



South West Healthcare Annual Report 2003



Excellence in Rural Health Care



Front cover

More than 500 babies are born each year at South West Healthcare. Midwifery units at Camperdown and Warrnambool campuses provide birthing facilities, inpatient care – including specialised care for premature and distressed babies – with extended care and support through domiciliary midwifery visits after mother and baby return home from hospital.

Campuses featured on the cover are (from left): Macarthur Community Health; Lava Street Psychiatric Services; Warrnambool (Ryot Street) Campus; Camperdown Campus; Lismore Community Health.

Back cover

Warrnambool Campus is dominated by microwave transmission dishes for SWARH – the South West Alliance of Rural Health (Vic.) computing and communications network. South West Healthcare is the lead organisation of SWARH, which provides information technology and communications links to hospitals and health-related organisations throughout southwest Victoria.



South West Healthcare Annual Report 2003

Mission

South West Healthcare is dedicated to the development and delivery of a comprehensive range of health care services to enhance the quality of life for people in south west Victoria.

Values

The Service embraces the following values:

Caring

We are caring and compassionate to patients, their families and each other.

Respect

We respect the rights and dignity of individuals.

Equality

We promote equality of access and service delivery, sensitive to cultural needs.

Accountability

We are accountable through public awareness, community participation and professional responsibility.

Excellence

We continually review and analyse practices in order to strive for the best possible quality of care.

Strategy

In pursuit of consumer-focused care, we are committed to the following strategic principles:

- Strong and effective leadership and management.
- Supportive and co-operative teamwork within the health care system and the wider community.
- Highly-motivated, skilled, professional workforce.
- Diversity and innovation in service provision.
- Safe work practices and healthy environment.
- Continuous quality improvement and service development.
- Responsive to consumer needs.

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Excellence in Rural Health Care

The Year in Review

Highlights

- Record number of acute patients treated
- Exceptional results from patient satisfaction survey
- Facility-funded works completed to the value of \$2.3 million
- Completion of a \$1.4 million Education Resource Centre
- Sound financial result
- Strong financial support from local auxiliaries and volunteers
- Farewell to Chief Executive Officer, Mr Andrew Rowe

The completed financial year was another one of significant achievement for South West Healthcare, in pursuit of its mission 'Excellence in Rural Health Care.'

The expansion of existing services and the development of new services have continued in our attempt to provide a vast range of quality health services to the region.

Patient Services

Acute inpatient services have significantly increased since the formation of South West Healthcare with a record 13,858 patients being treated during the year.

Much of this increase relates to the exponential increase in the Emergency Department, which also treated a record number of patients during the reporting period.

Commitment to Quality

The organisation has a strong commitment to quality and during the year participated in an external patient satisfaction survey, in an attempt to measure the level of satisfaction that our patients receive.

The report was extremely positive in that it identified that South West Healthcare has an overall care index which is significantly higher than the average for the other fifteen hospitals in the comparative group.

More importantly, the report identified that on five key measures the organisation received perfect scores, which highlights the commitment and dedication of staff.

The only area of deficiency mentioned within the report was in relation to the physical infrastructure at both Warrnambool and Camperdown, which, in both cases, is in desperate need of replacement.

Facility Development

The organisation continues to seek government approval for major capital upgrades at both the Warrnambool and Camperdown campuses, in response to the deficiencies highlighted by our patients.

Both Warrnambool and Camperdown have completed master planning studies and unfortunately were unsuccessful in recent capital works listings, which are announced as part of the May budget.

It is hoped that the momentum associated with these projects can continue and that we will receive approval to advance to the next stage at the next available opportunity.

Nonetheless, the organisation has been extremely busy with facility funded works totalling \$2.3 million, including the completion of the magnificently-appointed Education Resource Centre at a cost of \$1.4 million. This new centre will provide a major focus for all educational activities conducted by the organisation and contains state of the art technology and equipment.

Other major developments include significant progress towards improving the Hospital Medical Officer accommodation through a new development in Redford Street and a significant upgrade to the Food Service facilities at the Camperdown campus.

Heytesbury House, the former student nurse accommodation block, was demolished during the year. Decommissioned in 1998 due to fire and safety risk concerns, the building occupied a considerable part of the north-east corner of the Warrnambool Campus; its clearance will allow future development of modern facilities.



Demolition of former student nurse accommodation Heytesbury House (left) has cleared a large section of the Warrnambool Campus site for redevelopment. Critical Care Acting Unit Manager Marcia Beard (right) checks the equipment setup of a defibrillator trolley. Purchase of semi-automatic defibrillators for the Critical Care Unit and the Emergency Department has been accompanied by a major education programme to ensure nurses are trained and competent in the correct use of the new machines.

The Department of Human Services has also provided funding towards a \$1.6 million Fire Services Upgrade to ensure the safety of our patients and staff.

Finance

The attached audited financial statements highlight that the organisation finished the year with a small total entity deficit of \$124,000. Whilst this is not as pleasing as one might hope for, it needs to be pointed out that the deficit is less than 0.2 per cent of the total budget.

The main reason for the financial result relates to increased repairs and maintenance as a result of aged infrastructure.

In addition, the absence of a second orthopaedic surgeon has resulted in a reduction in complex cases treated during the year and a subsequent reduction in revenue.

Community Support

A group of very loyal and dedicated volunteers and auxiliaries provide assistance to both patients and staff as well as being involved in fund raising to purchase much needed medical and nursing equipment. In particular the volunteer auxiliaries have become a vital part of the patient care team.

During the year, very generous donations were received from the following auxiliaries:

- Staff Auxiliary
- Woolsthorpe Auxiliary
- South West Healthcare Ladies Auxiliary
- Camperdown Hospital Auxiliary
- Camperdown Fete Committee
- Camperdown Trolley Auxiliary
- Cycle Relay Committee
- Lismore Ladies Auxiliary

This dedicated band of supporters, together with individual donations and contributions from philanthropic trusts, have contributed more than \$200,000 to South West Healthcare, which is very much appreciated.

Board of Management

The Board of Management is the organisation's major policy making body and assumes overall responsibility for the direction and operation of all services.

Over the years, the Board has been very stable in its membership, although two notable Board members have now retired after serving significant terms.

Mr Stan Carroll has made an outstanding contribution since he was appointed in 1977 and has held most Board of Management executive appointments, including President from 1987 to 1989, and was an active member of a number of sub-committees.



The well-equipped Physiotherapy Department gymnasium is used extensively for exercise therapy in various treatment areas, including cardiac rehabilitation, stroke treatment, diabetes management and injury recovery.

This report year is the last at South West Healthcare for Chief Executive Officer Mr Andrew Rowe (right), who has overseen a large number of changes to the organisation, including its initial formation from the amalgamation of Warrnambool & District Base Hospital and Corangamite Regional Hospital Services.

In recognition of Mr Carroll's contribution, it was agreed that the new library facility will be officially known as the 'Stan Carroll Library.'

Another long serving Board member, Mr John Clarke, resigned after a 20-year contribution to the governance of the organisation and his contribution will also be sadly missed.

These positions have been replaced by Mrs Margaret Brock, Mrs Felicity Melican and Mrs Diane Daffy, who have already shown a high level of enthusiasm for their new roles.

Conclusion

This has been another year of significant achievement for South West Healthcare which continues to provide an outstanding level of health services to our community.

The organisation is fortunate to have a high level of support from the Department of Human Services at both central and regional office level. Many of the Departmental officers have made significant contributions and assisted in so many ways to the organisation achieving its strategic objectives.



I would also like to record a special note of appreciation to our Chief Executive of the past ten years, Mr Andrew Rowe who resigned on 27th June, 2003.

Andrew has been appointed as the Chief Executive Officer of Ballarat Health Services and has utilised his vision, energy and enthusiasm in leading the organisation during a period of dramatic change.

We obviously wish Andrew the very best wishes for his future career and thank him enormously for his contribution.

Andrew's strong leadership has been supported by a very capable executive and numerous dedicated and committed staff who are intent on providing the very best possible healthcare to this vast region of south west Victoria.

David Jellie
President
Board of Management

Office Bearers

Board of Management

The twelve-member Board of Management is appointed by the Governor-in-Council, from nominations received by the Hospital. Board members each serve three-year terms, and may be eligible for re-nomination at the conclusion of each term.

The functions of the Board of Management are to oversee the operation of the Hospital and ensure that the services provided comply with the requirements of the Health Services Act 1988, and with the Objects of the Hospital.

Some Board appointments were made prior to the formation of South West Healthcare by the amalgamation of the Warrnambool & District Base Hospital and Corangamite Regional Hospital Services, and these members continue their terms in the current Board.

Executive Staff

The Hospital's five Divisional Directors report to the Chief Executive Officer and collectively form the Executive Committee. Responsible for the day-to-day operation of specific aspects of the service, each Director manages departmental heads and staff within their defined division.



Barbara Piesse LL.B.

Lecturer in Law.

Appointed to W&DBH Board September 1983.

Chairperson: Multidisciplinary Ethics committee.

Member: Board Executive, Quality Care, By-Laws, Human Resources and Financial Resources/Audit committees.



Mr J. Clark A.Dip. Public Admin. (R.M.I.T.).

Computing Consultant.

Appointed to W&DBH Board September 1983.

Resigned October 2002.



President:

Mr D.R. Jellie B.A., LL.B.

Solicitor.

Appointed to W&DBH Board May 1996.

Chairperson: By-Laws, Human Resources, Board Executive, Medical Appointments, Quality Care and Ex Officio on all committees.



Dr K.D. Nunn L.D.S., B.D.Sc.

Dentist.

Appointed to W&DBH Board September 1982.

Member: Financial Resources/Audit, Human Resources, Medical Appointments Advisory, Pharmaceutical Advisory, Quality Care, Project Control Group (W'bool) and Physical Resources committees.



Senior Vice-President:

Snr. Sgt. I. Armstrong A.P.M.

Police Senior Sergeant

Appointed to W&DBH Board October, 1997.

Chairperson: Physical Resources

Member: Financial Resources/Audit, Project Control Group (W'bool), By-Laws, Quality Care, Board Executive and Human Resources committees.



Mr S. Carroll LLB

Solicitor.

Appointed to W&DBH Board July 1977.

Resigned October 2002.



Junior Vice-President:

Mrs S. Muldoon BA(Soc. Sc.), Cert. Soc. Geront., ACM.

District Manager,
Vision Australia Foundation

Appointed to SWH Board October, 2000.

Member: Financial Resources/Audit, Quality Care, Ethics, Board Executive and Physical Resources committees.



Dr A. Brown MB, BS, Dip. RACOG, FRACGP

Medical Practitioner.

Appointed to SWH Board October, 2001.

Member: Financial Resources/Audit, Project Control Group (Camperdown) committees.



Treasurer:

Mr J.E. Wilson F.R.M.I.T., Dip.Arch., A.R.A.I.A.

Architect.

Appointed to W&DBH Board January 1982.

Chairperson: Financial Resources/Audit, Project Control Group (W'bool) committees.

Member: Board Executive and Physical Resources committees.



Mr M. Fry B.Pharm.

Pharmacist.

Appointed to SWH Board October, 2001.

Chairperson: Project Control Group (Camperdown).

Member: Financial Resources/Audit committee.



Mr R. Zerbe Bachelor of Agricultural Science, Master of Bus. Admin.
Retail Manager.

Appointed to SWH Board October 2000.
Chairperson: Pharmaceutical Advisory committee.

Member: Financial Resources/Audit, Physical Resources, Project Control Group (W'bool) and Human Resources committees.



Ms F. Melican B. Bus., Grad. Dip. Ed. (Secondary).
Chartered Accountant.

Appointed to SWH Board November 2002.
Member: Physical Resources committee.



Mrs D. Daffy Dip. Chiropody, Dip. Nursing (RN Div 2)
Registered Nurse.

Appointed to SWH Board November 2002.
Member: Quality Care and Project Control Group (Camperdown) committees.



Mrs M. Brock B.A., B.Law(Honours)
Lecturer in Law/Consultant.

Appointed to SWH Board February 2003.
Member: Human Resources committee.



Chief Executive Officer

Mr A.R. Rowe M.H.A. (U.N.S.W.), B.H.A. (U.N.S.W.),
A.F.C.H.S.E., C.H.E.

Reports directly to the Board of Management and is responsible for the overall management of the Hospital. Other major responsibilities include strategic planning, development of facilities, financial management and industrial relations.



Director of Nursing

Mrs S. Morrison R.N., M.B.A.(USQ), M.H.A. (U.N.S.W.),
B.N., Dip. Nursing, Cert. of Computer Business Applications,
F.R.C.N.A., A.F.C.H.S.E., C.H.E.

Responsible for the professional leadership and management of the Nursing Service. The primary focus of the role is to ensure the provision of high quality patient care within a safe environment.



Director of Corporate Services

Mr C. Scott B.H.S.(Mgt.), MBus, A.F.C.H.S.E.,
A.I.M.M., C.H.E.

Responsible for the management of the Camperdown, Lismore and Macarthur campuses. Additional duties include responsibility for a number of administrative departments and functions at the Warrnambool campus as well as deputising for the Chief Executive Officer.



Director of Medical Services

Dr P. O'Brien M.B., B.S., Dip. Obst. R.A.C.O.G.,
M.H.A., A.F.C.H.S.E., C.H.E., F.R.A.C.M.A., F.A.C.R.R.M.

Responsibility for the professional leadership and management of the medical and allied health services. There is a major emphasis on continuous quality improvement, interdisciplinary team work and on clinical risk management.



Director of Finance

Mr I. Barton A.S.A., C.P.A., Dip. Bus. (Deakin),
B.H.A. (U.N.S.W.), A.F.C.H.S.E., C.H.E.

Responsible for the financial management, information and communication systems of the Hospital, overseeing the production of accurate and timely reports and financial advice to assist decision-making processes.



Director of Psychiatric Services

Mr K. Burnett B.A.(Deakin), B.S.W.(Melb),
M.H.A.(U.N.S.W.), A.A.M.C., A.A.S.W.

Responsible for the operation of the Hospital's Psychiatric Services Division across south-western Victoria, including those psychiatric services located in Warrnambool, Camperdown, Portland and Hamilton.

Commercial Appointments

Auditors: Coffey Hunt & Co.

Bankers: Australian & New Zealand Banking Group Ltd.

Where appropriate, declarations of pecuniary interest have been lodged by members of the Board of Management and senior management staff for the year under review.

Establishing a Community Health Centre in Warrnambool

A long-awaited Community Health Service for Warrnambool is being established after a period of consultation between South West Healthcare, health and community service agencies and the Barwon South West Office of the Department of Human Services.

To be located at 279 Koroit Street, 'South West Community Health Service' will be reliable, team oriented and community focused, with all service providers in Warrnambool being invited to participate in its development, to ensure comprehensive and well co-ordinated services.

An advisory group has been established to guide the development of the Service, with representation from South West Healthcare, service providers, local government, the Department of Human Services and the PCP-South West.

In the first phase of development, the focus will be on providing a 'one stop shop' for information and referral to a broad range of community based services, service coordination, health promotion and education, and community development and advocacy.

Direct service provision will be an immediate future priority and will be determined in consultation with the community, general practitioners and health services.

The service adds to existing South West Healthcare Community Health Services in Macarthur, Camperdown and Lismore, and extensive coordination and idea-sharing is expected between these centres.

Strong partnerships with General Practitioners will be vital, and the Otway Division of General Practice has been involved from the outset. General Practitioners have critical roles as gatekeepers to hospital services, providers of care to people with chronic illness, a referral point for care after hospital and for links with other health professionals.

The South West Community Health Service will complement the role of the General Practitioner by providing a place for health service information, direct care services and for health promotion to assist the early detection or management of people with chronic illnesses such as diabetes, cardiovascular disease or asthma.

An increased focus on community health is necessary to support and improve the social, emotional and physical health of the community across all ages.

A strength exercise class at Macarthur Community Health, part of the centre's programs for osteoporosis prevention and general fitness. Development of similar community health improvement and health promotion programs at Warrnambool will be a primary aim of the new community health centre.

