ANNUAL REPORT 2009

Building momentum

ANNUAL REPORT 2009
OBJECTIVE OF THIS REPORT

This Report is produced to inform Peninsula Health’s community, staff, partners and government of its performance for the financial year 1 July 2008 – 30 June 2009 and of its directions for 2009 – 2013.

Peninsula Health’s vision is to provide coordinated health care. This leads to an integration of programs and patient services across a number of sites. Initiatives, progress and achievements across Peninsula Health are presented to demonstrate this integration.

This Annual Report should be read in conjunction with the Financial Statements and the Quality of Care Report, which details Peninsula Health’s progress and achievements in many clinical areas and the Peninsula Health Research Report which details research undertaken by clinicians and other health professionals. These documents are available on our website: www.peninsulahealth.org.au or by calling (03) 9788 1501.

It is prepared in accordance with Victorian Government guidelines, the directions of the Minister for Finance and in line with Australasian Reporting Awards Incorporated Guidelines.

Peninsula Health is committed to benchmarking its performance against best practice.

The 2009 Annual Report will be presented to the public at Peninsula Health’s Annual General Meeting on October 30 2009.

Responsible Bodies Declaration

In accordance with the Financial Management Act 1994, we are pleased to present the Report of Operations for Peninsula Health for the year ending 30 June 2009.

Barry Nicholls
Chairperson
Peninsula Health
Dated 28/8/09

Sherene Devanesen
Chief Executive
MISSION
In Partnership, Building a Healthy Community.

CLARIFYING STATEMENT
Peninsula Health embraces a holistic view of health. The Health Service will work with community and service partners to promote health and healthy lifestyles and to plan for the future needs of the community.

The Health Service will ensure the best possible health care outcomes and will be recognised as a leader in promoting and providing quality, innovative, coordinated and personalised health services. It will enhance the calibre of services provided through continuous improvement, education, research and a commitment to the delivery of quality health outcomes.

The workforce is its strength and future. Collaboratively, the Health Service will forge a caring work environment compatible with its commitment to the retention and development of its workforce, attracting the best people for the required positions and providing exemplary standards of teaching, training and education.

Its managers will be responsible, making the best use of physical, financial and human resources; always aiming for the highest standards of organisational and clinical governance.

Every month at Peninsula Health, an average of:

- 188 babies were born
- 552 paediatric patients were treated in hospital
- 5,498 patients were treated in the Emergency Departments
- 3,115 people were admitted for hospital treatment
- 499 elective surgical procedures were performed
- 197 day surgical procedures were performed
- 66 cardiac cases were treated
- 71,000 prescriptions were dispensed
- 6,525 X-rays and medical imaging procedures were performed
- 79 mental health patients were treated
- 7,476 community mental health occasions of care were provided
- 10,227 community health occasions of care were provided
- 128 inpatient rehabilitation treatments were provided
- 88 patients were admitted to Peninsula Health Hospital in the Home, with an average of 801 home visits

OUR VALUES OUR ACTIONS

<table>
<thead>
<tr>
<th>OUR VALUES</th>
<th>OUR ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service</td>
<td>Caring for those in need; making a difference; being responsive; person-centred; listening</td>
</tr>
<tr>
<td>Integrity</td>
<td>Open; honest; just and reasonable; ethical</td>
</tr>
<tr>
<td>Compassion</td>
<td>Caring for our clients, patients, carers and families, and each other; showing empathy; being non-judgemental; accepting; taking time; showing humility</td>
</tr>
<tr>
<td>Respect</td>
<td>Walking in the shoes of others; recognising individual needs; showing tolerance; treating others as equals; acknowledging worth</td>
</tr>
<tr>
<td>Excellence</td>
<td>Giving our best; striving for the best results; putting in that little extra; aiming for better practice; being innovative; professional; providing quality services</td>
</tr>
</tbody>
</table>
It is with pleasure that we present the 2008/09 Annual Report. The year has been a busy one for the Health Service, as we continue to meet the demands of the growing population in Frankston and on the Mornington Peninsula region.

This demand included the following:

- 70,460 people presented to Emergency Departments at both Frankston and Rosebud Hospitals
- 62,511 patients were admitted at both hospitals
- 89,444 community contacts in mental health care
- 37,989 occasions of service were provided within community and continuing care
- 122,725 occasions of service were provided through a number of community health programs.

It was a challenging year in which a small operating surplus of $121,000 was achieved. It will be used to fund programs and services in the coming year. (Please refer to the Financial Commentary on page 7).

After the close of the financial year, Peninsula Health received the Premier’s Award as the Metropolitan Health Service of the Year for 2009. Peninsula Health also received the award in 2007 and is the only health service to have won the Premier’s Award twice.

Some of the Health Service’s major achievements throughout the year include:

**Peninsula Health/PCHS amalgamation**

The successful amalgamation with the Peninsula Community Health Service on 1 July, 2008 has enabled Peninsula Health to provide integrated community health services from four locations. The completion of a purpose-built site at Hastings and the construction of a new site at Rosebud will further enhance the provision of community health services (see pages 18 - 19).

**Winning the Personal Alarm Service Tender**

During the year, Peninsula Health won the tender to provide a state-wide personal alarm service through its MEPACS division. The service enables older persons to remain independent in their own homes. The number of MEPACS clients increased from 13,250 to 21,576. In winning the tender, Peninsula Health was commended for its review process, its strong leadership and its effective training systems (see page 39).

**Introduction of a new Patient Archiving Communications System**

A new system called Picture Archiving and Communications Systems, or PACS was introduced. This technology, which allows the electronic distribution of scans and X-ray images to the clinical staff of Peninsula Health, became operational in September 2008 (see page 21).

**The Stage 2A expansion of Frankston Hospital**

The $45m Stage 2A expansion of Frankston Hospital is well underway. The expansion will provide 6,000 square metres of new and redeveloped areas, including critical care facilities.

As part of the redevelopment, two additional operating theatres will be developed and four existing operating theatres will be refurbished. The new theatres are scheduled to be operational in late 2009. This will assist in meeting the very high demand for elective surgery (see page 14).
The annual agreement for 2008/09, summarised below, ensured delivery of the Health Service’s substantial progress towards the key shared objectives of financial viability, improved access and quality of service provision.

## Statement of Priorities

The Statement of Priorities is the key accountability agreement between Peninsula Health and the Minister for Health, the Hon. Daniel Andrews.

<table>
<thead>
<tr>
<th>Strategic Priority</th>
<th>Status</th>
</tr>
</thead>
</table>
| Implement capital infrastructure efficiently to enhance future service delivery. | - Commenced major work on the Stage 2A redevelopment of Frankston Hospital, which is scheduled for completion in late 2010 (page 14).  
- Early work to expand Frankston Hospital’s Maternity Ward is scheduled to commence in October 2009 (page 14). |
| Undertake capital planning to enable the provision of future services. | - Continued planning for: future stages of the redevelopment of Frankston Hospital; the remaining stages of The Mornington Centre; and the permanent relocation of Rosebud Community Health.  
- Continued planning for other capital works projects, including enhancing car parking facilities at Frankston Hospital. |
| Successfully amalgamate the former bodies of Peninsula Health and Peninsula Community Health Service (PCHS) and develop community services consistent with the Care in your Community principles. | - Integration of Peninsula Health Community Health Service and the former PCHS has proceeded smoothly (page 18-19).  
- Planning for the interim accommodation for Rosebud Community Health on Rosebud Hospital grounds is currently underway (page 15).  
- The new facility for Hastings Community Health to open in September 2009 (page 15).  
- Peninsula Health, in partnership with a number of service agencies, is implementing key strategies in diabetes, anxiety and depression and Chronic Obstructive Pulmonary Disease (page 18). |
| Maintain financial viability. | - Achieved a small operating surplus of $121,000 for the 2008/09 financial year (page 7).  
- MEPACS successfully won the Department of Human Service’s tender for providing the Personal Assistance Call Service across the state (page 39).  
- Replaced assets and infrastructure, including IT infrastructure, as necessary. |
| Continue to meet quality standards and emergency and elective performance targets. | - Retained accreditation by ACHS, HACC and ACSAA (page 48).  
- Strategies continue to be implemented to reduce waiting time for elective surgery patients; improve responses to meet emergency demand; and improve outpatient access and referral management. |
| Mental Health | - The Mental Health Service Plan was reviewed (page 35).  
- Planning for a Prevention and Recovery Care facility, with the Department of Human Services (DHS) and other partners, is currently underway (page 35).  
- Peninsula Health received funding for the refurbishment of the Adult Acute Inpatient Unit’s Acute Management Area. |
| Hospital redesign project. | - Completed the redesign capability building process in the Frankston Emergency Department, as part of Peninsula Health’s participation in DHS’ Redesigning Care initiative. |
CHALLENGES
Some waiting times for treatment at Frankston Hospital Emergency Department remain an area of concern. Organisation-wide strategies were developed and implemented to improve performance in this area (see page 30 - 31).

A major challenge throughout the expansion project at Frankston Hospital has been the management of a loss of 225 car parking spaces. A number of initiatives have been implemented to alleviate the demand on the Hospital’s car parking facilities (see page 60).

STAFF AND VOLUNTEERS
Throughout the year, staff and management at every site developed programs, systems and processes that provided comprehensive and expanded services within allocated resources. The excellence of three programs was recognised in the 2008 Victorian Public Healthcare Awards (see page 56).

Volunteers and auxiliary members continue to contribute to Peninsula Health in a very significant manner, enriching a partnership that has helped to improve the provision of services. There are currently 910 volunteers and auxiliary members, all of whom make valuable contributions to Peninsula Health.

THE BOARD
Following the approval of the merger between Peninsula Health and Peninsula Community Health Service (PCHS), the Minister for Health, the Honorable Daniel Andrews appointed a new Board of Directors for the combined organisation.

The Peninsula Health Board is appointed for their expertise in clinical governance, delivery of health care services, organisational development and health care financing. In addition, the Board has strong representation from the Peninsula community.

The ongoing Board Directors are: Mr Barry Nicholls, who continues to serve as the Board’s Chairperson, Ms Diana Ward (Deputy Chairperson), Ms Nancy Hogan, Mr James Kerrigan, Dr Winston McKean, Mr Michael Tiernan and Ms Dianne Wickham.

Two new Directors, Professor Paul Collier and Mr Peter Brookhouse, were appointed to the Board during the year.

The Peninsula Health Board and staff extend their sincere appreciation to the retired Board Director Ms Liza Newby for her valuable contribution.

MOVING FORWARD
Peninsula Health has carefully reviewed its purpose, demand on services, how it is meeting those demands, and the challenges and possibilities that lie ahead.

Peninsula Health recognises that those it serves are entitled to the utmost respect and to compassionate, high quality care. Through communication and the coordination of care, more can be done to provide a better experience for those who need services.

The Health Service faces a challenging future. In turbulent financial times, it needs to be prudent with its finances and resources while achieving growth, reform and change.

Peninsula Health’s 2009 - 2013 Strategic Plan outlines strategies for achieving continuous improvement into the future (see page 11). This includes the implementation of a new Clinical Information System and the opening of new surgical theatres as part of the Frankston Hospital expansion.

THANKYOU
The Board and staff at every level are grateful to the thousands of individuals, and many local businesses and organisations, who have donated generously to Peninsula Health.

Special thanks are extended to the staff of Peninsula Health, its volunteers and auxiliary members, and the Executive whose continuing support will enable Peninsula Health to meet future challenges.
Peninsula Health is one of 14 metropolitan public health services in Victoria and comprises:

- Frankston and Rosebud acute hospitals;
- Aged Care, Rehabilitation, Palliative Care and Residential services in Mornington, Seaford, Frankston and Rosebud;
- Mental Health services in Frankston and Rosebud; and
- Community Health services in Frankston, Rosebud, Mornington and Hastings.

Peninsula Health services include acute medical, paediatric, surgical and maternity care, critical care, mental health services, aged care, rehabilitation, palliative care, residential care, community health, health education and promotion, outpatient services, aged care and assessment, investigative and medical support services, allied health, clinical training and research.

**POPULATION**

Peninsula Health serves approximately 300,000 people who live in an 853 sq km area that includes the City of Frankston, the Mornington Peninsula Shire and the southern part of the City of Kingston. See map on back cover of the report.

About 31 per cent of the population is under the age of 25 years and 33 per cent over the age of 55. This proportion of older people, the group requiring the most health services, is one of the highest and fastest growing in Victoria.

The estimated resident population of the Peninsula Health catchment area is expected to grow from 261,573 in 2006, to almost 313,000, in 2031.

Peninsula Health also responds to the needs of more than 80,000 holiday-makers during the summer months and several million people who visit the Mornington Peninsula every year.

There are more than 1,500 Indigenous people living in the service area. Peninsula Health provides some services specifically for the Koori community.

**HIGH HEALTH RISKS**

The top 10 health risk factors on the Mornington Peninsula are tobacco, high blood pressure, obesity, poor diet, physical inactivity, high cholesterol, alcohol, unsafe sex, illicit drugs and work injuries.

The major causes of death and disability for this population are cancer, diabetes, stroke, asthma, heart disease, accidents, and emphysema.

Life expectancy for people on the Peninsula is slightly lower than the average for Victoria. Women in the catchment area can expect to live to nearly 83, compared to the state average of 84.3. Men on the Peninsula can expect to live to nearly 77 years of age, lower than the state average of 79.6 years.

Life expectancy for people from the Indigenous community is eight years lower than the Victorian average for women and 18 for men.

**ADDRESSING HIGH RISK FACTORS**

A comprehensive approach is taken to all risk factors and prevalent medical conditions.

Recent strategies include:

- The commencement of the Care in your Community initiative, which aims to deliver community based healthcare in the areas of greatest need. The project recently entered the implementation phase, with a focus on diabetes, depression and anxiety and Chronic Obstructive Pulmonary Disease (see page 18).
- The third Ageing Well Expo, which attracted more than 1,300 people, provided attendees with information on keeping active and ageing well with chronic health conditions (see page 39).

Emergency Department Presentations
The number of patients presenting at Frankston Hospital’s Emergency Department reduced slightly by 946 patients, or 1.9 per cent, from 2007/08. Emergency presentations at Rosebud Hospital increased by 47 patients or 0.2 per cent, from the previous year.

Emergency Patients admitted to a ward within 8 hours
Although, the Department of Human Services (DHS) target of 80 per cent was not met, whole of organisation strategies are being developed and implemented to improve performance in this area (see pages 30 - 31).

Elective Surgery Patients on Waiting List as at June 30
The number of patients waiting for elective surgery as at June 30 declined for the fourth successive year.

Percentage Time on Hospital Bypass
The Frankston Emergency Department had 217 one hour episodes of hospital bypass in 2008/09. The DHS target set for the percentage of time on hospital bypass is three per cent. Frankston ED was consistently below this target for the majority of the year, which is a favourable result.

Number of patients with an Emergency Department length of stay greater than 24 hours
The number of patients staying in the Emergency Department for greater than 24 hours decreased from 113 in 2007/08 to 65 in 2008/09.

Elective Surgery waiting time (in days) by Category
The average waiting time for elective surgery Category 1 (urgent) patients remains well below the target of 30 days. The average waiting time for Category 2 (semi-urgent) patients and Category 3 (non-urgent) decreased, to 127 days and 208 days respectively, in 2008/09. For further information about surgical initiatives implemented during the year, see page 26 - 27.
Financial Commentary

Peninsula Health’s financial performance in 2008/09 was good, with a small operating surplus (recorded before capital income and depreciation) of $121,000.

In 2008/09, in comparison to the previous financial year:

- Total assets rose by $85.0m to $329.5m.
- Liabilities rose by $12.7m to $80.7m.
- Equity, being the difference between assets and liabilities, rose by $72.2m to $248.8m.
- Total revenue increased to $339.3m from $307.0m.

Peninsula Health achieved the operational target as specified by the 2008/09 Statement of Priorities. (Full details are reported in the separate Financial Statements).

Looking Ahead

Peninsula Health’s financial sustainability is critical to the ongoing provision of quality services that deliver efficient and effective care and treatment.

Financial sustainability is achieved when Peninsula Health services, capital projects and standards are delivered in keeping with the annual operational plan. This includes implementing improved purchasing, as well as continuous cost saving strategies. It also includes working towards maintaining effectiveness of clinical activity and working with our strategic partners.

<table>
<thead>
<tr>
<th>Financials ($000s)*</th>
<th>2004/05</th>
<th>2005/06</th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total revenue</td>
<td>249,942</td>
<td>267,702</td>
<td>284,173</td>
<td>307,040</td>
<td>339,347</td>
</tr>
<tr>
<td>Total expenditure</td>
<td>247,904</td>
<td>266,147</td>
<td>282,196</td>
<td>306,898</td>
<td>339,226</td>
</tr>
<tr>
<td>Operating surplus</td>
<td>2,058</td>
<td>1,555</td>
<td>1,977</td>
<td>142</td>
<td>121</td>
</tr>
<tr>
<td>Total assets</td>
<td>190,980</td>
<td>202,155</td>
<td>218,746</td>
<td>244,490</td>
<td>329,476</td>
</tr>
<tr>
<td>Total liabilities</td>
<td>51,587</td>
<td>57,333</td>
<td>64,725</td>
<td>67,940</td>
<td>80,684</td>
</tr>
<tr>
<td>Equity</td>
<td>139,393</td>
<td>144,822</td>
<td>154,021</td>
<td>176,550</td>
<td>248,792</td>
</tr>
</tbody>
</table>

* Financial results prior to 2008/09 exclude the former Peninsula Community Health Service Inc.
Peninsula Health's 2005 – 2008 Strategic Plan had six objectives which were to:

- Meet demand
- Enhance quality
- Manage our resources
- Build partnerships
- Care and support our workforce
- Manage risk

The key initiatives for the year under review are detailed below, along with a summary of achievements, the status and future outlook for each initiative.

