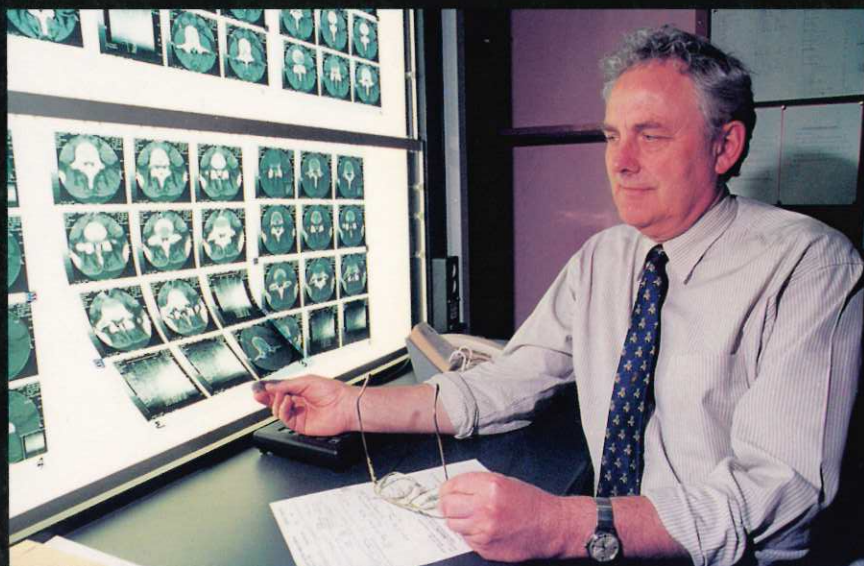


141st Annual Report 1994-95
Warrnambool & District Base Hospital



Mission Statement

To provide
 comprehensive,
 high-quality, local
 health care services
 to the community.

Hospital Objectives

To provide health care to all members of the community, whether as inpatients, outpatients, or domiciliary patients, achieving the highest standards of patient care and community health;

To organise and provide regional services in conformity with the State Government Program for Regionalisation of health services;

To organise and utilise appropriate physical and personnel resources, knowledge and technologies available to:

- (i) promote health;
- (ii) be responsive to the community's needs;
- (iii) prevent, treat and alleviate diseases, disability and injury.

To foster continuing improvement in standards and development of the individual through education:

To undertake and to provide facilities for the clinical experience and education of medical nursing and other health personnel in training;

To maintain acceptable standards, through provision and evaluation of an effective and ongoing quality assurance program throughout the organisation.

On the cover:

Top: The Midwifery Ward's Special Care Nursery was significantly upgraded during 1995, giving an excellent facility for the care of neonates.

Centre: Pathology services were privatised in April 1995, with Gribbles Pathology establishing its laboratory in the former Hospital Pathology Department.

Bottom: Radiology services are also being privatised; incoming provider Warrnambool Radiology has committed to a major upgrade of medical imaging facilities in the 1995/96 financial year.



Warrnambool & District Base Hospital
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Contents

- 2 In Review: a year of consolidation and development
- 3 141st Annual Report
- 12 Office Bearers
- 14 Principal Committees
- 16 Child and Adolescent Services
- 18 Research and Education
- 20 Total Quality Management
- 21 Fundraising
- 22 Future Development
- 23 Staff, 1994/95
- 27 Life Governors of the Hospital
- 28 Statistics – Five Year Trends
- 29 Service, Activity and Efficiency Measures
- 30 Comparative Costs and Statistics
- 31 Consolidated Comparative Financial Results, Costs Under Casemix and Program Funding
- 32 Hospital Services, Bed Analysis
- 33 Financial Reports (indexed separately)
- Inside back cover Development Over 141 Years

In Review

A Year of Consolidation and Development

The 1994/95 year provided an opportunity for the Hospital to consolidate and build on the developments of previous years.

Since the introduction of Casemix funding, the Hospital has treated a record number of patients with the number of acute inpatients treated in 1994/95 increasing by 10 per cent to 11,719.

The improvements in inpatient activity was also reflected in other areas, particularly the Psychiatric Services Division, which consolidated its transition from an institutional-based service to a community-based care model, and this was reflected in the 20 per cent increase in community based contacts.

Despite funding difficulties, all sections of the Hospital, including Corio House Nursing Home and the Central Linen Service, recorded operating budget surpluses for the year.

These operating surpluses were assisted by the savings and cost reductions brought about by the privatisation of the Hospital's Pathology (now operated by Gribbles Pathology) and Medical Imaging (Warrnambool Radiology) Departments.

Highlights of the Year

Patient Services:

- Record levels of patient throughput and inpatient numbers;
- Average length of stay reduced by 7 per cent;
- Upgrade of Neonatal (Ward 7) Nursery.
- Ward refurbishment program continued.
- Community based teams (Psychiatric Services) fully established in Warrnambool, Hamilton, Portland and Camperdown.
- Increased levels of community client contact by the Psychiatric Services Division.

Finance

- Consolidation of patient services and throughput under Casemix funding.
- Operating surpluses recorded by all sections of the Hospital.

Capital Works and Equipment

- Hospital Chapel completed.
- Approvals granted to construct a \$2.5 million Acute Psychiatric Unit and to proceed to tender readiness stage for the \$3.5 million redevelopment of the Operating Theatre Suite/CSSD.
- Significant capital works and expenditure on equipment in other areas.



This is the 141st Annual Report of the Warrnambool and District Base Hospital, its nursing home Corio House, Psychiatric Services and the Central Linen Service presented on behalf of the Board of Management for the year ended 30 June, 1995.

Overview

During 1994/95 the Hospital continued to build on the developments of recent years.

Patient activity levels reached record levels. The number of acute inpatients treated increased by 10% in response to increasing demand for Hospital services and resources provided under the casemix funding system.

Reforms to the Psychiatric Service continued with the ongoing development of community-based services. Community based teams in Warrnambool, Hamilton, Portland and Camperdown are now fully established resulting in a considerable expansion of services as demonstrated by a 20% increase in community based contacts.

The developments within the Psychiatric Service were achieved despite a significant budget cut and the stigma that remains associated with psychiatric illness. The Hospital continues to strive to overcome this community ignorance and promote the reforms so essential to meet the needs of the psychiatrically ill within south-west Victoria.

The Hospital continued to improve facilities for patients with a comprehensive ward refurbishment program. Approvals were granted during the year to construct a \$2.5 million acute psychiatric unit and to proceed to tender readiness with a \$3.5 million refurbishment of the Operating Theatre Suite. Planning for both projects is well advanced with construction of the acute psychiatric unit expected to commence in late 1995.

Financially, the Hospital has been proactive in cost containment and this has resulted in financial surpluses being recorded for Acute Services, Corio House, Central Linen Service and Psychiatric Services.

141st Annual Report



Board of Management President,
Barbara Piesse

Consistent with Hospital and state-wide trends, the average length of time that an acute inpatient remained in Hospital decreased by 7% from 3.67 days in the prior report year down to 3.42 days.

The increased patient throughput has had a positive impact upon the Hospital's elective surgery waiting list. On 30 June, 1993 the Hospital's waiting list stood at 305 patients. By 30 June, 1994 the Hospital waiting list had decreased to 131 patients which by 30 June, 1995 had further decreased to 96 patients.

Prior to 30 June, 1993 the size of the Hospital waiting list was of concern and the adoption of casemix funding has greatly assisted in subsequent reductions.

Although the size of the Hospital waiting list is relatively small, the majority of patients are ophthalmology cases and this growth has been due to the Ophthalmologist commencing full-time practice in Warrnambool.

The Hospital is also concerned at the very high cost of providing ophthalmology services. Consequently, this matter is

Statistical Trends

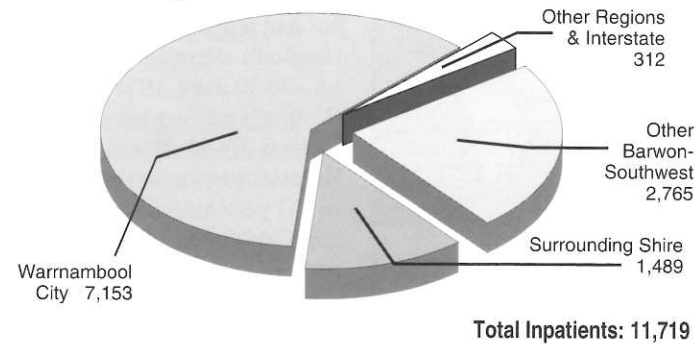
During the year the number of acute inpatients increased dramatically to 11,719 representing a 10% increase over the previous year. The major factors behind this increase were that all 155 acute beds were open, previous restrictions that applied to selected procedures were lifted and alterations to bed configurations within the Hospital resulted in improved productivity.



Rehabilitation ward nurses Angela Moran (left) and Ann Montigue adjust a Continuous Passive Motion (CPM) machine for patient Mrs Barbara Spencer. CPM machines give controlled flexion and extension of a limb, and are used to exercise joints after orthopaedic surgery.

Inpatient Sources 1994-95

Warrnambool and District Base Hospital is the sub-regional referral centre for Victoria's Barwon-Southwestern region. While nearly 74% of inpatients came from Warrnambool City, just over 26% of inpatients were from other areas of the southwest or from outside the region, reinforcing the Hospital's regional role in healthcare delivery.



currently under review and discussions have been initiated with Health & Community Services.

Major and minor operations within the Hospital continued to increase to a level of 4,578 procedures representing a 5% increase over the previous year.

In contrast the number of births decreased from 605 births the previous year by 7% to 563 births in the report year.

The ongoing reforms and improvements to the Psychiatric Service are readily evident from statistical data.

Community based psychiatric services contacts increased by 20% from 63,230 to a level of 75,578. At the same time there was a 20% reduction in admissions to the acute psychiatric unit, Lewana Clinic with inpatients treated decreasing from 301 in the previous year to 241 in the report year.

The change in statistics reflect the impact of the community based model of care which places emphasis on early intervention and treating appropriate clients in the community.

A comprehensive report on Hospital statistics is detailed elsewhere in this Report.

Facility Upgrade

Since the introduction of Casemix funding, considerable

The Hospital's new Chapel provides for a range of ecumenical services. Inset: a detail of the Chapel window, created by district leadlight artist Jill Edwards.



planning has been undertaken to determine the optimum location of Hospital wards/departments, setting priorities and assessing both the adequacy and standard of ward accommodation and facilities.

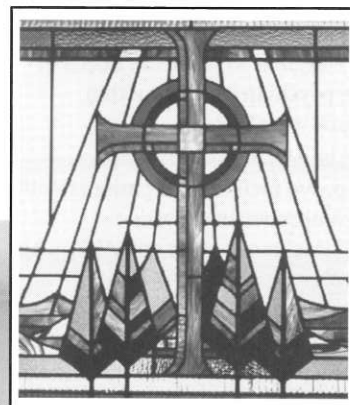
This process is co-ordinated by the Hospital's Ward Refurbishment Committee with a view to arranging scheduled upgrade and modernisation of ward areas.

Wards 3 (Child & Adolescent Ward), 6 (Medical/Surgical Ward) and 7 (Midwifery Ward) were upgraded and refurbished throughout the year and this involved the replacement of carpets, curtains, painting and some minor structural alterations.

In addition to this, a number of building projects were undertaken throughout the course of the year and these included:-

- Neonatal Nursery (Ward 7) Upgrade;
- Modification of Emergency Department (Reception and Waiting Area);
- Hospital Chapel;
- Relocation of Nursing and Medical Administrations to the mezzanine level of the Hospital.

The Hospital is delighted with the outcome of these projects and in particular the establishment of the ecumenical Hospital Chapel



and the much needed upgrade of the Ward 7 Neonatal Nursery.

Special thanks and appreciation is extended to the Warrnambool Rotary Clubs, the Hospital's Staff Auxiliary, Midwifery Auxiliary and the trustees of the Ray & Joyce Uebergang and Ern Hartley Foundations for their financial assistance in helping bring these respective projects to fruition.

The continued fundraising efforts of the various Hospital Auxiliaries/volunteers and the ongoing financial support and donations from the public all contribute to enable the Hospital to carry out these essential capital works that assist in the ongoing high delivery of patient care.

The Hospital has commissioned an independent assessment of its compliance under the building and maintenance provisions of the Building Act 1993. An assessment of the building fabric has been completed.



Left: Garry Aggett, senior nurse clinician with the Portland Psychiatric Services team, consults with a client. Psychiatric services teams are located in Warrnambool, Camperdown, Portland and Hamilton, and form the focus of the Hospital's community-based psychiatric care, which emphasises early intervention and active community management, rather than institutional care, for the majority of clients.

Below: relocation and refurbishment has provided the Portland psychiatric services team with spacious treatment and office areas.



Operating Budget Results 1994-95

Acute Care Services*	\$74,871	Surplus
Corio House Nursing Home*	\$2,500	Surplus
Psychiatric Services*	\$18,080	Surplus
Central Linen Service	\$1,847	Surplus

* Subject to final grant adjustments.

In respect to Psychiatric Services the following projects were undertaken utilising an infrastructure (annual provisions) grant provided by Health and Community Services:

- Upgrade of Safety and Security;
- Refurbishment and Upgrade of the Sub-sector accommodation at both Hamilton and Portland;
- Upgrade of Moore Street Housing complex;

■ Refurbishment of Psychiatric Services properties.

The financial assistance of Health and Community Services in providing funding for these projects is greatly appreciated.

Regional Co-Operation

There has traditionally been a high level of co-operation between hospitals and other health services within Warrnambool and region. The vital importance of such arrangements has been brought into increasing focus, due to the recognition of the need for better discharge planning and co-ordination of patient care. The Metropolitan Hospital Planning Board, although directly concerned with the Melbourne area, also has an emphasis on the integration of health services.

With this in mind, the Executive of the Warrnambool & District Base Hospital has had fruitful meetings with the Executive of Hamilton, Portland, Port Fairy and St. John of God Hospitals. Regular meetings with Lyndoch, Warrnambool Inc. also occur. Practical co-operation in many areas has ensued. Of particular importance is a proposed consultancy to develop a regional medical services plan. This will advise on specialist medical workforce and recruitment issues relating to the whole region.

Acute Psychiatric Unit

As part of the ongoing reforms and development of psychiatric services the construction of a new acute psychiatric unit on the main hospital campus is a major priority.

For this reason the Hospital was delighted to be allocated funding of

Financial Performance

Productivity savings have been achieved in all areas of the Hospital through non replacement of staff and the roll over effect of Government funded Voluntary Departure Packages implemented in the prior financial year. Acute inpatient separations rose from 10,562 in 1993/94 to 11,621 (10%) however changes in the casemix formula meant that the weighted equivalent inlier separations dropped from 9,346 to 9,194.

A summary of financial and statistical performance in each segment of the Hospital activities is as follows:

1. Acute Hospital Program

The following key objectives were achieved:

(i) Inpatient throughput within 1% of target

Indicator	Target	Result
Separations	11,500	11,621
Weighted Cases*	9,258	9,194

* The objective in 1994/95 was to achieve weighted throughput close to target in order to maximise service within casemix funding constraints. Throughput over target would have attracted government funding per case at a rate significantly lower than cost.

(ii) Operating Surplus \$74,871

Grants for fixed overheads, training and development and outpatients were cut by \$1.15 million in 1994/95 necessitating implementation of additional efficiencies. The cuts were achieved and a moderate surplus was generated as a result of productivity improvements.

2. Psychiatric Services

Psychiatric Services is funded as a separate entity and achieved a surplus of \$18,080 after accommodating a budget cut of \$1.5M. Service results were as follows:

Indicator	Target	Result	Prior Year
Community Contacts	73,700	75,578	63,230
Inpatient beddays	8,400	8,629	9,281

Community Contacts rose 20% on the prior year reflecting a planned shift of resources from institutional to community care.

3. Aged Care Program

The four service components of aged care achieved satisfactory results:

Indicator	Target	Result
Rehabilitation Beddays	4,343	4,810
Day Hospital Attendances	14,153	13,285
District Nursing Attendances	23,237	24,269
Corio House beddays	16,260	16,060

Corio House is funded separately under the CAM/SAM funding formula and achieved a surplus of \$2,500.

4. Central Linen Service

The Central Linen Service achieved a surplus of \$1,847 and production at 908,326 kilograms was 3% higher than in 1993/94. Major efficiencies were implemented in order to obtain the productivity increases necessary to achieve service targets with significantly reduced funding. All staff have been supportive of the need for efficiencies.

Detailed financial statements, based on accrual accounting, are contained elsewhere in this report.

\$2.5 million for the design and construction of a new acute psychiatric unit. Planning commenced during the year and construction is expected to commence in late 1995.

This new facility will enable the Hospital to vacate the former Brierly Hospital site which carries the stigma of past psychiatric practice.

This 65 acre site, complete with golf course, sporting ovals and a multitude of deserted buildings represents a significant drain on the resources of the service.

Location of the new acute psychiatric unit on the main Hospital campus will not only assist in de-stigmatising psychiatric illness, but resolve the problems associated with the isolation and physical layout of Lewana Clinic.

The support of Mr J. McGrath, Member for Warrnambool and Health & Community Services, particularly the Psychiatric Services Branch in supporting this project is gratefully acknowledged.

Operating Theatre Redevelopment

During the year approval was granted by Health & Community Services to proceed to tender readiness with the Operating Theatre Redevelopment project.

Since construction of the existing Operating Theatre Suite in the early 1960's the role and throughput of the Hospital has increased dramatically.

As a consequence the Suite is inadequate to meet these demands and has major deficiencies in respect to physical layout, traffic flow, inadequate recovery room space and inadequate facilities particularly change rooms and storage.

Significant work has been undertaken in design development and the estimated cost of renovations is \$3.5 million.

The Hospital is anxiously awaiting advice from Health & Community Services on the timing of funding for construction as the deficiencies with the Operating Theatre Suite act as an impediment to improving productivity and maximising throughput.

Privatisation of Medical Imaging

In 1993 the Hospital advertised for expressions of interest from radiology providers interested in assuming responsibility for the Hospital's medical imaging department. Only one expression of interest was received, from Hider Street Radiology.

Protracted negotiations continued over the ensuing years and as agreement, mutually acceptable to both parties, could not be reached the Hospital re-advertised in an attempt to finalise the matter. Interested providers were invited to submit a tender based on a detailed specification prepared by the Hospital.

Following an exhaustive selection process the tender for the provision of medical imaging services was awarded to Warrnambool Radiology. The principals of Warrnambool Radiology are Dr Paul Walker and Dr Rohan White.

Upon the result of the tender being announced, the existing radiologists, Hider Street Radiology, indicated that they did not wish to provide a service during the interim period. Although not fully organised to commence providing a service at that time, Warrnambool Radiology immediately put interim arrangements in place to provide a service to the Hospital. The Hospital and our patients are indebted to Warrnambool Radiology for their invaluable assistance during this difficult period.

A long-term contract has been negotiated with Warrnambool Radiology. As part of the contract Warrnambool Radiology will provide a comprehensive service and will re-equip the department with new state of the art radiology modalities, including C.T. Scan, ultrasound and general radiology equipment.

Plans were finalised to refurbish the Department and construction commenced in late 1995. The fully privatised service is to commence in October 1995.

