

Benalla

HEALTH



Annual Report 2016

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Contents

PART 1 – Report of Operations

Disclosure Index	6
History	7
Registered Objectives.....	7
Chairman and Chief Executive Report	8
Corporate Governance – Board.....	11
Board of Management	12
Organisational Structure.....	14
Executive Team	15
Committee Structure	16
5 Year Performance	17
Compliance	18
Key Financial and Service Performance Reporting	
Part A: Strategic Priorities.....	19
Part B: Performance Priorities.....	25
Part C: Activity and Funding.....	26
Statutory Reporting.....	27
Environment.....	30
Services.....	32
Hospital Auxiliary	33
Senior Staff List.....	34

PART 2 – Financial Statements

Attached to the inside of the back cover.



Part 1
2016 Report of Operations

Disclosure Index

The Annual Report of Benalla Health is prepared in accordance with all relevant Victorian legislation. This index has been prepared to facilitate identification of the Department's compliance with statutory disclosure requirements.

Legislation	Requirement	Page Reference
MINISTERIAL DIRECTIONS		
REPORT OF OPERATIONS		
Charter of Purpose		
FRD 22G	Manner of establishment and the relevant Ministers	7, 11, Part 2 - 81
FRD 22G	Purpose, functions, powers and duties	7
FRD 22G	Initiatives and key achievements	8, 9, 10
FRD 22G	Nature and range of services provided	32
Management and structure		
FRD 22G	Organisational Structure	14
Financial and other information		
FRD 10A	Disclosure Index	6
FRD 11A	Disclosure of ex-gratia payments	N/A
FRD 21B	Responsible Person and Executive Officer disclosures	Part 2 – 81, 82
FRD 22G	Application and operation of <i>Protected Disclosure Act 2012</i>	27
FRD 22G	Application and operation of <i>Carers Recognition Act 2012</i>	27
FRD 22G	Application and operation of <i>Freedom of Information Act 1982</i>	27
FRD 22G	Compliance with building and maintenance provisions of <i>Building Act 1993</i>	27
FRD 22G	Details of consultancies over \$10,000	17
FRD 22G	Details of consultancies under \$10,000	17
FRD 22G	Employment and conduct principles	27
FRD 22G	Major changes or factors affecting performance	8, 9, 10
FRD 22G	Occupational Health and Safety	28
FRD 22G	Operational and budgetary objectives and performance against objectives	19-26
FRD 24C	Reporting of office-based environmental impacts	30, 31
FRD 22G	Significant changes in financial positions during the year	8, 9, 10
FRD 22G	Statement on National Competition Policy	27
FRD 22G	Subsequent events	Part 2 - 85
FRD 22G	Summary of the financial results for the year	17
FRD 22G	Workforce Data Disclosures including a statement on the application of employment and conduct principles	27, 29
FRD 25B	Victorian Industry Participation Policy disclosures	27
FRD 29A	Workforce Data disclosures	29
SD 4.2(g)	Specific information requirements	17 Part 2 - 7, 8
SD 4.2(j)	Sign-off requirements	10
SD 3.4.13	Attestation on Data Integrity	18
SD 4.5.5	Attestation for Compliance with the Ministerial Standing Direction 4.5.5 – Risk Management Framework and Processes	18
FINANCIAL STATEMENTS		
Financial Statements required under Part 7 of the FMA		
SD 4.2(a)	Statement of Changes in Equity	Part 2 - 3
SD 4.2(b)	Comprehensive Operating Statement	Part 2 - 1
SD 4.2(b)	Balance Sheet	Part 2 - 2
SD 4.2(b)	Cash Flow Statement	Part 2 - 4
Other requirements under Standing Directions 4.2		
SD 4.2(a)	Compliance with Australian accounting standards and other authoritative pronouncements	Part 2 - 5
SD 4.2(c)	Accountable Officer's declaration	Part 2 - A
SD 4.2(c)	Compliance with Ministerial Directions	Part 2 - 5
SD 4.2(d)	Rounding of amounts	Part 2 - 10
LEGISLATION		
<i>Freedom of Information Act 1982</i>		27
<i>Protected Disclosure Act 2012</i>		27
<i>Carers Recognition Act 2012</i>		27
<i>Victorian Industry Participation Policy Act 2003</i>		27
<i>Building Act 1993</i>		27
<i>Financial Management Act 1994</i>		10

History



A ten bed Bush Nursing hospital was opened in 1935 and within the following decade an additional five beds were added.

In 1953 the hospital was incorporated as a Public Hospital and is registered as a Schedule 1 Public Hospital within the meaning of the Health Services Act (No 49 of 1988).

By 1992 the Hospital complex included 69 acute beds, a 30 bed Nursing Home and a Community Health Service.

The 24 bed John Lindell Wing was closed in 1994 following the completion of a 30 bed private nursing home in Benalla.

The Wing re-opened in 1998 as a 12 bed Day Stay Procedure Unit. In 2001 the Surgical/Midwifery Wing was extensively renovated

Registered Objectives

1. To organise and provide health care service in the Benalla district and, in particular hospital based services, including Regional services and services provided jointly with other agencies in accordance with the Health Services Act, 1988, and all existing or future relevant Acts and Regulations;
2. To utilise appropriate physical and personal resources, knowledge and available technologies to promote health and to prevent, treat and alleviate disease, disability, injury and suffering so far as is possible in the prevailing conditions;
3. To set and achieve standards consistent with prevailing principles of quality patient care and community health needs;
4. To foster continuing improvement in standards through education, research and training.
5. To manage and maintain a Community Health Service for all persons which will provide facilities, personnel and services to achieve the following aims:
 - promoting health awareness;
 - improving health standards;
 - fostering awareness and prevention of illness and disability;
 - supporting persons in their home environment;
 - rehabilitation.



The 1936 Bush Nursing Hospital which contained 6 ward beds, 4 emergency beds, an x-ray plant and operating theatre. The building cost approximately 4,000 pounds to build.

Chairman and Chief Executive's Report

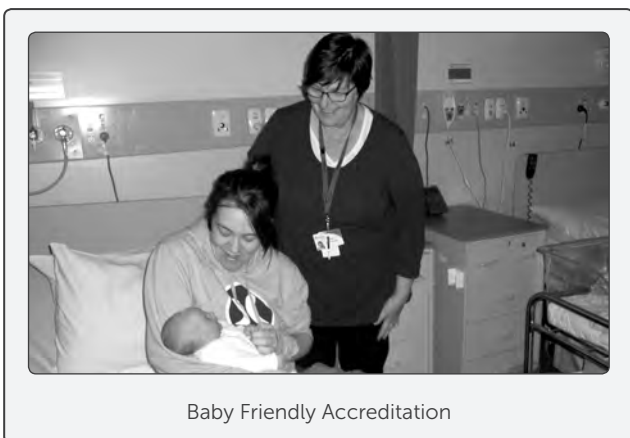
On behalf of the Board of Management and all staff we are pleased to present the Annual Report for Benalla Health for 2015/2016.

The achievements of Benalla Health during the 2015/2016 year which are outlined in this Report would not have been possible without the dedicated commitment of all our staff, the medical workforce and our valued volunteers.

We would like to publically acknowledge the leadership of the Board of Management. All Board members act in a voluntary capacity and the time that members devote to their important stewardship role is sincerely appreciated.

One of our highly regarded and talented Board members, Catherine Botta, retired this year. Cath served on the Board for seven years and her contribution during this time was invaluable. Her sage advice will be missed.

The Board of Management and staff at Benalla Health would like to extend their warmest appreciation to Andrew Freeman who resigned as the Chief Executive at the end of November 2015 to take up the position of Chief Executive at Djerriwah Health Service. Andrew's innate ability to engage with people from all walks of life resulted in him being able to make a significant contribution during his 4 year tenure at Benalla Health. His equable communication style sets him apart from his peers and his absence from the organisation has not gone unnoticed. Following a lengthy recruitment process the Board appointed Ms. Janine Holland as the new Chief Executive and she commenced in the role in February 2016.



Baby Friendly Accreditation

On the 15th and 16th October 2015 Benalla Health participated in the Baby Friendly Health Initiative (BFHI). The BFHI aims to encourage health services and staff to promote and support breastfeeding whilst respecting and encouraging a mother's informed choice of infant feeding. The work load associated with preparing for BFHI accreditation is extremely rigorous however we were re-accredited for another 3 years up until November 2018. Congratulations to the staff on achieving this exceptional outcome, as we are the only rural health service in Australia to receive BFHI Accreditation under a Midwife Led model of care.



White Ribbon Day

Benalla Health in partnership with the local community demonstrated again its enduring commitment to reducing family violence in our community through its support of the 6th Annual 'March against Violence' held on White Ribbon Day on the 25th November 2015. We were very pleased that around 300 people attended the March which exceeded last year's numbers. Once again Benalla P-12 and FCJ College were very well represented on this day.

Furthermore in order to continue to provide leadership in our local community in relation to preventing family violence we made the decision to sign up to the White Ribbon Workplace Accreditation Program. Successful completion of this program will entail 14 months of steady work however the positive benefits that will be realised for our staff and community will be well worth the effort.

The Board set a Statement of Priorities (SoP) in agreement with the Department of Health and Human Services. The SoP was aligned with Benalla Health's strategic objectives and the Department's policy directions. The outcomes of the SoP are highlighted later on in this report.

Benalla Health was a finalist in the 2015 Victorian Public Healthcare Awards under the category of the Premier's Health Service of the Year Award, medium sized health service of the year. We were delighted to receive a highly commended award.

An enjoyable Christmas breakfast was held for all staff and volunteers on the 18th December 2015 with the event being well attended. This is just one way in which we can publically recognise our highly valued staff and thank them for all their hard work during the year.

We provided a range of acute inpatient, obstetric and surgical services and remain committed to continuing to provide these services into the future. We once again achieved our acute and community health activity targets and this is a reflection of the dedication of our loyal staff.

Simultaneously the financial year ended with an operating surplus which was achieved by all staff expending a considerable amount of effort to ensure that a high standard of care was delivered within an environment of fiscal restraint.

Our partnership with Goulburn Valley Health remains strong and we completed over 400 eye surgeries from their surgical waitlist. Patient satisfaction with this service is very high, which is a credit to the surgeons, and our theatre and day procedure staff.

We also partnered successfully with Northeast Health Wangaratta to undertake low acuity surgery from their surgical waitlist, thus enabling people to receive surgical treatment sooner than they may otherwise have. We intend to replicate this mutually beneficial initiative over the next 12 months to ensure that people receive timely surgical services relatively close to where they live.

We were thrilled to receive \$300,000 from the Department to continue on with the refurbishment of Morrie Evans Wing (MEW). Works associated with phase 2, stages 1a and 1b will result in the conversion of two more 4 bedded rooms into four double rooms with ensuites.

Refurbishment works are also underway to relocate the Human Resources Department into the front of the main hospital building in the space that was vacated by the old kitchen. At the same time we are in the process of creating a new tranquility room and a new staff dining room.