Important areas are the special needs of the ageing population, the need to support people with chronic illness, and to reduce the number of people with preventable chronic diseases.

The Community Health Service will target population groups with poorest health status or at greatest risk. Target priorities will be identified from community consultation, as well as through existing health research in the local population.

One research source is the Burden of Disease Estimates for Local Government Areas of Victoria (2001), which measures mortality (deaths) and morbidity (illness) for each local government area, to enable a better understanding of the health status of communities and to provide comparisons between areas.

According to this research, life expectancy at birth for men and women in the Warrnambool, Corangamite and Moyne local government areas is lower than the Victorian average.

Fifty-four per cent of male deaths in Corangamite and Moyne were caused by five major causes: ischaemic heart disease, stroke, lung cancer, colon cancer and chronic obstructive pulmonary disease. In Warrnambool, these five causes were responsible for 56 per cent of deaths.

Prostate cancer was responsible for five per cent of male deaths in males in Warrnambool and four per cent of deaths in Corangamite and Moyne.

For females in Corangamite and Moyne, the five leading causes of death were identical to those of males, accounting for 52 per cent of deaths.

In Warrnambool, ischaemic heart disease, stroke, colon cancer, breast cancer and chronic obstructive pulmonary disease accounted for 59 per cent of deaths, with peripheral vascular disease and lung cancer each accounting for three per cent of deaths.

The link between effective and co-ordinated community health, education and health promotion services has been established for a number of the major causes of death and disability in the region.

The South West Community Health Service will increase the availability and access to health education and health promotion services that can prevent or assist in the community-based management of illness, thereby improving health outcomes and reducing the current levels of premature preventable illness in the community.

There will be a focus on risk factors for ill health, and the potential health gains that can be made. For example, tobacco use is the most significant cause both of premature death and long-term disability for males within the region.

High blood pressure, physical inactivity and high cholesterol are also significant causes of death, with obesity an important long-term morbidity factor.

Understanding these risk factors will form an important part of developing an effective South West Community Health Service, to improve the health and well being of the local community.



Future Directions

South West Healthcare is currently awaiting Government approval to advance the Master Planning process to the schematic design stage.

An Investment Evaluation Report for the project was submitted to the Economic Review Committee in November 2002, but failed to receive endorsement when the May 2003 State Budget was announced.

The Board of Management are obviously keen to have the project reconsidered for approval and remain confident that this long overdue project will receive design list status in due course.

However, the completion of the Masterplan has enabled the organisation to move forward on a number of facility funded projects which do not form part of the acute ward redevelopment project. As a result, significant planning effort has been dedicated towards the following projects:

Emergency Department Extension

The Emergency Department was commissioned in 1998 and at that stage treated approximately 17,000 patients per annum.

Since the facility has been operational, annual attendances have increased to approximately 21,000 patients per annum.

Much of this growth could not have been predicted at the service planning stage of this project, as most Hospital Emergency Departments have also experienced exponential growth during this period.

The end result is that the existing Department, although relatively new, is insufficient in space to handle the number of major trauma cases that now present and also to provide a dedicated area for infectious disease patients and chemical, biological or radiation spill incidents.

In response to this situation, the organisation is currently investigating the possibility of extending the entire frontage of the existing department to provide sufficient space for the volume of patients currently being treated.

This project is currently at feasibility study stage and further investigation of the costs of the project will be investigated prior to proceeding.

Camperdown Campus Operating Theatres

The operating theatre suite at the Camperdown Campus is extremely dysfunctional and also is having difficulty coping with the increased number of surgical cases being treated at the Hospital.

In response to this, architects have been engaged to provide schematic drawings to address the numerous concerns associated with aged infrastructure.

It is hoped that further progress can be made to bring the operating theatre complex up to modern treatment standards.



The Camperdown Campus operating suite, built in 1934, requires urgent redevelopment to provide modern surgical facilities for the range of procedures now being requested.

New Supply Department

The existing Supply Department for South West Healthcare is currently located in antiquated facilities in the basement of the main block building. The department has grown significantly in size over the years but falls a long way short of modern warehousing standards.

In addition, a new Australian standard for the storage of sterile products AS 4187 is providing impetus for this project to proceed.

Some early planning work has already been undertaken and there is universal support to address this problem although the Masterplan is being reviewed to ensure that the new Supply Department is constructed in an area that fits the zoning requirements of the organisation.

Community Health Service Development

As highlighted elsewhere in this report, South West Healthcare is keen to expand its range of primary care services and as a result is currently redeveloping premises located at 279 Koroit Street to deliver a range of community health services.

It is expected that this concentration of primary care services will lead to further expansion in the future and is being supported by the recruitment of a dedicated Manager of Community Health.

The push for a Community Health Centre in Warrnambool has a long history, and hopefully this initial thrust will eventually lead to a more substantial centralised community health presence in the future.

Fire Risk Management Strategy

The Fire Service audit report has identified approximately \$1.2 million worth of Priority 2 and Priority 3 Fire Risk upgrade works. These works are within the non-bed based services and as such are the responsibility of South West Healthcare.

Ironically, if South West Healthcare was to proceed with the new acute ward redevelopment, a significant proportion of the works would not have to be undertaken, as it is planned to convert the existing ward block into office accommodation.

Research and Education

South West Healthcare maintains extensive professional development and education programs for staff, and each year conducts a range of clinical and community-based research programs, often in conjunction with other hospitals and universities.

Research projects are overseen by the Multi-Disciplinary Ethics Committee. Projects approved during the year included studies on farm injuries in males, health assessment of drug and alcohol patients, issues faced by the carers of patients with mental illness, effectiveness of video supervision of trainee professionals, surveillance of invasive streptococcal A infection, and evaluation of cardiac arrest outcomes in patients transported by ambulance.

Increased emphasis has been given to establishing quality educational programs using videoconferencing facilities, providing clinicians with excellent educational opportunities without the need to undertake time-consuming travel to Melbourne and other sites.

The effectiveness of videoconferencing education is being researched in collaboration with SWARH and Deakin University. Regional hospitals designate topics to be delivered using this technology, with the University evaluating the effectiveness and value of the education conducted via this medium.

Strong links continue with the Greater Green Triangle University Department of Rural Health, based at Deakin University. Collaborative works in food access and cultural awareness have been undertaken, and an innovative joint academic pharmacist appointment has commenced.

A major commitment to ensure all staff have attended an orientation /induction session is underway. Monthly Orientation sessions have been held, with good attendance. Feedback from these days is proving positive for both staff and the organization.

As part of a comprehensive patient safety program, competency training of all nurses in the use of various infusion pumps has been introduced throughout the wards.

South West Healthcare has been actively involved with Department of Human Service in reviewing current Guidelines for Graduate Nurse Programs. Participation in a Nursing Expo in June 2003 resulted in more than 100 postgraduate information packages being handed out to student and newly-graduated nurses.

Camperdown, Lismore and Warrnambool campuses continue to provide clinical placement for undergraduate nurses, with students from Ballarat University, Deakin University-Warrnambool, La Trobe University and Warrnambool College of TAFE.



Students from Macarthur Primary School discuss displays and presentations for the South West Healthcare High Five Nutrition Project with student dietitian Tess Griernsmith (left) and chief dietitian Susan Baudinette. The project aimed to increase parent and student nutritional awareness, and result in higher intake of fruit and vegetables by schoolchildren.

All Camperdown, Lismore and Manifold Place staff have had an opportunity to attend a quarterly organisational orientation program.

Camperdown Theatre, Accident and Emergency and Acute Ward staff attended a Trauma Study Day, Preceptor Education, Chemotherapy training, and an Advanced Life Support program for obstetrics.

Study days and inservices for Merindah Lodge Aged Care Facility staff related to dementia, continence management, palliative care and wound care management.

A six-week analysis, staff education and training program relating to aged care accreditation for Merindah Lodge saw the review and implementation of all aspects of documentation in the audit process.

Both Camperdown and Lismore District Nursing Service staff have attended regular education sessions in adopting the a service coordination tool for the admission of their community clients, while staff at the David Newman Day Activity Centre visited Adelaide for the Diversional Therapy Annual Convention.

Following an extensive education program, the Catering Department at Camperdown Campus has a trained food safety supervisor, with Environmental Services and Nursing staff being trained in low-chemical cleaning regimes and internal cleaning audits.

Staff education at Macarthur Community Health has been particularly directed towards topics immediately relevant to the local community, including osteoporosis, arthritis, depression, diabetic retinopathy, menopause and body image.

Infection control updates, food safety sessions and No Lift training sessions were also conducted for staff.

Primary Care Services at Lismore Campus and Camperdown's Manifold Place have jointly conducted a number of community education programs, including asthma awareness, core health promotion, and Core of Life, which examines emerging attitudes to pregnancy, birth, breast feeding and parenting.

Eleven workshops for the innovative Emergency Services Protocol Training program brought together 144 participants from Victoria Police, Psychiatric Services, Emergency Department, clinical co-ordinators and rural ambulance Victoria, with participants being very positive about the training, especially appreciating the opportunity to discuss issues with other services.

The training aims to improve patient management and the coordination between the various agencies involved in high-risk psychiatric presentations to the Emergency Department.

Psychiatric Services staff participated in a total of 2741.5 hours of training. As well as training and education for the ongoing Optimal Treatment Project, much of the training emphasised core competency in mental health work, with 17 competency standards being developed during the year and a suite of outcome measures being implemented service-wide.

Quality Management

South West Healthcare is committed to continuous quality improvement and working towards best practice, with a quality management program in place for many years. The strength of the program has ensured the continuation of accreditation with the Australian Council on Healthcare Standards (ACHS).

Accreditation

Accreditation is an outward sign to the community we serve that we not only demonstrate safe care but also have achieved a high standard of care.

This is achieved with a continuing accreditation status for the organisation as a whole from ACHS for another four years.

Our aged care facility also underwent accreditation survey with the Commonwealth and achieved ongoing accreditation from the Aged Care Standards Agency.

Risk Management

As a result of changes to the way in which organisations will be accredited with ACHS, there has been significant work undertaken by Executive and senior managers to develop an organisation-wide risk management policy. This has been adopted and endorsed by the Board of Management and Executive.

The policy will ensure a structured approach to managing all risks across South West Healthcare and will also ensure a high standard of patient focused service.

Clinical Risk Management

Clinical Risk Management is an integral part of the quality management program. During the review period, reporting has improved as a result of an increased focus upon reporting clinical incidents, analysing and monitoring those incidents and making improvements to ensure safer patient care.

The Quality Manager was sponsored by the Victorian Quality Council to attend a three-day workshop in Brisbane aimed at teaching a wide range of health care professionals more about incident analysis.

Application of this knowledge benefits South West Healthcare directly, in the form of specific clinical risk management education held every month for staff, improved reporting to relevant committees, and assisting staff to make improvements in many different clinical programs.

Complaints Management

All patients and visitors are encouraged to give South West Healthcare feedback about its services, and compliments far outweigh the number of complaints received.

All complaints received are monitored using the Riskman database, and reports are made to the Quality Care Committee each month.

Improvements are made as a result of the complaints received; a complaints liaison officer has been appointed, and wards and departments monitor any complaints received regarding their functions.

Infection Control

South West Healthcare is the lead agency for the management of the sub-regional Infection Control Strategic Plan.

Under the auspices of this organisation, there is a regional Infection Control Consultant appointed to assist other health care facilities achieve infection control standards.

Considerable monitoring and evaluation of infection rates takes place at South West Healthcare, ensuring safer patient care in all services.

Staff education plays a key role in ensuring safer practice and the Infection Control Consultant has been instrumental in developing key performance indicators to monitor how well staff manage infection control practices.

Consumer Participation

Consumers actively participate in a range of activities, which strengthens quality patient services. From focus groups that review and improve clinical pathways, to the Community Advisory Committees across the organisation, feedback received from consumers at all levels is highly valued.

Consumers have also assisted with the review of the internal patient satisfaction questionnaire and with the development of the Quality of Care Report for 2003.

Publications

South West Healthcare's quality initiative project 'Enhancing Admission through the Emergency Department' was published in the 2002 ACHS Quality Initiatives as an entry in the fifth annual ACHS quality improvement awards.

This project was funded by the Department of Human Services and involved consumers, the Emergency Department and general practitioners in Warrnambool.

Quality of Care Report 2003

The annual Quality of Care Report for 2003, which incorporates quality management actions and outcomes, informs the community about key performance areas of South West Healthcare and is released in conjunction with this annual report.

Feedback regarding the Quality of Care Report is encouraged, to ensure that the organisation meets the information needs of the community.



South West Healthcare Infection Control Consultant Michelle Martin (left), General Services Manager Danny Miller and Regional Infection Control Consultant Carolynne Leddy discuss the results of a ward cleaning audit, part of a comprehensive infection control monitoring program for patient areas.

A Continuing History of Rural Health Care

Four years after its inception as a regional healthcare entity, South West Healthcare continues the traditions of care established by its founding hospitals.

Assisted by leading-edge networking technology between the various campuses and offices, and, by the willingness of staff to adapt to rapid change, South West Healthcare's first year saw the rapid development of a cohesive organisation.

Extensive plans for redevelopment of the Warrnambool Campus, and the complete replacement of the Camperdown campus, progressed during 2000-2001, while a major policy initiative in 2001 saw the establishment of a smoke-free policy in all campuses; progressive implementation of smoking restrictions during 2002 and 2003 eventuated in almost complete bans on smoking in the grounds of all campuses, complementing existing bans on smoking inside buildings.

While South West Healthcare is young, the history of its constituent organisations reaches back into the mid-19th Century.

Warrnambool

In 1854, the Villiers and Heytesbury Hospital and Benevolent Society commenced operation, moving to the present Ryot Street site in 1861 to provide both hospital care and benevolent accommodation.

Benevolent functions gradually reduced, and by 1925 the organisation had changed completely to a medical and surgical hospital, with maternity services being added in 1928.

Becoming the Warrnambool & District Base Hospital in the 1940's, continued service improvements were matched with several building programs, the 1960's bringing a four-storey ward block, new operating theatres, emergency department and intensive care unit.

Two nursing home annexes - the Corio and Alveston Houses - were operated for many years, before consolidating to one nursing home in the 1980's, before management of aged care passed to a private healthcare group in 1998.

From the 1970's, the Hospital developed as a sub-regional referral centre, amalgamating with Glenelg Psychiatric Services in 1992 to provide wide-ranging community-based psychiatric care, a dramatic change from the institutional model of care previously undertaken at Warrnambool's Brierly Mental Hospital. Major building works in the 1990's provided new allied health, medical records and emergency facilities, plus modern operating theatres.

The amalgamation of the Base Hospital and Corangamite Regional Hospital Services formed South West Healthcare in 1999, with Macarthur joining the new organisation in 2000.

Camperdown

In 1907, the sons of district pioneer John Manifold provided the two-storey brick residence 'Monamythga' for use as a hospital. Renovated with funds originally destined for Queen Victoria's Diamond Jubilee celebrations, the hospital opened in 1909 as 'The Camperdown District Hospital (Manifold Queen Victoria Jubilee Gift)'. The original house is still in use as the hospital's administration block.

The hospital's eight beds expanded to a total of 40 beds by 1931 with considerable building additions, and included intermediate, childrens' and midwifery accommodation. Camperdown became Victoria's first community hospital.

Further building developments included a new operating theatre in 1934, ward extensions in 1938 and 1957 for a total of 48 beds, and the addition of a 23-bed nursing home, Merindah Lodge, in 1976.

Amalgamation in 1995 with Lismore & District Hospital and the Lismore & Derrinallum Nursing Home Society formed Corangamite Regional Hospital Services, with the Lismore hostel service transferring to Camperdown in 1997 to form the 36-bed Merindah Lodge/Tooliorook Aged Care Facility.

After discussions with a number of nearby organisations during 1998, the service amalgamated with Warrnambool & District Base Hospital in 1999 to form South West Healthcare.

