

MALDON HOSPITAL

2011

ANNUAL REPORT  
Meeting the challenge



MALDON HOSPITAL  
*Committed to care since 1859*

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## Our Slogan

Local health services meeting the health needs of local people.

## Our Vision:

Maldon Hospital will be a leader in small rural hospitals in Australia.

## Our Mission:

In the excellence of our staff, systems, processes and strategic alliances the Maldon community will always access appropriate health care locally.

## Our Charter & Purpose:

August 15 1859 saw the commencement of Maldon Hospital's 150 years of service to the community of Maldon and surrounding districts and it has been operating as a Public hospital every since.

Maldon Hospital is a Public hospital incorporated under the Health Services Act 1988 and has a variety of programs and services funded by the Department of Health, Department of Human Services and the Department of Health & Ageing

The management of Maldon Hospital is governed by the Board of Management which directs all the affairs of the health service, subject to the Health Services Act 1998, other relevant Acts and Regulations and the Hospital By Laws. The Board meets on a monthly basis and is supported in its decision making by the Chief Executive Officer, DON/Manager and a number of committees which present reports and recommendations for its consideration.

## Our Objectives:

**Patient / Resident Care** – The hospital will 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** – The hospital will promote, provide and assist with health education and ill health prevention for the community.

**Staffing** – Staff will be selected 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** – The hospital will 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** – The hospital will 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** –The hospital will promote best practice and encourage an environment of continuous quality improvement throughout all areas of the organisation.

# Report to the community

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The Maldon Hospital Board, Management and staff are once again proud to report a year full of achievements. It is with great pride we continue to offer acute medical, residential aged care and home based and community based health and support services to both our local community and to our broader catchment.

Maldon Hospital has continued to provide services to this community, just as it has for over 155 years. The Board and staff, as part of the strategic intent, strive to provide health services of the highest quality. Health reforms and ever increasing compliance and technological and financial pressures are daunting. However, the staff along with the support of our community still continue to provide much needed services to our patients, residents and clients. We face the same challenges as any rural health service in changing demographics, the growing burden of chronic illness, increasing costs in medical advances, health workforce shortages / demands and an ageing community whilst still remaining a relevant health service.

At Maldon Hospital we believe the foundations have been laid for the future in keeping with the historical traditions which make us a local community hospital. The objectives set in our strategic plan have generally been met, with the only exception being funding for a community nurse. We will explore this further over the next 12 months. We are vigilant and continuing to monitor the environmental factors that influence health and wellbeing of individuals within our community. These factors include political, social, economic, behavioural, demographic, genetic, environmental and access factors to name but a few.

The dedication, professionalism and commitment of all who work at the hospital and the strength of community support enable us to continue functioning in this unique position. As you read through this annual report I hope you see evidence of the great work and achievement of the last 12 months, Examples of just a few of these things include:

- Over bed light upgrades
- New air-conditioning throughout main buildings
- Over head tracking for manual handling
- Two new low-low beds
- A new defibrillator

Maldon is unlike many small rural towns in that it is still growing and the community has a need for a local service. Executive, kitchen and domestic

services are provided, under contract, from Castlemaine Health. This relationship is never taken for granted and is a responsible sharing of resources within the subregion. Maldon Hospital has again reported a small surplus prior to depreciation and has shown great fiscal control to achieve results against budget.

None of this would be achievable without the dedication and professionalism of Board members and staff under the guidance of Jan Hutchinson our Director of Nursing and the tireless commitment and efforts of our volunteers. They are all to be thanked for their services that assist in making Maldon Hospital all it is. Thanks must also go to Dr Chris Fowler and his team for his quality medical skills, his perseverance and his continuing support in providing visiting medical services to Maldon Hospital.

The Board is a group of committed volunteers that provide governance, oversight and often their hidden talent ensures that the compliance, risks and financial management of the hospital are aligned with the agency's strategic intent. As the Board President and the Chief Executive we could not achieve all we do without the support of the Board, the skills and efforts of the Director of Nursing and the local staff employed at Maldon Hospital, so please accept a heartfelt thank you.

We have lost some very good people throughout the year, but losing nurses is always difficult. Consequently, we would like to put a special acknowledgement of thanks to Patricia Kelly for her past services in the role of Nurse Unit Manager.

## **Our people**

Our staff and our community are extremely important to us at Maldon Hospital. Changes in our staff this year have been:

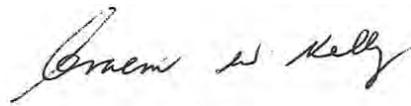
### **Departing Staff:**

Toni Wright, Deborah Comini, Beverley Hood, Patricia Kelly, Julee Rich, Sharon Telford, Sharyn Sutton, Nola Smolak, Donna Minehan, Joan Limbrick, Lidia Weil, Marie Murray, Kerry Medwin.

