

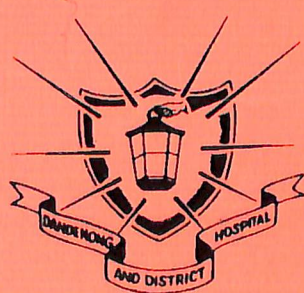
DANDENONG AND DISTRICT HOSPITAL

48th ANNUAL REPORT



Growing

with



the

Community

OUR COVER

Reflecting our hospital's growth with the community is Mrs Margaret Newton and members of her family, pictured here in our Children's Ward.

Mrs Newton has had a long association with the hospital dating back to the 1950's, when she ran pantomimes to help building projects at the hospital.

Earlier this year two of Mrs Newton's great-grandson's were patients in the hospital concurrently. Christopher Lee (pictured left), was in Children's Ward and Bradley Pitcher (right), was born one month prematurely and spent the first weeks of his life in the hospital's Special Care Nursery.

Both children are now fit and well, and are an example of the special and long lasting ties our hospital has with the community it serves.

Growing

with



the

Community

CLEELAND SECONDARY COLLEGE
23 Ann Street, Dandenong 3175

DANDENONG AND DISTRICT HOSPITAL

The theme chosen for our Annual Report this year is "Growing with the Community", and embodies the hospital's challenge of maintaining the highest level of patient care within a rapidly growing and changing service area.

As we continue to meet this challenge, I take this opportunity on behalf of the Committee of Management, to express our appreciation to all staff for their important role during the past year in the provision of optimal patient care.



Chief Executive Officer
B.M. Edgar,
B.H.A.(N.S.W.), Dip. Hosp.
Admin., A.H.A., C.H.A.

DANDENONG AND DISTRICT
HOSPITAL
DAVID STREET, DANDENONG
VICTORIA, 3175.
TELEPHONE: (03) 791-6000
FAX: 792-5709

Honorary Solicitors
Hardys

Auditor
Charlwood Partners
as agents for
Auditor General, Victoria

Banker
National Australia Bank Limited

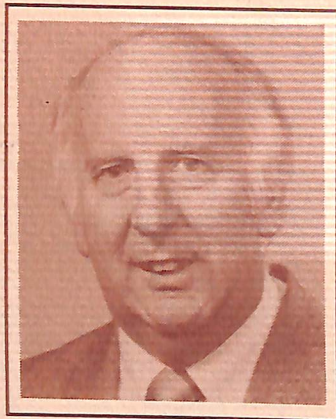
48th ANNUAL REPORT

The 48th Annual Report is for the Year
ended 30th June, 1989

CLEELAND SECONDARY COLLEGE
23 Ann Street, Dandenong 3175

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PRESIDENT
MR. K.J. GODFREY

Mr. Godfrey first joined the Committee of Management in 1967 completing that term in 1978. He commenced his second term in 1983 and is currently President. Mr. Godfrey is the Managing Director of his own plumbing business in Dandenong.



SENIOR VICE-PRESIDENT
MRS. J.G. BATEMAN, O.A.M.

Mrs. Bateman who is a Member of the Order of Australia joined the Committee of Management in 1984. She is currently Senior Vice-President and is a past Mayor of the City of Berwick.



VICE-PRESIDENT
HONORARY TREASURER
MR. R. HARMAN
A.A.S.A., A.C.I.S., C.P.A.

Mr. Harman joined the Committee of Management in 1984. He was appointed the Honorary Treasurer in 1985 and is also the current Vice President. Mr. Harman is a Public Accountant and practices in Dandenong.

Committee of

MR. M. OLDMEADOW
B.A., Dip.Ed., M.A.C.E.

Mr. Oldmeadow joined the Committee of Management in 1977 and has served two terms as President in 1982/83 and 1983/84.

Mr. Oldmeadow is a former Principal of the Chandler High School and a former Federal Member of Parliament.



MR. G.F. SOUTHAM

Mr. Southam joined the Committee of Management in 1978 and has served as Vice President and President in 1986/87.

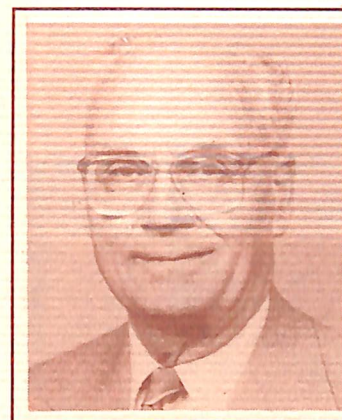
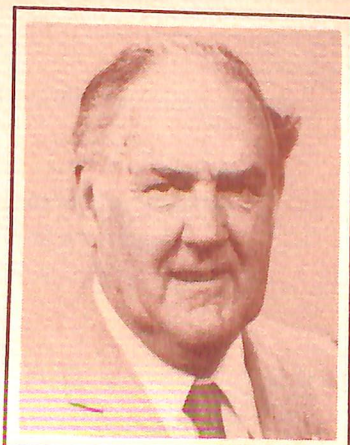
Mr. Southam is a professional photographer and conducts his own business in Dandenong.



MR. L.R. TAYLOR

Mr. Taylor joined the Committee of Management in 1960 and has been the Assistant Treasurer since 1985 having served as the Honorary Treasurer for many years.

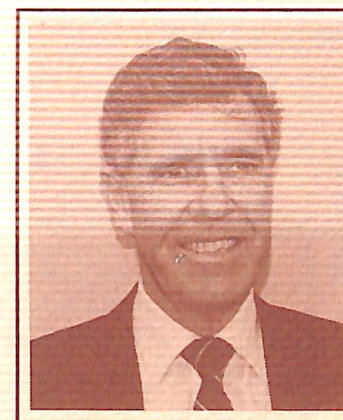
Mr. Taylor's Dandenong based company manufactures agricultural implements.



DR. G.J. JEFFREY
M.B., Ch.B., D.Obst.R.C.O.G.

Dr. Jeffrey joined the Committee of Management in 1970 and was President in 1974/75.

He has been a member of the Visiting Medical Staff Council since 1958 and is a member of the Finance Committee. Dr. Jeffrey is a General Practitioner in Dandenong.



MR. R.N. DICKSON

Mr. Dickson was President of the Committee of Management in 1984/86 having joined the Committee in 1978. He is a member of the Patient Care, Executive, Consultative, House & Works and Future Planning Committees.

Mr. Dickson is a Real Estate Agent with a company based in Dandenong.



DR. B. BUTLER
M.B., B.S., F.R.C.O.G., F.R.A.C.O.G.

Dr. Butler joined the Committee of Management in 1987 and is a member of the Electoral College.

Dr. Butler is a specialist Obstetrician and Gynaecologist practising in Dandenong.

Management 1988/89

DR. R. deC. TUNBRIDGE
M.B., B.S., B.Sc., F.R.A.C.G.P.

Dr. Tunbridge first joined the Committee of Management in 1965 completing that term in 1970. He commenced his second term in 1973 and was President in 1969/70. Dr. Tunbridge is a General Practitioner. Resigned 20/12/88.



MRS. D.A. ROGERS
Dip.Ed.

Mrs. Rogers joined the Committee of Management in 1987 and is a member of the House and Works Committee. She is a member of the Westernport Drug & Alcohol Service and is a Past-President of the Dandenong Chamber of Commerce.

Mrs. Rogers is the Principal of the Dandenong Business College.

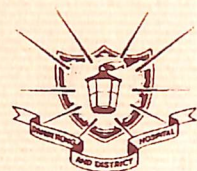


MRS. A. LEWIS-NICHOLSON
M.A.(Hons), Dip.of I.H.S.A.(U.K.)

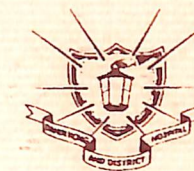
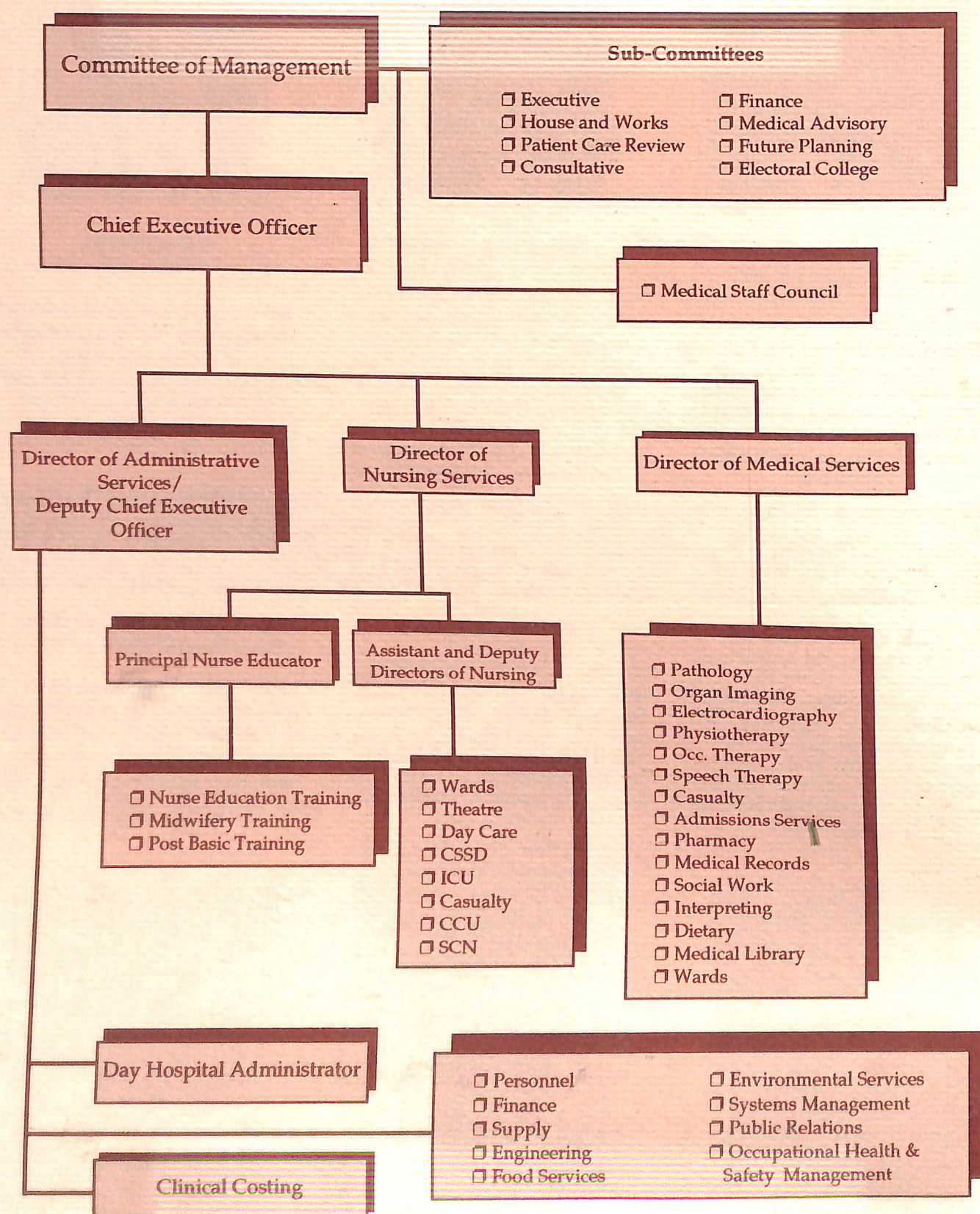
Mrs. Lewis-Nicholson joined the Committee of Management in 1987 and holds a Master of Honours in History.

Mrs. Lewis-Nicholson assists her husband in his pastoral duties as Vicar of St. Luke's in Mulgrave. Resigned 27/2/89.





ORGANISATION CHART



Executive Officers

Chief Executive Officer
B.M. Edgar, B.H.A.(N.S.W.), Dip. Hosp. Admin., A.H.A., C.H.A.

Director of Nursing
M/s. L. Root, R.N., B.H.A.(N.S.W.), Dip. N. Admin.

Director of Medical Services
R.P. Evans, M.B., B.S., F.R.A.C.G.P., F.R.A.C.M.A., M.A.C.S.

Director of Administrative Services
G.C. Gleason, B.H.A.(N.S.W.), A.H.A., C.H.A.

Nominated to Sub Committees

Nominated to Patient Care Review:

By Medical Staff Council:
Dr. J. Goy, M.B., B.S.(Hons), F.R.C.P.(Edin), F.R.A.C.P.
Mr. B. Mac C. Jones, M.B., B.S., F.R.A.C.S.
Dr. W. Shearer, M.B., B.S., F.F.A.R.A.C.S.

Nominated to Consultive Committee:

By Medical Staff Council:
Dr. G. Downe, M.B., B.S., D.Obst.R.O.C.G., Dip.R.A.C.O.G., F.R.A.C.G.P.
Dr. J. Goy, M.B., B.S.(Hons), F.R.C.P.(Edin), F.R.A.C.P.
Dr. D. Yoffa, M.B., B.S., F.R.A.C.S.

Nominated to Electoral College

By Medical Staff Council (5 voting members):
Dr. J.H. Maynard, M.B., B.S., F.R.C.P.A., M.A.S.M., M.A.S.C.P., A.F.A.I.M.
Dr. B.L. Butler, M.B., B.S., F.R.C.O.G., F.R.A.C.O.G.
Dr. D. Vissenga, M.B., B.S., L.R.C.P., M.R.C.S., D.Obst.R.O.C.G.
Dr. P.H. Billimoria, M.B., B.S., M.D., F.R.A.C.P., M.R.C.P.(U.K.)
Mr. C.A. Troy, M.B., B.S., F.R.A.C.S., F.R.C.S.
Dr. R. Rasiah, M.B., B.S., M.R.C.O.G., F.R.A.C.O.G.
Miss E.A. Shanahan, B.Sc., M.B., B.S., F.R.A.C.S.

By Royal Australian College of Physicians:
Dr. R.H. Redston, M.A., M.B., Chir.D.Obst., R.C.O.G.(London), M.R.C.P., F.R.A.C.P.

By Royal Australian College of General Practitioners:
Professor N. Carson, M.B., B.S., (Melb), F.R.A.C.P., F.R.A.C.G.P.

By Faculty of Anaesthetics Royal Australasian College of Surgeons:
Dr. I. Rechtman, M.B., B.S., F.F.A.R.A.C.S.

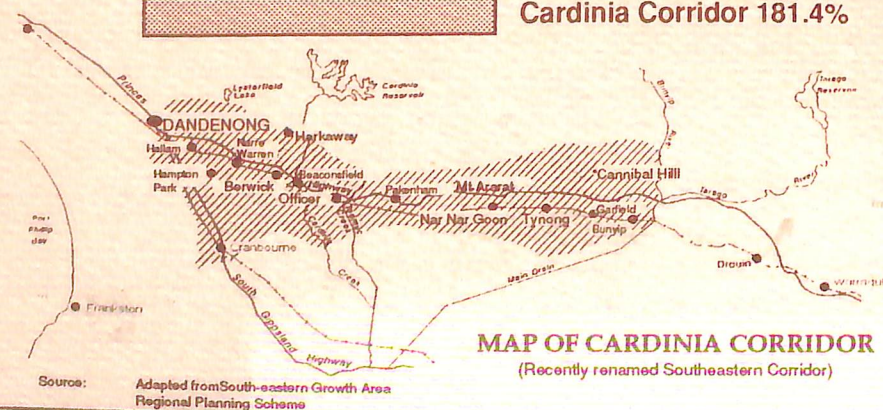
By Royal Australasian College of Surgeons:
Mr. A. Macleod, M.B., B.S., F.R.A.C.S.

By Monash University (3 Voting Members):
Professor R. Porter, B.Med. Sc., D.S.C. (Adelaide), M.A., B.C.H., D.M.(Oxon), F.A.A., F.R.A.C.P.
Professor A.L. Clark, M.D., B.S., F.R.A.C.P.
Professor B.G. Firkin, B.Sc.(Med.), M.B., B.S., (Syd.) F.R.A.C.P., F.R.C.P.A.
Professor V. Marshall, M.B., B.S., F.R.A.C.S., F.A.C.S.
Ass. Professor J.F. Masterton, M.B., B.S., Ch.B.(Glas.), D.Obst., R.C.O.G., F.R.C.S., F.R.A.C.S.
Professor P. O'Brien, M.B., B.S., F.R.A.C.S., M.D.
Professor M.L. Wahlqvist, G.Med.Sc., M.B., B.S., M.D.(Adelaide), M.D.(Uppsala), F.R.A.C.P., F.A.I.F.S.T.
Professor C. Wood, M.B., B.S., (Melb.), F.R.C.S., F.R.C.O.G., F.R.A.C.O.G.
Dr. S. Holdsworth, M.D., M.B., B.S., Ph.D., F.R.A.C.P.
Ass. Professor K.A. Myers, M.B.M.S(Melb.), F.R.A.C.S., F.A.C.S.
Dr. M. duC Tronson, M.B., B.S., D.A. (Lond.), F.F.A.R.A.C.S.
Dr. P. Mackay, F.F.A.R.C.S., F.F.A.R.C.S.(Eng.), D.A., D.A.(Eng.)

THE YEAR IN REVIEW

The continuing significant population growth in the sub-region remains the dominant influence on the hospital's activities. Considerable strain is placed on all services as a result of the increasing real needs.

The actual number treated was 14,732, some 67 in excess of the objective and a significant increase (5%) on 1987/88. The increase over two years in the number of patients treated per annum is 15.5%. This has been achieved by reducing the length of stay for patients and as a result of increased funding provided by the Health Department Victoria by way of waiting list initiatives, extra service agreements and a Post Acute Programme. The Region's support of these initiatives is appreciated.