Lismore

Initially a six-ward private maternity hospital built in 1911, Lismore was purchased by the community in 1925, to become a private medical, surgical and midwifery hospital until its conversion to a Bush Nursing Hospital in 1930.

Building additions were undertaken in 1939 and 1946, and by 1958 Lismore was a 14-bed hospital, with its midwifery services being in particular demand. The service was incorporated as the Lismore District Hospital in 1966.

District nursing services were established in 1975, and a meals-on-wheels service began in 1979. Acute services gradually declined, surgical procedures ending in 1985, coincidentally the last year that babies were delivered at the hospital.

Aged care became a priority, with funding in 1989 for six nursing home beds, and a four-bed hostel opening in 1992.

After a long battle to preserve services despite declining funding, Lismore closed its acute and nursing home beds in December 1994, amalgamating with the Camperdown Hospital in January 1995.

A substantial role change saw Lismore converted to a community health centre, with a strong focus on providing primary care services.



John Ingles, builder and owner of the original Lismore Hospital, which opened in 1911 as a private midwifery service for the Lismore and district community.

The hostel increased to eight beds, but decreasing finances forced the transfer of hostel functions to Camperdown in 1997.

In South West Healthcare, Lismore continues its extensive community health role to the district.

Macarthur

Opening in 1960 as an eight-bed local hospital offering medical, surgical and midwifery services, Macarthur Memorial Hospital continued until 1974, when a change of doctors resulted in the loss of surgical services.

However, the community care role of the hospital increased, with a meals-on-wheels service being introduced in 1977, and a day centre being completed in 1983. District nursing services commenced in 1986, with a sunroom being constructed for patient use during the same year.

Four acute beds were converted to nursing home beds in the late 1980's, with a replacement day centre being built in 1990.

Following the release in 1993 of a report on the role of small rural hospitals, the Board of management voluntarily converted the hospital to a community health service, forming the Macarthur and District Community Outreach Service in January 1994.

Renovations in 1996 enlarged the waiting area for the visiting doctor's surgery, altered the entrance area and enlarged the sunroom to provide improved meeting space for community activities.

South West Healthcare began providing management services to Macarthur in 1999, and a service plan was undertaken to review the future direction of the outreach service.

The plan recommended amalgamation with a larger organisation, and from July 2000 Macarthur became an integral part of South West Healthcare as Macarthur Community Health.

Life Governors

Mrs Jan Aitken
Mr A.L. Anderson
Mrs G.I. Anderson
Mrs Isabel Anderson
Mrs J.F. Anderson
Mrs J. Askew

Mrs V.G. Balmer
Mrs H. Barker
Mrs M. Baulch
Mr W.R. Beetham
Mrs B.P. Bell
Mrs S. Bell
Mr R.G. Bennett
Mrs Iris M. Bickley
Miss Helen Bishop
Mrs Gwen Boyd
Mr C.G. Boyle
Mr N. Bradley
Dr J. Brookes
Mrs I.V. Bruce
Mr T. Buckley
Mrs L. Burleigh
Mrs Jean Byron

Mr J. Caple
Mr S. Carroll
Mrs V. Carroll
Mrs P. Chadwick
Mrs F.A.J. Chislett
Mrs Helen Chislett
Mr D. Chittick
Mrs Diane Clanchy
Mr Alistair C. Cole
Mrs J. Conlin
Mrs F. Coupe
Mr R.A. Crothers
Mrs M. Cuzens

Mr J.P. Daffy
Ms Joan Davidson
Mrs D. Dawson
Mrs R.C. Dawson
Mrs G. Dickson
Miss Judy Donnelly
Miss H. Douglas

Mrs Veronica Earls
Mrs C.E. Fraser
Mrs J. Foster
Mrs M.M. Gibbs
Mrs N. Gilbert
Mrs Shirley Goldstraw
Mrs Margaret Good
Mrs Joan Goodacre
Mrs E. Goodwin
Mrs L. Gordon
Mrs P. Grace
Mrs M. Guyett

Mrs Sheila Habel
Miss M. Haberfield
Mr C. Hollowell
Mrs Joy Hartley
Mrs M. Hayes
Mrs Mavis Heazlewood
Dr Les Hemingway
Mrs Joan Henderson
Mr O.V. Henry
Mrs P. Hill
Mrs Ivy Hollingsworth
Mrs A. Holmes
Mr J. Holmes
Mrs A. Hooton
Mrs J. Horwood
Mr L. Howard
Mrs Sharon Huf
Mrs Sylvia Huf
Mrs Mary Hutchings
Mrs Winnie Hynes

Mr D.A. Jenkins
Mrs Doris Johnson
Mrs M. Johnson
Mr Rex Johnson
Mrs I. Jones

Mrs Helen Laidlaw
Mrs B. Layther
Sen. A.W.R. Lewis
Mr S.A. Lindsay

Mr F.G. Lodge
Mrs H. Lodge
Mrs Wendy Ludeman
Mrs A.G. Lumsden
Mrs P. Luxton

Mrs R. Macdonald
Mrs M. MacFarlane
Mrs L. Maher
Mrs Norma Marwood
Mrs M. Mathison
Mrs D. McConnell
Mrs Arthur McCosh
Mrs L. McCosh
Mrs R. McCrabb
Mr John McGrath
Mr Peter McGregor
Mr Ernie McKenna
Mrs Mary McKenna
Mrs Judy McKenzie
Mrs Nola McKenzie
Mr Trevor McKenzie
Mrs H. McLaren
Mrs Shirley McLean
Mrs W. McWhinney
Dr John Menzies
Miss M.I. Mitchell
Mrs C. Moore
Mrs J.P. Moore
Mr R. Moore
Mr J.P. Moran

Nestle Sports &
Social Club
Mrs A. Northeast
Mr E.R. Northeast
Mr J.B. Norton
Dr K. Nunn

Mrs Barbara O'Brien
Mrs Ian Officer
Mrs M. Officer
Mrs J. O'Keefe

Vale

Mr Charles Hallowell

Appointed as a Life Governor in 1954 for his significant contribution to the Hospital and community, Mr Hallowell worked at the Warrnambool Standard for 50 years and was Managing Director of the newspaper from 1942 to 1974.

Mrs Thelma Surridge

Mrs Surridge undertook part of her nurse training at Warrnambool & District Base Hospital, and was a highly-respected member of staff, her postgraduate appointments including that of sister-in-charge of the maternity ward. A Foundation member of the Past Trainees Association, Mrs Surridge was a committee member of the Association for 50 years.

Mr W. Pallister
Mr K. Parker
Mrs T.J. Parker
Mrs G.R. Parsons
Mrs M.E. Paterson
Mrs P. Peart
Mr W. Phillpot
Barbara Piesse
Mrs G. Pike
Mrs L. Price

Mrs Gloria Rafferty
Dr J.D. Reid
Mrs M. Richardson
Mr D.M. Ritchie
Mrs Phillip Ross
Mr Peter Roysland
Mr J.C. Rule
Mrs Gladys Russell
Mr Leo Ryan

Mrs Sue Sambell
Mr John Samon
Mrs Eileen Savery
Mr A.E. Scott
Mr L. Sedgley
Mrs A.B. Smart
Mrs Ann Smith
Mr Ron Sproles
Miss J. Stewart
Mrs B. Surkitt
Mrs N. Swinton
Mrs Stuart Swinton
Mr D.N. Symons

Mrs D. Taylor
Miss K. Taylor
Mrs Robbie Taylor
Miss Y. Teale
Mrs A. Thorpe

Mr J.B. Walker
Mrs H. Wallace
Mrs R.J. Wallace
Mr A.C. Whiffen
Mrs J. Whitchurch
Mrs J.C. Whitehead
Mrs June Williams
Mrs R. Williams
Mrs Zelda Williams
Mrs G.J. Wilson
Mr J.E. Wilson
Mrs N.T. Wines
Mr W.J. Wines
Mrs Edna Wynd
Mrs G. Young

2001-02

Appointments:

Mr Barry Johnson
Mrs Sheryl Nicolson
Mrs Helen Nunn
Dr Ian Pettigrew



Merindah Lodge resident Mrs Lynette Hull (right) has written a book on her experiences while living in the Camperdown nursing home.

Staff, 2002-2003

Chief Executive Officer

Mr A. Rowe* M.H.A. (U.N.S.W.), B.H.A. (U.N.S.W.),
A.F.C.H.S.E., C.H.E.

Medical Services

Visiting Medical Officers

– Warrnambool Campus

Chairperson, Medical Staff Association
(Warrnambool Campus)

Dr G. Pallas B. Med., F.R.A.C.P. (Paediatrics)

Anaesthetists

Dr P. Arnold M.B., B.S., F.A.N.Z.C.A.
Dr K. Cronin M.B., B.S., F.A.N.Z.C.A.
Dr A. Dawson M.B., B.S., F.A.N.Z.C.A.
Dr G. Kilminster M.B., B.S., F.A.N.Z.C.A.
Dr M. Koo M.B., B.S., F.A.N.Z.C.A.
Dr K. Prest M.B., B.S., F.A.N.Z.C.A.

Visiting Dental Officers

Dr E. Carlsson D.D.S.(Stockholm)
Dr C. Cugadasan B.Sc.(Hons.), B.D.Sc.
Dr T. Davies B.D.Sc.
Dr D. Geryga B.D.Sc.
Dr M. Johns B.D.S.
Dr M. Palam B.D.Sc., B.Sc.
Dr R.J. Sanderson B.D.S.
Dr S.W. Wilde B.D.S.(Liverpool)

Drug & Alcohol Physician

Dr R.J. Brough M.B., B.S., D.(Obst.) R.C.O.G.,
A.P.S.A.D. Cert., F.A.C.R.R.M., F.A.Ch.A.M.R.A.C.P.
Dr D. Richards M.B., Ch.B., F.A.Ch.A.M.R.A.C.P.

General Practitioners

Dr A. Baldam M.B., B.S., B.Sc., Dip.Av.Med.,
A.F.O.M.(R.C.P.), D.R.C.O.G.
Dr I.T. Barratt B.Sc., M.B., B.S., D.R.C.O.G.
Dr W.J. Bateman M.B., B.S., D.R.C.O.G.,
F.R.A.C.G.P.
Dr A. Chow M.B., B.S., F.R.A.C.G.P.
Dr J. Duffy M.B., B.S.
Dr A. Dunbar M.B., Ch.B., M.R.C.P.(UK), F.R.C.P.
(Edin), Dip. Travel Med.
Dr M. Dunkley M.B., B.S., D.R.A.N.Z.C.O.G.,
F.R.A.C.G.P.
Dr E.C. Fairbank M.B., B.S., D.P.H.C.,
F.R.A.C.G.P., F.A.Ch.P.M.

Dr M. Grave B.Sc., M.B., B.S., F.R.A.C.G.P., Cert.
Man. Med.(R.A.C.G.P.), Grad. Dip. Fam.
Med.(Monash), Cert. Man. Med.(Paris), Dip. Phys.
Med.(Sydney).

Dr K. Gunn M.B., B.S., D.(Obst.) R.A.C.O.G.
Dr P. Hall M.B., B.S., D.(Obst.) R.A.C.O.G.,
D.A.(London), F.A.C.R.R.M.
Dr G.G. Irvine M.B., B.S., D.(Obst.) R.A.C.O.G.
Dr B.F. Kay M.B., B.S., D.(Obst.) R.A.C.O.G.,
F.A.C.R.R.M., F.R.A.C.G.P.
Dr S. King M.B., B.S., F.R.A.C.G.P.
Dr C. Loy M.B., B.S., B.Med.Sc, D.R.A.N.Z.C.O.G.,
F.R.A.C.G.P., M.A.I.C.D.
Dr J. Manderson B.Sc.(Hons), PhD., M.B., B.S.,
F.R.A.C.G.P.
Dr C. Mooney M.B., Ch.B., M.R.C.S., L.R.C.P.,
D.R.C.O.G.
Dr J. Oleson M.B., B.S.
Dr P. Oliver M.B., B.S., F.A.C.R.R.M.
Dr B. Oppermann M.B., B.S., M.Sc.(Anat.),
D.(Obst.) R.A.C.O.G., F.A.C.R.R.M.
Dr M.R. Page M.B., B.S., D.(Obst.) R.A.C.O.G.,
F.A.C.R.R.M.
Dr J.D. Philpot M.B., B.S.
Dr M.G. Quinn M.B., B.S.
Dr F. Reid M.B., Ch.B., D.A.M.F.A.R.C.S.
Dr J.M. Rounsevell M.B., B.S.
Dr N. Ryan M.B., B.S., D.A., F.R.A.C.G.P.
Dr T. Slattery M.B., B.S.
Dr S.W. Smith M.B., B.S., D.R.A.C.O.G.,
F.A.C.R.R.M.
Dr P. Viney M.B., Ch.B., D.R.A.N.Z.C.O.G.
Dr A. Waldron M.B., B.S., Dip.(Obst.) R.A.C.O.G.,
F.R.A.C.G.P.
Dr C.W. Walters B. Med. Sc., M.B., B.S.

General Surgeons

Mr S. Fischer M.B., B.S., F.R.A.C.S.
Mr P. Gan M.B., B.S., F.R.A.C.S.
Mr B. Mooney M.B., Ch.B., B.A.O.(Hons.),
B.Sc.(Anat.)(Hons.), M.Ch., F.R.C.S.I., F.A.C.R.R.M.,
F.R.A.C.S.
Dr B. Penington* M.B., B.S., F.R.A.C.S.(Gen.
Surg.), F.R.A.C.S.(Paed. Surg.).

Visiting Neurologist

Dr T. O'Brien M.B., B.S., F.R.A.C.P.

Obstetricians & Gynaecologists

Dr C. Beaton M.B., Ch.B.(Edin), F.R.A.N.Z.C.O.G.,
F.R.C.O.G.
Dr K. Braniff M.B., B.S., F.R.A.N.Z.C.O.G.
Dr I.G. Pettigrew* M.B., B.S., F.R.A.N.Z.C.O.G.,
F.R.C.O.G.
Dr E. Uren M.B., B.S., F.R.A.N.Z.C.O.G.

Ophthalmologists

Mr G. Hunter M.B., B.S., F.R.C.S., F.R.A.C.S.,
F.R.A.C.O.
Mr V. Lee* M.B., B.S., M.Med., F.R.A.N.Z.C.O.,
F.R.A.C.S.

Orthopaedic Surgeon

Mr N.A. Sundaram M.B., B.S., L.R.C.P., M.R.C.S.,
F.R.A.C.S. M.Ch.(Orth.), F.R.C.S.(Edin. & London),
F.R.C.S.(Orth.)

Visiting Oto-Rhino-Laryngologist

Dr A. Cass M.B., B.S., F.R.A.C.S.
Mr L. Ryan M.B., B.S., F.R.C.S., F.R.A.C.S., D.L.O.

Paediatricians

Dr G. Pallas B.Med., F.R.A.C.P.(Paediatrics)
Dr N. Thies M.B., B.S., D.C.H.(London),
F.R.A.C.P.(Paediatrics)

Paediatric Surgeon

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

Pathologist

Dr K. Vaska* M.B., B.S., F.R.C.P.A., F.I.A.C., M.D.

Physicians

Dr N. Bayley M.B., B.S., F.R.A.C.P.
Dr C. Charnley M.B., B.S., F.R.A.C.P.
Dr J. Hounsell B.Sc., M.B., B.S., F.R.A.C.P.,
F.R.C.P.A.
Dr C. Lewis M.B., B.S., F.R.A.C.P.
Dr B. Morphet M.B., B.S., F.R.A.C.P.

Psychiatrists

Dr M.G. Ivers M.B., B.S., F.R.A.N.Z.C.P.
Dr G. Ridley M.B., Ch.B., M.R.C.Psych.,
F.R.A.N.Z.C.P.