Morrie Evans Wing

Patients, their families and friends, staff and volunteers are all very welcome to use the new tranquility space if they need a quiet space for privacy and reflection.

Once the current Human Resources space is vacant we will commence working on the development of concept drawings to reflect a contemporary Community Rehabilitation Centre (CRC) which is what our 2016 Annual Appeal is focused on. The creation of a CRC will support our staff to deliver evidence based rehabilitation programs for people living with chronic and complex diseases.



Stage 2 solar upgrade

In 2016 Benalla Health implemented Stage 2 of its solar upgrade strategy resulting in the installation of an additional 100kW of solar panels. Each panel contains approximately 250W per panel with dimensions of 1.5m² per panel. This will achieve further savings in both energy and demand charges in the order of \$25,000 per year. Concurrently, we also commenced replacing the Halogen and incandescent light bulbs to achieve energy efficient lighting.

We are acutely aware that our community has experienced profound loss and grief as a result of recent suicides. Our staff attended a local mental health forum on the 1st June 2016 so that we could offer our unequivocal support to our community, listen to people's concerns and participate in open dialogue to develop solutions and strategies to assist people in need. Our purpose is to facilitate a healthy and resilient community through the provision of integrated lifelong health services and we fully intend to partner strongly with Benalla Rural City and other key stakeholders so that people can access timely mental health services.



We held our annual Staff Awards Ceremony on the 2nd June 2016 where we took the opportunity to congratulate the worthy recipients of Benalla Health's Excellence Awards for 2015. The recipients were:

- Award for Excellence in Consumer Care and Engagement **SueEllen Downey**
- Award for Excellence in Consumer Care and Engagement **Sheila Green**
- Award for Excellence in Innovation and Sustainability **Peter Hurley**
- Award for Excellence in Leadership **Sally Matheson**
- Award for Excellence in Quality Service **Tania Strickland**

These staff consistently demonstrate through their actions and words, their outstanding commitment to our community, their peers and Benalla Health. All of them are exceptional people and worthy recipients of their respective Excellence Awards.

Major pieces of capital equipment were purchased throughout the year and included:

- 2 portable hoists with transport trolley
- Fetal Monitor
- Cardiotocograph
- Blanket warming cabinet
- Instrument Washer Disinfecter
- 3 Pressure Digital Mattresses
- Trauma stretcher
- Epidural Positioning Device
- Laryngoscope set with Blades and Video

We receive regular feedback from patients through the Victorian Health Experience Survey (VHES). The results are very pleasing and indicate that patients who receive care at Benalla Health continue to be very satisfied with the care they receive. Our results remain above the State average and this is a testament to the excellent care that is provided by our dedicated staff.

As in previous years Benalla Health received outstanding support from the Benalla and District Memorial Hospital Auxiliary, Community groups and individuals who have generously donated their time and money to support the health service to deliver a broad range of high calibre services. The respectful assistance provided to staff from our volunteers and the extra equipment we purchased through donations is genuinely appreciated and we thank everyone for all their sustained efforts.

We would lastly like to publically recognise and sincerely thank the Department of Health and Human Services, Board members, our valued staff, medical officers, our partner organisations and our high functioning volunteers who have continued to willingly assist us to provide high quality health services to the community we are privileged to serve.

This Report is prepared in accordance with the Financial Management Act 1994.

Brendan Smith

Chairman
Benalla 09/08/2016

Janine Holland

Chief Executive
Benalla 09/08/2016

Corporate Governance - Board

The organisation is governed by a 10 person Board appointed by the Governor-in-Council upon the recommendation of the Minister for Health, Minister for Ambulance Services, The Hon. Jill Hennessy, MP.

The functions of the Board as determined by the *Health Services Act 1988* are::

- to oversee and manage the Organisation; and
- to ensure the services provided by the Organisation comply with the requirements of the Act and the aims of the organisation.

Governance by the Board is achieved through:

- **strategic planning** - to ensure the visionary direction of the Organisation is focused and aligned to the Mission Statement;
- **effective management by the Chief Executive** – the Board performs an annual performance appraisal and sets realistic goals; the Chief Executive is responsible for managing the Organisation at an operational level;
- **funding of service agreements** – the Board endorses plans, strategies and budgets and ensures annual agreements reflect accurate, achievable and desirable outcomes; the Board monitors the performance of the Organisation through appropriate budgetary processes;
- **local policy setting;**
- **By-Laws and Operational Practices** – these are reviewed regularly by the Board.

BOARD COMMITTEES

Audit Committee

The Committee receives and makes recommendations relating to internal and external audit reports and ensures compliance to any matters raised by the Auditor General's office. *The Committee meets four times per year.*

Medical Appointments Committee

The Committee has the important role of assessing medical officers and recommending their scope of practice within Benalla Health. *The Committee meets twice a year.*

Medical Consultative Committee

The Committee provides a forum for local medical practitioners to meet with the Board to discuss issues in common. *The Committee meets twice a year.*

Quality and Safety Committee

The Quality and Safety Committee provides clinical governance and monitors the delivery of care, quality improvement and risk management (both clinical and non-clinical) throughout the organisation. *The Committee meets monthly.*

Cultural Diversity and Consumer Committee

The Committee provides direction and leadership in relation to the integration of consumer, care and community views into all levels of health service operations, planning and development. *The Committee meets bimonthly.*

PECUNIARY INTEREST

Members of the Board of Management are required to declare at each meeting any pecuniary interest which might give rise to a conflict of interest.

The Board has developed a Policy and Code of Conduct which clarifies the responsibilities of Board Members.

THE MINISTER FOR HEALTH, MINISTER FOR AMBULANCE SERVICES

The Hon. Jill Hennessy MP.

THE MINISTER FOR HOUSING, DISABILITY & AGEING, MINISTER FOR MENTAL HEALTH

The Hon. Martin Foley MP.

AUDITORS

Richard Sinnott & Delahunty Chartered Accountants
Agents for the Auditor General

BANKER

National Australia Bank

SOLICITORS

Harrison Dobson and Cottrill

GOVERNMENT POLICY

Health Service Boards are responsible to the Minister for setting the strategic directions of rural public healthcare agencies within the framework of Government policy. They are accountable for ensuring that rural public healthcare agencies:

- are effectively and efficiently managed
- provide high quality care and service delivery
- meet the needs of the community, and
- meet financial and non-financial performance targets.

The Government is committed to ensuring that there is strong governance and accountability of the Board for the performance of the Organisation and delivery of health services. Each rural public healthcare agency needs a balanced Board, which has the right mix of relevant skills, knowledge, attributes and expertise to be effective and achieve its objectives. This includes skills and expertise relating to the governance of health services, and ability to represent the views of the Community.

Board of Management



Chairman **Brendan Smith**

B. Bus (Acc.) FIPA FFA CFP FAICD

Committee Membership

- Audit
- Medical Appointments (Chairman)
- Medical Consultative (Chairman)

Brendan is a partner of local accounting practice Smith Dosser. He has over 39 years' experience in finance, tax and management. As a certified financial planner, he has also specialised in strategic consulting since 1999 with OzPlan Financial Services, a Victorian firm of which he is a founding director. He also brings his skills in corporate governance to the Benalla Health Board. Brendan and his family have lived in Benalla since 1987. Apart from a range of community activities over the years, Brendan's interests include travel, sport and reading.



Vice Chairman **Catherine Botta**

BSc Agr MSc Agr, Grad. Cert Soil Con., Grad. Cert. Mediation

Committee Membership

- Quality and Safety
- Audit Committee

Catherine works extensively as a soil scientist, educator and facilitator with rural and regional communities. In her consulting business, Cath designs community consultation and engagement processes, facilitates workshops and delivers training programs. She is a member of the Australian Institute of Company Directors. Cath and her husband Peter live on 6 acres with their two children. She enjoys swimming, gardening and spending time with family and friends.

Catherine retired from the Board 30/06/2016



Vice Chairman **Louise Armstrong**

BlInfo Tech (InfoSys), GCert Mgt (ProPrac), MAICD

Committee Membership

- Quality and Safety
- Medical Consultative

Louise has a background in information technology and training and was responsible for the overall management of a successful, award-winning small business for many years. She is currently doing some work for a local accounting firm, consulting in veterinary practice management in the region and overseeing the management of the family farm. Louise has lived most of her life in Benalla and has been involved in many community groups over the years, particularly Benalla Support Group for Children with Special Needs and Goomalibee Landcare. She is currently Chair of Benalla Business Network.



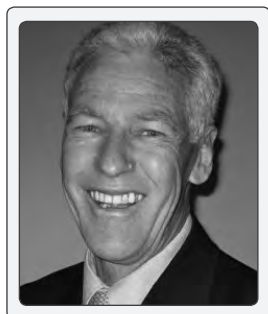
Treasurer **David Elford**

AAPI, B.App.Sci (Val), Dip.Acc

Committee Membership

- Audit (Chairman)
- Cultural Diversity and Consumer

David has spent the last 14 years as a property valuer conducting a broad range of property valuations with the Opteon property group, previously known as HMC Valuations. David covers an area extending throughout Northern and North East Victoria, the Goulburn Valley as well as southern and western New South Wales. He is a member of the Australian Institute of Company Directors. Prior to this, he was a farmer and professional wool classer in the Benalla district. David has played an active role in a number of community groups over the years and enjoys spending time with his family on his small farm, horse riding and various sports.



Robert Wright

Dip Ed; Grad Dip Ed Leadership; Grad Dip in Computers in Education

Committee Membership

- Quality and Safety
- Medical Appointments

After 40 years work in education, as a primary school teacher, principal and project coordinator, Robert has recently retired. He now plans to spend his time assisting various community groups and sailing his boat off the Queensland Coast. Robert is married to Louise. They live on a small farm at Warrenbayne from a range of community activities over the years, Brendan's interests include travel, sport and reading.



Lisa McCoy

Dip Social Service Work

Committee Membership

- Cultural Diversity and Consumer
- Audit
- Medical Appointments

Lisa has a background in Human Services, Community Development and Project Management spanning 20 years in both Canada and Australia. Lisa, her husband Gary and two sons moved to Benalla in 2009 and raise beef cattle on their property at Chesney Vale. Lisa operates a consulting business that supports strategic planning, research, evaluation and facilitation. Her more recent work has been with a range of local Governments to develop Youth and Early Years Strategies.



Kim Scanlon

Dip Teaching (Primary), Grad Dip Outdoor Education GAICD

Committee Membership

- Quality and Safety
- Medical Consultative

Kim is currently the Executive Officer of the Alpine Valleys Community Leadership Program, developing emerging community leaders from across the North East of Victoria. Prior to this Kim worked for the Victorian Education Department as a Primary teacher, with the majority of this time spent as the manager of 15 Mile Creek Camp. Kim has had experience on many community Boards, including the Rotary Club of Benalla, and the Benalla Young Sportsman Trust and the Winton Wetlands Committee of Management. Kim's personal interests include gardening, community activities and skiing.