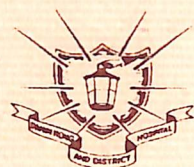


To enhance the hospital's ability to deliver service to an increased number of inpatients, Goal 2 of the Health Service Agreement aimed to reduce the average length of stay in hospital for inpatients from 7 days to 6.8 days.

As a result of the success in arranging the post acute care of the patients by the Geriatric Assessment Unit, a grant of \$186,000 was received from the Commonwealth Post Acute/Palliative Care Programme. This covered the cost of treating additional acute patients able to be admitted to Dandenong and District Hospital.

The specialities with the greatest numbers on the waiting list are General Surgery, Orthopaedics and Plastic Surgery. In the period 1st July 1986 to 30th June 1989, the throughput of waiting list type patients for these specialities has increased significantly as listed in the table below.

	86/87	87/88	% INCR.	88/89	% INCR. 2 YEARS
General Surgery	342	458	34	488	43
Orthopaedics	134	157	17	272	103
Plastic Surgery	90	75	-17	106	18



Even with this significant increase in waiting list throughout the number of patients on the waiting list awaiting admission at 30th June 1989, had increased to 840 patients.

The factors contributing to this increase are growth in the population resident in the hospital's catchment area and the decreasing levels of health insurance held by patients. This latter factor leads to an increasing reliance by the population on the public hospital system.

Ward Management Strategy

The objective of Goal 6 of the Health Service Agreement, was to establish at least four medical/surgical units of defined groups, to adopt a team approach to patient care in an endeavour to enhance quality and efficiency. Evaluation was to be based on impact on length of stay and throughput.

Some nine units are now established and functioning and are developing organisational improvements such as team structure and discharge planning. As reported elsewhere, both the throughput and length of stay have improved significantly during 1988/89, suggesting that the ward management strategy is contributing to effectiveness of patient care.

Evaluation of this goal is ongoing. A longer term plan has been developed and will be the subject of further consultation.

Freedom of Information Act

F.O.I. requests handled during 1988/89 totalled 58. Access in full format was granted in all cases with an average wait of 15 days. The majority of requests were for access to the persons medical record.

DEVELOPMENT PROJECTS

Clinical Costing

This year saw the hospital embark on a venture which is relatively new to the health care field as a whole, namely: Clinical Costing.

Dandenong and District Hospital is one of six hospitals which have been funded by the Health Department of Victoria, to set up a Clinical Costing program. The funding has allowed the hospital to make significant expansion to its existing McDonnell Douglas computer system, implement new feeder software packages and employ a manager to set up and implement the Clinical Costing System.

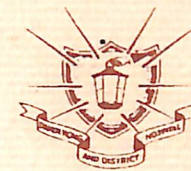


Above. Mr Chris Grylls (seated), Clinical Costing Manager, reviews costing figures with Chief Executive Officer, Mr Barry Edgar (left), and Director of Administrative Services, Mr Greg Gleason.

Clinical Costing is a management tool which takes computerized information flows and derives from these the costing of patient care.

The hospital believes that Clinical Costing and the Disease Related Grouping data, which is derived in conjunction with the Clinical Costing process, is a very important part of the future of health care delivery. Every effort is being made to ensure that Dandenong and District Hospital is keeping abreast of the latest trends.

This activity significantly achieved the objectives of Goal 4 of the Health Service Agreement.



Medical Teaching

The hospital has for many years participated in medical undergraduate training as part of the Monash University Medical School. A formal Affiliation Agreement was signed in January 1986 and discussions have been ongoing with a view to increasing the hospital's involvement and developing the quality of the education program.

During the year, Professor Graham Schofield retired from the position of Dean of the Faculty of Medicine, Monash University. The hospital records its appreciation of his involvement both in establishing a formal affiliation and as a member of the hospital's Electoral College.

We welcome the appointment of Professor Robert Porter as Dean of the Faculty of Medicine, Monash University, and look forward to involvement in future planning for medical teaching.

Discussions with Monash Medical Centre and Frankston Hospital have been held to progress the aims of Goal 7 of the Health Service Agreement, which were to finalize plans for undergraduate and postgraduate teaching arrangements with Monash University. Whilst plans have not been finalized, the process is ongoing.

Co-Generation

A major Engineering Services development being planned in accordance with Goal 8 of the Health Service Agreement is the installation of a gas turbine, Co-generation facility, with an estimated capital cost in the order of \$5m dollars.

This plant would generate electricity for the hospital and provide power into the S.E.C. grid. Waste heat would



Above. Members of the Emergency Department Redevelopment Team meet to discuss progress on building developments. Pictured from L. to R. Mrs Lillian Provan (Finance Dept.), Mr Barry Edgar (C.E.O.), Sister Claire Clark (Emergency Dept.), Dr Mary Buchanan (Emergency Dept.), Mr Denis King, (Engineering Dept.), and Dr Johannes Wenzel (Director of Emergency Dept.).

be captured and used as a secondary energy source.

Consultants engaged by the hospital and the Health Department Victoria, consider the proposal to be a viable commercial exercise. The Health Department on behalf of Dandenong and District Hospital, and seven other hospitals proposing similar installation, will document and call for interest from suppliers of equipment and financial organizations to ensure that maximum advantage is taken of the scope of the Co-generation proposals.

Goal 8 of the Health Service Agreement proposed that the turbine and associated equipment would be installed and commissioned during 1988/89. The scope of the total programme for the eight hospitals and the logic of the Health Department Victoria approach of a combined tendering are accepted and commissioning is now likely to be late 1990 or early 1991.

Emergency Department

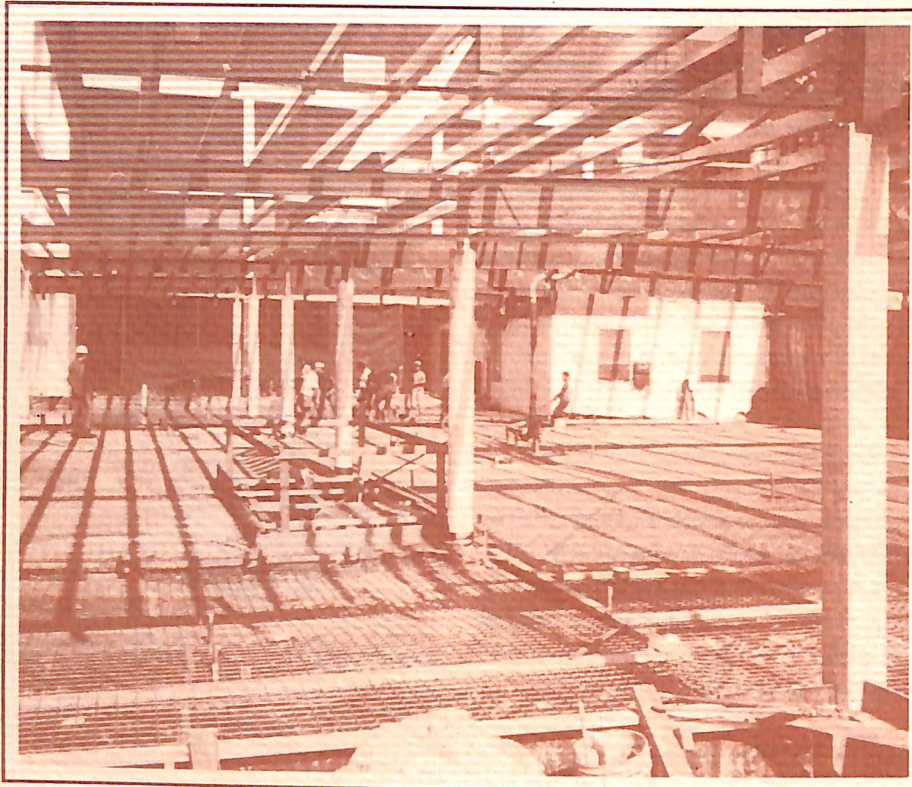
Last year's Annual Report stated that approval had been received to extend and upgrade the Emergency Department at a cost of \$3.7m.

Goal 9 of the Health Service Agreement was to achieve completion of 75% of the building works by the 30th June, 1989. It is very pleasing to be able to report that Stage 1, the extensions of the Emergency Department, have been completed and handed over to the hospital by Civil and Civic Pty. Ltd. Refurbishment of the existing department and its integration with the extension (Stage 2) is well advanced and the total project will be complete in October 1989. It is equally pleasing to report that the project will not only be completed on time but within budget. Civil and Civic, the consultants and all sub-contractors are to be congratulated on the manner in which this project has been managed.



A significant proportion of the savings on the Emergency Department contract, in conjunction with a major donation from the Dandenong and District Hospital Ladies Auxiliary, will be used to acquire a new P.A.B.X. telephone system for the hospital. Installation of the P.A.B.X. will take place in August 1989.

Right. Construction work commences in October on Emergency Department redevelopment.



Below. Lyn Mack, Charge Nurse of North 2 (Orthopaedic) Ward, attends to one of the many road trauma patients the ward treats each year.



Replacement of Orthopaedic Wards

A second major building project was formally approved at the end of the 1988/89 year, namely the replacement of the North Ward Orthopaedic Unit. The intent of Goal 10 of the Health Service Agreement has therefore been achieved.

The project has been approved at an end cost of \$5.07m. Construction will commence in July 1989 and be completed in twelve months.

The support of the State Government, Local Members of Parliament, Health Department Victoria and in particular Region 8 and Facilities Development in gaining Funding in a difficult financial climate, is greatly appreciated.



FINANCE

The financial performance during 1988/89 is detailed in the audited statements printed later in this report. The outcome has been very positive.

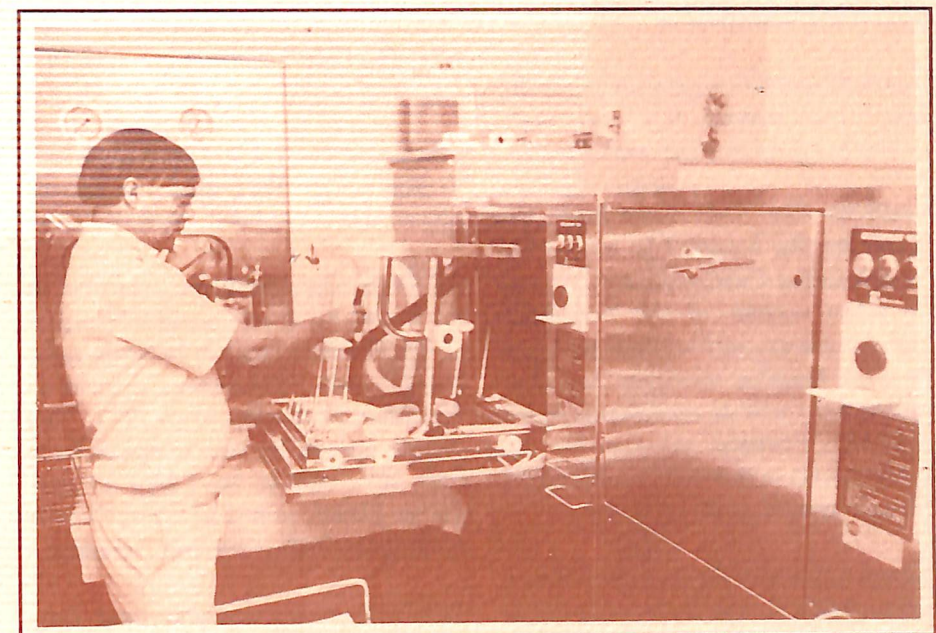
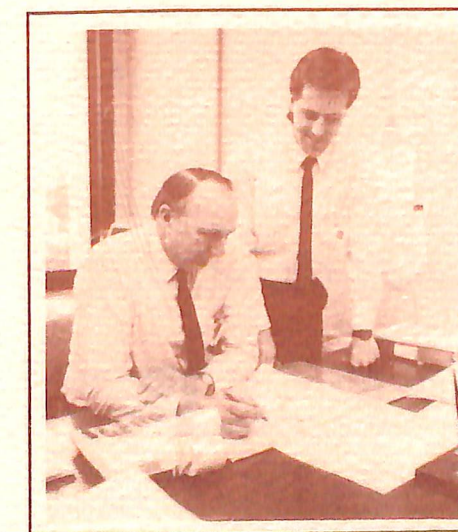
Cash payments for the year at \$46.064m are within 0.06% of budget. At the time of writing, final wrap-up of budgets was not complete, however it is anticipated payments may exceed budget by only \$25,000 on completion of that task.

Receipts at \$7.6m for inpatients, outpatients and other revenue, exceeded budget by \$327,000, also an excellent outcome.

These results were achieved in a year where inpatient throughput exceeded budgeted levels and the length of stay for inpatients was reduced.

Above right. Mr Ted Trent, Nursing Attendant, loads the Central Sterile Supply Department's new instrument sterilizer with medical equipment. The sterilizer was purchased with funds raised by the Dandenong Business College's annual 48 Hour Typathon.

Below. Hospital Chief Accountant Malcolm Finlayson (right) reviews spreadsheets with Accountant Doug Bolam.



IMPORTANT DEVELOPMENT PROJECTS

A number of projects have been funded by Grants and Donations during the year. These include -

Patient Monitors for the Emergency Department	\$90,000
Emergency Department Furniture and Equipment	\$185,000
Fire Alarm Panel	\$50,000
Renovation of South Ward Bathrooms and Toilets	\$50,000
Renovation of Centre Block Bathrooms and Toilets	\$50,000
Fire Main Replacement	\$25,000
Echocardiograph Equipment	\$160,000
Gastroscope	\$15,000
Instrument Sterilizers Central Sterile Supply Department	\$32,000
Upgrade of Pathology Department Airconditioning Systems	\$275,000



FUTURE PLANNING

In order to continue growing with the community served, it is important for the hospital to plan well ahead.

Healthfac Pty. Ltd., have been engaged by the hospital to study the growth in the Cardinia corridor and the other sectors of the hospital's catchment area, and estimate demand for acute hospital services. A subsequent study will develop options for providing hospital services for the rapid growth in Berwick, Cranbourne, Pakenham and parts of Knox.

Region 8, Health Department Victoria in conjunction with the hospital, is planning to establish estimates of real needs in the area and develop plans for the future.

CHANGES TO MANAGEMENT

Re-Appointments - Committee of Management

Mrs. Doreen Rogers, Mrs. Alison Lewis-Nicholson, Dr. Barry Butler, Mr. Rowan Harman were re-appointed to the Committee of Management in September 1988 for three year terms.

During the year Mrs. Lewis-Nicholson and Dr. Raoul Tunbridge resigned from the Board.

Mrs. Lewis-Nicholson joined the Board in December 1987 and we record appreciation for her contribution.

Dr. Tunbridge had been a Member of the Board for 21 years and a Member of the Medical Staff in various roles for 33 years. He served a term as President of the Board in 1973. The people served by this hospital have been fortunate to have had a Committee Member and Medical Officer with such dedication and initiative.

The dedication, expertise and time contributed by all Board Members is recorded with thanks.

APPRECIATION

We would close this 48th Report by expressing appreciation to those who have assisted this hospital over the last year to enable it to grow with the community.

The members of staff, the Medical Board, the Auxiliaries, have all contributed significantly.

To the media and in particular, the Dandenong Journal, we express thanks.

Local Parliamentary Representatives

Mr. Terry Norris, Mrs. Jan Wilson, Mr. Rob Jolly, Mr. Fred van Buren and Mr. Bob Ives, have again shown keen interest in support of the hospital.

Councillor Wal Turner, Mayor, and the Dandenong City Council, have continued to actively promote the growth of the hospital.

The Health Department Victoria, in particular M/s. Joan Spiller and the staff of Region 8, have worked closely with the hospital. Their support and understanding is appreciated.

The excellent results achieved this year are in a large part due to the management skills of the Director of Nursing, M/s. Lyn Root, Director of Medical Services, Dr. Peter Evans, Director of Administrative Services, Mr. Greg Gleason and the Departmental Managers. We express thanks for their dedication and abilities.



Above. Retiring after 33 years of service to the Hospital, Dr Raoul de Crespigny Tunbridge (centre) is presented with a "Letter Under Seal" by Hospital President Mr Ken Godfrey (left), watched by Hospital C.E.O, Mr Barry Edgar.