The Hospital looks forward to a long and mutually beneficial



Volunteer Mrs Marie Deans assists patient Mrs Hilda O'Connell. Mrs Deans, who co-ordinated the Hospital's volunteers during 1994, is one of over 100 people who donate their time to the Hospital. Volunteers perform many functions, including assisting with patient admission and discharge, library duties, flower arranging, and providing general companionship and assistance to patients.

relationship with Warrnambool Radiology.

Privatisation of Pathology

The decision was taken during the year to privatise the Hospital's Pathology Department and the major reasons behind this were concerns about the loss of revenue due to the establishment of a further pathology provider in Warrnambool and the Hospital being excluded from receiving the Patient Episode Initiation fee. Currently this fee is only paid to private pathology providers and is in addition to the other fees paid by the Commonwealth for undertaking tests.

Following analysis of the tenders received and an interview process the tender was awarded to Gribbles Pathology. A five year contract was negotiated and transition arrangements were completed in a smooth and timely fashion.

Board of Management

During the year five positions on the Board of Management were advertised. Four positions were advertised due to the effluxion of time while the fifth position became available due to the resignation of Mrs Diane Clanchy following ten years of service to the Hospital.

The four retiring members were:

Mr Stan Carroll;
Mabel Mitchell;
Mr John Samon;
Mr Adam Fligelman.

The above retiring members were subsequently reappointed by the Governor in Council for a further three year term expiring on 31 October, 1997.

The Hospital was also very pleased to welcome Mr Bill Phillpot to the Board of Management. He brings to the Board an extensive knowledge of accountancy, financial management and fundraising which will complement the existing skill base.

Board members provide services to the Hospital in an honorary capacity and in recent years have addressed many difficult and contentious issues including budget cuts, privatisation of hospital services and the reform of psychiatric services.

The very sound financial position and good performance of the Hospital is an indication of the conscientious manner in which Board members take their duties.

Life Governors

Annually the Board of Management appoints Life Governors in recognition of outstanding service to the Hospital.

Executive Staff

The Hospital's Executive is the principal management team for day-to-day decision-making.

Comprising the Chief Executive Officer and the Divisional Heads of the Hospital's Medical, Nursing, Psychiatric, Administrative and Finance Divisions, the Executive meets weekly to discuss Hospital-wide issues and to co-ordinate major projects.

The report year has consolidated the Executive's strategic success in the 1993/94 financial period, during which the introduction of casemix funding, together with budget cuts, necessitated significant restructuring of the Hospital.



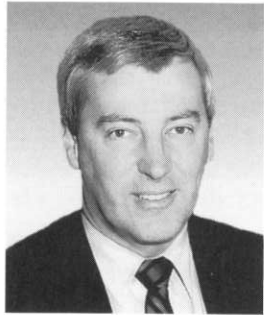
Mr Andrew Rowe,
Chief Executive Officer



Mr Sandy Morrison,
Director of Administrative
Services



Meg Ryan,
Director of Nursing
Services



Dr Peter O'Brien,
Director of Medical
Services



Mr Ken Burnett,
Executive Officer,
Psychiatric Services



Mr Ian Barton,
Director of Finance

During 1994/95 the Board of Management appointed the following Life Governors:

Board of Management Nomination –

Mrs Diane Clanchy;

Senior Ladies Auxiliary –

Mrs Ivy Hollingsworth

Junior Ladies Auxiliary –

Mrs Jan Aitken

Woolsthorpe Auxiliary –

Mrs Margaret Richardson.

Dr John Christie

In June, 1994 Dr John Christie resigned as Director of Medical Services following four years of service. During this period John's achievements were many and varied and included involvement in the completion of the Allied Health building project, contract negotiations with Visiting Medical Officers, the successful integration of Psychiatric Services, the introduction of casemix funding and cost containment.

He leaves the Hospital with our appreciation for his service and we wish him every success in his new role as Team Leader of the Hospital Management and Operations Improvement Project in Papua New Guinea.

As part of the project, John organised a major seminar in March, 1994 for the Chief Executive Officers and Presidents of the fourteen hospitals in Papua New Guinea that currently have appointed Boards.

The President and Chief Executive Officer accepted an invitation to speak at the conference on the respective roles and functions of Chief Executive Officers and Boards.

Appointment of New Medical Director

In April, 1995 Dr Peter O'Brien commenced duties as Director of Medical Services. Peter joins the Hospital with extensive experience

gained with the Royal Flying Doctor Service, Wangaratta District Base Hospital and Benalla & District Memorial Hospital.

Peter is well qualified for the position having graduated in 1994 with a Masters degree in Health Administration from the University of New South Wales.

Rehabilitation Consultancy

During early 1995, Health & Community Services commissioned a consultancy on rehabilitation services for Warrnambool and region. Warrnambool & District Base Hospital has a very active 15 bed acute rehabilitation unit and Lyndoch, Warrnambool Inc. is attempting to establish a complementary slow stream rehabilitation unit.

The Consultant, Dr Toni Hogg, in her report delivered in June 1995, endorsed such an arrangement. Dr Hogg emphasised the need for the appointment of a regional

Rehabilitation Specialist to allow better co-ordination and integration of an already excellent service.

Executive staff of both Warrnambool & District Base Hospital and Lyndoch are pursuing the required funding to facilitate the appointment of a Rehabilitation Specialist.

Specialist Medical Services

A second Orthopaedic Surgeon, Mr Michael Dooley, has been appointed to the Warrnambool & District Base Hospital. Mr Dooley will commence in Warrnambool in September 1995.

We are extremely pleased with the appointment of such a highly regarded practitioner. Mr Dooley will make a considerable contribution to this Hospital and the patients we serve.

Dermatology Clinics provided by Visiting Specialist Dermatologists commenced in June 1995. Whilst clinics are initially bi-monthly, it is expected that monthly clinics will occur should demand be sufficient.

Ambulance Service Tender

Tenders were sought during June 1995 for the provision of non time critical ambulance services to the Warrnambool & District Base Hospital.

Six tenders were received and following interviews the Ambulance Service Victoria was chosen as the successful tenderer.

Ambulance Service Victoria is able to offer a co-ordinated and comprehensive service at a very competitive price.

This Hospital has consequently been pleased to be in a position to continue its long association with the Ambulance Service Victoria.

Patient Satisfaction Survey

During May 1995, the Hospital participated in a statewide Patient Satisfaction Survey. The purpose of the Health & Community Services survey was to evaluate the quality of care from a patient's perspective.

Thirty hospitals across the State participated in this process and our Hospital was allocated a three

Capital Projects and Major Equipment Purchases

Annually the Hospital has a requirement to maintain equipment and facilities in order to maximise the quality of services provided to both inpatients and outpatients.

Despite funding restrictions the Hospital has been successful in attracting a number of grants from Health & Community Services as well as receiving funds from donations, fundraising and other income generated by the Hospital.

Although the following list is not exhaustive, it indicates major equipment purchases and projects by funding sources.

1. Health & Community Services:	\$
Clinical costing and Hospital feeder system	98,500
Emergency Department computer upgrade	30,650
Dental program equipment grant	21,090
District Nursing Service relocation & equipment	11,300
Managed care program	7,200
Hospital in the Home	26,000
2. Health & Community Services – Casemix Grant:	
Assorted medical equipment	288,400
3. Health & Community Services – Psychiatric Services Annual Provisions:	
Safety and security upgrade	70,000
Refurbishment of premises –Hamilton/Portland	50,000
Renovations Moore Street housing complex	50,000
Refurbishment to accommodation	50,000
E.C.T. machine equipment grant	13,800
4. Hospital Capital Budget:	
4.1 Acute Services:	
Upgrade neonatal nursery	52,704
Hospital Chapel	30,454
Ward Refurbishment program	19,000
Fluid control monitors – Haemodialysis	8,390
Relocation of Medical & Nursing Administration	71,328
Computer upgrade	32,505
Audiometer	5,580
Pulse oximeter	6,550
Washer disinfectant and dryer – Theatre	53,491
4.2 Psychiatric Services	
Computing equipment	18,058
Telephone system	4,500
Teleconferencing equipment	80,250
Residential accommodation upgrade	49,800
4.3 Corio House:	
Painting	19,000
Fire alarm control panel	2,660
4.4 Central Linen Service:	
Linen truck	47,992
Sewing machine and overlocker	3,723



Physiotherapy student Jane Poole conducts a diversional therapy session at Corio House, the Hospital's 45 bed nursing home.

week period to gather sufficient number of consenting patients to participate in the survey.

The survey was conducted by TQM Research, Melbourne and involved approximately 300 patients who had been discharged from hospital during May, 1995.

A report of survey results is to be available to Health & Community Services by the end of July, 1995. It is anticipated that a specific report of the results for our Hospital will be available by late 1995.

Corio House Nursing Home

For some time now, the Hospital has been concerned about the fabric of the Corio House facility.

Repeated requests to Health & Community Services over many years for funding to enable the upgrade and redevelopment of Corio were unfortunately unsuccessful.

The Hospital was also not in a position to finance the construction of a new nursing home at a cost in excess of \$1M.

As a consequence, and following a review of options, the Hospital decided to pursue privatisation and so, through advertisement, expressions of interest were sought from organisations interested in acquiring the 45 nursing home beds and constructing a new nursing home facility.

Regrettably, this process has been delayed and advice is still

being awaited from Health & Community Services with whom the Hospital is continuing to meet in an endeavour to progress the privatisation of Corio House.

Rural Health Unit

In conjunction with The University of Melbourne, the Hospital has established a Rural Health Unit.

This Unit will seek to improve health care service delivery within south-west Victoria by improving clinical competence through education programs, research and community liaison.

A multi-disciplinary Advisory Committee has been formed with representation from Melbourne and Deakin Universities, the Otway Division of General Practice, the community and the Hospital.

Marketing Committee

A Hospital Marketing Committee was established towards the end of the last financial year and its main purpose is to develop appropriate marketing strategies to assist in promoting a positive image of the Hospital to the community and to also raise community awareness of the range of services available.

The committee has been very pro-active in promoting the Hospital and has arranged for market research to be undertaken to assist in this regard.



Podiatrist Rebecca Simpson performs surgery to correct a severe ingrowing toenail.

Hospital Publications

While the Annual Report is the Hospital's major publication each year, a range of other literature is produced for education and information purposes. In 1994/95, publications were:

- 'Baselines' Hospital newsletter.
- Western Region Diabetes Education Special Interest Group: Report on activities to the Australian Diabetes Educators Association Annual General Meeting.
- Home oxygen booklet.
- Rehabilitation Ward information sheet.
- Post procedural patient information leaflets for: Chemotherapy; Arteriography; Abdominal hysterectomy; Lumbar myelography; Total knee replacement.

Legislative Changes

The Hospital is an incorporated body under, and is regulated by the Health Services Act 1988 and each year brings changes to state or federal legislation that impact in some way on Hospital operations. During the 1994/95 report year, the Medical Practitioners Act 1970



The Central Linen Service increased production by three per cent in 1994/95, processing more than 900,000 kilograms of linen.

was repealed, with other relevant legislation being:

- Drugs, Poisons and Controlled Substances (Amendment) Act 1994.
- Employee Relations (Amendment) Act 1994.
- Equal Opportunity Act 1995.
- Financial Management (Amendment) Act 1994.
- Financial Management and Audit Acts (Amendment) Act 1995.
- Health Acts (Amendment) Act 1995.
- Health Service (Amendment) Act 1994.
- Health Services (Metropolitan Hospitals) Act 1995.
- Infertility Treatment Act 1995.
- Medical Practice and Nurses Acts (Amendment) Act 1995.
- Superannuation Acts (Further Amendment) Act 1994.
- Superannuation Acts (General Amendment) Act 1995.
- Therapeutic Goods (Victoria) Act 1994.

Staff

The many advancements achieved by the Hospital during the year could not have been achieved without the assistance of staff.

The Board of Management and Executive staff wish to record appreciation to all staff for their co-operation and support throughout the year.

Equal Employment Opportunity

Equal Employment Opportunity (EEO) has maintained its important focus in all aspects of the Hospital's operations, particularly in regard to Human Resources policies and practice.

Staff education in such matter begins at induction, and has been reinforced by formal training sessions and staff newsletter articles.

Gender specific workforce statistics are presented within this Annual Report.

Employee Relations

Employee relations have continued to develop in a consultative and co-operative manner.

Despite statewide issues resulting in some nursing work bans during the report period, this financial year again reflected the Hospital's constructive and positive employment relationships with no time lost as a result of industrial action.

A.E.W. Matthews Memorial Travelling Scholarship

The 1995 recipient of the scholarship was Donna Gedye, a Clinical Nurse Specialist in the Midwifery Unit.

Donna intends to travel to the United States and observe the clinical application of managed

care in obstetric units including St. Mary's Hospital Tuscan, Franklin Medical Centre, St. Elizabeth's Hospital and Newton-Wellesley Hospital in Boston, Massachusetts.

Overseas Travel

In October 1994, Psychiatric Services Director of Clinical Services Dr Graeme Ridley, Western Sector Adult Psychiatric Services Team Leader Ms Tamara Irish, Staff Development Officer Ms Janet Punch and Warrnambool Adult Team senior nurse clinician Mr John Parkinson attended a conference on the optimal clinical treatment of schizophrenic disorders, held in Auckland, New Zealand.

Conclusion

By all measures the 1994/95 year was extremely successful with record levels of activity being achieved and financial surpluses being recorded in all Hospital entities.

Services to the community were expanded and reforms to the Psychiatric Services continued in line with national and state-wide directions.

The Hospital successfully met the challenges of 1994/95 and looks forward to the coming year with confidence.

Barbara Piesse

Barbara Piesse
President

A.R. Rowe

A.R. Rowe
Chief Executive Officer

Office Bearers 1994-95

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 and manage the Hospital;
- to ensure that the services provided by the Hospital comply with the requirements of the Health Services Act 1988, and with the Objects of the Hospital.

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.

Executive Staff

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., A.F.A.I.M., C.H.E.

Director of Administrative Services

Mr A. Morrison B.H.A. (U.N.S.W.), A.F.C.H.S.E., C.H.E.

Director of Medical Services

Dr J. Christie D.M.S., D.T.M.&H. (LIV), F.A.F.P.H.M., F.R.A.C.M.A., M.A.C.T.M. (Resigned during report year)

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.

Director of Nursing Services

Miss M. Ryan R.N., M.H.A. (U.N.S.W.), R.M., Cert. Intensive Care, Grad.Dip.H/Admin., F.R.C.N.A., A.F.C.H.S.E., C.H.E.

Executive Officer, Psychiatric Services

Mr K. Burnett B.A., B.S.W., R.P.N., A.A.M.C., A.A.S.W.

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.

Commercial Appointments

Auditors

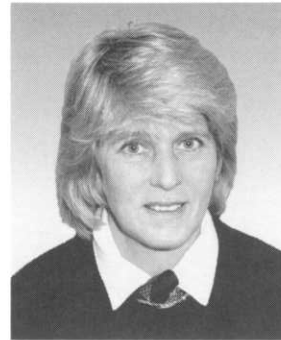
Coffey, Hunt & Co.

Solicitors

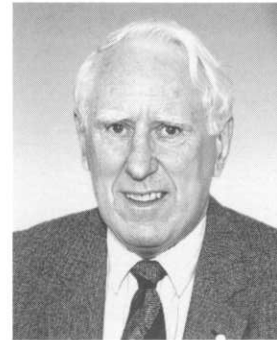
Mackay, Taylor & Co.

Bankers

Australian & New Zealand Banking Group Ltd.



President:
Barbara Piesse, LL.B.
Lecturer in Law.
Appointed to the Board September 1983.
Chairperson: Multi-disciplinary Ethics, Executive, Medical Appointments Advisory, Medical Consultative, Nursing Consultative, Patient Services & Review, By-Laws and Staff committees.
Ex Officio all sub-committees.



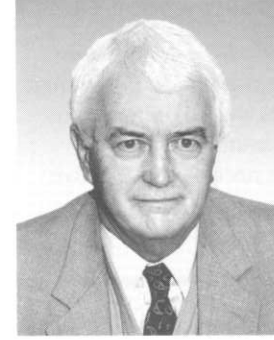
Senior Vice-President:
Mr J. Clark, A.Dip. Public Admin. R.M.I.T., M.A.C.S. Computing Consultant.
Appointed to the Board September 1983.
Chairperson: House and Works Committees and Pharmaceutical Advisory
Member: Executive, Finance, Joint Working Party - Lyndoch & W&DBH, Medical Appointments Advisory, Medical Consultative, Patient Services & Review and Staff committees.



Junior Vice-President:
Mr J. Samon, F.A.S.A., C.P.A., A.C.I.S.
Retailer.
Appointed to the Board September 1985.
Member: Audit, Executive, Finance, Medical Consultative, Special Purposes Pathology and Staff committees.



Treasurer:
Mr E.R. Northeast, D.D.A., A.S.A., F.V.L.E.(Val)
Consultant Valuer and Estate Agent.
Appointed to the Board September 1974.
Chairperson: Audit and Finance committees.
Member: Executive and Special Purposes Pathology committees.



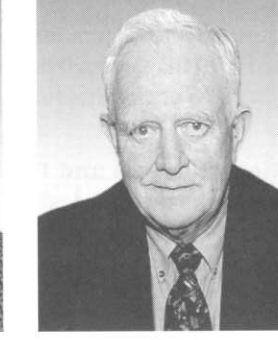
Mr S. Carroll, LL.B
Solicitor.
Appointed to the Board July 1977.
Member: House and Works, Joint Committee of Management, Medical Appointments Advisory, Nursing Consultative and Staff committees.



Mr A. Fligelman, M.B., B.S., F.R.C.S., F.R.A.C.S.
General Surgeon.
Appointed to the Board November 1991.
Chairperson: Division of Surgery.
Member: Finance committee.



Dr G. Irvine, M.B., B.S., D.(Obst.) R.C.O.G.
General Practitioner.
Appointed to the Board May 1988.
Member: House and Works, Nursing Consultative and Pathology Working Party committees.



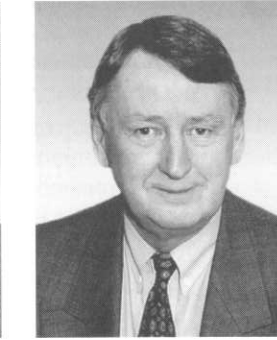
Mr F. Lodge, B.C.E., C.E., M.I.E.(Aust), CP Eng.
Retired Civil Engineer.
Appointed to the Board July 1977.
Member: House and Works and Nursing Consultative committees.



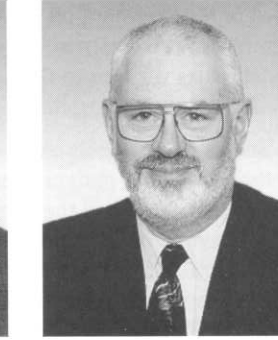
Miss M. Mitchell, R.N., R.M., B.App.Sc. (Nursing), Grad.Dip.(Computing).
Regional Palliative Care Nursing Officer.
Appointed to the Board November 1990.
Chairperson: Birthing Services Review.
Member: Finance, Patient Services & Review and Pharmaceutical Advisory committees.



Dr K.D. Nunn, L.D.S., B.D.Sc.
Dentist.
Appointed to the Board January 1982.
Chairperson: Joint Working Party - Lyndoch & W&DBH, Total Quality Management Co-ordinating and Ward Refurbishment committees.
Member: Executive, House and Works, Patient Services & Review, and Staff committees.