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Progress</th>
<th>Status</th>
<th>Future Outlook</th>
</tr>
</thead>
<tbody>
<tr>
<td>To provide a quality of care to older people that is in keeping with evidence based practice.</td>
<td>Established the Acute Care of the Elderly (ACE) unit at Frankston Hospital in 2008. (Page 22).</td>
<td>Achieved</td>
<td>Planning for the remaining stages of The Mornington Centre. Further enhance the Personal Assistance Call Service to reach more clients.</td>
</tr>
<tr>
<td>To provide high quality, complementary services from Rosebud Hospital that assist Peninsula Health in meeting growing demand.</td>
<td>Co-located Peninsula Community Health’s Rosebud services to a temporary location at Rosebud Hospital. (Page 15). Established a new dental health facility in Rosebud.</td>
<td>Ongoing progress</td>
<td>Interim accommodation for the Rosebud Community Health Service to be established at the rear of Rosebud Hospital.</td>
</tr>
<tr>
<td>Work in partnership with other health providers to enhance the health and well being of the community.</td>
<td>As part of the Community Kitchens program, 14 new kitchens have been established throughout Victoria. The Health Service has developed strategies to improve the health care of the local Indigenous community and their participation in local health services (Page 18).</td>
<td>Not achieved</td>
<td>Promote the health and wellbeing of our community and staff by expanding our profile and presence in health promotion and early intervention.</td>
</tr>
<tr>
<td>Provide a flexible range of responses to the increasing level and complexity of demand.</td>
<td>A Clinical Response Service was successfully trialled, which provided alternative treatment options for elderly patients from the Frankston Emergency Department (Page 31).</td>
<td>Achieved</td>
<td>Complete the Frankston Hospital Maternity Unit expansion by late 2011 to help meet demand. The development of two additional surgical operating theatres, which are scheduled to be completed by early 2010.</td>
</tr>
<tr>
<td>Foster development of mutually beneficial partnerships to build a healthy community.</td>
<td>Twelve new community advisory groups were established to further enhance participation between the Health Service and the community (Page 47).</td>
<td>Achieved</td>
<td>The formation of further community advisory groups will continue to enhance participation between the Health Service and the community.</td>
</tr>
</tbody>
</table>
### Build on our strong culture of quality and innovation.

- Maintain Australian Council on Healthcare Standards (ACHS) accreditation.
  - In March 2009 Peninsula Health underwent an ACHS Periodic Review with positive feedback (Page 48).
  - Peninsula Health’s Home and Community Care Services underwent a review by the ACHS, also with positive results.
- Maintain Aged Care Standards and Accreditation Agency (ACSAA) accreditation.
  - All four of Peninsula Health’s Residential Aged Care facilities maintained full ACSAA accreditation.
- Planning has commenced for the next Organisation Wide Survey due in 2011.

### Establish and maintain a strong and dynamic research function for clinical, strategic and social research.

- Develop and implement an annual research plan that includes a mix of clinical, strategic, and social research.
  - A Research Methods Course commenced in 2009.
- Ensure Peninsula Health’s residential aged care facilities maintain accreditation status.

### Promote the attractiveness of Peninsula Health as an employer of choice.

- Consult with staff in the development of a comprehensive Human Resources Strategy.
  - Continued to implement a ‘Safety Max’ program.
- Participate in a new voluntary WorkSafe initiative, known as the Employer Performance Management Program.

### Maintain financial viability by living within our means.

- Continue to achieve service and performance targets.
  - An audit of financial statements, including a review of controls and IT processes for 2008/09, was signed off by the Auditor-General.
- Supply chain management system to be further reviewed and enhanced.
  - Seek opportunities to expand the revenue base to expand services for the community.

### Plan, manage and enhance physical infrastructure.

- Progress Frankston Hospital’s Stage 2A Redevelopment.
  - Major works commenced on the $45m expansion project (Page 14).
  - The Stage 2A Expansion construction project is scheduled to be completed in 2010.
- Develop/foster environmentally sustainable development strategies across all services areas.
  - The Health Service continues to implement its ‘Greening the Peninsula’ sustainability program (Page 54).
  - Energy and water conservation programs will be extended and built into the expansion of Frankston Hospital.

### Provide timely, accurate information to improve efficiency and patient/client outcomes.

- Lead the development and implementation of a Patient Management System.
  - Data systems, such as the iPatient Manager (IPM) and the Online 3 business reporting system, continue to be enhanced.
  - The IPM roll-out program includes the replacement of a further two patient management systems, used in the community health and sub-acute areas.
- Enhance clinical information systems including the Picture Archiving and Communications System (PACS) for Radiology.
  - PACS became operational in September 2008 (Page 21).
  - Phase two of the IPM roll-out program includes the replacement of a further two patient management systems, used in the community health and sub-acute areas.

### Identify, analyse, treat, evaluate and monitor key risks at all levels.

- Build risk assessment/management into governance and operational processes.
  - Conduct methods and tests to evaluate service provisions, both internally and externally, by benchmarking with other health care providers. This is to identify areas of excellence, as well as areas where improvements have been identified.
Peninsula Health operates 25 health facilities across 13 sites (see page 5). Locations and contact details for every site are provided on the back cover of this report.

**Significant events for 2008/09**

- Peninsula Health has maintained full accreditation for all services. See page 48.
- Peninsula Health’s 2009 - 2013 Strategic Plan was finalised after extensive stakeholder consultation.
- The major works stage of the expansion of Frankston Hospital commenced. See page 14.
- The successful amalgamation with the Peninsula Community Health Service on 1 July 2008 has enabled Peninsula Health to provide integrated community health services across four locations. See page 18 - 19.
- The Health Service has implemented a Supply Chain Reform Project, which has led to significant cost savings of $817,900 during the year. See page 60.
- The Picture Archiving and Communications System, which allows the electronic distribution of scans and X-ray images to the clinical staff of Peninsula Health, was operational from September 2008. See page 20 - 21.
- Peninsula Health’s achievements in improving quality and safety were also recognised in the 2008 Victorian Healthcare Awards. See pages 22, 33, 54 & 56.
- In 2008, Peninsula Health won the Award for the Best Metropolitan Quality of Care Report for the second consecutive year in a row.
- Peninsula Health’s 2008 Annual Report won a gold medal for overall excellence from the Australian Reporting Awards Association.
Peninsula Health has carefully reviewed its purpose, demands on services, how it will meet those demands and the challenges and possibilities that lie ahead.

The 2009 - 2013 Strategic Plan outlines strategies, which are listed below, for achieving continuous success into the future. Next year’s annual report will review outcomes against these goals and objectives.

**Goal 1: Create a better consumer experience**
- Provide care consistent with our values: Service, Integrity, Compassion, Respect, Excellence.
- Provide welcoming facilities that positively engage our community.
- Develop referral and entry systems that make it easy to get the right care at the right place at the right time.
- Enhance patient flows to progressively improve the quality, safety and efficiency of high throughput services.

**Goal 2: Provide timely and appropriate healthcare**
- Develop services to meet increased demand.
- Develop capacity to meet demand, making best use of existing capacity including staff and facilities.
- Progressively increase the range and complexity of specialist services where quality, volume and efficiency benchmarks can be met.
- Support service partnerships with public and private providers to achieve better continuity of care where care is shared with other agencies.
- Expand outpatient services consistent with Department of Human Services policy directives.
- Develop capital infrastructure to meet healthcare demands and achieve efficient use of available resources.

**Goal 3: Care and develop our workforce**
- Position Peninsula Health as an employer of choice.
- Create a workforce climate that reflects Peninsula Health values.
- Develop and implement an organisational wide workforce development strategy.
- Improve communications with our staff.
- Support and develop volunteer roles to engage a broad cross-section through the community.
- Provide excellent training opportunities for new graduates, international medical graduates and those re-entering the workforce.

**Goal 4: Promote the health and wellbeing of our community and staff**
- Provide leadership in area-based planning and delivery of health promotion strategies and programs.
- Develop Peninsula Health’s profile in the community and healthcare industry.
- Promote the health and well being of our community and staff by expanding our profile and presence in health promotion and early intervention.
- Work with the Community Advisory Committee to strengthen partnerships and communication with our community.
- Strengthen partnerships with healthcare providers and organisations active in our area.

**Goal 5: Enhance quality**
- Enhance quality practice throughout the organisation.
- Build our education, training and research profile.
- Maintain a proactive approach to the management and reduction of high and critical risks.
- Improve reporting and access to clinical data including patient safety data and feedback.
- Maintain accreditation of all services.

**Goal 6: Provide innovative and efficient services**
- Develop an information technology strategy that supports contemporary and evolving care models.
- Continually improve business processes.
- Build team based multi-disciplinary and trans-disciplinary models of care.
- Effectively manage discharge planning.
- Progressively move towards 24 hour service availability for all time critical clinical services agencies.
- Manage within our financial resources.
- Seek opportunities to expand revenue base to expand services for the community.
COMMUNITY HEALTH SERVICES

Main Sites: Frankston Community Health Service (Frankston Integrated Health Centre), Mornington Community Health Service; Hastings Community Health Service; Rosebud Community Health Service; Community Dental Service at Frankston, Rosebud and Hastings.

Key Services and Facilities:

- Health Promotion (Men’s Shed, Community Kitchens, Community Gardens).
- Children’s Services (School Readiness, Healthy Futures, the Hanen It Takes Two To Talk program for parents of children with language delays), Early years parenting.
- Primary Health (Counselling, Dietetics, Women’s Self Confidence, Service Coordination), disease education and health education programs including Cardiac Rehabilitation Program, diabetes education, Chronic Pain Management Course, Youth Support, School Focussed Youth Service, Peninsula Drug and Alcohol Program (PenDAP), Pharmacotherapy, Optometry, Community Dental, Chronic Disease Self Management, Complex Care, GPs in Community Health project, Gamblers Help.
- Exercise programs for adults including water exercises, tai chi, strength training, walking groups, and chair based exercises.
- MENS - Men Exploring Non Violent Solutions program.
- Falls Prevention Program.
- Planned activity group for older frail socially isolated adults.
- Managing anxiety and panic attacks.
- Healthy food shopping trips.

For information about the Community Health Service’s achievements and operational performance, please see pages 18 – 19.

FAST FACTS

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<thead>
<tr>
<th></th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
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<tbody>
<tr>
<td>Outpatient occasions of service:</td>
<td>69,769</td>
<td>82,175</td>
<td>122,725</td>
</tr>
<tr>
<td>Number of staff:</td>
<td>170</td>
<td>199</td>
<td>285</td>
</tr>
<tr>
<td>Equivalent Full Time staff:</td>
<td>116</td>
<td>129</td>
<td>186</td>
</tr>
</tbody>
</table>

FRANKSTON HOSPITAL

Location: Hastings Road, Frankston.

Key Services and Facilities:

Emergency Department, Outpatients, Medical Imaging, Pathology, Coronary Care, Cardiac and Non-Cardiac Angiography, Cardiac Investigations, Intensive Care, Chemotherapy, Renal Dialysis, General and Specialty Medical, Acute Geriatric Services, Surgical Services, Hospital in the Home, Maternity and Paediatric Services, including a Special Care Nursery, Operating Theatres, and Endoscopy.

FAST FACTS

<table>
<thead>
<tr>
<th></th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of beds:</td>
<td>336</td>
<td>383*</td>
<td>381*</td>
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<tr>
<td>Separations:</td>
<td>48,120</td>
<td>49,046</td>
<td>48,939</td>
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<tr>
<td>Surgical Procedures:</td>
<td>9,253</td>
<td>11,226</td>
<td>10,001</td>
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<tr>
<td>Births:</td>
<td>2,383</td>
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<tr>
<td>Emergency Presentations:</td>
<td>50,518</td>
<td>50,332</td>
<td>49,386</td>
</tr>
<tr>
<td>Number of staff:</td>
<td>2,478</td>
<td>2,705</td>
<td>2,704</td>
</tr>
<tr>
<td>Equivalent Full Time staff:</td>
<td>1,511</td>
<td>1,614</td>
<td>1,613</td>
</tr>
</tbody>
</table>

* Includes same day beds

For information about Frankston Hospital’s achievements and operational performance, please see pages 22 – 23.

ROSEBUD HOSPITAL

Location: 1527 Point Nepean Road, Rosebud.

Key Services and Facilities:

Emergency Services, General Medicine, Surgery including Day-Case Surgery, Mother/Baby Services, Feeding and Sleep Difficulties Clinics, Mental Health Outpatients, Hospital in the Home (HITH), Renal Dialysis and Chemotherapy.

FAST FACTS

<table>
<thead>
<tr>
<th></th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of beds:</td>
<td>79</td>
<td>80</td>
<td>77</td>
</tr>
<tr>
<td>Separations:</td>
<td>12,322</td>
<td>12,797</td>
<td>13,572</td>
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<tr>
<td>Surgical Procedures:</td>
<td>962</td>
<td>811</td>
<td>1,042</td>
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<tr>
<td>Births:</td>
<td>2,557</td>
<td>21,027</td>
<td>21,074</td>
</tr>
<tr>
<td>Emergency Presentations:</td>
<td>343</td>
<td>259</td>
<td>259</td>
</tr>
<tr>
<td>Number of staff:</td>
<td>343</td>
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<td>259</td>
</tr>
<tr>
<td>Equivalent Full Time staff:</td>
<td>198</td>
<td>173</td>
<td>174</td>
</tr>
</tbody>
</table>

For information about Rosebud Hospital’s achievements and operational performance, please see pages 22 – 23.
MENTAL HEALTH SERVICES

Location: Frankston Hospital and community facilities across Frankston and the Mornington Peninsula.

Key Services and Facilities:
Adult and Aged services are provided across six sites and include Acute Assessment and Care in inpatient settings, Crisis Interventions, short-term or long-term treatment in Community Clinics and Residential Rehabilitation. All services are provided by a range of multidisciplinary teams.

<table>
<thead>
<tr>
<th>FAST FACTS</th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of beds:</td>
<td>64 (29 Adult, 15 Aged, 20 Community Care unit beds)</td>
<td>64 (29 Adult, 15 Aged, 20 Community Care unit beds)</td>
<td>64 (29 Adult, 15 Aged, 20 Community Care unit beds)</td>
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<tr>
<td>Community Contacts:</td>
<td>118,742</td>
<td>95,721</td>
<td>89,176</td>
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<tr>
<td>Occupied Bed Days:</td>
<td>14,373</td>
<td>14,029</td>
<td>13,268</td>
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<tr>
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<td>1,088</td>
<td>949</td>
</tr>
<tr>
<td>Number of staff:</td>
<td>290</td>
<td>300</td>
<td>300</td>
</tr>
<tr>
<td>Equivalent Full Time staff:</td>
<td>223</td>
<td>222</td>
<td>222</td>
</tr>
</tbody>
</table>

For information about Peninsula Mental Health Service’s achievements and operational performance, please see pages 34 – 35.

MEPACS

Location: Customer Response Centre, which services clients across Victoria, is based in Mt Eliza.

Key Services:
Emergency Alarm Monitoring, Daily Call Service.

<table>
<thead>
<tr>
<th>FAST FACTS</th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of clients:</td>
<td>13,150</td>
<td>13,464</td>
<td>21,578</td>
</tr>
<tr>
<td>Medical Emergency Follow Up In Less Than 2 Minutes:</td>
<td>96.65%</td>
<td>97.66%</td>
<td>98.23%</td>
</tr>
</tbody>
</table>

For information about MEPACS, please see page 39.

COMMUNITY & CONTINUING CARE SERVICES

Location: Frankston and the Mornington Peninsula.

Key Services and Facilities:
ACCESS (Consumer information and Provider referral service), Aged Care Assessment Service, Inpatient Geriatric Evaluation and Management, Residential Aged Care facilities including psychogeriatric care, Aids & Equipment Program, Personal Assistance Call Service, Residential Outreach Support Service (ROSS), Respite and Carer Support, Transition Care, Inpatient and Community Rehabilitation, Falls Prevention Service, Agestrong, Movement Disorder’s Clinic, Cognitive, Dementia and Memory Service (CDAMS), Continence Clinic.

<table>
<thead>
<tr>
<th>FAST FACTS</th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of beds:</td>
<td>317 (60 Nursing Home, 30 Transition Care, 90 Rehabilitation, 15 Palliative Care*, 60 Geriatric Evaluation &amp; Management, 62 Hostel Beds)</td>
<td>297 (60 Nursing Home, 30 Transition Care, 90 Rehabilitation, 60 Geriatric Evaluation &amp; Management, 50 Hostel Beds)</td>
<td>285 (60 Nursing Home, 37 Transition Care, 90 Rehabilitation, 60 Geriatric Evaluation &amp; Management, 38 Hostel Beds)</td>
</tr>
<tr>
<td>Outpatient occasions of service:</td>
<td>41,689</td>
<td>38,519</td>
<td>37,989</td>
</tr>
<tr>
<td>Total Bed Days:</td>
<td>103,025</td>
<td>116,782</td>
<td>103,833</td>
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<tr>
<td>Separations:</td>
<td>3,797</td>
<td>3,437</td>
<td>3,529</td>
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<tr>
<td>Number of staff:</td>
<td>920</td>
<td>830</td>
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<tr>
<td>Equivalent Full Time staff:</td>
<td>613</td>
<td>621</td>
<td>622</td>
</tr>
</tbody>
</table>

For information about MEPACS, please see page 39.
A number of ongoing development projects will enable Peninsula Health to expand service in areas including maternity, emergency, surgical, mental health and community health.

**OBJECTIVE**

- Plan, manage and enhance physical infrastructure.

**OPERATIONAL PERFORMANCE**

**Building a Better Hospital**

Frankston Hospital became a hub of building activity during the year.