Radiologists

Dr D. Boldt M.B., Ch.B.(Otago), F.R.A.C.R.
Dr M. Bennett M.B., B.S., F.R.A.C.R.
Dr P. Taurou M.B., B.S., F.R.A.C.R.
Dr P.C. Thorfinnson M.D., B.A., D.M.R.,
F.Diag.Rad.
Dr P. Walker M.B., Ch.B.(Otago), C.R.C.P., F.R.C.P.,
D.D.U.
Dr R. White M.B., B.S., F.R.A.C.R.
Dr S. Woodward M.B., B.S., Dip.Med.Rad.,
M.R.A.C.R., Dip.Diag.US., Grad.Dip. Epid. Biostat.

Visiting Renal Physician

Dr H. Gock M.B., B.S., F.R.A.C.P.

Urologist

Mr B. Mooney M.B., Ch.B., B.A.O.(Hons.),
B.Sc.(Anat.)(Hons.), M.Ch., F.R.C.S.I., F.A.C.R.R.M.,
F.R.A.C.S.

Visiting Medical Officers

– Camperdown Campus

Chairperson, Medical Staff Association
(Camperdown Campus)

Dr E.G. Lyon M.B., Ch.B.

Visiting Dental Officer

Dr A.H. Wigell B.Sc.(Hon), L.D.S.(Vic).

General Practitioners

Dr A.K. Baird M.A., M.B., Ch.B., D.R.C.O.G.(U.K.),
F.R.A.C.G.P., D.A.(Anaes).
Dr A.L. Brown M.B., B.S., Dip. Obst. R.A.C.O.G.,
Adv. Cert. Sports. Med., F.R.A.C.G.P.
Dr J.M. Brown M.B., B.S., Dip. Obst. R.A.C.O.G.,
F.R.A.C.G.P.
Dr M.D. Brownstein M.B.B.S., D.R.A.N.Z.C.O.G.,
F.R.A.C.G.P.
Dr T.R.C. Fitzpatrick M.B., B.S.
Dr A. Griffiths M.B., B.S., B.Sc.(Hon), D.R.C.O.G.,
Dip. Obst. R.A.C.O.G.
Dr E.G. Lyon M.B., Ch.B.
Dr S.J. Menzies M.B., B.S., M. Med., F.R.A.C.G.P.,
D.R.A.N.Z.C.O.G., F.A.C.R.R.M.
Dr S. Richardson M.B., B.S.
Dr R.A. Stewart M.B., B.S., D.R.A.N.Z.C.O.G.,
F.A.C.R.R.M.
Dr J. van Leerdam M.B., Ch.B., M.R.C.G.P.,
M.A.C.N.M., D.A., D.R.C.O.G.
Dr A. Wong M.B., B.S., F.R.A.C.G.P., D.R.A.C.O.G.,
Dip. Rur. Med.

General Surgeons

Mr S. Eaton M.B., B.S., F.R.A.C.S.
Mr D.K.L. McRae M.B., B.S., F.R.A.C.S.

Obstetricians & Gynaecologists

Dr C. Beaton M.B., Ch.B.(Edin), F.R.A.N.Z.C.O.G.,
F.R.C.O.G.
Dr K. Braniff M.B., B.S., F.R.A.N.Z.C.O.G.
Dr I.G. Pettigrew* M.B., B.S., F.R.A.N.Z.C.O.G.,
F.R.C.O.G.
Dr E. Uren M.B., B.S., F.R.A.N.Z.C.O.G.

Orthopaedic Surgeon

Mr J.W. Skelley M.B., Ch.B.(Otago), F.R.A.C.S.,
F.A.Orth.A.

Paediatrician

Dr N. Thies M.B., B.S., D.C.H.(London),
F.R.A.C.P.(Paediatrics).

Staff by Gender and Employment Status

		June 2002	June 2003
Male:	Full Time	154	162
	Part Time	32	39
	Casual	13	15
	(subtotal)	199	216
Female:	Full Time	222	214
	Part Time	441	468
	Casual	49	77
	(subtotal)	712	759
Total	911	975	

Staff Numbers (Effective Full Time)

	June 2002			June 2003		
	Operating EFT	Non Op. EFT	Total EFT	Operating EFT	Non Op. EFT	Total EFT
Medical	28.80	—	28.80	30.04	—	30.04
Nursing	331.82	—	331.82	341.15	—	341.15
Medical/Support	103.34	—	103.34	115.07	0.12	115.19
Hotel/Allied	110.39	17.23	127.62	108.68	19.12	127.80
Admin/Clerical	104.06	2.00	106.06	104.81	0.95	105.76
Total	678.41	19.23	697.64	699.75	20.20	719.95

* resigned during report year

Physicians

Dr N. Bayley M.B., B.S., F.R.A.C.P.
 Dr C. Charnley M.B., B.S., F.R.A.C.P.
 Dr J. Hounsell B.Sc., M.B., B.S., F.R.A.C.P.,
 F.R.C.P.A.
 Dr C. Lewis M.B., B.S., F.R.A.C.P.

Urologist

Mr L. Dodds M.B., B.S., F.R.A.C.S.(Urol).

Medical Departmental Officers

Director of Medical Services

Dr P. O'Brien M.B., B.S., Dip. Obst. R.A.C.O.G.,
 M.H.A., A.F.C.H.S.E., C.H.E., F.R.A.C.M.A.,
 F.A.C.R.R.M.

Deputy Director of Medical Services

/Director of Emergency Services

Dr D.S. Pedler* M.B., B.S., F.R.A.C.G.P., D.(Obst.)
 R.C.O.G., M.P.H., F.A.C.R.R.M.

Director of Anaesthetics

Dr K. Prest M.B., B.S., F.A.N.Z.C.A.

Chief Dental Officer

Dr R.W. Robertson L.D.S., B.D.Sc.

Director of Critical Care Unit

Dr N. Bayley M.B., B.S., F.R.A.C.P.

Director of Palliative Care

Dr E. Fairbank M.B., B.S., D.P.H.C., F.R.A.C.G.P.,
 F.A.Ch.P.M.

Director of Surgical Services

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

Hospital In The Home Medical Officer

Dr E. Fairbank M.B., B.S., D.P.H.C., F.R.A.C.G.P.,
 F.A.Ch.P.M.

Regional Supervisor, Graduate Medical Education

Dr B. Oppermann M.B., B.S., M.Sc.(Anat.),
 D.(Obst.) R.A.C.O.G.

Allied Health

Chief Audiologist

Ms. J. Quarterman B.Sc., M.Aud.St.,
 M.Aud.S.A.(CCP)
 Ms L. Robertson* B.Sc.(Hons.), M.Clin.Aud.,
 M. Aud.S.A.(CCP).

Chief Biomedical Engineer

Mr D. Stewart B.Eng.(Elec.), I.B.M.E.

Chief Dietitian

Mrs S. Baudinette B.Sc.(Nutrition), Grad.
 Dip.(Dietetics)

Chief Occupational Therapist

Ms J. Gibbs B.App.Sc.(O.T.), M.O.T.

Chief Physiotherapist

Mr B. Hoekstra Dip. Physiotherapy (Neth.),
 M.A.P.A., M. Phys.

Chief Podiatrist

Ms K. Harris B.Pod.(Hons)
 Ms. C. Woodyard* B.Pod.

Chief Speech Pathologist

Miss K. Brown B.App.Sc.(Speech Pathology)

Co-Ordinator, Centre Against

Sexual Assault

Mrs H. Wilson B. Commerce, Dip. Soc. Studies

Director of Pharmacy

Mr B. Dillon B.Pharm., Grad. Dip. Hosp. Pharm.

Librarian

Mrs J.G. Dalton T.P.T.C., A.L.A.A.

Manager, Aboriginal Health Programs

Mr J. Mifsud

Manager, Health Information Services

Ms M. Atkinson Ass.Dip.(M.R.A.), R.M.R.A.

Manager, Counselling & Support Services

Mr S. Storer B.A., B.S.W.

Primary Care Partnerships Executive Officer

Ms J. Nichols M.H.A., M.B.A., M.Sc., Grad. Cert.
 Diet. Ed., Postgrad. Dip. Diet & Nutrition

Nursing Services

Director of Nursing

Mrs S. Morrison R.N., M.B.A.(USQ), M.H.A (UNSW),
 B.N., Dip. Nursing, Cert. of Computer Business
 Applications, F.R.C.N.A., A.F.C.H.S.E., C.H.E.

Operational Manager - Nursing

Mrs K. McKinnon R.N., M.A.(Health Studies)
 (La Trobe), R.M., Cert. Post Basic Theatre,
 Cert. Infant Welfare, B.Ed., Dip Technical Teaching,
 Cert. Technical Teaching, Cert. Microcomputing
 Applications, M.R.C.N.A.

Quality Manager

Mrs K. Harrison R.N., M.H.S.M.(CSU), O.N., B.N.,
 Grad Cert.(Advanced Nursing), M.R.C.N.A.,
 A.F.C.H.S.E., C.H.E., M.A.A.Q.H.C.

Education Manager

Mrs J. Smart R.N., Bachelor of Management:
 Employment Relations (USA), M.R.C.N.A.

Perioperative Services Manager

Mr A. Kelly R.N., Grad. Dip. Health & Information
 Systems, Cert. Perioperative Nursing

Unit Managers

Ward 1

Mrs E. Karlinski R.N., R.M., Adv.Dip.Mgt

Ward 2

Mrs J. Rowe R.N., Cert. in Workplace Leadership

Ward 3

Mrs S. Marsh R.N., Cert. of Computer Business
 Applications, M.R.C.N.A.

Ward 4

Ms D. Dunstan R.N., R.M., Crit. Care Cert. (Alfred),
 M.H.A. (UNSW) (Leave of Absence from 27/1/03)
 Ms M. Beard, R.N., B.N., Grad.Dip.Critical Care
 (RMIT) (Acting from 27/1/03)

Ward 5

Ms J. Hallinan R.N.

Ward 6

Mr J. Quinlivan R.N., R.P.N., B.N., Dip. Fine Arts

Ward 7

Mr P. Logan R.N., R.M., Grad. Dip. Public Health

Ward 8/Withdrawal & Support Service

Mrs K. McCarthy R.N., Cert. Rehabilitation (12
 months leave to DNS)
 Mrs D. Burrows R.N. (Acting from 15/10/02)

District Nursing Service

Mrs L. Brooks R.N., R.M., M.N.S., B.N., Grad. Dip.
 Adv. Nurs. Ed. (Leave of Absence from 14/10/02)
 Mrs K. McCarthy R.N., Cert. Rehabilitation
 (Acting from 15/10/02)

Emergency Department

Ms K. Sloan R.N., R.M., Coronary Care Cert,
 B.Nurs,
 Grad. Dip. Health Serv. Management, M.R.C.N.A.

Operating Theatre

Ms R. Piper R.N., R.M., Cert. Perioperative Nursing

Psychiatric Services

Director of Psychiatric Services

Mr K. Burnett B.A.(Deakin), B.S.W.(Melb),
 M.H.A.(U.N.S.W.), A.A.M.C., A.A.S.W.

Director of Clinical Services

Dr D. Chinnasamy M.B., B.S., M.D.(India),
 D.P.M., M.R.A.C.M.A.

Quality Coordinator

Ms I. Purcell B.S.W.

Staff Development

Ms J. Punch R.P.N., Cert IV Workplace Training &
 Assessment (TAFE)

Workcover: Hours Lost and Claims

Hours lost to Injury or Illness	2001/2002	2002/2003
Acute Services:		
Nursing	2,608.00	2,817.00
Support Services/Administration	204.00	376.00
Medical/Allied Health	1,976.00	1,976.00
Psychiatric Services:		
Nursing	390.00	400.00
Linen Service:	3,952.00	3,192.00
Camperdown Campus:		
Nursing	—	344.00
Medical/Allied Health	1,786.00	1,976.00
Support Services/Administration	—	129.00
Lismore Campus:	—	—
Macarthur Campus	—	—
Total	10,916.00	11,210.00
Number of New Claims:	2001/2002	2002/2003
Acute Services:		
Nursing	1	6
Support Services/Administration	—	—
Psychiatric Services:	1	2
Linen Service:	—	—
Camperdown Campus:		
Nursing	—	1
Support Services/Administration	—	1
Lismore Campus:	—	—
Macarthur Campus:	—	—
Total	2	10

Management Structure

Board of Management Principal Committees

Chief Executive Officer

Human Resources Manager
Chief Information Officer
Quality Manager

Director of Corporate Services
Manager, Patient Care Services, Camperdown
Manager, Support Services, Camperdown
Manager, Macarthur Community Health
Engineer, Physical Development
Facilities & Supply Manager
General Services Manager
Food Services Manager

Director of Medical Services
Director of Emergency Services
Visiting Medical Staff
Medical Department Directors
Drug & Alcohol Physicians
Hospital Medical Officers
Dental Surgeons
Allied Health Department Heads
Executive Officer – Primary Care Partnership

Director of Nursing Services
Operational Manager
Education Manager
Clinical Co-ordinators
Unit Managers

Director of Finance
Deputy Director of Finance
IT Services Manager

Director of Psychiatric Services
Director of Clinical Services
Manager – Aged Care
Manager – Child & Adolescent Services
Manager – Warrnambool Psychiatric Services
Manager – Rural Psychiatric Services

Camperdown/Lismore campuses

Manager, Patient Care Services
Mr M. Oates R.N., R.M., G.N.C.(QECC), B.N.,
Grad.Dip.Hlth.Admin.

Manager, Support Services
Mrs J. Creely B.S. Business (Acctg)(USA)

Unit Manager, Acute Services
Mrs M. Gay R.N., R.M., B.N.

Primary Care Co-ordinators
Mrs J. Hirth R.N., R.M., Women's Health Nurse,
DGP Test Provider (Lismore)
Ms R. Leske R.N. (Lismore)
Mrs C. Shannon R.N., R.M., B.Sc., Grad.Dip.Ed.,
Grad.Dip.Mid. (Camperdown)

Chefs-in-Charge
Mr S. McCann Trade Cert.(Catering)
Ms E. Gould Trade Cert.(Catering)

Maintenance Officer
Mr S. Pickles Trade Cert.

Day Centre Supervisor
Mrs J. White R.N., Cert. Diversional Therapy

Chief Radiographer
Ms A. Gibson M.I.R.

Health & Safety Co-ordinator
Mrs B. Rounds R.N.(Div. 2), Cert. 1, 2 & 3
O.H.&S.

Quality/Infection Control Co-ordinator
Mrs B. Vagg R.N., R.M., B.N.

District Nursing Service
Mrs K. Bell R.N. R.M. (Camperdown)
Mrs J. Zedaitis R.N. (Lismore)

Unit Manager, Aged Care Facility
Mrs D. Doyle R.N., Cert. Mgt.

Operating Theatre/
Emergency Department Co-ordinator
Mrs N. Delaney R.N., Grad. Dip. Peri-Operative
Nursing, Cert. 3 Sterilisation/Technician

Administrative Services

Human Resources Manager
Mr G. Mitchell B.Ec. (Monash), B.H.A.(U.N.S.W.)

Occupational Health & Safety Manager
Mrs C. Rose Adv.Cert.Mgt (TAFE), Cert.3 OH&S
(Mayfield)

Chief Information Officer, SWARH
Mr G. Druitt Bsc.(Sydney), B.Ec(Deakin)

Clinical Development Co-ordinator, SWARH
Mr M. Johnstone R.N., B.Bus.(Accounting)

Finance

Director of Finance
Mr I. Barton A.S.A., C.P.A., Dip.Bus.(Deakin),
B.H.A.(UNSW), A.F.C.H.S.E., C.H.E.

Deputy Director of Finance
Mr D. McLaren B.Bus.(Deakin), A.S.A.

Assistant Director of Finance
Mrs L. Moloney B.Bus.(Deakin), A.S.A., C.P.A.

I.T. Services Manager
Mr G. Hall B.Bus.(Computing)(Deakin)

Managers, Psychiatric Services

Community Residential Care Unit, Ward 9
Acute Psychiatric Inpatient Unit,
Warrnambool Psychiatric Services
Mr M. Struth R.P.N., PostGrad. Dip. Hlth. Sci.
(HSM), M.H.S.(C.S.U.)

Aged Persons Mental Health
Mr R. Porter B.A., R.P.N.