Mr W.B. Phillpot, F.C.P.A.
Accountant.
Appointed to the Board October 1994.
Member: Audit, Finance and House & Works committees.



Mr J.E. Wilson, F.R.M.I.T., Dip.Arch., A.R.A.I.A.
Architect.
Appointed to the Board January 1982.
Chairperson: Joint Committee of Management.
Member: Finance, House and Works, Medical Consultative, Special Purposes Pathology and Staff committees.

Principal Committees

Major Committees of the Board of Management

The Principal Committees of the Board of Management oversee major areas of Hospital function.

Patient Services and Review

Reports to the Board of Management on the overall quality, effectiveness, appropriateness and utilisation of patient services in the Hospital.

Conducts reviews of specific aspects of patient care and recommends corrective or preventive action as necessary.

1994/95: Routinely monitored patient throughput, waiting list statistics and specific reports on health care services, including the reforms to psychiatric services.

Multidisciplinary Ethics

Functions as an advisory body and considers, on referral, individual cases of ethical issues.

Makes recommendations to the Board of Management on policy matters and is concerned with ethical issues relating to the functioning of the Hospital.

Assesses all protocols covering research involving patients and ensures that they, and the conduct of the research itself, conform to the relevant National Health and Medical Research Council Guidelines.

1994/95: Consideration was given to a number of ethical and patient related issues and recommendations were made in respect of research protocols and ethical matters.

Pharmaceutical Advisory

Regularly reviews drug therapy in the Hospital with the aim of monitoring drug usage and costs.

1994/95: Increases in drug costs were minimised and a number of requests considered for the introduction of new drugs.

Medical Consultative

Considers matters that require resolution between the Board or its officers and the medical staff.

1994/95: There were no items that required resolution or reference to the Committee.

Finance

Examines financial reports prepared monthly under the direction of the Chief Executive Officer and makes any recommendations to the Board of Management it considers necessary.

1994/95: Achieved increased productivity, as evidenced by reductions in cost per patient treated in recent years, as well as implementation of major cost containment initiatives, resulting in budgetary surpluses for the financial year.

Staff

Interviews and determines the suitability of applicants for senior management positions and makes recommendations to the Board of Management.

Periodically reviews the Hospital's organisational structure and recommends appropriate changes to the Board of Management.

Considers industrial relations and employee related issues.

Responsible for considering applications for the A.E.W. Matthews Memorial Travelling Scholarship.

1994/95: Recruitment of well qualified senior management staff including the Director of Medical Services, and selection of Ms Donna Gedye, Clinical Nurse Specialist, as the A.E.W. Matthews Scholarship recipient for 1995.

House and Works

Monitors the maintenance of the Hospital grounds, buildings and equipment, and makes recommendations to the Board of Management on major and minor works, equipment, replacement and maintenance.

1994/95: Standards of buildings and facilities were monitored and have been maintained and/or upgraded as necessary. An active equipment upgrade program has been pursued.

Medical Appointments Advisory

Advises the Board of Management on the appointment of visiting medical practitioners, in accordance with the Hospital By-Laws.

1994/95: Appointment of a full range of visiting medical practitioners in accordance with the levels of medical specialists specified in the Hospital's Role and Function Statement.

Credentials

Responsible for defining the clinical credentials of all medical practitioners working within the Hospital, other than Hospital Medical Officers.

1994/95: Appointment of appropriately qualified medical staff in accordance with Hospital service requirements.

Total Quality Management Co-ordination

Responsible for co-ordinating the quality management/continuous improvement activities within the Hospital as well as overseeing the annual review of the Hospital's Total Quality Management Plan.

1994/95: A comprehensive Hospital-wide Total Quality Management Plan was developed and submitted to the Department of Health & Community Services. Quality management activities conducted within the Hospital were regularly monitored.

BOARD OF MANAGEMENT
Principal Committees

CHIEF EXECUTIVE OFFICER

Audit

Examines matters raised by the External Auditor and considers terms of reference for the internal audit.

1994/95: Internal audit findings were considered, and appropriate action taken on the recommendations contained in the report.

Joint Committee of Management (Acute Psychiatric Unit and Operating Theatre/CSSD Redevelopment)

Oversees the Acute Psychiatric Unit and Operating Theatre/CSSD Redevelopment Projects and ensures that function, cost and time parameters of the project are adhered to.

1994/95: Actively monitored the progress of both projects. Construction of the Acute Psychiatric Unit is scheduled for next financial year while an announcement on the availability of funding to enable commencement of the Operating Theatre/CSSD Redevelopment is expected in October, 1995.

Nursing Consultative

Considers matters that require consideration and/or resolution between the Board or its officers and the nursing staff.

1994/95: Considered a number of relevant issues including Enterprise Agreement with ANF (Vic. Branch) and the Nursing Services Organisational Structure.

DIRECTOR OF MEDICAL SERVICES

Deputy Director of Medical Services/
Accident & Emergency Supervisor
Visiting Medical Staff
Medical Department Directors
Drug & Alcohol Physician
Geriatrician
Pathologists
Radiologists
Hospital Medical Officers
Dental Surgeons
Medical Ancillary Department Heads

EXECUTIVE OFFICER PSYCHIATRIC SERVICES

Director of Clinical Services
Manager Service Development
Team Co-ordinators

DIRECTOR OF NURSING SERVICES

Resource Co-ordinator
Nursing Projects Officer
Education Manager
Unit Managers
Clinical Co-ordinators

DIRECTOR OF ADMINISTRATIVE SERVICES

Chief Engineer
Food Services Manager
General Services Manager
Human Resources Manager
– Occupational Health & Safety Manager
Supply Manager

DIRECTOR OF FINANCE

Deputy Director of Finance
Systems Manager

This organisational chart shows the management structure of the Hospital in simplified form. A fully-detailed chart is available from the office of the Chief Executive Officer.

Child and Adolescent Services

The provision of an extensive range of child and adolescent services enables the Warrnambool and District Base Hospital to remain at the forefront in the provision of high quality health care to south west Victoria.

Child and adolescent services encompasses both inpatient and outpatient care of clients from the neonatal period to 18 years of age. Our hospital offers these services locally, as a referral centre for the South Western region and as a resource for smaller health services.

Neonatal Care

Our midwifery unit is staffed and well equipped to care competently for premature and/or sick neonates. The Hospital neonatal services have been accredited as Level 2 status for some five years.

Level 2 status means neonatal facilities which are able to safely manage the care of newborn babes weighing greater than 1300 grams, and/or of a gestation age 32 weeks or more.

In addition, the neonatal facilities provide emergency resuscitation and stabilisation of the sick neonate/babe prior to transfer to a major referral centre. Many families are appreciative of

the high quality care their sick babe receives in Warrnambool either throughout their illness and/or following further specialist care received in Melbourne.

In recognition of the importance of this service, the Hospital identified the need to remodel existing facilities as a priority. A project, jointly funded by generous community donations and Hospital monies was undertaken in 1995. A remodelled 'state of the art' Level 2 special care nursery was opened in June 1995.

The Hospital continues its commitment to the maintenance of this specialist service by promoting ongoing education.

Child and Adolescent Ward

The Child and Adolescent Ward (Ward 3) caters for patients from the neonatal period to 18 years, combining both medical and surgical care to this age group.

The ward is generally very busy and offers care in a friendly environment. Over the last four years, our records demonstrate that more patients have needed admission to hospital and concurrently the length of stay in hospital has reduced from an average of 2.31 days in 1991 to

1.87 days in June 1995.

The decrease in the length of stay can be partially attributed to an increase in day surgery and also to the improvement of parental education which enables the parent to manage their child's illness competently at home.

Our facility can cater for a parent who wishes to stay with their child during the period of hospitalisation. This is beneficial to the child as it decreases the anxiety and stress related to the Hospital admission.

Throughout this time, nursing staff have been actively involved in reviewing and determining more creative ways that sick children and adolescents may access required health services.

Staff education is a major priority as trends in medical care of the sick child change frequently. A close affiliation with the Victorian Paediatric Nursing Association helps staff to gain current information in changing trends of care.

Refurbishment of the ward is currently being undertaken thanks to generous support given by the Kiwanis Club and some local artist volunteers. An Adolescent area is being established to allow older children greater privacy in the ward. Murals are a feature in the redevelopment.

Children with chronic illnesses require special consideration when establishing their care regime. The Child and Adolescent Ward staff encourage the children and their families to maintain their normal daily routines. Adjustment to their therapy regimes is often required so as to allow these children to maintain normal lifestyle.

If particular, admission requirements dictate interference with schooling, and a visiting teacher service is available. A computer supplied by the Warrnambool Secondary College Murray to Moyné cycling team is available for education purposes.

Child and Adolescent Psychiatric Unit

Child and Adolescent Psychiatric Care has been available in this region since 1991. This service provides care for children from



Children's Ward Associate Charge Nurse Evelyn Karlinski supervises a patient's peak flow test, used to help determine lung capacity and lung performance in children with asthma.

birth to 16 years who display severe emotional or behavioural problems which interfere with their general functioning and/or those at risk of developing severe psychiatric illnesses.

The Child and Adolescent team is based at 'Bohan Place' in Lava Street, Warrnambool, and also provides services to the Hamilton, Camperdown and Portland districts. Members of the team include Psychologists, Social Workers, Psychiatric Nurses and a Psychiatrist.

Previously children who would have had to go to Melbourne for inpatient care can now access these services locally in conjunction with the Child and Adolescent Ward.

District Nursing Service

The District Nursing Service provides valuable follow-up care for children following hospital admission and more recently has introduced a Hospital in the Home (HITH) service. In collaboration with the inpatient service, the Hospital, through the District Nursing Service, is therefore able to

offer the same high quality care and service in a range of more flexible ways. Children cared for at home experience less trauma and stress associated with a hospital admission.

The Hospital believes that health care services offered in differing and more dynamic ways are likely indicators of future treatment trends.

Emergency

A visit to the Emergency Department is at times a painful and traumatic experience which can be stressful for both child and family. A redevelopment of the emergency waiting area has included a children's play area. Thanks to a donation from the Warrnambool Rotary Club, this often difficult wait is now more pleasurable.

Currently, the use of calico doll play therapy is being used and is proving to be an invaluable diagnostic tool while at the same time they assist in reducing anxiety levels. Children are allowed to draw and carry out procedures on

these dolls prior to having treatment. This allows the child to express their feelings about pending procedures and to indicate on the doll where their pain is.

Midwifery Services

A Young Women's Pregnancy and Parenting Program has been established to provide peer support to young pregnant women. This service encourages some of its members to become peer educators as their support and advice is invaluable to other young parents. The peer educators can give 'first hand advice' and reassurance in a non-threatening way.

Parenting skills are also taught to give these prospective parents some skills necessary for the introduction of a new baby into their life.

Specialised ante-natal classes have been developed for this group of parents with domiciliary services also being made available.

Koorie Health

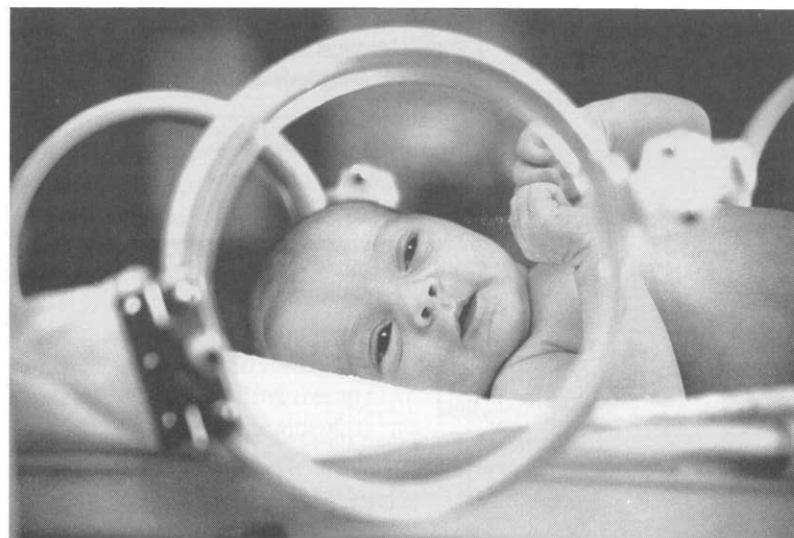
Children's Health was an integral component of the Certificate in Koorie Women's Business. Participants in the program received education on topics such as care of the newborn, immunisation, infectious diseases, cot death prevention and child restraints.

The training will facilitate health promotion and enable workers to act as a valuable resource for Koorie families.

Conclusion

The maintenance of this wide variety of child and adolescent services is dependant upon the availability of appropriately qualified and enthusiastic staff. Our Hospital is fortunate to have the services of two paediatricians who are an integral component of our service provision.

The future in child and adolescent care is ever changing. A trend to reduce inpatient care may see the introduction of increased outpatient services in the years to come. The Hospital in the Home service may be well placed to become an integral part in child and adolescent service provision in the future.



The Midwifery Ward Special Care Nursery is equipped with isolettes to provide controlled temperature and atmosphere to neonates receiving treatment.

Research and Education

Research and education are important adjuncts to the Hospital's clinical facilities, providing continuing improvements in personnel and departmental educational standards, and ensuring the Hospital remains up-to-date in its treatment and diagnostic methods.

MEDICAL RESEARCH

The Hospital has participated in three research projects in the last 12 months.

Victorian Injecting Drug Users Cohort Study (VICS)

The Hospital has continued to be involved in the follow-up of participants in this study, which is examining the epidemiology of sexually transmitted diseases among intravenous drug users.

General Practitioner Continuing Medical Education

A six month survey examining the contribution of this Hospital to the continuing medical education of its General Practitioners was completed during the year. Recommendations to further assist the Hospital in this role have been made.

Major Trauma Survey

The Hospital has contributed to the second year of the State Major Trauma Study. This study has included information on severely injured patients.

NURSING RESEARCH

Coronary Artery By-Pass Graft Surgery

Utilising a phenomenological approach, Nurse Teacher Denise Clapham has commenced research of patients who have undergone coronary artery by-pass graft surgery.

This research is a component of a Master of Health Management

course. The study aims to identify experiences that patients have encountered pre and post operatively.

Specific themes being examined include pain, hospitalisation and issues regarding death and quality of life.

Emotional Stress

During 1994, the Hospital provided financial support to Emergency Department nurse John Carey to conduct research on emotional stress for the Emergency Department nurse associated with nursing an acutely ill friend/relative.

This research was designed to examine incidents where nurses were involved in the resuscitation of friends or relatives. John presented his research at the National Conference of the Association for Australian Rural Nurses held in Adelaide, 10 December 1994.

SPIN as a Beginning

Nursing Projects Officer, Karen McKinnon, undertook research in the area of the Study of Professional Issues in Nursing (SPIN) as partial fulfilment of the Master of Arts (Health Studies).

The thesis, entitled 'SPIN as a Beginning' is a retrospective critical analysis of the SPIN implementation process, its effect on hospital processes and the empowerment of nurses in rural hospitals.

The thesis argues that nurses became empowered in circumstances where there was management support for the concept of SPIN, where structural changes were made and where nurses felt empowered through increased self-esteem and confidence.

Nocturnal Eneuresis

Continence Nurse Sharon Homberg and Paediatrician Nick Theis have developed a proposal to

study management techniques of children with nocturnal eneuresis.

It is anticipated that research results will demonstrate the most effective treatment of this condition.

Rural District Nursing Service

During 1994, the Hospital's District Nursing Service (DNS) participated in research undertaken by Deakin University Warrnambool. The research project titled 'A descriptive analysis of a rural District Nursing Service' aimed to identify the role of a rural DNS.

Through gaining a greater understanding of episodes of client care, a basis for the prediction and management of a rural DNS is provided. Results of this research are yet to be published.

PSYCHIATRIC SERVICES RESEARCH

Optimal Treatment Project

The psychiatric Services Division formally embarked on the Optimal Treatment Project, a five year study of the optimal clinical treatment of Schizophrenic disorders.

Four staff attended a series of one week workshops in Auckland, New Zealand. These courses provided training in the use of Diagnostic Interviews, psychiatric rating scales and advanced supervision in relation to the project. Project Director Professor Ian Falloon made his first of many visits in association with this project in June 1995.

HEALTH EDUCATION

Health Education has functioned according to a pre-established Business Plan, making it a most dynamic and fulfilling year.

With the goal to expand the service beyond that of nursing education, Health Education presented many programs for all hospital staff, the community and health care agencies within the South-West region.

This has necessitated a name change from Education Service to Health Education, and a complementary service logo has been developed.

Primarily, the Health Education emphasis has remained with the professional development of nursing staff and the maintenance of clinical competency.

This year we have made considerable progress toward our goal of raising the awareness of staff to be more outcome oriented with an individual client/customer focus.

An extensive array of programs have been provided in relation to the implementation of new services, practices or procedures.

Graduate Certificate In Nursing (Critical Care)

In February 1995, a Graduate Certificate in Nursing (Critical Care) was implemented as a new initiative. In collaboration with Deakin University, this course was established to allow nurses to pursue studies without having to take up residence in a metropolitan area.

Through the use of video-conferencing equipment our nurses are able to participate locally in lectures being delivered at Deakin's metropolitan campus.

Graduate Nurse Program

In February 1995, six nurses successfully completed the Graduate Nurse Program (GNP). Congratulations are extended to Katrina Carey, Rebecca Clarke, Craig Valentine, Michelle Scott, Liv Clarke and Lori-Anne Sharp.

This 52 week program is designed to provide clinical consolidation for nurses who have recently completed undergraduate training. It provides a valuable means of facilitating the transition of students to that of competent beginning practitioners. A new intake of eleven GNP nurses commenced in February this year.

Clinical Placement

The Hospital has been host to students requiring clinical experience from many agencies. Through formalised Clinical Placement Agreements, experience has been provided for a total of 115 student nurses from The Gordon Technical, The Wimmera Community College of TAFE, and Deakin University.

Agreements with other agencies

have also been developed to enable clinical experience to be available to more students in the coming financial year.

Advanced Certificate In Nursing

The Advanced Certificate in Nursing has been developed by the South West College of Technical and Further Education (TAFE) and replaces Enrolled Nurse training previously provided by hospitals. Warrnambool and District Base Hospital has had significant input into the implementation of this course and provides both clinical and theoretical components.

Tertiary Qualifications

Health Education has played a significant role in providing guidance and support to nurses undertaking post graduate tertiary studies. We acknowledge a further eleven nurses successfully completing various courses. Our Nursing Service now comprises 24% with post graduate tertiary qualifications and an additional 19% currently studying.

PSYCHIATRIC SERVICES EDUCATION

During the past year, the Psychiatric Services Division has maintained its commitment to staff education and has continued to implement and co-ordinate a variety of education opportunities for staff across the organisation. The Division has commenced a comprehensive data base which details the educational achievements of all staff.

Comprehensive Assessment and Service Plan (CASP)

With the introduction of this innovative documentation process, an extensive education program has provided education to all direct care staff in conducting and recording comprehensive psychiatric assessments.