A number of capital works projects commenced including work to expand and refurbish the Emergency Department, construction of a new isolation room, and a new dedicated Elective Surgery facility.

In addition, major construction work commenced on the $45m expansion to Frankston Hospital. An area of over 6,000m² will be developed and refurbished as part of the expansion.

This development includes two new surgical theatres, a purpose built theatre for endoscopy and day surgery, and the refurbishment of four existing theatres. It will also provide a new centralised 33-bed and seven chair recovery suite, an expanded 13-bed Intensive Care Unit, and new areas for Endoscopy, Day Surgery theatres and Cardiac Angiography. All will open in 2010.

Minister for Health, The Hon. Daniel Andrews visited the Hospital to view progress and took the opportunity to thank the project team, both hospital staff members and construction workers, for their efforts in transforming the Hospital.

Significant events in the 2008/09 financial year include:

- The temporary relocation of the 10-bed Intensive Care Unit and a 10-bed Short Stay Unit to a refurbished ward of the Hospital.
- The refurbishment of the Central Sterilising Supply Department (CSSD), which sterilises all the Hospital’s surgical equipment.
- The refurbishment of the Digital Subtraction Angiography (DSA) room in Radiology to provide a temporary Hybrid DSA/Cardiac Catheter facility. This shared facility supports all Cardiac Catheter and Peripheral Angiographic procedures until the new cardiac angiography suite is completed.
- The completion of work to refurbish Radiology’s Treatment area to create a Fluoroscopy room.
- The relocation of the Hospital’s Recovery Ward to a refurbished area; and
- The relocation of both the Pharmacy and Health Information Services Departments to new permanent areas within the Hospital.

Major construction work will continue into the rest of 2009 and 2010. Significant milestones will include the opening of the new theatres early in 2010 and the completion of the overall project late in 2010.

**Frankston Hospital Maternity Expansion**

A plan has been developed to expand Frankston Hospital’s Maternity Ward. The $8m expansion will help to meet demand for future birthing services.

Currently, there are 21 maternity beds and eight birthing suites. When the expansion is completed, there will be a total of 28 maternity beds and nine birthing suites.

The Special Care Nursery, where the sickest babies are cared for, can currently accommodate 13 cots.
This will be expanded to 15 cots as part of the enhanced facility. Early works are scheduled to commence in September 2009. Both projects are scheduled to be completed by late 2011.

**Hastings Community Health**

Construction of the new facility for Hastings Community Health is close to completion and is scheduled to open in September 2009.

Two thirds of the $15.8m building will be devoted to Peninsula Health’s community health services, with the remaining space being used by the Mornington Peninsula Shire Council and a number of community organisations.

Services will include Dental, Physiotherapy, Speech Pathology, Dietetics, Diabetes Education, Podiatry and Children’s, Women’s and Family Services.

**Rosebud Community Health**

Peninsula Health welcomed $3.1m in funding by the State Government for interim accommodation for Community Health services at Rosebud, which will be located at the rear of Rosebud Hospital.

This new community health facility at Rosebud will offer a wide range of direct care and group programs from one central location.

**Emergency Department Development**

Frankston Hospital’s Emergency Department is being refurbished.

A new four-bed paediatric area and a new paediatric waiting area, which separates young patients from the general public, has been completed.

The total project in the Frankston Hospital Emergency Department is scheduled to be completed by the end of 2009.

**Emergency Department Isolation Room**

A $400,000 superior negative pressure isolation room has been built as an extension to the Frankston Hospital Emergency Department.

This room, which includes one bed, is designed to isolate patients who are suspected of having an infectious disease or have been exposed to dangerous chemicals.

Work on the new isolation room was completed in August 2009.

**New Elective Surgery Facility**

Extra beds for elective surgery will soon be available at Frankston Hospital.

With $3m Commonwealth Government funding, the new facility will include 13-beds and two chairs. Construction of the new facility is due for completion by December 2009.

**FUTURE DIRECTIONS**

› Completion of Frankston Hospital Stage 2A expansion project by late 2010.

› Frankston Hospital’s 2West Ward, an adult acute mental health inpatient unit, will be refurbished after receiving funding of $1.64m from the Department of Human Services during the year. The funding will significantly improve the therapeutic environment of the Acute Management Area on 2West, where the most acutely ill patients are treated, and the bed capacity of this unit will double from three to six.
Older Drug Users Program

Peninsula Health has employed Australia’s first Older Adults’ Alcohol and Drug Treatment Clinician to develop treatment programs for the growing number of people aged 55 and over battling addictions.

Research shows alcohol abuse is a major issue amongst older people, and the rates of illicit drug and prescription misuse are set to rise.
As part of the pilot initiative, Peninsula Health has appointed experienced drug and alcohol clinician Katherine Walsh to investigate and develop older adult drug treatment programs.

“There are many reasons why older adults don’t seek treatment for alcohol and drug addictions. These barriers may include cultural beliefs, isolation, stigma, shame and denial. Concurring mental and physical health conditions also tend to mask or mimic symptoms of alcohol or drug misuse,” Katherine said.

“The aim is to develop appropriate services that cater specifically for the needs of older people, and bring about lasting change.”

Peninsula Health’s Director of Complex Care Services Simon Ruth initiated the new position after examining successful treatment programs in the United States and Canada geared specifically to older people.

Simon was awarded a $30,000 Victorian Travelling Fellowship from the Victorian Quality Council in 2007. The main objective of the Fellowship is to increase innovation and improve patient care.

“With around 30 per cent of the local population aged 55 and over, Peninsula Health serves one of the highest populations of older people in the State. Until now there have been no treatment programs anywhere in Australia structured to assist the hidden population of older users,” Simon said.

“The issue will continue to escalate as the ageing population grows and ageing baby boomers present with other drug issues. Establishing effective, local and tailored treatment options with appropriately trained counsellors is the first step in addressing the issue amongst older users and in improving outcomes.”

The first steps of the program have involved establishing clinical guidelines, raising awareness of the new program, networking and liaising with other service providers, and conducting training sessions to improve staff skills in treating older people with drug and alcohol addictions.

At the end of the 2008/09 financial year the program had begun accepting clients.

“The aim is to... bring about lasting change.”
PROFILe

Peninsula Health provides integrated community health services from four locations – Frankston, Mornington, Hastings and Rosebud. Health promotion, disease prevention, early intervention, chronic disease management, allied health treatments, drug and alcohol services and a broad range of health education and exercise programs are provided for all ages.

OBJECTIVES

› Provide a range of services to meet client and community needs that produce measurable benefits.
› Provide leadership in area-based planning and delivery of health promotion strategies and programs.

OPERATIONAL PERFORMANCE

Care in your Community

Peninsula Health, in partnership with a number of agencies, has implemented the Care in Your Community (CiYC) policy. Although not specifically funded by the Department of Human Services, Peninsula Health’s Primary Care and Population Health Committee sponsored this project. The CiYC initiative is a partnership between eight local organisations, namely Frankston - Mornington Peninsula Primary Care Partnership, Frankston City Council, Peninsula Support Services, Peninsula GP Network, Peninsula Health, Peninsula Hospice Service, Royal District Nursing Service and Mornington Peninsula Shire Council. The partnership’s vision was to deliver health care that responded to the needs of the people.

The project has entered the implementation phase, with a focus on health promotion and early intervention, chronic and complex disease management and urgent and episodic care.

Further details of the outcomes from the implementation of the collaborative action plan will be detailed in next year’s annual report.

Strengthening the capacity of individuals, families and communities through effective prevention and health promotion

In the 2008/09 financial year, Peninsula Health’s early intervention health promotion strategies included:

› The establishment of 14 new community kitchens, a Peninsula Health initiative that has resulted in over 100 kitchens throughout Victoria;
› Being a lead agency in the Family Violence Prevention Forum that attracted 180 service providers;
› Running an Ageing Well Expo (for further information, see page 39);
› Partnering with the Frankston City Council to explore the issues regarding food security in the ‘Food in Frankston’ forum;
› Assisting with the establishment of Men’s Sheds in Frankston North and the Westernport area; and
› Physical activity programs including a broad range of exercise programs and walking groups across the Peninsula.

Connecting with our Indigenous Community

Evidence suggests that Aboriginal and Torres Strait Islanders are often reluctant to use main-stream health care services due to language and cultural barriers. Peninsula Health has developed strategies to improve the health care of the 1500 strong local Indigenous community and their participation in local health services.

Client assessments and referrals for Aboriginal & Torres Strait Islanders (ATSI) have dramatically increased from 299 to 374 in the past 12 months with measurable increases in the use of allied health services and family support services.
Improving health and wellbeing for disadvantaged people and communities

The Mobile Integrated (MI) Health Team is a community health team that works across the Peninsula Health catchment to deliver innovative case management to marginalised people. It focuses on those who are homeless or at risk of homelessness and are unable to engage with other services because of their challenging behaviours and complex needs.

Examples of MI Health’s service innovations include:
› A podiatry clinic for clients from local ‘pension-only’ Supported Residential Services. Other services including physiotherapy, dietetic assessment, psychological assistance are also provided.
› A GP outreach clinic in ‘pension-only’ Supported Residential Services, assisted by a MI Health nurse who provides nursing support, for clients who have multiple chronic health issues and do not access mainstream GPs.

Planned Activity Group

The Planned Activity Group is a Peninsula based support service that caters for socially isolated older adults and dementia and acquired brain injury clients. It provides respite for carers and skill retention and development for the clients. During the year, 70 clients attended needs-specific groups.

FUTURE DIRECTIONS
› Continue to expand early intervention health promotion strategies and health self management programs.
› Service planning with support of external expertise to review community health priorities and service needs as well as development of best models of service delivery for the Frankston and Mornington Peninsula areas.
› Restructure the Community Health Service to best meet the revised service priorities.
PACS Goes Live

X-rays and scans have been replaced with instantly available digital images presented on TV monitors thanks to a new Picture Archiving and Communications System, PACS.
PACS means that no time is wasted waiting for films to be taken, processed and reported before the images can be viewed in the ward. There is no searching for lost films anymore. For patients this means less time waiting for results and faster patient treatment response and discharge times.

PACS enables the speedy access to Radiology images at multiple sites simultaneously with superior resolution and contrast of these images.

These digital images are now available at the patient’s bedside, in operating theatres and in the consulting room. They are now more accessible than ever before and can be viewed more quickly.

Frankston Hospital’s ICU was the first ward to go-live with PACS in September 2008. Screens have been installed in all theatre areas at Frankston Hospital, Rosebud Hospital, Day Surgery, Endoscopy, and in the Resuscitation areas of the Emergency Departments.

Peninsula Health is one of nine healthcare providers to take part in the state-wide PACS project.

“...this means less time waiting for results and faster patient treatment response and discharge times.”

Clinical Director of Surgery, Mr Bob Spychal.
PROFIlE
Hospital acute services are provided from Frankston and Rosebud Hospitals. With the demand for acute services growing, Peninsula Health is implementing strategies to expand key medical services.

OBJECTIVES
- Provide quality health care services, based on evidence based practice.
- Expand hospital capacity, including maternity services and other essential services.
- Develop plans to meet emerging demands within available resources and infrastructure, focusing on service gaps and alternative models of care.

OPERATIONAL PERFORMANCE

Frankston Hospital
Frankston Hospital is a 381-bed hospital, and is the major provider of acute secondary and tertiary hospital services in Frankston and on the Mornington Peninsula. In 2008/09, Frankston Hospital treated 48,939 inpatients, which is a slight decrease from the previous financial year.

<table>
<thead>
<tr>
<th>Admissions</th>
<th>2004/05</th>
<th>2005/06</th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>47,063</td>
<td>48,190</td>
<td>48,120</td>
<td>49,046</td>
<td>48,939</td>
</tr>
</tbody>
</table>

Rosebud Hospital
Rosebud Hospital is a 77-bed hospital providing treatment and care for both admitted patients and outpatients. During the year, Rosebud Hospital treated 13,572 inpatients, an increase of 6.2 per cent from the previous financial year.

<table>
<thead>
<tr>
<th>Admissions</th>
<th>2004/05</th>
<th>2005/06</th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>10,964</td>
<td>10,720</td>
<td>12,322</td>
<td>12,782</td>
<td>13,572</td>
</tr>
</tbody>
</table>

Services and programs were enhanced and expanded at both hospitals during the year.

The year’s highlights include:

Pharmacy Initiated E-Script Transcription Service
The unique Pharmacist-initiated E-script Transcription Service (PETS) continues to improve the quality and timeliness with which discharge medications are organised. PETS supports junior doctors to improve their transcribing skills. In 2008/09, PETS became a daily service offered by the Pharmacy Department.

Three pharmacists rotate in the role as PETS pharmacist and work with junior doctors to help prepare medication discharge lists, including any medication prescribed. This allows the pharmacist to review medications, in case something may have been missed, and to generate an electronic prescription which is also sent to the patient’s GP. This saves time spent on lengthy paperwork and educates new doctors about appropriate drug therapy and the Pharmaceutical Benefits Scheme.

This initiative received the Silver Award in the 2008 Victorian Public Healthcare Awards for Excellence in Safety and Care.

Acute Care of the Elderly Unit
A 15-bed Acute Care of the Elderly (ACE) Unit was opened in September 2008 on Ward 5GN of Frankston Hospital. The Unit, led by Dr Ben Franks, Head of Acute Aged Care Medicine, aims to provide best practice integrated care for frail aged patients admitted to Frankston Hospital. The care includes comprehensive allied health management and initiatives to minimise the loss of mental and physical capability. Between its opening, until the end of June 2009, 353 people were admitted to the Unit.
Victorian Infant Hearing Screening Program

Since the launch of the Victorian Infant Hearing Screening Program (VIHSP) at the two Peninsula Health Hospitals last December, 1,243 babies have had their hearing screened and none were identified with the risk of hearing loss.

The Victorian Infant Hearing Screening Program is a DHS funded initiative coordinated by the Royal Children’s Hospital with screening services set up across a number of metropolitan maternity hospitals. The program aims to identify babies at risk of hearing loss so that they can benefit from early diagnosis and intervention.

Evidence shows early intervention is integral to treating hearing loss in young children.

Rosebud Hospital Day Treatment Centre

The Day Treatment Centre, which previously only provided chemotherapy, now offers an increased range of day treatment services, including blood transfusions, intravenous antibiotics and complex dressings.

A dedicated Day Treatment Centre has been established and the Dialysis Unit has tripled its capacity allowing an extra 24 patients to receive treatment each week.

Emergency Planning

Emergency planning processes are in place to identify potential risks/scenarios and develop procedures to manage these situations. Emergency planning extends to a number of possible scenarios including disaster management, mass pandemics and event planning.

In January 2009, senior Peninsula Health staff worked with the organisers of the Solar Music Festival in Mornington in preparation for possible admissions to Frankston ED. The planning included additional staff and a special control team to manage the situation. Fortunately the event passed without any major incident.

Peninsula Health was also prepared for the H1N1 influenza [Swine Flu] pandemic. Victoria experienced quite a number of cases, which led to a dramatic increase in ED presentations by people who were concerned about contracting the virus. Steps were put in place to manage the large number of patients and slow the spread of the virus on the Peninsula. Planning included the opening of dedicated flu clinics, but this was not found to be necessary.

FUTURE DIRECTIONS

- Implement the Redesigning Hospital Care Program, an initiative which looks at enhancing the patient experience and improving staff workflow by removing unnecessary and repetitive steps in care processes. The first phase of the program has commenced in Frankston Hospital’s Emergency Department.

- The Health Service continues to develop intake and referral systems that will make it easy to get the right care at the right place and at the right time.
Stephen’s Story

Stephen Delaney is a true battler. The 78 year old retiree from Balnarring has been through one of the toughest times of his life, having undergone major surgery and treatment for bladder cancer.
After undergoing numerous examinations and testing, and one attempt to remove the cancer from his bladder, Stephen was faced with the news earlier in the year that his cancer had become too aggressive and had started to spread.

“The best choice for me at that stage was to undergo the surgery to remove both my bladder and prostate,” said Stephen.

After pulling through his operation, which meant spending some time in Frankston Hospital, Stephen faced another major hurdle, having to undergo chemotherapy treatment at Frankston’s Day Treatment Centre.

After completing his treatment, Stephen was delighted to hear that he had been “given the all clear for at least three to four months.”

According to Stephen, the quality of care and treatment from the team of people who looked after him made all the difference.

“I never felt like I was being treated as just a number,” Stephen says. “Absolutely everyone who treated me was perfect.”

Stephen was cared for by a multi-disciplinary team, including a Urologist, an Oncologist, a Radiation Oncologist, as well as the nurses on the ward, and staff from the Frankston Day Treatment Centre and the Stomal Therapy Department.

“Every time I’d see anyone who was caring for me they would always come and say hello, they would come shake my hand, and ask how everything was going, which I thought was very important and showed how everyone was just so concerned.”

Stephen highlighted how personable the staff were, “It’s remarkable how they remember little things that you say, even months after.”

“When I went into my chemo sessions, it was like going into another world. Sometimes I’d go in a bit tired, but within five minutes you’d feel better because of the staff members who would have a bit of a joke with you.”

“I could not have asked for anything more,” said Stephen. “I feel like I live in the luckiest country in the world to get the type of treatment that I did.”

“Absolutely everyone who treated me was perfect.”
PROFILE
As the population on the Peninsula increases, so does the demand for elective (planned) and emergency surgery. Our community's higher than average population of people over 65 requires more surgical services in areas like Urology and Orthopaedics. All these factors have an effect on how long patients wait, especially for planned elective surgery. Our range of surgical procedures are being continuously increased to treat an ever expanding range of conditions.

OBJECTIVES
- Implement key strategies to reduce waiting times for elective surgery patients.
- Improve timelines for procedures and reduce length of stay.
- Improve emergency surgery access.
- Reduce the number of Hospital Initiated Postponements.