Child & Adolescent Mental Health Services
Ms S. Meulblok* B.A.(Hons) Psychology
Ms R. Knapp B.Sc., B.A.(Hons) Psychology, M.
Psych. (Ed. & Dev.)

Rural Community Psychiatric Services
Mrs T. Irish R.N., R.M., R.P.N.

Primary Mental Health
Mr N. Place B.A., B.S.W.

Psychiatric Medical Services

Psychiatrists
Dr J. Herur M.B., B.S., M.D.(INDIA)
Dr M. Kumar* M.B., B.S., M.D.(INDIA), D.P.M.,
D.N.B., F.R.A.N.Z.C.P.
Dr S. Baruah M.B., B.S., M.D.(India), D.P.M.
Dr T. Praveen M.B., B.S., M.D.(INDIA)
Dr W. Atkin M.B., B.S., F.R.A.N.Z.C.P.
Dr C. Seetha M.B., B.S., M.D.(India), D.R.M.,
D.N.B.

Corporate Services

Director of Corporate Services
Mr C. Scott B.H.S.(Mgt), M.Bus., A.F.C.H.S.E.,
A.I.M.M., C.H.E.

Engineer, Physical Development
Mr S. Kendrick B.Eng.(Hon.), Cert.Mech./Prod'n.Eng.

Food Services Manager
Mr D. Church Cert.Catering, F.I.H.C., A.F.C.I.A.

Facilities & Supply Manager
Mr W. Hall Cert. Hospital Supply Management
(Mayfield)

General Services Manager
Mr D. Miller Adv.Cert.Management (TAFE).

Macarthur Community Health

Manager, Macarthur Community Health
Mrs C. Loria, R.N., R.M., Cert. CCU, Cert.
Oncology, Grad. Dip. Community Health

Healthcare Services

Acute Care	Infection Control Consultant
Aged Care	Information Technology Services
Anaesthetics	Intensive Care/Critical Care
Audiology	Koorie Health Programs
Biomedical Engineering	Library
Blood Bank	Medical Education
Breast Cancer Support	Medical Imaging
Cancer Support Team	Medical Management
Cardiac Rehabilitation Nursing	Midwifery
Centre Against Sexual Assault	Neonatal Special Care
Clinical Risk Management	Nursing Education
Community Rehabilitation Centre	Nursing Management
Continance Advisory Service	Nutrition
Coronary Care	Obstetrics & Gynaecology
Counselling & Support Service	Occupational Health & Safety
Day Surgery	Occupational Therapy
Dentistry	Oncology
Dermatology	Operating Theatre & Recovery Ward
Diabetes Education & Resources	Ophthalmology
- Sub-Agent Diabetes Aust. (Vic.)	Orthodontics
Displan	Orthopaedics
District Nursing Services	Outpatient Clinics
Domiciliary Midwifery	Paediatrics / Adolescent Care
Drug & Alcohol Withdrawal & Support:	Paediatric Surgery
- Inpatient	Palliative Care
- Outpatient	Pathology
- Outreach	Payroll Services
Ear, Nose & Throat Surgery	Pharmacy
Emergency Services	Physiotherapy
Endoscopy	Podiatry
Environmental Services	Post Acute Care
Exercise Stress Testing	Pre-admission Clinic
Facilities & Supply Department	Primary Care Partnerships
Family Planning & Education	Prosthetics
Finance	Psychiatric Services:
Food Services	- Aged Persons
Fracture Clinic	- Child & Adolescent
Gastroenterology	- Community-Based Services
General Administration	- Extended Care
General Medicine	- Inpatient
General Surgery	- Residential Rehabilitation
Geriatric Medicine	Rehabilitation
Haemodialysis	South West Linen
Health Education	Speech Pathology
Health Information Services	Stomal Therapy Nursing
Health Promotion	Telemetry
Home Care Program (paediatrics)	Urology
Hospital in the Home	Volunteer Service
Human Resources	Young Women's Pregnancy & Parenting Service

Inpatient Sources

Most inpatients to the acute care campuses at Warrnambool and Camperdown live in the city/town area serviced by each campus, or in the surrounding district; however, in nearly seven per cent of cases, inpatients are from other areas in Victoria, interstate, or overseas.

This reflects the organisation's wide catchment area in southwest Victoria, serving over 110,000 residents, plus a significant tourist population throughout the year.

Warrnambool	50.69%
Camperdown	8.92%
Koroit	5.17%
Cobden	2.70%
Port Fairy	2.59%
Terang	2.23%
Dennington	2.19%
Portland	2.18%
Mortlake	1.86%
Allansford	1.74%
Hamilton	1.40%
Timboon	1.02%
Kirkstall	0.93%
Bushfield	0.63%
Derrinallum	0.63%
Woolsthorpe	0.58%
Panmure	0.57%
Lismore	0.47%
Mailors Flat	0.45%
Macarthur	0.42%
Mepunga	0.40%
Naringal	0.39%
Grassmere	0.38%
Wangoom	0.36%
Purnim	0.35%
Nullawarre	0.32%
Heywood	0.30%
Hawkesdale	0.28%
Colac	0.28%
Caramut	0.28%
Dunkeld	0.25%
Woodford	0.23%
Illowa	0.21%
Cudgee	0.20%
Winslow	0.19%
Penshurst	0.19%
Coleraine	0.18%
Yambuk	0.17%
Simpson	0.16%
Glenormiston	0.16%
Killarney	0.16%
Darlington	0.16%
Noorat	0.15%
Other Areas — Victoria, other states, international	6.87%

Freedom of Information Requests

Requests for documents in the possession of South West Healthcare are directed to the Freedom of Information Manager, and all requests are processed in accordance with the Freedom of Information Act 1982. A fee is levied for this service, based on the time involved in retrieving and copying the requested documents.

The Hospitals Part II publication, which details publication requirements of the Freedom of Information Act, is available from the Health Information Services Department, for perusal by the general public during weekday office hours.

A total of 148 requests under the Freedom of Information Act were processed during the 2002/2003 financial year.

South West Healthcare's nominated officers under the Freedom of Information Act:

Principal Officer:

Mr A.R. Rowe, Chief Executive Officer.

Medical Principal Officer:

Dr P. O'Brien, Director of Medical Services.

Freedom of Information Manager:

Miss M. Roache, Health Information Administrator.

Statistical Information

Acute Hospital – Warrnambool Campus

	2002/03	2001/02	2000/01	1999/00	1998/99
Accommodation – Registered Beds	155	155	155	155	155
Inpatient Separations					
Public – No Charge	12,378	11,592	11,516	11,784	11,782
Private/Third Party	1,006	1,068	936	871	1,041
Nursing Home Type	5	2	3	1	
Total Inpatient Separations	13,389	12,662	12,455	12,656	12,823
Inpatient Separations by Patient Type					
Emergency	4,765	4,403	4,124	4,291	4,688
Elective	7,463	7,211	7,129	7,145	7,090
Obstetric	1,161	1,048	1,202	1,220	1,045
Total Patients Treated	13,389	12,662	12,455	12,656	12,823
Total Patient Days in Hospital					
Public – No Charge	41,148	39,499	40,998	43,307	42,368
Private/Third Party	5,358	5,181	4,441	4,446	4,706
Nursing Home Type	78	26	224	92	
Total Patient Bed Days	46,584	44,706	45,663	47,845	47,074
Daily Average of Occupied Beds	122.4	116.8	116.4	119.3	121.9
% Occupancy on Registered beds	79.0	75.4	75.1	76.9	78.6
% Occupancy on Staffed beds	87.7	83.9	83.6	90.3	91.1
Average Length of Stay (days)	3.4	3.5	3.6	3.7	3.6
Births (Number of deliveries)	515	468	512	532	564
Theatre Operations	4,470	4,880	4,698	4,523	4,932
Endoscopy Patients	1,435	1,600	1,302	1,354	1,435
Total Operations	5,905	6,480	6,000	5,877	6,367
Day Case Surgery in Theatre	2,669	2,421	2,100	2,139	2,031
Non Inpatient Services					
Number of Attendances:					
Emergency Department	20,476	19,562	19,147	19,866	18,538
Medical/Surgical Clinics	7,151	9,033	9,619	9,247	7,385
Pathology	4,252	3,069	2,122	2,088	3,164
Medical Imaging	4,449	3,846	3,569	3,895	3,204
Pharmacy	10,167	11,093	16,228	17,885	17,331
Allied Health	17,193	15,973	15,140	17,353	16,329
Dental Unit	2,211	3,914	4,908	4,249	3,909
Other Programs	6,883	6,057	4,491	3,365	2,640
Total Non Inpatient Attendances	72,782	72,547	75,224	77,948	72,500
Community Rehabilitation Centre (Places)	2,297	2,489	2,095	1,799	1,762
District Nursing – Care Hours	14,292	13,333	12,893	12,556	11,660
Meals – Number of 'Fresh Deliver' Meals	34,468	32,041	25,665	28,632	23,178
– Total Number of Meals Served	264,257	252,236	244,013	248,958	254,429
Group Sessions – Community Rehab. Centre	352	475	455	419	314

Statistical Information

Camperdown/Lismore Campuses

	2002/03	2001/02	2000/01	1999/00	1998/99
Accommodation — Registered Beds	67	67	67	67	67
Inpatient Separations by Patient Type					
Emergency	615	626	485	573	563
Elective	1,164	1,175	1,145	1,057	1,109
Obstetrics	132	132	134	155	112
Total Inpatient Separations	1,911	1,933	1,764	1,785	1,784
Public Separations (Acute)	1,521	1,534	1,373	1,396	1,382
Total WIES	1,376	1,487	1,282	1,308	1,262
Average Inlier Equivalent DRG Weight	0.7257	0.7703	0.7296	0.7526	0.7126
Acute Bed Days	6,308	6,753	5,962	5,260	5,187
Aged Care Bed Days	12,889	12,918	12,935	12,785	12,776
Total Beddays (Acute plus Aged Care)	19,197	19,671	18,897	18,045	17,963
% Occupancy on Available Beds – Acute	79.34	85.84	75.81	66.66	63.06
% Occupancy on Available Beds – Aged Care	98.09	98.31	98.42	97.15	97.28
Average Length of Stay – Acute	3.27	3.49	3.39	3.15	3.04
Births	52	60	61	77	55
Operations performed	649	640	622	631	699
Day Case Surgery in Theatre	500	485	455	538	478
Non Inpatient Services					
Emergency Department	2,647	2,759	2,612	2,408	1,984
Outpatient Attendances	2,225	2,520	1,739	2,308	2,138
District Nursing Visits	5,913	8,278	7,754	5,773	5,641
Community Health – Contacts	3,147	2,763	3,062		
Community Health – Groups	465				
Day Care Attendances	2,863	2,719	2,467	2,786	2,670
Meals on Wheels Prepared	9,315	7,599	9,025	9,971	8,888
Total Non Inpatient Attendances	26,575	26,638	26,659	23,246	21,321
Macarthur Campus					
District Nursing/personal care visits	2,054	1,784	2,324		
Community Health contacts	1,338	923	1,158		
Community Health groups	108	29	28		
Day Care session attendances	1,273	1,285	1,129		
HACC Groups	204	44	30		
Meals on Wheels Prepared	1,139	1,463	1,832		
Volunteer contacts	1,220	1,238	1,207		

Activity by Program 2002/03

Total — All Campuses

	Acute	Mental Health	Aged Care	Total
Admitted Patients				
Separations – Same Day	6,560	29		6,589
– Multi Day	8,740	440	25	9,205
Total Separations	15,300	469	25	15,794
Emergency	5,380	469		5,849
Elective	8,627		25	8,652
Maternity	1,293			1,293
Total Separations	15,300	469	25	15,794
Public Separations	13,449			13,449
Total WIES	10,675			10,675
Separations per Available bed	97	31	1	
Total Bed Days	52,892	4,291	12,889	70,072
Non Admitted Patients				
Emergency Medicine Attendances	23,123	2,012		25,135
Outpatient Services – Occasions of Services	58,110	94,755		152,865
Other Services – District Nursing Care Hours	15,739			15,739
Residential Bed Days		1,289		1,289

Comparative Costs and Statistics – Non-Acute Services

Psychiatric Services

Statistics	2002/03	2001/02	2000/01	1999/00	1998/99
Number of Inpatient Separations	469	420	416	419	379
Bed Days	4,291	4,371	3,849	3,883	3,764
Daily Average Inpatients Accommodated	11.76	11.97	10.54	10.61	10.32
Percentage Occupancy (%)	78.37	79.84	70.27	70.73	68.75
Average Inpatient Length of Stay (days)	9.15	10.41	9.25	9.27	9.94
Number of Outpatient Contacts	96,767	84,226	75,329	83,011	84,556
Number of Residential Bed Days	1,289	1,460	1,095	868	878

Central Linen Service

Kilograms Produced	708,853	701,381	681,862	742,073	816,755
Average cost per kilogram (cents)	160.84	156.23	148.64	144.61	138.73

Accreditation Status: Fully Accredited. Next organisation-wide survey due May 2006.

Service, Activity and Efficiency Measures

Statistical Comparison to Previous Years

	Actual 2002/03	Actual 2001/02	Actual 2000/01	Actual 1999/00	Actual 1998/99
Warrnambool Campus					
Weighted Inlier Equivalent Separations	9,299	9,192	9,353	10,109	9,723
Average Inlier Equivalent DRG Weight	0.7212	0.7558	0.7752	0.8287	0.7798

Statistical Indicators

% Public (Medicare) Patients Treated	92.5%	91.6%	92.5%	93.4%	91.8%
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Revenue Indicators — All Campuses

Average Days to Collect:	2002/03	2001/02
Private Inpatient Fees	61.01	48.52
TAC Inpatient Fees	77.50	63.17
VWA Inpatient Fees	205.85	269.16

Debtors Outstanding as at 30th June 2003

	Under 30 Days	31-60 Days	61-90 Days	Over 90 Days	Total 2003	Total 2002
Private Inpatients	22,907	22,804	5,742	1,445	52,898	111,231
TAC Inpatients	0	0	0	0	0	31,470
VWA Inpatients	442	11,583	14,695	14,567	41,287	127,208
	23,349	34,387	20,437	16,012	94,185	269,909

Note: 'TAC' means Transport Accident Commission; 'VWA' means Victorian Workcover Authority

South West Healthcare Consolidated Financial Results

	2002/03	2001/02
	\$'000's	\$'000's
Total Revenue	69,765	66,044
Total Expenses	69,889	64,601
Operating Surplus (Deficit)	(124)	1,443
Retained Earnings (Accumulated Losses)	910	1,034
Total Assets	81,495	63,557
Total Liabilities	15,412	14,155
Net Assets	66,083	49,402
Total Equity	66,083	49,402

Certification of the Financial Statements

In our opinion the Report of Operations and the Financial Statements of South West Healthcare comprising a Statement of Financial Performance, Statement of Financial Position, Statement of Cash Flows and Notes to the Financial Statements have been prepared in accordance with the provisions of the Financial Management Act 1994 and the Directions of the Minister for Finance – Part 9 Reporting Provisions.

In our opinion the Financial Statements present fairly the financial transactions for the year ended 30 June 2003 and the financial position as at that date of South West Healthcare.

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



D. Jellie
President, Board of Management
DAVID JELLIE



John Krygger
Chief Executive Officer
JOHN KRYGGER

Dated the 9th day of September, 2003 at Warrnambool.

Statement of Financial Performance

for the Year Ended 30 June 2003

South West Healthcare	Note	2002/2003 \$000	2001/2002 \$000
Revenue From Ordinary Activities	2, 2a	69,765	66,044
Expenses From Ordinary Activities	2b		
Employee Entitlements		42,678	39,849
Fee for Service Medical Officers		5,803	5,498
Supplies & Consumables		6,890	6,091
Depreciation and Amortisation	3	3,460	3,319
Other Expenses From Ordinary Activities		11,058	9,844
		<hr/> 69,889	<hr/> 64,601
Net Result From Ordinary Activities		(124)	1,443
Net Increase/(Decrease) in Asset Revaluation Reserve	20a	16,805	—
Total Revenues, Expenses and Valuation Adjustments Recognised Directly in Equity		<hr/> 16,805	<hr/> —
Total Changes In Equity Other Than Those Resulting From Changes In Contributed Capital		<hr/> 16,681	<hr/> 1,443

This Statement should be read in conjunction with the accompanying notes.