Professional Assault Response Training (PART)

69 staff participated in this two-day preventative workshop which provides staff with the knowledge and skills in the

management of people whose disabilities are sometimes manifested in assaultive behaviour. This training will continue to be offered to staff across the Division in the form of updates. These workshops are provided by an accredited PART trainer within the Division.

COMMEND (Comprehensive Management of Mental Disorders)

Fourteen staff participated in the one week introduction to the principles of this community based model of care.

Advanced COMMEND

Professor Ian Falloon spent three days with clinical staff from across the Division providing additional training and supervision in the integrated model.

Debriefing

The Division has conducted a series of five one day workshops in the prevention, identification and management of Critical Incidents. Sixty-five staff throughout the organisation have participated in these valuable sessions provided by a staff member with a Certificate in Critical Incidents Management.

Psychiatric Rating Scales

Dr Joseph Ventura of the Clinical research Center for Schizophrenia and Psychiatric Rehabilitation based at the UCLA Department of Psychiatry and Behavioral Sciences in Los Angeles visited the South West and provided forty-five clinical staff with training in the application of the Brief Psychiatric Rating Scale (BPRS) and the Scale for the Assessment of Negative Symptoms (SANS). This will equip staff with specialist skills in the assessment of psychiatric symptomatology.

Published Article

Mr Shane Storer of the Child and Adolescent Psychiatry Team has had the article 'Support Groups for Children in Alternate Care: A Largely Untapped Therapeutic Resource' published in The American Journal of Child Welfare.

Total Quality Management

Over the past twelve months increased activity has occurred in Total Quality Management programmes.

Departments and wards have been involved in Total Quality Management (TQM) inservice education.

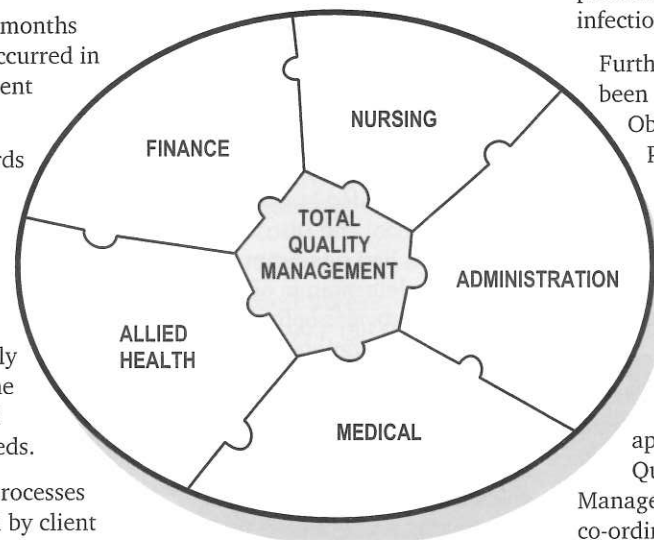
All departments and wards continue to closely monitor and improve the quality of care provided according to patient needs.

Through examining processes and problems identified by client satisfaction surveys, departments and wards are able to improve their services. Processes and problems identified are often examined and solved through a multi-disciplinary approach which has proven to be most effective.

Consumers are the main focus of TQM programmes and the Hospital has demonstrated this through a number of activities:-

- The Hospital has revised the general Patient Satisfaction Questionnaire, which is distributed to patients on all wards. Most departments have also included specific patient questionnaires in their TQM programme as they are the most useful tool to gain an insight into patients expectations of services.
- A programme on 'Excellent Customer Service' was run earlier in the year by the Health Education Service at the Hospital. This proved to be of great assistance to all staff members who attended.
- The Hospital recently participated in a statewide Patient Satisfaction Survey. This project was sponsored by the Department of Health & Community Services.

In March, a Clinical Indicators Workshop was held at the



Warrnambool & District Base Hospital by the Australian Council on Healthcare Standards. The workshop was attended by a number of staff from this Hospital and other regional hospitals.

Clinical Indicators are measures of the clinical management and outcome of care and are a useful inclusion in the Hospital's TQM programme. Examples of Clinical

Indicators currently collected include Hospital Readmissions, examining unplanned hospital readmissions and Hospital Acquired Infection which monitors patients who acquire wound infections post-operatively.

Further Clinical Indicators have been developed in the area of Obstetrics and Gynaecology. Psychiatric Services were selected to be a pilot site for the establishment of Psychiatry Clinical Indicators.

The coming year promises further developments in the TQM programme with the appointment of a part time Quality Improvement Manager, which will enable further co-ordination of TQM activities throughout all departments and wards in the Hospital, and establishment of a computerised Quality Activities Register.

The Hospital is currently preparing for the next Accreditation Survey which is to be conducted in July 1996 with the inclusion of Psychiatric Services being surveyed for the first time.

Freedom Of Information requests

Sixty-nine requests under the Victorian Freedom of Information Act were processed during the 1994/95 financial year.

Requests for documents in the possession of the Hospital are directed to the Freedom of Information Officer, 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 in the Medical Records Department for perusal by the general public during office hours.

The Hospital's nominated officers under the Freedom of Information Act are:

Principal Officer:

Mr A.R. Rowe, Chief Executive Officer.

Medical Principal Officer:

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

Freedom of Information Officer:

Mrs M. Atkinson, Chief Medical Record Administrator.

Fundraising

Fundraising events and donations are vital sources of revenue for the purchase of much needed equipment at the Hospital. During the 1994/95 year, a total of \$125,551.35 was raised for the Hospital and Corio House.

Support from Community Groups

A further successful year of fundraising culminated in the 3YB Annual Appeal on Sunday 18 June, 1995. Radio Station 3YB again generously donated a full day's broadcasting to the Appeal, in addition to considerable lead-up publicity for which the Hospital is most appreciative.

The annual Murray to Moyne 24 hour cycling marathon continues to be one of the district's major fundraising activities for healthcare agencies. The Hospital was again represented by the Palliative Care Unit Team raising over \$3,700 through their efforts.

The hospital would again like to thank the Warrnambool Central Rotary Club for co-ordinating a door knock of local business houses which contributed over \$1,000 to this year's Appeal.

Hospital Auxiliaries

All Hospital Auxiliaries have reported successful fundraising and social activities this year.

A total of \$38,945.20 was raised by the auxiliaries which will be

used to fund the purchase of new equipment and furnishings for various wards and departments within the hospital.

Staff Auxiliary

A total of \$14,500 was raised by the staff auxiliary this year due thanks to various raffles, Auxiliary memberships and commissions and a successful Melbourne Cup Function. The amount raised will be used to assist funding of Ward 3 refurbishment and the purchase of an Insulcot for Ward 7.

However, the Auxiliary is on a further recruitment drive to encourage a wider involvement in their activities by hospital staff with several new activities planned for the coming year.

Senior Ladies Auxiliary

Regular Wednesday afternoon linen-mending sessions are conducted by the auxiliary with over 2,300 articles of linen mended during the past year.

The Auxiliary conducted several card luncheons during the year raising \$750 towards the cost of a Nursing Chair in Mid Floor.

Midwifery Auxiliary

The inaugural year of this Auxiliary was an outstanding success with funds raised totalling \$11,200 which will be directed toward the cost of the recently completed refurbishment of the Neonatal Unit. A Fun Run, Fashion Parade, various raffles, and association with the inaugural Warrnambool Car Show combined to contribute to this excellent fund raising effort.

Junior Ladies Auxiliary

A successful Christmas Luncheon highlighted another busy year for the Junior Ladies Auxiliary in which a total of \$4,500 was raised. Film luncheons, two major raffles, and several other activities, contributed to raise funds which will be used to purchase a CPM Machine for the Hospital.

Past Trainees Association

Social activities including a games afternoon contributed to a total of \$4,195 raised by the auxiliary this year. The funds will be used to purchase a Filtration Central Monitor.

Woolsthorpe Auxiliary

A Christmas Raffle, catering for a stock sale, a film luncheon and other functions helped cap off another successful year for this auxiliary with \$2,300 raised. The auxiliary is working toward the goal of funding the purchase of a new Pulse Oximeter for the Endoscopy Unit.

Valued support was also received from **The Purnim and Framlingham Ladies Committee** raising a total of \$200 in 1994/95.

Direct Donations

This year a total of \$49,000 was received as Direct Donations from Bequests and Trusts, which, combined with the generosity of individual donations, completed a successful year of fundraising.

These donations are evidence of the strength of community support for the Hospital.



Dialysis Unit nurse Jean Gray adjusts a fluid control monitor, linked to a haemodialysis machine to control the rate of fluid removal during blood dialysis. The Dialysis Unit has received excellent auxiliary and community support for the purchase of new equipment and furnishings.

Future Development

Radiology Privatisation

Following the award of the Hospital's radiology tender to Warrnambool Radiology in May, 1995 plans were finalised for the refurbishment and expansion of the existing radiology department.

The refurbishment will enable Warrnambool Radiology to install approximately \$1.5 million worth of equipment and operate a fully privatised service based at the Hospital. New equipment to be installed will include a C.T. Scanner, ultrasound machines and general radiology equipment.

Tenders for building works were sought in August, 1995 and the Hospital is very keen for these works to be finalised as quickly as possible.

Operating Theatre Suite

The Hospital's Operating Theatre Suite having been designed in the late 1950's is no longer adequate to meet the demands placed upon the Hospital.

Redevelopment of the Operating Theatre Suite has an estimated cost of \$3.5 million and approval has been granted by Health & Community Services to proceed to tender readiness with this project.

Hospital personnel have been working with Architects, Health Science Planning Consultants, in preparing plans for the redevelopment of the Operating Theatre Suite and advice is awaited from Health & Community Services on the funding of this project.

Acute Psychiatric Unit

In conjunction with Architects, Health Science Planning Consultants, a Hospital User Group is developing plans for a new acute psychiatric unit located on the western part of the Hospital's main Ryot Street campus.

It is expected that construction of this \$2.5 million project will commence in late 1995 and be ready for occupation in mid 1996. This will permit the Hospital to

vacate the former Brierly Hospital site, which is inordinately expensive to maintain, and carries with it the stigma of past psychiatric practice.

Accreditation

Currently the Hospital holds full accreditation status with the Australian Council on Healthcare Standards and is due to be re-surveyed during July, 1996. Significant effort has been devoted to addressing the recommendations of the last survey as well as preparing for the forthcoming survey.

As this will be the first time the Hospital's Psychiatric Service has been surveyed preparation for the survey has been extensive.

By-law Review

The operations of the Hospital are governed by a set of by-laws.

A sub-committee of the Board of Management has been reviewing the by-laws for a considerable period of time and it is expected that this review will be finalised during early 1995/96.

Pharmacy relocation

Plans are underway to relocate the Hospital's Pharmacy Department to the mezzanine level of the main ward block.

At present, the department is split into several areas on the ground floor and basement, with attendant workflow and communication difficulties, and the main dispensing pharmacy area is now too small for the volume of daily work.

The relocation will consolidate the department in one spacious area close to most wards.

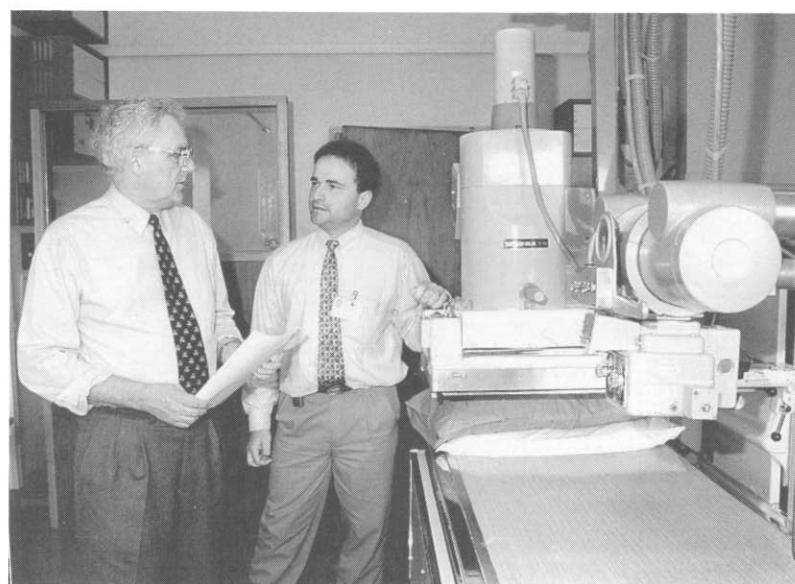
Relocation work is expected to begin in October 1995.

Hospital retail outlet

The lack of local specialised outlets for patient rehabilitation and daily living aids has prompted the Hospital to set up a retail shop to supply a wide range of specialised and general patient aids, as well as a selected range of other retail items.

Operated by the Hospital's Supply Department, the shop, trading as 'Southwest Healthcare Supplies' will be located in the main Hospital foyer and cater for direct retail sales, as well as wholesale orders from healthcare and other organisations.

The new venture will open in early October 1995.



Radiologist Dr Paul Walker (left) and Chief Medical Imaging Technologist Luke Pontonio discuss the proposed upgrade of the Radiology Department's equipment when Warrnambool Radiology commences a privatised service in the 1995/96 financial year.

Staff, 1994-95

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., A.F.A.I.M., C.H.E.

MEDICAL DIVISION

Visiting Medical Officers

Chairperson, Visiting Medical Staff Association

Dr J Barson M.B., B.S., D. (Obst.) R.C.O.G., F.F.A.R.A.C.S.*
Dr B. Morphet M.B., B.S., F.R.A.C.P.

Anaesthetists

Dr P. Arnold M.B., B.S., F.F.A.R.A.C.S.
Dr J. Barson M.B., B.S., D. (Obst.) R.C.O.G., F.F.A.R.A.C.S.
Dr K. Cronin M.B., B.S., F.F.A.R.A.C.S.
Dr A. Dawson M.B., B.S., F.F.A.R.A.C.S.
Dr K. Prest M.B., B.S., F.F.A.R.A.C.S.

Visiting Dental Officers

Dr E. Carlsson D.D.S. (Stockholm)
Dr D. Chung B.D.S.
Dr D. Geryga B.D.Sc.
Dr R.E. Glover L.D.D.S., B.D.Sc.
Dr M. Jean-Francois D.D.S.
Dr A.R. Kleid B.D.S.
Dr M. Palam B.D.Sc., B.Sc.
Dr P. Paramasivam B.D.S.
Dr A. Pickering B.D.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.

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. (Obst.) R.C.O.G. (London)
Dr W.J. Bateman M.B., B.S., D. (Obst.) R.C.O.G., F.R.A.C.G.P.
Dr A. Chow M.B., B.S.
Dr D. Cook M.B., B.S., Dip. R.A.C.O.G.*
Dr E.C. Fairbank M.B., B.S., F.R.A.C.G.P.
Dr R. Godfrey M.B., B.S.*
Dr M. Grave, B.Sc., M.B., B.S.
Dr P. Hall M.B., B.S., D. (Obst.) R.A.C.O.G., D.A.
Dr L. Hemingway M.B., B.S.
Dr G.G. Irvine M.B., B.S., D. (Obst.) R.A.C.O.G.
Dr R.J. John M.B., B.S., D. (Obst.) R.A.C.O.G.
Dr S. King M.B., B.S., F.R.A.C.G.P.
Dr R. Mann M.B., B.S.*
Dr E.A. Maxwell B. Med. Sc., M.B., B.S.
Dr C. Mooney M.B., Ch.B., M.R.C.S., L.R.C.P., D. (Obst.) R.C.O.G.

* denotes resignation during the Report year

Dr B. Oppermann M.B., B.S., M.Sc. (Anat.), D. (Obst.) R.C.O.G.
Dr M.R. Page M.B., B.S., D. (Obst.) R.C.O.G.
Dr J.D. Philpot M.B., B.S.
Dr M.G. Quinn M.B., B.S.
Dr J.M. Rounsevell M.B., B.S.
Dr H. Savery M.B., Ch.B., D. (Obst.) R.C.O.G., M.R.C.G.P.
Dr C.D.G.L. Shimmin M.B., B.S., D. (Obst.) R.C.O.G.
Dr S.W. Smith M.B., B.S., D. (Obst.) R.C.O.G.
Dr R. Stephenson M.B., B.S.
Dr P. Viney M.B., B.S., D. (Obst.) R.A.C.O.G.
Dr C.W. Walters B. Med. Sc., M.B., B.S.

Visiting Medical Fellows

Dr B.F. Kay M.B., B.S., D. (Obst.) R.A.C.O.G.
Dr F.J. Reid M.B., Ch.B., D.A., M.F.A.R.C.S. (London)
Dr S. Richardson M.B., B.S.

Obstetricians & Gynaecologists

Dr C. Beaton M.B., Ch. B. (Edin), F.R.A.C.O.G., M.R.C.O.G. (N.Z.), M.R.C.G.P., M.R.A.C.O.G. (Aust.).
Dr I.G. Pettigrew M.B., B.S., M.R.C.O.G., F.R.A.C.O.G.

Visiting Oncologist

Dr C.R. McLennan M.B., B.S., F.R.C.P., F.R.A.C.P.

Ophthalmologist

Mr G. Hunter F.R.C.S., F.R.A.C.S., F.R.A.C.O.

Visiting Oral Surgeon

Dr D. Hewson M.D.Sc., L.O.S., F.R.A.C.D.S., B.D.Sc.

Orthodontist

Dr O.P. Black M.D.Sc., D.D.S., F.R.A.C.D.S., B.D.Sc.

Orthopaedic Surgeon

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

Visiting

Oto-rhino-laryngologist

Mr I. Backwell M.B., B.S., D.L.O., F.R.A.C.S.

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)

Physicians

Dr N. Bayley 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 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 S. Jones B.Sc., M.B., Ch.B., M.R.C. Psych.

Staff Numbers (Effective Full-Time)

Acute Services	1993/94	1994/95
Nursing	194.93	203.82
Medical and Medical Support	81.37	71.99
Administration and Hotel	167.36	153.82
Sub-total	443.66	429.63
Psychiatric Services		
Nursing	81.62	69.69
Medical and Medical Support	16.44	27.29
Administration and Hotel	46.02	19.73
Sub-total	144.08	116.71
Central Linen Service	19.22	20
Corio House	35.29	32.82
Total	642.25	599.16

Staff by Occupational Category & Gender, June 1995

Note: Bracketed figures denote June 1994 totals

Acute Services	Female		Male	
	1993/94	1994/95	1993/94	1994/95
Managers & Administrators	(6)	5	(15)	14
Professionals	(47)	50	(47)	38
Para Professionals	(235)	246	(25)	35
Tradespersons	(7)	5	(17)	16
Clerks	(65)	59	(6)	6
Personal Service Workers	(26)	26	(2)	4
Plant & Machine Operators/Drivers	(1)	1	(7)	6
Labourers & Related Workers	(47)	47	(18)	15
Total	(434)	439	(137)	134

Staff by Gender & Employment Status, June 1995

Acute Services	1993/94	1994/95
Male - Full Time	124	114
- Part Time	12	18
- Casual	1	2
Sub-total	137	134
Female - Full Time	207	185
- Part Time	199	225
- Casual	28	29
Sub-total	434	439
Total	571	573
Psychiatric Services		
Male - Full Time	55	52
- Part Time	2	0
- Casual	5	0
Sub-total	62	52
Female - Full Time	35	26
- Part Time	8	4
- Casual	4	0
Sub-total	47	30
Total	109	82
Corio House		
Male	3	3
Female	43	41
Total	46	44
Central Linen Service		
Male	11	14
Female	13	11
Total	24	25

Radiologists

Dr M.C. Perry M.B., B.S., Dip. Obst., R.C.O.G., F.R.A.C.R., F.R.C.R.
 Dr E.B. Rafferty M.B., B.S., F.R.A.C.R., D.D.U.
 Dr J.M. Rogan M.B., B.Ch., F.R.A.C.R., B.A.O., D.M.R.D., F.R.C.R. (London)

Visiting Rheumatologists (Consultant Emeritus)

Dr H.T. Griffiths M.B., B.S., F.R.A.C.P.
 Dr N.C. Wood M.B., B.S., F.R.A.C.P.