OPERATIONAL PERFORMANCE
Peninsula Health has a dedicated Surgical and Anaesthesia Service. Services are delivered at Frankston Hospital, in the Main Theatre, Day Surgery Unit and Radiology Digital Subtraction Angiography Unit, and at Rosebud Hospital.

The specialist surgical services provided are General Surgery, Orthopaedics, Plastics, Vascular, Paediatric Surgery, Gynaecology & Obstetrics, Cardiothoracic, Ear Nose & Throat (ENT)/FacioMaxillary, and Urology.

Specialist anaesthetic services include Acute Pain Management Services, General Anaesthesia, Paediatric Anaesthesia, Obstetric Anaesthesia and Pre-admission Clinics.

In the 2008/09 financial year, 11,043 surgical procedures were performed. This included 5,987 procedures in elective surgery.

DEPARTMENTAL INITIATIVES
Meeting Demand
To assist in better managing the elective and emergency demand, Peninsula Health has commenced additional emergency operating lists on weekends and delivered additional weekday operating sessions in 2008/09. To complement the building of new operating theatres, a new model of care is being designed that will further assist the Health Service to deliver more timely treatment to patients and reduce the number of postponements.

One of the many initiatives implemented throughout 2008/09 was an increased focus on Urology Services. The appointment of additional staff surgeons and a Urology Liaison Nurse assisted Peninsula Health to deliver more Urology services in a more timely manner. The number of patients waiting over the recommended time in Urology improved from 276 in July 2008 to 67 in June 2009. Following the commencement of additional staff surgeons in General Surgery, the number of patients waiting over the recommended time has reduced from 167 in July 08 to 118 in June 09.

The commencement of an expanded Transrectal Ultrasound Guided Biopsy service at Rosebud Hospital is another quality initiative within the Urology service.
Elective Surgery Access Service

Elective Surgery Access Service gives people the opportunity to have their procedures performed earlier at other hospitals. This service was initiated by the State Government seven years ago.

This year the ESAS service has resulted in:

› 16 patients having surgery at St Vincent’s
› 150 patients having surgery at The Alfred
› 26 patients having surgery at the Eye and Ear Hospital.

Peninsula Health has also participated in two Private Hospital Initiatives which saw 177 patients treated in a more timely manner.

Victorian Elective Surgery Initiative Project

For the past year, and consistent with the Commonwealth Government’s elective surgery initiative, waiting times for elective surgery patients have improved.

In Victoria’s public hospitals, specialists assess the clinical urgency of their patient’s condition and categorise it as one of three levels: Category 1 (admission within 30 days), Category 2 (90 days) and Category 3 (265 days).

During the year, all Category 1 patients were always treated within the required 30 day time frame, and the following improvements have occurred in the other categories:

› The average waiting time for Category 2 patients has improved from 169 days in 2007/08 to 127 days in 2008/09.
› Average waiting time for Category 3 patients has improved from 221 days in 2007/08 to 208 days in 2008/09.

Please see the elective surgery waiting times graph on page 6.

Restructure of Department of Surgery

The Surgical Services team is led by the Clinical Director of Surgery, Mr Bob Spychal, and the Director of Anaesthesia, Dr John Copland.

To enhance the services in the Department of Surgery, two appointments were announced during the year focusing on the clinical, research and teaching aspects of surgery.

Mr Ian Young has been appointed as Deputy Clinical Director Surgery - Clinical Services, and Mr David Hunter-Smith was appointed as Deputy Clinical Director of Surgery - Research and Training to further enhance research and training in this service area.

FUTURE DIRECTIONS

› Open two additional surgical theatres, as part of the Frankston Stage 2A redevelopment project, to further reduce the waiting times for Category 2 and 3 patients waiting for elective surgery and improve access for emergency procedures. The new theatres are scheduled to open in mid 2010.
› With the development of the new operating theatres, a new model of care is being planned that will further assist Peninsula Health to deliver more timely treatment to patients and reduce the number of Hospital Initiated Postponements.
› The refurbishment of a dedicated 13-bed elective surgery unit is underway. It is anticipated these beds will be available for use by early 2010.
Susan’s Second Chance

Emergency nurse, Susan Hughes can thank her colleagues from Frankston Hospital’s Emergency Department for giving her a second chance at life.
In May 2009, Susan suddenly became the patient she was used to caring for. She was rushed from her home to the Emergency Department suffering pain in her left arm from a suspected heart attack.

Her already serious condition became worse when she collapsed at Frankston Hospital. Her heart stopped altogether and she went into cardiac arrest.

The emergency team acted quickly to bring Susan back to life. With their tireless work and effort, she pulled through her near-death experience.

“I’m told now that they worked to resuscitate me for about 33 minutes,” Susan explains. “This is how long it took to get my heart back to a normal rhythm.”

“This is a very long time, definitely long enough for them to have serious concerns about me suffering from brain damage.”

“I know how incredibly hard they would have worked on me to resuscitate me, especially having been on the other side and working as a nurse in this kind of scenario myself.”

“The fact that they wouldn’t give up means the world to me,” Susan said. “I can’t even begin to thank them for what they did for me.”

Susan also spent some time being cared for and treated by the Hospital’s Intensive Care, Coronary Care and Angiography Units.

“It’s been an incredibly tough experience, but I’m so grateful that I was cared for by so many familiar faces.”

Following her ordeal, Susan is now taking part in the Cardiac Rehabilitation Program, based at the Frankston Integrated Health Centre.

“This has been a big wake up call for me. I have had to make a few changes in my life, especially in terms of getting fitter and healthier, and making changes to my diet,” Susan said.

Now on the road to recovery, she looks forward to returning to work at Frankston in a part-time capacity, where she can work side-by-side again, not only with her friends and colleagues, but with those who saved her life.

“The fact that they wouldn’t give up means the world to me.”

Susan Hughes with Dr Mohan Kamalanathan and emergency nurse, Nicole Lowrie.
Other key improvements during the 2008/09 financial year include:

- The introduction of the Waiting Room Nurse to Frankston Hospital ED has resulted in all patients being reviewed, according to triage assessment, while waiting to see an ED Doctor. This allows the nurse to initiate investigations and give symptomatic relief, enabling where appropriate, the ‘fast tracking’ of patients into the ED, and providing ongoing assessment and reassurance for patients as they wait.

- The development of an eight bed Clinical Decision Making Unit (CDMU), adjacent to the ED, to provide a ward environment away from the busy atmosphere of the ED. The CDMU is used for short term patients, non-admitted (fast track) patients and ED patients waiting for pathology and or radiology results to enable a final diagnosis to be made.

**Frankston Hospital Emergency Department**

**Frankston ED - Number of Presentations**

<table>
<thead>
<tr>
<th>Year</th>
<th>2004/05</th>
<th>2005/06</th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>46,794</td>
<td>49,330</td>
<td>50,518</td>
<td>50,332</td>
<td>49,386</td>
</tr>
</tbody>
</table>

Frankston Hospital has one of the busiest emergency departments in the State. In 2008/09, 49,386 patients presented to the Emergency Department, a decrease of 1.9 per cent, from the previous financial year.

A review of the ED in 2008 resulted in a redesign of the department to improve patient flow and assist with decreasing waiting times. The new design includes:

- Creation of a dedicated children’s area;
- Improvements to staff facilities and training areas;
- The building of an isolation room; and
- Increasing treatment spaces in the procedure room from three to nine.

**Rosebud Hospital Emergency Department**

**Rosebud ED - Number of Presentations**

<table>
<thead>
<tr>
<th>Year</th>
<th>2004/05</th>
<th>2005/06</th>
<th>2006/07</th>
<th>2007/08</th>
<th>2008/09</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>18,451</td>
<td>20,551</td>
<td>20,557</td>
<td>21,027</td>
<td>21,074</td>
</tr>
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There were 21,072 presentations to the Rosebud Hospital ED, in the 2008/09 financial year. This is an increase of 47 patients from the previous financial year.

During the summer months, Rosebud ED experiences a dramatic increase in presentations due to the influx of holiday-makers on the Southern Peninsula. Staff treat up to 130 patients per day, double the number they may treat during the rest of the year.

Owing to the increase in demand, a Fast Track Clinic was established in the Recovery Room area. This has proved extremely successful and is being utilised during the busy holiday periods.
Frankston Emergency - Clinical Response Service

A trial Clinical Response Service (CRS) was established during the 2008 winter months to reduce ED presentations by treating elderly people in their own homes or at their respective nursing homes.

The CRS incorporated the work of the Response Assessment Discharge (RAD) team, which provides multi-disciplinary triage and assessment when a patient presents to the Frankston ED (see page 42). It also incorporated the work of the Residential Outreach Support Service (ROSS) team, a dynamic multi-disciplinary service that aims to support residents in high and low level care facilities (see page 42).

Staffed 24 hours a day, 7 days per week, by a multi-disciplinary team consisting of doctors, nurses and allied health staff, the service responded to referrals from local GPs, aged care facilities and ambulance services.

The CRS aims to meet the clinical needs of patients in the community who would otherwise present and require care in the Emergency Department. The winter months, which are the time of highest risk for elderly people, are the busiest time of the year for Frankston Hospital’s Emergency Department.

During the three month program, a total of 277 community referrals were received by CRS, 61 per cent of which were received by Ambulance Victoria. Of these, 200 patients resided independently in the community and 77 were Residential Care facility residents.

Of the patients requiring the CRS, 191 patients, or 80 per cent, were seen within two hours of referral and 69 per cent were seen in their own homes.

The Clinical Response Service was funded under the DHS Winter Demand Strategy. The trial proved very successful and has resulted in ongoing funding from DHS. Additional resources will allow the RAD and ROSS teams to offer an extended weekend and after hours service (see page 42).

Frankston Hospital’s Intensive Care Unit

Frankston Hospital’s entire Intensive Care Unit (ICU) was relocated to a temporary area to make way for work to begin on the new Stage 2A redevelopment, which includes new Operating Theatres and a new expanded 13 bed Intensive Care Unit.

Relocating a fully functional Intensive Care Unit was an enormous feat. Ten of our most vulnerable high-need patients and a vast array of monitoring equipment were moved with utmost care in one day.

This was the first time in the hospital’s history that a move of this scale and complexity had been undertaken.

Frankston Hospital’s ICU team is highly trained and experienced to respond to a wide range of emergency situations, and the ICU continued to accept all critical cases throughout this major relocation.

FUTURE DIRECTIONS

› Continue to implement strategies to manage the increase in patient presentations during the winter months.

› Implement strategies to improve Emergency Department performance to meet both internal and DHS targets for the timely treatment of patients in the ED and their discharge or transfer to other wards and programs.

› Relocate the Intensive Care Unit to a new expanded 13-bed Unit, as part of the $45m Frankston Hospital expansion project, which is scheduled to be completed by late 2010.
2WEST Team Wins Outstanding Achievement Award

Jeremy Fenton, Matthew Baynes, Natasha Sellers and Ingrid Debeer are part of the Mental Health Service’s award-winning Acute Adult Inpatient team
The Acute Adult Inpatient team, from Frankston Hospital’s 2West ward, received the award for Outstanding Achievement by a team in Mental Healthcare in the 2008 Victorian Public Healthcare Awards.

“The award recognises the team’s remarkable performance in reducing episodes of seclusion and restraint from more than 500 in 2005 to 66 in 2008 and 18 so far in 2009,” explains Fiona Reed, 2West’s Nurse Unit Manager.

“As a result, the unit has the lowest rate of seclusion in Victoria, with a continued downward trend,” Fiona said.

“Seclusion is a legal practice that involves the confinement of a person alone in a safe, low-stimulus room, the exit of which cannot be opened by the person from the inside.”

“The decision to use seclusion is taken after other, less restrictive, options have been excluded. While seclusion can provide safety and containment for the person involved, it can also be a source of distress for patients, family members, friends and visitors.”

Through changes in culture, education, leadership, use of data and engagement with consumers, the service has implemented alternative strategies to significantly reduce the rate of seclusion.

Sensory activities, comfort rooms and sensory modulation training have led to new ways of managing agitation and distress.

Improvements have significantly reduced the number of patients placed in seclusion at Peninsula Health. The numbers decreased from 16.44 per cent of mental health admissions in 2005/06 to a rate of 2.8 per cent, compared to the nation wide benchmark of 10 per cent.

The Acute Adult Inpatient Unit staff group provides nursing, medical and allied health services to people with a serious mental illness. The 29-bed acute mental health unit, which opened in 1991, provides assessment, diagnosis, treatment and therapeutic interventions for people having an acute mental health crisis, who are at risk of harm to self or others.

“The unit has the lowest rate of seclusion in Victoria.”
PROFILE

The Peninsula Health Mental Health Service (PHMHS) provides a range of community focused mental health services within Frankston and the Mornington Peninsula. The Service aims to provide therapeutic interventions that produce the best outcomes for its patients.

OBJECTIVES

› Deliver treatments to patients that produce measurable benefit.
› Develop and implement a long term service plan to meet future needs.

OPERATIONAL PERFORMANCE

Mental Health Model of Care

Significant changes have been made to the model of care in the Community Mental Health Service. Originally, the community service was provided via role-specific teams, with each team focusing only on its specific role. Following a six-sigma quality process, labelled ‘Breakthroughs in Mental Health Care’, the role-specific teams were converted into four geographically located teams, with each team providing all the community roles and services for a particular geographic location.

Performance Indicators

Recent benchmarked data demonstrates that the Service performs well above the average in the 12 performance indicators with its readmission and seclusion rates (8 per cent and 2.8 per cent respectively) being the lowest in the state.

The waiting time for mental health patients for admission to the inpatient unit from the Emergency Department is closely monitored. During the year, 83 per cent were transferred to a mental health bed within eight hours, against a KPI of 80 per cent and a State average of 61 per cent.

In addition to the 2008 Victorian Public Healthcare Award for its work in reducing seclusion episodes, the Service also received the Australian & New Zealand Mental Health Service Award in 2008. This recognised the Service’s innovative achievement in transforming the inpatient environment and culture, significantly reducing the rate of seclusion and improving safety for all staff and consumers.

‘Core Care Bundle’ – Implementing Best Practice in Community Mental Health

To facilitate consumer-driven, evidence-based, focussed interventions, the Service constructed and implemented a therapeutic package known as the ‘Core Care Bundle’.

The Core Care Bundle incorporates six booklets that focus on recovery, managing medication, addressing drug and alcohol issues, coping with stress, improving healthy lifestyles and education for carers.

The feedback forms filled in by consumers using the booklets with their clinicians has been consistently positive. Ninety per cent reported that working through the content of the workbook was useful, with feedback such as:

“It helped me analyse what had happened to me and what I could do to prevent it from re-occurring”

“Thank you, I have been in the service for five years and it is the first time someone has asked me to tell my story”
Gender Sensitive Practices

The Mental Health Service is focussing on the need for gender sensitive practices.

A project team has led service changes that meet the 10 recommendations of the Victorian Women’s and Mental Health Network. Examples of service initiatives as a result of the project include:

- Access to female contact nurse at all times;
- Gender specific group programs;
- Client orientation questionaries including gender sensitivity; and
- Development of women only lounge and comfort room.

Mental Health Service Plan

The Mental Health Service Plan for the Mornington Peninsula 2008-2018 was funded by the Department of Human Services and completed in 2008 with input from all stakeholders including the Peninsula GP Network, Peninsula Headspace, Mental Health Services, Community Health Services and Psychiatric Disability Rehabilitation and Support Services agencies.

Further work on its implementation was reviewed as the State Government’s Mental Health Reform Strategy was announced during the year.

Prevention and Recovery Care Program

The Department of Human Services is planning to build a 10 bed Prevention and Recovery Care (PARC) facility in Frankston.

It is designed for people currently living in the community who have recently recovered from a bout of mental illness or who may be at risk of developing one without the right kind of support.

The new facility will be managed by the Mental Illness Fellowship, and clinical support will be provided by Peninsula Health.

Peninsula Health has also been chosen as one of only two pilot sites in Victoria for the development of an eight bed Youth PARC facility, which will be located in Frankston.

FUTURE DIRECTIONS

- The Psychiatric Disability and Rehabilitation Support Service Alliance has received ongoing funding from DHS to further enhance the collaborative work of these agencies.
- PHMHS has received DHS funding for the refurbishment of the Adult Acute Inpatient Unit Acute Management Area to improve the environment and safety for consumers and staff.
Granting Wishes at Carinya

Seventy-four year old Carinya resident Grace Treverton had a simple wish, she wanted to go to the movie theatre. Thanks to the new Carinya Make A Wish Program – her wish came true.
“She longed to go to the movies, because she hadn’t been since she was a little girl,” explains Diversional Therapist Marion Sparrow. “Through the ‘make a wish’ program, she went to watch Mamma Mia and she just had a wonderful experience.”

Carinya residents often wish they could see or do things they used to do before entering the Unit, which is why the program was developed.

The program is available to most residents of Carinya Residential Aged Care Unit, many of whom suffer from dementia.

“We’ve already granted a number of wishes, some of which have even been integrated into the resident’s regular program,” said Marion.

“Wishes we have granted have included trips to the movies, attending football matches and visiting family and friends.”

“Granting the wishes is the most rewarding experience. It really puts a smile on their faces, and even though just an hour later they may have forgotten they have had that experience – it’s the moment when they are experiencing it that really counts,” she said.

The program is funded by the Friends of Carinya Auxiliary, which consists of 10 members, many of whom volunteer at the Unit. The oldest member is 98 years old, a woman whose husband was also a Carinya resident.

President Jan Graham says that the focus of the group is to enhance the lives of residents.

“We’re dedicated to ensuring we meet the needs and enhance the comfort of all the residents. Some of the residents may never leave the Unit, so just taking them out for a meal can be very meaningful,” said Jan.