Statement of Financial Position

as at 30 June 2003

South West Healthcare		2003	2002
Assets	Notes	\$000	\$000
Current Assets			
Cash Assets	16, 19	13,362	13,976
Receivables	6, 19	910	1,014
Inventory	7	1,455	1,409
Prepayments	19	172	1
Other Assets	11, 19	28	23
Total Current Assets		15,927	16,423
Non Current Assets			
Receivables	6, 19	1,356	1,286
Other Financial Assets	8, 19	22	22
Property, Plant & Equipment	5	64,190	45,826
Total Non-Current Assets		65,568	47,134
Total Assets		81,495	63,557
Liabilities			
Current Liabilities			
Payables	9, 19	4,953	4,107
Interest Bearing Liabilities	19, 22	6	—
Employee Benefits	10	5,478	5,005
Other Liabilities	11	28	23
Total Current Liabilities		10,465	9,135
Non Current Liabilities			
Employee Benefits	10	4,932	5,020
Interest Bearing Liabilities	19, 22	15	—
Total Non-Current Liabilities		4,947	5,020
Total Liabilities		15,412	14,155
Net Assets		66,083	49,402
Equity			
Contributed Capital	20b	48,346	48,346
Asset Revaluation Reserve	20a	16,805	—
Restricted Specific Purpose Reserve	20a	22	22
Accumulated Surpluses / (Deficits)	20c	910	1,034
Total Equity	20	66,083	49,402

This Statement should be read in conjunction with the accompanying notes.

Statement of Cash Flows

for the Year Ended 30 June 2003

South West Healthcare	Note	2002/2003 \$000	2001/2002 \$000
Cash Flows From Operating Activities			
Receipts			
Government grants		58,964	54,429
Capital Grants		1,695	1,175
Patient Fees		3,060	3,273
Private Practice Fees		183	210
Donations and Bequests		186	228
Other		10,510	9,694
Total Receipts		74,598	69,009
Payments			
Employee Benefits		(42,260)	(38,772)
Other		(28,011)	(24,919)
Total Payments		(70,271)	(63,691)
Net Cash Flows From Operating Activities	17	4,327	5,318
Cash Flows From Investing Activities			
Purchase of Properties, Plant & Equipment		(6,564)	(4,319)
Proceeds from Sale of Properties, Plant & Equipment		1,623	1,503
Net Cash Used In Investing Activities		(4,941)	(2,816)
Net Increase/(Decrease) In Cash Held		(614)	2,502
Cash At 1 July 2002		13,976	11,474
Cash At 30 June 2003	16	13,362	13,976

This Statement should be read in conjunction with the accompanying notes.

Notes To and Forming Part Of the Financial Statements

for the Year Ended 30 June 2003

Note 1: Statement of Accounting Policies

The general purpose financial statements of the hospital have been prepared in accordance with the provisions of the Financial Management Act 1994. These requirements incorporate relevant accounting standards issued jointly by the Institute of Chartered Accountants in Australia and CPA Australia and other mandatory professional reporting requirements, (Urgent Issues Group Consensus Views). They have been prepared on the historical cost basis whereby assets are recorded at purchase price plus costs incidental to the acquisition and do not take into account changing money values nor the current cost of non current assets (unless specifically stated).

a) Receivables

Revenues are recognised when they are controlled. Trade debtors are carried at nominal amounts due and are due for settlement within 30 days. Collectability of debts is reviewed on an ongoing basis. A provision for doubtful debts is raised where doubt as to collection exists.

b) Payables

These amounts represent liabilities for goods and services provided prior to the end of the financial year and which are unpaid. The normal credit terms are Net 30 days.

c) Goods and Services Tax

Revenues, expenses and assets are recognized net of GST except where the amount of GST incurred is not recoverable, in which case it is recognised as part of the cost of acquisition of an asset or part of an item of expense or revenue. GST receivable from and payable to the Australian Taxation Office (ATO) is included in the statement of financial position. The GST component of a receipt or payment is recognised on a gross basis in the statement of cash flows in accordance with Accounting Standard AAS 28.

d) Rounding Off

All amounts shown in the financial statements are expressed to the nearest \$1,000.

e) Other Financial Assets

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

f) Depreciation

Fixed assets of the Hospital with value in excess of \$1,500 are capitalised and depreciation has been provided over their estimated useful lives using the straight-line method. Useful lives of fixed assets are reviewed annually. This depreciation charge is not funded by the Department of Human Services.

The following table indicates the expected useful lives of non current assets on which the depreciation charges are based.

	2002/03	2001/02
Buildings	Up to 25 years	Up to 25 years
Plant & Equipment	Up to 20 years	Up to 20 years
Furniture & Fittings	Up to 20 years	Up to 20 years

g) Inventories

Inventories are stated in the Balance Sheet at average cost. This method assigns weighted average costs arrived at by means of a continuous calculation.

h) Employee Benefits

Based on pay rates expected to apply when the obligation is settled. On costs such as Workcover and superannuation are included in the calculation of leave provisions.

Long Service Leave

The provision for long service leave is determined in accordance with Accounting Standard AASB 1028. The liability for long service leave expected to be settled within 12 months of the reporting date is recognised in the provision for employee benefits as a current liability. The balance of the provision is classified as a non-current liability measured at the present value of the estimated future cash outflow arising from employee's services to date.

Salaries & Wages, Annual Leave and Accrued Days Off

Liabilities for wages and salaries, annual leave and accrued days off are recognised, and are measured as the amount unpaid at the reporting date in respect of the employee's services up to the reporting date and are measured as the amounts expected to be paid when the liabilities are settled.

i) Inter-segment Transactions

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

j) Fund Accounting

The Hospital operates on a fund accounting basis and maintains three funds Operating, Specific Purpose and Capital Funds. The Hospital's Capital and Specific Purpose Funds comprise unspent capital donations, receipts from fund-raising activities and funds generated from business activities conducted solely in respect of these funds.

k) Donations

Donations are recognised as revenue when the cash is received.

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

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

m) Leased Property and Equipment

A distinction is made between finance leases which effectively transfer from the lessor to the lessee substantially all the risks and benefits incidental to ownership of leased non-current assets, and operating leases under which the lessor effectively retains all such risks and benefits. Where a non-current asset is acquired by means of a finance lease, the minimum lease payments are discounted at the interest rate implicit in the lease. The discounted amount is

established as a non-current asset at the beginning of the lease term and is amortised on a straight line basis over its expected economic life. A corresponding liability is established and each lease payment is allocated between the principal component and the interest expense. Operating lease payments are representative of the pattern of benefits derived from the leased assets and accordingly are charged against revenue in the periods in which they are incurred.

n) Revenue Recognition

Revenue is recognised in accordance with AAS 15. Income is recognised as revenue to the extent they are earned, should there be unearned income at reporting date, it is reported as income in advance.

Government Grants

Grants are recognised as revenue when the Hospital gains control of the underlying assets. Where grants are reciprocal, revenue is recognised as performance occurs under the grant. Non-reciprocal grants are recognised as revenue when the grant is received or receivable. Conditional grants may be reciprocal or non-reciprocal depending on the terms of the grant

Indirect Contributions

- Insurance is recognised as revenue following advice from the Department of Human Services.

- Long Service Leave - Revenue is recognised monthly upon finalisation of movements in LSL liability in line with the arrangements set out in the Acute Health Division Hospital Circular 13/2001.

Patient Fees

Patient fees are recognised as revenue at the time invoices are raised.

Private Patient Fees

Private Patient fees are recognised as revenue at the time invoices are raised.

o) Revaluations of Non-Current Assets

Subsequent to the initial recognition as assets, non-current physical assets, other than plant and equipment, are measured at fair value. Plant and equipment are measured at cost. Revaluations are made with sufficient regularity to ensure that the carrying amount of each asset does not differ materially from its fair value at the reporting date. Revaluations are assessed annually and supplemented by independent assessments, at least every three years. Revaluations are conducted in accordance with the Victorian Government Policy Paper *Revaluation of Non-Current Physical Assets*. Revaluation increments are credited directly to the asset revaluation reserve, except that, to the extent that an increment reverses a revaluation decrement in respect of that class of asset previously recognised at an expense in net result, the increment is recognised immediately as revenue in net result.

Revaluation decrements are recognised immediately as expenses in the net result, except that, to the extent that a credit balance exists in the asset revaluation reserve in respect of the same class of assets, they are debited to the asset revaluation reserve.

Revaluation increments and decrements are offset against one another within a class of non-current assets.

Notes To and Forming Part Of the Financial Statements 2002-03

Note 2: Revenue

	HSA 2002/03 \$000	HSA 2001/02 \$000	Non HSA 2002/03 \$000	Non HSA 2001/02 \$000	Total 2002/03 \$000	Total 2001/02 \$000
Revenue from Operating Activities						
Recurrent						
Government Contributions						
- Department of Human Services	57,818	54,286	—	—	57,818	54,286
- Commonwealth Government	—	—	613	433	613	433
Indirect Contributions by Human Services	991	953	—	—	991	953
Patients fees (refer note 2c)	2,966	3,180	—	—	2,966	3,180
Private Practice Fees	—	—	183	210	183	210
Specific Revenues (refer note 2f)	70	658	—	—	70	658
Other	205	191	2,574	2,393	2,779	2,584
Capital Purpose Income						
State Government Capital Grants						
- Equipment and Infrastructure	—	—	1,695	1,175	1,695	1,175
Donations and Bequests	—	—	137	204	137	204
Sub-Total Revenue from Operating Activities	62,050	59,268	5,202	4,415	67,252	63,683
Revenue from Non-Operating Activities						
Interest	—	—	640	612	640	612
Property Income	—	—	250	246	250	246
Proceeds from Sale of Non-Current Assets (refer note 2d)	—	—	1,623	1,503	1,623	1,503
Sub-Total Revenue from Non-Operating Activities	—	—	2,513	2,361	2,513	2,361
Total Revenue from Ordinary Activities (refer note 2a)	62,050	59,268	7,715	6,776	69,765	66,044

Note 2a: Analysis of Revenue by Source

	Acute Care 2002/03 \$000	Aged & Home Care 2002/03 \$000	Mental Health 2002/03 \$000	Primary Health 2002/03 \$000	Public Health 2002/03 \$000	Other 2002/03 \$000	Total 2002/03 \$000	Total 2001/02 \$000
Revenue from Services								
Supported by Health Service Agreement								
Government Grants								
- Department of Human Services	41,190	2,094	9,642	1,114	76	3,702	57,818	54,286
Indirect Contributions by Human Services								
- Insurance	991	—	—	—	—	—	991	953
Patients fees (refer note 2c)	1,173	1,746	—	22	—	25	2,966	3,180
Other	195	—	10	—	—	—	205	191
Specific Revenues	(45)	(4)	125	(2)	—	(4)	70	658
Sub-Total Revenue from Services								
Supported by Health Services Agreement	43,504	3,836	9,777	1,134	76	3,723	62,050	59,268

Indirect contributions by Human Services

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

Revenue From Services Supported by Hospital and Community Initiatives

Business Units

Catering & Commissions	316	299
Sales	1,355	1,256
Training & Staff development	42	18
Fundraising	81	75
Linen Service	589	592
Other	191	153
Total	2,574	2,393

Revenue From Other Sources

Government Contributions - Commonwealth Government	613	433
Private Practice Fees	183	210
State Government Capital Grants		
- Equipment and Infrastructure Maintenance	1,695	1,175
Donations and Bequests	137	204
Interest	640	612
Property Income	250	246
Proceeds from Sale of Non Current Assets	1,623	1,503
Sub Total Revenue From Other Sources	5,141	4,383
Total Revenue from All Sources	69,765	66,044

Note 2b: Analysis of Expenses by Source	Acute Care	Aged & Home Care	Mental Health	Primary Health	Public Health	Other	Total	Total
Services Supported by Health Services Agreement	2002/03	2002/03	2002/03	2002/03	2002/03	2002/03	2002/03	2001/02
	\$000	\$000	\$000	\$000	\$000	\$000	\$000	\$000
Employee Entitlements								
Salaries & Wages	25,293	2,209	6,386	666	56	2,087	36,697	34,358
Workcover	157	14	23	4	—	13	211	257
Long Service Leave	567	49	151	15	2	47	831	1,231
Superannuation	2,601	227	561	68	4	215	3,676	2,678
Fee for Service Medical Officers	5,804	—	—	—	—	—	5,804	5,498
Supplies & Consumables								
Drug Supplies	1,128	116	125	—	—	478	1,847	1,661
Medical & Surgical Supplies	2,803	376	115	153	—	315	3,762	3,334
Food Supplies	411	108	78	39	—	22	658	546
Other Expenses								
Domestic Services	721	95	68	39	—	35	958	876
Fuel Light Power & Water	517	43	65	2	—	7	634	654
Repairs & Maintenance	946	175	199	53	10	165	1,548	1,291
Postal & Telephone	242	71	128	21	—	48	510	370
Motor Vehicles	269	12	166	4	2	11	464	456
Administrative Expenses	1,521	144	1,227	57	3	124	3,076	2,995
Patient Transport	451	169	20	—	—	—	640	426
Audit Fees Auditor-General	22	2	6	—	—	—	30	29
	43,453	3,810	9,318	1,121	77	3,567	61,346	56,660
Services Supported by Hospital and Community Initiatives								
Employee Entitlements								
Salaries & Wages						1,090	1,090	1,179
Workcover						14	14	4
Long Service Leave						30	30	46
Superannuation						129	129	96
Supplies & Consumables								
Medical & Surgical Supplies						366	366	278
Food Supplies						256	256	272
Other Expenses								
Domestic Services						209	209	121
Fuel Light Power & Water						64	64	37
Repairs & Maintenance						544	544	499
Motor Vehicles						11	11	17
Administrative Expenses						804	804	668
Audit Fees Auditor-General						1	1	1
						3,518	3,518	3,218
Sub-Total Expenses from Services Supported by Hospital and Community Initiatives	43,453	3,810	9,318	1,121	77	7,085	64,864	59,878
Depreciation and Amortisation (refer note 3)						3,460	3,460	3,319
Written Down Value of Assets Sold (refer note 2d)						1,565	1,565	1,404
Total Expenses from Ordinary Activities	43,453	3,810	9,318	1,121	77	12,110	69,889	64,601

Note 2c: Patient Fees

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

		Total	Total
		2002/03	2001/02
		\$000	\$000
Patient Fees raised			
Acute	- Inpatient	923	1,036
	- Outpatient	443	454
Sub Acute	- Inpatient Rehabilitation	115	232
Aged Care & Primary Health	- Nursing Home	1,463	1,439
	- Primary Care	22	19
		2,966	3,180

Notes To and Forming Part Of the Financial Statements 2002-03

Note 2d: Sale of Non Current Assets

	2002/03 \$000	2001/02 \$000
Plant & Equipment		
Proceeds from disposal	28	—
Less: Written Down Value of Assets Sold	39	6
Net Gains / (Losses) on disposal	<u>(11)</u>	<u>(6)</u>
Furniture & Fittings		
Proceeds from disposal	—	—
Less: Written Down Value of Assets Sold	2	1
Net Gains / (Losses) on disposal	<u>(2)</u>	<u>(1)</u>
Land & Buildings		
Proceeds from disposal	42	—
Less: Written Down Value of Assets Sold	—	—
Net Gains / (Losses) on disposal	<u>42</u>	<u>0</u>
Motor Vehicles		
Proceeds from disposal	1,553	1,503
Less: Written Down Value of Assets Sold	1,524	1,397
Net Gains / (Losses) on disposal	<u>29</u>	<u>106</u>
Total	\$000	\$000
Proceeds from disposal	1,623	1,503
Less: Written Down Value of Assets Sold	1,565	1,404
Net Gains / (Losses) on disposal	<u>58</u>	<u>99</u>