K.J. GODFREY
President

BARRY M. EDGAR
Chief Executive Officer



OUR PERFORMANCE

SERVICE, ACTIVITY AND EFFICIENCY MEASURES

	1988/89	1987/88
INPATIENTS TREATED -		
ACUTE	1,833	929
SAME DAY PROCEDURE	9,162	8,627
EMERGENCY		
ELECTIVE	1,632	2,297
-SURGICAL/MEDICAL	2,105	2,162
-OBSTETRIC		
TOTAL	14,732	14,015
AVERAGE LENGTH OF STAY (DAYS)	6.8	7.01
PATIENT DAYS		
NHT PATIENTS	3,637	5,352
OTHER	96,215	92,904
% OCCUPANCY	91	90
OUTPATIENT ATTENDANCES		
TOTAL	146,537	142,717
ACCIDENT/EMERGENCY	31,978	34,379
MEDICAL CLINIC/THERAPY	114,559	108,338
EFFICIENCY		
UNTRIMMED DRG WEIGHT	(1987/88) 0.8482	0.8482
TREATMENT COSTS		
TOTAL INPATIENT COSTS - OPERATING FUND	\$40,208,281	\$35,276,976
TOTAL OUTPATIENT ATTENDANCE COSTS		
-OPERATING FUND	\$8,186,855	\$7,969,560
COST PER INPATIENT TREATED	\$2,729	\$2,517
COST PER INPATIENT DAY	\$402	\$359
COST PER INPATIENT TREATED - DRG ADJUSTED	\$474	\$423
COST PER OUTPATIENT ATTENDANCE	\$55	\$55
QUALITY ASSURANCE		
ACCREDITATION STATUS	FULL	FULL

REVENUE INDICATORS

	Average Days to Collect	
	1988/89	1987/88
Private Inpatient Fees	43.08	44.16
TAC Inpatient Fees	68.08	91.29
ACC Inpatient Fees	86.76	127.96
DVA Inpatient Fees	105.71	122.40

DEBTORS OUTSTANDING

AS AT 30TH JUNE 1989

	NO.	UNDER 30 DAYS \$	NO.	31-60 DAYS \$	NO.	61-90 DAYS \$	NO.	OVER 90 DAYS \$	NO.	TOTAL 1989 \$	TOTAL 1988 \$
PRIVATE INPATIENTS	238	199,850	72	69,325	32	25,824	43	28,744	385	323,743	290,639
TAC INPATIENTS	53	170,667	27	89,684	5	16,933	35	43,300	120	320,584	355,000
ACC INPATIENTS	32	64,113	19	16,512	13	29,848	30	51,531	94	162,004	247,000
DVA INPATIENTS	20	26,657	28	32,216	13	17,366	12	13,497	73	89,736	97,672
TOTAL	343	461,287	146	207,737	63	89,971	120	137,072	672	896,067	990,311



OPERATING EXPENSES FOR YEAR ENDED 30TH JUNE 1989

	INPATIENT	OUTPATIENT	DAY HOSPITAL	TOTAL 1989	TOTAL 1988
	\$	\$	\$	\$	\$
1. PATIENT CARE SERVICES					
(A) HOSPITAL SERVICES					
WARDS					
- ACUTE	2,149,326	-	-	2,149,326	2,313,007
- SPECIAL	320,394	-	-	320,394	-
- OTHER	2,140,630	-	-	2,140,630	1,975,213
- NURSING HOME TYPE	-	-	-	-	-
- MIDWIFERY	2,846,465	-	-	2,846,465	2,392,584
- MEDICAL/SURGICAL	7,935,811	-	5,547	7,941,358	6,742,070
TOTAL WARDS	15,392,626	-	5,547	15,398,173	13,422,874
- NURSING HOME	-	-	-	-	-
- OPERATING THEATRE	2,047,042	-	-	2,047,042	1,937,309
- SAME DAY PROCEDURES	-	-	-	-	-
- EMERGENCY	-	2,466,811	-	2,466,811	2,504,315
- OUTPATIENT SERVICE	-	35,360	-	35,360	34,793
- CLINICAL UNITS	4,831,116	-	-	4,831,116	4,207,335
- DAY HOSPITAL	-	-	-	-	-
- PSYCHIATRIC	-	-	-	-	-
TOTAL OTHER	6,878,158	2,502,171	-	9,380,329	8,683,752
(B) DIAGNOSTIC & MEDICAL SUPPORT SERVICES					
PHARMACY	564,955	91,969	-	656,924	612,672
PHARMACY SUPPLIES	682,725	111,141	-	793,866	755,146
C.S.S.D.	628,558	102,323	-	730,881	1,049,067
DIAGNOSTIC LABORATORY	1,767,088	1,505,297	-	3,272,385	2,788,729
ORGAN IMAGING	1,047,240	641,857	-	1,689,097	1,657,389
TECHNICAL SUPPORT	-	74,189	-	74,189	55,361
ALLIED HEALTH	622,922	387,746	-	1,010,668	913,611
MEDICAL RECORDS	387,296	63,048	-	450,344	467,335
SUB TOTAL	5,700,784	2,977,570	-	8,678,354	8,299,310
TOTAL (A + B)	27,971,568	5,479,741	5,547	33,456,856	30,405,936
CARRIED FORWARD					



OPERATING EXPENSES FOR YEAR ENDED 30TH JUNE 1989

	INPATIENT	OUTPATIENT	DAY HOSPITAL	TOTAL 1989	TOTAL 1988
	\$	\$	\$	\$	\$
BROUGHT FORWARD	27,971,568	5,479,741	5,547	33,456,856	30,405,936
2. ADMINISTRATION & SUPPORT SERVICES					
(A) ADMINISTRATION					
GENERAL ADMINISTRATION	1,432,672	279,002	26,667	1,738,341	1,728,112
ACCOUNTING/FINANCE	415,646	80,944	-	496,590	494,471
PERSONNEL/PAYROLL	234,335	45,635	315,518	595,488	566,346
EMPLOYEE BENEFITS	2,412,798	469,876	4,852	2,887,526	2,306,441
SUPPLY	206,845	40,282	-	247,127	152,512
NURSING ADMIN.	362,220	70,540	-	432,760	391,317
MEDICAL ADMIN.	440,815	85,846	-	526,661	515,512
TOTAL	5,505,331	1,072,125	347,037	6,924,493	6,154,711
(B) SUPPORT SERVICES					
POWER, LIGHT, HEAT	384,206	74,821	5,275	464,302	399,375
ENGINEERING/MAINTENANCE	912,238	177,652	13,408	1,112,298	956,060
STAFF CAFETERIA	33,520	6,530	-	40,050	65,238
OTHER FOOD & DIETARY	2,521,958	491,134	573	3,013,665	2,860,066
DOMESTIC SERVICES	1,625,960	316,644	-	1,942,604	1,718,979
LINEN, LAUNDRY, SEWING	641,255	124,880	3,899	770,034	671,329
PATIENT TRANSPORT	-	-	11,428	11,428	12,807
H.A.A.C. EXPENSES	-	-	11,490	11,490	-
RESIDENCE	-	-	-	-	-
(INC. NURSES HOME)	34,913	6,799	-	41,712	55,550
REGIONAL SERVICES	48,280	9,402	-	57,682	32,028
SUB TOTAL	6,202,330	1,207,862	46,073	7,456,265	6,771,432
TOTAL (A + B)	11,707,661	2,279,987	393,110	14,380,758	12,926,143
3. TEACHING SERVICES					
NURSING EDUCATION	152,487	29,696	-	182,183	176,873
EDUCATION & TRAINING	143,140	27,875	-	171,015	206,200
TOTAL	295,627	57,571	-	353,198	383,073
4. NON BUDGET ITEMS	1,577,888	1,251,658	9,104	2,838,650	1,951,126
5. ABNORMAL ITEMS	-	-	-	-	-
TOTAL	41,552,744	9,068,957	407,761	51,029,462	45,666,278



GROWTH AND GOALS

MEDICAL

The development of a ward management strategy, one of the goals specified in our health services agreement, has involved the nursing and medical divisions in particular. The medical staff assisted by the formation of clinical units where these have not existed previously. The aim has been to create the circumstances in which a group of doctors representing a particular discipline work together with nurses in a specified ward. The arrangement combined with effective admission and discharge planning is expected to improve efficiency in the utilisation of scarce resources and enable more patients to access modern health technology.

A very considerable demand for urgent treatment has caused progress in ward management to be slow, however, there are early signs that both medical and nursing staff experience greater satisfaction in their work and that patients are experiencing the benefits. The departmental reports which follow highlight the ways in which departments are growing in response to demand for services and at the same time maintaining their standards of quality in the delivery of health care.

CLINICAL REVIEW

Quality Assurance techniques are being applied increasingly by the Medical Staff to monitor the quality of medical care of patients in order to meet the requirements of our growing community.

Apart from the regular thirty or forty scheduled Clinical meetings per month to discuss medical management, there are many other unscheduled meetings.

In addition, the establishment of a Committee organisation provides an overseeing role, monitors and reviews these activities, and considers recommendations which are then passed on to relevant personnel.

A further development has been the production of a Clinical Review Newsletter which is now widely circulated within the hospital community and to outside interested groups including the local District Health Council. This newsletter incorporates outlines of clinical review studies and the conclusions reached over a wide range of clinical areas including inpatients, outpatients, and the various departments and units, i.e. Pathology, X-Ray, Emergency, Theatre, Coronary Care and Intensive Care.

Specific studies are undertaken to investigate and identify areas where there is potential for improving patient management. Clinical audits are being increasingly undertaken for this purpose.



Above. Chairman of the Clinical Review Secretariat, Dr Jim Anastasios (right) peruses a brochure on "Gastroenteritis in Children" produced by the Secretariat, with Clinical Review Co-ordinator Anne Peek and the Hospital's Medical Director Dr Peter Evans.

RESIDENT MEDICAL OFFICERS

At a time when the hospital is increasing its throughput of patients, the number of available Resident Medical Officers is falling due to reduced numbers graduating from universities. In 1989 it was possible to compensate for this partly by expanding the complement of more senior doctors. Thus, to offset the loss of two Interns and one second year Resident, an additional Casualty Registrar was appointed. By reinforcing an already strong Casualty and Critical Care team, the additional Casualty Registrar will improve the care of the increasing load of severely injured and seriously ill patients presenting to the Emergency Department.

In addition to providing essential Resident Medical Officer service to an increasing number of hospital patients, many of the hospital's R.M.O.'s are preparing for careers in several specialist areas of medicine including Accident and Emergency, Anaesthetics, General Practice, Medicine and Surgery. A comprehensive educational programme is conducted in several of these areas. The interweaving of ongoing service provision and post-graduate training results in doctors well-trained to meet the growing needs of both the hospital and the community.



NUTRITION DEPARTMENT

As part of the medical care team, dietitians have been working to locate inpatients at high nutrition risk. A greater number of high dependency and unconscious patients requiring nutrition support has increased our workload.

A major part of our work is inpatient education, and we meet with patients and relatives on a regular basis.

Establishment of medical units and specialist ward areas has improved communication with staff, allowing nutrition education to be completed in optimum time prior to discharge.

Dietitians appreciate the support of Diet Monitors who cope with daily menu ordering and visit patients regarding meals at short notice.

Nutrition Department staff have met the challenge of decreased patient stay.

INTERPRETING SERVICE

Throughout the year the Interpreting Service has continued to perform its vital role of facilitating the communication between our non-English speaking patients and hospital staff.

The new services established at the Hospital, such as the Orthopaedic Clinic and the Geriatric Assessment Unit have led to an increase in workload. In addition, it is envisaged that the extension of the Emergency Department will result in further demand for interpreting services as migrant Australians tend to be over-represented in the group of people who attend public hospital emergency departments.

PHARMACY DEPARTMENT

For the first time since 1983 we have been able to recruit a full complement of pharmacists. As a result we have re-implemented our drug information service. Department goals still to be achieved include renovations in the preparation and dispensary areas, and the development of an appropriate computer system.

vated and refurbished as part of the new Emergency Department project. We now have a reading/study area separate from the journal and book stacks. There are only a few minor details to finalise and the renovations will be complete. The new Library layout has enabled us to provide a larger and more open reading and study area which is a great improvement on the old area.



Above. Dietitian Lisa Cochrane takes nutrition to the community with a special weight loss study programme funded by the Victorian Health Promotion Foundation.

MEDICAL LIBRARY

Over the past year the Medical Library has commenced work in several areas that were overdue for attention. The book and journal collections were examined to assess their adequacy and money has been spent in both areas to update the collection of core text books and provide a more relevant journal collection in keeping with the current direction of the hospital as a whole. A programme of binding journals was also commenced. So far, approximately 70% of our titles have been bound. We hope to continue updating the collection and complete the binding programme in the next year.

During the year the Library was reno-

Over the next few months we will start work on a regular Library newsletter to inform users of services offered, new material added to the collection and any other relevant information. This in turn will alert people to the role of the Medical Library and encourage greater utilisation.

PHYSIOTHERAPY DEPARTMENT

The Physiotherapy Department has had a challenging and productive year. The Orthopaedic Outpatient Clinic continues to refer a steadily increasing number of patients. We are pleased to report that we have been able to treat many more orthopaedic outpatients.



The Geriatric Assessment Unit has been effective in improving patient care. Early discharge indicates more efficient use of hospital resources.

Quality of service is always a major goal. Physiotherapy staff are represented at Clinical Review meetings, postgraduate courses and hold departmental in-service programs. Quality Assurance activities are regularly discussed at staff meetings.

The department provides clinical placement for junior and senior Physiotherapy students. A useful service, as these young people will provide the patient care of the future.

OCCUPATIONAL THERAPY

1988/89 has been a demanding year for the Occupational Therapy Department. Shortage of staff was a problem early in the year, however since September 1988 the department has been fully staffed.

The improvement in hospital patient throughput has presented an increasing challenge to Occupational Therapy. The hospital has striven to maintain high standards of assessment of the patient functional ability and to provide the appropriate aids and equipment to facilitate patients successful discharge home to everyday activity.

The Geriatric Assessment Unit has provided enhanced patient care and enabled earlier discharge through more intensive input from therapists. We were pleased that the hours of the Occupational Therapist and Allied Health Assistant on G.A.U. were increased in September 1988. This fulfills one of the departments goals for 1988/89.

The Group Therapy initiatives of 1987/88 have been extremely well received and demands for group therapy are very high in the areas of relaxation classes, paediatric socialisation groups and weight control groups. In 1988/89 Occupational Therapists have more than doubled the hours spent running groups in order to meet these demands for service.

A request from Nursing Staff this year prompted a new initiative. Occupational Therapy commenced a 6 week relaxation group for nurses and it was immediately filled to capacity. Following the success of the group, a further 6 week relaxation course for nurses will be run in 1989.

The department has increased outpatient services to meet the demands of the orthopaedic outpatient clinic however, this still remains limited due to staffing restrictions.

The Occupational Therapy department continues to offer clinical placements to Occupational Therapists, Allied Health Assistants, Child Care and Work Experience students.

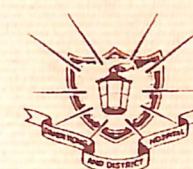
Staff development is actively pursued with in-service programmes, clinical review meetings and seminars regularly attended to ensure the department keeps abreast of the latest developments.

PATHOLOGY DEPARTMENT

The Department of Pathology has grown with the community of this area and in neighbouring zones. The pathologists at Dandenong co-ordinate the pathology services at William Angliss, Knox, and Sherbrooke Community Hospital, Kingston Centre Cheltenham, Dandenong Psychiatric Centre, Woorayl Hospital Leongatha, Korumburra, Wonthaggi and Alexandra Hospitals. Work is shared between the laboratories with the more complex work being performed at the Category 1 laboratory at Dandenong.

This growth has occurred in the last few years and is supported by our active and motivated medical, scientific, nursing and office staff. This has allowed a rationalisation of services to be implemented with a sophisti-

Left. Cultural changes have accompanied the rapid growth experienced by the hospital's service area. Pictured is the hospital's Chief Occupational Therapist, Martie Lowenstein, with a patient from Vietnamese background undergoing rehabilitative treatment.



cated computer base involving all hospitals. For further growth to occur, as it must, extension of the pathology floor space is required as an urgent matter.

The laboratory also caters for local medical clinics and a large number of patients are referred to our hospital pathology service.

With the massive increase in population in the growth corridor through Dandenong, the department will grow even more both in sophistication and quality of service in the coming years.

SPEECH PATHOLOGY

The demand for Parent Education and Direct Therapy programs re: Early Language Intervention for under school-age children, has steadily increased with continued community expansion in the Dandenong and District region.

This department has therefore, due to increased referrals, increased its group therapy activities over the last year, working in liaison with Occupational Therapy Staff, and provides numerous parent education sessions; e.g. to maternal health and child care centres, and kindergartens. It is also a resource centre, providing instructive material for parents to implement home programs.

An increasing number of adult referrals have also been evident in the last year, in particular voice disorders. This is no doubt due to increased Ear, Nose and Throat Specialist services now available and reflective of a growing community.

ORGAN IMAGING

1988/89 has shown the expected growth in the service offered by this department to accommodate the community's needs. The Acuson Computed Sonography

System is now fully in use and we are performing an average of 160 ultrasound examinations a month and we have passed our projected number of Doppler examinations for the year. Several members of staff have undertaken Post-Graduate Diploma studies in Ultrasound and this has further enhanced the service.

C.T. throughput also continues to grow, with an average of over 220 cases each month, and the on-going training of our own staff so that the out-of-hours call service can continue.

In continuation of our role in the community we have two of Victoria's intern radiographers doing their post graduate year in the department, as well as four student radiographers from R.M.I.T.

The flow of patients continues to grow, with a 10% increase of Casualty examinations, and this will probably grow with the new trauma centre, although this may well put considerable pressure on the Organ Imaging service, where our total throughput has increased by almost 2.5%, and will again need to look towards increasing the size of the department if this growth continues.

SOCIAL WORK

This has been a year of change for the Social Work Department: change of staff; change of environment and change of direction.

The Social Work Department have committed themselves to a year of review in an attempt to establish a Future Directions plan which will guide our departmental functioning over the next five years. This review is continuing and has resulted in a commitment of Social Work staff to provide a short-term/crisis intervention service based upon thorough assessment, short term intervention and referral on to community services/re-

sources. This service is directed toward helping patients to cope with the social and emotional implications of illness and hospitalisation, to address crisis situations in critical care cases and appropriate discharge planning.

Given the large number of hospital admissions that come through the Emergency Department and the importance of the critical care areas in this hospital, we are offering a more extensive service to these areas. This is aimed at decreasing inappropriate admissions by attempting to deal with the issue at the Emergency Department level and referring to community and home based supports, and at helping patients and families facing a major crisis to re-establish their coping mechanisms and work toward resolving this situation. One of the limitations of this service, due to funding restrictions, is being unable to provide an after hours and weekend Social Work service to the Emergency Department.

Another initiative in which Social Work has become more actively involved over the past year is the Geriatric Assessment Unit with the establishment of a part-time Social Work position specifically to service this Unit.