Surgeons

Mr S. Fischer M.B., B.S., F.R.A.C.S.
 Mr A. Fligelman M.B., B.S., F.R.C.S., F.R.A.C.S.
 Mr B. Mooney M.B., B.Ch., B.A.O. (Hons.), B.Sc. (Anat.) (Hons.), M.Ch., F.R.C.S.I. (0.5 position)

Urological Surgeon

Mr B. Mooney M.B., B.Ch., B.A.O. (Hons.), B.Sc. (Anat.) (Hons.), M.Ch., F.R.C.S.I. (0.5 position)

Departmental Officers

Director of Medical Services

Dr J.C. Christie D.M.S., D.T.M.&H. (LV), F.A.F.P.H.M., F.R.A.C.M.A., M.A.C.T.M.*
 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.

Deputy Director of Medical Services/Director of Emergency Department

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

Director of Anaesthetics

Dr K. Prest M.B., B.S., F.F.A.R.A.C.S.

Chief Dental Officer

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

Regional Geriatrician

Dr L. Hartanto M.B., B.S. (Indonesia), Med. Lic (Sweden), Specialist (Internal Medicine, Geriatrics) (Sweden)

Director of Intensive Care Unit

Dr B. Morphett M.B., B.S., F.R.A.C.P.

Director of Palliative Care

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

Director of Pathology

Dr D. Blaxland M.B., B.S., F.R.C.P.A.*

Pathologist

Dr C. McTigue M.B., B.S., F.R.C.P.A.*

TQM Co-ordinator (Medical Services)

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

Regional Supervisor Graduate Medical Education

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

Medical Ancillary

Aboriginal Liaison Officer

Mrs B. Clark-Morgan

Chief Audiologist

Mr T. Rayner B. Sc., Dip. Aud. (Melb.), M.Aud.S.A.

Chief Biomedical Engineer

Mr D. Stewart B. Eng. (Elec.), I.B.M.E. (Part-time)
 Mr A. Doolan B. Eng. (Comm.) (Part-time)

Centre Against Sexual Assault Co-ordinator

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

Chief Dietitian

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

Librarian

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

Chief Medical Imaging Technologist

Mr L. Pontonio M.I.R., Dip. App. Sc. (Med. Radiography)

Chief Medical Record Administrator

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

Chief Occupational Therapist

Miss J. Gibbs B. App. Sc. (O.T.)

Pathology Laboratory Manager

Mr K. Piper F.I.M.L.S., B. App. Sc.*

Director of Pharmacy

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

Chief Physiotherapist

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

Chief Podiatrist

Miss J. Nelson B. App. Sc. (Pod.) (Part-time)

Chief Social Worker

Mrs S. Pyers B.S.W. (Part-time)

Chief Speech Pathologist

Mrs J.S. Wilson B. App. Sc. (Speech Pathology), A.A.S.H.
 Miss K. Brown B.App.Sc. (Speech Pathology)

TQM Co-ordinator (Medical Ancillary Services)

Miss C. Dow B. App. Sc. (Medical Records), R.M.R.A.

Workcover - Hours Lost to Injury or Illness

Acute Services	1993/94	1994/95
Nursing	5,348	3650
Administration	1,515	3112
Medical	2,569	2712
Sub-total	9432	9474
Psychiatric Services		
Nursing	789	5178
Administration	1231	0
Medical	0	0
Sub-total	2020	5178
Central Linen Service	2318	3747
Corio House	48	95
Total	13,818	18494

Workcover - Number of Claims

Acute Services	1993/94	1994/95
Nursing	4	2
Administration	4	0
Medical	0	1
Sub-total	8	3
Psychiatric Services		
Nursing	7	5
Administration	1	0
Medical	0	0
Sub-total	8	5
Central Linen Service	0	0
Corio House	1	0
Total	17	8

NURSING SERVICES

Director of Nursing Services

Meg Ryan R.N., M.H.A. (U.N.S.W.), R.M., Cert. Intensive Care, Grad.Dip.H/Admin., F.R.C.N.A., A.F.C.H.S.E., C.H.E.

Resource Co-ordinator

Mrs S. Morrison R.N., 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.

Nursing Projects Officer

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

Nursing Informatics Officer

Mr M. Johnstone R.N., B.B.U.S. (Accounting)

Education Manager/Quality Co-ordinator (Nursing Services)

Mrs S. Nicolson R.N., B.N., Dip. Nursing, Cert. of Computer Business Applications, A.C.H.S.E., C.H.E.

Unit Managers

Wards 1/2

Mr T. Carter R.N., R.M.

Ward 3

Miss S. Waring R.N., Cert. of Computer Business Applications

Mrs J. Smart R.N., (Acting until October 1994)
 Mrs W. Ludeman R.N., (Acting October 1994 - March 1995)

Ward 4

Miss H. Kenna R.N., Cert. Intensive Care, Cert. Critical Care, B.App.Sci., B.Ed.*

Miss J. Hale R.N., Critical Care Cert. (Intensive Care)

Ward 5

Mrs A. McMahon R.N., Cert.Stomal Therapy
(Acting until July 1994)

Miss J. Hale R.N., Critical Care Cert. (Intensive Care)

Ward 6

Miss N. Foran R.N., R.M.*

Miss W. Ludeman R.N., (Acting)

Ward 7

Mrs M. Gallogly R.N., R.M., Grad.Dip.Nursing
(Comm. Health), Grad.Dip.Nursing (Family & Child Health), Cert. Management

Ward 8

Miss C. Lappin R.N., R.M., Post
Grad.Dip.Orthopaedic Nursing, Post Grad.Dip.Rehab.
Nursing, Grad.Dip.Rehab. Studies.*

Mrs J. Smart R.N.

District Nursing

Mrs M. Stevens R.N., Cert.Stomal Therapy
(Acting until October 1994)

Mrs J. Smart R.N.

Emergency Department

Mrs C. Holman R.N., B.N., Cert.Critical Care
(Emergency Nursing) (Acting until October 1994)

Mrs K. Bethune R.N., B.N., Cert. Accident and
Emergency.

Operating Theatre

Mr T. Kelly R.N., Cert. Perioperative Nursing.

Corio House

Miss E. Cavarasan R.N., Grad.Dip.Business
Management, Cert.O.R. & Management.*

Mrs R. Mitchell R.N., R.M., B.N., Cert. App.
Art (Textiles), Cert., Gynaecological Diseases Nursing.

PSYCHIATRIC SERVICES

Executive Officer

Mr K. Burnett B.A., B.S.W., R.P.N., A.A.M.C.,
A.A.S.W.

Director of Clinical Services

Dr G. Ridley M.B., B.S.(Liverpool), M.R.C.P.(UK)

Manager Service Development

Ms I. Purcell B.A., B.S.W., M.A. (Prelim.), Cert.
Developmental Psychiatry (Child Psych.)

Team Managers

Eastern Sector Adult Psychiatric Services

Mr H. Barber R.P.N., R.N.

Western Sector Adult Psychiatric Services

Ms. T. Irish R.N., R.M., R.P.N.

Child & Adolescent Psychiatric Services

Ms. J. O'Connor-Ward R.P.N., Cert.
Development Psychiatry (Child Psych.), Cert. Family
Therapy

Aged Care Psychiatric Services

Mr P. Parkinson R.P.N.

Acute Care & Residential Services

Ms. T. Camin R.N., R.P.N.

Mr M. Struth (Acting), R.P.N.

Psychiatric Medical Services

Psychiatrists

Dr. A. Hardman M.B., B.S., D.P.M., M.R.C.
(Psych.)

Dr. M. Perera M.B., B.S. (Cey.), M.D. (Cey.),
Ph.D.(Sheff.), M.D. (Col.)

Medical Officers

Dr. Simon M.B., B.S. (Punjab)

Dr. Habib M.B., B.S. (Cairo)

Dr. Naidu M.B., B.S., M.D. (Madras)

Psychologists

Ms. T. Herrmann B.A., Grad. Dip. Applied
Child Psychology

Mrs J. Brown B.A., B.Sc. (Honours), Dip. Ed.,
Dip. Clinical Hypnosis

Mrs M. Randall B.A., B.Sc. (Honours), Dip.
Counselling, Master Clinical Psychol., Dip. Ed.
(Secondary), Dip. Media

Mr L. Elliott Dip. Clinical Psychol., B.Sc., M.Sc.,
M.Ps.

Occupational Therapists

Mrs K. Jepson B. App. Sc. (O.T.R.L.)

Ms. M. Bubnjic B. App. Sc. (O.T.)

Social Workers

Mr C. Horsell B.S.W.

Mr S. Storer B.A., B.S.W., Cert. Family Therapy

Mr N. Place B.A., B.S.W.

Mr L. Abrahams B.S.W., B.S.Sc.

Ms V. Appleton B.S.W.

Mr B. Kendall B.S.W.

Mr P. Humby B.S.W.

ADMINISTRATIVE SERVICES

Director of Administrative Services

Mr A. Morrison B.H.A. (U.N.S.W.),
A.F.C.H.S.E., C.H.E.

Associated Hospitals' Manager

Mr T. McKenzie*

Chief Engineer

Mr L. Ryan Dip. Eng. (Elect.) R.M.I.T.,
G.M.I.E.A., A.C.M., I.H.E.A.

Food Services Manager

Mr D.R. Church Cert. of Catering, F.I.H.C.,
A.F.C.I.A.

General Services Manager

Mr D. Miller

Human Resources Manager

Mr G. Mitchell B.Ec. (Monash), B.H.A.
(U.N.S.W.), A.C.H.H.R.A.

Occupational Health & Safety Manager

Mr S. Crawford Dip. O.H.&S., A.I.M.M.,
A.S.I.A., A.C.H.H.R.A.

Supply Manager

Mr W. Hall Cert. Hospital Supply Management
(Mayfield)

FINANCE DIVISION

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.

Deputy Director of Finance

Mrs L. Moloney B.Bus.(Deakin), A.S.A.

Accountant

Mr D. McLaren B.Bus.(Deakin), A.S.A.

Systems Manager

Mr G. Hall B.Bus.(Computing)(Deakin)

Mrs J. 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

Miss M.L. Beavis

Mr W.A. Bedggood

Mr W.R. Beetham

Mrs S. Bell

Mr R.G. Bennett

Mrs Iris M. Bickley

Miss Helen Bishop

Mr C.G. Boyle

Mr N. Bradley

Dr J. Brookes

Mrs I.V. Bruce

Mr T. Buckley

Mrs L. Burleigh

Mrs Jean Byron

Mrs L. Cameron

Mr J. Caple

Mr K. Carney

Mrs V. Carroll

Mr S. Carroll

Mrs P. Chadwick

Mrs F.A.J. Chislett

Mrs Helen Chislett

Mr D. Chittick

Mrs E. Christie

Mrs Diane Clanchy

Mrs A.F. Coggins

Mr Alistair C. Cole

Mrs J. Conlin

Mrs F. Coupe

Mr R.A. Crothers

Mrs Susan Crowe

Mrs M. Cuzens

Mr J.P. Daffy

Mrs D. Dawson

Mrs R.C. Dawson

Mrs G. Dickson

Miss H. Douglas

Mrs Jack Douglas

Mrs C.E. Fraser

Mrs J. Foster

Mrs M.M. Gibbs

Mrs N. Gilbert

Mrs Margaret Good

Mrs E. Goodwin

Mrs L. Gordon

Mrs P. Grace

Mrs M. Guyett

Miss M. Haberfield

Mr C. Hallowell

Mrs M.N. Harris

Mrs M. Hayes

Mrs Joan Henderson

Mr O.V. Henry

Mrs P. Hill

Life Governors of the Hospital

Mrs Ivy Hollingsworth

Mrs A. Holmes

Mr J. Holmes

Mr A. Hooton

Mrs A. Hooton

Mrs J. Horwood

Mr L. Howard

Mrs S. Huf

Mr D.A. Jenkins

Mrs Doris Johnson

Mrs M. Johnson

Mr Rex Johnson

Miss Edna Jones

Miss Gwen Jones

Mrs I. Jones

Mrs H. Laidlaw

Mrs L. Langdon

Mrs B. Layther

Mrs D. Lee

Sen. A.W.R. Lewis

Mr S.A. Lindsay

Mr F.G. Lodge

Mrs H. Lodge

Dr K.W. Longton

Mrs A.G. Lumsden

Mrs P. Luxton

Mrs J.E. Lynes

Mrs M. MacFarlane

Mrs L. Maher

Mrs Norma Marwood

Mrs M. Mathison

Mrs D. McConnell

Mrs Arthur McCosh

Mrs L. McCosh

Mrs R. McCrabb

Mrs R. McDonald

Mr Peter McGregor

Mr Ernie McKenna

Mrs Peter McKenna

Mr Trevor McKenzie

Mrs H. McLaren

Mrs W. McWhinney

Miss M.I. Mitchell

Mrs C. Moore

Mrs J.P. Moore

Mr R. Moore

Mr J. Moran

Nestlé Sports & Social Club

Mr E.R. Northeast

Mrs A. Northeast

Mr J.B. Norton

Dr. K. Nunn

Mrs M. Officer

Mrs Ian Officer

Dr A.T. Park

Mr K. Parker

Mrs T.J. Parker

Mrs G.R. Parsons

Mrs M.E. Paterson

Mr P. Peart

Mrs G. Pike

Mrs L. Price

Mrs Gloria Rafferty

Dr J.D. Reid

Mrs Margaret Richardson

Mr D.M. Ritchie

Mr K. Robinson

Mrs Phillip Ross

Mr J.C. Rule

Mrs K. Russell

Mrs E. Savery

Mr A.E. Scott

Mr L. Sedgley

Mrs A.B. Smart

Mr R. Sproles

Miss J. Stewart

Mrs M. Surkitt

Mrs W.C. Surridge

Mrs N. Swinton

Mrs Stuart Swinton

Mr D.N. Symons

Mrs D. Taylor

Mrs E.J. Taylor

Miss K. Taylor

Miss Y. Teale

Mrs E.M. Thomas

Mrs A. Thorpe

Mr J.B. Walker

Mrs H. Wallace

Mrs R.J. Wallace

Mr A.C. Whiffen

Mrs P. Whitchurch

Mrs J.C. Whitehead

Miss M.R. Wicking

Mrs R. Williams

Mrs R. Willsher

Mrs G.J. Wilson

Mr J.E. Wilson

Mrs N.T. Wines

Mr W.J. Wines

Mrs G. Young

Vale

Life Governor Mr E. Johnson, a
past president of the Board of
Management and a long-serving
committee member, passed away
on 31 August 1994.

Statistics – Five Year Trends

Ryot Street Campus	1990/91	1991/92	1992/93	1993/94	1994/95
Accommodation – Registered Beds	155	155	155	155	155
Patients Treated in Hospital					
Public – No Charge	6,069	6,880	6,860	8,103	9,474
Nursing Home Type	27	19	9	3	4
Private/Third Party	2,359	1,905	1,646	1,511	1,099
Endoscopy Unit	1,250	1,144	902	1,063	1,142
Total Patients Treated	9,705	9,948	9,417	10,680	11,719
(Patients in Hospital at 1 July, plus admissions)					
Total Patient Days in Hospital					
Public – No Charge	26,034	28,402	27,778	29,771	32,876
Nursing Home Type	2,713	651	165	46	87
Private/Third Party	12,470	10,624	9,269	8,263	5,966
Endoscopy Unit	1,250	1,144	902	1,048	1,129
Total Patient Bed Days	42,467	40,821	38,114	39,128	40,058
Daily Average of Occupied Beds	116.3	111.8	104.4	107.2	109.7
% Occupancy on Registered Beds	75.1	72.0	67.4	69.2	70.8
% Occupancy on Staffed Beds	84.0	83.9	83.9	81.8	82.7
Average Length of Stay (Days)	4.4	4.1	4.1	3.7	3.4
Births (Number of Deliveries)	564	611	598	605	563
Operations – Major	1,861	1,355	1,312	1,414	1,326
– Minor	4,064	4,689	4,886	4,688	4,990
Total Operations	5,925	6,044	6,198	6,102	6,316
Day Case Surgery in Theatre	1,664	1,783	1,483	1,355	1,489
Non-Inpatient Services					
Number of Attendances:					
Accident & Emergency	13,915	14,304	16,265	16,603	16,404
Medical/Surgical Clinics	10,546	8,366	8,057	6,532	4,965
Pathology*	56,756	56,646	54,380	24,323	16,941
Medical Imaging	6,947	5,773	5,189	2,046	1,949
Pharmacy	6,618	7,046	10,549	12,769	16,104
Day Hospital	18,288	15,388	12,705	15,122	14,724
Dental Unit	6,552	5,009	3,928	5,232	5,992
Other Programs	990	1,758	1,716	1,672	2,373
Total Non-Inpatient Attendances	120,612	114,290	112,789	84,299	79,452
Pathology Department Total Attendances*	80,523	80,191	77,027	83,319	48,876
Medical Imaging Department Total Examinations	16,470	15,712	13,111	13,336	14,248
CT Scan Department Total Examinations	1,888	1,586	838	859	683
Pharmacy Department Work Units	166,105	162,135	166,547	176,671	183,659
District Nursing – Persons Visited	419	461	449	497	460
– Number of Visits	19,639	20,116	21,479	23,237	24,269
Meals – Number of Meals on Wheels Delivered	47,139	42,834	36,727	34,661	32,694
– Total Number of Meals Served	322,821	337,168	334,834	320,351	318,666
Group Sessions – Day Hospital	343	451	556	319	322

* Pathology Department privatised from 1 February 1995

Service, Activity & Efficiency Measures

Statistical Comparison to Previous Year

Ryot Street Campus	Actual 1994/95	Actual 1993/94	Variance () Decrease
Admitted Patients			
1.1 Total Acute (detailed below)	11,619	10,559	10.04
1.1.1 Same Day	4,418	3,768	17.25
1.1.2 Other	7,201	6,791	6.04
1.2.1 Emergency	5,409	5,151	5.01
1.2.2 Elective – Surgical	5,466	4,635	17.93
1.2.2 Elective – Obstetric	744	773	(3.75)
2.1 Total Long Stay			
2.1.1 Nursing Home Type	4	3	33.33
	11,623	10,562	10.05
Weighted Inlier Equivalent Separations	9,196.00	9,346.41	(1.61)
Average Inlier Equivalent DRG Ratio	0.8154	0.8849	(7.85)
Bed Days by Category			
Public – No Charge	32,876	29,771	10.43
Nursing Home Type	87	46	89.13
Private	4,904	7,242	(32.28)
Other	2,191	2,069	5.90
	40,058	39,128	2.38
Statistical Indicators			
% Public (Medicare) Patients Treated	89.6%	84.3%	6.29
% Public (Medicare) Patient Bed Days	84.5%	78.8%	7.23
Revenue Indicators			
	Average Days to Collect		
	1994/95	1993/94	
Private Inpatient Fees	56.55	51.16	
TAC Inpatient Fees	80.14	44.37	
VWA Inpatient Fees	192.10	90.44	
Debtors Outstanding as at 30th June			
	under 30 days	31-60 days	61-90 days
	over 90 days	Total 1995	Total 1994
Private Inpatients	34,184 (48)	13,448 (12)	1,076 (3)
	5,503 (22)	52,711 (85)	188,951 (185)
TAC Inpatients	21,750 (4)	3,375 (3)	61,425 (2)
	3,000 (2)	91,050 (11)	21,430 (13)
VWA Inpatients	2,257 (2)	5,864 (6)	10,923 (8)
	66,975 (36)	86,019 (52)	30,850 (25)
	58,191 (54)	22,687 (21)	73,424 (13)
	75,478 (60)	229,780 (148)	241,231 (223)