### **New Staff:**

Lorraine Merrett, Bronwen Machin, Jennifer Clark, Ann Zappulla, Anne-Marie Haysom, Patricia Siemering, Christine Noble, Michelle Whitzell, Lisa Toogood.

We would also like to acknowledge loss and our condolences go out to Kath Hansen with the passing of her husband.



CEO – Mr Graem Kelly PSM



Board President – Ms Cheryl Axell

In accordance with the Financial Management Act 1994, I am pleased to present the Report of Operations for Maldon Hospital for the year ending 30 June 2011.

## Acknowledgements

We wish to thank everyone who contributed to the writing and production of this year's annual report. This includes staff, members of the community, volunteers and clients.

### Printing and Design

BMP Total Image Management

### Cover and Page Layout

Jayne Prideaux, Graphic Designer

### Collation & Editing

Jan Hutchinson & Bronwen Machin

### Support Data

Regional Office, Department of Health

### Banker

Bendigo Bank

### Auditors

Auditor-General, Victoria

### External Auditor's Agents

Richmond Sinnott & Delahunty

### Internal Auditor

Accounting & Audit Solutions, Bendigo

## Board of Management

Ms Cheryl Axell appt 01.07.2008

### President

Mr Clive McCann appt 31.10.1999

### Vice President

Mr Gordon Carter appt 01.07.2009

### Treasurer

Mrs Barbara Ford appt 01.11.2003

### Board Member

Dr Helen McBurney appt 01.11.2008

### Board Member

Mr Clive McCann appt 31.10.1999

### Board Member

John Fitton appt 01.11.2004

### Board Member

Mr S Wright appt 31.10.2003

### Board member

Resigned August

## Committee Representation

### Audit Committee

Terms of Reference adopted 15th April 2010

Gordon Carter (Chair)

Cheryl Axell

Clive McCann

John Fitton

### Clinical Governance Committee

Terms of Reference adopted 15th October 2009

Barbara Ford (Chair)

Helen McBurney

Cheryl Axell

Clive McCann

# Our Services

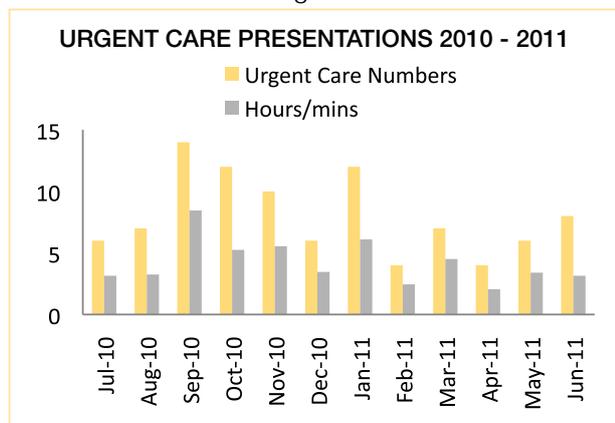
## Acute

The four bed George Ray Wing provides inpatient care and treatment for acute medical conditions, convalescence and palliative care. Occupancy varies throughout the year and although we do not meet 100% at year's end, we do provide a vital service to those members of the community who prefer to be managed by their local doctor. This allows them to remain close to family and friends whilst being treated for chronic conditions or receiving palliative care.

ACTIVITY	2010-11 Activity Achievement
WIES Public	70.93
WIES Private	7.59
TOTAL WIES (Public and Private)	78.52
WIES DVA	12.16
WIES TAC	0.25
<b>WIES TOTAL</b>	<b>90.68</b>
<b>Aged Care</b>	
Residential Aged Care	9869.00

## Non-Inpatients

Although the hospital does not have a funded Emergency Department, 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, limited by 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 urgent presentations for 2010 – 2011 was 96 with 51 hours and 10 minutes of nursing time.



The hospital, in partnership with Dorevitch Pathology, provides a registered nurse one morning a week to take blood for pathology, saving members of the

community the need to travel to other locations such as Castlemaine or Bendigo for blood tests. Nursing staff also assist the General Practitioner with follow up procedures such as wound dressings, ECGs and injections. During 2010 – 2011 there were 857 procedures taking 153 hours and 45 minutes.