DR. R.P. EVANS
Director of Medical Services



GROWTH AND GOALS

The Nursing Service at Dandenong and District Hospital has had another busy and demanding year. The increase in the number of patients treated and cared for, compared with the previous year demonstrates the contribution and commitment that nurses at this hospital have made in attempting to accommodate the needs of the growing population of the area.

Contributing to the increase in numbers of patients treated has been the reduced length of stay and this has represented greater than ever activity levels for nursing staff. The Patient Assessment Information System (P.A.I.S.) continues to be utilized to match the nursing resource to the hours of nursing care required.

P.A.I.S. also demonstrates an upward trend in the acuity of many of our patients, and this factor combined with an increase in the complexity of care has placed additional demands both mentally and physically on nurses at this hospital.

Appreciative thanks goes to each and every member of the nursing division for their untiring and dedicated work this last year.

NURSING

QUALITY ASSURANCE PROGRAMME

The Quality Assurance Programme successfully co-ordinated by Miss N. Ryan, Nursing Projects Officer and involving nurses of various levels and departments in auditing and committee activities has made a major contribution to the maintenance of standards in nursing care.

This programme also provides opportunities for a peer review process for nurses.

NURSING EDUCATION

New Appointments

In January we welcomed Miss Margaret Corkill as Deputy Director of Nursing (Education). Miss Corkill is an experienced and highly regarded midwifery nurse teacher and we wish her every success in her appointment.

SCHOOL OF NURSING

The major role of the School has continued to be in conducting the Midwifery Programmes and as in past

years there have been two intakes of students. In the last year fourteen (14) students successfully achieved registration as midwives with the Victorian Nursing Council. Of these, three students obtained Distinctions, nine achieved credits and two a pass in the State Examination. Sixteen students are currently undertaking this course.

Currently, plans are underway to revise the Midwifery Curriculum in the light of information to be gained from the outcomes of the Ministerial Birthing Services Review and in line with contemporary Nursing Theory and Practice. The major aim will be to link the theoretical content more precisely to practice, focusing on skill acquisition. The skills necessary for patient education will be included as Family Education, as this is recogni-



Above. Director of Nursing, Ms. Lyn Root, at a recent Graduation Ceremony for Student Midwives in the School of Nursing, hands Trudy Timothy her certificate.



sed as an integral part of quality and cost-effective midwifery care. The growth in demand for patient education is evident in the area of parent craft teaching where extra evening sessions have been conducted to accommodate this increase.

Six students are currently undertaking the Critical Care Nursing Course which, as in previous years, is conducted in conjunction with Prince Henry's Hospital. The students thus far have demonstrated a high level of skill attainment and we appreciate the assistance we and they receive from the teaching staff at Prince Henry's.

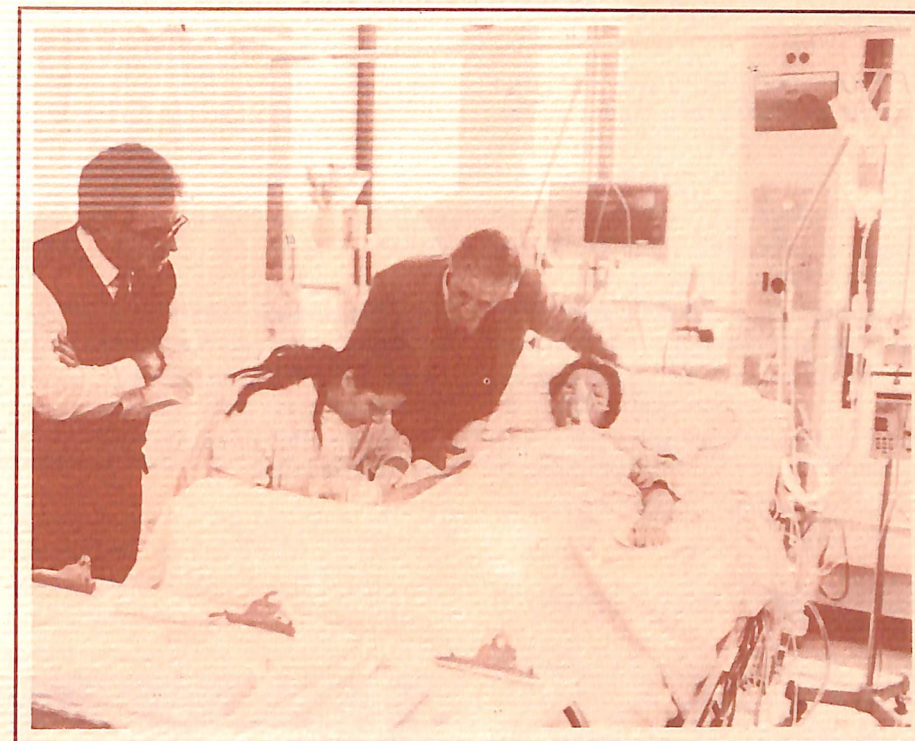
We are pleased to report that both these programmes received further accreditation from the Victorian Nursing Council in March this year.

The Nursing Division has again been pleased to provide clinical experience for undergraduate Diploma of Nursing students from the Chisholm and Lincoln Institutes, Registered Nurses undertaking a refresher course from Outreach Enterprises and nurses undertaking advanced nursing studies.

We appreciate the help of other hospitals and health agencies which provide experience and teaching for our Midwifery and Critical Care students. Our thanks also go to all those who have assisted in teaching in the programmes.

STAFF DEVELOPMENT

In an effort to support the nursing staff in this era of increasing technology, complexity of care and higher acuity levels, to update knowledge and skills or the acquisition of new skills, Ms. Anne Holmyard was appointed as Staff Development Co-ordinator. Ms. Holmyard, an experienced nurse educator, whose professional and personal commitment to



Above. Director of the Intensive Care Unit Mr Bruce Jones (right), and Nurse Educator Mr Irwin Shepherd, supervise Glenda Crees whilst undertaking her Critical Care Certificate training.

nurses and nursing is well recognised and regarded has the brief of helping to identify the educational needs of nursing staff and to organise and co-ordinate educational programmes to meet those needs.

Utilization of the Post Registration Education Advisory Committee (P.R.E.A.C.) funds provided by the Health Department has enabled innovative programmes to be developed as well as the purchase of additional educational aids such as text books and videos. This resource has been used with the primary aim of improving the nursing care of patients.

Nurse Teachers in the School have also responded to this increased need. Some of their diverse activities have included a Safe Lifting and Transfer Technique course for Nursing Attendants and hosting a one day seminar for Registered Nurses addressing the management of pain.

Critical Care Units

Despite some innovative recruitment strategies developed during the last year it remains difficult to recruit a sufficient number of appropriately qualified and experienced registered nurses for our Critical Care Units to accommodate the growth in demand for these services. This has been a major concern and will continue to receive a high priority in the ensuing year.

S.P.I.N. REPORT.

A committee has been established to oversee the implementation of the recommendations of the Report of the Study of Professional Issues in Nursing, as prioritized by the nursing staff.

These priority recommendations were the results of a questionnaire which had been designed and distributed to nursing staff by the S.P.I.N. working party.



INDIVIDUAL ACHIEVEMENTS

Many nurses at this hospital continue to pursue tertiary and other nursing programmes combining their study courses with work commitments, and others have attended workshops and seminars. We offer congratulations to Miss K. Quartermaine, Mrs A. M. Scully and Mrs P. Whiting who were awarded the Bachelor of Applied Science Advanced Nursing (Nursing Administration Major). Mrs E. Hughes, was successful in obtaining a Health Department Scholarship to enable her to study full time this academic year.

SHEILA EWEN PRIZE 1988/89

Mrs C. Kowalski has been awarded the Sheila Ewen prize for excellence in theory and practice during the midwifery course. The Student Midwives Association continues to support this prize and our congratulations go to Mrs Kowalski on her achievement.

VOLUNTEER GROUPS

The nursing staff at this hospital continue to benefit from and appreciate the work of the members of the volunteer groups and organisations. To you all we say a special thank you on behalf of the patients.



APPRECIATION

To the Ministers' Fraternal consisting of ministers from the various denominations that serve our patients and staff, we say thank you and acknowledge gratefully this important service to the hospital.

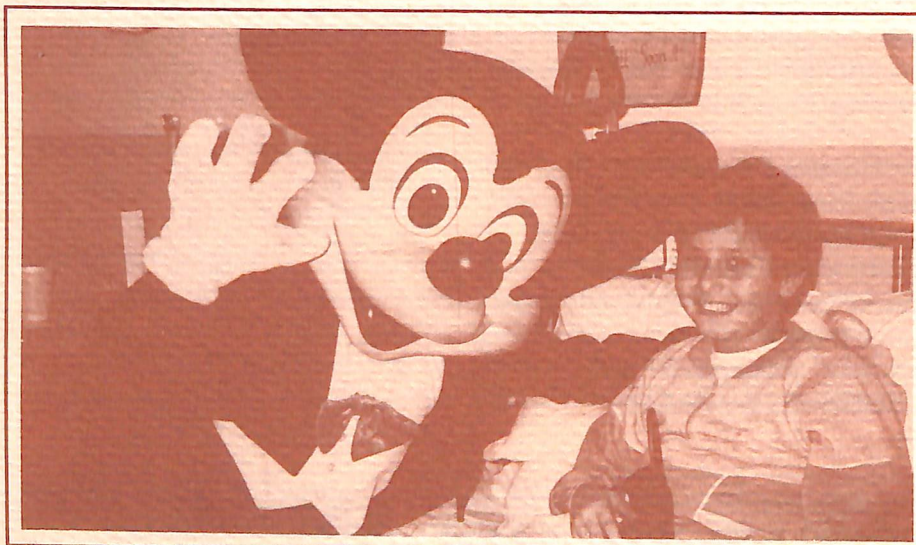
VALE

It is with sadness that we report the death of Mrs Glenda Stewart, Charge Nurse Apex 1. Glenda Stewart was a much loved and highly regarded nurse who is missed by family, colleagues and friends alike.

Requiescat in Pace.

Finally on behalf of the nursing staff, I would like to take this opportunity to express appreciation to the Committee of Management, Mr Edgar, department heads and staff for their assistance and co-operation during the last year and look forward to continued achievement in the coming year.

LYN ROOT (Ms)
Director of Nursing



Above. A highlight of this young patient's stay was the visit by Mickey Mouse to the hospital's Children's Ward during the year.

Left. Winner of this years Sheila Ewen prize, Mrs Jane Kowalski (fourth from left) with fellow midwives on graduation day in the School of Nursing.



GROWTH AND GOALS

ADMINISTRATIVE SERVICES

The very visible construction of high quality patient care is built on a foundation of similar excellence in the provision of an optimum range of non-clinical services - less visible but no less important.

The following summarises a range of endeavours and achievements in the work of the Administrative Services Division in providing such essential foundations for the clinical component of the hospital's work.

CLINICAL COSTING

The appointment of Mr. Chris Grylls and the commencement of the formative stages of the pilot project in clinical costing at Dandenong and District Hospital heralds the commencement of a new era in hospital accountability and comparative analysis. We look forward to the continuing refinement of the clinical costing process as a mechanism to further hone the services provided by the hospital.

SYSTEMS

The provision of \$74,000 in capital funding by the Health Department Victoria has allowed a further upgrade to the Sequel/McDonnell Douglas Information Services Mainframe Computer in use in the hospital. Having successfully completed Stage II of the computer masterplan during the last financial year, it is pleasing to see Stage III (Clinical Costing) and the initial segment of Stage IV being addressed this year.

FINANCE

In the face of substantial difficulties caused by staff changes, the Finance Department has achieved excellent outcomes this year in installing the computerised diagnostic billing system for outpatient services and substantially improving debt collection

performance. In addition, the department has been heavily involved in the establishment work associated with the Clinical Costing Project.

As in past years, charges for hospital services have been in accordance with Health Department Victoria fee schedules for inpatient and outpatient services.

OCCUPATIONAL HEALTH AND SAFETY

This year saw the establishment of a separate Occupational Health and Safety Department under the management of Mr. Roy Williams, who had previously combined this role

with that of Environmental Services Manager. This was a positive step in our ongoing endeavours to achieve the safest possible work environment for our staff, and a key function of Mr. Williams' refined role is to work through the hospital's Safety Committee to ensure correct hazard identification. For the year there were 158 "time lost" accidents involving staff members.

PERSONNEL

The PEERS computer networking system has been further refined during the year, and the hospital is now implementing PERKS/ELMS software on this system.

STAFF LEVELS

	July 1, 1988	June 30, 1989
Nursing	511.70	516.53
Administration and Clerical	127.13	131.39
Medical Support	112.20	117.81
Hotel and Allied	269.42	259.38
Medical	7.13	8.98
R.M.O's	63.24	62.91
Sessional/Clinicians	15.03	14.34



The industrial relations climate has continued at a pleasing level, with no time lost as a result of industrial disputes during the year.

ENVIRONMENTAL SERVICES

With the move of Mr. Williams to concentrate on Occupational Health and Safety, the hospital appointed Mr. Ian Gordon as Environmental Services Manager. Mr. Gordon has implemented a number of enhancements into the department, including the organization of the supervision function and has enhanced the monitoring of linen usage to maximize efficiencies in this area.

ENGINEERING

Although it has been a hectic year, the achievements of the past twelve months have made a very real and positive contribution to the betterment of the hospital. Working almost exclusively with the departments own staff and resources, a major redesign of the workflow in the Central Sterile Supply Department has taken place, and the ventilation and cooling in this area has also been enhanced. In addition, the department has made further significant headway in the ongoing programme of upgrading ward bathroom/toilet/shower facilities, and the redesigned facilities have substantially assisted the ward nursing staff in the care of their patients. In addition to funding the ward bathroom projects, minor works funds were also utilized to upgrade the electrical services to the Day Hospital, and enabled a new main fire indicator panel to be installed, further enhancing the hospital's response in the event of a fire. The Capital Works Program also saw a heavy involvement by the Engineering Department in the provision of a new electrical switchboard (as part of the Emergency Department Upgrade) as well as major involvement in the Emer-

gency Department Refurbishment Project and preparation for the rebuild of North Ward.

SUPPLY

During the year, the Supply Department has made major advances, in fully implementing the computerised supply system on the McDonnell Douglas Computer System, and substantially enhancing and labelling the bulk store goods layout system. This has substantially enhanced the use of pricing slips as part of the computerised stores system.

In addition, the Supply Department is now printing a large quantity of the hospital's own stationery requirements at both reduced cost and increased convenience.

FOOD SERVICES

This year has seen the further refinement of the "Healthy Heart Menu" in use in the hospital, and is pleasing to note that substantial interest has been shown by other hospitals in this menu concept. The Food Services Department is also currently implementing its computerised menu collation system, which will further assist in the provision of high quality catering services to patients, visitors and staff. A less pleasing feature of the year, however, has been the alarming increase in the cost of food stuffs, clearly in excess of the general consumer price index.

PUBLIC RELATIONS

Under the direction of Mr. Peter Garamszegi, who was appointed as Public Relations Manager at the time of last year's Annual Report, the department has made a number of major advances in the past year. At the forefront of these has been the re-establishment of the direct mailing

system, which has been exceptionally effective in fundraising this year.

The Department also played a key role in the organisation and running of the Hospital's inaugural Debutante Ball and participated extensively in the Sydney to Dandenong Charity Run, which was held by the Dandenong Umpires Association in support of the hospital.

CONCLUSION

The foregoing is intended to briefly sketch a number of the highlights of the year in review. It is by no means exhaustive, since the space available could not justly record all the achievements of the Division in the past twelve months. All departments within the Division can reflect on a job very well done in 1988/89.

In closing, may I again join with the Departmental Managers in the Division in expressing appreciation to the Committee of Management, Chief Executive Officer and fellow Divisional Directors and their staff. The spirit of co-operation and support which extends across this hospital is without doubt, the major reason that we continue the outstanding results achieved by the hospital in 1988/89.

G.C. GLEASON
Director of Administrative Services



GROWTH AND GOALS

DANDENONG DAY HOSPITAL

Dandenong Day Hospital has established itself as an important and well regarded extended care service in the community, with its professional, multi-disciplined rehabilitation team continuing to provide valuable support and maintenance for the frail, aged and persons with disabilities.

The Day Hospital's primary objectives, namely, to encourage and maintain independence and prevent premature institutionalisation, have been successfully achieved during the year and a sound development programme to further these aims is well underway.

The past year has been one of growth for the Day Hospital, with client activity and service provision expanding beyond established targets. Client registrations have steadily increased from 247 to 289 clients and client contacts have exceeded 36,000 for the year. This represents an activity growth of 25% compared to 1988 figures and serves to highlight the hard work and commitment that the staff continue to provide for the community.

CLIENT CONTACTS 1988 - 89

Medical	372
Nursing	11877
Physiotherapy	9166
Occupational Therapy	7717
Social Work	6154
Podiatry	440
Speech Therapy	430
Day Centre	361
TOTAL CONTACTS	36517

BUS SPONSORSHIP

In order to continue to provide a regular bus service for clients, the Day Hospital sought a sponsor for its bus and was successful in securing a valuable sponsorship from National Australia Bank, amounting to \$10,000 over 2 years, this sponsorship is a significant initiative for the Day Hospital and not only ensures that its bus operating costs can continue to be met, but also that clients can continue to receive reliable bus transport to and from the Day Hospital.

ADULT DAY CENTRE

In an effort to provide on-going maintenance and support for clients completing their therapy, but still requiring socialisation and respite care, the Day Hospital has recently introduced an Adult Day Centre Programme. This HACC funded programme operates for 3 days per week and is currently catering for approximately 65 clients per month. Toula Varos, the Day Hospital's Social Worker coordinates the programme, which has already proved to be a very worthwhile and meaningful expansion to the Day Hospital's service provision.