Nathan McGrath

B. Commerce, CPA, MIPA

Committee Membership

- Quality and Safety

Nathan is a partner of local accounting practice Smith Dossier and specialises in taxation. Nathan grew up on a farm near Tumbarumba where he went to school and completed his university study in Canberra. He and his family have lived in Benalla since 2008. Apart from participation and volunteering in a range of community activities over the years, Nathan enjoys sport, music and spending time with family and friends.



Lisa Marta

B.Pharm, MPS, AACPA

Committee Membership

- Quality and Safety
- Cultural Diversity and Consumer

Lisa is a pharmacist with over 30 years' experience in community and hospital pharmacy. Lisa is a partner in a local community pharmacy, with her husband Gareth. They moved to Benalla in 1995 and have 3 children. During this time Lisa has been involved in several community groups. In her spare times she enjoys tennis, craft and travel.



Dennis O'Brien

BScAg, Uni of Sydney; MSc, Uni of Manitoba, Canada; PhD, Oregon State Uni, USA

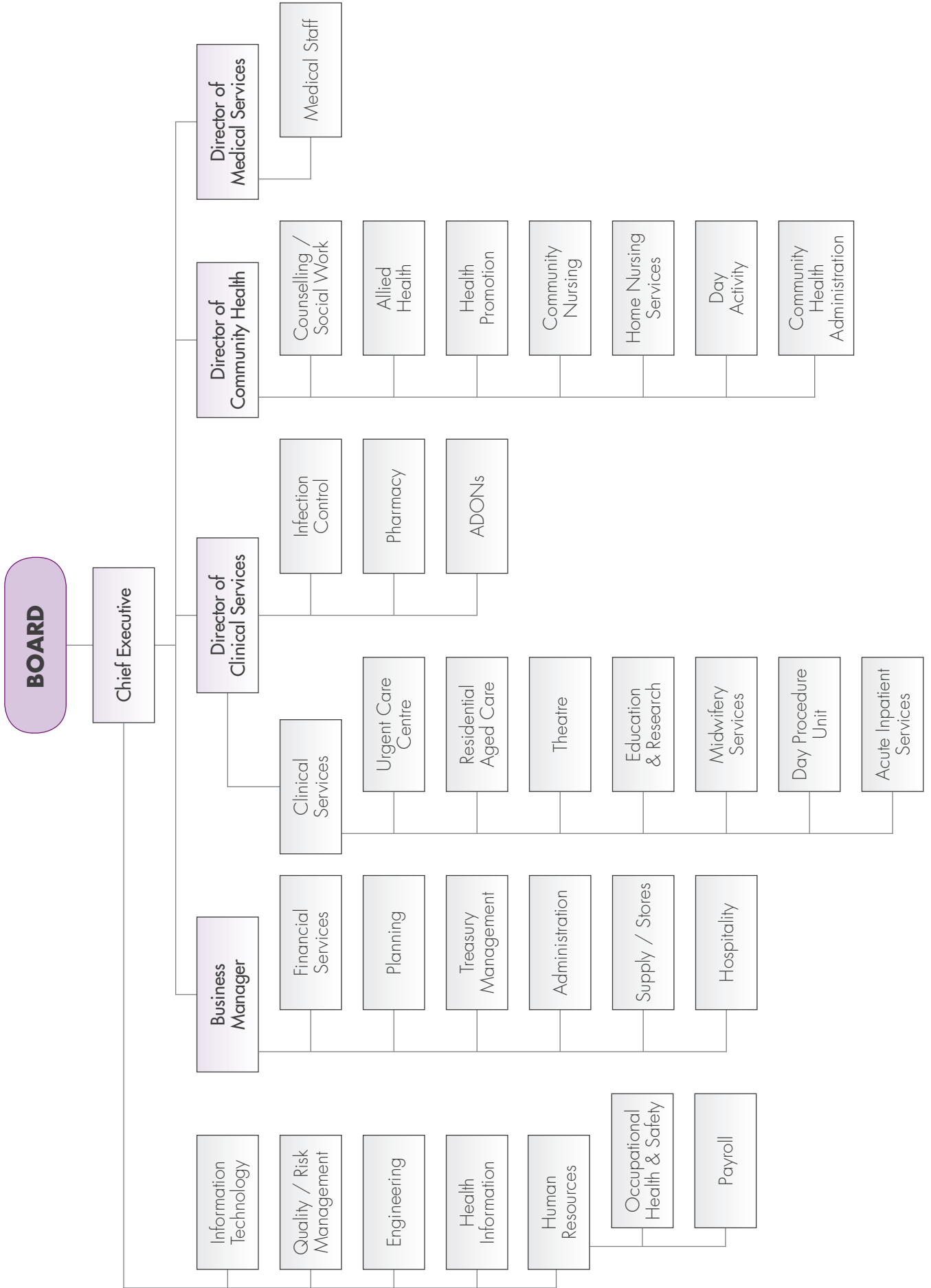
Committee Membership

- Cultural Diversity and Consumer
- Quality and Safety

After graduating with his PhD in 1981 Dennis worked for five years in the Philippines and Indonesia. He has also worked in Canada, USA, Bangladesh, Singapore, Malaysia, Sri Lanka, Vietnam, Papua New Guinea and China. He and Gail returned to Australia with their three children in 1985 to take up an academic position at the University of Wollongong. He moved to Southern Cross University in 1993, where was Head of the School of Business. In 2002 he was appointment Associate Professor and Head of the Dookie Campus of the University of Melbourne. He was the foundation Director of the Postgraduate Program at Marcus Oldham College from 2009 to 2010. In addition to his role on the Board of Benalla Health, he is also Chair of the Winton Wetlands Committee of Management and a member of the Regional Development Australia Board for Hume.

He and Gail operate a small Wagyu and Wagyu cross farm at Stewarton.

Organisational Structure



Executive Team



Chief Executive **Janine Holland**

R.N. R.M. B.HSc, Grad Cert HSM, MPH, ACHSM, GAICD

The Chief Executive is responsible to the Board of Management for the efficient and effective management of the Health Service. Key responsibilities include the development and implementation of operational and strategic planning maximising service efficiency, quality improvement and minimisation of risk. Janine is also an ACHS Surveyor.

Director of Clinical Services **Maree Woodhouse**

R.N. R.M. B.Nurse, Grad Dip Mid, Dip Mgt, Grad Cert Rural & Remote Nursing, Fairley Fellow

The Director of Clinical Services (DCS) is responsible for all clinical services. The DCS role encompasses clinical governance, clinical leadership and standards of practice, service and strategic planning, clinical risk management, quality improvement and resource management.



Business Manager **Ian Hatton**

B.Bus (Acc) C.P.A.

The Business Manager has responsibility for the financial management and reporting requirements to the Board of Management and a number of external bodies, including the Department of Health. Ian's role includes management of the Finance/Administration, Hospitality Services and Supply Departments..

Director of Community Health Service **Neil Stott**

B.A. Ministry, Dip Governance, Grad Cert Business Administration

The Director of Community Health oversees a range of allied health, community and primary care services. Neil serves on a number of community committees with Benalla Rural City and Mansfield Shire. He is also a White Ribbon Ambassador working with the local community to reduce the incidence of Family Violence.

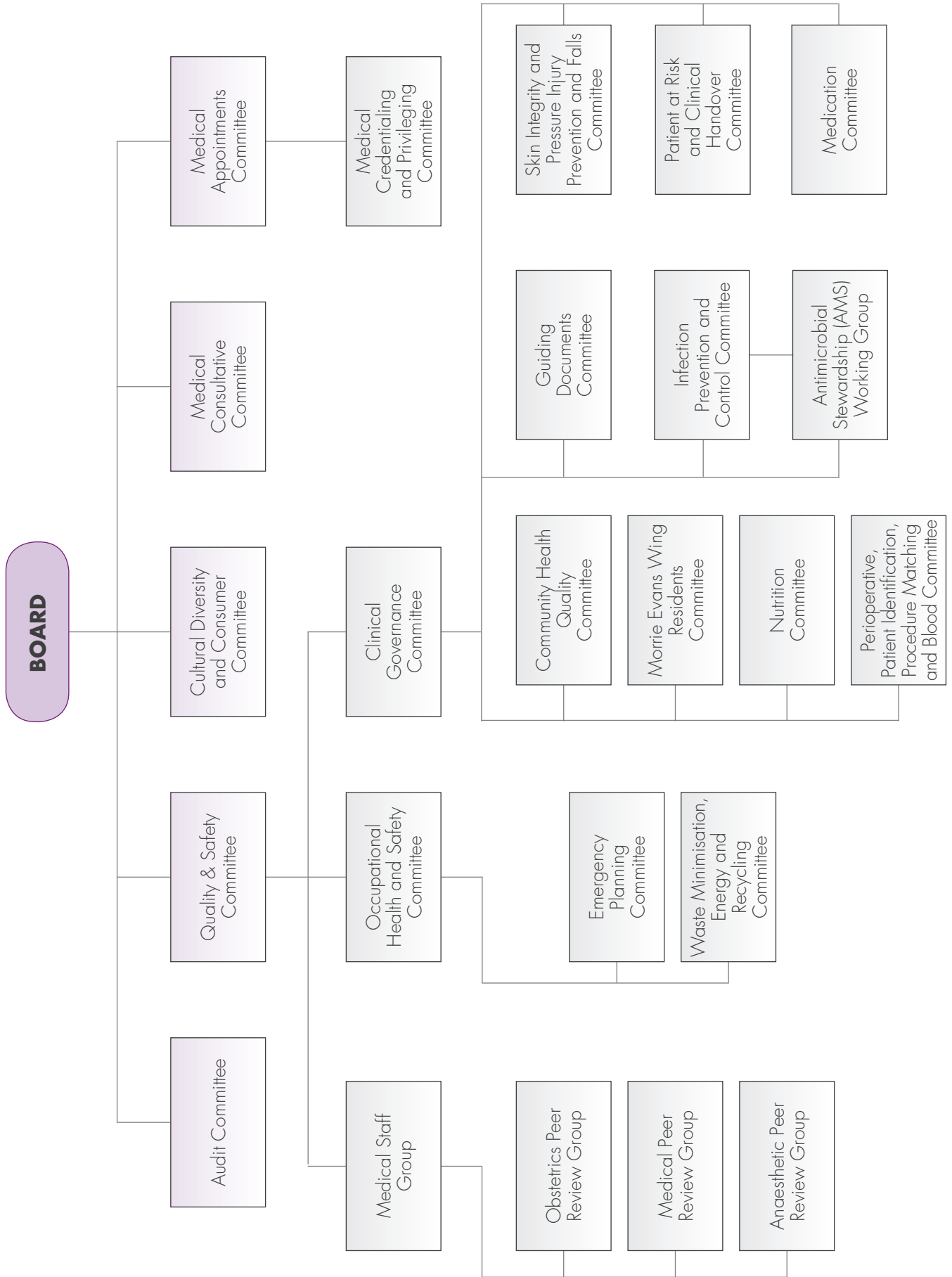


Director of Medical Services **Dr. Rick Lowen**

MBBS, DOBRCOG, FRACGP, AFCHSM

The Director of Medical Services ensures all visiting medical officers are credentialed and have the appropriate privileges for the organisation. Dr. Lowen provides support, advice and guidance on all medico-legal matters and participates in many of the clinical committees.