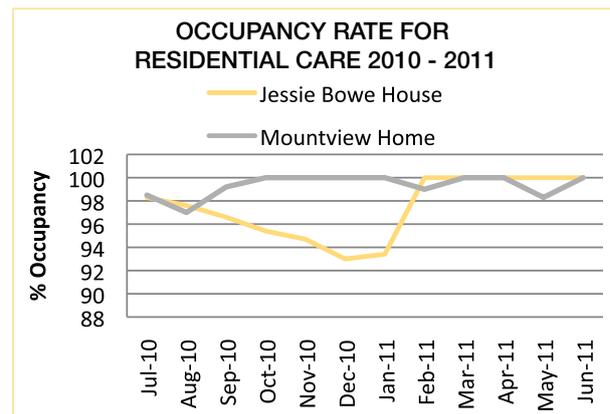
## Residential Aged Care

Maldon Hospital provides two long-term residential care units with 12 low care (hostel) places at Jessie Bowe House and 16 high care (nursing home) places at Mountview Home. Members of the wider community who are no longer able to manage independently at home receive personal and nursing care within a pleasant, homelike environment.

The pre-requisite 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, but every attempt is made to give Maldon residents priority.

Whilst 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 2010 – 2011 the average occupancy rate over both residential care units was 99%.



## Home and Community Care Activities (HACC)

HACC Planned Activity Groups (PAGs) and volunteer assisted Social Support activities are for frail aged and younger people with a disability. Most programs are of short duration, with an emphasis on physical activity and social connection and wellness. In line with departmental policy, the hospital has implemented the Active Service Model (ASM).

**Health Promotion**

Health Promotion activities include Pole Walking Groups, strength training, Tai Chi and Volunteering. We are involved in partnerships with Maldon Men's Shed, Maldon Laughter Club and Maldon Bridge Club.

**District Nursing**

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

The District Nurses have upgraded their skills in many areas such as wound care, palliative care, dementia, health promotion, oncology, legal issues, emergency and assessment.

**Regulatory Compliance**

All health providers, whether they are acute services or residential aged care, must meet minimum standards for accreditation. At Maldon Hospital we have full accreditation with Australian Council

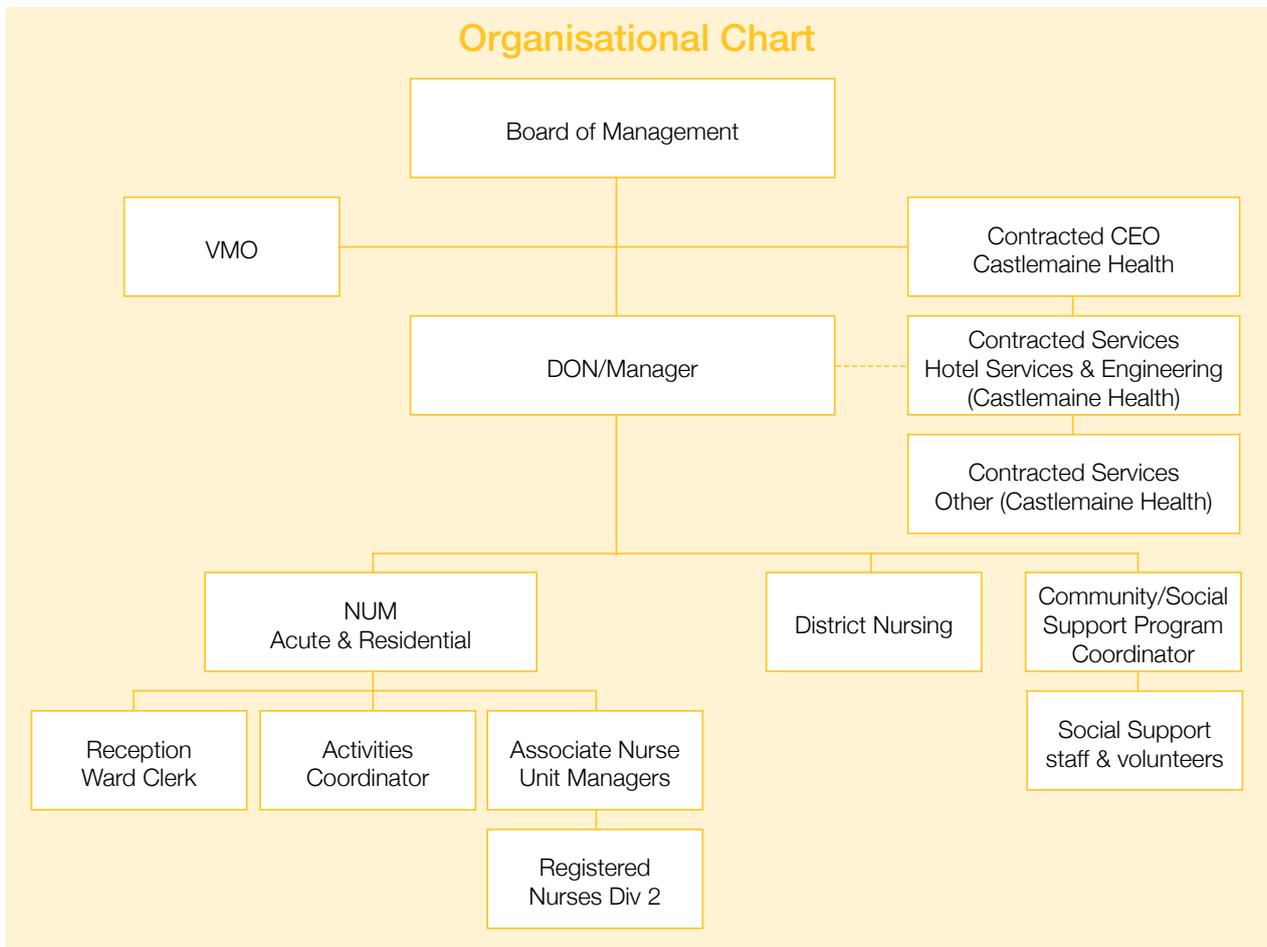
on Healthcare Standards (ACHS). Both residential facilities received a further three years accreditation with Aged Care Standards Agency - Mountview Home to 13th June 2013 and Jessie Bowe House until June 2012. The Hospital is also audited on Food Safety and Cleaning Standards. The results of the Maldon Hospital audits were as follows:

