

Board of Management:

Mr Andrew J Clark-President	Mrs Verda D Loats
Mrs Barbara A Devers (Term ended Oct 2005)	Mr Lloyd I Milgate
Mrs Anne Edgerton-Vice President	Mr Steve Thomas-Treasurer
Mrs Anne Greedy-Jnr Vice President (Appointed Nov 2005)	Mr Peter Walsh (Appointed Nov 2005)
Mr Alan Kingston (Term ended Oct 2005)	

Maintenance & Planning Sub-Committee:

Mrs Loris Arnold	Mr Thomas Murphy
Mrs Ellinor Caris	Mrs Verda Loats
Mr Andrew Clark	Mrs Margaret Tepper
Mrs Mavis Crome	Mr Steve Thomas
Mr Jack D Dunlop	Mrs Mary Tyler
Mr Murray Dunlop	Mrs June Walsh

Principal Officer:

Mr Chris Scott

General Manager:

Mrs Tracey Chenoweth, Cert.HS Mngmt., MRCNA

Chief Financial Officer:

Mr Kell Duncan, B Bus, ASA

Director of Nursing:

Mrs Bernadette Coleman (Appointed 1 Aug 2005)

Manager, Community Health Centre, Minyip & Medical Centre, Murtoa:

Mrs Leanne Hood

District Nursing Manager:

Mrs Vicki Jenkin

Medical Officers:

Dr L Swalwell, MB, BS, DG

Dr Robert Taylor, BSc, Dip Ed, MSc, MD (Casual from Dec 2005)

Dr James R Thomson, MBBS

Dr Abra Fransch (Appointed Aug 2005. Resigned Nov 2005)

Bankers: Bendigo Bank

Auditors: Auditor General Victoria

Solicitor: Swayn & Associates

The 2005-2006 Annual Report was released to the public on 23 October 2006.

Board photos to include:

CEO Chris Scott

Tracey Chenoweth

President Andrew Clark

Barbara Devers

VP Anne Edgerton

Jnr VP Anne Gready

Alan Kingston

Verda D Loats

Lloyd I Milgate

Steve Thomas-Treasurer

Peter Walsh

Dr Robert Taylor

Dr Lindsay Swalwell

Dr Jim Thomson

Dr Abra Fransch

Wally Coleman

Vicki Jenkin

Leanne Hood

Kell Duncan

OUR HISTORY

On 2 March, 1987, by order of the Governor in Council, the Minyip & District Hospital, the Rupanyup & District Hospital and the Murtoa Annexe Hospital were amalgamated to "Dunmunkle Health Services". The new corporate entity comprised an acute Hospital at Murtoa, a Nursing Home at Rupanyup and a Community Health Centre at Minyip.

Further changes took place in June 1994 when the Acute Hospital at Murtoa was converted to a Medical Centre and four acute beds were allocated to the Rupanyup campus, now known as the Hospital/Nursing Home, Rupanyup

Hospital/Nursing Home, Rupanyup

4 Acute beds
20 Nursing home beds
1 Respite bed
Accident & Emergency services
Out-patient services

Surgery Rupanyup

Medical Practitioner

Community Health Centre, Minyip

Adult Activities
Carers Group
Children's Activities
Community Health Nursing
Community Transport
Diabetes Education
Educational Resource Material
Exercise Programs
Health Education
Health Promotion
Healthy Lifestyle Programs
Medical Practitioner
Occupational Therapy
Out-patient services
Physiotherapy
Podiatry/ Toe-nail Cutting
Referral to other service providers
School Health Programs
Speech Therapy
Social worker
Warm Water Exercises for Arthritis

Medical Centre, Murtoa

Aged Care Assessment
Dental
District Nursing
Dementia specific day activities
Medical Practitioner
Out-patient services
Physiotherapy
Podiatry/ Toe-nail Cutting
Post-Acute Care
Post-Natal Depression group
Primary Care Nurse
Referral to other service providers
Remedial Therapy
Social Worker
Speech Therapy
TAC Personal Care
Volunteer Transport

Life Governors

Mr M Dunlop
Dr NCT Brito-Babapulle
Mrs JM Crouch
Mr J Graham
Mrs A McKinnon

Mr GW Murphy
Mr TJ Murphy
Mrs JF Niewand
Mr CS Petering
Mr RJ Petering

Miss A Purwins
Mrs R Slattery
Mr I Westerland
Mrs AM Wood

Life Governors-Deceased

Mrs B Arnold
Mrs C Baker
Mrs V Baker
Mrs R Bignall
Mrs M Boschen
Mrs A Cordes
Mr MB Delahunty
Mr JJ Drum

Mr JD Emmett
Mr JH Gawith
Mrs I Gellatly
Mr HJ Grigg BEM
Miss B Hateley
Mr HL Hateley
Mrs P Keel
Mrs D Kelly

Mrs M King
Mrs M Liersch
Mrs M McKenzie
Mrs I McRae
Mr AW Milgate
Mrs F Newall
Mr HL Niewand
Mrs O Niewand

Mrs CV Nunn
Mrs M
Rutherford BEM
Mr WW Schodde
MBE
Mrs S Starbuck
Mr JR Teasdale
Mr PT Tobin

PRESIDENT'S REPORT

Andrew Clark

This has been a steady year of planning and consolidation for the Health Service. The Board has welcomed new members to its deliberations, as the last year saw the terms of service of Mrs Barb Devers and Mr Alan Kingston end. I thank them both for the years of work that they put into the Service, and welcome Mrs Anne Gready and Mr Peter Walsh in their stead.

We have maintained our emphasis on the need to replace the ageing Murtoa Medical Centre. The Department of Human Services has inspected the Centre a number of times. Our desire to service the community to a high standard is compromised by the age and condition of the existing buildings, and we have had to put portable buildings on the site as an interim measure. Nonetheless, the staff continue to deliver the high level of care that the Service is known for. The Board remains optimistic that the coming year will see real improvements at the Murtoa campus.

Aiming to be the "best rural health service in Victoria" means paying attention to all aspects of the Service while not forgetting that it is the delivery of services to the community that really counts. To this end the Board has continued to closely watch the financial position of the Service and maintain a positive outlook. In a relative sense we perform as well as, if not better than, our peers.

We have also continued (along with just about every other country health service in Australia) to seek the services of medical practitioners. We recognise the loyal service provided by our current doctors, but we must always have an eye to the future. We are working with a number of agencies and advisors to ensure that the services of medical practitioners continue to be available across Dunmunkle.

The close relationship with Dunmunkle Lodge continues to deliver benefits to both parties, and to the community and users, as the delivery of primary care and aged care becomes better integrated and efficient. We hold strongly the view that we are successful in keeping the human face and local feeling that small services know is integral to success.

The Board was very pleased that Mrs Verda Loats was recognised for voluntary work beyond the call of duty. She received a Rural Health Award during Rural Health Week. We salute Verda as a representative of every other volunteer in the service, on who so much relies.

The Board thanks all staff members for their genuine commitment and dedication to the service and their community. We were pleased to note that our manager, Mrs Tracey Chenoweth, has taken the role of chair for the Primary Care Partnerships for the Wimmera, and she has our full support.

The Board extends its appreciation to the community for its continued support. The road is often a bumpy one, and the nature of a rural health service is that there will always be challenges, potholes and speed traps along the way. With your assistance and interest Dunmunkle Health Service will stay in tune and on track to provide the outstanding local service we all expect.

GENERAL MANAGER'S REPORT

Tracey Chenoweth

Welcome to the 2005-2006 Annual Report for Dunmunkle Health Services.