Committee Structure



5 Year Performance

5 Year Financial Comparison	2016	2015	2014	2013	2012
	\$000	\$000	\$000	\$000	\$000
Total Revenue	28,431	27,388	25,679	27,577	24,197
Total Expenses	28,260	28,339	27,043	26,794	(26,134)
Net Result for the Year (inc. Capital and Specific Items)	171	(951)	(1,364)	783	(1,937)
Retained Surplus/(Accumulated Deficit)	(392)	(945)	(22)	1,320	866
Total Assets	37,051	34,797	36,536	36,576	34,742
Total Liabilities	9,034	6,951	7,739	6,986	7,727
Net Assets	28,017	27,846	28,797	29,590	27,015
Total Equity	28,017	27,846	28,797	29,590	27,015

Communication Technology (ICT)

Benalla Health's total ICT expenditure incurred during 2015-2016 is \$1.5million (excluding GST) with the details shown below.

Business As Usual (BAU) ICT expenditure (Total) (excluding GST) (million)	Non Business As Usual (non BAU) ICT expenditure (Total=Operational expenditure and Capital Expenditure) (excluding GST)	Operational expenditure (excluding GST) (million)	Capital expenditure (excluding GST) (million)
\$1.5	Nil	\$0.9	\$0.06

Consultancies

In 2015-2016 there was one consultancy where the total fees payable to the consultants was \$10,000 or greater. The total expenditure during 2015-2016 in relation to this consultancy was \$25,200 (excluding GST). Details of the consultancy, is listed below.

Consultant	Purpose of Consultancy	Start Date	End Date	Total Approved Project Fee (excluding GST)	Expenditure 2015-2016 (excluding GST)	Future Expenditure (excluding GST)
PharmConsult	Pharmacy Department Review	September 2015	November 2015	\$25,200	\$25,200	Nil

In 2015-2016, Benalla Health did not have any consultancies where the total fees payable to consultants were less than \$10,000.

Compliance

There are a number of specific compliance requirements that health services must meet and declare during the course of operations.

Accordingly:

ATTESTATION ON DATA INTEGRITY

I, Janine Holland certify that Benalla Health has put in place appropriate internal controls and processes to ensure that the reported data reasonably reflects actual performance. Benalla Health has critically reviewed these controls and processes during the year.



Janine Holland
Accountable Officer

Benalla 09/08/2016

ATTESTATION FOR COMPLIANCE WITH THE MINISTERIAL STANDING DIRECTION 4.5.5 – RISK MANAGEMENT FRAMEWORK AND PROCESSES

I, David Elford, Audit Committee Chairman certify that Benalla Health has complied with the Ministerial Standing Direction 4.5.5 – Risk Management Framework and Processes. The Audit Committee verifies this.



David Elford
Audit Committee Chairman

Benalla 09/08/2016

Key Financial and Service Performance Reporting

Part A: Strategic Priorities

The Victorian Government's priorities and policy directions are outlined in the Victorian Health Priorities Framework 2012-2022.

DOMAIN	ACTIONS	DELIVERABLES	OUTCOMES
Patient experience and outcomes	<p>Drive improved health outcomes through a strong focus on patient-centred care in the planning, delivery and evaluation of services, and the development of new models for putting patients first.</p>	<p>The Patient Centred Care policy will be reviewed and updated.</p>	<p>ACHIEVED Policy reviewed and updated. The next review is due in 2017.</p>
		<p>All staff will complete the mandatory Patient Centred Care elearning package.</p>	<p>ACHIEVED Organisation wide compliance is 100%.</p>
	<p>Strengthen the response of health services to family violence. This includes implementing interventions, processes and systems to prevent identify and respond appropriately to family violence at an individual and community level.</p>	<p>Benalla Health will continue to partner with regional services to strengthen interagency / multi-disciplinary support for victims of family violence.</p>	<p>ACHIEVED Benalla Health represented on the Benalla Family Violence Prevention Network (Chair); Goulburn Valley Family Violence Prevention Network; Hume Region Preventing Violence against Women and Children Steering Committee and the Children and Youth Area Partnership.</p>
		<p>Benalla Health will commence the 15 month process to gain White Ribbon Workplace accreditation.</p>	<p>ACHIEVED Steering Committee active. Action plan tracking achievements.</p>
		<p>Intake process will be reviewed and updated in Community Health, the Urgent Care Centre and Acute ward to ensure family violence victims are identified at intake / admission and referred to appropriate support services.</p>	<p>ACHIEVED Intake process reviewed and evaluated. New process implemented.</p>
	<p>Benalla Health will partner with State-wide and National Family Violence Prevention peak bodies to enhance existing family violence prevention strategies within our community.</p>	<p>ACHIEVED Benalla Health is a White Ribbon Ambassador, founding member and Chair of the Victorian White Ribbon Ambassador Committee and the North East Victoria White Ribbon Committee. Current information is received from White Ribbon, Our Watch and Domestic Violence Resource Centre Victoria.</p>	

Key Financial and Service Performance Reporting

DOMAIN	ACTIONS	DELIVERABLES	OUTCOMES
	<p>Implement an organisation-wide approach to advance care planning including a system for identifying, documenting and/or receiving advance care plans in partnership with patients, carers and substitute decision makers so that people's wishes for future care can be activated when medical decisions need to be made.</p> <p>Develop an organisational policy for the provision of safe, high quality end of life care in acute and subacute settings, with clear guidance about the role of, and access to, specialist palliative care.</p>	<p>The Advanced Care Planning Working Group will fully implement the Department's Advanced Care Planning strategy.</p> <p>A system will be developed to identify, document and receive advanced care plans.</p> <p>A contemporary evidence based, end of life policy will be developed.</p>	<p>ACHIEVED Good progress has been made in relation to the four priority actions detailed in the ACP strategy.</p> <p>Benalla Health is also an active member of the Regional ACP working group.</p> <p>ACHIEVED Systems have been developed at pre admission and on admission to identify, document and receive advanced care plans. Evaluation will occur in the second half 2016.</p> <p>ACHIEVED A contemporary evidence based end of life policy has been developed. The policy is due to be reviewed in 2018.</p>
Governance, leadership and culture	<p>Demonstrate an organisational commitment to Occupational Health and Safety, including mental health and wellbeing in the workplace. Ensure accessible and affordable support services are available for employees experiencing mental ill health.</p> <p>Work collaboratively with the Department of Health and Human Services (DHHS) and professional bodies to identify and address systemic issues of mental ill health amongst the medical professions.</p>	<p>The current Employee will be reviewed to ensure it is meeting the requirements of our staff.</p> <p>Mental Health Awareness training will be introduced for senior managers.</p> <p>First Aid Kits will be introduced into all clinical and non-clinical departments.</p>	<p>ACHIEVED The Employee Assistance Program (EAP) has been expanded to include access to online and phone based counseling options.</p> <p>The functions of the Critical Incident Stress Management (CISM) Team were reviewed. More workplace support is now available. All team members' upskilled.</p> <p>Benalla Health and Cooina have collaborated as one team to engage in CISM strategies and responses.</p> <p>ACHIEVED Mental Health training provided to the Leadership team in June 2015.</p> <p>Urgent Care Centre staff will undertake Mental Health First Aid training in the second half of 2016.</p> <p>ACHIEVED First Aid Kits implemented into all clinical and non-clinical departments.</p>

Key Financial and Service Performance Reporting

DOMAIN	ACTIONS	DELIVERABLES	OUTCOMES
	<p>Monitor and publically report incidents of occupational violence. Work collaboratively with the Department of Health and Human Services (DHHS) to develop systems to prevent the occurrence of occupational violence.</p> <p>Promote a positive workplace culture and implement strategies to prevent bullying and harassment in the workplace. Monitor trends of complaints of bullying and harassment and identify and address organisational units exhibiting poor workplace culture and morale.</p> <p>Undertake an annual board assessment to identify and develop board capability to ensure all board members are well equipped to effectively discharge their responsibilities.</p> <p>Build workforce capability and sustainability by supporting formal and informal clinical education and training for staff and health students, in particular inter-professional learning.</p>	<p>Occupational violence rates will be reported quarterly on Benalla Health's "Look, Seek and Speak" quality boards.</p> <p>100% of staff will complete the mandatory bullying and harassment eLearning education.</p> <p>100% of staff will sign Benalla Health's code of conduct.</p> <p>Board self-assessment will be completed and action plan developed at annual Board retreat in February 2016.</p> <p>Competencies currently available on the Regional Health Service eLearning Network will be reviewed.</p> <p>Board scholarship policy and application procedure will be reviewed.</p> <p>The annual interdisciplinary Neonatal evening seminar will be conducted on the 20th October 2015 for midwives, general practitioner obstetricians and general practitioner anaesthetists. Staff surveys will be completed after the session.</p>	<p>ACHIEVED Occupational Violence rates posted on "Look, Seek and Speak" quality boards which are displayed throughout the health service.</p> <p>ACHIEVED Benalla Health is currently at 100% compliance.</p> <p>ACHIEVED All staff have signed the Code of Conduct.</p> <p>ACHIEVED The Board completed the self-assessment process prior to attending the Board retreat in April 2016. Self-assessment results discussed at retreat. Action plan developed.</p> <p>ACHIEVED All competencies reviewed.</p> <p>ACHIEVED Policy and application procedure reviewed.</p> <p>ACHIEVED Neonatal evening seminar conducted in October 2015. Very good attendance by general practitioners and midwives. Staff surveys undertaken. Positive responses obtained.</p>
	<p>Support excellence in clinical training through productive engagement in clinical training networks and developing health education partnerships across the continuum of learning.</p>	<p>Membership of and active participation in the Hume region Clinical Training Network will be supported.</p>	<p>ACHIEVED Active participation supported.</p>

Key Financial and Service Performance Reporting

DOMAIN	ACTIONS	DELIVERABLES	OUTCOMES
Safety and quality	Ensure management plans are in place to prevent, detect and contain Carbapenem Resistant Enterobacteriaceae as outlined in Hospital Circular 02/15 (issued 16 June 2015).	Pre Admission Screening policy and procedures will be reviewed.	ACHIEVED Pre admission screening policy and procedures reviewed. Screening questions are in line with the Australian Commission on Safety and Quality Healthcare (ACSQHC) CRE guidelines.
		Methicillin Resistant Organisms policy will be reviewed.	ACHIEVED Policy reviewed and updated. A hyperlink to the ACSQHS CRE guidelines and specific CRE screening/management instructions has been added to the MRO policy.
		Transmission Based Precautions policy and procedures will be reviewed.	ACHIEVED Policy reviewed. Current patient centred risk assessment and processes meet CRE management guidelines.
	Implement effective antimicrobial stewardship practices and increase awareness of antimicrobial resistance, its implications and actions to combat it, through effective communication, education, and training.	Terms of Reference for the Antimicrobial Stewardship Working Group will be reviewed.	ACHIEVED Terms of Reference reviewed at the December 2015 meeting.
		Current Antimicrobial Stewardship education will be reviewed.	ACHIEVED Education reviewed and updated. Access for all staff increased.
		Current Antimicrobial Stewardship audits will be reviewed to determine their relevance and effectiveness.	ACHIEVED Audits reviewed and retained based on significant improvement in our audit results between 2013 & 2014. Involvement in NAPS is ongoing.
	Ensure that emergency response management plans are in place, regularly exercised and updated, including trigger activation and communication arrangements.	Emergency Response Management Plans will be reviewed and tested.	ACHIEVED Successful evacuation of the Ray Sweeney Centre on Thursday 22nd November 2015. Emergency response plan reviewed and updated in May 2016.
Develop perinatal mortality and morbidity review processes in alignment with the Clinical Practice Guideline for Perinatal Mortality.	Current perinatal mortality and morbidity processes will be reviewed.	ACHIEVED Perinatal mortality and morbidity processes have been reviewed. The interdisciplinary Obstetric Peer review meeting was held on the 25th November 2015 and on the 12th May 2016. The Clinical Practice Guideline for Perinatal Mortality has been implemented. The first regional meeting is scheduled for the 5th August 2016 at Albury Wodonga Health.	