**Food Safety Audit**

- 11th June 2011– External Food Safety Audit carried out by Derek Wilson Audit Services Pty Ltd, showed compliance in all processes with recommended minor changes to paperwork

**Cleaning Audit**

- External Cleaning audit carried out 24th July 2010 by 'Infection Prevention Australia'. The overall score was 94.3% with minor recommendations in relation to dust and cobwebs
- Internal Cleaning audits are carried out by our fully accredited cleaning auditor and infection control nurse, who aims at covering a different area of the hospital and aged care units on a monthly basis with results ranging between 88% to 93%



# Disclosure Index

The annual report of Maldon Hospital 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.

Legislation	Requirement	Page Reference
<b>Ministerial Directions</b>		
<b>Report of Operations</b>		
<b>Charter and purpose</b>		
FRD 22B	Manner of establishment and the relevant Ministers	1
FRD 22B	Objectives, functions, powers and duties	1
FRD 22B	Nature and range of services provided	4/5
<b>Management and structure</b>		
FRD 22B	Organisational structure	5
<b>Financial and other information</b>		
FRD 10	Disclosure index	6
FRD 11	Disclosure of ex-gratia payments	7
<b>FRD 15B</b>	<b>Executive officer disclosures</b>	AFS
FRD 21A	Responsible person and executive officer disclosure	AFS
FRD 22B	Application and operation of Freedom of Information Act 1982	9
FRD 22B	Application and operation of the Whistleblowers Protection Act 2001	7
FRD 22B	Compliance with building and maintenance provisions of Building Act 1993	7
FRD 22B	Details of consultancies over \$100,000	7
FRD 22B	Details of consultancies under \$100,000	7
FRD 22B	Major changes or factors affecting performance	AFS
FRD 22B	Occupational health and safety	8
FRD 22B	Operational and budgetary objectives and performance against objectives	AFS
FRD 22B	Significant changes in financial position during the year	AFS
FRD 22B	Statement of availability of other information	8
FRD 22B	Statement on National Competition Policy	7
FRD 22B	Subsequent events	AFS
FRD 22B	Summary of the financial results for the year	AFS
FRD 22B	Workforce Data Disclosures including a statement on the application of employment and conduct principles	7
FRD 25	Victorian Industry Participation Policy disclosures	7
SD 4.2(j)	Sign off requirements	7
SD 3.14.3	Attestation on Data Integrity	7
SD 4.5.5	Attestation on Compliance with Australian/New Zealand Risk Management Standard	7
<b>Financial Statements</b>		
<b>Financial statements required under Part 7 of the Financial Management Act</b>		
SD 4.2(a)	Statement of changes in equity	AFS
SD 4.2(b)	Operating Statement	AFS
SD 4.2(b)	Balance Sheet	AFS
SD 4.2(b)	Cash Flow Statement	AFS
<b>Other requirements under Standing Directions 4.2</b>		
SD 4.2(a)	Compliance with Australian accounting standards and other authoritative pronouncements	AFS
SD 4.2(b)	Accountable officer's declaration	AFS
SD 4.2(c)	Compliance with Ministerial Directions	AFS
SD 4.2(d)	Rounding of amounts	AFS
<b>Legislation</b>		
Freedom of Information Act 1982		8
Whistleblowers Protection Act 2001		7
Victorian Industry Participation Policy Act 2003		7
Building Act 1993		7
Financial Management Act 1994		3