“Granting the wishes is the most rewarding experience.”
**PROFILE**

The Health Service continuously strives to deliver quality aged care services for close to 53,000 people aged 60 and over who are living on the Peninsula – a number which continues to rise.

A range of aged care services are offered, including centre and home based services, respite and carer assistance services. Low and high residential care is also provided.

**OBJECTIVE**

› Actively work with other community providers so that older people experience an integrated and effective transition from our care settings to the broader community.

**OPERATIONAL PERFORMANCE**

**ACSA Accreditations**

Peninsula Health aged care services in Frankston, Seaford, Rosebud and Mornington all achieved accreditation during the year by the Aged Care Standards Accreditation Agency.

During the year, the Michael Court Residential Aged Care Unit, a specialist aged persons mental health unit, was found fully compliant during its accreditation survey in May 2009.

During a two day site audit, Michael Court was found to be fully compliant in all 44 assessment areas.

The Assessors said Michael Court was a benchmark for other residential care facilities. They also mentioned that families felt they were very fortunate to have their relatives in care at Michael Court.

**Rosebud Residential Aged Care Services**

The Jean Turner and Lotus Lodge services have combined into one 50-bed facility known as Rosebud Residential Aged Care Services.

Applications for Better Practice awards have been submitted to the Aged Care Standards and Accreditation Agency (ACSA) for the Oral Health Risk Scale & Assessment project, and for a Palliative Care project. Both of these projects have received positive interest from the residential aged care service industry on the Peninsula. The Oral Health project was presented at two ACSA Better Practice seminars in 2008.

**Cognition Care Support Service**

Elderly patients with memory or thinking difficulties can often feel overwhelmed and disoriented following their admission to hospital. This can lead to behaviour that places themselves, or others, at risk.

Peninsula Health’s nurse-led Cognition Care Support Team (CCST) is dedicated to increasing supervision and supportive care to cognitively impaired patients. The team comprises Division 2 nurses, Personal Care Assistants and Diversional Therapists.

The team works across Frankston Hospital and responds to the individual needs of a patient, who may require support for behaviours of concern, such as wandering, high risk of falls, or mental illness.

The team initiates the process of behaviour assessment, observation and monitoring, carer liaison, and develops a behaviour management plan for the patient in consultation with the nurse in charge.

Since the service’s launch in 2007/08 there has been a 22 per cent reduction in code grey calls (aggressive episodes) for patients over 60 years old.

**Falls Prevention**

In Victoria, falls are the leading causes of injury among older people. Around one in three people over the age of 65 will experience a fall each year.
The Peninsula Health Falls Prevention Service provides training and support to both inpatients in hospital, rehabilitation and residential facilities and people in the community.

This year the Falls Prevention Service held its first April Falls Forum. The forum highlighted all areas of falls prevention in the community and inpatient settings and featured presentations from specialist falls clinicians. More than 60 clinicians from Peninsula Health and local residential care facilities, private hospitals and community services attended the forum.

The Falls Risk Assessment Tool (FRAT), developed by the Falls Prevention Service, is the recommended screening tool for all community and continuing care admissions at Peninsula Health. For some time, the FRAT has been used extensively by other hospitals and in residential settings around Australia, and is used by 35 health services internationally. During the year under review, eight international health services requested to use the FRAT tool, along with a further nine health services from across Australia.

The Mornington Centre

The Mornington Centre is a 60-bed facility providing treatment and care for elderly patients. During the year under review, 841 patients were provided treatment and cared for by staff at the Centre.

An initiative of Peninsula Health and the State Government, The Mornington Centre is part of Peninsula Health’s strategic plan to improve and enhance facilities for older people.

Mt Eliza Personal Assistance Call Service

Peninsula Health’s highly successful emergency alarm service – MEPACS - gives clients the confidence to continue to live independently and retain their quality of life.

In September 2008, Peninsula Health won the State Government Personal Alert Victoria contract to provide the personal alarm and monitoring service for Victoria’s most vulnerable, frail and older residents state-wide.

MEPACS will increase its capacity from 13,250 clients to 24,000 clients. This growth allows the response team to expand by about 20 additional positions.

Increased resources and new technology, such as an Alarm Unit with a daily call voice reminder, has further enhanced this important service.

Ageing Well Expo

More than 1300 people attended the third annual Ageing Well Expo in October 2008.

Lifelong learning and positive ageing were the key messages of the Expo, which was presented by Peninsula Health in partnership with the Mornington Peninsula Shire and the Over 50s Association.

Visitors were encouraged to be inspired and learn about the range of services and programs on the Peninsula that help people to age well and continue to lead healthy and active lives.

Guest speaker Noeline Brown, Australia’s Ambassador for Ageing, shared her experiences on healthy ageing and encouraged the audience to remain active, both physically and as contributors to society.

FUTURE DIRECTIONS

› Continue planning for future stages of The Mornington Centre, including sub-acute beds and a community health facility. Develop submissions to government to enable the remaining stages of the project to be funded.
Jeff Wassertheil Medal Winner

Narelle Watson, a musculoskeletal Physiotherapist, researcher, teacher and mentor, was named the inaugural winner of Peninsula Health’s Jeff Wassertheil Medal for Excellence in Emergency Medicine in 2008.
Narelle has been instrumental in the implementation of specialist physiotherapy services for patients presenting with musculoskeletal injuries, at both Frankston and Rosebud Hospital’s Emergency Departments. “Musculoskeletal injuries, including broken bones or ligament injuries, can be serious in nature, however, they are usually deemed non-critical. Having a primary-care physiotherapist available to provide specialised treatment for these musculoskeletal injuries reduces the demand on medical and nursing staff and enables them to attend to more time-critical emergencies,” Narelle explains.

Narelle is studying for her PhD, researching the effect of immobilisation times on fracture healing and functional outcomes in elderly patients who have sustained wrist fractures. This study, which links in very closely with Narelle’s clinical caseload, has the potential to alter clinical practice and improve outcomes for this large patient group by pinpointing the optimal time period for immobilisation of distal radius fractures.

Narelle’s teaching and mentoring roles include tutoring in the area of musculoskeletal conditions to medical and nursing staff within the Emergency Department, Physiotherapy staff and Monash University undergraduate and postgraduate students. She has also established a training and competency package for new Emergency Department practitioners.

The Medal was established following the death of the former Director of Emergency Medicine, Associate Professor Jeff Wassertheil. The Medal commemorates Jeff’s leadership in and contribution to Emergency Medicine at Peninsula Health.

It will be awarded each year to a staff member in Emergency Medicine who can demonstrate excellence in areas where Jeff shone: Leadership, Teaching, Research, Mentoring, and Community Service in the field of Emergency Medicine.

“...reduces the demand on medical and nursing staff...”
PROFILE
Peninsula Health’s multidisciplinary Allied Health team provides a diverse range of quality, professional services to clients of all ages throughout all programs. These services include Psychology, Nutrition and Dietetic Services, Occupational Therapy, Physiotherapy, Social Work, Podiatry and Speech Pathology Services.

OBJECTIVE
› To assess patients, develop care plans, provide appropriate treatment, counselling and referral and to monitor the care provided.

OPERATIONAL PERFORMANCE
Response, Assessment & Discharge Team
The Response, Assessment and Discharge (RAD) Team was established to assess patients whose needs could be more appropriately met through non-hospital services such as Peninsula Post Acute Care, referral to the Complex Care Program, provision of community supports or placement in respite care in a supported residential facility.

The team provides multi-disciplinary triage and assessment when a patient presents to the Frankston ED. The team consists of Social Work, Physiotherapy, Occupational Therapy and Nursing staff. If a patient does not require acute medical care, but would benefit from some form of care in their home, the RAD team assists in arranging the necessary care and access to services. If the patient requires admission to hospital, the RAD team ensures appropriate referrals are made and commences the care planning process.

The RAD team assisted in preventing 580 unnecessary admissions during the year. This represents 13 per cent of all patients seen by the team. During the Clinical Response Service trial (see page 31) a further 277 admissions were prevented.

Residential Outreach Support Service
ROSS (Residential Outreach Support Service) is a dynamic multidisciplinary service that aims to support residents in the 41 aged care facilities on the Peninsula. ROSS provides clinical support, education and resources, as well as promoting communication between GPs, Peninsula Health and the residential care sector.

The team comprises of Social Work, Occupational Therapy, Physiotherapy, Nursing and Medical staff. Assessment and consultancy is provided to residential care facilities in a variety of areas, such as falls, wound care consultancy, feeding tube and catheter care, infection control and acute medical outreach.

Education is also a core component of the model of care, and ROSS provides education for residential care facilities staff on key clinical areas, including falls prevention.

Residential aged care facilities are introducing the Agestrong (strength training exercise) program to the sector. This is being facilitated by ROSS in partnership with the Agestrong Network.

During 2009, staff across 19 facilities have been trained to conduct the Agestrong program which is based on a train the trainer model. It is expected that the programs will be up and running by the end of 2009. Aims of the program include improved strength and function and social interaction for participating residents.
People and the Community

In addition to providing high quality health care, Peninsula Health works closely with individuals to improve their quality of life and wellbeing.

A number of services offer some patients medical care outside the acute hospital setting.

An example of a home-based service includes Hospital In The Home (HITH), which is a service available from both Frankston and Rosebud Hospitals, where the patients are treated at home. During the year, 1,066 patients were admitted into the HITH program, with 9,616 home visits.

The 2008/09 financial year also saw 8,495 sub-acute ambulatory care services provided to people within their own homes.

Please refer to the 2009 Quality of Care Report for further information.

FAST Winner at National Stroke Awards

Local media coverage, road signage and a community awareness campaign resulted in Frankston Hospital winning the 2008 National Stroke Foundation Award for best Metropolitan Health Team.

This national community awareness program highlighted the importance of acting quickly when a stroke is suspected.

Speaking out – breaking down the language barrier

Understanding medical terms and concepts can be difficult at the best of times. It is particularly so in times of crisis and ill health. For people who do not speak English, this experience can be even more stressful. Peninsula Health offers access to trained interpreters for patients requiring assistance.

In 2008/09 there were 1,140 interpreter bookings (both on site and via the phone) across Peninsula Health for 51 different languages. This is an increase from 1,025 bookings in 2007/08. The number of bookings requested in 2008/09 is a 46 per cent increase from the 701 bookings requested in 2006/07.

The five most requested interpreter services offered by Peninsula Health in 2008/09 include:

- Mandarin – 154
- Italian – 117
- Auslan (a sign language used by the hearing impaired) – 114
- Greek – 83
- Arabic – 81

FUTURE DIRECTIONS

› Improve the way we involve consumers and families as partners in the care process.
› Improve our communication with patients and carers so that they are able to take a more active role in care and care decisions.
› Improve continuity and coordination of care and to facilitate decisions that are best for the consumer in each individual circumstance.
Cameron helps connect us with our community

Websites like Facebook and MySpace are all the rage with young people, so why shouldn’t Peninsula Health use these types of mediums to connect to young people living on the Peninsula?
This is the very question being asked by one of Peninsula Health’s volunteer community representatives, 18 year old, Cameron Nottingham.

“If young people are more active and involved in their local health service, they are more likely to use it and be aware of the services provided,” says Cameron, who is an active voluntary member of Peninsula Health’s Youth Community Advisory Group.

Cameron, who has always been interested in health care and is currently studying Biomedical Sciences at Monash University, has conducted research into how other organisations are using social networking sites in effective and engaging ways.

This research is aiming to lead to ways in which Peninsula Health will be able to have an interactive online presence.

“This will help to actively promote our services to young people, including our drug and alcohol services, so they know what’s available to them and how to access them. It also aims to provide an online gateway for young people to provide their input and feedback into the services that are provided,” said Cameron.

Cameron’s involvement in the Youth Advisory Group stems from his important role as one of a team of fifteen community members appointed to Peninsula Health’s Community Advisory Committee (CAC).

“The CAC plays a vital role by providing advice on how the health service can meet the needs of a growing and ageing population. The CAC helps to foster two-way communication between the health service and the community,” said Cameron.

Cameron stresses the importance for the community to have an active role in the way any health service delivers its services.

“Everyone uses these local health services at some point, so it’s important that the community feel that they belong to the Health Service, and that the Health Service belongs to them,” Cameron said.

“...it’s important that the community feel that... the Health Service belongs to them.”
PROFILE
Peninsula Health is strongly committed to engaging consumers in the planning, delivery and evaluation of its services.
A strong culture of community involvement and participation helps to understand the needs and expectations of the local community. It further helps to improve service quality, particularly in relation to ease of access to services and a timely and appropriate service response.

OBJECTIVES
› Enhance community involvement in planning and delivery of care across all services.
› Build on existing partnerships and develop new partnerships that help to build a healthy community.
› Ensure Peninsula Health provides the best possible consumer experience.

OPERATIONAL PERFORMANCE
Peninsula Health’s Board Community Advisory Committee
The Community Advisory Committee (CAC) is a committee of the Board which meets a minimum of six times per year. It continues to be a vital link between the Health Service, and the broader community. The CAC provides advice to the Health Service on a range of issues, including local community views on the services offered, input into the delivery of service and the future directions of Peninsula Health.
During 2008/09, membership on the CAC increased from nine to 15 community members.
The CAC is supported by a number of sub groups - Community Advisory Groups (CAGs). These CAGs provide a conduit between communities of interest and the CAC, Board and the Health Service. The individual CAGs have a number of community members and service providers on each group as well as a CAC representative.
These CAGs are grouped so as to represent specific geographic areas, as well as special needs.
During the ACHS Survey earlier this year, reference was made to the support of the volunteers and exceptional level of consumer input.
Surveyors noted that Peninsula Health’s level of community participation ‘should be shared with ACHS in the review of the EQuIP 4 criteria, as there are many examples of consumer input which would benefit the broader ACHS membership who often struggle with involving consumers’.

Peninsula Health Strategic Plan
CAC and CAG members provided their input into the future directions of the Health Service by participating in the process to develop Peninsula Health’s 2009 - 2013 Strategic Plan.
Throughout the strategic planning process, CAC and CAG members were actively involved in planning sessions and forums, where they had opportunity to raise community issues for consideration and provide the consumer and community perspective.

Disability Community Advisory Group
In April 2008, Peninsula Health established the Disability Community Advisory Group. During the year this group has provided invaluable support including:
› Completing a series of focus groups looking at Improving Healthcare at Peninsula Health for People with an Intellectual Disability. These groups were held with people with an intellectual disability, carers and Peninsula Health staff. The resulting report and recommendations will be used to further inform the Health Service.
FUTURE DIRECTIONS

- Development of the new Community Participation Plan. This Plan will support Peninsula Health’s 2009 – 2013 Strategic Plan and ensure that the Health Service has a clear strategy for consumer participation and engagement throughout the organisation.

- Ongoing auditing and reporting to monitor progress and outcomes against the indicators as identified by the Community Participation Plan, and other indicators as identified by the Department of Human Services.

- Implementation of the ‘Peninsula Health Values Partnership’ program.

Successfully submitting to the Department of Human Services My Future My Choice initiative for younger people with disabilities residing in residential aged care facilities. The joint submission between ‘focus’ Individualised Support Services and Peninsula Health for a purpose-built facility on the Mornington Peninsula was accepted in May 2009 with planning for the facility being well underway.

The Disability CAG is undertaking a twelve month project to develop Peninsula Health’s Disability Action Plan (DAP) framework. The DAP will provide the strategic direction for Peninsula Health to be responsive to the needs of people with a disability.
PROFILE

Peninsula Health ensures the provision of high quality services by constantly evaluating performance, identifying areas of excellence, as well as areas where improvements can be made.

OBJECTIVES

› To provide safe clinical care of the highest standard for clients/patients throughout the care continuum.
› To reduce harm and minimise risk in care delivery.
› To enhance the quality, safety and risk management processes throughout the Health Service.

OPERATIONAL PERFORMANCE

ACHS Accreditation

The independent national body for quality and safety in health care in Australia is the Australian Council on Healthcare Standards (ACHS). Peninsula Health is fully accredited by ACHS.

In March 2009 Peninsula Health underwent a Periodic Review. It found Peninsula Health had continued to improve and that the recommendations made during the 2006 Organisational Wide Survey had been actioned.

The survey team recommended that in eight of the 14 mandatory criteria Peninsula Health demonstrated 'Extensive Achievement'. For further details, see the Quality of Care Report.

HACC Accreditation

A survey was also conducted on Peninsula Health’s Commonwealth Home and Continuing Care (HACC) Program. The HACC program met all the criteria and positive comments were mentioned for the program’s coordinated and reliable service delivery. Overall, the HACC surveyor said Peninsula Health was a very impressive organisation.

Risk Management

Peninsula Health also has a coordinated service-wide approach to risk management, based on the Australian Standards.

At the ACHS Survey, Peninsula Health’s Risk Management Framework was reviewed and received a rating of ‘Extensive Achievement’.

Southern Metropolitan Integrated Cancer Service

Peninsula Health is a strong contributor within the Southern Metropolitan Integrated Cancer Service. Effective outcomes were achieved in the areas of multidisciplinary care and consumer engagement.

Peninsula Health in partnership with the Southern Metropolitan Integrated Cancer Service (SMICS) is involved in a pilot project to improve the care of local cancer patients. A SMICS Project Officer will be based at Frankston Hospital to facilitate greater collaboration between clinicians involved in all aspects of cancer treatment.

The focus is on delivering the right treatment and support to patients as early as possible in their cancer experience. Implementing the guidelines recommended by the Department of Human Services means that the integrated approach at Frankston Hospital ensures local patients receive the highest level of care.

FUTURE DIRECTIONS

› Planning has commenced for the next Organisation Wide Survey due in 2011.