Key Financial and Service Performance Reporting

DOMAIN	ACTIONS	DELIVERABLES	OUTCOMES
Financial sustainability	Improve cash management processes to ensure that financial obligations are met as they are due.	Financial performance will be monitored to ensure Benalla Health maintains a Current Asset Ratio above 1.4.	ACHIEVED Current Asset Ratio maintained between 1.59 and 1.71.
	Work with Health Purchasing Victoria to implement procurement savings initiatives.	Benalla Health will partner with Health Purchasing Victoria to manage individual strategic procurements.	ACHIEVED Benalla Health has actively participated in the Health Purchasing Victoria (HPV) working groups and steering committee to achieve full compliance with HPV reforms.
	Invest in revenue optimisation initiatives to ensure maximisation of revenue from both public and private sources.	Residential Aged Care review will be undertaken to ensure all revenue sources are being maximised.	ACHIEVED Residential Aged Care review completed in November 2015. ManAd finance module has been implemented.
	Undertake cost benchmarking and develop partnerships with peers to improve operating efficiency.	Consultant will be engaged to provide clinical costing information to allow benchmarking with like health services.	ACHIEVED Consultant engaged. Clinical costing information obtained for the 2014/15 year and submitted into the Victorian Cost Data Collection database. Benalla Health is participating in a benchmarking initiative with other 'C' health services that is being managed by Syris Consulting.
	Develop collaboration with peers to selectively provide services that represent the best value for money whilst in the best interests of patients.	Benalla Health will partner with Goulburn Valley Health to provide additional ophthalmology services.	ACHIEVED Benalla Health provided ophthalmology services to 400 patients from GVH waitlist. Targets fully met for 2015/16. Ophthalmology partnership with GVH remains strong.
Access	Implement integrated care approaches across health and community support services to improve access and responses for disadvantaged Victorians.	Current format and membership of weekly interdisciplinary case meetings will be reviewed.	ACHIEVED Review completed in July 2015 to ensure a high functioning interdisciplinary team is involved with all case meetings.
		The implementation of the Key Worker model in Community Health, to support disadvantaged clients to better access services, will continue to be developed.	ACHIEVED Key Worker support to disadvantaged clients ongoing. Referral form updated. Key Worker model reviewed and refined in March 2016.

Key Financial and Service Performance Reporting

DOMAIN	ACTIONS	DELIVERABLES	OUTCOMES
<p>Access</p>	<p>Progress partnerships with other health services to ensure patients can access treatments as close to where they live when it is safe and effective to do so, making the most efficient use of available resources across the system.</p> <p>Reduce unplanned readmissions with a focus on identifying high risk patients, delivering coordinated and integrated responses and reducing the use of avoidable acute care services, where practicable and safe to do so.</p> <p>Improve access to mental health and drug and alcohol services by linking in with Aboriginal and Torres Strait Islander organisations and other drug and alcohol service providers.</p> <p>Develop telehealth service models to facilitate the delivery of high quality and equitable specialist services to patients across regional Victoria.</p>	<p>Benalla Health will partner with Northeast Health Wangaratta and Ambulance Victoria to ensure the effective and efficient use of resources to ensure patients and residents receive appropriate and timely care at Benalla Health.</p> <p>Benalla Health will partner with Northeast Health Wangaratta to deliver additional surgery to public patients through the Elective Surgery Partnership pool.</p> <p>Referral pathways from the Acute ward and Urgent Care Centre into the Health Independence Program, for clients at risk of readmission, will be reviewed.</p> <p>Benalla Health will continue to develop and strengthen our relationships with Gateway Health and Albury Wodonga Health to improve access to mental health and drug and alcohol services.</p> <p>Benalla Health will explore the feasibility, in partnership with, North East Mental Health services, of increasing access to our current telehealth service to include patients with mental health issues who present to the Urgent Care Centre and/or the Community Health Centre.</p>	<p>ACHIEVED Positive meetings between all stakeholders achieved.</p> <p>ACHIEVED Additional surgery lists completed in May / June 2016.</p> <p>ACHIEVED Referral pathways reviewed and refined. Evaluation of effectiveness will occur in 2017.</p> <p>ACHIEVED Gateway Health (Drug and Alcohol) and Albury Wodonga Health (Mental Health) continue to utilize rooms in the Ray Sweeney Centre.</p> <p>"No Wrong Door" Project underway to enhance Ray Sweeney Centre as a "one stop shop." Project is due to be completed October 2016.</p> <p>Benalla Mental Health project commenced in May 2016. Benalla Health partnering with Benalla Rural City to launch the "Connect Benalla" website aimed at streamlining access to information regarding Mental Health (and other) services and support.</p> <p>ACHIEVED Positive discussions held.</p> <p>Telehealth option has now been taken up by the Benalla Mental Health project which commenced in May 2016.</p>

Key Financial and Service Performance Reporting

Part B - Performance Priorities

Safety and quality performance

KEY PERFORMANCE INDICATOR	2015-2016 Target	2015-2016 Actual
Compliance with NSQHS Standards accreditation	Full compliance	Full compliance
Compliance with the Commonwealth's Aged Care Accreditation Standards	Full compliance	Full compliance
Cleaning Standards	Full compliance	Full compliance
Compliance with the Hand Hygiene Australia program	80%	89%
Percentage of healthcare workers immunized for influenza	75%	87.7%
Submission of Data to VICNISS ⁽¹⁾	Full compliance	Full compliance
Patient experience and outcomes		
Victorian Hospital Experience Survey – data submission	Full compliance	Full compliance
Victorian Hospital Experience Survey – patient experience Quarter 1	95%	98%
Victorian Hospital Experience Survey – patient experience Quarter 2	95%	98%
Victorian Hospital Experience Survey – patient experience Quarter 3	95%	100%
Maternity - Percentage of women with prearranged postnatal home care	100%	100%
Governance, leadership and culture		
People Matter Survey – percentage of staff with a positive response to safety culture questions	80%	89%

Financial sustainability performance

KEY PERFORMANCE INDICATOR	2015-2016 Target	2015-2016 Actual
Finance		
Annual operating result (\$m)	0.01	1.4
Trade Creditors	<60 days	61
Patient Fee Debtors	<60 days	31
Public & Private WIES ⁽²⁾ performance to target	100	102%
Asset management		
Basic asset management plan	Full compliance	Full compliance
Adjusted current asset ratio	0.7	1.7
Days of available cash	14 days	141

⁽¹⁾ VICNISS is the Victorian Hospital Acquired Infection Surveillance system

⁽²⁾ The Victorian Health Experience Measurement Instrument (VHEMI) will succeed the VPSM as the instrument for measuring patient experience.

Key Financial and Service Performance Reporting

Part C - Activity and Funding

FUNDING TYPE	2015-2016 Activity Achievement
Acute Admitted	
WIES Public	2,308
WIES Private	492
WIES (Public and Private)	2,800
WIES DVA	139
WIES TAC	4
WIES TOTAL	2,943
Acute Non-Admitted	
Emergency Services	N/A
Specialist Clinics	N/A
Subacute & Non-acute Admitted	
Maintenance Public	1,039
Subacute Non-Admitted	
Health Independence Program	5,933
Aged Care	
Residential Aged Care	9,267
HACC	21,865.68
Primary Health	
Community Health / Primary Care Programs	9,207

Statutory Reporting

Freedom of Information

Benalla Health is an agency subject to the *Freedom of Information (Victoria) Act 1982*. The Chief Executive is the nominated Freedom of Information Officer. Persons wishing to access their information, should complete the FOI Request form (*available from the Benalla Health Website or at the Hospital Reception Desk*).

During 2015/2016, 18 Freedom of Information requests were processed.

Protected Disclosure

Benalla Health is an agency subject to the *Protected Disclosure Act 2012*. The *Protected Disclosure Act 2012* enables people to make disclosures about improper conduct within the public sector without fear of reprisal.

The Act aims to ensure openness and accountability by encouraging people to make disclosures and protecting them when they do.

Policies and guidelines are in place to protect people against action that might be taken against them if they choose to make a protected disclosure.

There were no disclosures in 2015/2016.

Carers Recognition Act

Benalla Health is an agency subject to the *Carers Recognition Act 2012*. The *Carers Recognition Act 2012* formally recognises and values the role of carers and the importance of care relationships in the Victorian community.

The Act includes a set of principles about the significance of care relationships, and specifies obligations for State Government agencies, Local Councils, and other organisations that interact with people in care relationships.

Benalla Health has;

- taken all practicable measures to comply with its obligations under the Act;
- promoted the principles of the Act to people in care relationships receiving our services and also to the broader community and
- reviewed our staff employment policies to include flexible working arrangements and leave provision ensuring compliance with the statement of principles in the Act.

There were no disclosures in 2015/2016.

Overseas Travel

No overseas trips were taken during 2015/2016

Victorian Industry Participation Policy Act 2003

Benalla Health complied with the regulations within the *Victorian Industry Participation Policy Act 2003* for the year 2015/2016.

No contracts were commenced and/or completed in the financial year to which the VI PP applied.

Building Maintenance

Benalla Health complies with the provisions of the *Building Act 1993* which encompasses the Building Code of Australia and Standards for Publicly Owned Buildings November 1994.

Competitive Neutrality

It is Government policy that the costing policies of publicly funded organisations should reflect any competitive advantage available to the private sector. Benalla Health complies with National the Competitive Neutrality Policy Victoria.