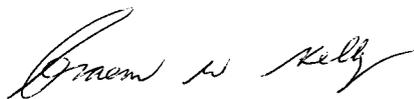
Key: AFS – Audited Financial Statements

# Mandatory Reporting

## Statutory Compliance

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

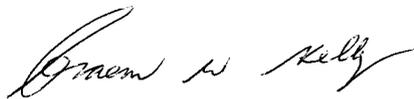
I, Graem Kelly, certify that Maldon Hospital has risk management processes in place consistent with the Australian/New Zealand Risk Management Standard and an internal control system is in place that enables the executives to understand, manage and satisfactorily control risk exposures. The audit committee 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  
15 Jul 2011

### Attestation on Data Accuracy

I, Graem Kelly, Certify that Maldon Hospital has put in place appropriate internal controls and processes to ensure that the Department of Health is provided with data that reflects actual performance. Maldon Hospital has critically reviewed these controls and process during the year.



GRAEM W KELLY, PSM  
Chief Executive Officer  
15 Jul 2011

### Ex-gratia Payments

Maldon Hospital made no ex-gratia payments for the year ending 30 June 2011.

### Whistleblowers Act 2001

The Whistle Blowers 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 Buildings Act 1993

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

### Victorian Industry Participation Policy Act 2003 (FRD 25)

During the year there were no contracts completed at Maldon Hospital which VIPP applied.

### Statement on National Competition Policy (FRD 22B)

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

### Workforce Data Disclosure

*Maldon Hospital employs 55 staff, which is 24.3 equivalent full time positions*

*92 % are female and 8% male*

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

### Consultancies

Staff Analysis as at 30 June 2011

	FULL TIME	PART TIME	CASUAL	TOTAL
Medical	-	-	1	1
Nursing	3	30	18	51
Clerical	-	2	1	3
	3	32	20	55

### Our Staff Profile as at 30 June 2011

Labour Category	JUNE Current Month FTE*		JUNE YTD FTE*	
	2011	2010	2011	2010
Nursing	23.3	21.3	23.9	21.2
Administration and Clerical	0.9	1.7	1.1	1.8
Ancillary Staff (Allied Health)	-	0.7	-	0.58
<b>Total</b>	<b>24.2</b>	<b>23.7</b>	<b>25.0</b>	<b>23.6</b>

**Note:** The 2011 figures are based on classification descriptors from State Services Authority ANZSCO, Guidelines for the Health Sector

- Consultancies in excess of \$100,000 – nil
- Consultancies costing less than \$100, 000 – Number of consultants engaged – two. Total cost of engagements \$19,292

### Workcover

No Workcover claims were lodged for this reporting period, with no days of compensation paid.

WorkCover Premiums		
Year	Premium	% of Remuneration
10/11	<b>\$51,939</b>	<b>2.461 %.</b>

# Statement of Availability of other Information

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## **Freedom of Information Applications**

Information Act 1982, which provides a legally enforceable right of access of information held by Government agencies. Castlemaine Health provides a report on these requests on behalf of Maldon Hospital to the Department of Justice.

Freedom of Information requests can be submitted to the Chief Executive Officer, Castlemaine Health, PD Box 50, Castlemaine 3450, Application forms are available on the website [www.castlemainehealth.org.au](http://www.castlemainehealth.org.au), or by phoning 5471 1555. Application charges and fees apply (\$24.40).

No requests were received under Freedom of Information in 2010/11.

## **Fees Charged for Service**

All fees and charges charged by Castlemaine Health 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. Policies and procedures are in place for the effective collection of fees owing to the service.

## **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 which applies to Board Members, officers 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 conflict of interest in accordance with Maldon Hospital Board's Code of Conduct.

## **Tax Deductible Gifts**

Maldon Hospital Health is endorsed by the Australian Taxation Office as a Deductible Gift Recipient. Gifts to Castlemaine Health 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.

## **Disability Act 2006**

Maldon Hospital has completed an Access and Inclusion Plan that incorporates requirements of the Disability Act 2006.

## **Occupational Health and Safety**

Maldon Hospital recognises it's 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.

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 Castlemaine Hospital. The committee maintains an active role in the development and review of policies and safe work procedures. As a result of their work, we have reviewed many of our policies and procedures, installed ceiling hoists to help staff lift residents, and made many minor improvements.



MALDON HOSPITAL

*Committed to care since 1859*