Once again, it has been a very interesting year. I have decided to keep my report to a minimum as you will read reports from a variety of staff members.

Events of significance this year have been:

- Appointment of Mrs Wally Coleman on 1 Aug 2005 as Director of Nursing to the hospital/nursing home, Rupanyup campus.
- The arrival and departure of Dr Abra Fransch. Dr Fransch was with us for 4-months before she and her children moved to Ararat.
- Dr Robert Taylor reducing his work commitment to casual only.
- Dr Lindsay Swalwell's intention to retire at the end of 2006.
- Mrs Verda Loats, recipient of a Rural Health Award-Volunteer. Verda received her award for the Grampians region at a presentation held at Shepparton during May.
- Dunmunkle Health Services continues to actively attempt to recruit General Practitioners.
- Community Emergency Response Team (CERT). Dunmunkle Health Services continues to actively support the CERT Team which has been operational since November 2005. Additional volunteers are now undertaking their CERT training and will graduate 26 July 2006. The CERT has proved to be a very valuable asset to our community.
- We have embraced to V O I P Technology.
- Reviewed the Strategic Plan.
- Reviewed the Risk Management Plan and Register to July 2006.
- EQuIP review to August 2005.
- Participated in Allied Health Workforce Project.
- Continue to participate in the Primary Care Partnership (PCP) at Executive and sub-committee level.
- Participate in the SRHS Director of Nursing Executive Forum in Melbourne.
- Attend a number of conferences and workshops relating to Aged Care, Primary Care and Small Rural Health Services.
- State wide Health Promotion priority issues review.
- The auxiliaries supporting the three campuses have once again been very generous. Without these volunteer workers we would not be able to purchase lots of extras that enhance the services offered. Some of these ladies have been serving us for over 30-years.
- My congratulations to those staff being recognised for years of service. These are Judy Hazelden and Susan Kelly - 25 years. Kaye Dunlop, Sandra Loats, Sue Robertson & Marg Sprake – 20 years. Wes Hazelden – 10 years.

To all the staff, I say thank you. You are a wonderful and caring team who takes the journey of this health service through its continuing evolution. There continue to be many challenges but we also are very successful in what we do, so we should be very proud of this as we continue to work toward our Vision, Mission and Major Goals.

DIRECTOR OF NURSING- RUPANYUP NURSING HOME

Wally Coleman

It is with much pleasure that I am writing this report as Director of Nursing at the Rupanyup Hospital and Nursing Home.

I was appointed to this position August 2005 – how the time goes by!

I would firstly like to acknowledge a few people who have assisted me in my role over the last twelve months. Tracey Chenoweth for her never-ending guidance and support, Jo Marshman who knows where everything is or where it should be! Chris McCallum for her knowledge of Quality Improvement and to all the staff for making me welcome.

I would like to acknowledge the dedicated team of nurses and domestic service staff who deliver such high quality care to our residents and patients at Rupanyup. Thank s also to our Maintenance person, Greg Russell, our gardener, Ian Smith and our hairdresser, Carmel Jenkins. Your services are greatly appreciated by us all.

I would like to welcome the following new staff members who joined the facility over the last twelve months:

- Trudy De Costa, Jackie Connelly, Janine Launder, David Bamford, Karen Lockwood, Sally Cooper, Peter Hill, Dianne Harris, Nerida Hall, Sandy Rabl, Carolyn Hall, Joan Hargreaves

Mention must also be made of our wonderful casual staff who are flexible and willing to help out as needed – thank you all.

New positions created this year have included Chris McCallum as our Aged Care Quality Improvement Manager, Carolyn Hall as Activities Assistant, Joan Hargreaves as Masseur and Trish Childs is undertaking the Residential and Community Aged Care Assessments.

Activities:

The inclusion of Carolyn Hall as our daily Activities Assistant has greatly enhanced the delivery of group and one on one activities with our residents. The opportunity to have regular outings on the bus has also been provided. Our activities have included the introduction of a fortnightly 'Happy Hour', cooking, wheelchair outings and we have purchased a chook pen and a couple of chooks! Cazz is also busy with some of our residents tending to the vegetable garden, which has expanded and is providing us with a variety of fresh vegies.

Volunteer Groups:

Without volunteer groups our facility would not be as it is. The wonderful Residents, Relatives and Friends Support Group continue with the weekly Bingo and other activities such as musicals. We had a very successful Christmas luncheon again with presents provided for all the residents – we thank you dearly for your time, kindness and support. Amy Hurley must also be acknowledged for her time, leading our residents in gentle exercises on a regular basis.

Equipment:

We have been able to purchase a new Stand-Up lifter, some slide sheets and new lounge chairs for our residents this year. Due to the generosity of all the Ladies Auxiliary groups we have also purchased a new split system for heating and cooling in the residents living room. I would like to take this opportunity to thank the Ladies Auxiliary group and all those who have contributed to our facility throughout the year.

Hospital/Nursing Home Report cont..

Education:

One can never learn enough – how true! Our staff have engaged in various Professional Development sessions this past year. All staff undertake mandatory education such as Cardio-Pulmonary Resuscitation, Fire Safety and Evacuation as well as No-Lift Manual Handling and Documentation. Other education has included:

- Pupps – Wound Management, Palliative Care, Aromatherapy, Foot Care, Potential Violence in the Workplace, Contenance, No-Lift, Infection Control, CPR and Fire Drill, Dementia Care, Food Handling and Food Safety, Patient Assessment and the RCS documentation.

I am very proud that some of our domestic services staff are currently undergoing traineeships commenced in June of this year – this is a new initiative for Rupanyup and I wish them all well with their assessments and assignments.

Accreditation:

Our facility continues with 20 high care nursing home beds, one respite bed and four acute beds. We were successful in obtaining a two- year Equip accreditation for our four acute beds in August 2005 and are currently working towards our Aged Care Accreditation scheduled for mid 2007. In May of this year the Aged Care Standards Agency made a support visit which focussed on Quality Improvement – feedback from this was very positive and pleasing.

And so we continue...we continue to learn, we continue to care, we continue to nurture, to share and above all we continue to provide a happy home for our aged residents.

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QUALITY OF CARE REPORT 2005 - 2006

Leanne Hood & Chris McCallum

Quality has many different and varied meanings. This sometimes depends greatly on where you are geographically located. To Dunmunkle Health Services (DHS) it is what makes our organization what it is today. It reflects the relationships that have been built with our consumers. We are constantly and actively seeking feedback from the resident's/patient's, families, staff & the community to make our organization a better one. A culture of Quality and the implementation of change takes time, but this is worth the investment, as long as the change improves the service that is provided to our consumers. Quality is a cycle, we need to visit all areas before the cycle can be complete. Each step is as important as each other.

QUALITY SYSTEM

Dunmunkle Health Services Quality System is very important to the success of our health care service. Quality Improvement (QI) Forms are the main way that we identify the need to improve or change a current practice. During 2005/2006 (12 month period) we had 127 QI Forms submitted at Hospital/Nursing Home alone. All bar one have been actioned, evaluated & completed. The non-actioned was due to budget restraints. Another way we monitor our Quality System is by conducting audits and surveys. There have also been numerous improvements made through this process.

As with any areas that need to be improved upon, it is very important that they are measured prior to the implementation of change, as it is only then that there is evidence of the success of the improvement. This is also reassuring for staff to know that their hard work and commitment has brought about the change.

Our Quality System is robust and continually improving due to the commitment of all staff employed by Dunmunkle Health Services and to the community in which we are proud to be a part of!