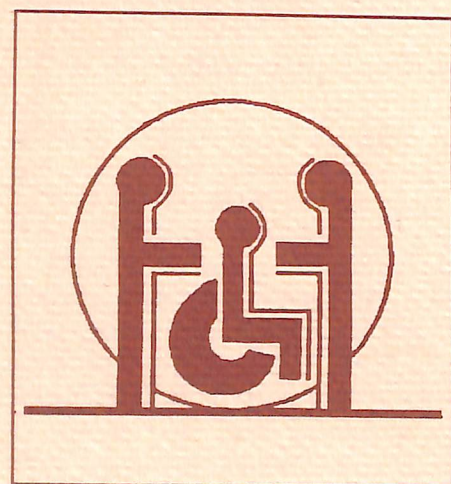
Above. Committee of Management member Mr Laurie Taylor (left) accepts a cheque for sponsorship of the Day Hospital bus from National Australia Bank's Regional Manager, Mr John Cowlshaw as Dandenong Branch Manager, Mr. Ian Macartney looks on.



NEW IMAGE

As part of a concerted effort to promote the services of the Day Hospital, a new logo was designed and an information brochure published for distribution to clients and other interested parties.

The design of the new logo is based on the graphic symbol for "day", together with characters representing help for the disabled, and depicting the initials "d" and "H" for Dandenong Hospital.



Above. New Day Hospital Logo.

OUTPATIENT CARDIAC REHABILITATION

The next significant development to the Day Hospital's service provision is planned for September 1989, when an Outpatient Cardiac Rehabilitation Programme will be introduced. This programme will involve most of the Day Hospital's Rehabilitation team, together with the participation of a cardiac nurse and the Chief Dietitian from the main hospital. It is anticipated that this extension to the main hospital's Coronary Care rehabilitation will initially cater for approximately 15 clients and their carers, involving a six week programme of education and graduated exercise.



Above. Christmas cheer for all as staff and patients join in together for a singalong at the Day Hospital's Christmas Luncheon.

UPGRADE OF FACILITIES

Minor works funding of \$11,000 has enabled the Day Hospital's electrical switchboard to be expanded, in order to cope with the increasing power demands and allow for the future installation of air-conditioning units. In addition, the general office/reception area has been upgraded, enabling the supervision and processing of clients attending the Day Hospital, to be handled more efficiently.

SOCIAL HIGHLIGHTS

The Day Hospital organised two social events during the year, namely a Sausage Sizzle for Senior Citizen's week and its Annual Christmas Party. The Sausage Sizzle was well attended despite the hot day and the Christmas Party was a great success, with over 100 people suitably dressed for the Big Top Circus theme and thoroughly enjoying the traditional Christmas lunch and entertainment.

APPRECIATION

The Day Hospital's Ladies Auxiliary has once again provided valuable financial assistance for the purchase of sundry equipment and sincere thanks are extended to all the ladies for their effort and support throughout the year.

This year the Auxiliary agreed to fund the purchases of a coolwater drinking fountain and a collapsible wheelchair for the Day Hospital bus, both of which have proven to be of particular benefit to the clients.

Appreciation must also be given to the Dandenong Central Rotary Club, whose donation of \$2,000 enabled the purchase of additional equipment for the proposed Outpatient Cardiac Rehabilitation Programme to commence in September 1989.

SUMMARY

In summary, the Day Hospital has achieved a number of significant goals during the year and is poised to embark on future planned initiatives with confidence. The past year has not only seen a growth in client activity and service provision, but also in staff commitment and morale. Obviously this attitude will encourage and enforce further development in the years ahead and I offer my sincere appreciation to all the staff for their loyalty, enthusiasm and support over this past year.

J.E. THORNTON
Day Hospital Administrator



OUR STAFF

MEDICAL

Medical Administration

Deputy Director of Medical Services
R.G. Arnold, B.E. (Elec.), M.B., B.S.

Emeritus Honorary Consulting Medical Staff

General Practice

D.A. Gibson, M.R.C.S., L.R.C.P.
K.O. Gough, M.B., B.S.
A. Grasso, M.B., B.S., F.R.A.C.G.P., B.Sc.
K.R. Griffiths, S.B.S.T.J., M.B., B.S., F.R.A.C.G.P., D.Obs., R.C.O.G.
A.P. Jones, B.Sc., M.B., B.Ch.
A.H. Keech, M.B., B.S., F.A.C.O.M., S.P.U.M.S., F.R.S.M.
L.W. Knight, M.B., B.S., F.R.A.C.G.P.
B.A. Minto, M.B., B.S., B.Sc., M.R.A.C.G.P.
S. Murphy, M.B., B.Ch., B.A.O., L.A.H.
N.L. Stephenson, M.B., B.S., D.Obst., R.C.O.G.
R. Tunbridge, B.Sc., M.B., B.S., F.R.A.C.G.P.

Orthopaedics

W.E. Spring,
M.B., B.S., M.S., M.R.C.S., L.R.C.P., F.R.A.C.S.

Plastic Surgery

B. O'Brien, C.M.G., B.Sc., M.D.M.S., F.R.C.S., F.R.A.C.S., F.A.C.S., F.R.C.S. (Ed. (Hon)), F.R.C.S. (Hon).

Anaesthesia

Director of Anaesthesia
W.A. Shearer, M.B., B.S., F.F.A.R.A.C.S.

Deputy Director of Anaesthesia
L.V. Russo, M.B., B.S., F.F.A.R.A.C.S.

Consultant Anaesthetists

A.K. Bacon, M.B., B.S., L.R.C.P., M.R.C.S., F.F.A.R.C.S., F.F.A.R.A.C.S.
L.S. Choong, M.B., B.S., F.F.A.R.A.C.S., F.F.A.R.C.S. (I)
A. Doktor, M.B., B.S., A.M.E.C., F.F.A.R.A.C.S.
E.O. Goonetilleke, M.B., B.S., D.A., F.F.A.R.A.C.S. (I), F.F.A.R.C.S.
F.P. Hofmann, M.B., B.S., F.F.A.R.C.S., F.F.A.R.A.C.S.
E.J. Miller, M.B., B.S.
E. Rubinstein, M.B., B.S., D.A., F.F.A.R.C.S., F.F.A.R.A.C.S.
G. Tippet, M.B., B.S., D.A.
C.T. Trew, M.B., B.S., D.A., F.F.A.R.C.S.
S.K. Vallipuram, M.B., B.S., D.A., F.F.A.R.A.C.S.

E. Williams, B.Sc., A.G.S.M., M.B., Ch.B., F.F.A.R.C.S.
C.M. Wilson, M.B., B.S., F.F.A.R.A.C.S.
J. Zubevich, M.B., B.S., F.F.A.R.A.C.S.

Coronary Care Unit

Director of Coronary Care
J. Counsell, M.B., B.S., F.R.A.C.P.

Coronary Care Physicians

J.A. Burgess, M.B., B.S., F.R.A.C.P.
B. Ho, M.B., B.S., F.R.A.C.P.
J. Krafchek, M.B., B.S., F.R.A.C.P.
W.F. Ryan, M.B., B.S., F.R.A.C.P., M.R.C.P. (UK)

Clinical Review

Director of Clinical Review
J.J. Anastasios, M.B., B.S., D.Obst., R.C.O.G., M.R.C.O.G., F.R.A.C.O.G.

Day Hospital

Medical Officer

M.E. Scott, M.B., B.S., F.R.A.C.P., F.A.C.R.M.

Dentistry

Consultant Oral Surgeon
R. Newbury, M.D.Sc., L.D.S., F.R.A.C.D.S.

Consultant Dental Surgeons

E.C. Blaze, B.D.Sc., L.D.S.
A.L. Hore, B.D.Sc., L.D.S.

Emergency Department

Director of Emergency Services
J. Wenzel, M.B., B.S., M.D., F.F.A.C.E.M.

Deputy Director of Emergency Services
M.C. Buchanan, M.B., B.S., F.R.A.C.G.P., F.A.C.E.M.

General Practice

General Practitioners

T.A. Adcock, M.B., B.S., Dip. R.A.C.O.G., F.R.A.C.G.P.
S.A. Auteri, B.Sc., M.B., B.S., F.R.A.C.G.P., D.Obst., R.C.O.G.
D.L. Baldwin, M.B., B.S., F.R.A.C.G.P.
N.R. Bare, M.B., B.S., F.R.A.C.G.P., D.Obst., R.A.C.O.G., Dip. Geriatric Medicine
J.A. Bialylew, M.B., B.S., F.R.A.C.G.P., D.F.P.

R.E. Clayton-Jones, M.B., B.S., L.R.C.P., M.R.C.S., D.A.

N.I. Demediuk, M.B., B.S. (Melb), Dip. R.A.C.O.G., F.R.A.C.G.P., B.Ed. (LaTrobe)

G.A. Downe, M.B., B.S., D.Obst., R.C.O.G., Dip. R.A.C.O.G., F.R.A.C.G.P.

S.R. Giummarra, M.B., B.S., D.Obst., R.C.O.G.

L.W. Gregory, M.B., B.S.

C.M. Jeffrey, M.B., B.S., Dip. R.A.C.O.G.

S.L. Joel, M.B., B.S., Dip. R.A.C.O.G.

R.W. Johnston, M.B., B.S., D.Obst., R.C.O.G.

T.P. Longney, M.B., B.S., F.R.A.C.G.P., D.Obst., R.C.O.G.

J.M. Meaney, M.B., B.S., D.Obst., R.C.O.G., Dip. R.A.C.O.G.

I.D. Roberts, M.B., B.S., D.Obst., R.A.C.O.G., F.R.A.C.G.P.

J.C. Smith, M.B., B.S., D.Obst., R.C.O.G., F.R.A.C.G.P.

P.M. Stevens, M.B., B.S.

R. Weston, M.B., Ch.B., M.R.C.G.P.

N. Yeaman, M.B., B.S.

Assistant General Practitioners

M.A. Beech, M.B., B.S., D.Obst., R.C.O.G., Dip. R.A.C.O.G., D.A., F.R.A.C.G.P.
B.K. Fountain, M.B., B.S., D.Obst., R.C.O.G.
G.P. Jeffrey, M.B., Ch.B., D.Obst., R.C.O.G.
D.T. Mansie, M.B., B.Chir., M.R.C.S., L.R.C.P., F.R.A.C.G.P.
M.M. O'Toole, M.B., B.Ch., B.A.O., D.C.H., Dip. R.A.C.O.G.
W.R. Ostell, M.B., Ch.B.
R.L. Thornton, M.B., B.S., D.T.M. & H.
D. Vissenga, M.B., B.S., L.R.C.P., M.R.C.S., D.Obst., R.C.O.G., Dip. R.A.C.O.G.
M. Yardney, M.B., B.S., F.R.A.C.G.P.

Associate General Practitioners

K.B. Eastaugh, M.B., B.S.
W.R. Hastings, M.B., B.S., Dip. R.A.C.O.G., F.R.A.C.G.P.
C. Mulligan, M.B., B.S., Dip. R.A.C.O.G.
K.Y. Tang, M.B., B.S., F.R.A.C.G.P., Dip. R.A.C.O.G.
D.K. Warnock, M.B., B.S. (Hons), Dip. R.A.C.O.G.
G.W. Watt, M.B., B.S., Dip. R.A.C.O.G.
G.A. Wyatt, M.B., B.S., Dip. R.A.C.O.G.
P.K. Burr, M.B., B.S., D.A., D.R.C.O.G.
T.R. Everitt, M.B., B.S., Dip. Obs. R.A.C.O.G.
J.P. Formoso, M.B., B.S., Dip. Obs. R.A.C.O.G.
N.H. McCann, M.B., B.S., D.A.
G. Oechsle, M.B., B.S., Dip. R.A.C.O.G.
M.C. Pentin, M.B., Ch.B., D.Obst., R.A.C.O.G., D.Obst., R.C.O.G.
P.J. Schuijers, M.B., B.S., Dip. R.A.C.O.G.
M.E. Wyatt, M.B., B.S., Dip. R.A.C.O.G.



Intensive Care

Director

B.M. Jones, M.B., B.S., FRACS.

Assistant Director

G.B. Donnan, M.B., B.S., FFARACS.

Internal Medicine

Consultant Gastroenterologists

J.A. Goy, M.B., B.S. (Hons.), FRCP (Edin.), FRACP.
I.R. Willett, M.B., B.S., FRACP.

Consultant Geriatrician

M.E. Scott, M.B., B.S., FRACP, FACRM.

Honorary Geriatrician (Evaluation Officer)

J.A. Schwarz, M.B., B.S., FRACP.

Consultant Paediatricians

T.J. Lee, M.B., B.S., FRACP.
R. Lim, M.B., B.S., FRACP.
P. Rosengarten, M.B., B.S., FRACP.

Associate Paediatrician

I.I. Findlay, M.B., B.S., B.Ed., FRACP, FRCP, D.Ch.

Consultant Physicians

P.H. Billimoria, M.B., B.S., MD., FRACP, MRCP (UK).
J.A. Burgess, M.B., B.S., FRACP.
J. Counsell, M.B., B.S., FRACP.
A.N. Hunter, M.B., B.S., MRACP, FRACP.
D.C. Jayasekera, M.B., B.S., MRCP.
A.P. Ludbrook, M.B., Ch.B., FRACP.
M.A. McIver, M.B., B.S., FRACP.

Consultant Physician (Palliative Care)

M.R. Redpath, M.B., B.S., FRCS, DMRT, FRCP.

Obstetrics and Gynaecology

Head of Obstetrics and Gynaecology

B.L. Butler, M.B., B.S., FRCOG, FRACOG.

Consultant Obstetricians and Gynaecologists

E.R. Howell, M.B., B.S., FRCOG, FRACOG.
D.G. Jayasinghe, M.B., B.S., MRCOG, FAGO, FRACOG.
J. Jeffares, B.A., M.B., B.Ch., B.A.O., D.Obst. RCOG, MRCOG, FAGO, FRACOG.
R. Rasiah, M.B., B.S., MRCOG, FRACOG.

Relieving Obstetricians and Gynaecologists

M. Lichter, M.B., B.S., MRCOG, FRACOG.
C.J. Orchard, M.B., Ch.B., MRCOG, FRACOG.
P.J. Trowbridge, M.B., B.S., B. Med. Sc., MRCOG, FRACOG.

Organ Imaging

Radiologist

A.J. Kermond, M.B., B.S., FRACR, FFR, D.D.U.

Assistant Radiologists

R.E. Dempster, B.Sc. (Hons 1), M.B., B.S. (Hons 1), FRACR.
C.J. Holland, M.B., B.S., FRACR.
A.J. Kaminsky, M.B., B.S., FRACR.
B.J. Leaney, M.B., B.S., FRACR.
D. McOmish, M.B., B.S., FRACS, MRACR, D.D.R.
R.G. Meikle, M.B., Ch.B., D.D.R., MRACR.
D.G. Peace, M.B., B.S., MRACR, D.D.U.
J.D. Poynter, M.B., B.S., FRACR.
J.G. Stuckey, M.B., B.S., FRACR, FRACP.
C.H. Wriedt, M.B., B.S., FRCP, FRACR.

Pathology

Director of Pathology

J.H. Maynard, M.B., B.S., FRCPA, M.A.S.M., M.A.S.C.P., A.F.A.I.M.

Deputy Director of Pathology

W. McNaughton, M.B., Ch.B., FRCPA, M.A.S.C.P.

Pathology Specialist - Haematology

S.C. Choong, M.B., B.S., FRCPA.

Specialist Pathologist - Microbiology

T.G. Kerr, B.Sc., M.B., B.S., FRCPA, M.A.S.M.

Psychiatry

Consultant Psychiatrists

T.M. Hardiker, M.B., Ch.B., D.Obst. RCOG, D.Ch., D.P.M., FRANZCP.
L.P. Harms, M.B., B.S., D.P.M.
P. Lee, M.B., B.S., FRANZCP.
M.P. Lowen, M.B., B.S., FRANZCP.
C. Van Tiggelen, M.D. Netherlands

Surgery

Consultant Neurosurgeon

K. Siu, M.B., B.S., FRACS

Assistant Neurosurgeon

M.J. Pullar, M.B., B.S., B.Med.Sci (Hons), FRACS.

Consultant Ophthalmologist

D.M. O'Connor, M.B., B.S., D.O., FRACO.

Consultant Orthopaedic Surgeon

Head of Unit

N.G. Cullen, M.B., B.S., FRACS.

Consultant Orthopaedic Surgeons

D. Booth, M.B., B.S., FRACS.
J.D. Griffiths, M.B., B.S., FRACS.
S.J. O'Loughlin, M.B., B.S., FRACS.
A.B. Razif, M.B., B.S., FRACS.

Consultant Otorhinolaryngologist

J. S. Jassal, M.B., B.S., D.L.O., FRCS.

Consultant Paediatric Surgeon

D.M. McLaren, M.B., B.S., FRCS, FRACS.

Consultant Plastic Surgeons

Head of Facio-Maxillary Unit
G.I. Bird, M.B., B.S., FRCS, FRACS.

Consultant Plastic Surgeon

S.R. Donahoe, M.B., B.S., FRACS.

Consultant Surgeons

R.W. Gilhome, M.B., B.S., FRACS.
G. Hutchinson, M.B., B.S., FRACS.
D.R. Kemp, M.B., B.S., MS, FRACS, FRCS.
R.C. McHenry, M.B., B.S., FRACS.
L.J. Reeves, M.B., B.S., FRACS.
W.J. Scott, M.B., B.S., FRCS, FRACS.
C. Troy, M.B., B.S., FRACS, FRCS.

Consultant Relieving Surgeons

P.I. Harris, M.B., B.S., FRACS.
R.J. Wale, M.B., B.S. (Hons), FRACS.