Statement of Fees and Charging Rates

Benalla Health charges fees in accordance with the Victorian Department of Health and Human Services directives issued under Regulation 8 of the Hospital and Charities (Fees) Regulations 1986, as amended.

Employment and Conduct Principles

Benalla Health is committed to the application of the employment and conduct principles and all employees have been correctly classified in workforce data collections. Benalla Health also ensures a fair and transparent process for recruitment, selection, transfer and promotion of staff. It bases its employment selection on merit, and complies with the relevant legislation. Policies and Procedures are in place to ensure staff are treated fairly, respected and provided with avenues for grievance and complaint processes.

Privacy

Benalla Health is committed to the protection of privacy of information for all patients, residents, clients and staff.

Statutory Reporting

Publications

The following publications dealing with the functions, powers, duties and activities of the Health Service were produced in 2015/2016. Electronic copies of the documents are available via Benalla Health's website and printed copies are held in the Executive Office:

- Benalla Health Annual Report
- Quality of Care Report
- Strategic Plan 2016-2020

Additional Information

In compliance with FRD 22G (Section 6.19) the information detailed in this report is available on request by relevant Ministers, Members of Parliament and the public (subject to the Freedom of Information requirement if applicable).

Occupational Health and Safety

The objective of Health and Safety is prevention and active response. This is achieved by supportive and ongoing consultation between management, the Occupation Health and Safety Committee, employees, volunteers, students, Visiting Medical Officers contractors and consumers. We aim to continuously review our practices, look for improvements and evaluate our systems on a regular basis, to ensure excellence in safety management.

Consultation and Communication

- Health and Safety Newsletter distributed quarterly promoting safety prevention, access to resources and knowledge to all staff.
- Newsletter themes for 2016; promotion of Staff Health & Wellbeing tab on staff intranet and promotion of White Ribbon accreditation process.
- Monash University conducted a study examining the effectiveness of guidance material provided by WorkSafe Victoria related to the prevention and management of violence. Benalla Health provided feedback from various clinical and non-clinical departments.

Code Grey

- Distribution of new Identification cards reflecting code grey process.
- Zero Tolerance signage at all entry points and nurses stations. Community Health has extended the signage to all interview rooms.
- Management of Violence and Aggression International Training (MOVAIT) has been scheduled to ensure all senior clinical staff has the ability to take a leading role in a Code Grey situation, followed by any front line

staff. A total of six sessions, facilitated by trainers from Northeast Health Wangaratta, focused on effective communication and de-escalation.

Staff Health and Wellbeing Plan

- Staff Health and Wellbeing Program introduced, promoting a holistic approach to staff health and wellbeing.
- Staff Health and Wellbeing information is now developed through the staff intranet. It acts as a central access point for information and resources around Mindfulness, Peer Support, Employment Assistance Program, Corporate Gym memberships, Quit program and Benalla Health Quit officers and community events including the Ministers for Health Active April 2016, FIT in your Jeans for Genes and H2Go water challenge.

Incidents Reported to WorkSafe

- A Needle stick injury involving employee exposure to anti-biotic was reported to Worksafe. The WorkSafe Inspector has complemented Benalla Health on its thorough policies procedures and actions.

Equipment Introduced to Minimize Manual Handling Risks

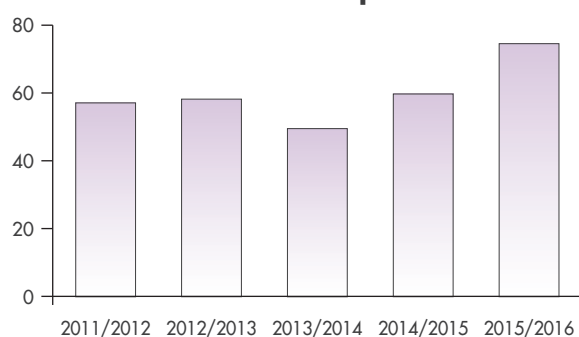
- Housekeeping Services has sourced an effective carpet cleaner to enable the task of cleaning carpets to mitigate manual handling risks.
- Supply Department - The task of navigating the supply trolleys through a number of turns when on delivery to various departments, has been identified as a manual handling hazard. The trolley has been modified to include a towing mechanism to allow staff to hook the trolley up to the scooter eliminating manual handling risks.
- District Nursing - Saddle seat has been introduced for the Home Nursing Service to minimise the manual handling task associated with wound management.
- Theatre - The epidural positioning device has been introduced to position patients safely and securely during epidural procedures. This device eliminates the task of staff needing to support the patient. It improves patient comfort and provides correct patient positioning by encouraging cervical, thoracic and lumbar flexion to maintain a solid and stable position.
- Catering/Housekeeping - A trial of a spring based trolley is scheduled for consideration to replace the existing linen trolleys.

Workforce Information

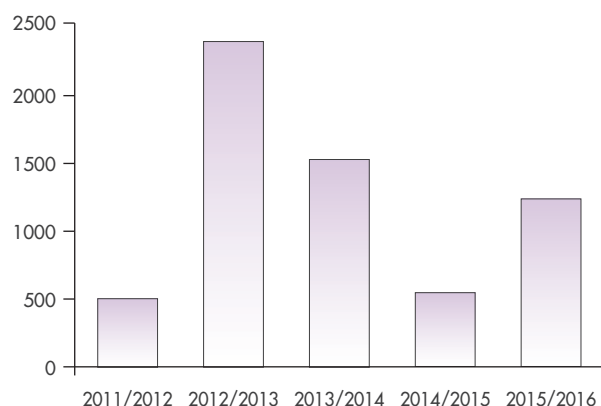
Industrial Relations Activity

There has been nil time lost due to Industrial disputes.

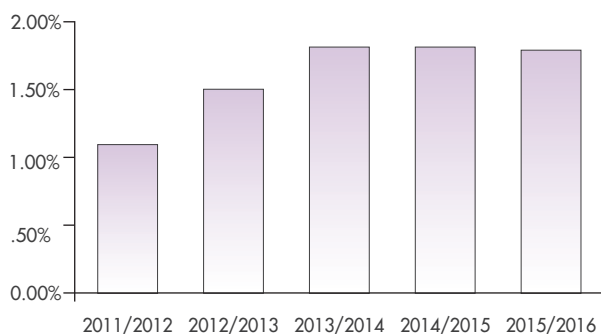
Staff Incidents Reported



Total Work Hours Lost due to Industrial Accidents



Workcover Premium Rate (as advised by Insurer)



Current Full Time Equivalent and other payroll information to the Department under the Minimum Employee Data Set (MDS)

Labour Category	June 2015 Current Month EFT	June 2016 Current Month EFT	June 2015 YTD EFT	June 2016 YTD EFT
Nursing	98.0	102.74	98.2	97.97
Administration & Clerical	33.4	33.80	35.7	33.93
Medical Support	5.5	6.26	5.7	6.31
Hotel & Allied Services	45.4	44.44	43.4	43.74
Medical Officers	0.0	0.0	0.0	0.0
Sessional Clinicians	0.0	0.0	0.0	0.0
Ancillary Staff (Allied Health)	16.3	14.93	16.3	14.70
Total	198.9	202.38	199.4	196.73

Occupational Violence Statistics	2015-2016
1. Workcover accepted claims with an occupational violence cause per 100 FTE	0.02
2. Number of accepted Workcover claims with lost time injury with an occupational violence cause per 1,000,000 hours worked	6.80
3. Number of occupational violence incidents reported	13
4. Number of occupational violence incidents reported per 100 FTE	0.13
5. Percentage of occupational violence incidents resulting in a staff injury, illness or condition	23.07

Definitions

For the purposes of the above statistics the following definitions apply.

Occupational Violence

Any incident where an employee is abused, threatened or assaulted in circumstances arising out of, or in the course of their employment.

Incident

Occupational health and safety incidents reported in the health service incident reporting system. Code Grey reporting is not included.

Accepted Workcover Claims

Accepted Workcover claims that were lodged in 2015-16.

Lost Time

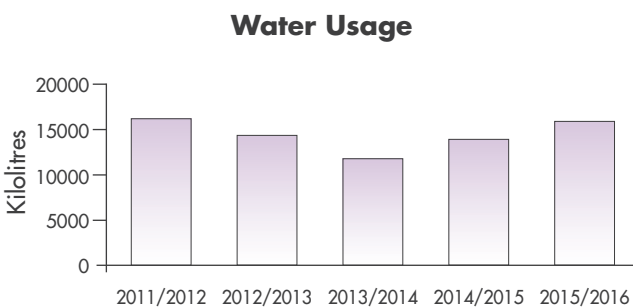
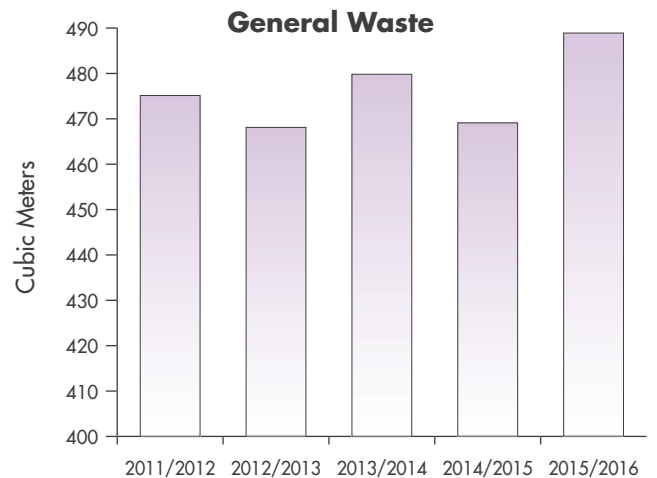
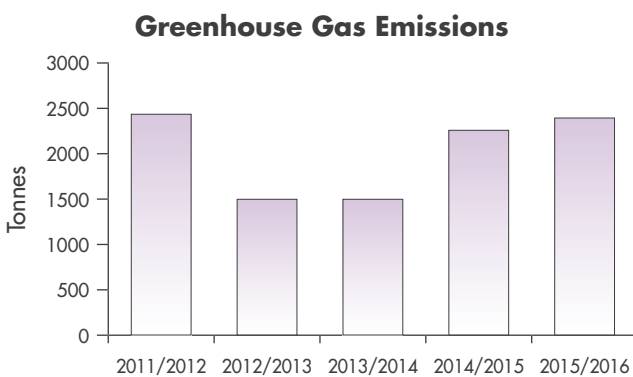
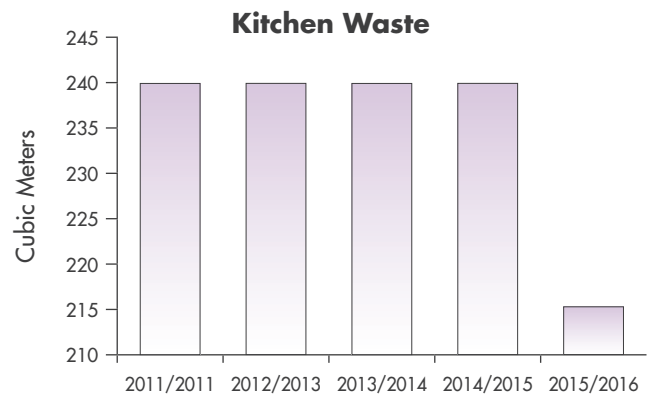
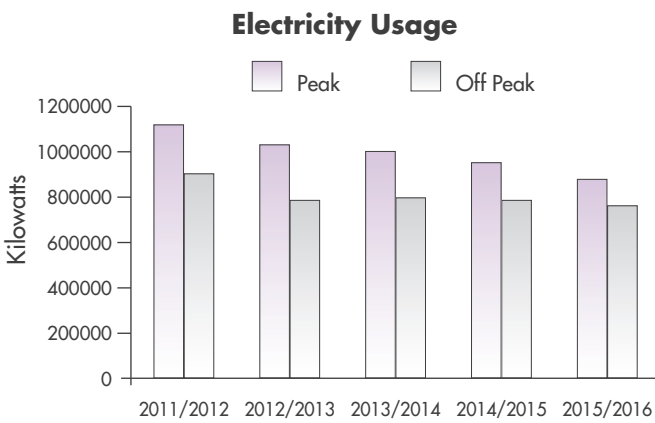
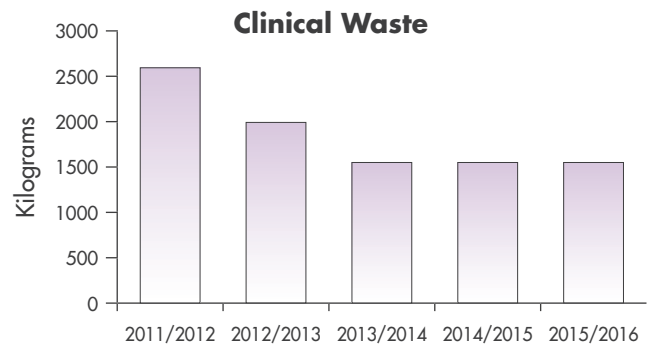
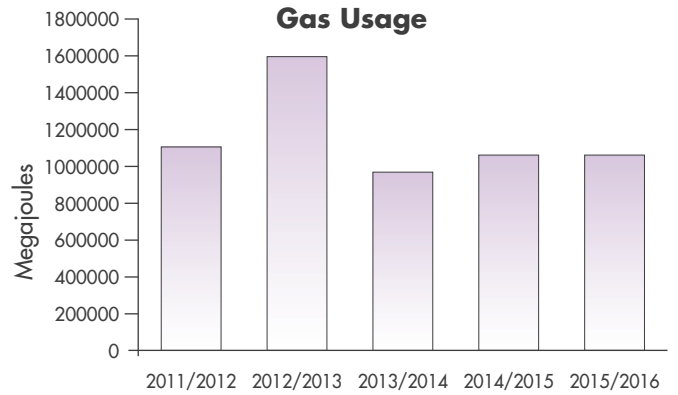
Is defined as greater than one day.