INFECTION CONTROL

Jan Spencer, Infection Control practitioner contracted through the Wimmera Health Care Group, continues to offer support and education to all Dunmunkle Health Services staff. Some of the education that she has offered included:

- Infection Control (Best Practice)
- Gastroenteritis Management
- Hand Hygiene
- Cleaning Practices

Jan is also responsible for collecting & submitting data to various government departments and this data allows the Service to benchmark against other health care services. These results give an indication of the areas the Service performs well and the areas that we may need to improve. This ensures that all staff and clients/patients are protected from infection.

	2004-2005	2005-2006
Internal Kitchen cleaning result	93%	97.4%93%
External Kitchen Cleaning Result	Passed	Passed
Environmental Services	88%	94.6%
Maintenance	100%	100%
Infectious Diseases Reported	0	0
Rupanyup Rain Water Testing	Did not meet required standards	Met required standards

AUDITS/SURVEYS

Each year we have scheduled audits/surveys that are done both at internal & external level. These findings are once again submitted for benchmarking purposes. Audited areas include:

- Cleaning
- Waste Management
- Clinical Areas
- Laundry
- Maintenance
- Residential Documentation
- Acute Documentation
- Medication Documentation
- No-Lift Survey
- Activity Audit
- Staff Satisfaction Audit
- Quality System Survey
- Consumer Survey

Results are collated by qualified staff and are submitted to relevant committees for analysis. It should be noted that overall staff satisfaction has increased by 17.4% in the 2005-2006 period. Happy staff makes for a happy working environment, which in turn ensures the quality care for our consumers.

FALLS MONITORING/PREVENTION

Rupanyup Hospital/Nursing Home has an active Falls committee that meets regularly. One of the main roles of this committee is to prevent/monitor falls within the Rupanyup Hospital/Nursing home. The committee has recently developed a form to document falls. This form is completed along with an Incident Report and discussed at the next Falls meeting. Action taken depends on the risk factor and likelihood of the fall happening again. The committee has also implemented a card identification system. This alerts all staff the level of assistance that ambulatory residents require with or without a walking aide.

	2002-2003	2003-2004	2004-2005	2005-2006
Falls	67	44	47	64
Falls with fracture	0	0	0	0

The increase in falls for the last term was mainly due to the increase in reporting of residents who were found sitting/lying on the floor with no obvious injury. These were generally not reported in recent years.

MEDICATION ERRORS

	2003-2004	2004-2005	2005-2006
Medication Errors Involving Patient	5	3	5
Medication Errors Process	5	4	5

For the last year, the medication errors involving the patient did not result in any adverse outcome for the resident/patient.

PRESSURE WOUND MONITORING & PREVENTION

This is another program that has been implemented at the Rupanyup Hospital/Nursing Home with suitably trained staff. These staff members share advice and provide support for all staff should a pressure wound occur. Dunmunkle Health Services undertakes the Pressure Ulcer Point Prevalent Survey (PUPPS) that have been instigated by the Department of Human Services for acute patients. These results are reported to the department quarterly. Dunmunkle Health Services has recognized this as a potentially serious area and is aware that the number and severity of pressure areas is an indication of the quality of care provide to the patients. In the coming year Dunmunkle Health Services will also be reporting on pressure wounds within the nursing home. Rupanyup Hospital/Nursing Home has purchased seven new air mattresses and *Spenco* mattresses to ensure that the excellent results remain (below). Other aides that are being used include lambs wools, special foot and booties and Rupanyup has pressure care prevention policies that staff adhere to.

Pressure Ulcer Type	2005-2006
Stage 1 (Discoloration of intact skin)	0
Stage 2 (Partial thickness skin loss or damage)	0
Stage 3 (Full thickness skin loss)	0
Stage 4 (Full thickness skin loss with extensive destruction and necrosis)	0

ACCREDITATION

There are legal requirements that our health service must adhere to in order to remain operational. Dunmunkle Health Services have independent experts in their fields visit to provide support, advice and act as advocates for all patients/residents and consumers.

The Australian Council of Health Care Standards (ACHS) is the accreditation body that accredits the primary care and acute care services within Dunmunkle. The visit occurred August 2005 with excellent results. There were 24 recommendations from the previous report and all were completed. From this survey there were only seven recommendations and none of these were high priority (urgently requiring attention).

Australian General Practice Accreditation Limited (AGPAL) is another accreditation body that accredits the doctor's practice. Last visit from the surveyors was 16 December 2004 and Dunmunkle Health Services achieved accreditation in all areas. The next accreditation visit is due before 5 April 2008.

Rupanyup Hospital/Nursing Home received a support visit from the Aged Care Standards surveyor in June of this year. This was an unannounced visit of a surveyor, undertaking a spot audit of our and services. Accreditation shouldn't be considered a major event, it is a process where the stakeholders get to promote all their hard work and sell their organization. It gives health care services the opportunity to promote and be recognized for all their hard work and team commitment. The results were excellent from the support visit with only a couple of suggestions made to improve the service, which as it turned out, were already in place. Dunmunkle is accredited until August 2007.

QUALITY INDICATORS

As from 1 July 06, every aged care residential facility is required to collect specific data and submit it Department of Human Services. The areas of interest include:

- Pressure Ulcers
- Falls/Fractures resulting from falls
- Physical Restraint
- Resident's using 9 or more medications
- Unplanned weight loss

Each set of indicators have specific guidelines that are to be followed when collecting and submitting data. This data will be submitted quarterly and is to be benchmarked with against other facilities. This data is the minimum that facilities should collect. A quality organization will collect other data for internal quality improvement. Staff attended education sessions on this process and they will co-ordinate the process. By July 07, this data will be available on the Web for all health care facilities to gauge where their strengths and weaknesses are in these particular areas.

COMMITTEES

It takes dedicated staff to maintain quality within a health care facility. Our organization is no different. Dunmunkle Health Services has several committees, within the health service. Many of these people volunteer their time, share their knowledge and act as advocates for the patient/residents/clients at these meetings. Some of the various meetings include:

- Board of Management
- Maintenance & Planning
- Quality Improvement
- OH&S
- No-Lift
- Falls
- Resident's & Relatives

Dunmunkle Health Services would like to thank the “champions” of these committees. These are the people that ensure the meetings do happen, that notices are displayed & that minutes are distributed.

GROUP E HOSPITALS

Leanne Hood & Chris McCallum attend meetings with other health services of similar size to Dunmunkle Health Services. The purpose of this group is to collect data that is of interest to all the services and benchmark it against each other. The results are very positive and have shown that Dunmunkle Health Services provides a quality service and it is heading in the right direction. The other main function of this group is to network, share ideas, offer support and provide solutions to each others problems.