Note: () Brackets denote number of accounts TAC is Transport Accident Commission
VWA is Victorian Workcover Authority

Comparative Costs & Statistics

	1990/91	1991/92	1992/93	1993/94	1994/95
Acute Hospital					
Unit Costs on Accrued Expenditure					
Average Daily Bed Costs per Inpatient (\$)	457.60	492.62	509.26	507.63	541.55
Average Cost per Inpatient Treated (\$)	2,002.35	2,021.45	2,061.17	1,880.56	1,866.30
Average Cost per Weighted Inlier Equivalent Separation (\$)				2,125.15	2,359.02
Average Cost per Non-Inpatient Attendance (\$)	42.61	45.76	45.28	52.13	66.51
Average Cost per District Nurse Visit (\$)	34.06	34.04	32.83	28.04	28.47
Corio House Nursing Home					
Statistics					
Number of Inpatients Accommodated	63	69	61	76	73
Bed days	16,389	16,370	16,391	16,173	16,060
Daily Average Accommodated	44.90	44.85	44.91	44.31	44.00
Average Length of Stay (days)	260	238	269	213	220
Unit Costs on Accrued Expenditure					
Average Daily Bed Cost (\$)	91.85	94.91	93.79	99.02	99.73
Average Cost per Resident Accommodated (\$)	23,893	22,579	25,203	21,072	21,940
Psychiatric Services (from 1991/92)					
Statistics					
Number of Inpatients Accommodated		407	383	301	241
Bed Days		21,031	15,218	5,825	4,121
Daily Average Inpatients Accommodated		57.62	41.69	15.96	11.29
Percentage Occupancy		49.10	68.35	77.67	75.26
Average Inpatient Length of Stay (days)		51.70	39.73	17.76	17.10
Number of Non-Inpatient Contacts		30,208	35,301	63,230	75,578
Number of Residential Bed Days		N/A	3,233	5,165	4,418
Unit Costs on Accrued Expenditure					
Average Daily Bed Costs per Inpatient (\$)		366	373	375	455
Average Cost per Inpatient Treated (\$)		18,904	14,804	7,262	7,778
Average Cost per Non-Inpatient Contact (\$)		55.31	64.86	49.61	54.79
Average Cost per Residential Bed Day (\$)		N/A	348.18	340.10	268.12
Central Linen Service					
Kilograms Produced	948,340	893,087	855,991	883,721	906,326
Average Cost per kg (\$)	112.24	115.77	117.23	115.84	114.10

Consolidated Comparative Financial Results

Warrnambool & District Base Hospital

	1994/95	1993/94	1992/93	1991/92
	\$	\$	\$	\$
Total Expenses	40,981,875	40,117,899	41,107,438	30,982,703
Total Revenue	40,278,033	41,115,604	42,839,685	30,817,003
Operating Surplus (Deficit)	(703,842)	997,705	1,732,247	(165,700)
Retained Earnings (Accumulated Losses)	28,540,940	(9,632,007)	(10,231,877)	(9,531,434)
Total Assets	36,839,731	38,035,993	36,424,801	21,877,738
Total Liabilities	8,064,306	8,556,726	9,183,379	7,087,331
Net Assets	28,775,425	29,479,267	27,241,422	14,790,407
Total Equity	28,775,425	29,479,267	27,241,422	14,790,407

Costs Under Casemix & Program Funding

Implemented 1 July 1993

All Campuses	1994/95	1993/94
	\$	\$
Admitted Patient Costs		
Acute	21,693,515	20,020,901
Psychiatric	1,874,571	2,185,787
Nursing Home	1,601,642	1,696,608
Total Admitted Patient Costs	25,169,728	23,903,296
Non-Admitted Patient Costs		
Base Hospital	4,755,602	4,268,178
Psychiatric	4,140,758	3,136,525
Total Non-Admitted Patient Costs	8,896,360	7,404,703
Other Programs Costs		
Acute Hospital	1,633,206	1,291,273
Psychiatric Community Residential	1,184,568	1,756,606
Voluntary Departure Packages – Acute		582,606
Voluntary Departure Packages – Psychiatric		1,058,512
Total Other Programs	2,817,774	4,688,997
Business Units Costs	1,040,778	1,405,149
	37,924,640	37,402,145
Waiting Lists		
	1994/95	1993/94
Category 2	0	18
Category 3	96	4
Total Patients on Waiting List	96	22
Total Quality Management		
Accreditation Status: Fully Accredited to 9th August 1996		

The Hospital's Services

Warrnambool & District Base Hospital is the sub-regional referral hospital for the Barwon-Southwestern region, providing an extensive range of medical, nursing, psychiatric and allied health services to its community.

The Hospital maintains three campuses in Warrnambool, with additional community-based psychiatric services located in Portland, Camperdown and Hamilton.

These direct patient care services are backed by general hospital departments that provide support functions to patient care areas, and maintain the Hospital's environment, administration, information services, human resources and supplies.

Aboriginal Liaison
Aged Care
Alcohol & Drug Service
Anaesthetics
Audiology

Biomedical Engineering
Blood Bank
Breast Cancer Support

Cancer Support Team
Cardiac Rehabilitation Nursing
Central Linen Service
Central Sterile Supplies
Centre Against Sexual Assault
Continence Advisory Nursing
Coronary Care

Day Surgery
Dentistry
Dermatology
Diabetes Education & Resources
— Sub-Agent Diabetes Aust.(Vic.)
District Nursing Service
Domiciliary Midwifery

Emergency
Engineering
Ear, Nose & Throat Surgery
Environmental Services

Family Planning & Education
Finance
Food Services

General Medicine
General Surgery
Gastroenterology

Haemodialysis
Health Education
Health Promotion
Hospital in the Home
Human Resources

Infection Control Nursing
Intensive Care/Critical Care

Koorie Support Training Program

Library

Midwifery
Medical Education
Medical Imaging
Medical Records

Neonatal Special Care
Nursing Home — Corio House
Nutrition

Obstetrics & Gynaecology
Occupational Health & Safety
Occupational Therapy
Oncology
Operating Theatres & Recovery Ward
Ophthalmology
Oral Surgery
Orthodontics

Orthopaedics
Outpatient Clinics

Paediatrics
Pain Clinic
Palliative Care
Pathology
Payroll
Pharmacy
Physiotherapy
Podiatry
Psychiatric Services
— Aged Persons
— Child & Adolescent
— Community-Based Services
— Extended Care
— Inpatient
— Residential Rehabilitation

Rehabilitation
Rural Health

Social Welfare
Speech Pathology
Stomal Therapy Nursing
Supply Department
Systems

Urology

Volunteer Service

Young Women's Pregnancy & Parenting Service

Bed Analysis

Ward	Ward Service	Beds
Acute Services (155 Registered Beds)		
1	Procedural:	
	Haemodialysis	3
	Day Case	12
	Endoscopy	4
2	Short Stay	28
3	Children's	14
4	Intensive Care/Critical Care Unit	6
5	Special Care	20
6	Medical/Surgical:	
	Palliative Care Unit	3
	Medical & Surgical	27
7	Midwifery	16
	Neonatal Special Care	4
8	Rehabilitation	16
12	Accident & Emergency Observation	2
Psychiatric Services		
	Adult Acute	31
Corio House Nursing Home		45
Total Available Beds:		<u>231</u>

Financial Statements 1994-95

141st Annual Report

Contents

34	Certification
35	Revenue and Expense Statement
37	Balance Sheet
38	Consolidated Statement of Changes in Equity
39	Statement of Cash Flows
40	Notes To and Forming Part Of the Financial Statements
47	Auditor-General's Report
48	Donations 1994-95
51	Donations - helping the Hospital care

Certification

Warrnambool & District Base Hospital

In our opinion the Report of Operations and the financial statements of the Warrnambool & District Base Hospital comprising Revenue and Expense Statement, Balance Sheet, Consolidated Statement of Changes in Equity, 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 1995 and the financial position as at that date of the Warrnambool & District Base Hospital.

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.

B. Piesse

B. Piesse
President, Board of Management

E. Northeast

E. Northeast
Treasurer, Board of Management

A.R. Rowe

A.R. Rowe
Chief Executive Officer

I.J. Barton

I.J. Barton
Principal Accounting Officer

Dated the 18th Day of August 1995
at Warrnambool & District Base Hospital

Revenue and Expense Statement

for the Year Ended 30th June 1995

Notes	Hospital Operations \$	Nursing Home \$	Psychiatric Services \$	Eliminations 1994/95 \$	Total 1994/95 \$	Total 1993/94 \$
Operating Revenue Providing Fund Inflows						
Health Service Agreement/Budget Sector						
	Government Grants	180,997	6,804,037		31,422,597	30,642,792
16	24,437,563					
	Indirect Contributions by H. & C.S.				314,231	323,289
17	314,231					
	Patient Fees	397,038			1,705,166	2,280,368
4	1,308,128					
	Recoupment for Private Practice - Use of hospital facilities				840,371	1,162,941
	840,371					
	Linen service			(371,256)	656,004	600,124
	1,027,260					
	Commonwealth Nursing Home Benefits	998,130			998,130	1,041,701
	Other Revenue		29,547		462,877	422,406
19	433,330					
	Abnormal Revenue				98,135	1,755,939
22		98,135				
	Sub Total	28,360,883	1,674,300	6,833,584	(371,256)	36,497,511
						38,229,560

Services Supported by Hospital and Community Initiatives

	Private Practice Fees				589,167	1,047,328
	589,167					
	Special Purpose Revenue		34,925		771,018	597,998
	736,093					
	Interest	152			208,344	140,736
	208,192					
	Donations					13,038
	Capital Income	15,140	551,323		1,341,487	879,608
20	775,024					

Total Operating Revenue Providing Fund Inflows

30,669,359 1,689,592 7,419,832 (371,256) 39,407,527 40,908,268

Less Operating Expenses Requiring Fund Outflows

Services Supported by Health Service Agreement

	Direct Patient Care Services	910,507	1,490,063	(340,630)	15,811,458	14,463,319
	13,751,518					
	Diagnostic and Medical Support Services	25,690		(10,939)	4,809,708	4,224,123
	4,794,957					
	Administration	43,047	818,580		3,490,725	3,235,902
	2,629,098					
	Engineering and Maintenance	60,200	142,935		1,336,460	1,416,712
	1,133,325					
	Domestic and Catering Services	399,180	18,407	(13,533)	2,699,600	3,371,355
	2,295,546					
	Corporate Costs Funded by H. & C.S.				314,231	323,289
17	314,231					
	Workcover and Superannuation	105,368	249,953		2,034,024	2,361,967
	1,678,703					
	Teaching and Research		41,950		138,260	142,911
	96,310					
	Community Services		3,857,718	(6,154)	4,302,067	4,090,087
	450,503					
	Linen Services				959,981	934,436
	959,981					
	Other Expenses				134,748	349,400
	134,748					
	Abnormal Expenses				86,587	1,755,939
22	86,587					
	Sub Total	28,325,507	1,543,992	6,619,606	(371,256)	36,117,849
						36,669,440

Services Supported by Hospital and Community Initiatives

	Private Practice Diagnostic Services				519,089	691,038
	519,089					
	Special Purpose Expenses				217,539	411,560
	217,539					
	Assets Sold	11,622	552,243		1,305,225	789,384
20	741,360					
	Total Operating Expenses Requiring Fund Outflows	29,803,495	1,555,614	7,171,849	(371,256)	38,561,422
21						

Continued . . .

Revenue and Expense Statement, continued

	Notes	Hospital Operations \$	Nursing Home \$	Psychiatric Services \$	Eliminations 1994/95 \$	Total 1994/95 \$	Total 1993/94 \$
Operating Surplus/(Deficit)							
Providing Fund Inflows		865,864	133,978	247,983		1,247,825	2,346,846
Operating Revenue Not Providing Fund Inflows							
Long Service Leave							207,336
Operating Expenses Not Requiring Fund Outflows							
Depreciation		1,594,124	32,854	310,860		1,937,838	1,136,868
Long Service Leave		409,268	24,796	101,727		535,791	419,609
Abnormal Expenses	22	348,544				348,544	
Operating Surplus/(Deficit) Prior to Capital Items							
		(1,486,072)	76,328	(164,604)		(1,574,348)	997,705
Income designated for Capital purposes							
Government Grants	16	507,440		233,800		741,240	
Other - Donations		124,216		5,050		129,266	
Total Income designated for Capital purposes							
		631,656		238,850		870,506	
Operating Surplus/(Deficit) for the Year							
		(854,416)	76,328	74,246		(703,842)	997,705
Retained Surplus (Accumulated Deficit) at 1 July 1994							
		(8,729,391)	(275,085)	(627,531)		(9,632,007)	(10,231,877)
Available for Appropriation							
		(9,583,807)	(198,757)	(553,285)		(10,335,849)	(9,234,172)
Aggregate of Amounts Transferred from Reserves							
	1p	28,853,766	535,668	9,206,182		38,595,616	
	10	281,173				281,173	(397,835)
Retained Surplus/(Accumulated Deficit) at 30th June 1995							
		19,551,132	336,911	8,652,897		28,540,940	(9,632,007)

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

Balance Sheet

as at 30th June 1995

	Notes	Hospital Operations 1994/95 \$	Nursing Home 1994/95 \$	Psychiatric Services 1994/95 \$	Total 1994/95 \$	Total 1993/94 \$
EQUITY						
Capital						
Contributed Capital						38,595,616
Funds held for Restricted Purposes						281,173
Funds held in Perpetuity		22,000			22,000	22,000
Reserves						
Asset Revaluation Reserve		3,259,019	485,105	(3,531,639)	212,485	212,485
Retained Surplus/(Accumulated Deficit)		19,551,132	336,911	8,652,897	28,540,940	(9,632,007)
Total Equity						
		22,832,151	822,016	5,121,258	28,775,425	29,479,267
LIABILITIES						
Current Liabilities						
Bank Overdraft		133,182			133,182	1,442,650
Creditors	2	581,325	18,734	263,502	863,561	532,422
Accrued Expenses	9	66,538	30,570	156,905	254,013	406,305
Provision for Employee Entitlements	11	2,968,822	174,194	645,781	3,788,797	3,193,372
Patient Trust	12	3,148	42,668	40,715	86,531	121,559
Non Current Liabilities						
Provision for Employee Entitlements	11	2,100,913	99,616	737,693	2,938,222	2,860,418
Total Liabilities						
		5,853,928	365,782	1,844,596	8,064,306	8,556,726
Total Equity and Liabilities						
		28,686,079	1,187,798	6,965,854	36,839,731	38,035,993
ASSETS						
Current Assets						
Cash at Bank and on hand			367,002	208,212	575,214	1,269,996
Patient Fees Receivable	5	416,354	15,870		432,224	620,583
Stores	6	443,909			443,909	428,158
Debtors and Accrued Revenue	7	693,293			693,293	615,169
Patient Trust	12	3,148	42,668	40,715	86,531	121,559
Prepayments		23,838			23,838	12,766
Linen in Use		348,544			348,544	618,967
Short-term Investments	8	2,052,000		1,100,000	3,152,000	2,242,000
Total Current Assets						
		3,981,086	425,540	1,348,927	5,755,553	5,929,198
Non Current Assets						
Land	13	1,118,000	150,000	933,872	2,201,872	2,178,900
Buildings	13	18,397,946	543,319	3,729,706	22,670,971	22,933,499
Plant & Equipment	13	3,593,053	37,832	145,244	3,776,129	4,414,431
Furniture & Office Equipment	13	1,033,331	12,682	273,595	1,319,608	1,449,708
Motor Vehicles	13	562,663	18,425	534,510	1,115,598	1,130,257
Total Non-Current Assets						
		24,704,993	762,258	5,616,927	31,084,178	32,106,795
Total Assets						
		28,686,079	1,187,798	6,965,854	36,839,731	38,035,993

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

Consolidated Statement of Changes in Equity

for the Year Ended 30th June 1995

Notes	Contributed Capital \$	Funds Held for Restricted Purposes \$	Funds Held in Perpetuity \$	Asset Revaluation Reserve \$	Retained Surplus or Accumulated Deficit \$	Consolidated Total	
						1994/95 \$	1993/94 \$
Balance at Beginning of the Year	38,595,616	281,173	22,000	212,485	(9,632,007)	29,479,267	27,241,422
Less transfer to retained earnings 1 July 1994	1p (38,595,616)				(38,595,616)		
Surplus/(Deficit) for the year					(703,842)	(703,842)	997,705
Contributed Capital							
H&CS Grants	16						862,200
Donations (Gifts)							181,764
Transfers to Reserves	10						
Retained Surplus/(Deficit)		(281,173)			(281,173)		
Restricted Purposes							(397,835)
Contributed Capital							(493,655)
Transfer from Reserves	10						
Restricted Purposes				281,173	281,173	891,490	
Contributed Capital				38,595,616	38,595,616		
Other							
Asset Revaluations							196,176
Balance at End of Year			22,000	212,485	28,540,940	28,775,425	29,479,267

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

Statement of Cash Flows

for the Reporting Period Ended 30th June 1995

Notes	Hospital 1994/95 \$	Nursing Home 1994/95 \$	Psychiatric Services 1994/95 \$	Total 1994/95 \$	Total 1993/94 \$
Cash Flows From Operating Activities					
Services Supported by Health Services Agreement					
Receipts					
	24,153,769	180,997	6,572,637	30,907,403	31,488,279
		98,135		98,135	
					1,755,939
	1,498,193	1,393,462		2,891,655	3,292,296
	840,371			840,371	1,162,941
	1,036,903			1,036,903	1,033,272
	351,457		29,547	381,004	459,356
	27,880,693	1,672,594	6,602,184	36,155,471	39,192,083
Payments					
	(18,530,024)	(1,157,216)	(4,742,430)	(24,429,670)	(24,270,308)
	(9,475,022)	(359,765)	(1,467,676)	(11,302,463)	(11,536,282)
					(1,755,939)
	(28,005,046)	(1,516,981)	(6,210,106)	(35,732,133)	(37,562,529)
Services Supported by Hospital & Community Initiatives					
Receipts					
	212,104	152		212,256	136,824
	589,167			589,167	1,047,328
	736,093		34,925	771,018	611,036
	81,873			81,873	9,417
	1,619,237	152	34,925	1,654,314	1,804,605
Payments					
	(519,089)			(519,089)	(691,038)
	(25,424)			(25,424)	(382,629)
	(544,513)			(544,513)	(1,073,667)
	950,371	155,765	427,003	1,533,139	2,360,492
Cash Flows From Investing Activities					
	(428,761)	(21,150)	(242,455)	(692,366)	(972,032)
	(808,822)	(29,573)	(689,685)	(1,528,080)	(2,642,784)
	775,024	15,140	551,323	1,341,487	554,558
					101,800
	124,216		5,050	129,266	181,764
	(338,343)	(35,583)	(375,767)	(749,693)	(2,776,694)
Cash Flow From Government					
	507,440		233,800	741,240	862,200
	507,440		233,800	741,240	862,200
	1,119,468	120,182	285,036	1,524,686	445,998
	777,350	246,820	1,023,176	2,047,346	1,601,348
	1,896,818	367,002	1,308,212	3,572,032	2,047,346

This statement should be read in conjunction with the accompanying notes

Notes To & Forming Part Of the Financial Statements

for the Year Ended 30th June 1995

Note 1: Statement of Accounting Policies

The 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 the Australian Society of Certified Practising Accountants.

a) Accrual Basis

Except where otherwise stated, these financial statements have been prepared on the accrual basis whereby revenues and expenses are recognised when they are earned or incurred, and are brought to account in the period to which they relate.

b) Historical Cost

The financial statements have been prepared on a 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).

c) Rounding Off

All amounts shown in the financial statements are expressed to the nearest dollar.

d) Investments

Investments 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.

e) 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. This depreciation charge is not funded by the Department of Health and Community Services Victoria.

f) Stores

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

g) Employee Entitlements

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

Long Service Leave

The provision for long service leave is determined in accordance with Accounting Standard AAS30. Generally, the entitlement under various awards becomes payable upon completion of ten years' service. The proportion of long service leave estimated to be payable within the next financial year is a current liability. The balance of the provision is classified as a non-current liability measured at the present value of the estimated future cash outflow arising from employee's services to date.