Consultant Thoracic Surgeon

E. Shanahan, B.Sc., M.B., B.S., FRACS.

Consultant Urologist

J.P. O'Collins, M.B., B.S., FRACS, FRCS.
D. Yoffa, M.B., B.S., FRACS.

Consultant Vascular Surgeon

A.K. Roberts, M.B., B.S., FRCS, FRACS, FACS.

Assistant Consultant Vascular Surgeon

M.C. Hoare, M.B., B.S., FRACS.



RESIDENT MEDICAL STAFF

Registrars

Anaesthetic

Dr. R. McRae
Dr. N. Schenk
Dr. M. Sandford

Casualty

Dr. J. Holmes
Dr. D. West

Casualty/Special Surgery

Dr. S. Priestley
Dr. A. Walby

Intensive Care

Dr. S. Bernard

Medical

(On Rotation from Repatriation General Hospital)

Dr. I. Davidson
Dr. S. Ho

(On Rotation from Alfred Hospital)

Dr. R. Axtens
Dr. M. Hall
Dr. S. O'Shea
Dr. A. Padiglione

Orthopaedic

Dr. P. Byrne

Pathology

Dr. A. Schelleman

Psychiatry Liaison

(On Rotation from Dandenong Psychiatric Centre)

Dr. I. Presnell

Surgical

(On Rotation from Repatriation General Hospital)

Dr. P. Grey

(On Rotation from Alfred Hospital)

Dr. R. Ferguson

Fellows

Anaesthetics/ICU

Dr. P. Lewis

Casualty/Paediatrics

Dr. A. Rosengarten
Dr. E. Rowe

Obstetrics & Gynaecology

Dr. J. Johnston

Senior Resident Medical Officers

Dr. K. Alexander
Dr. M. Atkins
Dr. A. Balnionis
Dr. C.L. Bien
Dr. G. Day
Dr. T. Gray
Dr. M. Hocking
Dr. K. Juszczuk
Dr. J. Karnaghan
Dr. G. McClure
Dr. C. Main
Dr. J. Mushin
Dr. D. Parathira
Dr. G. Sansom
Dr. T. Shnider

Junior Resident Medical Staff

Dr. V. Chang
Dr. K. De Vahl Baker
Dr. J. Devine
Dr. R. Dielemans
Dr. J. Drenen
Dr. J. Giddens
Dr. A. Jackson
Dr. A. Karantonis
Dr. T. Manolitsas
Dr. C. Maurer
Dr. P. Mitchell
Dr. M. Santamaria
Dr. T. Tingate
Dr. A. Traill
Dr. G. Walling
Dr. S. Zagarella

Interns

Dr. G. Campaign
Dr. A. D'Argent
Dr. G. Edgley
Dr. J. Gruner
Dr. J. Harding
Dr. L. Harfa
Dr. R. Ingamells
Dr. D. Kelly
Dr. M. Killen
Dr. S. Loosemore
Dr. G. Macaulay
Dr. C. McKenzie
Dr. B. Manovel
Dr. D. Manton
Dr. H.N. Nguyen
Dr. L. Papadopoulos
Dr. T. Pham
Dr. P. Slot
Dr. L. Tang
Dr. P. Tang
Dr. T. Luong
Dr. J. Thompson



OUR STAFF

NURSING

Nursing Administration

Deputy Director of Nursing

Mrs. N.E. Motyka, R.N., R.M., Dip.Nurs.Admin., F.C.N.A.

Assistant Directors of Nursing

Mrs. P.M. Whiting, (Nursing Personnel), R.N., R.M., Dip.Nurs.Admin., B.App.Sci.Ad.Nurs. (N.Admin.), F.C.N.A.

Miss. M. Cincotta, (Allocation), R.N., R.M., B.App.Sci.Ad.Nurs., N.Admin.) I.C.Cert. F.C.N.A.

Miss. M. G. Cooney, (Relieving Allocation), (Resigned 16.9.88) R.N., R.M., App.Sci.Ad.Nurs., (N.Admin.) I.C.Cert.

Miss N. Ryan, (Projects and Research), R.N., R.M., I.W.Cert., Dip.Nurs.Admin., F.C.N.A.

Night Nurses in Charge

Mrs. M. Schilling, R.N., R.M.

Mrs. E. Lambert, R.N., R.M., I.W.Cert., Paed.I.C.Cert.

Director of Nursing Education

Miss M. Corkill, (Appointed 3/1/89) R.N., R.M., I.W.Cert., Dip.Mid.Teach.

Mrs. B. A. Ustick, (Acting Dir.N.Ed. until 2/1/89 - Resigned 14/2/89)

R.N., R.M., Dip.Unit.Mgt., B.App.Sci.(N.Ed.)

Nurse Educators

Mr. I. Shepherd, R.F.N., R.N., I.C.Cert., B.App.Sci.Ad.Nurs., (Crit.Care), F.C.N.A.

Miss M. Looker, R.N., R.M., B.App.Sci.(N.Ed.)

Miss E. Neal, R.N., R.M., Dip.Nurs.Teach.

Mrs. E. Hughes, (Appointed 24.4.89) R.N., R.M., C.C.Cert.

Area Co-ordinators

Mrs. C. Clark, R.N., R.M., (Emergency Department).

Miss M. Davis, R.N., R.M., B.App.Sci., Ad.Cl./N (Operating Theatre Suite).

Miss N. Dickson, R.N., R.M., (Inf.Con.Cert.)

Mr. J. Donnelly, R.M.N., R.N., M.B.A. (Monash),

B.App.Sc.(Adv.Nur.), I.C.Cert., F.C.N.A.

Mrs. S. Graham, R.N., R.M., B.App.Sci.Ad.Nurs., (Nurs.Admin.), I.C.Cert.

Miss A. Poynter, R.N., R.M., B.T.T.A.,

Dip. Clin.Teach.Cert.

Miss K. Quartermaine,

R.N., R.M., B.App.Sci.Ad.Nurs.

(N.Admin.)

Mrs. D. Risson, R.N., R.M.

Miss R. Allison, R.N., R.M., I.W.C.

Mrs. V. Jacques, R.N., R.M.,

(Resigned 22/8/88)

Mrs. M. McPherson, R.N., R.M.

Charge Nurses

Apex 1

Mrs. G. Stewart, R.N. (Deceased 9.1.89)

Mr. M. Sierakowski, R.N., R.M.,

(Appointed 27.3.89)

Apex 2

Miss S. Johnstone, R.N., R.M.

Rotary 1

Mrs. R. Gothard, R.N., R.M.

Rotary 2

Mrs. H. Beard, R.N.

Poole

Mrs. J. Wilson, R.N., R.M.

West

Mrs. A. Plum, R.N.

North 1

Mrs. C. Trapani, R.N.

North 2

Miss L. Mack, R.N.

South

Miss J. Galloway, R.N., R.M.

Children's Ward

Miss V. Ritchie, R.N., R.M.

Lions 1

Mrs. A. M. Scully, R.N., R.M., B.App.Sci.Ad.Nurs.

(N.Admin.)

Lions 2

Miss M. Walker, R.N., R.M., C.C.Cert.

(Resigned 9.3.89)

Mrs. P. McKay, R.N., R.M. (Appointed 10.4.89)

Labour/Antenatal Ward

Miss E. Andrews, R.N., R.M., Dip.Hosp.Nurs.and

Ward Mgt., B.App.Sci.Ad.Nurs., (N.Ed.), F.C.N.A.,

(Resigned October 88)

Ms. J. O'Connor, R.N., R.M.,

(Appointed 14/11/88)

Special Care/General Nurses

Miss L. Ong, R.N., R.M., B.App.Sci.Ad.Nurs., (N.Admin.) Neonatal I.C.Cert.

Post Natal Ward

Mrs. L. Barnes, R.N., R.M., Dip.N.Ed.

(Resigned 29/7/88)

Mrs. A. Flood, R.N., R.M.,

(Appointed 22/8/88)

Coronary Care Unit

Mrs. C. Rasmussen, R.N., Crit.C.Cert.

Intensive Care Unit

Mrs. M. Abaloz, R.N., Crit.C.Cert.

Central Sterile Supply Department

Mrs. C. Johnson, R.N., Crit.C.Cert., Steri/

Inf.Con.Cert.

Emergency Department

Mrs. M. Williams, R.N.

Organ Imaging Department

Mrs. C. Phelps, R.N., (Appointed 5.6.89)

Operating Theatre Suite

Mrs. A. Pispek, R.N., R.M.

Mr. D. Algie, R.N.

Miss E. Gauder, R.N.

Mrs. J. Martin, R.N.

Day Hospital

Miss S. Flynn, R.N., R.M., Geriatric Cert.

Dip.App.Sci., F.C.N.A. (Resigned 18.11.88)

Mrs. J. Arnott, R.N., R.M., Geriatric Cert.

(Appointed 14.11.88)

Infection Control

Mrs. E. Tyzack, R.N., Steri/Inf.Con.Cert.

Stomal Therapy

Mrs. C. Sardara, R.N., Stomal Therapy Cert.

Night Duty

Mrs. K. Izzard, R.N., R.M.

Mrs. T. Page, R.N.

Staff Health

Mrs. E. Woodhouse, R.N., R.M., I.W.Cert.



OUR STAFF

MEDICAL ANCILLARY

Chief Dietitian

Mrs. R. Cant, Dip.Nut.and F.S., T.T.T.C., Cert.of Diet., Grad.Dip. Health Education.

Senior Interpreter

S. Demetriou, Dip.Int. and Trans.

Laboratory Manager

J.D. Merrick, B.App.Sci.(M.L.S.), A.A.I.M.L.S., A.I.M.M.

Chief Medical Record Administrator

Miss M.J. Bolch, R.M.R.A.

Chief Occupational Therapist

M. Lowenstein, B.App.Sci.(Occ.Ther.)

Director of Pharmacy

D.J. Hillman, B.Pharm., Grad.Dip.Hosp.Pharm.,

Grad.Dip.Bus.Tech.(C.I.T.)

Chief Physiotherapist

Mrs. T. Gray, B.Sc., M.A.P.A.

Chief Radiographer

E.B. Moulson, M.I.R., D.C.R.R., Dip.App.Sci., M.S.X-ray T.

Chief Speech Pathologist

Mrs. T. Kruse, L.A.C.S.T.

Chief Social Worker

Ms. M. Fowler, B.A., B.S.W., Grad.Dip. Human Services Research

Medical Librarian

Mrs. C. Anderson, Dip.Lib., L.A.A.

OUR STAFF

ADMINISTRATIVE SERVICES

Accountant

M. Finlayson, A.A.S.A., C.P.A.

Clinical Costing Manager

C. Grylls, Cert.M.L.T., A.F.I.P.S.M., Grad.Dip. Health Services Management, M.H.A., A.H.A., C.H.A.

Day Hospital Administrator/Regional

Relieving Manager

J.E. Thornton, B.H.A.(NSW), A.H.A.

Engineer

D.O. King, C.Eng., Sr.M.I.H.E., F.I.Mar.E., M.I.Mech.E.

Environmental Services Manager

I.D. Gordon, B.Ec.

Finance Manager

T.T. Haining, F.A.S.A., C.P.A. (Mangt.Acct.),

Grad.Dip.Acct. & Fin., F.T.I.A.

Food Services Manager

R.I. Bruce, F.C.I.A., F.I.H.C., A.I.M.M., Licentiate Inst.Food

Science & Technology

Occupational Health & Safety

Manager

R. Williams, Grad.Dip., Safety Inst. Australia, Prelim.Dip.I.F.E.(UK), Instruct.Dip.S.E.S., (Mt. Macedon),

Gold Medallion & Bar St. John Amb. (UK).

Personnel Manager

W.K. Bristowe, Grad.Dip.Labour Management Relations, A.A.I.M., M.I.P.M.

Public Relations Manager

P. Garamszegi, B.Ec.

Supply Manager

S.R. Lucas, A.F.I.P.S.M.

Systems Manager

P. Stockx, Dip.Inf.Sc., Grad.Dip.Management (R.M.I.T.)

STAFF LEVEL COMPARISONS

	July 1, 1988	June 30, 1989
Nursing	511.70	516.53
Administration and Clerical	127.13	131.39
Medical Support	112.20	117.81
Hotel and Allied	269.42	259.38
Medical	7.13	8.98
RMO's	63.24	62.91
Sessional / Clinicians	15.03	14.34
Total	1105.85	1111.34

Growing with the Community



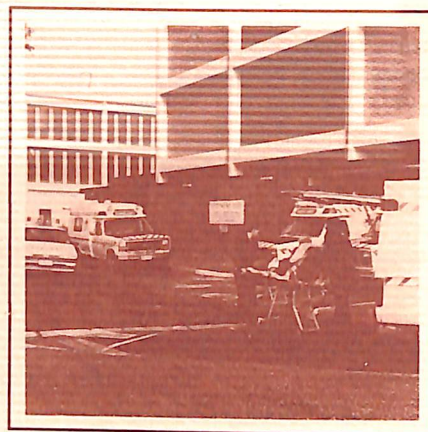
DANDENONG HOSPITAL NEEDS YOUR SUPPORT

Community support enables the Hospital to keep its facilities and equipment abreast of both the highest modern health care standards and the latest medical technology.

This vital need is continuing and your generosity is needed now. Donations of specific items of equipment are urgently sought and will be greatly appreciated.

Every donation is important and gifts of \$2.00 or more are allowable as deductions for Income Taxation purposes. Enquiries regarding the donation of equipment or endowment of beds will be welcomed by the

Chief Executive Officer,
Dandenong and District Hospital,
David Street,
DANDENONG. 3175



HOW CAN YOU HELP?

BY BEQUEST

When you make or amend your Will, please consider the following suggested form of bequest:

I
.....

bequeath to Dandenong Hospital, David Street, Dandenong, in the State of Victoria, to advance the work of the Hospital, the sum of \$ free of all duties, for which the written acknowledgement of the Chief Executive Officer shall be sufficient discharge.

BY DONATION

By writing the letter below and enclosing your donation to:

The Chief Executive Officer,
Dandenong and District Hospital,
David Street,
DANDENONG. 3175

I am pleased to donate the enclosed sum of \$ which should be used towards purchasing an urgently needed item of equipment at Dandenong Hospital.

Name

Address

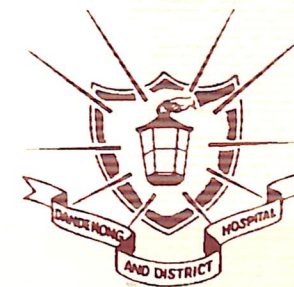
.....

Signature

BY PERSONAL INVOLVEMENT

Persons interested in joining or forming an Auxiliary of the Hospital in their area or wishing to become a Voluntary Supporter of the Hospital are invited to contact the Public Relations Manager.

This page may be photocopied for your own personal use.



Financial Statements for the Year Ended 30th June 1989

REVENUE AND EXPENSE STATEMENT FOR THE YEAR ENDED 30TH JUNE 1989

	NOTES	HOSPITAL 1988/89 \$	DAY HOSPITAL 1988/89 \$	TOTAL 1988/89 \$	TOTAL 1987/88 \$
REVENUE					
GOVERNMENT GRANTS	2	39,244,271	382,647	39,626,918	34,201,552
INDIRECT CONTRIBUTIONS					
BY HEALTH DEPT. VIC.	3	501,627	-	501,627	441,651
PATIENT FEES	4	7,323,122	10,636	7,333,758	7,198,649
RECOUPMENT FROM					
PRIVATE PRACTICE					
USE OF HOSPITAL FACILITIES		1,433,133	-	1,433,133	1,367,806
LINEN SERVICES	5	-	-	-	-
OTHER REVENUE	6	1,595,140	971	1,596,111	1,572,713
ABNORMAL ITEMS	8	210,800	15,303	226,103	619,914
TOTAL REVENUE		50,308,093	409,557	50,717,650	45,402,285
OPERATING EXPENSES	7				
PATIENT CARE SERVICES		33,451,309	5,547	33,456,856	30,405,936
ADMIN. & SUPPORT SVCS.		13,987,648	393,110	14,380,758	12,926,143
TEACHING SERVICES		353,198	-	353,198	383,073
OTHER		2,829,546	9,104	2,838,650	1,951,126
TOTAL OPERATING EXPENSES		50,621,701	407,761	51,029,462	45,666,278
OPERATING SURPLUS/(DEFICIT) BEFORE EXTRAORDINARY ITEMS		(313,608)	1,796	(311,812)	(263,993)
EXTRAORDINARY ITEMS					
SURPLUS/(DEFICIT) FOR THE YEAR		(313,608)	1,796	(311,812)	(263,993)
RETAINED SURPLUS/ (DEFICIT) AT BEGINNING OF YEAR		(6,471,843)	(87,228)	(6,559,071)	(5,192,194)
TRANSFERS FROM RESERVES	10	102,320	2,379	104,699	126,507
AVAILABLE FOR APPROPRIATION		(6,683,131)	(83,053)	(6,766,184)	(5,329,680)
TRANSFERS TO RESERVES	11	(786,404)	-	(786,404)	(1,229,391)
RETAINED SURPLUS/(DEFICIT) AT END OF YEAR		(7,469,535)	(83,053)	(7,552,588)	(6,559,071)

THESE ACCOUNTS SHOULD BE READ IN CONJUNCTION WITH THE ACCOMPANYING NOTES.