“Quality is a journey, not a destination”

Hospital/Nursing Home, Rupyup		2005	2006
Total number of beds	Acute	4	4
	Nursing Home	20	20
	Respite	1	1
Number of patients treated	Acute	23	33
Number of bed days	Acute	325	474
	Nursing Home	7254	7052
	Respite	249	145
Occupancy rate	Acute	22.3%	35%
	Nursing Home	99.4%	96.6%
	Respite	68.2%	39.7%
Average length of stay	Acute	14.1	14.4
WEIS (increased considerably 2006)		32	69.63
Emergency Presentations		183	223
Outpatients Occasions of service		252	293

Murtoa Medical Centre	2005	2006
Primary Care Nursing	2584	2,359
Accident & Emergency	117	62
Physiotherapy (adhoc service)	127	125
Speech Therapy	128	62
Podiatry (without service for 6 months)	36	39
Remedial Therapy & Myotherapy	240	Nil
Social Worker	1333	775

Marma Lake Day Activity Centre	2005	2006
Number of Individuals	9	9
Numbers of Sessions	91	87
Number of Attendances	681	360

District Nursing	2005	2006
Individual	82	67
Hours	2,350	2,394
Contacts	4,737	5,099
Kilometres travelled	24,777	27,526
<p>Dunmunkle Health Services, District Nurses visit homes in and around Minyip, Murtoa, Rupanyup, Marnoo, Wallaloo, Lubeck, Jung, Boolite, Wal Wal, St Helens Plains and Laen. The Service negotiates with other health providers to pick up clients living on outlying service-area boundaries to ensure maximum care for all.</p>		

Medical Practitioners	2005	2006
Clinics	839	729
Total contacts	9859	8696

Summary of Staff Employed Equivalent Full-time in Dunmunkle Health Services	2006
Nursing	37.07
Administrative & Clerical	4.42
Allied Health	2.18
Hotel & Allied Services	2.06
Medical	2.07

Number of WorkCover Injuries Recorded	2005	2006
Nursing (includes TAC program)	Nil	3
Administrative & Clerical	1	Nil
Medical Support	Nil	Nil
Food & Environmental	2	1
Medical	Nil	Nil

Minyip Community Health Centre	2005	2006
Community Health Nurse	3400	2323
Community Health Program contacts	7068	7797
Aged Care Assessment	237	114
Adult Activity Centre	831	824
Carers	32	28
Diabetes	25	45
Gentle Exercises at CHC	332	313
Gentle Exercises at Dunmunkle Lodge	238	339
Kindergym	205	259
Men's Matters	279	292
Take-A-Break Child Care at Minyip & Rupanyup	136	288
Walkers	288	283
Anxiety & Depression (commenced April 2005 Finished July 2005)	85	26
Warm Water Exercise for Arthritis	980	1114
Screenings for BP	2159	2745
Screenings for BSL	2154	2709
Pap Smear Clinic contacts	79	95
Optometry (service lost in Nov 04 due to staffing)	32	0
Occupational Therapy	193	262
Physiotherapy (reduced service due to staffing)	121	296
Podiatry & Toe-nail cutting	315	606
Speech Therapy	117	128
Transport (includes all transport other than Volunteer Service)	2216	1922

2005-2006 HEALTH PROMOTION PRIORITIES

Due to long-standing drought conditions, the social and economic factors, demographics and population age, Dunmunkle Health Services in its 2005-2006 Health Promotion plan elected the following health priorities.

- Mental Health & Wellbeing/Social Connectedness
- Cardiac/Heart Health
- Diabetes
- Cancer

Which resulted in the following programs.

Cancer Awareness

Biggest Morning tea fundraiser and information – 2 sessions with 54 attendees

Breastscreen - 4 sessions with 10 attendances

Anti-cancer - 3 sessions with 63 attendances

Leukaemia fundraiser, information and awareness – 1 session with 26 attendances.

Molelscan trip to Adelaide for individual appointments, -1 session with 5 attendances.

Relay for Life participation and fundraising with staff and community members making up the 28 member team.

Women's health clinics (pap smear and breast self examination) -30 clinics with 95 attendances.

2005-2006 Health Promotion Priorities cont...

Cardiovascular/Heart Health & Diabetes

Blood Pressure screenings for the general public - 48 sessions with 3,302 contacts
Blood sugar screenings for the general public and diabetics -48 session with 3,160 contacts
Men's Health for footballers - 2 sessions with 121 attendance
Men's Health for general public 2 sessions with 242 attendances
Workplace health assessments - 2 sessions with 31 attendances
Healthy Heart, Exercise & Nutrition through healthy breakfasts & morning teas in educational settings over 17 sessions with 547 attendances
Pool Exercises for women of all ages - 5 sessions with 43 attendances
Body balance - 6 sessions with 48 attendances
CPR sessions - 15 sessions with 97 attendances
Quit Smoking with secondary students - 1 session with 29 attendances
Wimmera Machinery Field Days -3 days with 124 attendances

Mental Health & Wellbeing/Social Connectedness/Other

Anxiety and depression - 5 sessions with 26 attendances
Healthy Minds forum - 1 session with 187 attendances
Surviving the school holidays - 1 session with 5 attendances
School holiday programs for primary and secondary students 7 sessions 206 students
Population health/Dunmunkle Health Services and medical practitioner availability - 1 session with 40 attendances
Kindergym open day/special other person - 1 session 14 visitors
Celtic Sounds concert 1 session 150 attendances
Community Emergency Response Awareness -3 sessions x 49
New Years Day races promoting sunsmart, cardiac and diabetic health - 1 session with 80 contacts
Farm safety awareness - 1 day session with 546 participants
Health expo - 1 session with 45 participants
Rural health week - 1 session 11 participants
Older Men and new connections - 1 session with 100 participants
Open day of opportunity shop - 60 contacts
Over 50 and fabulous for women - 14 participants
Basic and advanced 1st aid training - 10 sessions with 143 attendances
Youth activities and transport - 1 session with 47 participants
Family health and hygiene - 1 session with 20 attendances
Puberty for males & females - 2 sessions with 37 participants

HUMAN RESOURCES

Service Awards

Mrs Judith Hazelden – 25 year service award
Ms Sue Kelly – 25-year service award
Ms Kaye Dunlop – 20-year service award
Mrs Sandra Loats – 20-year service award
Mrs Sue Robertson- 20-year service award
Mrs Margaret Sprake – 20-year service award
Mr Wes Hazelden – 10 year service award

Judy Hazelden, Community Development worker

On 1 March 2006 Judy Hazelden changed roles at the Community Health Centre, Minyip, moving from her position as Adult Activities Co-ordinator (14-years) to Community Development worker. This role sees Judy developing in the health promotion field on such programs as healthy bones, nutrition, falls prevention and assisting the community health nurses with some of their programs. Judy's participation in *Men's Matters*, *Weight Maintenance*, *Gentle Exercises* and the *Walking* group has not changed. This new role is seen as a way of utilising all of the skills Judy has gained over the years, encourages creativity and provides more opportunities to interact with people in the community.

Dianne Knoll, RN Div 1, Community Health

Trained as a State Enrolled Nurse in Leongatha, Gippsland, where she with husband Steve and son, Sean, were dairy farmers.

After moving to an irrigation farm south of Cobram, Dianne completed a Bachelor of Nursing through La Trobe University.

In 1993, the family moved to Natimuk to take over the post office/newsagency.

Dianne has worked mainly in aged care and district nursing and has undertaken further studies in Remote Health.

Her interests are in horses, reading, bushwalking and spending time with her grandson. Dianne also works with Steve in the business.

Casey Cook, R N Div 1, Community Health

Growing up in the small country town of Warracknabeal, I have gained understanding about small communities and I have always wanted to return to a small country area.

After completing my VCE in 2002 I moved to Bendigo to Study Nursing at Latrobe University. I completed my bachelor of nursing degree in 2004. I began my nursing employment at the Bendigo Base Hospital where I established my acute nursing skills on the Medical /Surgical nursing.

After my Graduate year concluded I moved back to Warracknabeal and worked at Rural Northwest Health and at Donald hospital before venturing around Europe for 6 weeks. Upon my return I was employed at Dunmunkle Health Services full time as a Community Health Nurse based at the Minyip Campus. The staff support throughout the service has been incredible from campus Managers to the administration staff. I have gained valuable experience in many areas of health promotion and I am thoroughly enjoying my time working for Dunmunkle Health Services. I wish to return to university next year to study in the field of health promotion.