Environment

Benalla Health is committed to protecting the environment. When developing changes or making improvements, consideration is always given to conserving energy and water, reducing greenhouse emissions and improving waste management.

The graphs indicate that the Organisation's energy consumption has remained stable, despite the variations in climatic conditions. The greenhouse gas emissions are higher compared with previous years, but this is due to Benalla Health's Energy supplier altering the conversion factor from 0.8 to 1.34.

With the introduction of careful segregation practices we have experienced significant reductions in Kitchen and Clinical Waste. As a consequence, there has been an increase in General Waste, which is by far the most economical to remove.



Benalla Health has a comprehensive Environmental Management Plan. Innovative projects that have been planned, initiated and successfully completed are inclusive of:

Removal of Cooling Towers

These towers used water to cool down the refrigerant gas that was being supplied to our 4 chiller sets. In doing this the heat being absorbed by the water would heat up to temperatures of around 21°C which is conducive with promoting Legionella. This high risk situation was deemed to be unacceptable because of the catastrophic outcomes that can occur if there is a Legionella outbreak within a hospital environment.

Therefore the Cooling Towers have been replaced with Air Cooled Condensers thereby eliminating the threat of Legionella altogether. Furthermore due to the staging of small fan motors substantial savings have been made both in water and electricity (12%) with considerable person hours being saved as well.

Underground Water Storage & Artificial Grass

An open cut rectangular section of ground measuring about 1.5 metres deep has been excavated and a heavy duty liner placed within 1 metre x 1 metre square crates (similar to milk crates). Each metre by metre cube holds 1,000 litres of water which only takes up a relatively shallow and small area. The crates are then covered with 200mm of crushed rock with the rock then being covered with artificial grass suitable for vehicular traffic.

Conversion of Fluorescent Lighting & Downlights to LED's

Over the past 5 years we have managed to convert high energy usage lighting to low energy cost effective LED's. Approximately 90% of the organisation has been converted, inclusive of all internal and external lighting. Our innovative approach to sourcing funding has enabled us to secure around 80% of our funding via the Government to assist us with these projects.



LED Lighting

Computerised Building Management System

Benalla Health was one of the pioneers to install this system back in the 1980's. By closely monitoring most

of the main equipment and building space, we can easily determine the conditions of wards and rooms to maintain effective temperature, which then minimises patient and staff discomfort. The system monitors air conditioning, hot water boilers, chilled water, domestic hot temperature and critical theatre environments. It is continually updated and additional systems included. Our shared Community Care building is almost totally monitored from the Engineering office with great energy efficiency results being achieved.

Solar for Electricity

Benalla Health has recently installed 96kW of Solar (about 300 panels), which is proving to be more efficient each day. Over a 12 month period a saving of approximately 8% of our total electricity bills has been achieved. Due to the load we do not sell any electricity back to the grid. Building on the success of the first solar installation, we recently added another solar installation resulting in our system now being at a capacity of 192kw.

Reverse Osmosis Water Purification System

A Reverse Osmosis Water Filtering System has been installed to support the operations of the Washer Disinfecter and Utensil Sanitiser. The system usually dispenses 1 litre of water to waste, for every 5 litres produced. The waste water is captured, diverted and stored in underground state-of-the-art water storage cells. The water is then utilised for in-ground garden beds.



Reverse Osmosis Water Purification System

Heat Reclaim Air Condition Systems to Aged Care & Education Buildings

This small bore refrigerant piping system works on the basis that one side of the building, the sunny side may require cooling with the shady side needing to be heated. Most systems expel the heat to the atmosphere through the external unit (condenser). This state-of-the-art system uses an intelligent distribution box which sends the excess heat to parts of the building when it is required, whilst at the same time, not losing it to the outside atmosphere. We have decreased our energy consumption by around 15% because this contemporary system is so effective.

Services

Hospital Services

- Acute Inpatient Services
- Residential Aged Care Facility
- Antenatal Clinic
- Breast Feeding Support Service
- Day Stay
- Domiciliary
- Education and Research Unit
- Infection Control
- Midwife Led Care
- Health Information
- Pharmacy
- Operating Theatre
- Urgent Care Centre

Community Health Services

DIABETES CARE CENTRE AND ALLIED HEALTH

- Dietetics
- Diabetes Education
- High Risk Foot Clinic
- Occupational Therapy (Benalla & Mansfield)
- Physiotherapy
- Podiatry
- Social Work/Counselling
- Speech Pathology

HOME NURSING SERVICE

- District Nursing Service
- Hospital in the Home
- Palliative Care (Benalla & Mansfield)

HEALTH PROMOTION

- Healthy Eating
- Mental Health and Wellbeing

OTHER SERVICES

- Early Intervention in Chronic Disease
- Day Activities Program
- Hydrotherapy

HEALTH INDEPENDENCE PROGRAMS

- Hospital Admission Risk Program
- Sub-Acute Care
- Post Acute Care
- Rehabilitation Groups

Nursing

- Community Health Nursing

Support Groups

- Carer's
- Parkinson's Disease
- Arthritis

Ray Sweeney Centre

BENALLA RURAL CITY

- Family Day Care
- Aged and Disability Services
- Maternal and Child Health Services

CO-LOCATED SERVICES

- Centre Against Violence
- Central Hume Dental Service
- Community Interlink

- Financial Counselling
- Dental Technician
- Drug and Alcohol Service

Other Services

- Central Hume Primary Care Partnership
- Audiologist
- Pathology
- Visiting Medical Officers
- Psychology Services
- Goulburn Valley Community Legal Service
- Hume Riverina Community Legal Service
- CT Scan
- Ultrasound
- X-ray



Diabetes Care Centre Team

Hospital Auxiliary

On behalf of the Auxiliary, it gives me much pleasure to present the 2015-2016 Annual Report.

2015-2016 has been a very enjoyable and successful year for the Auxiliary. Our monthly meetings have been well attended and very productive.

The Auxiliary has been busy throughout the year, attending 9 Lakeside markets, a Day in the Gardens and two CWA Markets. We have also continued our barbeque with 2 days at Woolworths and 2 successful Garage Sales at Barbara Pryde's home.

We were invited to have two market stalls this year, the first at Julie Campbell's beautiful open garden and the other at the Heavy Horse Driving Group function. Both stalls were well supported.

A wreath was laid by the Auxiliary at both ANZAC Day and Remembrance Day ceremonies.

Northeast Artisan's nominated the Auxiliary as their volunteers' charity for the gold coin Christmas wrapping, which we are very grateful for.

Our raffles have been extremely well supported by the Benalla and surrounding communities. We sincerely thank all the local businesses for their contributions and support throughout the year. Without their assistance our fund-raising would not be so successful.

All the wonderful support, assistance and hard work provided by members and supporters of the Auxiliary, throughout the year, is greatly appreciated. Thank you also to Margaret Castles (Secretary) and Rosemary Bain (Treasurer), for their great support.

A sincere thankyou to Chief Executive, Janine Holland for attending our meetings, the support of the office staff and also to the Catering Department for providing the lovely afternoon teas at our meetings.