BALANCE SHEET AS AT 30TH JUNE 1989

	NOTES	HOSPITAL 1988/89 \$	DAY HOSPITAL 1988/89 \$	TOTAL 1988/89 \$	TOTAL 1987/88 \$
EQUITY CAPITAL					
CONTRIBUTED CAPITAL	2	30,401,343	416,077	30,817,420	27,341,311
FUNDS HELD FOR SPECIFIC PURPOSES		2,249,993	7,298	2,257,291	2,494,899
RETAINED SURPLUS/ (ACCUMULATED DEFICIT)		(7,469,535)	(83,053)	(7,552,588)	(6,559,071)
TOTAL EQUITY		<u>25,181,801</u>	<u>340,322</u>	<u>25,522,123</u>	<u>23,277,139</u>
THIS IS REPRESENTED BY:-					
CURRENT LIABILITIES					
PATIENTS & OTHER DEPOSITS		27,156	-	27,156	19,665
BANK OVERDRAFT		2,739,325	36,738	2,776,063	1,560,046
CREDITORS		1,041,109	7,553	1,048,662	890,591
ACCRUED EXPENSES		688,112	4,491	692,603	549,894
PROVISION FOR EMPLOYEE ENTITLEMENTS	12	3,474,566	29,567	3,504,133	3,157,012
PATIENT TRUST	14	-	-	-	-
TOTAL CURRENT LIABILITIES		<u>7,970,268</u>	<u>78,349</u>	<u>8,048,617</u>	<u>6,177,208</u>
NON CURRENT LIABILITIES					
PROVISION FOR EMPLOYEE ENTITLEMENTS	12	2,070,645	34,040	2,104,685	1,783,153
LEASE LIABILITY	13	-	-	-	-
TOTAL NON CURRENT LIABILITIES		<u>2,070,645</u>	<u>34,040</u>	<u>2,104,685</u>	<u>1,783,153</u>
TOTAL LIABILITIES		<u>10,040,913</u>	<u>112,389</u>	<u>10,153,302</u>	<u>7,960,361</u>
CURRENT ASSETS					
CASH AT BANK ON HAND		194,246	7,348	201,594	483,744
PATIENT FEES RECEIVABLE	4	1,364,728	691	1,365,419	1,592,394
PATIENT TRUSTS	14	-	-	-	-
STORES	15	525,944	-	525,944	506,257
PREPAYMENTS		50,977	-	50,977	69,822
DEBTORS & ACCRUED REVENUE	16	2,001,509	13,527	2,015,036	188,203
SHORT TERM INVESTMENTS	17	1,652,697	-	1,652,697	1,988,531
TOTAL CURRENT ASSETS		<u>5,790,101</u>	<u>21,566</u>	<u>5,811,667</u>	<u>4,828,951</u>
NON CURRENT ASSETS					
INVESTMENTS	17	4,489	-	4,489	5,420
LAND	1 & 18	55,636	-	55,636	55,636
BUILDINGS	1 & 18	21,124,722	344,866	21,469,588	18,948,033
PLANT & MEDICAL EQUIP. AND OFFICE FURNITURE & NON MEDICAL EQUIP.	18	8,062,961	74,502	8,137,463	7,202,482
MOTOR VEHICLES	18	184,805	11,777	196,582	196,978
LEASED ASSETS	19	-	-	-	-
TOTAL NON CURRENT ASSETS		<u>29,432,613</u>	<u>431,145</u>	<u>29,863,758</u>	<u>26,408,549</u>
TOTAL ASSETS		<u>35,222,714</u>	<u>452,711</u>	<u>35,675,425</u>	<u>31,237,500</u>
TOTAL NET ASSETS		<u>25,181,801</u>	<u>340,322</u>	<u>25,522,123</u>	<u>23,277,139</u>

THESE ACCOUNTS SHOULD BE READ IN CONJUNCTION WITH THE ACCOMPANYING NOTES.

STATEMENT OF SOURCES AND APPLICATIONS OF FUNDS FOR THE YEAR ENDED 30TH JUNE 1989

	NOTES	TOTAL 1988/89 \$	TOTAL 1987/88 \$
SOURCES OF FUNDS			
FUNDS FROM OPERATIONS			
IN FLOW OF FUNDS FROM OPERATIONS		50,717,650	45,402,285
LESS OUTFLOW OF FUNDS FROM OPERATIONS		<u>46,178,114</u>	<u>41,372,217</u>
NET FUNDS FROM OPERATIONS	20	<u>4,539,536</u>	<u>4,030,068</u>
CONTRIBUTED EQUITY		2,556,796	755,594
REDUCTION IN ASSETS			
CURRENT ASSETS			
PATIENT FEES RECEIVABLE		228,058	214,627
CASH AT BANK		312,679	-
INVESTMENTS		335,834	35,617
ACCRUED INCOME/PREPAYMENTS		66	-
NON CURRENT ASSETS INVESTMENTS		931	-
INCREASE IN LIABILITIES			
CURRENT LIABILITIES			
BANK OVERDRAFT		1,219,077	14,800
CREDITORS		158,071	92,260
ACCRUED EXPENSES		142,709	498,778
PATIENTS/OTHER DEPOSITS		7,491	-
NON CURRENT LIABILITIES		-	-
TOTAL SOURCES OF FUNDS		<u>9,501,248</u>	<u>5,641,744</u>
APPLICATION OF FUNDS			
INCREASE IN ASSETS			
CURRENT ASSETS			
CASH AT BANK		30,526	150,043
STORES		19,687	259,395
DEBTORS & ACCRUED INCOME/PREPAYMENTS		1,808,054	104,952
NON CURRENT ASSETS			
BUILDINGS		2,521,555	231,601
PLANT & EQUIPMENT		1,489,398	1,315,941
MOTOR VEHICLES		2,896	33,211
DECREASE IN LIABILITIES			
CURRENT LIABILITIES			
BANK OVERDRAFT		3,063	291,173
PATIENTS/OTHER DEPOSITS		-	8,403
CREDITORS		-	2,057
NON CURRENT LIABILITIES		-	-
PAYMENT OF EMPLOYEE ENTITLEMENTS		<u>3,626,069</u>	<u>3,244,968</u>
TOTAL APPLICATION OF FUNDS		<u>9,501,248</u>	<u>5,641,744</u>

THESE ACCOUNTS SHOULD BE READ IN CONJUNCTION WITH THE ACCOMPANYING NOTES.

CONSOLIDATED STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30TH JUNE 1989

	NOTE	CONTRIBUTED CAPITAL	FUNDS HELD FOR RESTRICTED PURPOSES	RETAINED SURPLUS/ ACCUM. DEFICIT	CONSOLIDATED 1988/89 TOTAL	1987/88 TOTAL
		\$	\$	\$	\$	\$
BALANCE AT BEGINNING OF YEAR		27,341,311	2,494,899	(6,559,071)	23,277,139	22,785,538
SURPLUS/(DEFICIT) FOR YEAR		-	-	(311,812)	(311,812)	(263,993)
CAPITAL CONTRIBUTION	2	2,556,796	-	-	2,556,796	755,594
TRANSFERS TO RESERVES	11	251,239	535,165	(786,404)	-	-
TRANSFERS FROM RESERVES	10	(63,238)	(41,461)	104,699	-	-
TRANSFERS BETWEEN RESERVES	24	731,312	(731,312)	-	-	-
BALANCE AT END OF YEAR		30,817,420	2,257,291	(7,552,588)	25,522,123	23,277,139

THESE ACCOUNTS SHOULD BE READ IN CONJUNCTION WITH THE ACCOMPANYING NOTES.

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30TH JUNE 1989

NOTE 1: STATEMENT OF ACCOUNTING POLICIES

THE FINANCIAL STATEMENTS OF THE HOSPITAL HAVE BEEN PREPARED IN ACCORDANCE WITH THE PROVISIONS OF THE ANNUAL REPORTING ACT 1983 AND THE ANNUAL REPORTING (CONTRIBUTED INCOME SECTOR) REGULATIONS 1988 AS AMENDED. THE ACCOUNTING STANDARDS ISSUED JOINTLY BY THE INSTITUTE OF CHARTERED ACCOUNTANTS IN AUSTRALIA AND THE AUSTRALIAN SOCIETY OF ACCOUNTANTS HAVE BEEN COMPLIED WITH, APART FROM, DEPARTURES AS DISCLOSED IN NOTE 5.

- ACCRUAL BASIS**
IN ACCORDANCE WITH THE REGULATIONS, THE ACCRUAL BASIS OF ACCOUNTING HAS BEEN USED WITH REVENUES AND EXPENSES RECOGNISED AS THEY ARE INCURRED, AND BROUGHT TO ACCOUNT IN THE PERIOD TO WHICH THEY RELATE.
- HISTORICAL COST**
THE FINANCIAL STATEMENTS HAVE BEEN PREPARED ON A HISTORICAL COST BASIS WHEREBY ASSETS ARE RECORDED AT COST AND DO NOT TAKE INTO ACCOUNT CHANGING MONEY VALUES NOR THE CURRENT COST OF NON-CURRENT ASSETS (UNLESS SPECIFICALLY STATED).
- ROUNDING OFF**
ALL AMOUNTS SHOWN IN THE FINANCIAL STATEMENTS ARE EXPRESSED TO THE NEAREST DOLLAR.
- INVESTMENTS**
INVESTMENTS ARE VALUED AT COST. INTEREST REVENUE FROM INVESTMENTS IS BROUGHT TO ACCOUNT AS IT IS EARNED.
- DEPRECIATION**
FIXED ASSETS WITH VALUE IN EXCESS OF \$5,000 ARE BROUGHT TO ACCOUNT AND DEPRECIATION HAS BEEN PROVIDED OVER THEIR ESTIMATED USEFUL LIVES USING THE STRAIGHT-LINE METHOD. MOTOR VEHICLES ARE NOT DEPRECIATED, AS CHANGEOVER MARKET VALUES ARE MAINTAINED, WITH THE EXCEPTION OF THE DAY HOSPITAL BUS WHICH IS UTILIZED ON A LONG TERM BASIS.

AS AT BALANCE DATE NO INDEPENDENT VALUATION HAD BEEN RECEIVED ON LAND AND BUILDINGS. AS THE VALUE OF BUILDINGS IS NOT AVAILABLE, NO DEPRECIATION HAS BEEN CHARGED ON THIS ASSET FOR 1988/89. THIS REPRESENTS A DEPARTURE FROM AUSTRALIAN ACCOUNTING STANDARDS AAS4, DEPRECIATION OF NON-CURRENT ASSETS, WHICH STATES THAT FIXED ASSETS ARE TO BE DEPRECIATED OVER THEIR ESTIMATED USEFUL LIFE. THE EFFECT OF THIS DEPARTURE ON THE ACCOUNTS HAS NOT BEEN CALCULATED.
- STORES**
INVENTORIES ARE STATED IN THE BALANCE SHEET AT THE LOWER OF COST OR NET REALISABLE VALUE. COST IS DETERMINED BY FIRST-IN, FIRST-OUT METHOD WITH REGARD TO PHARMACY. ALL OTHER INVENTORIES ARE VALUED AT AVERAGE COST METHOD.
- EMPLOYEE ENTITLEMENTS**

LONG SERVICE LEAVE
PROVISION FOR LONG SERVICE LEAVE IN THE 1988/89 STATEMENTS IS MADE ON A PRO-RATA BASIS FOR ALL EMPLOYEES WHO HAVE COMPLETED TEN OR MORE YEARS SERVICE. THIS PROVISION IS INCLUDED IN BOTH CURRENT AND NON CURRENT LIABILITIES.

ANNUAL LEAVE
A PROVISION FOR ANNUAL LEAVE IS MADE FOR ALL EMPLOYEES BASED ON THE HOSPITAL'S ACCRUED LIABILITY FOR ANNUAL LEAVE AT 30TH JUNE 1989. THIS PROVISION IS INCLUDED UNDER CURRENT LIABILITIES.

ACCRUED DAYS OFF
A PROVISION IS MADE FOR ACCRUED DAYS NOT YET TAKEN BUT ACCRUED BY ELIGIBLE EMPLOYEES.

SUPERANNUATION
ALL ELIGIBLE EMPLOYEES CONTRIBUTE TO THE HOSPITAL SUPERANNUATION FUND ESTABLISHED UNDER SECTION 10 OF THE HOSPITAL SUPERANNUATION ACT 1965 (REFER REGULATION 32).
- DANDENONG DAY HOSPITAL**
DANDENONG DAY HOSPITAL IS CONTROLLED BY THE COMMITTEE OF MANAGEMENT AND IS SUBSTANTIALLY FUNDED BY THE HEALTH DEPARTMENT OF VICTORIA. ITS OPERATIONS HAVE BEEN INCLUDED WITH THOSE OF THE HOSPITAL FOR ACCOUNTABILITY PURPOSES.
- CHANGES IN REPORTING REQUIREMENTS**
DURING THE 1988/89 YEAR, THE HOSPITAL WAS DECLARED A PUBLIC BODY UNDER THE ANNUAL REPORTING ACT 1983. THIS NECESSITATED SIGNIFICANT ALTERATIONS TO THE PRESENTATION OF THE FINANCIAL STATEMENTS PURSUANT TO THE ANNUAL REPORTING (CONTRIBUTED INCOME SECTOR) REGULATIONS 1988 AS AMENDED.

WHERE POSSIBLE, COMPARATIVE FIGURES HAVE BEEN AMENDED ACCORDINGLY.
- PRINCIPLES OF CONSOLIDATION**
THE CONSOLIDATED ACCOUNTS INCLUDE THE ACCOUNTS OF THE DANDENONG DAY HOSPITAL.
- C.S.S.D. STORES ISSUE**
ON THE 1ST JULY 1988 A NEW ISSUES SYSTEM WAS INTRODUCED IN C.S.S.D. AS A RESULT, STORES HAVE BEEN ABLE TO BE ALLOCATED TO THE USAGE AREAS. THIS AFFECTS THE COMPARATIVE FIGURES.
- GRANT ADJUSTMENT**
WITH THE NEW REPORTING REQUIREMENTS, THE HOSPITAL RECEIVED ADVICE FROM THE HEALTH DEPARTMENT VICTORIA THAT OUTSTANDING GRANT FUNDS ARE TO BE BROUGHT TO ACCOUNT AS OUTSTANDING DEBTORS. PRIOR YEARS GRANTS HAVE BEEN ACCOUNTED FOR ON A CASH BASIS.
- MINOR WORKS**
FUNDS RECEIVED FROM THE HEALTH DEPARTMENT VICTORIA FOR MINOR WORKS HAS BEEN EXPENDED ON MAINTENANCE ITEMS.

THESE NOTES FORM PART OF THE ACCOUNTS AND SHOULD BE READ IN CONJUNCTION WITH THEM.

NOTE 2 - GOVERNMENT GRANTS

DETAILS

	HOSPITAL 1988/89	DAY HOSPITAL 1988/89	TOTAL 1988/89	HOSPITAL 1987/88
	\$	\$	\$	\$
H.D.V. OPERATING GRANTS				
ORDINARY GRANT	36,047,000	348,705	36,395,705	33,196,641
H.D.V. ORDINARY GRANT ADJUSTMENT (INCOME)	1,662,975	13,527	1,676,502	-
SUB TOTAL ORDINARY GRANT	37,709,975	362,232	38,072,207	33,196,641
H.D.V. OTHER GRANT				
WORKCARE	784,600	-	784,600	765,150
ALLIED HEALTH (PARAMEDICAL)	24,314	-	24,314	23,796
INSURANCE	495	-	495	1,010
DISPLAN	5,019	-	5,019	1,475
PROSTHESIS REBATE	1,927	-	1,927	-
WAITING LIST INITIATIVE	52,000	-	52,000	-
DANDENONG COMMUNITY HEALTH	11,600	-	11,600	-
SPRINGVALE RE-LOCATION	203,465	-	203,465	-
NURSING EDUCATION	3,615	-	3,615	-
H.A.C.C. FUNDING	-	9,415	9,415	-
MINOR WORKS	184,924	11,000	195,924	-
DANDENONG PALLIATIVE CARE SERVICES	-	-	-	10,000
GRANTS BY OTHER STATE DEPARTMENTS				
DEPARTMENT OF COMMUNITY SERVICE P.A.D.P. GRANT	200,727	-	200,727	174,782
SUB-TOTAL	39,182,661	382,647	39,565,308	34,172,854
GRANTS BY COMMONWEALTH DEPARTMENTS				
DEPARTMENT OF EMPLOYMENT AND TRAINING COMMONWEALTH APPRENTICE SCHEME	25,966	-	25,966	-
NON GOVERNMENTAL GRANTS				
ROYAL COLLEGE OF PATHOLOGISTS	28,968	-	28,968	-
WORLD VISION	6,676	-	6,676	-
OTHER GRANTS	-	-	-	28,698
TOTAL REVENUE GRANTS	39,244,271	382,647	39,626,918	34,201,552
CAPITAL GRANTS				
EMERGENCY DEPARTMENT	2,151,716	-	2,151,716	-
NORTH WARD REPLACEMENT	265,080	-	265,080	-
MEDICAL EQUIPMENT	90,000	-	90,000	-
COMPUTER EQUIPMENT	50,000	-	50,000	-
TOTAL	2,556,796	-	2,556,796	755,594

THESE NOTES FORM PART OF THE ACCOUNTS AND SHOULD BE READ IN CONJUNCTION WITH THEM..

NOTE 3 - INDIRECT CONTRIBUTION BY HEALTH DEPARTMENT VICTORIA

THE HEALTH DEPARTMENT VICTORIA MAKES CERTAIN PAYMENTS ON BEHALF OF THE HOSPITAL WHICH, IN ACCORDANCE WITH THEIR REQUIREMENTS, HAVE BEEN BROUGHT TO ACCOUNT IN DETERMINING THE OPERATING RESULT FOR THE YEAR. THEY ARE BROUGHT TO ACCOUNT AS NON-CASH INCOME AND OFFSET BY EXPENDITURE.