Jodie Baldwin, Social Worker

After studying welfare at the University of Ballarat Jodie entered the field as a support worker and case manager at Wimmera Uniting Care in the Foster Care and Family Services programs. A key component of these roles included behaviour management strategies and support for parents and foster carers. Advocacy, counselling and case management were other key components of Jodie's role before she moved into an intake position within the Family Services Program.

After leaving Wimmera Uniting Care, Jodie became a service coordinator with Vision Australia where she supported individuals (and their families) who were experiencing poor vision. Jodie's clients at this time were mostly older people.

In her current role at Dunmunkle Health Services Jodie provides a broad range of services to those in the Dunmunkle region. Counselling, advocacy, parenting support, financial assistance, referrals and education are just some of the ways Jodie can assist the community. Jodie is based at the Murtoa Medical Centre but regularly visits Rupanyup and Minyip. Jodie is enjoying the opportunity to work within the Dunmunkle region and welcomes any queries that people may have.

Jodie lives in Horsham with her husband, Terry and children, Mitchell and Erin. She is enthusiastically establishing a small orchard and large veggie patch. So, if you have any tips for her, feel free to share these when you get a chance to catch up with her. Remember, it does not have to be just the bad times that you give her a call!

Students - Medical & Nursing

Students are sequestered to the Service under the RIPE scheme or various universities such as Ballarat, La Trobe or Deakin, for their rural health experience component. They are billeted locally with either staff or community members endeavouring to include them in many community sporting and social activities to gauge what living here is like. During the fortnight they are here they take part in programs being conducted within the Service, spending time with the doctor, district nurse and many of the health promotion programs. Each must complete a project or assignment whilst here that can be used as an educational handout tool.

One student, Bernie, said: *"The reason I came to Minyip was because of our Rural Health Module for my Uni Melbourne Medical course. I did not specifically choose to go to Minyip, but I believe that students are randomly sent to country locations. Having said that, I had a great time there, mostly because of my excellent host (Wendy, thanks yet again) great, friendly and helpful staff at the Community Health Centre and heaps of opportunities to see what life and rural practice is like. The highlight for me was the visit to the wheat silos at Murtoa, followed by the duck and chicken farms. A superb day and I got great photos. Now I know where the duck comes from when I eat Peking Duck! I still suck at knitting, but after finishing off the rest of the wool (which added a whopping 5 cm to my scarf) I can't say that I have continued to knit (excuses and time, yet again)."*

STUDENTS

Jimmy Lam and Cameron Taverna, 6th year medical students.

Lauren, Andrew and Emma, nursing students, were on placement at Minyip during the school holiday program and assisted with all the programs. They were photographed at the paint ball outing at Mount Gambier.

Work Experience student, Jenna Clark, of Minyip took part in the health promotion activities and general office administration.

Ladies Auxiliary Rupanyup

Helen Baker- President, Lois Johns-Secretary, Loris Arnold-Treasurer, Gwen Barker, Aura Ballantine, Fay Dunlop-Vice President, Laurine Matthews, Joy Tickner, Lorna Trotter, Pat Sheridan, Molly Taylor, Jenny Boyd, Margaret Lingham, Pat Faulkner, Carmen Isbel, Janice Morgan, Bev Brumpton, Lynn Weidemann and Barb Oxbrow.

It has been another successful year for the auxiliary with a membership of 19 and an average attendance of 11.5 at the monthly meetings.

Fundraising has included catering, fashion parades, street stalls, raffles and competitions and through this we have been able to provide special gifts and treats for the residents and staff and part payment for heating for the residents day room of the hospital/nursing home.

We also held a 'getting to know you' afternoon tea for the nursing staff at which each staff member spoke briefly of where they had been and how long they had worked at the hospital/nursing home.

Thank you to Wally Coleman for her enthusiastic and friendly leadership.

Thank you to all members for their contribution, effort and support and thank you to the local community for their continued support.

Special acknowledgement is made to the contribution of Molly Taylor, Pat Sheridan, Joy Tickner, Aura Ballantine and Lorna Trotter who have each served more than 20-years with the auxiliary. Particular recognition should be noted of Loris Arnold for her contribution of 25-years as Treasurer and 30-years an auxiliary member. Congratulations and thank you so much for your great voluntary contribution.

Ladies Auxiliary Minyip

Verda Loats-President, Rae Talbot-Vice President, Evelyn Wright-Secretary, June Walsh-Assist Secretary, Chris Munro, Ellen Niewand, Olwen Cowan, Marie Dellavedova Treasurer, Verna Niewand, Ann Watterston.

The auxiliary has raised funds through catering, raffles and competitions to assist with purchasing a blood pressure unit, a blood clotting machine, a CPR 'doll' and part heating to the day room at the hospital/nursing home. Meetings are held quarterly on a Monday.

Ladies Auxiliary Murtoa

Cheryl Bryan-President, Mary Rabl-Vice President, Mavis Crome-Secretary, Jean Crouch-Treasurer, Joan Furfari, Gwen and Lesley Gellatly, Judy Taylor and Lila Maddern. Mr G Coutts-Auditor.

In presenting the auxiliary's report for 2005-06, I would like to thank all members for their support throughout the year with fundraising activities. Our funds have provided several small items and assisted with the purchase of heating for the resident's day room at the hospital/nursing home. Our activities have included street stalls, catering and meals-on-wheels deliveries. Meetings are held on the first Thursday of every second month and new members are always welcome. It must be noted that the auxiliary has been active for 60-years and the following members should be recognised for their years of service. Jean Crouch 44 yrs, Mary Rabl 34 yrs, Mavis Crome 32 yrs, Gwen Gellatly 28 yrs and Lola Maddern 27 yrs.

Hospital/Nursing Home Support Group

Mary Tyler, Margaret Lingham, Gwen West, Debbie Colquhoun, Jean Wray, Bernice Edwards, Shirley Mc Rae, Faye Hayes, Rhonda Carter, Jeanette Delrayne and Maureen Hellmuth.

Our bingo sessions remain very popular with the residents who look forward to the lollies.

We thank the Bendigo Bank, FRRR and the nursing home staff for their very welcome donations during the year. Our Christmas and Easter raffles were very successful and we thank the general public for their support as these are the main fundraising. Special thanks must be made to Geelong couple, Anne and Frank Saunders who donated a beautiful patchwork quilt for the Easter raffle prize plus some lovely knee rugs.

Members continue to take residents to local functions and our Christmas break-up was a great success with Santa bringing gifts and treats for the residents. Thank you to all the staff, particularly Margaret and Ellie in the kitchen, and those who helped with the catering for up to 90-meals.

Again, a big thank you to all who have helped in so many ways throughout the year.

Photo:

Thank you to Ann & Frank Saunders From Bell Post Hill Geelong.

Ann quilted rugs for the Nursing Home Residents and also for the volunteers Christmas & Easter raffles, while Frank assisted with the housework to enable Ann to sew the rugs. We thank Ann for her generosity and sharing her talents with Rupanyup.

Reunion for Murtoa Hospital Staff

Held 3 September 2005, the function brought together those who worked at the Murtoa hospital over many years. This came about through a group of ex-nursing sisters who meet on the last Thursday of each month for craft and a catch up chat. They call them selves the Marma-ites and recently decided it was time for a reunion. Compiling a list of as many people they could think of and advertised through family, friends and the local papers they were underway.

At the dinner, Mavis (Petering) Mc Callum, Anne Crafter and Maureen Delahunty, spoke of the early days and their experiences in nursing at the facility. Aprox 36 – 38 ex staff attended the evening.