Ann Sloan

President



Receipts and Expenditure 01/07/2015 - 30/06/2016

RECEIPTS	\$
Sausage Sizzle	\$939.70
Lakeside Market – Craft and Jams.....	\$4,067.00
Lakeside Market –Plants.....	\$5,539.05
Various Raffles – Tilda.....	\$1,975.25
Christmas Raffle	\$5,774.15
Open Gardens	\$183.50
Day In The Gardens- Craft and Jam	\$465.00
Day In The Gardens- Plants.....	\$874.05
Meeting Raffles	\$255.35
Donations	\$225.65
Garage Sales.....	\$140.45
Recipe books.....	\$912.00
Miscellaneous Craft/Plants/Sundry	\$99.50
Change Rebanked	\$5.00
From Investment Account	\$17,000.00
Country Women's Association.....	\$201.70
Total Receipts	\$38,657.35
Balance as at 1st July 2015	\$3,413.06
	\$42,070.41

EXPENDITURE	
Anzac Wreath.....	\$65.00
Catering Expenses – Legacy.....	\$110.00
Hire of Venues/Tables.....	\$55.00
Benalla Hospital – Equipment	\$28,471.35
Miscellaneous Auxiliary	\$106.00
Transfer to Investment Account	\$10,000.00
Audit Costs	\$418.00
Total Expenditure.....	\$39,225.35
Balance as at 30th June 2016	\$2,845.06
	\$42,070.41

INVESTMENT ACCOUNT – CASH COMMON FUND/ SCB SOCIAL INVESTMENT DEPOSIT ACCOUNT

Balance as at 1st July 2015	\$34,858.69
Interest.....	\$757.32
From Working Account.....	\$10,000.00
	<u>\$45,616.01</u>
To Working Account	\$17,000.00
Balance as at 30th June 2016	\$28,616.01

TOTAL HOLDINGS	
AS AT 30 JUNE 2016	\$31,461.07

Senior Staff (as at 30.06.2016)

Chief Executive

Ms. J. Holland R.N. R.M. B.HSc, Grad Cert HSM, MPH, ACHSM, GAICD

ACUTE AND AGED CARE

Director of Clinical Services

Mrs. M. Woodhouse R.N, R.M, B.Nurs, Grad Dip Mid, Dip Mgt, Grad Cert Rural & Remote Nursing, Fairley Fellow

Deputy Director of Clinical Services

Mrs. F. Coad R.N. RM.

Assistant Directors of Nursing

Mrs. J. Caramia R.N.

Mrs. L. Ford R.N.

Mrs. H. Jakowlew R.N., R.M.

Ms. C. Smith B.N., M.N., Critical Care.

Mrs. M Reid RN.

Ms.H. Plummer RN., Critical Care

Nurse Unit Manager - Urgent Care Centre

Ms. C Teed R.N. Grad Cert Emergency Nursing

Nurse Unit Manager - Acute Ward

Ms. K. Woosnam R.N. R.M. (Grad. Dip. Midwifery) Grad Dip Adv Nursing Critical Care, Grad Cert Aviation Nursing

Midwifery Co-ordinator

Mrs. H. Ellis R.N. R.M.

Nurse Unit Manager – Theatre/CSSD/Day Stay

Mrs. K. Cheetham R.N.

Nurse Unit Manager - Morrie Evans Wing

Mr. N. Willoughby RN. B.N.

Manager Education & Research/RHAN

Co-ordinator

Dr. S. Wilson, RN, Paed Cert, Grad. Dip. Psych Nsg., BA, BSc, Grad. Dip. Ed., MEd, PhD

Infection Prevention and Control Co-ordinator

Ms. L. Carrington R.N, BAppSc(Ng), GradDip CritCareNurs, MPH (Communicable Disease Control)

Pharmacist

Ms. A. Lawrence B Pharm, Grad Dip Bus (IR), MBA, ASA, MPS

COMMUNITY HEALTH SERVICE

Director of Community Health

Mr. N. Stott, B.A. Ministry, Dip Governance, Grad Cert Business Administration

Home Nursing Service (inc. Euroa D.N.S)

Nurse Unit Manager

Ms. L. Eddy R.N, RM, Dip App Sci, (Nursing), B.Nurs. Grad Dip CHN

Physiotherapy & Occupational Therapy Team Leader

Mr. G. Draper B.App.Sc (Physio)

Allied Health Team Leader

Mrs. S. Matheson B.Sp, M.S.P. A.A, C.P.S. P.

Social Work/Counselling Team Leader

Ms. L. Bowers Accredited Mental Health Social Worker

Administration Team Leader

Mrs. J. Fita

SUPPORT SERVICES

Business Manager

Mr. I. Hatton B.Bus (Acc) C.P.A.

Chief Engineer

Mr. R. Grubissa M.I.H.E.A.

Human Resources Manager

Mrs. L. Daldy B. Bus (Human Resources), M.A.H.R.I

Quality and Risk Manager

Ms. B. Butler-Mack MHA, Cert HSM, Cert SIC, RN, BN (Hons) AAICD

Chief Health Information Manager

Ms. V. Young BAppSc. (Medical Records Administration)

Hospitality Manager

Mr. W. Baxter Dip.Cat.Hotel.Mgt

IT Manager

Mr. P. Hurley B.IT

Administration Manager

Mrs. M. Burrowes Dip.Bus., Dip. Mgt.

Supply Team Leader Co-ordinator

Mr. M. Berry

VISITING MEDICAL OFFICERS

Director of Medical Services

Dr. R. Lowen MBBS, DOBRCOG, FRACGP, AFCHSM

Visiting General Practitioners

Dr. G. Brownstein MBBS, (Hons.) Dip. Obs. Dip. Anaes., R.A.C.O.G., F.R.A.C.G.P., F.A.C.R.R.M.

Dr. B. Buckley MBBS, F.R.A.C.G.P.

Dr. A. Burgansky MBBS

Dr. F. Christophersen MBBS, F.R.A.C.G.P.

Dr. K.L. Chua MBBS(Hons), B.MedSc

Dr. R. de Crespigny MBBS, Dip. Anaes., Dip. Obs., R.A.C.O.G., F.A.C.R.R.M.

Dr. N. Fahn MBBS, F.R.A.C.G.P.

Dr. N. Flanigan MBBS, F.R.A.C.G.P.

Dr. S. Hancock MBBS/BMedSci, DRANZCOG, FRACGP.

Dr. B. Hollins MBBS, (Hons), F.R.A.C.G.P.

Dr. P. Kelly MBBS, Dip.Obs., R.A.C.O.G., F.R.A.C.G.P., F.A.C.R.R.M.

Dr. A. Knight MBBS, Dip. Anaes., Dip. Obs., RANZCOG

Dr. J. Lambert MBBS, F.R.A.C.G.P., DRANZCOG

Dr. C. Lourensz MBBS, BSc(Hons)

Dr. D. Martin. MBBS, F.R.A.C.G.P., DRANZCOG Adv.

Dr. G. O'Brien MBBS, D.R.A.C.O.G., F.A.C.R.R.M.

Dr. C.X. O'Kane MBBS, M.Bioethics

Dr. P. Radford MBBS (Hons), F.R.A.C.G.P., F.A.C.R.R.M.

Dr. U. Read MBBS, F.R.A.C.G.P.

Dr. D. Rodgers MBBS, Dip. Obs., RANZCOG, FRCRRM

Dr. P. Slot MBBS, F.R.A.C.G.P., D.R.A.C.O.G., F.A.C.R.R.M.

Dr. H.P. Tran MBBS

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

Dr. S. Warfe MBBS, B.Med.Sci

Visiting General Surgeons

A/Prof F. Miller MBBS, PhD., F.R.A.C.S.

Mr. P. R. Thomas MBBS (Melb), FRCS Ed, FRACS

Mr. A. Cichowitz MBBS (Hons), BMedSci, FRACS

Mr. A. MacLeod MBBS, FRACS, BSci

Visiting Obstetricians & Gynaecologists

Dr. L. Fogarty MBBS, F.R.A.N.Z.C.O.G.

Dr. J. Krones MBBS, F.R.A.N.Z.C.O.G.

Dr. L. Bennett MBBS (Hons), F.R.A.N.Z.C.O.G.

Visiting Ophthalmologists

Dr. N. Karunaratne MBBS, MPH, MBA, MMed, FRANZCO.

Mr. S. Permezal MBBS, F.R.A.N.Z.C.O., F.R.A.C.S., F.R.C. Ophth(UK)

Mr. A. Atkins B. Med Sci., MBBS, F.R.A.N.Z.C.O



Mr. Mark Forbes - Visiting Urologist

Mr. E. Zamir B.Med.Sci, M.D., F.R.A.N.Z.C.O.

Mr. A. Van Heerden MBChB, F.R.A.N.Z.C.O.

Mr. P. Meagher MBBS, F.R.A.N.Z.C.O., F.R.A.C.S.

Visiting Oral & Maxillofacial Surgeon

Mr. W. Besly MDS, FRACDS(OMS), FRACDS

Visiting Orthopaedic Surgeons

Mr. I. Critchley B.Sc., M.B.Ch.B., F.R.C.S.(Ed), F.R.A.C.S., F.A.Orth.A.

Dr. W. R. Seager MBBS, F.R.A.C.S. F.A.Orth.A.

Visiting Paediatrician

Mr. T. Stubberfield MBBS, Dip R.A.C.O.G., DCH (London), F.R.A.C.P.

Visiting Physicians

Dr. R. Krones M.D. F.R.A.C.P.

Visiting Urologists

Mr. J. Goad MBBS, F.R.A.C.S.

Mr. M. Forbes MBBS (HONS), F.R.A.C.S.

Visiting Radiologists - Broken River Imaging

Dr. I. Alexander MBBS, FRANZCR.

Dr. S. Begg MBBS, FRANZCR

Dr. I. Karunaratna MBBS, FRANZCR

Dr. A. Lakkaraju FRANZCR, FRCR (UK), MBBS

Dr. G. Miller MBBS, FRANZCR

Dr. P. Neelapriyantha MBBS, MD, FRANZCR

Dr. P. Neerhut MBBS, FRANZCR

Dr. J. Wong FRANZCR, MBBS (Melb), MMED (Radiology)

Visiting Dentists - Northeast Health Wangaratta

Dr. E. Pegan BSc (Melb. Uni)

Dr. J. Ong BHSc(Dent)/MDent

Dr. Isha Pandher BHSc(Dent)/MDent

Oral Health Therapists

Ms. V. Contreras BOH (LaTrobe Uni)

Mr. G. Holtkamp BOHSc

Benalla Visiting Dentists

Dr. S. Jones BDentalSci.

Dr. M. Zamani ADEC Certificate

Appendix A: Alternate Presentation of Comprehensive Operating Statement

This statement does not form part of the Audited Financial Statements and has not been audited by VAGO.

Financial Year Ended 30 June 2016	2016 \$'000	2015 \$'000
Interest	265	356
Sales of goods and services	3,172	3,089
Grants	23,121	22,680
Other Income	1,461	1,255
Total revenue	28,019	27,380
Employee expenses	16,985	17,083
Depreciation	2,164	2,018
Interest Expense	4	-
Other operating expenses	9,103	9,206
Total expenses	28,256	28,307
Net result from transactions - Net operating balance	(237)	(927)
Net gain/ (loss) on sale of non-financial assets	30	3
Other gains / (losses) from other economic flows	378	(27)
Total other economic flows included in net result	408	(24)
Net result	171	(951)

This alternative presentation reflects the format required for reporting to the Department of Treasury and Finance.

The statement is attached as an appendix to the Health Service's financial information. Whilst the net result reconciles to the Comprehensive Operating Statement, it does not form part of the Audited Financial Statements.

Appreciation

This report was presented
to you with the compliments
of the Chairman and Board of
BENALLA HEALTH
in appreciation of your
interest and support.

Benalla
HEALTH

HOSPITAL

5

HAZCHEM