THESE WERE:-

	1988/89 \$	1987/88 \$
AUDIT FEES	25,900	-
WORKCARE THRESHOLD INSURANCE	114,506	106,773
INDUSTRIAL SPECIAL RISK INSURANCE	38,982	17,290
PUBLIC RISK INSURANCE	269,208	274,060
INDUSTRIAL RELATIONS SERVICE	12,290	11,508
HOSPITAL COMPUTING SERVICE CHARGES	40,741	32,020
TOTAL	\$501,627	\$441,651

NOTE 4 - PATIENT FEES

	REVENUE PATIENT FEES RAISED		ASSET PATIENT FEES RECEIVABLE	
	1/7/88 TO 30/6/89 \$	1/7/87 TO 30/6/88 \$	AS AT 30/6/89 \$	AS AT 30/6/88 \$
OPERATING				
INPATIENTS	5,569,394	5,337,030	932,458	990,311
OUTPATIENTS	196,803	232,570	94,575	127,007
SUB-TOTAL	5,766,197	5,569,600	1,027,033	1,117,318
LESS PROVISION FOR DOUBTFUL DEBTS OPERATING			83,753	84,836
			943,280	1,032,482
SPECIAL PURPOSE	1,556,925	1,603,671	421,448	553,301
DAY HOSPITAL	10,636	25,378	691	6,611
TOTAL	7,333,758	7,198,649	1,365,419	1,592,394

THESE NOTES FORM PART OF THE ACCOUNTS AND SHOULD BE READ IN CONJUNCTION WITH THEM.

NOTE 5 - LINEN SERVICES

ALL LINEN SERVICES ARE CONTRACTED TO WARRAGUL LINEN SERVICE.

NOTE 6 - OTHER REVENUE

	HOSPITAL 1988/89 \$	DAY HOSPITAL 1988/89 \$	TOTAL 1988/89 \$	TOTAL 1987/88 \$
MEALS & ACCOMMODATION	49,488	-	49,488	39,513
INTEREST RECEIVED	239,321	-	239,321	264,878
DONATIONS	367,427	-	367,427	425,731
OTHER (SEPARATE LIST)	938,904	971	939,875	842,591
TOTAL OTHER REVENUE	1,595,140	971	1,596,111	1,572,713
DETAILS OF OTHER				
MEDICAL REPORTS	18,767	-	18,767	19,186
BUSINESS RIGHTS	8,330	-	8,330	800
BAD DEBTS RECOVERED	30,840	-	30,840	28,730
OTHER	61,392	971	62,363	214,443
NON OPERATING INITIATIVES: GROSS INCOME				
DIAGNOSTIC SERVICES	676,057	-	676,057	518,056
PARAMEDICAL SERVICES	143,518	-	143,518	61,376
TOTAL	938,904	971	939,875	842,591

NOTE 7 - OPERATING EXPENSES

ADDITIONAL INFORMATION
REQUIRED UNDER
SECTION 29 (2B) OF THE
ANNUAL REPORTING
(CONTRIBUTED INCOME
SECTOR REGULATION 1988.)

	1988/89 \$	1987/88 \$
- DEPRECIATION	557,709	418,235
- BAD DEBTS WRITTEN OFF	68,337	27,863
- PROVISION FOR DOUBTFUL DEBTS	83,753	84,836
- PROFIT (LOSS) ON SALE OF ASSETS	(342)	41,230
- AUDIT FEES	25,900	21,015

NOTE 8 - ABNORMAL ITEMS

IN 1988/89 THE HEALTH DEPARTMENT OF VICTORIA FUNDED A PRIOR YEAR ADJUSTMENT FOR THE DANDENONG AND DISTRICT HOSPITAL FOR \$210,800 RELATING TO 1987/88 AND \$15,303 FOR THE DAY HOSPITAL RELATING TO 1986/87.

NOTE 9 - EXTRAORDINARY ITEMS

THERE ARE NO TRANSACTIONS OF AN EXTRAORDINARY NATURE.

NOTE 10 - TRANSFERS FROM RESERVES

FROM CAPITAL RESERVES	1988/89 \$	1987/88 \$
- EXPENSES APPORTIONMENT FOR PUBLIC RELATIONS DEPARTMENT	60,859	
- DAY HOSPITAL NET EXPENSES ON CAPITAL ACCOUNTS	2,379	45
FROM SPECIFIC PURPOSES		
- EXPENSES INCURRED AGAINST SPECIFIC PURPOSES REVENUE	41,461	126,462
	104,699	126,507

THESE NOTES FORM PART OF THE ACCOUNTS AND SHOULD BE READ IN CONJUNCTION WITH THEM.

NOTE 11 - TRANSFERS TO RESERVES

	1988/89	1987/88
TO CAPITAL RESERVES FOR -NET CAPITAL EARNINGS FROM INTEREST AND OTHER REVENUE	251,239	468,491
TO SPECIFIC PURPOSE RESERVE FOR - -NET SURPLUS FROM SPECIFIC PURPOSE PROJECTS	535,165	760,900
	786,404	1,229,391

NOTE 12 - PROVISION FOR EMPLOYEE ENTITLEMENTS

	CURRENT \$	NON CURRENT \$	1988/89 \$	TOTAL 1987/88 \$
LONG SERVICE LEAVE	608,000	2,104,685	2,712,685	2,351,153
ANNUAL LEAVE	2,772,673	-	2,772,673	2,488,265
SABBATICAL LEAVE	-	-	-	-
ACCRUED DAYS OFF	123,460	-	123,460	100,747
TOTAL	3,504,133	2,104,685	5,608,818	4,940,165
			NIL	NIL
			NIL	NIL

NOTE 13 - LEASE LIABILITY

NOTE 14 - PATIENT TRUSTS

NOTE 15 - STORES

	1988/89 \$	1987/88 \$
PHARMACEUTICALS	95,221	74,573
CATERING SUPPLIES	15,111	17,052
HOUSEKEEPING SUPPLIES	38,545	27,651
MEDICAL & SURGICAL LINES	128,333	105,683
ENGINEERING STORES	1,741	1,189
ADMINISTRATION STORES	59,927	52,782
OTHER	91,012	115,340
- C.S.S.D.	96,054	111,987
- PATHOLOGY		
TOTAL	525,944	506,257

NOTE 16 - DEBTORS AND ACCRUED REVENUE

	LESS THAN 1 YEAR \$	1988/89 \$	TOTAL 1987/88 \$
INTER HOSPITAL DEBTORS	311,657	311,657	188,203
ACCRUED REVENUE - H.D.V. AND INTEREST	1,703,379	1,703,379	-
TOTAL	2,015,036	2,015,036	188,203
LESS PROVISION FOR DOUBTFUL DEBTS	-	-	-
- INTER HOSPITAL DEBTORS	-	-	-
- TRADE DEBTORS	-	-	-
- ACCRUED REVENUE	-	-	-
TOTAL DEBTORS AND ACCRUED INCOME	2,015,036	2,015,036	188,203

THESE NOTES FORM PART OF THE ACCOUNTS AND SHOULD BE READ IN CONJUNCTION WITH THEM.

NOTE 17 - INVESTMENTS

	CURRENT	NON CURRENT	1988/89	CURRENT	TOTAL 1987/88 NON CURRENT	TOTAL
	\$	\$	\$	\$	\$	\$
SPECIFIC PURPOSE						
<u>PATHOLOGY FUND</u>						
-FIRST NATIONAL 11 A.M. CALL 16.5%	300,000	-	300,000	300,000	-	300,000
<u>TRUST RESERVE FUNDS</u>						
-FIRST NATIONAL 11 A.M. CALL 16.5%	600,000	-	600,000	600,000	-	600,000
-NATIONAL AUSTRALIA BANK 90 DAYS 17%	750,000	-	750,000	886,000	-	886,000
<u>O & G PRIZE FUND</u>						
-NATIONAL AUSTRALIA BANK 60 DAYS 12%	1,897	-	1,897	1,731	-	1,731
INVESTMENT LOAN-S.E.C.	800	4,489	5,289	800	5,420	6,220
CAPITAL INVESTMENT	-	-	-	200,000	-	200,000
TOTAL	<u>1,652,697</u>	<u>4,489</u>	<u>1,657,186</u>	<u>1,988,531</u>	<u>5,420</u>	<u>1,993,951</u>

THERE WERE NO INVESTMENTS AT THE 30TH JUNE 1989 FOR CAPITAL OR OPERATING FUNDS

NOTE 18 - NON CURRENT ASSETS

	30/6/89 AT COST \$	DEPRECIATION FOR 1988/89 \$	ACCUMULATED DEPRECIATION 30/6/89 \$	NET ASSETS 30/6/89 \$	NET ASSETS 30/6/88 \$
LAND	55,636	-	-	55,636	55,636
BUILDINGS	18,625,732	-	-	18,625,732	18,578,302
BUILDINGS UNDER CONSTRUCTION					
- NORTH WARD	265,080	-	-	265,080	-
- EMERGENCY DEPT.	2,233,910	-	-	2,233,910	24,865
EQUIPMENT UNDER CONSTRUCTION					
- CO-GENERATION	7,500	-	-	7,500	-
PLANT, EQUIP.					
OFFICE FURNITURE & FITTINGS	10,832,376	554,417	2,776,915	8,055,461	7,129,308
MOTOR VEHICLES	184,805	-	-	184,805	181,909
TOTAL	<u>32,205,039</u>	<u>554,417</u>	<u>2,776,915</u>	<u>29,428,124</u>	<u>25,970,020</u>
DAY HOSPITAL					
BUILDINGS	344,866	-	-	344,866	344,866
PLANT, EQUIPMENT, OFFICE FURNITURE	74,502	-	-	74,502	73,174
MOTOR VEHICLES	24,945	3,292	13,168	11,777	15,069
TOTAL	<u>444,313</u>	<u>3,292</u>	<u>13,168</u>	<u>431,145</u>	<u>433,109</u>
CONSOLIDATED TOTAL	<u>32,649,352</u>	<u>557,709</u>	<u>2,790,083</u>	<u>29,859,269</u>	<u>26,403,129</u>

NOTE 19 - NO LEASED ASSETS

THERE WERE NO LEASED ASSETS HELD BY THE HOSPITAL

THESE NOTES FORM PART OF THE ACCOUNTS AND SHOULD BE READ IN CONJUNCTION WITH THEM.

NOTE 20

RECONCILIATION OF NET SURPLUS (DEFICIT)
WITH FUNDS FROM OPERATIONS

	1988/89 \$	1987/88 \$
NET SURPLUS(DEFICIT)	(311,812)	(263,993)
ADD NON CASH ITEMS		
-PROVISION FOR DEPRECIATION	557,709	418,235
-PROVISION FOR LONG SERVICE LEAVE, ANNUAL LEAVE AND A.D.O'S	4,294,722	3,898,662
-PROVISION FOR DOUBTFUL DEBTS	(1,083)	(22,836)
TOTAL NON CASH ITEMS	<u>4,851,348</u>	<u>4,294,061</u>
NET FUNDS FOR OPERATIONS	<u>4,539,536</u>	<u>4,030,068</u>

NOTE 21 - CAPITAL WORKS COMMITMENTS

NORTH WARD -

-TOTAL COST AT COMPLETION IS ESTIMATED TO BE		\$5,050,000
LESS EXPENDITURE TO DATE	1987 - 88 1988 - 89	\$265,080
OUTSTANDING COMMITMENT FOR NORTH WARD		<u>\$4,784,920</u>

EMERGENCY DEPARTMENT -

-TOTAL COST AT COMPLETION IS ESTIMATED TO BE		\$3,700,000
LESS EXPENDITURE TO DATE	1987 - 88 1988 - 89	\$24,865 \$2,209,045
OUTSTANDING COMMITMENT FOR EMERGENCY DEPARTMENT		<u>\$1,466,090</u>
TOTAL CAPITAL WORKS COMMITMENT		<u>\$6,251,010</u>

NOTE 22 - CONTINGENT LIABILITIES

THERE ARE NO CONTINGENT LIABILITIES OUTSTANDING AGAINST THE HOSPITAL

NOTE 23 - CLAIMS AGAINST THE HOSPITAL

A NUMBER OF MEDICAL PRACTITIONERS HAVE COMMENCED A LEGAL ACTION AGAINST THE HOSPITAL REGARDING FEES FOR SERVICE PAYMENTS. THE SUM OF THE CLAIMS AMOUNT TO \$4,362,688.31 PLUS INTEREST AND COSTS. THE HOSPITAL, IN CONJUNCTION WITH THE HEALTH DEPARTMENT VICTORIA, IS DEFENDING THESE CLAIMS.

NOTE 24 - TRANSFER BETWEEN RESERVES

FROM SPECIAL PURPOSES TO CAPITAL :	\$459,102	
-MEDICAL FUND - EQUIPMENT PURCHASES	\$305,810	\$764,912
-TRUST FUND - CAPITAL PURCHASES		
FROM CAPITAL TO SPECIAL PURPOSES:	\$33,600	\$33,600
NET TRANSFER TO CAPITAL FROM SPECIAL PURPOSES		<u>\$731,312</u>

CERTIFICATES AND REPORTS

RESPONSIBLE ACCOUNTING OFFICER

I, Terrence Haining, Finance Manager, being the officer responsible for the preparation of the accompanying Accounts, hereby certify that the Financial Statements have been prepared in accordance with section 11 of the Annual Reporting Act 1983 and the Annual Reporting (Contributed Income Sector) Regulations 1988. In my opinion these financial statements, comprising a Balance Sheet, Revenue and Expense Statement, Consolidated Statement of Changes in Equity, Statement of Sources and Applications of Funds, and Notes to and forming part of the financial statements, present fairly the financial transactions during the year ended 30 June, 1989, and the financial position of the Dandenong and District Hospital as at 30 June, 1989.

At the date of the signing of the Financial Statements, I am not aware of any circumstances which would render any particulars included in the statements misleading or inaccurate.

28th September, 1989

T.T. Haining, F.A.S.A., C.P.A. (MGT.ACCT.) Grad.Dip.Acct. & Fin., F.T.I.A.

COMMITTEE OF MANAGEMENT

We hereby certify that the Financial Statements have been prepared in accordance with section 11 of the Annual Reporting Act 1983 and the Annual Reporting (Contributed Income Sector) Regulations 1988. In our opinion these Financial Statements, comprising Balance Sheet, Revenue and Expense Statement, Consolidated Statement of Changes in Equity, Statement of Sources and Applications of Funds, and Notes to and forming part of the financial statements, present fairly the financial transactions during the year ended 30 June, 1989, and the financial position of the Dandenong and District Hospital as at 30 June, 1989.

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

28th September, 1989

B.M. EDGAR
Chief Executive Officer

R. HARMAN
Honorary Treasurer

K. GODFREY
President

AUDITOR-GENERAL'S REPORT

The accompanying Financial Statements comprising Revenue and Expense Statement, Balance Sheet, Statement of Sources and Applications of Funds, Consolidated Statement of Changes in Equity and Notes to the Financial Statements of the Dandenong and District Hospital have been audited as required by the Annual Reporting Act 1983 and in accordance with Australian Auditing Standards.

Under the Annual Reporting (Contributed Income Sector) Regulations 1988, a hospital is not required to provide depreciation on non-current assets held prior to 1 January 1989. Consequently, the hospital has not provided for depreciation on buildings valued at \$18,970,598 and the Day Hospital's plant and equipment valued at \$74,502. This is a departure from Australian Accounting Standard AAS4 Depreciation of Non-Current Assets. In my opinion, depreciation, which allocates the cost of an asset over its useful life should have been provided on these items and been included as an operating expense in the Revenue and Expense Statement.

The hospital maintains an asset register. However, there were material variances between the value of plant, equipment, office furniture and motor vehicles recorded in the Balance Sheet and the values recorded in the register. Therefore, I am unable to determine the cost or existence of all of the assets making up the items in the Balance Sheet and the adequacy of the depreciation charge of \$557,709 on these assets for the year and the accumulated depreciation of \$2,790,083 at year end.

In my opinion, the Financial Statements comply, in all material respects, with the requirements of the Annual Reporting Act 1983, and except for the effect on the Financial Statements of the matters referred to above, present fairly the state of the affairs of Dandenong and District Hospital as at 30 June 1989 and the results of its operation for the year ended on that date in accordance with Australian Accounting Standards.

24th October, 1989

C.A. BARAGWANATH
Auditor-General

FIVE YEAR STATISTICAL REVIEW

	1988/89	1987/88	1986/87	1985/86	1984/85
Total Inpatients Treated	14,732	14,013	12,750	13,162	13,836
Daily Average	273.57	268.45	269.45	275.70	287.30
Average Stay	6.77	7.01	7.71	7.60	7.60
Average Cost Per Day	\$402.68	\$357.29	\$339.51	\$303.30	\$265.51
Casualty Attendances	31,978	34,379	36,204	40,262	41,844
Radiology Examinations	46,326	45,679	46,803	43,123	42,169
Pathology Request Groups	336,260	304,260	276,196	229,867	214,366
Speech Pathology	5,081	6,938	7,244	6,184	6,223
Physiotherapy Treatment	51,720	59,241	50,811	54,351	57,580
Occupational Therapy Treatment	9,368	9,185	8,350	8,179	10,521
Social Work Contacts	2,342	2,436	2,417	2,595	2,671
Pharmacy Workload Units	979,744	958,781	986,882	1,077,261	1,011,293
Births	1,669	1,653	1,568	1,563	1,749
Operations Performed					
- Theatre Suite	5,971	5,629	5,439	5,682	5,767
- Casualty Theatre	892	753	617	555	635
- Obstetrics Theatre	325	231	218	222	214
Meals Prepared	614,780	610,336	599,056	621,696	675,478
Staff - Equiv. Full Time	1,109.91	1,105.85	1,103.12	1,094.06	1,040.31