**Murtoa Medical Centre Auxiliary
Celebrating 60 Years of Service - 31st August 2006**

Prepared by Mrs Jean Crouch

As the first meeting to support Medical Services in Murtoa was held in 1946, actually on 31st August, this seems to be an appropriate time to review the contribution Ladies Auxiliaries have made for 60 years.

Following a public meeting on 30th August 1946, it was decided to form an Auxiliary. Mrs M Delahunty was elected President, Mrs A Lutze & Mrs W Crouch Vice Presidents, Mrs K Grigg Secretary/Treasurer.

The average attendance at meetings was 25 & there was always some fund raising effort before the public for support. Monthly crazy whist, balls, garden parties & fetes, monthly raffles, catering for races and a Sacred concert all contributed to good financial results. Prizes for raffles were interesting – fruit cake, fat lamb, silk stockings and frequently cigarettes. Prizes to the value of £3.00, £2.00, £1.00 & tickets were sixpence. Money raised by those efforts was then used to purchase blinds, curtains, a sewing machine, towels, an urn, a wheel chair etc. A Christmas tray was always given to Staff and to any patients.

Unfortunately membership declined for various reasons and at the AGM in July 1962 it was impossible to find office bearers and a decision to go into recess was made. The support of the Ladies Auxiliary had become very important and the Committee decided to once again make the effort to form another auxiliary. This meeting was held on the 5th December 1962. There was an attendance of 14 Ladies and 10 apologies offered.

As a result of this meeting a decision was made to form another auxiliary and the following office bearers were elected. President- Mrs Eileen Fry, Vice Presidents- Mrs Irma Gellatly & Mrs Jean Crouch, Secretary/Treasurer- Mrs Barbara Schache.

Mrs. Fry held office for 2 years and was succeeded by Rosalea Slattery who held office for 23 years and was then followed by Pat Keel, Mary Rabl & the current President Cheryl Bryan. Barbara Schache also resigned in 1964 and was replaced by Flo Bradshaw, Flo Newall, Jean Crouch & Mavis Crome. In 1976 the office of Secretary/Treasurer was separated and except for a couple of years Mavis & Jean seem to have alternated in those positions. Mavis is now Secretary and Jean Treasurer.

This auxiliary has followed the pattern of the first one in the manner of raising funds, except for not sponsoring balls. For many years there were quarterly stalls & raffles, & support for Hospital Sunday open day each year. The latter, which was on a Wimmera basis by a radio station, no longer occurs. Fortunately any effort to fund raise was well supported. On three occasions there were alterations and additions to the building through which the auxiliary was able to make a considerable contribution by way of furnishings, curtains, chairs, wheel chairs, new beds & equipping surgery.

During the life of the auxiliary, there have been many changes in name. In 1988, medical services were integrated on a shire basis and Murtoa Hospital became Dunmunkle Health Services Hospital. Six years later when Health Services again underwent a change with each town delivering a special service, Murtoa Hospital closed and became Murtoa Medical Centre offering a variety of Services. We then became the Murtoa Medical Centre Ladies Auxiliary and continue to function in the same manner. Financed by street stalls, raffles, catering for small meeting held at the Medical Centre & donations. It is of concern that we are in the need of new members. We have only gained 3 in the last few years- at times we have only had 10. Fortunately one of our newer members Cheryl Bryan is now President, but most others have been constant for a long time. Lyla Maddern for 27 years, Gwen Gellatly 28 years, Mavis Crome 32 years, Mary Rabl 34 years and Jean Crouch since the formation of auxiliary 44 years.

Celebrating 60 years of Service... cont...

We feel that it is important for the people of Murtoa to know how to raise funds and particularly where the money is spent. At present some services planned for Murtoa have been curtailed on account of difficulty in procuring a Doctor and other Health Professionals, but there is an ongoing need for those still available. Equipment and instruments for surgery are kept up to date, chairs for waiting rooms and patient use, and necessities such as kitchen utensils, a food vitamiser, dinner sets and other crockery, a DVD and tables for the Marma Lake Centre.

As Medical Services are shared by three towns we also contribute to the others. We have shared the cost of wheelchairs, shower chairs, stove and just recently, one third of the cost of new heating at Stonehaven. The service clubs (Lions & Apex) encourage us by their interest and support and we are most grateful to the Lions for their recent generous donation. We do however offer a warm welcome to new members. It is not very demanding & a real effort to keep medical services in the Shire at the best possible level for both medical staff and the local community.

Social Work

Jodie Baldwin

The last financial year has seen a change of staff within the social work program. We are seeing much diversity in the issues and client base. Key issues that are evident include relationship issues, parenting challenges, financial issues, depression, social isolation and family issues/breakdowns. Individuals, families and groups are supported through a range of processes such as counselling, practical support, group work, community development and education.

A "Surviving the School Holidays" information session was held in each of the three towns and plans are in motion for further group work events. The Christmas Giving Tree was a success again in the last year and we look forward to another opportunity to coordinate the collection and distribution of toys and food hampers this year. This is a wonderful example of the generous nature of the local community in collaboration with various organisations.

The last year has seen a successful student placement from the University of Ballarat – Tafe. In fact the placement proved to be so successful that Maxine has ongoing casual work with the Social Work department.

Addressing the needs of those in our community who are socially isolated will be a key goal over the next year. Social isolation may be due to being new in town, poor health or financial limitations. Our goal is to overcome these barriers and work towards a sense of inclusion for all members within our communities.

District Nursing

Vicki Jenkin

The aim of the District Nursing Service is to enable clients to remain in their own homes during periods of illness and disability, whilst retaining as much independence as possible. This is achieved in conjunction with many other community services.

The District Nursing team feels it is a great privilege to be welcomed into clients' homes and we extend our thanks to all the clients who have welcomed us in the past 12 months.

The District Nurses have continued to update their knowledge in many and varied areas including CPR, emergency procedures, Prevention/Management of Violent/potentially Violent Situations, Continence, Dementia, No Lift, Legal Documentation, Diabetes and Cardiac Care. Clare Simmons is currently undertaking Certificate 4 in Service Coordination. Vicki Jenkin has successfully completed Certificate 4 in Business (Frontline Management).

Dunmunkle Health Services is fortunate to have dedicated and caring workers including Clare Simmons, Maureen Jacobs, Kay Davey, Rosie Whitehead, Dianne Knoll, Trish Childs and Kathryn Gellatly.

Thanks again go to Helen Wallace and Toni Martin who give invaluable administrative support to the District Nursing team.

Attendant Care Program

Chris Mc Callum

Chris commenced in the management role of the Attendant Care program in February 2006 under the leadership of District Nursing Manager, Vicki Jenkin. The team includes Mary Howell, Julie Schultz, Sandra Hatcher, Cath Smith, Sue Flanagan, Glenda Boschen, Jan Vella, Helen Leslie and Carolyn Hall who are dedicated and professional in their care of the client. Each team member is unique and has something different to offer in the program.

Team meetings are held every 6-8 weeks at which it is planned to include some type of education that is relevant to and will achieve better outcomes for the client. Team members are also encouraged to attend regular education sessions provided by the speech therapist and physiotherapist and no-lift training is also provided.

The administrative support of Helen Wallace and Toni Martin must be acknowledged in helping Chris become established in her role and the day-to-day running of the program.

Transport

Toni Martin

Volunteer transport aims to meet the needs of people who have specialist medical appointments away from their hometown, who do not have any means of transport such as family, friends or Veteran Affairs and who cannot access public transport. We cater for transport requests as close as Horsham or as far away as Ballarat, using the Dunmunkle Health Service or Shire of Yarriambiack car. A small fee is charged to contribute to fuel costs. This program relies on the generous services of volunteer drivers, who make an invaluable contribution to our community.