Full details of Peninsula Health’s quality activities in 2008/09 are provided in the 2009 Quality of Care Report. Copies are available from Peninsula Health (Public Relations Department, PO Box 192, Mt Eliza 3930) or from the website www.peninsulahealth.org.au
Peninsula Health is committed to undertaking innovative and collaborative research to improve the health outcomes of our community. Research embraces many areas of healthcare including the prevention and treatment of disease, the quality of care provided and the evaluation of current treatments and therapies. Full details of Peninsula Health’s research activities are provided in the 2009 Research Report.

OBJECTIVE

➢ To foster excellence in research and innovation.

OPERATIONAL PERFORMANCE

Appointment of Research Director

In April 2009, Associate Professor John Botha was appointed Director of Research at Peninsula Health. Associate Professor Botha has been with the Health Service since 1999 as Director of Intensive Care and Clinical Dean and is an active researcher.

Human Research and Ethics Committee

The Peninsula Health Human Research and Ethics Committee (HREC) meets monthly and ensures that research at Peninsula Health is carried out in accordance with the National Statement on Ethical Conduct in Human Research.

During the 2008/09 year, the HREC considered 42 research projects and a further 20 applications (negligible risk projects or quality activities) were assessed out of Committee.

Small Grants

Four Small Grants for Medical Research were awarded with a further two to be finalised. The small grants of up to $5,000 support and encourage research projects designed by Peninsula Health staff. Funds are awarded to help to cover the costs of initiating and conducting research projects.

Three grants were awarded to Allied Health staff, one to Nursing and two to Medical staff. In the last four years, $77,000 has been provided to fund 20 projects.

Research Week 2008

Research Week, an annual initiative of the Research Development Committee, was held in November, 2008.

During the Week, the Health Service hosted its first public forum entitled Talking Research – Mental Health. Around 100 people attended the forum to hear guest speaker Professor Jayashri Kulkarni, Director, Alfred Psychiatry Research Centre, present on the topic Hormones and Mental Illness. Other speakers were Associate Professor Richard Newton and Steve Macfarlane who presented on mental health research initiatives at Peninsula Health.

The Research Dinner, including the Jeremy Anderson Oration, was another key event on the 2008 Research Week program. Professor Steve Wesselingh, the Dean of the Faculty of Medicine, Nursing and Health Sciences, from Monash University, who featured as guest speaker, delivered his oration on ‘Integrate and Flourish: The nexus of teaching, research and healthcare delivery’.

FUTURE DIRECTIONS

➢ Continue to foster research and collaboration between Medical, Allied Health and Nursing staff, with the aim of producing high quality research that will inform ways of improving our quality of care. The predominant theme in the years ahead will be to encourage new researchers, while continuing to support the established researchers at Peninsula Health.

Full details of Peninsula Health’s research activities in 2008/09 are provided in the 2009 Research Report. Copies are available from Peninsula Health (Public Relations Department, PO Box 192, Mt Eliza 3930) or from the website www.peninsulahealth.org.au
**PROFILE**

The Health Service has developed strong ties with learning and teaching institutions. As a teaching hospital of Monash University, and through affiliation with other educational institutions, Peninsula Health participates strongly in undergraduate and post-graduate training in the health professions.

**OBJECTIVE**

- Provide excellent education and training opportunities for undergraduates, new graduates, post-graduates, international medical graduates and those re-entering the health workforce.

**OPERATIONAL PERFORMANCE**

In addition to being a teaching hospital for the Monash Clinical School, Peninsula Health is now the major teaching facility for the Gippsland Medical School, and participates actively in developing a skilled medical workforce. Clinical training has also been enhanced by the establishment of a Simulation Centre.

**Nurse Education**

During 2008 approximately 936 individual Clinical Placements for student nurses, from Universities and TAFE Colleges, enabled both Division 1 and 2 nursing students to participate in clinical experience at Peninsula Health. Placements were also provided for 55 other students, including Navy Medics and Paramedics.

In 2008, 36 first year graduate nurses completed the Graduate Nurse Program. Of these, 35 have remained at Peninsula Health. In 2009, 52 new graduates commenced the Graduate Year Program, 47 in general acute and 5 in sub-acute.

In 2008, 16 students completed post graduate diplomas/certificates in their area of specialty.

A two day Nursing Orientation Program is conducted for all new nurses employed by Peninsula Health and this was attended by 196 nurses during 2008.

Peninsula Health provides an extensive staff development program with a total of 7,740 nursing staff attending during 2008. Additional education was also provided in speciality areas on a regular basis.

Short courses and study days, offering in-depth education on specialist topics, were provided on 50 occasions during 2008 with 1,086 nursing staff attendances recorded.

<table>
<thead>
<tr>
<th>Activity</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Study days and courses</td>
<td>1,356</td>
<td>998</td>
<td>2,122</td>
</tr>
<tr>
<td>Staff Development sessions</td>
<td>8,761</td>
<td>7,785</td>
<td>7,740</td>
</tr>
</tbody>
</table>

Highlights in 2008 include:

- In July, all nursing education services amalgamated into a new integrated unit called the Continuing Education and Development Unit.

- A new model for clinical placements for undergraduate student nurses at Monash University was developed. The Monash at Peninsula (MAP) program sees students completing all their clinical placements at Peninsula Health sites. Twenty-two of the Monash students were accepted into the Graduate Nurse Program.
An E-Learning portal was created on the Intranet allowing nurses 24 hour access to course information and resources. To date there are 16 live courses and 413 registered users.

Medical Education
Undergraduate education is provided for medical students through Peninsula Health’s affiliation with Monash University. During 2008/09, 161 medical students participated in rotations that included Emergency Medicine, Paediatrics, Obstetrics, Gynaecology, Mental Health, Surgery, Medicine, Geriatrics and Intensive Care. Peninsula Health trained 13 Year 3 students, 77 Year 4 students (who completed Paediatric, Obstetric and Gynaecology rotations) and 60 students in their fifth and final year of undergraduate study. There were also 11 elective overseas medical students completing a four-week rotation at Peninsula Health during 2008/09.

Post-graduate medical training is provided through Peninsula Health for its 111 interns and residents and 110 registrars who are training to become specialists.

In 2009, Peninsula Health recruited 31 interns. In addition, of the 31 interns recruited in the 2008 calendar training year, eight continued their employment at Peninsula Health in 2009.

Gippsland Medical Students
In 2009, twenty-two medical students from the Monash Gippsland Medical School are undertaking a year of training at Peninsula Health as part of a new program.

Frankston Hospital is the largest of the clinical sites to be linked to the new graduate program at Monash University’s Churchill campus, and will receive almost half of the course’s students.

Clinical Pastoral Education
An education program was introduced for students through the Chaplaincy/Pastoral Care Department. The 20-week course is an action-reflection process, which educates students in the provision of effective pastoral care.

During the year, four students graduated from the course. Five students are also undertaking the course in the 2009/10 financial year in the course’s second intake.

FUTURE DIRECTIONS
The new Monash Peninsula Clinical School development, which will expand existing student tutorial and study areas at Frankston Hospital, is scheduled to be completed by mid 2010.

Continue to encourage young professionals, international medical graduates and those re-entering the health workforce to join Peninsula Health by providing excellent education and training opportunities.
PROFILE
A motivated and skilled workforce is fundamental to providing excellent health care and is a strategic and operational priority for Peninsula Health. Peninsula Health continues to implement a range of strategies to position the organisation as an employer of choice.

OBJECTIVES
› In consultation with staff, develop a comprehensive human resources strategy, incorporating education and training opportunities, improved staff support and facilities; and reward and recognition programs.
› Investigate and implement methods to further improve the ‘staff safety culture’ at Peninsula Health.
› Position Peninsula Health as an employer of choice.

OPERATIONAL PERFORMANCE
Employer Performance Management Program
Peninsula Health took up the opportunity to be part of a new voluntary WorkSafe initiative known as the Employer Performance Management Program. The program focused on the organisational drivers that underpin performance with key objectives being the improvement of the Occupational Health and Safety (OH&S) and Injury Management performance. The program involves:
› WorkSafe undertaking a five day audit;
› Undertaking a gap analysis in comparison with best practices, within and outside of the sector; and
› Peninsula Health generating a specific action plan to address the identified priority risks and issues.
This audit has been completed and the report issued and its findings will be used to inform additional programs and initiatives.

Worker’s Compensation
There has been a substantial improvement in the number of worker’s compensation claims, together with the associated time lost and financial costs.

Claims Breakdown

<table>
<thead>
<tr>
<th></th>
<th>Total No. of Claims</th>
<th>No. of Time Lost Claims</th>
<th>&gt;10 lost shifts</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006/07</td>
<td>101</td>
<td>66</td>
<td>33</td>
</tr>
<tr>
<td>2007/08</td>
<td>132</td>
<td>105</td>
<td>36</td>
</tr>
<tr>
<td>2008/09</td>
<td>95</td>
<td>75</td>
<td>25</td>
</tr>
</tbody>
</table>

› Claim numbers decreased from 132 in 2007/08 to 95.
› Time lost claims reduced from 105 to 75 (approximately 30 per cent).
› Claims incurring time lost of greater than 10 lost shifts decreased from 36 to 25.
› Significant reduction in days lost for current year claims from 1,277 to 1,041.
› WorkSafe reserves held against claims relevant to premium calculation decreased from $6.293m in 2007/08 to $4.142m.

New Model for Human Resources
In May 2009, a new model of service delivery was introduced to further improve the quality and level of service provided by the Human Resources Department. The new portfolios include: Workforce Management & Capability, Human Resources Services & Administration, Workplace Safety & Well Being Services and Rehabilitation, Injury & Claims Management Services.
Employee Development Courses

The Human Resources department has coordinated a range of internally and externally facilitated non-clinical skills training programs available to all staff throughout the 2008/09 year. Two hundred and eighty-one staff members participated in 30 sessions conducted during 2008/09.

Courses that focused on Customer Service, Medical Terminology, Dealing with Stress and Change and Computer Skills were particularly well attended. Internal information sessions on Privacy, Cultural Awareness and internal databases have also been conducted.

In addition to these training courses, 12 team development workshops have been conducted across a variety of departments throughout Peninsula Health. These workshops addressed removing barriers to team effectiveness and developing a greater understanding of team work and positive workplace relationships.

Management Training

An Orientation program for newly appointed and promoted managers was developed and implemented during 2008/09. This included a full day workshop designed to give an overview of the key knowledge areas required to perform these new roles. This is accompanied by an online Managers Toolkit and resources to ease progression into these management roles. During the year, 51 managers and supervisors accessed this program over three sessions.

The frontline management skills development program ‘Management Essentials’ was also further developed this year to ensure development opportunities were available for as many Peninsula Health managers as possible. Managers are able to attend the workshops which address their individual needs. During the year, 77 attendees attended seven workshops as part of the program.

Workforce Data

<table>
<thead>
<tr>
<th>Labour Category</th>
<th>EFT - as at June 30 2008</th>
<th>EFT - as at June 30 2009</th>
<th>EFT - 2007/08 Yearly average</th>
<th>EFT - 2008/09 Yearly average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing</td>
<td>1,273.80</td>
<td>1,337.91</td>
<td>1,215.01</td>
<td>1,297.28</td>
</tr>
<tr>
<td>Administration and Clerical</td>
<td>383.72</td>
<td>410.41</td>
<td>369.75</td>
<td>394.28</td>
</tr>
<tr>
<td>Medical Support</td>
<td>210.24</td>
<td>220.48</td>
<td>191.26</td>
<td>213.60</td>
</tr>
<tr>
<td>Hotel and Allied Services</td>
<td>302.95</td>
<td>307.22</td>
<td>296.28</td>
<td>308.07</td>
</tr>
<tr>
<td>Medical Officers</td>
<td>41.78</td>
<td>49.93</td>
<td>42.57</td>
<td>45.47</td>
</tr>
<tr>
<td>Hospital Medical Officers</td>
<td>211.03</td>
<td>223.29</td>
<td>201.98</td>
<td>216.33</td>
</tr>
<tr>
<td>Sessional Clinicians</td>
<td>69.20</td>
<td>70.48</td>
<td>70.40</td>
<td>68.24</td>
</tr>
<tr>
<td>Ancillary Staff (Allied Health)</td>
<td>307.64</td>
<td>315.59</td>
<td>289.27</td>
<td>306.31</td>
</tr>
<tr>
<td>Total</td>
<td>2,800.35</td>
<td>2,935.31</td>
<td>2,676.53</td>
<td>2,849.56</td>
</tr>
</tbody>
</table>

FUTURE DIRECTIONS

› Develop and implement strategies that focus on the health and well being of our workforce

› Foster good communication and recognition as part of Peninsula Health being an employer of choice.

› Continue to foster activities that support a workplace climate reflecting Peninsula Health’s values.
OBJECTIVES

- Build a healthy community, in partnership with local health service providers.
- Maintain financial viability by living within our means.
- Identify, analyse, treat, evaluate and monitor risks at all levels.
- Care for and support staff.
- Develop environmentally sustainable development strategies across all service areas.

SUSTAINABILITY

Peninsula Health’s ‘Greening the Peninsula’ program, which reduces its footprint on the environment, was recognised at the 2008 Victorian Healthcare Awards. The program won the gold medal for Providing a Sustainable, Well Managed and Efficient Health Service.

This award recognises initiatives that lead to more sustainable health care services by achieving efficiencies through the adoption of innovative practices while providing high quality care for the community.

Water Consumption

Work continues to reduce the amount of water consumed across the Health Service. Overall water consumption remained at approximately 95,500 kilolitres (kL), which is similar to the previous financial year, despite increase in activity.

Overall water consumption at Frankston Hospital did reduce from 62,891 kL in 2007/08 to 62,044 kL in 2008/09, a saving of 847 kL for the year.

Some of the water saving initiatives implemented at the Hospital during this year included the installation of water efficient toilet flushers in a number of the Hospital’s public toilets, and the replacement of a cooling tower.

Energy Initiatives

<table>
<thead>
<tr>
<th>Initiatives implemented to date</th>
<th>Status</th>
<th>Energy savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Installation of Smart Lighting Controllers</td>
<td>Completed</td>
<td>26.8 per cent</td>
</tr>
</tbody>
</table>

Waste Management

Peninsula Health recently introduced compostable waste recycling in the kitchen at Frankston Hospital. All food waste is segregated and sent to a recycling plant. This has reduced the amount of waste for landfill by 70 per cent during the year.

<table>
<thead>
<tr>
<th>Reduction in Kitchen Waste</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kilograms</td>
</tr>
<tr>
<td>Jul 08</td>
</tr>
<tr>
<td>Aug 08</td>
</tr>
<tr>
<td>Sep 08</td>
</tr>
<tr>
<td>Oct 08</td>
</tr>
<tr>
<td>Nov 08</td>
</tr>
<tr>
<td>Dec 08</td>
</tr>
<tr>
<td>Jan 09</td>
</tr>
<tr>
<td>Feb 09</td>
</tr>
<tr>
<td>Mar 09</td>
</tr>
<tr>
<td>Apr 09</td>
</tr>
<tr>
<td>May 09</td>
</tr>
<tr>
<td>Jun 09</td>
</tr>
<tr>
<td>Landfill Kitchen Waste 2008-2009</td>
</tr>
<tr>
<td>Organic Waste 2009</td>
</tr>
</tbody>
</table>
SOCIAL PERFORMANCE

The program to advise patients of their rights and responsibilities continues at all sites. These are communicated regularly through on-one-one interactions between staff and patients, by posting information in brochures, posters, publications and other communications materials, as well as via the Peninsula Health website www.peninsulahealth.org.au

The Health Service also works closely with a number of local health care providers to ensure that members of the Indigenous community and those with special needs have access to the quality of care required to meet their needs (see page 18 of this report, also refer to the Quality of Care Report).

The Health Service continuously strives to provide staff with a culture of safety (see page 52 - 53). Staff are also provided with ongoing opportunities for training and development (see page 50 - 51 & 53).

Peninsula Health staff and their immediate families continue to benefit from the Employee Assistance program. It provides independent, confidential and professional assistance to individuals who are experiencing personal or work-related difficulties. The program is funded by Peninsula Health at no cost to the individual employee. In the 2008/09, 140 employees and family members accessed the service.

Peninsula Health’s Youth Employment Scheme (YES) program continues to offer young people job and training opportunities. A total of 70 trainees have successfully completed the program, with eight more trainees expected to complete their traineeships in the 2009/10 financial year.

Seventy-one students also undertook work placements in 2008, in areas of the Health Service including administration and allied health.

FINANCIAL PERFORMANCE

With 4,484 staff members, Peninsula Health is a major employer on the Mornington Peninsula with staff wages exceeding $255m.

The Health Service’s financial performance is strong, having achieved a balanced financial result every year for the past five years (see page 7). Peninsula Health receives strong support from the Department of Human Services (DHS). The Department funds core acute, sub-acute, community and aged care services, while also funding innovative services based on submissions.

Capital planning projects are enhanced by the development of Service Plans, which have long-term benefits for our community.

The Health Service also continues to identify opportunities for new ways of working and more efficient practices to improve our business performance. Peninsula Health identifies these opportunities through regular reviews, benchmarking and audits. It looks for potential improvement measures that can help in the drive for continuous improvement and to introduce sustainability into every aspect of its business (see the Quality of Care Report).

FUTURE DIRECTIONS

- Energy and water conversation programs will be extended and built into the expansion of Frankston Hospital.
2008 VICTORIAN PUBLIC HEALTHCARE AWARDS

Teams from across Peninsula Health were recognised in the 2008 Victorian Public Healthcare Awards. Many of these teams have been highlighted throughout this report (see pages 22, 33, & 54).

The awards, sponsored by the Department of Human Services, were presented by the Premier, the Hon John Brumby, the Minister for Health, the Hon Daniel Andrews, the Minister for Mental Health, the Hon Lisa Neville and the Secretary of the Department of Human Services, Ms Fran Thorn.