Note 2e: Analysis of Expenses by Business Units for Services Supported by Hospital & Community Initiatives

	Acute Care 2002/03 \$000	Aged & Home Care 2002/03 \$000	Mental Health 2002/03 \$000	Primary Health 2002/03 \$000	Public Health 2002/03 \$000	Other 2002/03 \$000	Total 2002/03 \$000	Total 2001/02 \$000
Expenses								
Business Units								
Catering & Commissions							299	287
Retail outlets							1,270	1,036
Training & staff development							70	93
Fundraising							16	23
Private practice							302	303
Linen Services							508	464
Property expenses							129	197
IT expenses							681	468
Other							243	347
Total							<u>3,518</u>	<u>3,218</u>

Note 2f: Specific Revenues

	2002/03 \$000	2001/02 \$000
Specific Revenue		
Department of Human Services Non-cash adjustment for Leave Provisions	70	658
	<u>70</u>	<u>658</u>

Note 3: Depreciation

	Total 2002/03 \$000	Total 2001/02 \$000
Buildings	1,635	1,550
Plant & Equipment	918	885
Furniture and Fittings	557	563
Motor Vehicles	350	321
	<u>3,460</u>	<u>3,319</u>

Note 4: Segment Reporting

	Hospital W'Bool Campus		Hospital C'down Campus		Linen Service		Mental Health		Macarthur		Eliminations		Consolidated	
	2003 \$000	2002 \$000	2003 \$000	2002 \$000	2003 \$000	2002 \$000	2003 \$000	2002 \$000	2003 \$000	2002 \$000	2003 \$000	2002 \$000	2003 \$000	2002 \$000
Segment Revenue from outside	50,026	46,713	7,481	7,407	616	593	10,640	9,307	600	595	—	—	69,363	64,615
Intersegment revenue	—	—	—	—	524	525	—	—	—	—	(524)	(525)	—	—
Share of net result from joint venture	(260)	342	—	—	—	—	—	—	—	—	—	—	(260)	342
Total Revenue	49,766	47,055	7,481	7,407	1,140	1,118	10,640	9,307	600	595	(524)	(525)	69,103	64,957
Allocated Segment expenses	46,988	43,535	7,457	7,087	1,058	989	10,056	8,353	484	490	—	—	66,043	60,454
Intersegment expenses	524	525	—	—	—	—	—	—	—	—	(524)	(525)	—	—
Depreciation	2,290	2,200	308	282	108	111	441	435	37	32	—	—	3,184	3,060
Total Expenses	49,802	46,260	7,765	7,369	1,166	1,100	10,497	8,788	521	522	(524)	(525)	69,227	63,514
Net result from ordinary activities	(36)	795	(284)	38	(26)	18	143	519	79	73	—	—	(124)	1,443
Segment assets	64,003	48,097	4,193	4,220	1,821	1,730	9,814	7,525	924	966	—	—	80,755	62,538
Share of assets from SWARH	740	1,019	—	—	—	—	—	—	—	—	—	—	740	1,019
Total Assets	64,743	49,116	4,193	4,220	1,821	1,730	9,814	7,525	924	966	—	—	81,495	63,557
Total Liabilities	11,396	10,639	1,808	1,558	243	278	1,877	1,605	88	75	—	—	15,412	14,155
Acquisition of property, plant and equipment	4,827	2,286	388	708	123	31	1,138	1,175	108	119	—	—	6,584	4,319

The major products/services from which the above segments derive revenue are:

Business Segments:

Hospital
Linen Service
Mental Health
Community Health Service (Macarthur)

Services:

Acute and Rehabilitation Inpatient and Non Inpatient Health Services
Linen/Laundry Services
Acute Psychiatric Inpatient and Community Services
Primary and Community Health Services

Geographical Segment: South West Healthcare operates predominantly in South West Victoria.

Note 5: Property, Plant & Equipment

	Gross Cost/ Valuation 2003 \$000	Gross Cost/ Valuation 2002 \$000	Accum. Deprec. 2003 \$000	Accum. Deprec. 2002 \$000	Net Assets at 2003 \$000	Net Assets at 2002 \$000
Land at valuation	8,408	3,598	—	—	8,408	3,598
Buildings at valuation	47,278	35,177	—	4,205	47,278	30,972
Subtotal	55,686	38,775	—	4,205	55,686	34,570
Land at cost	—	360	—	—	—	360
Buildings at cost	876	3,652	209	303	667	3,349
Plant & Equipment at cost	12,834	12,342	8,244	7,775	4,590	4,567
Furniture & Office Equipment at cost	4,066	3,580	3,074	2,736	992	844
Motor Vehicles at cost	2,666	2,488	411	352	2,255	2,136
Subtotal	20,442	22,422	11,938	11,166	8,504	11,256
Total	76,128	61,197	11,938	15,371	64,190	45,826

The valuations of land and buildings were conducted by Landlink Property Group in June 2003. The valuer was Mr Eddie Northeast FAPI (Val) Dip. Ag. CPA Certified Practising Valuer.

Notes To and Forming Part Of the Financial Statements 2002-03

Note 5a: Property, Plant & Equipment

	Land \$000	Buildings \$000	Plant & Equipment \$000	Furniture & Fittings \$000	Motor Vehicles \$000	Total \$000
2003						
Carrying amount at start of year	3,958	34,320	4,567	845	2,136	45,826
Additions	—	2,905	980	706	1,994	6,585
Disposals	—	—	39	2	1,525	1,566
Revaluation increments/decrements	4,450	12,355	—	—	—	16,805
Depreciation/amortisation expense (note 3)	—	1,635	918	557	350	3,460
Carrying amount at end of year	8,408	47,945	4,590	992	2,255	64,190
2002						
Carrying amount at start of year	3,804	34,654	4,697	1,165	1,909	46,229
Additions	154	1,216	764	254	1,944	4,332
Disposals	—	—	9	11	1,396	1,416
Depreciation/amortisation expense (note 3)	—	1,550	885	563	321	3,319
Carrying amount at end of year	3,958	34,320	4,567	845	2,136	45,826

Note 6: Receivables

	2002/03 \$000	2001/02 \$000
Current		
Acute - Inpatient	142	270
Acute - Outpatient	85	52
Aged Care - Nursing Home	14	17
Other	—	26
Regional Institutions	482	509
Linen Service Debtors	65	60
Accrued Government Grants	71	—
Interest	56	91
Total	915	1,025
Less Provision for Bad Debts	(5)	(11)
Total Current Receivables	910	1,014
Non Current		
Accrued Government Grants	1,356	1,286
Total Non Current Receivables	1,356	1,286

Note 7: Inventories

	2002/03 \$000	2001/02 \$000
Pharmaceuticals	221	189
Medical & Surgical	284	276
Stationery	97	122
Domestic & Maintenance	62	63
Food Supplies	22	26
Kiosk & Healthcare Shop Supplies	133	90
Bulk Linen Store - Linen Service	192	214
Linen in Use	444	429
Total	1,455	1,409

Note 8: Other Financial Assets

	Endowment Fund	Total 2002/03 \$000	Total 2001/02 \$000
Non Current:			
Interest Bearing Term Deposit	22	22	22
Total	22	22	22

Note 9: Payables

	2002/03 \$000	2001/02 \$000
Creditors	3,723	2,727
Grant Recall	691	744
Audit Fee	20	30
Capital Works	—	64
GST Payable	519	542
Total:	4,953	4,107

Note 10: Employee Benefits	2002/03	2001/02
Current	\$000	\$000
Long service leave	994	841
Accrued wages and salaries	1,078	1,005
Annual leave	3,304	3,067
Accrued days off	102	92
Total Current	5,478	5,005
Non-Current		
Long service leave	4,932	5,020
Total	10,410	10,025
Movement in Long Service Leave:		
Balance July 1	5,861	5,201
Provision made during the year	873	1,354
Settlement made during the year	808	694
Balance June 30	5,926	5,861

Note 11: Other Liabilities	2002/03	2001/02
	\$000	\$000
Patient Trust	26	20
Equipment Deposits	2	3
Total	28	23

Represented by the following assets:	2002/03	2001/02
	\$000	\$000
Cash Assets	28	23
Total	28	23

Note 12: Superannuation Liability

All eligible employees contributed to the Hospital's Superannuation Fund established under Section 10 of the Hospital Superannuation Act 1965 (refer Regulation 32).

As a result of the 3% Productivity National Award decision all employees from 1 July 1988 automatically became entitled to the Basic Benefit Superannuation package. The Hospital contributed a 9% benefit based on the salaries of each employee, directly to Health Super Pty. Ltd. on a monthly basis.

The following two contributory scheme options are also available to basic benefit members who commenced employment before 1 January 1994:

- Employee Contribution 3% and Hospital Contributions 4%
- Employee Contribution 6% and Hospital Contribution 10% based on the ordinary salary of the employee.

The outstanding liability for the year ending 30 June, 2003 is nil and contributions were as follows:

Contributions	2002/03	2001/02
	\$000	\$000
Hospital	2,690	1,888
Linen Service	71	39
Psychiatric Services	561	475
Camperdown Campus	466	353
Macarthur Campus	19	19
Total	3,807	2,774

Contributions are paid in accordance with the Hospital Superannuation Act 1988 and the State Superannuation Act 1988. The notional unfunded superannuation liability in respect to members of the Health Super Pty. Ltd. defined benefit scheme, is \$2,612,716. This amount, in addition to the unfunded amount of the State Superannuation Scheme are shown as a liability separately by the Department of Treasury and Finance.

Notes To and Forming Part Of the Financial Statements 2002-03

Note 13: S.W.A.R.H. Alliance

The hospital has 38.9% interest in the SWARH Alliance whose principal activity is the implementing and processing of an information technology system and an associated telecommunication service suitable for use by each member hospital. The hospital's share of assets, liabilities and operating result is:

	Total 2002/03 \$000	Total 2001/02 \$000
Current Assets		
Cash at bank	—	504
Receivables	47	45
Prepayments	172	1
	219	550
Non-Current Assets		
Buildings	666	365
Plant and Equipment	(99)	104
	567	469
Total Assets	786	1,019
Current Liabilities		
Bank Overdraft	47	—
Payables	78	110
Employee Entitlements	44	31
	169	141
Total Liabilities	169	141
Net assets	617	878
Contribution to Operating Profit/(Loss)	(260)	342

Note 14: Capital Commitments

The hospital had outstanding commitments at 30 June, 2003 for capital expenditure over the next five years for the supply of works, services and materials to the value of \$921,306. This is South West Healthcare's contribution to information technology expenditure for the South West Alliance of Regional Hospitals (\$355,669), and Building Works (\$565,637).

Note 15: Contingent Liabilities

South West Healthcare is unaware of any contingent liabilities in existence.

Note 16: Reconciliation of Cash

For the purpose of this statement of cash flows, cash includes cash on hand and at call deposits with banks or financial institutions, net of bank overdrafts.

	2002/03 \$000	2001/02 \$000
Cash on Hand/(Bank Overdraft)	605	7
Deposits at Call	12,757	13,969
Cash at End of Reporting Period	13,362	13,976

Note 17: Reconciliation of Net Cash Used in Operating Activities to Operating Result

	Total 2002/03 \$000	Total 2001/02 \$000
Entity Surplus /(Deficit) for the year before extraordinary items	(124)	1,443
Non Cash Movements		
Depreciation	3,460	3,319
(Increase) / Decrease in Receivables	(83)	(105)
Increase / (Decrease) in Payables	853	398
Increase /(Decrease) in Employee Entitlements	53	1,049
(Increase)/Decrease in Other Current Assets	226	(436)
Net (Revenue) / Cost on Sale of Assets	(58)	(99)
Increase/Decrease in Specific revenue & expenses	—	(251)
Net cash Provided by Operating Activities	4,327	5,318

Note 18: Responsible Person-Related Disclosures

a) Responsible Persons

The following were responsible persons during 2002/03 - Mr J. Clark, Ms B. Piesse, Snr Sgt I. Armstrong, Mr S. Carroll, Dr K. Nunn, Mr D. Jellie, Mr J. Wilson, Mr R. Zerbe, Mrs S. Muldoon, Dr G. Pallas, Mrs M. Brock, Mrs D. Daffy, Ms F. Melican, Dr A. Brown, Mr M. Fry, The Hon. B. Pike and The Hon. J. Thwaites.

b) Remuneration of Responsible Persons

	2002/03	2001/02
	\$000	\$000
Remuneration received or due and receivable by Responsible Persons from the reporting entity in connection with the management of the reporting entity	0	0

c) Retirement Benefits of Responsible Persons

Retirement benefits paid by the reporting entity in connection with the retirement of Responsible Persons during the year.	0	0
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d) Other Transactions of Responsible Persons and their Related Entities

Mr D. Jellie - Provision of Legal/Consultancy Services	3	0
Mrs D. Daffy - Employee	10	0
Dr A. Brown - Fee for Service Medical Officer	68	0
Mr M. Fry - Retail Services	1	0

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

Aggregate amounts payable at balance date	0	0
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f) Remuneration of Executive Officers

	2002/03	2001/02
Number of Executive Officers with remuneration between 230,000 - 240,000	2	—
Number of Executive Officers with remuneration between 200,000 - 210,000	—	1
Number of Executive Officers with remuneration between 180,000 - 190,000	—	1
Number of Executive Officers with remuneration between 120,000 - 130,000	3	2
Number of Executive Officers with remuneration between 110,000 - 120,000	1	1
Number of Executive Officers with remuneration between 100,000 - 110,000	—	1

Total Remuneration

Remuneration includes Superannation Guarantee Levy, Employer superannuation contributions, deemed value of motor vehicle and all non-cash benefits.	973,575	851,439
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Note 19: Financial Instruments

(a) Interest Rate Risk Exposure

The Hospital's exposure to interest rate risk and effective weighted average interest rate by maturity periods is set out in the following timetable. For interest rates applicable to each class of asset or liability refer to individual notes to the financial statements. Exposure arises predominantly from assets and liabilities bearing variable interest rates.

Interest rate exposure as at 30/06/2003	Floating Interest Rate	1 year or Less	1 to 5 years	Non Interest Bearing	Book Value	Net Fair Value
	\$000	\$000	\$000	\$000	2002/03	2002/03
					\$000	\$000
Financial Assets						
Cash Assets	13,362	—	—	—	13,362	13,362
Receivables	—	—	—	2,266	2,266	2,266
Deposits	—	28	—	—	28	28
Prepayments	—	—	—	172	172	172
Other assets	—	—	22	—	22	22
Total Financial Assets	13,362	28	22	2,438	15,850	15,850
Financial Liabilities						
Payables	—	—	—	4,953	4,953	4,953
Other Liabilities	—	28	—	—	28	28
Interest Bearing Liabilities	—	6	15	—	21	21
Total Financial Liabilities	0	34	15	4,953	5,002	5,002
Net Financial Asset/Liabilities	13,362	(6)	7	(2,515)	10,848	10,848

Weighted Average Interest Rate = 2.00% 4.84%

Interest rate exposure as at 30/06/2002	Floating Interest Rate	1 year or Less	1 to 5 years	Non Interest Bearing	Book Value	Net Fair Value
	\$000	\$000	\$000	\$000	2001/02	2001/02
					\$000	\$000
Financial Assets						
Cash Assets	13,976	—	—	—	13,976	13,976
Receivables	—	—	—	2,300	2,300	2,300
Deposits	—	23	—	—	23	23
Prepayments	—	—	—	1	1	1
Other assets	—	—	22	—	22	22
Total Financial Assets	13,976	23	22	2,301	16,322	16,322

continued...