Marma Lake Day Centre

The Marma Lake Day Centre continues to provide varied activities and outings for people affected by a dementia type illness.

Debbie Delahunty, Wes Hazelden, Lyn Lindsay and Debra Russell provide a program of meaningful activities that allow each person to participate at his/her level of independence, thereby promoting self-esteem and dignity, and also respite time for carers.

The program this year has included

- Trips to Ararat for a variety of concerts from entertainers such as Rodney Vincent, Reg Gorman and Issy Dye,
- Outings for picnics and afternoon teas to Warracknabeal, Horsham, Halls Gap, Stawell, Rupanyup, Haven
- A day at the Wimmera Machinery field days
- Shopping at the Plaza
- A variety of in house activities including footy tipping, bingo, hooky, golf and bowls, poetry, movies and music.

We extend our sincere thanks to Wes Hazelden for his contribution to the Marma Lake Day Centre over the past 10 years. Wes resigned in June, and will be missed by both clients and staff.

Aged Care Assessment Service (ACAS)

Jenny Taylor

This service constitutes a team of health professionals with expertise in health care and community services for older people. The team draws on the skills of geriatricians, community nurses, social workers and a range of allied health professionals including physiotherapists, occupational therapists and speech pathologists.

The aim of ACAS is to ensure that older people have access to the most appropriate health, community and/or residential services to meet their needs and those of their carers.

On receiving a referral, the ACAS worker visits the person in their own home to discuss their needs and to identify a range of options to meet those needs. ACAS staff can provide information and referral advice and will work closely with individuals and their GP/service providers to ensure the most appropriate and helpful range of services available are put in place.

ACAS has a role to play in identifying service deficits and working with relevant organisations and government to develop services.

This is a free service and covers the surrounding districts of Minyip, Murtoa and Rupanyup.

Referrals can be made by self, family, a general practitioner or service provider, with the consent of the client/carer being legally required. A written referral from a general practitioner is required where a geriatric assessment is sought.

Activity Report for Rupanyup Hospital/Nursing Home

Chris McCallum, Diversional Therapist

We continue to offer a diverse range of activities within the home. I wish to acknowledge management in their recognition of the significance of the activity program for the resident's general well being by employing Carolyn (Cazz) Hall. Cazz is employed for 5 days per week, 4 hrs per week day to deliver activities to our residents. Cazz does both 1:1 & Group activities for all 20 resident's. Some resident's needs are more complex so their individual program reflects and accommodates these needs.

Cazz offers a range of activities including:

- Reading
- Discussions
- Whiteboard games/quizzes
- Footy tipping
- Hand massage
- Foot spas
- Bus outings
- Gardening
- Cooking
- Happy Hour

Residents recently enjoyed celebrating the Chinese culture, highlights of this included Chinese cookery & the decoration of the day room in the Chinese theme. This allowed some of the resident's anew experience as they had not all tried Chinese food prior to this day. Barbecues still remain the favourite of all meals, so an excuse can always be found to do so. Cazz has also organized special visitors which have included some of the senior students from Murtoa Catholic School & Rupanyup Primary School, we have also been very fortunate to have been visited by John Rurade & Friends on more that 1 occasion. It is not always possible to take all our residents to the local communities but is sometimes an option to bring some of the local communities to the home. We always welcome all community members and realize the importance of maintaining community relationships for our residents.

One of latest editions to the home includes 2 chooks, who have pride & place in the back yard. This has been a project that has been recognized as being very significant for a lot of our residents as they have mainly come from rural local areas. Residents continue to enjoy watching the chooks being fed & the eggs being collected.

A special thanks to the continued efforts of our volunteers, without your presence & support our residents would not get to do as many activities that are offered to them.

I know the families and loved ones will want to thank Cazz, along with myself, for all the effort & dedication she has shown to the activity program & towards the residents.

Hoping 06/07 is a bigger & better year for us all and I will continue to offer Cazz all the support she needs in ensuring the continued success of this program within the home.

School Holiday Programs

The plan is to engage our youth in activities that are interesting, fun and stimulating. With this in mind this year we chose beading and skin care; a scavenger hunt; a movie, 'Racing Stripes'; a swim at a heated pool; an outing to a local wildlife park and a meal at a popular eating place for young people. Whilst the programs are heavily subsidised, due to the continuing downturn in the local economy, consideration was given when choosing the programs, in relation to participant affordability.

The programs were well received with scavenger hunt causing plenty of chatter and giggles amongst the children and the outing to the wildlife park was guided so the children were able to gain considerable information and involvement with some of the animals.

Community Emergency Response Team – C.E.R.T.

Following an accident and concerns regarding the length of time it can take for an ambulance to arrive in our rural area discussions with Rural Ambulance Victoria brought about the writing of a submission to be put to the Government to request that Dunmunkle area be a recipient of a C.E.R.T. With enough interest from community members to train as volunteers Dunmunkle was successful and 13-locals received 50-hours initial training, followed up by a further 30-hours training per year, and commenced on 11 November 2005. Since then another 9-have joined and have attended up to 60-call-outs thus far. These volunteers respond at the same time as the ambulance and provide emergency care and treatment to the sick and injured until the ambulance arrives. This group works independently of Dunmunkle Health Services but is supported by its staff and management, who helped implement the set up of the team.

Dunmunkle C.E.R.T. is one of 22 across Victoria and operates under the clinical and operational governance of the Victorian Ambulance Service and is supported by a committee of management of interested community members.

Key Safe Program

Dunmunkle Health Services and Victoria Police have joined forces to run a Key Safe program.

Because many people, particularly the elderly, live alone there can be times when they are unable to answer the phone or door due to injury or illness. In an emergency it can be vital to gain access to a home to assist.

It provides people with the knowledge that their house key will be stored safe and secure in a police station but at the same time is very accessible should an emergency arise and someone must gain entry to their home.

The need for this service has arisen following incidents where people who needed medical assistance and hospitalisation could not be reached inside their locked homes.

The Key Safe program is not there to replace Safety Link but to be another tool to ensure the well-being of the community and is available to any one in the community.

To date, there are 59 persons across the communities of Minyip, Murtoa and Rupanyup using this service.

The LIONS clubs of each town also deserve special mention for supporting this program by purchasing the key safes needed in each police station.

Men's Health Night

The focus was on men's health in general to address cardiovascular, diabetes, obesity and the reasoning behind increasing daily physical activity. Each participant underwent an individual health assessment involving blood pressure, blood sugar checks and body mass index calculation along with a short discussion on their own health. Optional information was provided in booklet form. Following the individual assessments, guest speaker, Harvey Lang, spoke about his life experiences regarding his football career and the importance of regular health checks and staying physically active.

The attendees expressed their enjoyment of the program, some stating they had not seen a doctor for some time. Many asked health related questions about heart disease and diabetes and willingly took the printed information. All felt they could relate to the guest speaker as he is a well respected local footballer. It was recommended that the program become a yearly event.

Men's Matters

Men's Matters has had another successful year with two new members added to our list. Our aim is to bring older men together for the purpose of socialisation, to meet new people and establish a support system for them. The participants choose the venues to visit each fortnight. Interest in the program continues to grow as indicated by the attendances.

We have travelled to many venues and have enjoyed fellowship and many laughs along the way. We have averaged 14-15 men on many trips and their interest is still very keen. We have had to utilise a station wagon as well as the bus on many trips, which is a great indication of the popularity of this group. During the year we have visited many venues including Barney's Rubble, Cray Bros. Stonemasons, Wilkens Storage, Scarecrows in the Vineyard, Lake Bolac, Iluka Resources and Rotary House in Horsham.