Associate Professor Richard Newton, former Clinical Director of Peninsula Health Mental Health Service, was one of three clinicians recognised for Outstanding Achievement by an Individual in Mental Healthcare. His Highly Commended award recognised Dr Newton’s leadership, clinical skills and success in implementing quality improvement programs in the Mental Health Service.

The teams from Quality and Public Relations produced a Quality of Care Report that was recognised as the best by any Metropolitan Health Service. This award recognises Peninsula Health’s efforts to keep the community fully informed on how it delivers safe, high quality health care.

2008 Research Prize Winners

Dr Ravi Tiruvoipati was awarded the Peninsula Health 2008 Registrar Research Prize.

Dr Tiruvoipati’s research presentation was titled: Early predictors of mortality in elderly patients with sepsis.

With advanced age being one of the factors that increases mortality in intensive care patients, Dr Tiruvoipati’s study aimed to identify factors during the first 24 hours of presentation that could predict elderly patients at increased risk of dying.

The Allied Health Research Prize went to Sarah Chao from Pharmacy for her research project: Don’t Clown around – early IV to oral antibiotic switch campaign to optimise antibiotic prescribing.

Melissa Bloomer from Continuing Education and Development received the Nursing Research Prize for her research project: Medication error prevention.

Nursing Graduates

Lisa Fosternally received the Graduate Nurse Award of Excellence at the 2008 Nursing and Midwifery Certificate and Awards Presentation. This award recognises a Graduate Nurse who has displayed excellence both clinically and professionally and demonstrates the values of Peninsula Health.

Postgraduate nurse Vanessa McDonough was awarded the Margaret Brazier Award for outstanding clinical achievement in critical care. This award is named after the Pink Lady, Margaret Brazier, who passed away in Frankston’s Intensive Care Unit after she was involved in a serious car accident.

Ageing Well Research Fellow

Ageing Well’s Project Officer, Nikki Hale, has been offered a research fellowship with the Victorian Primary Health Care Research Evaluation and Development (PHCRED) program.

The one year Research Development Program, funded by the Commonwealth Department of Health and Ageing, offers health professionals the chance to increase their knowledge and skills in primary health care evaluation and research. Four fellowships are awarded each year.
Nikki will work in partnership with Monash University Research Fellow, Dr Natalie de Morton, to undertake an evaluation of the ‘Community’ and ‘Home-based’ Agestrong programs. Nikki and Dr de Morton’s evaluation will be published locally and nationally.

**State Nursing Excellence Awards 2008**

Infection Control Consultant, Mia Janssen was short-listed at the 2008 State Nursing Excellence Awards for her research into the timely treatment of needle stick injury recipients.

Mia Janssen was one of 38 nurses from across Victoria short-listed for the awards. Her nomination in the ‘Excellence in Nursing Practice’ category was received for her approach to needle stick injury management for staff. Her work has simplified the response procedure following a needle stick injury, and aims to ensure that harm is minimised.

**Indigenous forum of the National Council to Reduce Violence against Women and their Children**

Deon Davis, Team Leader Koori Programs, Peninsula Health attended the Indigenous forum of the National Council to Reduce Violence against Women and their Children. Deon is a White Ribbon Ambassador and is the Indigenous family violence Chairperson for the Southern Metropolitan region. He was one of only two representatives from Victoria.

The forum, held at Parliament House in January 2009, sought Indigenous opinion on what is a prominent issue in Indigenous communities.

**ACHSE Roast Award**

Almost 20 years of service to the Community Health sector has earned Rob Macindoe, General Manager of Peninsula Health Community Health, a Roast Award from the Australian College of Health Service Executives (ACHSE). The recognition was awarded in appreciation for his many years of dedicated and passionate leadership to the Community Health network and service to the Community Health sector.

**Annual Reporting Award**

Peninsula Health was awarded a Gold Award, by the Australasian Reporting Awards Association, for overall excellence for its 2008 Annual Report. This award acknowledges the high level of disclosure and open reporting from the organisation to its community and key stakeholders.
Clair was honoured at the inaugural 2009 Minister for Health Volunteer Awards. The awards recognised and celebrated volunteers who have demonstrated outstanding dedication and commitment to public healthcare in Victoria.

Clair was selected as one of the four finalists in the ‘outstanding achievement by an individual volunteer’ category for metropolitan health services. Her dedication and commitment to Peninsula Health were highlighted at the awards ceremony.

Clair is the President of the Rosebud Hospital Rehabilitation and Aged Care Opportunity Shop Group and Rosebud Hospital Pink Lady Group. In addition, she also serves on the Peninsula Health Community Advisory Committee and Southern Community Advisory Group, which she chairs.

Her tireless efforts in organising fund raising events and volunteer activities not only contribute to Rosebud Hospital but to the broader community as well.

It takes someone special to willingly give up her time to help others, and Peninsula Health volunteer leader, Clair Duffus is the perfect example.
Peninsula Health has 910 volunteers and auxiliary members who readily give of their time to help to build a healthy community.

Volunteers provide input to senior management and the Board through the community advisory committee and the advisory groups. They work directly with staff in providing programs to patients and consumers. Initiatives include leading group exercise programs, providing support groups for chronic disease conditions or volunteering in the Men’s Shed or at any of Peninsula Health’s community kitchens.

The volunteers assist with activities for aged care residents and mental health patients, raise funds, work in kiosks and serve on Peninsula Health committees. They make an enormous difference to both the quality and effectiveness of the Health Service.

More than 100 volunteers joined the Health Service when the Peninsula Community Health Service amalgamated with Peninsula Health in 2008. These volunteers joined the existing community health volunteers to support Peninsula Health’s community health based services in Frankston, Mornington, Hastings and Rosebud, assisting in hydrotherapy classes, leading tai chi and walk groups and providing patient transport services.

In May 2009, the Board of Directors hosted the annual Volunteers Appreciation Day which was attended by more than 400 Peninsula Health volunteers. Twenty-four volunteers were presented with long service awards at the event.

**Fundraising and Donations**

Throughout the year, Peninsula Health received $843,000 in donations and bequests. These donations are used to purchase medical equipment and help to fund programs. Community donations add to the significant gifts that Peninsula Health’s Auxiliaries contribute every year.

### Auxiliaries and Volunteer Groups

**Serving multiple sites** –
- Operation Small Change – fundraising barrels (launched in 1978)
- Pastoral Care Volunteers (est. 1994)
- Walking Group Volunteers

### Frankston Hospital

- K.I.D.S Auxiliary (est. 2003)
- Frankston Hospital Men’s Auxiliary (est. 1992)
- Frankston Hospital Pink Ladies Auxiliary (est. 1968)
- Mental Health Service Volunteers (est. 2006)
- Carrum Auxiliary (est. 1916 – redirected support to Frankston Hospital in 1996)
- Patient Free Library Service (est. 1995)
- Ward Volunteers (est. 2006)
- Red Cross ACE program – Assistance and Care in Emergency (est. 2006)
- Patient Survey Team (est. 2008)

### Rosebud Hospital

- Rosebud Hospital Garden Group (est. 1992)
- Rosebud Hospital Pink Lady Group (est. 1988)
- Rosebud Hospital Kiosk Auxiliary (est. 1991)
- Rosebud Auxiliary (est. prior to 1950)
- West Rosebud/Tootgarook Auxiliary (est. 1960)
- Sorrento/Portsea Auxiliary (est. 1960)
- Rosebud Hospital Rehabilitation and Aged Care Opportunity Shop Group (est. 1997)
- Red Cross ACE program – Assistance and Care in Emergency (est. 2006)

### Community & Continuing Care

- Frankston Community Health Volunteers (est. 1990)
- Friends of Mornington Community Health (est. 1987)
- Friends of Hastings Community Health (est. 2003)
- Friends of Rosebud Community Health (est. 1998)
- Chelsea Community Rehabilitation Service Volunteers (est. 1984)
- Frankston Community Rehabilitation Service Volunteers (est. 1992)
- Rosebud Community Rehabilitation Service Volunteers (est. 1982)
- Rosebud Rehabilitation Unit Volunteers (est. 2004)
- Jean Turner Nursing Home Volunteers (est. 1991)
- Lotus Lodge Hostel Volunteers (est. 1987)
- Frankston Rehabilitation Volunteers (est. 1992)
- Friends of Carinya Auxiliary (est. 1992) - Carinya Residential Unit Volunteers
- Michael Court Volunteers (est. 1995)
- Golf Links Road Volunteers (est. 2009)
- Mornington Centre Volunteers (est. 2007)
- Mt Eliza Centre Volunteers (est. 1961)
- Rosewood House Volunteers (est. 1994)
- Palliative Care/Hospice Volunteers (est. 2001)
PROFILE

Supply, Support Services and Facilities Management Departments are responsible for providing a range of services that enable Peninsula Health to deliver quality health services.

OBJECTIVES

› Implement proactive and cost reducing business processes.
› Develop plans to meet emerging demands with available resources and infrastructure.

OPERATIONAL PERFORMANCE

Supply

Supply Chain Reform
Following a review of Supply Chain processes, improvement opportunities were identified. These resulted in a significant cost saving of $817,900 for the year. The Department of Human Services funded this project. Other Health Services are now looking at Peninsula Health’s processes with a view to introducing similar models.

Barcode Scanning Project
An innovative Barcode Scanning Project, which involves the use of wireless barcode scanners, has streamlined ordering, reduced lead times for stock and non-stock deliveries, and created valuable time-savings for nursing staff.

Barcode scanning has generated savings of $30,000 with further savings expected next year.

Information Technology

Significant upgrades to both software and hardware across the health service included an upgrade of the patient management system, improved server power supplies and planning to replace and improve the security of existing servers. Computer Services also played an important role in preparing the business case for implementing the new Clinical system (Cerner) under the HealthSMART umbrella.

Computer Services managed a seamless integration of the three former Peninsula Community Health Services sites into the Peninsula Health communications network.

Support Services

Victorian Hospital Cleaning Standards
The external audit results for December 2008 resulted in an overall score of 90.3 per cent for Frankston, 94.5 per cent for Rosebud and 93.8 per cent for the Community & Continuing Care Service, which includes Residential Aged Care facilities. This exceeds the Department of Human Services’ (DHS) Agreed Quality Level target of 85 per cent.

Facilities Management

Car Parking
The main works construction stage of the Frankston Stage 2A development has resulted in the loss of 225 car parking spaces at the Frankston Hospital site.

To assist in alleviating the pressure on the Hospital’s car parking facilities, TravelSmart programs now encourage people to make voluntary changes in their travel choices. In addition, a short-term car park, in an area originally reserved for out-of-hours staff, has been opened.

FUTURE DIRECTIONS

› Peninsula Health will share its outcomes and findings of the Supply Chain Reform Project with other Health Services.
› Peninsula Health is one of two trial sites for the implementation of the HealthSmart clinical information system, will further upgrade the patient information system and plans to implement systems to improve menu ordering for patients and the wireless tracking of equipment.
› Work on a concept design for a multi-deck car park at Frankston Hospital has commenced.
organisational structure

As at June 30 2009

Board

Chief Executive
Dr Sherene Devanesen

Executive Directors

Mr David Anderson
Executive Director, Finance & Deputy Chief Executive

Dr Sara Watson
Executive Director, Frankston Acute Care & Outpatients

Ms Jan Child
Executive Director, Mental Health, Allied Health, Nursing, Community & Continuing Care and Consumer Participation

Mr Brendan Gardner
Executive Director, Medical Planning, Infrastructure and Frankston Emergency Department

Dr Susan Sdrinis
Executive Director, Medical Services & Quality and Clinical Governance

Dr Peter Trye
Executive Director, Acute Clinical Services and Rosebud Hospital

Ms Barbara Lewis
Executive Director, Human Resources

Professional Issues

Medical
Dr Susan Sdrinis

Nursing
Ms Jan Child

Allied Health
Ms Jan Child

Legal
Ms Vicky Hammond

Public Relations
Mr John Jukes

Finance
Payroll
Printing
MEPACS
Information Technology and Communications
Supply

Acute Inpatient Services
Intensive Care Unit
Medicine
Surgery
WCAH
Palliative Care Outpatients

Mental Health
Geriatric Evaluation Management
Rehabilitation
Residential Community Health
Allied Health
Social Work/Integrated Care Pastoral Care Ambulatory Care Nursing Services

ED Frankston Planning
Infrastructure Capital Works Facilities Management Support Services

iPM Implementation Health Information Services Management Information Services Library

Quality/ Patient Safety
Infection Control
Customer Services/ Complaints
Medicolegal
Transport
GP Liaison
Medical Education
Junior Medical Staff
Senior Medical Staff Credentialling Research

Rosebud Hospital
Investigative Services
Pharmacy
Planning for a Clinical Information System

Employment Services
Organisational Development
Occupational Health & Safety
WorkCover
Employee Relations
Following the approval of the merger between Peninsula Health and Peninsula Community Health Service (PCHS), Health Minister Daniel Andrews appointed a new Board of Directors for the combined organisation.

**Mr Barry Nicholls**  
Chairperson  
MEng BEc (Hons 1) TPTC  
Appointed: 1 July 2008  
Former Head of Economics at the then Swinburne Institute of Technology, later Chief Executive Officer of Treasury, and Planning and Development departments in the Victorian Public Service.  
Senior DHS Executive with Ambulance Service, Corporate and National Health Information Management responsibilities.  
Chief Executive Officer, Chairman, Deputy Chairman or Director of numerous Victorian Public Authorities and some Commonwealth/State Authorities.  
Fellow, Australian Institute of Company Directors;  
Fellow, Institute of Public Administration Australia (Vic);  
Past President, Economic Society of Australia (Vic); and  
Past President, Current Treasurer, Rotary Club of Sorrento Inc.

**Ms Diana Ward**  
Deputy Chairperson  
MSoSocSc (Human Serv) BA (Soc) & (Anthrop) Dip Arts (Prof Writ & Ed)  
Appointed: 1 July 2008  
A Licensed Estate Agent specializing in commercial property;  
Former Director of Victorian Healthcare Association;  
Former President, Peninsula Hospice; and, a former President of both Mornington Peninsula Hospital and Frankston Hospital;  
Chair, Peninsula Health’s Audit Committee; and  
Chair, Peninsula Health’s Human Research & Ethics Committee.

**Ms Nancy Hogan**  
Chairperson  
BA (Hons) Poli Sci Grad Dip Rehab Studies MBA FACHSE AAICD.  
Appointed: 1 July 2008  
Executive Director Health and Aged Care Galante Business Solutions;  
Previous CEO of a number of public, not-for-profit and public hospitals and aged care organizations;  
Former President Aged and Community Care Australia and ACHSE and former Board Director Hesta and Industry Funds Management Advisory Board; and  
Currently Board Director of Melbourne General Practice Network.

**Mr James Kerrigan OAM**  
OAM JP BHA (NSW) FACHSE (Honorary Life Member)  
Appointed: 1 July 2008  
Former coordinating Surveyor and Preceptor for Australian Council on Healthcare Standards;  
Former State President and Councillor ACHSE;  
Former State President and Federal Councillor Australian Hospitals Association; and  
Former CEO three major teaching hospitals, PANCH, RVEEH and Mater Hospital Newcastle.
Mr Michael Tiernan
LL.B
Appointed: 1 July 2008
Consultant in Legal Management and OHS, Rehabilitation and Risk Management;
A Legal Practice Management Consultant;
Member Law Institute of Victoria;
Nationally accredited Specialist Mediator, Law Institute of Victoria;
WorkCover Committee; Accident Compensation Committee; and
Chair, LIV Practice Management Committee.

Ms Diane Wickham
BBus CA MIACD
Appointed: 1 July 2008
Partner, Morey Wickham Chartered Accountants and Advisers

Professor Paul Collier
BBus NSWIT, MComm NSW, GradDip Ed UTS, PhD Warwick, CPA
Appointed: 3 March 2009
Professor of Management Accounting at Monash University and Head of Discipline for Management Accounting and Accounting Information Systems in the Department of Accounting and Finance;
Former Senior Lecturer at Aston Business School in Birmingham;
Held senior financial and general management positions in industry and the public sector in Australia and the UK; and
Former Director and Chair of Audit Committee of Festival Housing Group (UK).

Mr Peter Brookhouse
Cert Pers.Admin; BA [Spec Ed & (Soc); MBA (Health Admin); MAIWCW
Appointed: 28 April 2009
CEO of Focus Individualised Support Services;
Chair of Peninsula Health Disability Community Advisory Group
Former CEO of Araluen Centre;
Past President of the Board of Management of Mornington Peninsula Hospital;
Former community representative and Chair of Peninsula Health’s Research and Ethics Committee; former Chair of Peninsula Health Clinical Ethics sub committee; and
Current Board member Peninsula General Practice Network.

Dr Winston McKean
MB.ChB., FAFPHM., DPH., DHA.
Appointed: 1 July 2008
A retired medical practitioner, specialising in Public Health Medicine;
Formerly worked in Senior appointments in the New Zealand public health sector, including the Regional Health Authority and National Clinical Training Agency;
Former Chairman of a Provincial Primary Health Organisation (NZ);
Former Chairman of the National Taskforce on the Primary Health Care Strategy (NZ); and
Member, Human Rights Review Tribunal (NZ).
Board Governance
The nine-member Board of Directors is appointed by the Governor in Council upon the recommendation of the Minister for Health. Directors are usually appointed for a term of three years with members eligible to apply for reappointment. The Minister for Health requires the Board to develop a Strategic Plan for the Health Service and to ensure accountable and efficient provision of health services.

Role of the Board
The Board of Directors is responsible for the governance and strategic direction of the Health Service and is committed to ensuring the services provided by Peninsula Health comply with the requirements of the Health Services Act 1988 and the mission, vision and goals of the service.

