLIVER, Miss E.  
OSWALD, Mrs M.  
OTTERY, Mrs A.  
OTTREY, T.J.  
PAGE, R.  
PARAY, C.  
PARK, I.  
PARKER, K.J.  
PEARCE, Mrs C.  
PEARCE, T.N.  
PEARCE, W.H.  
PENGELLY, Miss E.M.  
PENROSE, Mrs A.  
PETTITT, H.  
PETTITT, Mrs R.  
PHILLIPS, J.  
PHILLIPS, Mrs R.  
POHL, Mrs M.J.  
POLLARD, Miss M.  
POWER, Rev. Fr.  
PRITCHARD, M  
PULLAN, Miss A.  
RAY, G.  
REGLAR, J.  
REWELL, E.A.  
REWELL, Mrs F.  
REWELL, F.I.  
REWELL, Miss J.  
REWELL, R.D.  
REWELL, S.G.  
REWELL, Mrs S.G.  
REWELL, W.L.  
REYNOLDS, Miss M.  
RICE, L.  
ROBERTS, K.  
ROBERTS, R.V.

RODDA, Miss A.E.  
ROLLASON, W.T.  
ROWE, H.  
ROWE, Mrs W.  
RULE, Miss T.M.  
SAMSON, A.T.  
SCHEMEDES, Mrs M.  
SCOTT, W.A.  
SEERS, G.W.  
SEGROTT, C.B.  
SEYMOUR, W.C.  
SHAW, A.G.  
SHEARER, F.  
SHEARER, Miss M.  
SHEARER, Miss N.  
SHERIDAN, P.J.  
SHIELDS, Dr. C.  
SHIELDS, W.  
SIMMONDS, Mrs L.  
SIMMONDS, Mrs R.  
SKINNER, Miss D.  
SLINGO, H.A.  
SMITH, Mrs A.  
SMITH, L.F.  
SMITH, Mrs T.  
SMOLAK, Miss H.  
SOMER, J.  
STANCOMBE, Miss R.  
STEVENS, Miss H.J.  
STEVENS, Miss M.  
STEVENS, Miss R.  
STEVENS, Mrs B.  
STEWART, C.  
STONE, J.  
STONE, Miss H.  
STONEHAM, Hon. C.P.,  
M.L.A.  
STRACHAN, Mrs M.J.  
STRACHAN, W.  
STRUTT, S.S.  
SYMONDS, Miss J.  
TATT, H.  
TATT, Miss H.  
TATT, Mrs P.H.  
TAWTON, A.E.  
TAYLOR, A.J.  
TAYLOR, M  
TAYLOR, Miss M.J.  
TAYLOR, Mrs V.A.

TELFORD, W.G.  
THOMAS, L.  
THOMAS, L.  
THOMAS, L.  
THOMAS, Mrs M.  
TOBIN, J.  
TOBIN, Mrs L.  
TOUMEY, Fr. Rev.  
TRELOAR, A.J.  
TRELOAR, Mrs O.M.  
TRELOAR, Mr. L.G.  
TRENGOVE, W.  
TRIMBLE, G.J.  
TYRRELL, G.  
URQUHART, A.C.  
VAGG, A.E.  
WALKER, A.J.  
WALKER, D.  
WALKER, L.  
WALKER, S.J.  
WALTERS, B.  
WARE, H.M.  
WARNOCK, J.  
WEISS, L.  
WEST, A.F.  
WHITEHOUSE, Mrs F.  
WHITLOCK, F.P.  
WILLIAMS, A.G.  
WILLIAMS, Mrs A.G.  
WILLIAMS, Mrs B.  
WILLIAMS, G.R.  
WILLIAMS, Miss H  
WILSON, Miss Z.  
WILSON, W.A.  
WINDUS, Miss D.  
WOOD, A.W.  
WOODLOCK, T.  
WOODLOCK, W.M.  
WOODS, Miss A.  
WULF, Mrs L.  
WULF, P.



# Hospital Presidents 1859 - 2007

1859-1866	Robert C. MacKenzie	1923	J. Bryson
1867-1871	Fredrick E. Courtin	1924	Rev. W.T. Abbott
1872-1873	Thomas Hannay	1925	R.P. Jones
1873-1874	Rev. J.C.T. Stretch	1926	Wm. Wood
1875-1878	James Warnock	1927	T. Wearne
1879-1800	Rev. J.C.T. Stretch	1928	J. Laider
1881	James Wearne	1929	Pastor H. Long
1882	John Tobin	1930	W.B. Apperly
1883-1884	William B. Gray	1930-1931	W.L. Rewell
1885	Frederick W. Bristow	1932-1934	A.H. Robertson
1886	John Paull	1934-1935	F. West
1887	Francis Cavenagh	1936	T. Wearne
1888	James Elliott	1937	C. Stewart
1889	Edwin F. Peirce	1938	J.J. Huish
1890	James Fairley	1939	T.H. Grigg
1891	James H. Rule	1940	A. Brownbill
1892	Rev. R.W. Cooke	1941	R.A. Grigg
1893-1894	Arthur S. Robinson	1942	H.E. Parsons
1895	William B. Gray	1942-1944	G.R. Williams
1896	Walter T. Rollason	1944-1945	N.H. Neilson
1897	John R. Campbell	1946-1947	A.G. Williams
1898	John Tobin	1947-1949	Chas. Stewart
1899	Samuel Rodda	1949-1951	Chas. Collard
1900	George E. Ralph	1951	A.H.J. Boreham
1901	Roger L. Nankivell	1952	T.F. McKeogh
1902	John Somer	1953-1957	R.A. Grigg
1903	Thomas Hayes	1957-1959	A.R. Dabb
1904	John B. Hibbert	1959-1967	J.P. Edwards
1905	Robert D. Oswald	1967-1970	H.C. Loftus
1906	Alfred C Meyer	1970-1973	R.G. Allan
1907-1908	William J. Faulkner	1973-1976	N.G. Addlem
1909	John T. Couchman	1976-1977	C.D. Punton
1910	John Bowen	1977-1988	W.E. Davies
1910-1911	Robert Chisholm	1988-1993	L.K. Leckie
1912	Thomas F. Rollason	1993-1994	Rev. J. Minotti
1913	Pierce W. Bowe	1994-2000	V. Batson
1914	Wm. Wood	2000-2002	M. Taylor
1915	Henry Bryson	2002-2003	D. Bowman
1916	Samual J. Walker	2003-2005	M. Taylor
1917	John T. Couchman	2005-present	C. McCann
1918	Fredrick West		
1919	Alfred C. Meyer		
1920	A.G. Williams		
1921	W.B. Apperly		
1922	Wm. Wood		