We will be celebrating our 5th anniversary in August and have invited members of the Cobaw Men's Shed in Kyneton, to join us and tell us a little about their program and how it works for them and they will meet our men and get to see Men's Matters first hand.

The men are still giving us great feedback and are very happy with the format.

Here is one client's view of what Men's Matters means to him:

"This is a note to let it be known how much I look forward to Men's Matters every second Friday. Judy and Pam take great care of us and nothing is too much trouble too them. They make sure everyone has food and drinks on our breaks during the trip. Greg, our driver, always makes sure we see new country all the time as we travel around. The friendship amongst the men is very pleasant. I have never heard a word spoken that is out of place."

Health Expo

Program was aimed at both secondary and primary school children with the focus being farm safety. As most information was aimed at the older group the farm safety set was used and the younger children took part in setting it up as this is an excellent tool in teaching farm safety. Today's program included safety issues when riding a motor bike ie. helmets and protective clothing. Both groups heard about chemicals including safe use of and storage of chemicals and working with farm machinery. Animal and wildlife safety were also discussed.

Women's Health Clinics

Using a female practitioner, clinics are held monthly, in each town, at different times of the day to allow all women the opportunity to attend. This is intended to encourage women to attend therefore increasing attendances and screening rates, providing an overall better outcome for women. It is an opportunity to provide information on contraception, menopause, demonstrate breast self examination and breast awareness and discuss other issues that may require referral on to other practitioners, such as breast screen, an incontinence nurse, naturopath or doctor.

Nutrition

Nutrition through healthy lunches, breakfasts and snacks is generally aimed at pre-school and primary students.

Discussion takes place with the children regarding healthy choices and how to make food enjoyable. The children are given the opportunity to make their own sandwich or roll using a healthy alternative. The healthy food pyramid is used in demonstration, with the children indicating where the foods would fit in the pyramid and each was encouraged to draw and colour their favourite healthy food. Fruit smoothies are provided for drinks and the children are able to take home a sample bag of fresh fruits, food samples and written information.

Gentle Exercise in a solar heated pool

Separate to the Warm Water Exercise program run for those with Arthritis this program was introduced for those people who did not go to the pool at all and to further encourage a gentle form of exercise. It increased cardiovascular and benefited body image. Participants were encouraged to take part in the exercises under the guidance of a trained leader. To increase their fluid intake, ensure sunsmart awareness by using sunscreen and hats and to participate in social activity by remaining for a cup of tea at the end of the session.

Workplace Health Checks

Employers, employees, clients of various businesses and workplaces are offered the opportunity to participate in workplace health checks and screenings with the priority being general health and wellbeing. Individual health checks are provided as well as an overall discussion, including blood pressure, blood sugar levels, general health, checking the feet, skin and teeth. These workplace checks are being conducted annually by invitation of workplace managers and owners.

Healthy Heart

These programs were offered to schools and community groups and incorporated exercise, nutrition, healthy food alternatives, lifestyle changes and health checks. The priority population was all ages, with support and follow up conducted with each group after 6-weeks to see whether participants were able to sustain their group and individual programs. From this promotion new walking groups were initiated.

WHISTLEBLOWERS PROTECTION ACT

The Whistleblowers Protection Act 2001 came into effect 1 January 2002. The Act is designed to protect people who disclose information about serious wrongdoings within the Victorian Public Health Sector and to provide a framework for the investigation of these matters. Dunmunkle Health Services has appointed a Protected Disclosures Officer. The following can also be contacted:

The Ombudsman Victoria
Level 22, 459 Collins St, Melbourne 3000
Ph: 9613 6222 or toll free: 1800 806 314

No disclosures under the Act relating to Dunmunkle Health Services were received during 2005-2006.

MERIT & EQUITY/EQUAL OPPORTUNITY (EEO) POLICY

In Victoria the Public Authorities (Equal Opportunity) Act was proclaimed in July 1972. Dunmunkle Health Services supports and actively endorses the Act by:

- Implementing equal employment opportunity programs designed to eliminate discrimination against and promote equal opportunity for women.
- Observing sound human resource practices.

The Human Resources Manager is the EEO Co-ordinator responsible for the overseeing of the EEO.

FREEDOM OF INFORMATION

During the year Dunmunkle Health Services received no requests for documentation under the Freedom of Information Act (1982).

Dunmunkle Health Services continues to promote a policy of giving staff, patients and the general public access to information.

Minutes and agendas of Board of Management and sub-committee meetings are circulated throughout Dunmunkle Health Services to keep abreast of all matters, which might concern or affect them.

LEGISLATIVE COMPLIANCE

Dunmunkle Health Services has a statutory obligation to report legislative compliance status on a range of matters.

Occupational Health & Safety

The multidisciplinary Occupational Health & Safety Committee initiates and co-ordinates development of workplace safety policies and procedures, identifies workplace hazards and provides for relevant education and training.

Complaints

Dunmunkle Health Services believes the addressing of complaints is an important process in improving the quality and standard of care. Feedback forms are readily accessible in all areas of the Health Service.

All formal complaints are directed to the General Manager and are dealt with according to the guidelines laid down by the Health Services Commissioner.

Competitive Neutrality

Competitive Neutrality Policies for Public Hospitals were observed for all tender applications.

Publications

Dunmunkle Health Services makes available to all interested persons any of its publications and produces a range of brochures aimed at informing the public of a range of services available.

Workcover

The premium cost for the 2005/06 year was \$56,880.

Training sessions aimed at reducing workplace accident and injury, early return to work strategies and equipment upgrades are held on a regular basis.

Consultancies

No consultancies were undertaken during the year which exceeded \$100,000.

Buildings and Maintenance

Dunmunkle Health Services complies with the Building Act 1933. Guidelines issued by the Minister for Finance for publicly owned buildings.

Fees

All fees charged by Dunmunkle Health Services are regulated by the Commonwealth Department of Health and Aged Care, the Commonwealth Department of Family Services and the Hospitals and Charities (Fees) Regulations 1986, or as otherwise determined by the Victorian Department of Human Services.

Victorian Industry Participation Policy Act 2003

There were no disclosures in relation to contracts commenced or completed under this Act for 2005/06.

Reporting compliance

This Annual Report is prepared in accordance with the Financial Management Act 1994, the Directions of the Minister for Finance and the Australasian Annual Reporting Awards for open disclosure about this Service to our communities, Government and other stakeholders.

Mr Andrew Clark
President

Mr Christopher Scott
Chief Executive Officer

Mr Kell Duncan
Chief Finance Officer

DONATIONS

Anonymous	\$10	Minyip Progress Assoc	\$50
Anonymous	\$30	Minyip staff	\$17
Ladies Axiliary Minyip	\$2392	Lyn Schurmann	\$100
Laides Auxiliary Murtoa	\$1222	Ladies Auxiliary Rupanyup	\$1222
Minyip & District Hospital Staff Reunion Foundation	\$358	Kevin Gregson	\$30
	\$5000	C Cherrell	\$120
Ken Haby	\$100	R & J Salter	\$50
Dunmunkle Health Services staff	\$1039.35	A Turlakow	\$50
Dawn Teasdale	\$50	DS & AR Binns	\$100
Bob & Jill Robbins	\$20	Family W Cowie	\$60
Olwen Cowan	\$10	Murtoa Tennis Club	\$20
Wendy Trotter	\$10	C & S Johnston	\$100