Salaries & Wages, Annual Leave and Accrued Days Off

Liabilities of 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 that date.

h) Inter-segment Transactions

The reported Income and Expenditure for the hospital, nursing home, linen service and psychiatric services include the following material inter-segment transactions, and the effect of these transactions has been eliminated to reflect the extent of the Hospital's operations as a group.

Linen service charges received from hospital	307,329
Linen service charges received from psychiatric services	13,725
Linen service charges received from nursing home	50,202
Total Inter-segment Revenue	371,256
Linen service charges paid by Hospital Direct Patient Care Services	282,090
Linen service charges paid by Psychiatric Services Direct Patient Care Services	8,338
Linen service charges paid by Nursing Home Patient Care Services	50,202
	340,630
Linen service charges paid by Hospital Diagnostic and Medical Support Services	10,939
Linen service charges paid by Domestic and Catering Services	13,533
Linen service charges paid by Community Services	6,154
Total Inter-segment Expenditure	371,256

i) 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. Separation of these funds from the Operating Fund is required under the Health Services Act 1988.

j) Leased Equipment

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.

k) Donations

Donations for capital purposes are recognised as income designated for capital purposes in the Revenue and Expense Statement.

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

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

m) Revenue Recognition

Revenue is recognised at the time when goods are sold or services rendered.

n) Non-current Assets

The gross proceeds from the sale of non-current assets have been included as operating revenue providing fund inflows while the written down value of the assets sold has been shown as an operating expense requiring fund outflows.

o) Private Practice Fees

The apportionment of private practice fees between the Hospital and medical practitioners is based on the arrangements between the parties.

p) Change in Accounting Policies

The accumulated balances of Contributed Capital have been transferred to retained earnings as a result of the new Directions of the Minister for Finance. All future capital receipts will be initially reported through the Revenue and Expense Statement.

Note 2: Creditors and Borrowings

The amount of \$863,561 is a current liability. The Hospital does not have any debts as a result of public borrowing or financial accommodation.

Note 3: Bank Overdraft Facility

Arrangements have been made with the ANZ Banking Group Ltd to provide a short term bank overdraft facility of \$450,000 as required.

Note 4: Patient Fees Raised

Commonwealth Nursing Home inpatient benefits are included in patient fee revenue. The Hospital charges fees in accordance with the Department of Health and Community Services Victoria Directive issued under Regulation 8 of the Hospital and Charities (Fees) Regulation 1988 as amended.

	1994/95 \$	1993/94 \$
Inpatient Fees - Hospital	1,159,757	1,740,367
Inpatient Fees - Nursing Home	397,038	391,390
Outpatient Fees	148,371	115,576
Inpatient Fees - Psychiatric Services		33,035
Total	1,705,166	2,280,368

Note 5: Patient Fees Receivable

	1994/95 \$	1993/94 \$
Hospital Inpatient Fees Receivable	229,780	241,231
Hospital Outpatient Fees Receivable	46,048	19,668
Less Provision for Doubtful Debts	(4,178)	(4,445)
Total Hospital	271,650	256,454
Nursing Home Patient Fees Receivable	15,870	14,164
Private Practice Fees Receivable	149,670	349,965
Less Provision for Doubtful Debts	(4,966)	
Total	432,224	620,583

Note 6: Stores

	1994/95 \$	1993/94 \$
Pharmaceuticals	111,932	116,296
Medical & Surgical	92,141	77,987
Pathology		20,546
Stationery	47,516	39,178
Domestic	28,083	22,118
Food Supplies	14,259	13,542
Kiosk Supplies	7,312	9,255
Repairs & Maintenance Supplies	6,165	4,241
Bulk Linen Store - Linen Service	136,501	124,995
Total	443,909	428,158

Note 7: Debtors and Accrued Revenue

	1994/95 \$	1993/94 \$
Regional Debtors		
- Regional Institutions	259,457	228,322
Linen Service Debtors	119,936	129,579
Accrued Revenue		
- H&CS Grants	313,900	30,106
- Local Government		223,250
- Interest		3,912
Total	693,293	615,169

Note 8: Investments

Current:	Capital Fund	Endowment Fund	Total 1994/95	Total 1993/94
	\$	\$	\$	\$
Interest Bearing Term Deposit	3,130,000	22,000	3,152,000	2,242,000
Total	3,130,000	22,000	3,152,000	2,242,000

Note 9: Accrued Expenses

	1994/95	1993/94
	\$	\$
Program Expenses	39,538	
Grant Recall	187,475	388,305
Audit Fee	27,000	18,000
Total	254,013	406,305

Note 10: Transfers Between Reserves

	1994/95	1993/94
	\$	\$
Transfers To Reserves		
Funds held for Restricted Purposes		
Transfers of assets purchased to Contributed Capital		493,655
Net revenue Relating to Restricted Purposes Included in Revenue and Expense Statement and Subsequently Transferred from Retained Surplus		397,835
		891,490
Transfer From Reserves		
Restricted Purposes Fund Transferred to Retained Surplus	281,173	

Note 11: Provision For Employee Entitlements

Current:	Total 1994/95	Total 1993/94
	\$	\$
Long Service Leave	769,873	611,042
Accrued wages and salaries	869,281	569,399
Annual leave	2,100,977	1,961,898
Accrued days off	48,666	51,033
Total Current	3,788,797	3,193,372
Non-Current		
Long service leave	2,938,222	2,860,418
Total	6,727,019	6,053,790

Note 12: Patient Trust

	1994/95	1993/94
	\$	\$
Corio House Patient Trust	42,668	75,798
Equipment Deposits Hospital	3,148	6,226
Psychiatric Services Patient Trust	40,715	39,535
Total	86,531	121,559

Note 13: Non-current Assets

	Gross Valuation 30/06/95	Deprec. for 1994/95	Accum. Deprec. 30/06/95	Net Assets at 30/06/95	Net Assets at 30/06/94
	\$	\$	\$	\$	\$
Land at valuation	2,201,872			2,201,872	2,178,900
Buildings at valuation	23,831,468	931,922	1,160,497	22,670,971	22,933,499
Plant & Equipment at cost	8,176,411	546,301	4,400,282	3,776,129	4,414,431
Furniture & Office Equipment at cost	2,262,535	284,254	942,927	1,319,608	1,449,708
Motor Vehicles at cost	1,336,790	175,361	221,192	1,115,598	1,130,257
	37,809,076	1,937,838	6,724,898	31,084,178	32,106,795

The valuations of land and buildings were conducted by T.E. Morgan, Registered Valuer of the Office of the Valuer General in March 1994.

Note 14: Capital Commitments

The hospital had outstanding commitments at 30 June, 1995 for capital expenditure under contracts for the supply of works, services and materials to the value \$511,907

Note 15: Lease Liabilities

Aggregate lease expenditure contracted for at balance date.

Operating Lease	1994/95	1993/94
	\$	\$
Cancellable operating leases:-		
Not later than one year		59,400
Later than one year but not later than 2 years		51,000
Later than 2 years but not later than 5 years		18,750

Note 16: Government Grants

Operating Grants	1994/95	1993/94
	\$	\$
H&CS Ordinary Hospital Grant	23,444,903	21,873,500
H&CS Ordinary Psychiatric Services Grant	6,804,037	7,736,595
H&CS Nursing Home Grant	180,997	177,712
Grants paid by other State Departments		
Visiting Nursing Service - Ordinary	490,710	491,315
Program for Aids for Disabled People	89,057	130,110
Managed Care Project	26,500	
Alcohol & Drug Services	16,466	16,466
Sexual Assault Unit	122,400	122,400
Family Planning Unit	10,419	10,419
Multi-Purpose Centre Project	36,251	
Alcohol & Drug Manuals		16,683
Commonwealth Dental Project	96,266	67,592
Sexual Assault Unit Specific Projects	33,624	
Farm Injury Project	10,000	
Rural Withdrawal Unit Project	8,580	
VICCS Program	1,487	
Koori Peer Support & Training Program	34,400	
Young Womens Pregnancy & Parenting Program	16,500	
Total Operating Government Grants	31,422,597	30,642,792
Capital Grants		
H&CS Infrastructure/Equipment	483,350	525,000
H&CS District Nursing Service	16,800	36,244
H&CS Commonwealth Dental Program Equipment	21,090	
H&CS Rehabilitation Capital Works		125,956
H&CS Annual Provisions	220,000	175,000
Total Capital Government Grants	741,240	862,200
Total Government Grants	32,163,837	31,504,992

Includes \$313,900 which relates to provisional year end adjustment, that is, the amount owed to finalise hospital funding based on performance during the year under the Health Service Agreement. Commonwealth Nursing Home inpatient benefits are listed separately in the Revenue and Expense Statement.

Note 17: Indirect Contributions By Department of Health and Community Services Victoria

The Department of Health and Community Services makes certain direct 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.

	1994/95	1993/94
	\$	\$
Insurance	314,231	310,799
Industrial Relations Service		6,278
Health Computing Service Charges		6,212
	314,231	323,289

Note 18: 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 5% benefit based on the salaries of each employee directly to the Hospital Superannuation Board on a monthly basis.

The following two contributory scheme options are also available:

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

The outstanding liability for the year ending 30 June 1995 is nil and contributions were as follows:

	1994/95 Contrib'ns \$	1993/94 Contrib'ns \$
Hospital	1,400,072	1,604,310
Nursing Home	88,740	93,393
Linen Service	60,229	71,901
Psychiatric Services	104,821	95,147
Total	1,653,862	1,864,751

Contributions are paid in accordance with the Hospital Superannuation Act 1988 and the State Superannuation Act 1988.

Note 19: Other Revenue - Services Supported by Health Services Agreement

	1994/95 \$	1993/94 \$
Pharmacy	33,891	27,997
Accommodation	89,631	94,812
Outpatient revenue	49,225	41,892
Cafeteria	85,620	93,065
Meals on Wheels	114,787	149,144
Sundry	89,723	15,496
Total	462,877	422,406

Note 20: Capital Income

Gross proceeds from sale of non-current assets was \$1,341,487. The profit on sale of non-current assets was \$36,262.

Note 21: Operating Expenses

Total Expenditure for major categories of operating expenses by program.

	Acute Care \$	Psychiatric Services \$	Aged Care \$	Other \$	Total 1994/95 \$	Total 1993/94 \$
Services Supported by Health Services Agreement						
Salaries	14,622,363	4,727,802	2,107,782	475,703	21,933,650	24,329,359
Salary Oncosts	1,988,708	375,724	269,250	84,860	2,718,542	2,457,649
Other	9,368,618	1,516,080	466,210	399,418	11,750,326	10,289,700
Total Expenses requiring Fund Outflows (per Revenue and Expense Statement)	25,979,689	6,619,606	2,843,242	959,981	36,402,518	37,076,708
Add Operating Expenses not requiring Fund Outflows						
Depreciation	1,434,629	310,860	62,378	82,773	1,890,640	1,089,670
Long Service Leave	355,425	101,727	49,952	19,436	526,540	419,609
Sub-Total	27,769,743	7,032,193	2,955,572	1,062,190	38,819,698	38,585,987

Services Supported by Health and Community Initiatives

Salaries	334,198				334,198	392,317
Salary Oncosts	14,382				14,382	12,950
Other	1,112,778	552,243	24,251	4,001	1,693,273	1,486,715

Total Expenses requiring Fund Outflows (per Revenue and Expense Statement)

Total Expenses requiring Fund Outflows (per Revenue and Expense Statement)	1,461,358	552,243	24,251	4,001	2,041,853	1,891,982
Add Operating Expenses not requiring Fund Outflows						
Depreciation	47,198				47,198	47,198
Long Service Leave	9,251				9,251	
Sub-Total	1,517,807	552,243	24,251	4,001	2,098,302	1,939,180

Grand Total

Grand Total	29,287,550	7,584,436	2,979,823	1,066,191	40,918,000	40,525,167
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Note 22: Abnormal Revenue and Expenses

	1994/95 \$	1993/94 \$
Abnormal Revenue Providing Fund Inflows		
Voluntary Departure Packages - Receipts		1,755,939
Prior Year grant received	98,135	
	98,135	1,755,939
Abnormal Expenses Requiring Fund Outflows		
Voluntary Departure Packages - Payments		1,755,939
Prior year Grant Recall	57,800	
Prior year Workcover Levy	28,787	
	86,587	1,755,939
Abnormal Expenses Not Requiring Fund Outflows		
Linen in Use Devaluation	348,544	

Note 23: Reconciliation of Net Cash Used in Operating Activities to Operating Result

	Hospital 1994/95 \$	Nursing Home 1994/95 \$	Psych. Services 1994/95 \$	Total 1994/95 \$	Total 1993/94 \$
Operating Result	(1,486,072)	76,328	(164,604)	(1,574,348)	997,705
Depreciation	1,594,124	32,854	310,860	1,937,838	1,136,868
(Increase) Decrease in Accrued Revenue	(279,882)			(279,882)	474,182
(Increase) Decrease in Patient Fees Receivable	190,065	(1,706)		188,359	(31,273)
Increase (Decrease) in Trade Creditors	201,362	(17,397)	174,174	358,139	(295,876)
Increase (Decrease) in Accrued Expenses	473,800	66,678	53,924	594,402	448,419
Long Service Leave Exp. (Rev)	409,268	24,796	101,727	535,791	212,274
Long Service Leave Paid	(563,988)	(22,270)	(49,998)	(636,256)	(475,175)
(Increase)/Decrease in Stores	(93,872)			(93,872)	(59,247)
(Profit)/Loss on Sale of Assets	(33,664)	(3,518)	920	(36,262)	(90,224)
Decrease in Debtors	201,758			201,758	55,605
(Revaluation)/Devaluation of Linen In Use	348,544			348,544	
(Increase) Decrease in Prepayments	(11,072)			(11,072)	(12,766)
	950,371	155,765	427,003	1,533,139	2,360,492

Note 24: Director Related Disclosures

a) Directors

The following persons were Directors during 1994/95 - Ms B. Piesse, Mr J. Clark, Mr J. Samon, Mr. E. Northeast, Mr. S. Carroll, Mr. A. Fligelman, Dr. G. Irvine, Mr. F. Lodge, Miss M. Mitchell, Dr. K. Nunn, Mr. J. Wilson and Mr. W. Philpot

b) Remuneration of Executive Officers

Number of Executive Officers with remuneration between 100,000 - 109,999	2
Total remuneration received	207,583

c) Other Transactions of Director-Related Entities

Warrnambool and District Base Hospital entered into the following transactions with directors and director-related parties within normal commercial relationships on terms and conditions no more favourable than those available in similar arm's length dealings.

	1994/95 \$
Provision of medical services	230,134
Provision of consultancy/agency services	12,354
Total	242,488

Note 25: 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.

	1994/95 \$	1993/94 \$
Operating Fund		
- Cash at Bank and on Hand	626,935	388,033
Capital Fund		
- Cash at Bank and on Hand	1,809,083	910,891
Specific Purpose Fund		
- Cash at Bank and on Hand	1,014,706	488,359
Linen Service		
- Cash at Bank and on Hand	121,308	260,063
Cash at End of Reporting Period	3,572,032	2,047,346

Audit Scope

The accompanying financial statements of the Warrnambool and District Base Hospital for the year ended 30 June 1995, comprising revenue and expense statement, balance sheet, consolidated statement of changes in equity, statement of cash flows and notes to the financial statements, have been audited. The members of the Hospital's Board of Management are responsible for the preparation and presentation of the financial statements and the information they contain. An independent audit has been carried out in order to provide an audit report on the financial statements as required by the *Audit Act* 1994.

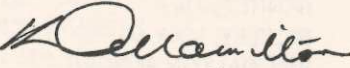
The audit has been conducted in accordance with Australian Auditing Standards to provide reasonable assurance as to whether the financial statements are free of material misstatement. The audit procedures included an examination, on a test basis, of evidence supporting the amounts and other disclosures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

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

Audit Opinion

In my opinion, the financial statements present fairly the financial position of the Warrnambool and District Base Hospital as at 30 June 1995 and the results of its operations and its cash flows for the year ended on that date in accordance with Australian Accounting Standards and other mandatory professional reporting requirements and comply with the requirements of the *Financial Management Act* 1994.

MELBOURNE
31 / 8 / 1995


K.G. HAMILTON
Acting Auditor-General

Donations, 1994-95

Contributions play a vital part in the funding of many Hospital projects and equipment items, and the Hospital gratefully acknowledges the generous support of its community. Space limitations, however, permit only a selection of donations to be listed in this report. A complete contributor listing is held by the Hospital's General Office.