The Directors contribute to the governance of Peninsula Health collectively as a Board through attendance at Board meetings. Individual contribution occurs through participation in the various committees of the Board. Directors also give their time to attend significant Peninsula Health functions and events.

The Board held 11 meetings in the financial year 1 July 2008 to 30 June 2009. Members of the Peninsula Health Executive regularly present reports on their areas of responsibility.

Retirements
Peninsula Health Board and Staff extend their sincere appreciation to former Board Director, Ms Liza Newby, who resigned from the Board as at 1 March 2009, for her valuable contribution.

New Appointments
New appointments to the Peninsula Health Board are Professor Paul Collier, appointed 3 March 2009, and Mr Peter Brookhouse, appointed 28 April 2009.

Board Committees as at 30 June 2009
Nine committees provide specialist advice and support to the Board. The committees also assist the Board and senior management to meet all statutory, regulatory and operational requirements for the Health Service.

Finance & Resources Committee
The Finance & Resources Committee reviews all financial matters, management information and internal control systems and makes recommendations to the Board on major and minor works.

Members: Dianne Wickham (Chair), Nancy Hogan, Paul Collier, Michael Tiernan, Jim Kerrigan OAM.

Audit Committee
The Audit Committee meets quarterly and at any other time as requested by the Peninsula Health Board, any Committee member, the internal auditor or the Auditor-General. The Committee liaises with the internal and external auditors, reviews and approves audit programs and evaluates the adequacy and effectiveness of the overall governance framework operating within Peninsula Health. The Committee receives reports via compliance monitoring framework and monitors all risk management activities for Peninsula Health.

Members: Diana Ward (Chair), Barry Nicholls, Paul Collier, Dianne Wickham.

Quality & Clinical Governance Committee
The Quality & Clinical Governance Committee meets regularly to monitor outcomes and improve the quality and effectiveness of the health services provided by Peninsula Health. The Committee is also responsible for the clinical risk management activities of Peninsula Health, which are integrated with its quality systems.

Members: Jim Kerrigan OAM (Chair), Barry Nicholls, Winston McKean, Michael Tiernan.

Medical Staff Association/Board Executive
The Board Executive considers matters of urgency brought forward through the Chief Executive from the Medical Staff Association (MSA). The Board Executive is empowered to make decisions on these matters and is required to report on any action so taken to the Board of Directors. Meetings are held as required, which includes a quarterly meeting between the Board Executive and the Chair of the...
Medical Staff Association, with the Deputy Chair Medical Staff Association, the Chief Executive and the Executive Director Medical Services, Peninsula Health, in attendance.

**Members:** Barry Nicholls [Chair], Diana Ward, Winston McKean.

**Human Research & Ethics Committee**
The Human Research & Ethics Committee assesses all protocols covering research involving patients and makes recommendations to the Board as to the approval of protocols for research to be carried out within Peninsula Health. It monitors and seeks feedback from researchers in relation to ongoing and completed projects and considers and reports to the Board on other ethical issues as referred to the Committee.

**Members:** Diana Ward [Chair], Liza Newby [Chair]*
*Board Committee Chair for only part of the year.

**Community Advisory Committee**
The Community Advisory Committee provides advice on needs, demands, and service development from a community perspective whilst also harnessing community support for Peninsula Health and its services. It is supported by 12 Community Advisory Groups, including the Culturally and Linguistically Diverse (CALD) Community Advisory Group and the Aboriginal and Torres Strait Islanders Advisory Group.

**Members:** Winston McKean [Chair], Liza Newby*
*Board Committee member for only part of the year.

**Primary Care & Population Health Committee**
The Primary Care & Population Health Committee assists in creating effective linkages between the health service and other providers to co-ordinate the delivery of care in the community.

**Members:** Nancy Hogan [Chair].

**Remuneration Committee**
The Remuneration Committee meets as required to review performance and determine remuneration of executive management.

**Members:** Barry Nicholls [Chair], Dianne Wickham, Diana Ward.

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**Meeting Attendances**

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*Board Committee member for only part of the year.
Executive director profiles

**Dr Sherene Devanesen**

Chief Executive
MB BS Dip Obst RACOG
FRACMA FCHSE FAIM
FKHCCM

Appointed: October 2000

Sherene has 12 years experience in clinical work followed by 27 years in Health Service management. She is a member of the DHS Board of Health Information Systems; a Board Director of Wesley Mission Melbourne; a former President of the Royal Australasian College of Medical Administrators and an ACHS Surveyor. Dr Devanesen is the current Chairperson of the Victorian Quality Council.

**Mr David Anderson**

Executive Director Finance & Deputy Chief Executive
BCom MCom (Finance)

Appointed: October 2002

David has had experience in senior management roles in government including the Department of Water Resources, Community Services Victoria and the Department of Human Services.

Prior to joining Peninsula Health he was Manager, Financial Analysis and Funding, in the Department of Human Services.

David is a member of the Australian Health Services Financial Management Association and the Victorian Health Service Management Innovation Council.

**Dr Sara Watson**

Executive Director Frankston Acute Care and Outpatients
MBChB LLB BSc FRACMA
AFACHSE

Appointed: March 2006

Sara has held a number of senior executive and management positions in health care. Sara is a Fellow of the Australasian College of Medical Administrators and an Associate Fellow of the Australian College of Health Service Executives.

**Ms Jan Child**

Executive Director Mental Health, Allied Health, Nursing, Community & Continuing Care and Community Participation
GradDipl(Behavioural Sc) GradDipl(HlthAdmin)

Appointed: February 2007

Jan is a Registered Nurse with 25 years experience in the public and private sectors. Jan is a member of Nursing and the Victorian Community Participation Advisory Committee.
As at 30 June 2009

Mr Brendon Gardner
Executive Director
Planning, Infrastructure and Frankston Emergency Department
B App Sc (HIM) MHA
UNSW AFCHSE
Adjunct Lecturer,
School of Nursing & Midwifery, Faculty of Medicine, Nursing & Health Sciences, Monash University

Appointed:
May 2007

Brendon first joined Peninsula Health in 1997 as Network Manager, Health Information Services, and has held several management and operational positions within the Health Service. He has been a member of various DHS committees on Coding, Casemix and performance measurement and more recently a member of the Steering Committee responsible for selecting and implementing the Patient and Client Management Systems within the HealthSmart program.

Dr Susan Sdrinis
Executive Director Medical Services & Quality and Clinical Governance
MBBS FRACMA MPH MHSM

Appointed:
May 2008

Susan has held senior management positions in health services and in government.

Susan is a Fellow of the Royal Australasian College of Medical Administrators and an Associate Fellow of the Australian College of Health Service Executives.

Dr Peter Trye
Executive Director Acute Clinical Services and Rosebud Hospital
MB ChB, Dip Obs, MPH, FAFPHM, MBA, FRACMA

Appointed:
October 2008

Peter has worked for the last 25 years in the health industry. He has educational qualifications and experience in the areas of clinical medicine, epidemiology, medical management and business development. Within Victoria he has worked as Director of Medical Services for Latrobe Regional Hospital, as a Senior Medical Adviser in the DHS and as a Business Manager for a Medical Education company. He has Directorships and serves on the RACMA Victorian State Committee.

Ms Barbara Lewis
Executive Director Human Resources
MHRM, CAHRI, GAICD

Appointed:
November 2008

Barbara Lewis has significant experience at a senior level in the field of Human Resources both in the private and public sector and across a wide section of service based industries. Prior to joining Peninsula Health she was Director Human Resources for CFA. Barbara holds a Masters in HR Management, is a member of the Australian Institute of Human Resources and a Graduate of the Company Director’s Institute, and has spoken at various national and international conferences on the challenges and opportunities in managing a diverse workforce.
As at 30 June 2009

NURSE UNIT MANAGERS
Ward 5GS
Ms H Lack RN RM Dip N Ed Bed
Ward 5GN
Mr J Aylward BNSng Dip Crit Care
Nsg
Ward SFS
Ms N Musa RN
Ward 5FN
Ms L Walsh RN
Haemodialysis
Ms R Hinchclisen RN BScs Dip
Psych Nsg Grad Cert CC Grad Cert
Renal
Ward SFS - Cardiology & Coronary Care Unit
Ms B Dixon RN CCU Cert
Cardiac Angiography
Mr R Tempinc RN GradCert
Medical Staff Cardiology
Dr G Toogood MB BS FRACP [Acting]
Director
Dr P Carrillo MB BCh FRACP
Mr R Lewis MB BS FRACP
Dr S Zito MBBS FRACP
Dr N Tepperman MB BS [Hons]
FRACP FCSANZ DDU
Dr B Wood MB BS FRACP
Dr Michelle Butler MB BS FRACP
Dr B Pathik MB BS FRACP
Dr R Herrmann MB BS FRACP
Dr D Badov MB BS FRACP
Dr A Bassi MB BS M Med FRACP
Associate Professor E Butler MB BS FRACP
Dr S Raghav MB BS MD DM (Neuro)
FRACP
Dr J Rupasinghe MB BS FRACP
Dr G Szto MBBS FRACP
Associate Professor D Langton MB BS (Hons)
FRACP [Director]
Dr G Braun MB BS FRACP

PALLIATIVE CARE AND ONCOLOGY
NURSE UNIT MANAGERS
Oncology Day and Research Unit
Ms C O Kane RN Dip Mgmt Dip Proj
Mgmt
Palliative Care Unit Golf Links Road
Ms S Bashki RN Div 1
Clinical Nurse Consultant
Palliative Care Consultant Team
Ms R Rees DipAppSciNsg
Bachelor Nursing Conversion
GradCertNsgPeriOp
GradDipNsgPalCare MasterNsg
GradCertHealthProfEd
Director of Cancer Services
Dr J Lickliter MB BS PHD FRACP
Medical Staff Radiology,
Oncology & Haematology
Dr D Blayke MB BS FRANZCR
Dr J Catalano MB BS FRACP
Dr V Ganju MB BS FRACP
Dr N Potasz MB BS FRACP
Dr J Ruben MB BS BCh GradCert FRANZCR
Dr J Thomson MB BS FRACP
Director of Palliative Care Medicine
Dr B McDonald MBChB MRCGP(UK)
FACHPM MSc
Medical Staff Palliative Care
Dr R Lewis BSc MBBS DRCOG DCH
FRACGP
Dr B McDonald MBChB MRCGP(UK)
FACHPM MSc
EXECUTIVE DIRECTOR
PLANNING, INFRASTRUCTURE AND FRANKSTON EMERGENCY DEPARTMENT
Mr B Gardner B App Sc (HIM) MHA
UNSW AFCHSE
Operations Director Planning & Support
Ms D Collins BAppSci
(Communication Disorders)
GradDiplBusMgmt

FACILITIES MANAGEMENT
DEPARTMENT
Director of Facilities Management
Mr G De Campo BBus Grad Dip
Mgt MB
SUPPORT SERVICES
Manager Support Services
Ms L Winterburn
EMERGENCY
Clinical Director Frankston Emergency Department
Dr L Goh MB BS (Melb) FACEM
Deputy Clinical Director Frankston Emergency Department
Vacant
Director of Emergency Medicine Training
Dr M Smith MB BS (Monash)
BMedSci Hons (Monash) FACEM
EMERGENCY Physicians / Clinicians
Dr V Zamarasizinghe MB BS (Colombo)
FACEM
Dr T Baker MB BS Hons (Monash)
BMedSci Hons (Monash) FACEM
Dr K Brostow MB ChB (Qld)
FACEM
Dr B Chan MB BS (Melbourne)
FACEM
Dr D Haji MB ChB (Missal) FACEM
Dr H Hewitt MB BS (Monash) FACEM
Dr Andrew Rosengarten FACEM
Dr Mohan Kamlanathan MB BS
BAO FACEM
Dr Ieany Chezy MBBBS (Nig)
Grad Cert Health Professional
Education (Monash) FACEM
Dr Andrew Tay FACEM
EMERGENCY Paediatrician
Dr P Francis MB BS FRACP
General Practitioners
Dr M Jackson MB BS (Melb)
BMedSci (Melb) DipObs RACOG
FRACGP
Dr G Macaulay MB BS (Melb) DipObs
RCOG ACCAM
Dr R Ward MB BS Hons (Melb)
FISMS
Nurse Unit Manager Emergency Department
Mr A Browne RN RSCN (Lon)
Critical Cert ICU BA (Hons)
EXECUTIVE DIRECTOR MENTAL HEALTH, ALLIED HEALTH, NURSING, COMMUNITY & CONTINUING CARE (CCC) and COMMUNITY PARTICIPATION
Ms J Child RN GradDiplBehavioural
ScI GradDiplPsychAdmn
Operations Director, Chief Nurse Sub-acute Care, Principal Nurse/ Site Manager Golf Links Road
Ms S Tesoriero RN Div 1 Ms Hs
Svie Mgmt
Principal Nurse Recruitment and Allocations
Ms K Murphy RN RM BAppSci
(Diploma) Diploma AppSci (Community Health) Dip Health/Community Services Master Health Service Mgmt

Site Manager/Principal Nurse
Ms R Digby RN Div 1 BA Cert Diab
Ed Grad Cert Gerontology
Site Manager/Principal Nurse
Rosebud Rehab Unit
Mr J Arreloba (Acting) Dip AppSci(Nsg) BNSng GradDip
Gerontology Nsg
Nurse Unit Manager Golf Links Rd Rehabilitation Unit 1
Ms T Hufer (Acting) RN to 09/09
Mr G Emmanuel RN [Acting] from 09/09
Nurse Unit Manager Golf Links Rd Rehabilitation Unit 2
Ms L Clark RN Div 1
Nurse Unit Manager Rosebud Rehabilitation Unit
Ms A Saliba RN BSc Health Sciences
Nurse Unit Manager Gunnamatta
Ward Mornington Centre
Mrs H Forrester Dip Comp Nsg
Nursing [NZ]
Nurse Unit Manager Sorrento
Ward Mornington Centre
Ms E Campbell BB Nsg Post Grad Cert Gerontics
Operations Director Continuing Care
Ms L Jameson BAppSci(SpPath) MSNA Grad Dip PGDS (Oxford)
Site Manager/Principal Nurse
Rosebud Residential Aged Care Services (incorporating Jean Turner Nursing Home and Lotus Lodge Hostel)
Ms M Cook RN BAppSci Nsg
Manager Rosebud House
Ms B Williams RN
Nurse Manager Jean Turner
Community Nursing Home
Ms K Mackenzie RN BNSng
Manager Rosebud Lotus Lodge Hostel
Mr J Alexander RN Div 1 to 02/09
Ms N Mew RN BNSng [Acting] from 02/09
Nurse Manager Carinya
Residential Aged Care Unit
Ms C Graham RN Div 1 BNSng
Nurse Manager Michael Court Hostel
Mr D Morgan RN Div 18.3
Director Social Work & Integrating Care
Mr P Colosimo BSW (Hons) DipBus
Director Physiotherapy, Prosthetics and Sub-acute Ambulatory Care
Ms J Roberts BSc, BAppSci
(Diploma) Diploma AppSci (Community Health) Dip Health/Community Services Master Health Service Mgmt
Mr P Colosimo BSW (Hons) DipBus
Director Occupational Therapy, ITH and Improving Care for Older People
Ms A Watts BAppSci (OCCPty)
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<td>ACHS</td>
<td>Australian Council on Healthcare Standards (Rankings include: MA – moderate achievement, EA – extensive achievement, OA – outstanding achievement)</td>
</tr>
<tr>
<td>ACSAA</td>
<td>Aged Care Standards and Accreditation Agency</td>
</tr>
<tr>
<td>ATSI</td>
<td>Aboriginal and Torres Strait Islanders</td>
</tr>
<tr>
<td>CAC</td>
<td>Community Advisory Committee</td>
</tr>
<tr>
<td>CALD</td>
<td>Culturally and Linguistically Diverse</td>
</tr>
<tr>
<td>COPD</td>
<td>Chronic Obstructive Pulmonary Disease</td>
</tr>
<tr>
<td>DHS</td>
<td>Department of Human Services - administers the State Government's health and welfare programs</td>
</tr>
<tr>
<td>ED</td>
<td>Emergency Department</td>
</tr>
<tr>
<td>EFT</td>
<td>Equivalent Full Time - used in relation to number of staff employed</td>
</tr>
<tr>
<td>GP</td>
<td>General Practitioner</td>
</tr>
<tr>
<td>K.I.D.S Auxiliary</td>
<td>Knowledge Investigation Development and Study Auxiliary</td>
</tr>
<tr>
<td>LOS</td>
<td>Length Of Stay</td>
</tr>
<tr>
<td>MAPU</td>
<td>Medical Assessment and Planning Unit</td>
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<tr>
<td>OH&amp;S</td>
<td>Occupational Health &amp; Safety</td>
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<tr>
<td>PACS</td>
<td>Picture Archiving and Communications System</td>
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<tr>
<td>PCHS</td>
<td>Peninsula Community Health Service</td>
</tr>
<tr>
<td>RAD</td>
<td>Response Assessment Discharge team</td>
</tr>
<tr>
<td>ROSS</td>
<td>Residential Outreach Support Service</td>
</tr>
<tr>
<td>SHARPS</td>
<td>Southern HIV/HEP Resource and Prevention Service</td>
</tr>
<tr>
<td>SMICS</td>
<td>Southern Metropolitan Integrated Cancer Service</td>
</tr>
<tr>
<td>SRS</td>
<td>Supported Residential Service</td>
</tr>
<tr>
<td>WIES</td>
<td>Weighted Inlier Equivalent Separations. Each patient is assigned a resource weight which is dependent on the primary reason for admission. The resource weight determines the amount of funding received for providing care.</td>
</tr>
<tr>
<td>YES</td>
<td>Youth Employment Scheme</td>
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