Notes To and Forming Part Of the Financial Statements 2002-03

Note 19: Financial Instruments continued

Interest rate exposure as at 30/06/2002	Floating Interest Rate \$000	1 year or Less \$000	1 to 5 years \$000	Non Interest Bearing \$000	Book Value 2001/02 \$000	Net Fair Value 2001/02 \$000
Financial Liabilities						
Payables	—	—	—	4,107	4,107	4,107
Other Liabilities	—	23	—	—	23	23
Total Financial Liabilities	0	23	0	4,107	4,130	4,130
Net Financial Asset/Liabilities	13,976	0	22	(1,806)	12,192	12,192
Weighted Average Interest Rate =						
*Net fair values are capital amounts	2.01%	4.8%				

(Net fair values of financial instruments are determined on the following bases:

- Cash, deposit investments, cash equivalents and non-interest bearing financial assets and liabilities (trade debtors, other receivables, trade creditors and advances) are valued at cost which approximates net market value;
- Interest bearing liabilities amounts are based on the present value of expected future cash flows discounted at current market interest rates quoted for trade Treasury Corporation of Victoria.

(b) Credit Risk Exposure

Credit risk represents the loss that would be recognised if counterparties fail to meet their obligations under the respective contracts at maturity. The credit risk on financial assets of the entity have been recognised on the statement of financial position, as the carrying amount, net of any provisions for doubtful debts.

(c) Net Fair Value of Financial Assets and Liabilities

The net fair value of on-balance sheet financial assets and liabilities are not materially different to the carrying value of the financial assets liabilities.

Note 20: Equity & Reserves

	2002/03 \$000	2001/02 \$000
(a) Reserves		
Asset Revaluation Reserve		
Balance at the beginning of the reporting period	—	—
Increase in Land & Buildings during the year	16,805	—
Balance at the end of the reporting period	16,805	—
Specific Purpose Reserve		
Balance at the beginning of the reporting period	22	22
Balance at the end of the reporting period	22	22
Total Reserves	16,827	22
(b) Contributed Capital		
Balance at the beginning of the reporting period	48,346	48,346
Balance at the end of the reporting period	48,346	48,346
(c) Accumulated Surpluses/(Deficits)		
Balance at the beginning of the reporting period	1,034	(409)
Net Result for the Year	(124)	1,443
Balance at the end of the reporting period	910	1,034
(d) Equity		
Total Equity at the Beginning of the reporting period	49,402	47,959
Total Changes in Equity Recognised in the Statement of Financial Performance	16,681	1,443
Total Equity at the end of the reporting period	66,083	49,402

Note 21: Remuneration of Auditors

	2002/03 \$000	2001/02 \$000
Audit fees paid or payable to the Victorian Auditor-General's Office for audit of the Hospital's financial report		
Paid as at 30 June 2003	31	30
Payable as at 30 June 2003	31	30

Note 22: Lease Liabilities

	2002/03 \$000	2001/02 \$000
Finance Leases		
Commitments in relation to finance leases are payable as follows:		
Not later than one year	7	—
Later than one year but not later than 2 years	7	—
2 to 5 years	12	—
Minimum Lease Payments	26	—
Less Future Finance Charges	(5)	—
Total	21	—
Representing Lease Liabilities		
Current	6	—
Non-Current	15	—
Total	21	—



AUDITOR GENERAL
VICTORIA

AUDITOR-GENERAL'S REPORT

To the Members of the Parliament of Victoria, the responsible Ministers and the Members of the Board of South West Healthcare

Audit Scope

The accompanying financial report of South West Healthcare for the financial year ended 30 June 2003, comprising a statement of financial performance, statement of financial position, statement of cash flows and notes to the financial statements, has been audited. The Members of the Board are responsible for the preparation and presentation of the financial report and the information it contains. An independent audit of the financial report has been carried out in order to express an opinion on it to the Members of the Parliament of Victoria, responsible Ministers and Members of the Board as required by the *Audit Act 1994*.

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

The audit opinion expressed in this report has been formed on the above basis.

Audit Opinion

In my opinion, the financial report presents fairly in accordance with applicable Accounting Standards and other mandatory professional reporting requirements in Australia, and the financial reporting requirements of the *Financial Management Act 1994*, the financial position of South West Healthcare as at 30 June 2003 and its financial performance and cash flows for the year then ended.

MELBOURNE
10 September 2003



J.W. CAMERON
Auditor-General

Contributors, 2002-2003

A.L. Lane Foundation	5,000	Lees/Ritchies Community Cash Club	2,338	Victorian Women's Trust Ltd.	7,500
Alcoholics Anonymous	90	Liberty Medical Pty Ltd	150	Wackett, Kevin	50
Anglican Women's Guild	500	Linke, Mr R.	25	W'bool Computing Company	100
Apex Club Of Warrnambool	5,000	Looney, J.D. & S.M.	20	W'bool Lodge of St John	200
Asthma Foundation Victoria	2,970	Maceys Carpet Choice	500	W'bool Old Time Country Group	771
Aventis, Pharma	500	Mattner, Adam	200	W'bool Quilters	800
Bakos, Mr & Mrs B.	250	McDonald, Craig	1,000	W'bool Uniting Church	500
Bartlett, Jennifer	100	Mclaren, David & Narelle	50	Wbool Ostomy Association	8,000
Becton Dickinson P/L	200	McPherson, Mr B.	30	W'bool Co-Operative Society	100
Bennett, Mr James	50	Medica, Sulzer	250	Wbool Freemasons Lodge	500
Benzing, B.	50	Moore J.P. & N.G.	50	W'bool Old Time Dance Group	766
Biomet Australia P/L	150	Morton, Mark	575	W'bool Ostomy Association	1,000
Borstel, Judith	50	Murdoch, Estate of Mr A.	244	West Fridge Pty Ltd	850
Braun, B.	500	N & L Brodie Pty Ltd	100	White Estate Of Audrey Merle	500
Breast Cancer Support Group	91	Nordin, Alf & Bernice	80	Wilson Real Estate	2,500
Brocky's On Liebig	100	NRMA	500	Wright, Ben	275
Brophy Family & Youth Services	100	Nuplex Enviromental	200	Wyeth, Tony	100
Brown, Travis	200	O'Donohue, J.F. & M.	35	Zipper Club	2,500
Bryce, Mrs Florence	200	Owen-Smith, Mary	20		
Byron, Sec & Bev	110	Pearson Family	210	Memorial Donations	
Caple, Jack	25	Peter Haylock Family Trust	100	In Memory of Alan Day	
Carroll, J. & P.	10	Philip Johns & Associates	1,000	Day, Jackie	100
Charlwood, Don	100	Port Fairy Theatre Group	3,000	Serle, R.W. & J.A.	20
Chiller, Kevin	100	Price, L.M.	150	Clarke, Tom & Helen	20
Clark, Mrs Shirley	100	Rice, H.E. & J.	425	Day, J. W. A. & K.	400
Clarke, Paul	505	Rotary Club Of Warrnambool	200	Wlnes, K.V. & S.E.	20
Claydon, Mrs D.	20	Rotary Club Of W'bool Central	2,000	Davies, Peg	10
Colac Area Health	492	Say Thank You Appeal	246	Remine family	40
Collier Charitable Fund	5,000	Sloan, Neil & Janet	1,214	Johnson, Doris & Ann	25
Combined Pensioners Association	100	Smith, Stuart	20	Bamford, Ros	50
Country Womens Association	20	Smith & Nephew Surgical Pty Ltd	500	Lanfranco family	10
Cowell, P.C.	20	South West Orthotics Pty.Ltd	100	Gee, Ray & Norma	20
Dalton, Judith	400	Sporting Shooters Ass'n. of Aust.	500	Politis clan	20
Deakin University	147	Surgicare Pty.Ltd	500	Green, S. B. & family	20
Morgan, D.J. & S.O.	30	Terumo Corporation	500	Pear, Mr & Mrs George	10
Draper, A.L.	60	Twin Rivers Probus Club	80	Greaves, Ron & Lois	10
Drs. Beaton & Pettigrew	250	Tyco Healthcare	500	Fischer, S. C. & family	50
Fisher & Paykel	100	Uniting Church Evening Fellowship	700	Asling, H. & L.	20
G.M. & E.J. Jones Foundation	50,000	Victorian Police	3,568	Alexander, V.	10
Gibb, K.	25				
Gibbons, K.A. & C.C.	20				
Golf Day Entries	1,425				
Gordon, Estate of J.F.	643				
Grass Growers	70				
Grundy, Mr Jason	250				
Harrington, David	100				
Heart Help	200				
Heazlewood, A. & M.	755				
Higgins, Mr & Mrs A.	100				
Holcombe, Trevor	2,000				
Hurley, Tania	200				
Jewel, Mr Alistair	220				
Jones, J.	50				
Jones, Lenore	10				
Jones, Mrs Betty	200				
Ladies in Black	1,240				
Lafranchi, Mr J.	50				
Landscape River Pty Ltd	100				
Larygectomy Group	300				
Laryngectomee Group	300				
Latte Club	1,088				

Warrnambool Campus volunteers Bev Dunn (left) and Elizabeth Abraham pack diabetic supplies into a specially-designed trolley, purchased with funds donated by the Warrnambool Branch of the Ostomy Association. The trolley has improved storage and handling of supplies distributed under the National Diabetes Supply Scheme.



Hamilton, Joan	20	In Memory of Frank King	
Fary, Pat & Ern	50	King, Nigel Allen	400
Owen, Doug & Meryl	20		
In Memory of Helen Cameron		In Memory of Colin Leishman	
W'Bool Womens Service Club	100	Leishman family	2,000
In Memory of Cheryl Dixon		In Memory of Brian Meddings	
Construction workers of W'Bool	215	Meddings, Josephine	50
Jans, Jill & Phillip	50	In Memory of Linda Rudolph	
Hounsell, Dr J.	60	Fitzgerald, Connie	10
Nash, E.	20	In Memory of John Rea	
Crowley, Shirley & Bill	50	Muir, Angela	50
Watts, Mr & Mrs	50		
In Memory of Mary (Molly) Duncan		In Memory of Maureen Steel	
Eccles, Anne & Tony	200	Neale, Ivy	10
In Memory of Mary Glennen		Gore family	20
Muir, Angela	50	Christ Church	20
In Memory of Heather Holcombe		Gunn, R. & K. & family	20
Holcombe, Trevor	600	Lake, Connie	10
In Memory of Albea Johnstone		Bell, Don & Tony	40
Johnstone, Clive & Jillian	20	Chislett, Francis	20
Andus, Joan	10	Wallace, Neville & Wilma	10
Johnstone, W. & P.	15	Mance, Julie & family	10
Mcleod, Ross & Robyn	10	Alderson, Liz & family	10
Cockayne, Joan & Keith	10	Cornwells/Frasers/Treveras	50
Giblin, Joan & Jimmy	10	Hammond, R. & B. & family	20
Morrow, Lois & Herb	15	Wallace, Jenny & Colin	20
Sawyer, A. & J.	10	Clarke, P. G. & family	20
Harris, Ray	20	In Memory of Morris Richings	
Williams, Colin	10	McKenzie, K. & K.	20
Cornelissen, Paul & family	50	In Memory of V. Ryan	
Bell, Don & Jan	50	Lawson, B.	15
Mcconnell, Keith & Sally	15	Leontini, J.	20
Buck, Lesley	15	Ryan, Mrs L.	20
Holmes, Nancy & Marg	10	In Memory of Leslie Teal	
Hunt, Mavis	10	Teal, Heather	20
Hastings, M. D. & H.	20	In Memory of C. Williams	
Rogers, A.	20	Williams, Mrs Tania	100
Suckling, Gwen & Russ	10		
Judith, N. J. & J.	50	Auxiliaries	
Johnstone, Linda	20	Camperdown Fete Committee	11,937
Dixon, Alan	10	Camperdown Hospital Auxiliary	30,000
Smith, Jean & George	10	Camperdown Trolley Auxiliary	2,300
Sheedy, Elsie	10	Cycle Relay Committee	9,469
Woods, L. & B.	10	Lismore Ladies Auxiliary	5,300
Hickey, Daphne	10	Staff Auxiliary	6,000
Holmes, Snow & Marg	10	SWH Ladies Auxiliary	12,000
In Memory of Andrew Keith		Woolsthorpe Auxiliary	1,500
Nicholls family	20		
In Memory of Edna Kelly			
Coleston, S.L.	50		
Cooper & Madden families	50		
Evergreen Craft Group	25		
Gray, Edna	10		
Holy Eucharist School	50		
Lane, Thelma	10		
O'Byrne, Valerie	25		
Royals	20		
Rutter, Hazel	10		
Sisters of Mercy	20		

Reporting Requirements

In accordance with the requirements of the Directions of the Minister for Finance part 9.1.3(iv) under the Financial Management Act 1994 the following information has been prepared and is available upon request, where applicable:

- declarations of pecuniary interest;
- details of publications produced;
- details of changes in fees, charges and rates charged by the entity;
- details of any major external reviews;
- details of overseas visits;
- details of major promotional, public relations and marketing activities undertaken by the entity to develop community awareness of the entity and the services it provides;
- details of assessments and measures undertaken to improve the occupational health and safety of employees;
- general statement on industrial relations within the entity and details of time lost through industrial accidents and disputes;
- list of major committees sponsored by the entity, the purposes of each committee and the extent to which the purposes have been achieved.

Consultancies

Three consultancies at a total cost of \$30,916 were conducted during the report year.

Building Act 1993 Compliance

The Building Services Agency was commissioned to undertake a Buildings Standards and Condition assessment of specified facilities under its control.

The assessments were undertaken to meet the requirements of the Minister for Finance guideline 'Standards for publicly-owned buildings.' Work has been carried out according to the assessments of the Building Services Agency.

Competitive Neutrality Policy Statement

In April 1995, the Council of Australian Governments (COAG) agreed to implement a National Competition Policy.

The Victorian State Government has supported this initiative by issuing, in 1996, a Competitive Neutrality Policy of its own, which applies to organisations including public hospitals and associated facilities.

South West Healthcare has implemented competitive neutral pricing principles for all new contracts for services provided to the private sector, to ensure a level playing field.

This list does not include anonymous, departmental or confidential donations, and amounts less than \$15.

Compliance Index to Disclosure Requirements

The Annual report of the Entity is prepared in accordance with the Financial Management Act 1994 and the Directions of the Minister for Finance. This index has been prepared to facilitate identification of compliance with statutory disclosure requirements.

Clause	Disclosure	Page(s)
Report of Operations		
Charter & Purpose		
9.1.3 (i) (a)	Manner of establishment and Relevant Minister	35, IBC
9.1.3 (i) (b)	Objectives	3
9.1.3 (i) (c)	Services provided and persons or sections of community served	15
Management & Structure		
9.1.3 (i) (d) (i)	Names of governing board members, Audit Committee & Chief Executive	6
9.1.3 (i) (d) (ii)	Names of senior office holders and brief description of each office	7
9.1.3 (i) (d) (iii)	Chart setting out organisational structure	14
Financial and other information		
9.1.3 (i) (e)	Workforce data and application of merit & equity principles	12
9.1.3 (i) (f)	Application and operation of FOI Act 1982	15
9.1.3 (ii) (b)	Summary of significant changes in financial position	5, 20, 22, 24, 25, 30
9.1.3 (ii) (c)	Operational objectives for the year and performance against those objectives	4
9.1.3 (ii) (d)	A financial analysis of operating revenues and expenses	27
9.1.3 (ii) (e)	Major changes or factors affecting achievement of objectives	4
9.1.3 (ii) (g)	Number and total cost of consulting engagements, each costing < \$100,000	35
9.1.3 (ii) (h)	Extent of compliance with Building Act 1993	35
9.1.3 (ii) (i)	Statement that information listed in Part 9.1.3 (iv) is available on request	35
9.1.3 (ii) (j)	Statement on implementation and compliance with National Competition Policy	35
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9.2.3 (ii) (e)	Depreciation, amortisation or diminution in value	27
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9.2.3 (iii) (a) (iii)	Receivables, including trade debtors, loans and other debtors	28
9.2.3 (iii) (a) (iv)	Other assets, including prepayments	28
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9.2.3 (iii) (b) (v)	Provisions, including employee entitlements	29
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9.2.3 (iv) (d)	Government grants received or receivable	22, 24
9.2.3 (iv) (e)	Employee superannuation funds	29
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