3YB	170.00				
A.N.Z. BANK	100.00				
A.N.Z. TRUSTEES					
Estate John W Anderson	50.00				
A.N.Z. TRUSTEES					
Estate Arthur Briggs	31.00				
A.N.Z. TRUSTEES					
Estate John F. Gordon	600.00				
A.N.Z. TRUSTEES					
Estate Seth W. Patman	725.00				
ABERNETHY, Miss D	20.00				
ABSALOM, IE	25.00				
ADAMS, Miss Nellie	20.00				
ALTMANN, Mrs I	20.00				
ANSCOMBE, E	10.00				
AUSTRALIAN UNITY	600.00				
AYNSLEY FASHIONS	10.00				
BARTON, Mr R	30.00				
BARTON, Miss J	20.00				
BATTEN, HS & JM	20.00				
BATTISTELLO, E & MF	50.00				
BAUDINETTE, RA & LJ	20.00				
BEAVIS, Miss AE	20.00				
BEAVIS, Miss M	15.00				
BENNET, J & F	40.00				
BICKLEY, Mr & Mrs EP	10.00				
BILL DALTON FLOORS	50.00				
BILL FISH SHOES	20.00				
BLAIN, Emily	20.00				
BLAIN, Gordon	20.00				
BOUNDS, VE & JE	35.00				
BOYLE, LE	25.00				
BRAUER COLLEGE	1100.00				
BROOKES, Colin	15.00				
BRYCE, Ted & Edna	20.00				
BURLEIGH, NR & GR	20.00				
BURLEIGH, CL & ML	20.00				
BUZOLICH & CO.	20.00				
CALLAGHAN MOTORS	50.00				
CAMPBELL, Mr PR	40.00				
CAPLE, Mr & Mrs JH	25.00				
CHISLETT, R & P	20.00				
CHRISTIE, Mrs Edna J	25.00				
CLARK, AR	80.00				
CLARKE, TI & HM	50.00				
COGGINS, Mrs Barbara	20.00				
CONLON & LEISHMAN					
Bequest Brierly Hospital	5000.00				
COWLEY, Mr & Mrs J	25.00				
COX, Mr & Mrs K & L	50.00				
CROTHERS, RA & MD	25.00				
CROTHERS, M	20.00				
CROW, WA	50.00				
CUE, Mrs Elaine	20.00				
CURTAINS'N'THINGS	50.00				
DALTON, Garry	20.00				
DAY, Mrs Agnes	55.00				
DENNIS AMCAL PHARMACY	50.00				
DESMOND DUNNE & DWYER	20.00				
DOUG McCONNELL PANELS	100.00				
DOUGLAS, Miss HM	12.00				
DRAPER, AL	50.00				
EDUCATION CENTRE	75.00				
ERICSON, Mr D	20.00				
FERNER, JR & EA	20.00				
FISCHER, Stephen	100.00				
FISH, AR & PR	50.00				
FITZGERALD, Mrs CM	10.00				
FLAHERTYS CHOCOLATES	10.00				
FLAVELL, ME	20.00				
FLEET, Mr & Mrs R	50.00				
FLEMING, Mrs L	10.00				
FLETCHER JONES	10.00				
FOLEY, PW	20.00				
FORTY WINKS	10.00				
FRANCE, Ensor & Mary	50.00				
FURNISS, John S	100.00				
GALLAGHER, Miss A	15.00				
GAME, I	25.00				
GAWLETT, Mrs H	20.00				
GEORGE TAYLORS STORES	100.00				
GERSCH, Mrs IO	25.00				
GIBB, Mr & Mrs K	25.00				
GIDDENS-PRYOR, Beryl	200.00				
GILBERT, Mrs. L	20.00				
GILBERT, HN & NF	20.00				
GILLIN, V & I	40.00				
GLEESON, Miss HD	10.00				
GOOD, John & Margaret	20.00				
GOODWIN, Edna	30.00				
GOULD, Leslie & Cheryl	30.00				
GRAHAM, Mrs R	30.00				
GRAHAM, Mrs HE	30.00				
GRAYHAM, Mrs G	25.00				
GUILD, MH	30.00				
GUNNERS OFFICE					
EQUIPMENT	100.00				
GWENYTH LOUISE	20.00				
HALL, Graham	10.00				
HAMMOND & SONS	50.00				
HARRIS, A	1000.00				
HARRIS, Rita	25.00				
HARRIS, D	20.00				
HARRY, Mrs LD	10.00				
HAWKEN, AL & OA	20.00				
HAWKER, Trevor	100.00				
HAYLOCK, Mr & Mrs P	20.00				
HEARN, Marty	100.00				
HENDERSON, Mr & Mrs J	40.00				
HENRY, Oscar	20.00				
HUGHES, Mrs EA	20.00				
HUNTER, Mrs D	1000.00				
HUTCHINS, Mrs A	10.00				
HYMET, Mr F	12.00				
JOHNSON, Ms Lorraine	20.00				
JONES, Ewen	100.00				
KERMOND, Les	25.00				
KING, Ashley & Mandy	20.00				
KOROIT ST ELECTRONICS	10.00				
LANE, Brent	400.00				
LIFESTYLE FURNITURE	10.00				
LINDSAY'S PHARMACY	10.00				
LUXTON, Mrs TP	25.00				
LYNES, Mrs Marie	20.00				
MACARTNEY, Janice	100.00				
MACFARLANE, Mrs M	25.00				
MACKAY TAYLOR	500.00				
MAHER, Bruce & Liz	50.00				
MAHOOD, Miss MR	20.00				
MANSBRIDGE MOTORS	50.00				
MARTIN, Janet	20.00				
MARWOOD, Mrs Alma	10.00				
MARWOOD, Mrs A	20.00				
MATERIA, Salvatore	250.00				
MATHIESON, Mr J	10.00				
McARLEIN, Margaret	50.00				
McCOSH, Arthur	20.00				
McCULLAGH, ML	100.00				
McDOWELL, Mr & Mrs N	20.00				
McDOWELL, Mervyn	50.00				
McKENNA, Mrs Mary	10.00				
McKINNON, Sharon	10.00				

McLAREN, Ian	30.00	RULE, Grace	25.00	WBOOL FOAM FACTORY	20.00
McLAREN, Mrs Helen	10.00	RYAN, Mr & Mrs E	15.00	WBOOL MEDICAL	
McLEAN, Mr & Mrs I & ER	50.00			STAFF GROUP	2253.15
McLEOD, KE	30.00			WBOOL DISTRICT	
McLEOD, GL & BL	25.00	SACKS JEWELLERS	300.00	OLD TIME DANCE	100.00
MENZEL, Mr J	20.00	SAFEWAY WARRNAMBOOL	274.60	WBOOL TOYWORLD	10.00
MITCHELL, Joan	10.00	SAUNDERS, Lindsay	500.00	WEST COAST	
MITCHELL, Isabel	20.00	SCOTT, Elsa	63.60	CONVEYANCING	20.00
MOORE, Mr & Mrs JP	10.00	SCOTT, Christina	10.00	WEST FRIDGE PTY LTD	500.00
MORGAN, GE & NJ	20.00	SCOTT, AE	50.00	WESTERN DISTRICT	
NARIK, Mr & Mrs EJ	20.00	SHEPPARD, Mr & Mrs G	100.00	FRUIT SUPPLY	10.00
NATIONAL UNION		SHIRE OF MOYNE	500.00	WESTERN DISTRICT	
OF WORKERS	400.00	SINNOTT, Des	10.00	LARYNGECTOMY GRP	200.00
NEISH, Mr J	20.00	SMART, Mrs CP	20.00	WHEELHOUSE, K & J	30.00
NESTLES	200.00	SMITH, Mrs Frances	20.00	WHILLAS, Phyllis	50.00
NEWS, Hunter	2000.00	SMITH, KE & VJ	50.00	WILLIAMSON, Vivienne	10.00
NORDIN FAMILY TRUST	40.00	SOVEREIGN		WILLIAMSON, Miss M	50.00
NOVICE, Mrs JM	30.00	OFFICE MACHINES	10.00	WILLINGHAM, Annie	1000.00
NORTHEAST		SPIKINS ENGINEERING	100.00	WILLSHER, Joan & Ron	20.00
CUSSEN & STEERE	200.00	STAFFORDS JEWELLERS	10.00	WINES, William J	20.00
NUNN, Helen & Keith	25.00	STEVENS, L	25.00	WRIGHT, George	50.00
		S.W. COLLEGE OF TAFE	201.25		
		STOCK, FC	20.00		
O'GRADY, F & V	100.00	SWINTON, Mr & Mrs	100.00		
O'REILLY, PG & BD	10.00	SWINTON, F	200.00		
ORIENTAL RESTAURANT	200.00				
OSTOMY ASSOCIATION	200.00				
OWENS OF WARRNAMBOOL	20.00	T&C WILLIAMS			
		GLASS & GLAZING	70.00		
		TAYLOR, Mr Keith	30.00		
PALLISTER, William	300.00	TAYLOR, Betty	10.00	Donations in Memorium	
PARK, Dr AT	10.00	TAYLORS COLONIAL	25.00	In Memory of RAY ANSELL	
PARKER, K & G Pty Ltd	50.00	TAYLOR, Mr & Mrs I	20.00	HOGAN, Mrs Agnes	50.00
PARKINSON, L	10.00	TEALE Miss Yvonne	20.00	LEMMENS, Gail & Greg	30.00
PERPETUAL TRUSTEES	28471.00	THE SUNSHINERS	50.00	PEOPLES, A & G	100.00
PETHARD TARAX		THOMPSON, John H	300.00	YOUNG, CJ	50.00
CHARITABLE TRUST	300.00	TOLHURST, Mr W	10.00		
PHILLIPS, David	10.00	TREWARTHAS	10.00	In Memory of KITTY BARKER	
PIKE, Mr & Mrs Geoff	100.00	TRIGG, Mr & Mrs MR	20.00	ARNOLD, Mollie	10.00
PLOENGES, W	50.00	TULLOCH, RW	100.00	BARKER FAMILY	130.00
POWERCOR AUST LTD	400.00			McDONALD, M & M	20.00
PRICE, Mrs Lorna	150.00	ULYSSES		MORRIS, Verie	20.00
PRICE ATTACK	10.00	FUNDRAISING TEAM	4151.45	THOMAS, E	10.00
PRIMMER & LUDEMAN	50.00	UNITING CHURCH		WATTS, L & E	10.00
PURNIM FRAMLINGHAM		EVENING FELLOWSHIP	100.00		
LADIES	200.20			In Memory of	
PURTELL, Mr T	10.00			LYNDSAY BAULCH	
PYERS, Mrs Sussanne	34.50	VG PETERS & CO	20.00	BAULCH, Mrs Marjorie	50.00
		VAN BARREN, Mr John	20.00	BEARD, G & L	10.00
				MALSEED, Doug	20.00
R.A.C.V.	10.00			ROBERTSON, E & W	10.00
RADWELL, Mrs Mavis	60.00	W.H.I.P.	250.00	SHARROCK, Audrey	10.00
RAMSAY, N & J	10.00	WAINWRIGHT, H & M	100.00	TAYLOR, Mrs Betty	10.00
RATCLIFFE, WT	25.00	WALLACE, H& T	25.00	TOLLEY, M	25.00
RAUERT, Val & Ron	20.00	WALTER, Miss J	80.00		
REED, S L & D	10.00	WALTER, ET	50.00		
RIOS RESTAURANT	10.00	WALTER, JC	50.00	In Memory of MAISIE BEST	
RITCHIE, DM	50.00	WARNER, Daryl	50.00	HARTLEY, Joy	100.00
RITCHIE, Mr & Mrs WJ	10.00	WBOOT CENTRAL		JACKSON, PA	10.00
ROBSON, Mr & Mrs VG	50.00	ROTARY CLUB	6207.25	JOHNSON & OSHEA	10.00
ROGERS, Mr Bruce R	50.00	WBOOT CO-OP	500.00	MURNANE, B	20.00
ROGERS NEWSAGENCY	100.00	WBOOT COLLEGE	1785.00	SPEIRS, Mrs M	10.00
ROW, Mrs K	30.00	WBOOT EAST ROTARY	200.00	SPROUL, Jean	20.00

Donations – Helping the Hospital Care

In Memory of JIM CARTER

COOPER, Jill	10.00
CORNISH FAMILY	110.00
CURRAN, Gordon	25.00
JEWELL, June	10.00
JOHNSON, Ray & Beryl	10.00
PRICE, Lorna	20.00
ROBILLIARD, D & D	20.00
WBOOL CANCER SUPPORT GROUP	110.00

In Memory of THOMAS CLARKSON

WOODRUFF, Mrs Mary	50.00
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In Memory of EDIE CROW

COVERDALE, MI	20.00
CROW, WA & EM	50.00
MUSGROVE, J	10.00
ROBBINS, Doris	10.00
WILSON, E	20.00
WRIGHT, W	20.00
WALLACE, IE & LW	20.00

In Memory of ROBINA HINDHAUGH (Estate)

R. T. BREEN & CO	12000.00
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In Memory of CECELIA LEITHHEAD

BARLING, William	50.00
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In Memory of OWEN MORGAN

GLEESON, Don & Gerda	10.00
HILL, Des & Bernie	10.00
JOHNSTONE FAMILY	10.00
KEEN, J	50.00
McKIBBIN, Leslie & Bill	20.00
MORGAN, JL	40.00
OWEN, Faye & Geoff	20.00
SHEPPARD, E & M	20.00
SMITH, Jean & Digger	20.00
WILLIAMS, D T B & F	20.00

In Memory of RON PRYOR

ADDASSE PROGRAMME	25.00
AMESS, Win & Family	90.00
BLACKMORE, Mary	20.00
COSTER, E & Family	100.00
LIM, Khim-Cy	10.00
ROGERS, Mr & Mrs B	50.00
SPORA, M & K & P	60.00
YOUNG, Mr & Mrs H	52.85

In Memory of JOAN SAUNDERS

GRAUER, FG & WR	100.00
NOBLE, Valerie	50.00
O'KEEFFE, R	50.00

In Memory of REG SMITH

HEATH, Mrs R	42.00
MORTON FAMILY	100.00
SMITH, Mrs Joan	100.00
WADDINGTON, C & P	30.00

In Memory of JOHN STAAKS

STAAKS, T	20.00
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In Memory of ALMA WADE

HUTCHINS, Audrey	10.00
JOHNSON, Beryl & Ray	10.00
JOHNSON, Kitty	10.00
McKENZIE, D	10.00
O'GRADY, Frank & Vera	10.00
RICHARDS, A	10.00
RYAN, C	10.00
RYAN, Ken & Lyn	25.00
SKETCHER, Bev & Lyn	10.00
YOUNG, Noel & Margaret	20.00

In Memory of IAN WOOLLES

BRUCE, Bill & Nina	20.00
PALLIATIVE SUPPORT GROUP	204.00

Auxiliaries

JUNIOR LADIES AUXILIARY	5800.00
PAST TRAINEES ASSOCIATION	4195.00
SENIOR LADIES AUXILIARY	750.00
STAFF AUXILIARY	14500.00
WOOLSTHORPE AUXILIARY	2300.00

141st Annual Report and Financial Statements of the Warrnambool & District Base Hospital, 1994-95.
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The sophisticated equipment and modern facilities available to our patients are only possible through the continuing financial support of our community. The Hospital has a continuing need for new and replacement equipment, and for improvements to buildings and facilities.

The Hospital seeks your assistance in the maintenance and replacement of equipment and facilities, either through direct donations, or through donations-in-kind, including specific equipment items. Donations of \$2.00 or more are fully tax-deductible.

A bequest is another thoughtful means of assisting the Hospital. Your solicitor can advise on appropriate wording in your Will, or, alternatively, the following Form of Bequest is suitable:

"I, give and bequeath to the Warrnambool & District Base Hospital the sum of dollars and/or per cent of my residuary estate. The written acknowledgement of the Warrnambool & District Base Hospital to be accepted by my executors as a full and complete discharge."

Inquiries regarding donations or bequests may be made during office hours to the Chief Executive Officer, phone (055) 64 9400.

Please address donations to:
 The Chief Executive Officer,
 Warrnambool & District Base Hospital
 Ryot Street
 Warrnambool 3280

The text below is suitable for specifying donations:

To: The Chief Executive Officer
 Warrnambool & District Base Hospital

Please find enclosed my donation of \$..... to assist the Warrnambool & District Base Hospital in:

- the provision of new equipment
- undertaking building projects
- specifically for

Mr/Mrs/Ms/Miss/Dr

Address:

The history of the Warrnambool & District Base Hospital is one of expansion and change: a sensitive responsiveness to the changing needs of the community it serves.

Originally titled the Villiers and Heytesbury Hospital and Benevolent Asylum, the hospital was founded in 1854 using rented premises on the corner of Koroit and Henna Streets. Its aim was to give medical and surgical aid to the poor and asylum to the 'aged, infirm, disabled and destitute of all creeds and nations'.

The current Ryot Street site had been acquired in 1853 but it was not until 1861 that the first two-storeyed Hospital building was completed in Ryot Street and the hospital transferred to its permanent site.

Increasing demands in the late 1800's saw structural change and development, with the addition of four wards, operating room, boardroom, dining and staff room. The hospital provided accommodation for 27 males and nine females. Main sources of revenue in the early days were Benevolent Society membership fees, donations and police court fines.

An infectious diseases ward opened in 1878 with a dispensary and children's ward being completed in 1911.

Gradually, the hospital functions overtook the benevolent aspects of care and by 1925 the hospital's focus had changed completely to a medical and surgical one.

Formal, three-year nurse training courses commenced in 1927 and, following some 27 years of discussion, a midwifery service was established in 1928. A new operating theatre and children's ward facilities also opened in that year.

The two-storey, 60-bed Marcus Saltau House was completed in 1938 to provide accommodation for private, intermediate and

midwifery patients. The building was named in recognition of the Hon. Marcus Saltau C.B.E., a long-serving Hospital president and Board of Management member, with the Jean Buick Saltau Midwifery Ward being named in honour of his wife.

Several other Hospital buildings and departments commemorate significant contributors to the Hospital, including the George Rolfe Operating Theatre and the John Reid Library, while a legacy from Susan Stella Kirkman, in memory of her brother, substantially contributed to the funding of a new casualty department in 1967.

Classed as a base hospital since the 1940's, services and facilities expanded further with generous community support assisting the new expansion.

The management of two nursing home annexes, Corio House and Alveston House, added long-term aged care to the Hospital's functions.

The completion in 1963 of the main multi-story ward block and the later additions of Operating Theatres, Accident and Emergency Department, Intensive Care Unit, Administration and Cafeteria further expanded services in response to community needs.

A Special Care Ward was established in 1979 along with a modern food services department.

The 1980's brought growth in medical and paramedical services such as Radiology, Pharmacy and Pathology, and the introduction of new services, with 1986 being notable for the establishment of a Sexual Assault Unit, a self-contained Endoscopy Unit, Computer Tomography X-Ray facilities, and a Palliative Care Unit.

Development Over 141 Years

The late 1980's witnessed the growth of the Hospital as a sub-regional referral centre, offering a number of medical specialities including urology, orthopaedic surgery, oncology and geriatrics, providing district patients with the opportunity of local treatment for both general and specialist medical and surgical needs.

A major change in the Nursing Division came with the transfer of general nurse training to a university-based system in late 1988. The hospital continues to be active in providing clinical placement for nurse students as well as students in the various medical and paramedical disciplines.

The opening of the Allied Health Department block in 1993 enhanced rehabilitation services while the Medical Records Department and Admissions Office also moved to new and improved settings.

A new era began in 1992 with the integration of the hospital with Glenelg Psychiatric Services forming an integrated organisation providing general health services and a community-based psychiatric health care service to south-west Victoria.

Limitations to funding in recent years has provided a major challenge, as has the move from the historical budget concept to casemix funding in 1993.

Fully accredited with the Australian Council on Healthcare Standards, Warrnambool & District Base Hospital has committed its resources to compassionate and expert health care to Warrnambool and district for more than 140 years.

