



Our Vision

Creating healthier communities

Our Mission

To support our community's physical, mental and social wellbeing by:

- · Providing safe, high quality, and innovative services;
- Building enduring partnerships; and
- Delivering customer service excellence.

Our Values

Integrity

We will be open and honest and will do the right thing for the right reason.

Innovation

We will be an industry leader by breaking new ground and improving the way things are done.

Collaboration

We will actively work together in teams and partnerships.

Accountability

We will take personal responsibility for our decisions and actions.

Respect

We will value all people's opinions and contributions.

Empathy

We will endeavour to understand other people's feelings and perspectives.

Montessori Model of Care

The Montessori Model of Care has been introduced into all areas of Western District Health Service and the Penshurst Campus has wholeheartedly embraced the Montessori Model. The Montessori Model personalises the care given to residents, taking into account their individual needs. It is important to get the know the person; their interests, skills, likes and dislikes.

It is paramount to treat everyone with utmost respect, equality and dignity. Our goal is to create the kind of place we would want to live.

The key aims are to:

Relate, Motivate, Appreciate, Engage, Enable, Empower.

Throughout this publication you will see images that reflect the key aims of the Montessori Model of Care and the sheer delight of residents.

Embracing Montessori Principles

The greatest source of discouragement is the conviction that one is unable to do something"

- Maria Montessori

Acknowledgements

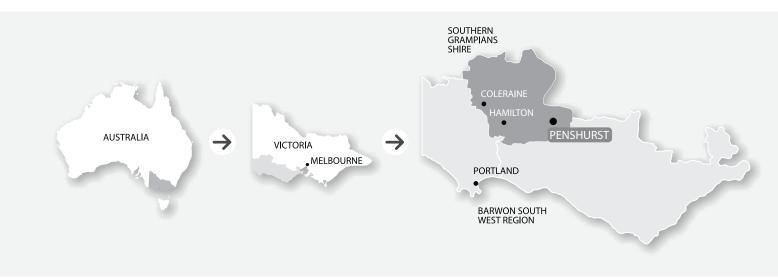
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ABOUT WDHS PENSHURST CAMPUS



Penshurst and District Health Service (PDHS) amalgamated with the Western District Health Service in 1998. It provides acute care, residential aged care, community services and independent living units at Penshurst and Dunkeld.

Located in the Southern Grampians Shire, Penshurst and District Health Service supports the healthcare needs of a resident population of 734 people; in addition, to those living within the local catchment areas of Dunkeld, Glenthompson, Hawkesdale and Macarthur.

Established originally as a Bush Nursing Hospital, the need for a local hospital was recognised in the early 1950's by Dr. Watt in Penshurst and Pastor Wiebusch of the Tabor Lutheran Church, A committee, which included Mr. R. Schramm, MBE, Mr. C.G. Ross and Mr. J. Ryan, was established to expedite a hospital project for Penshurst and work toward the construction of a health care facility.

Mr. J.O.W. Smith donated a parcel of land presently occupied by the Hospital with construction of the new hospital commencing in August 1955 and the first patient being admitted in July 1957. The cost of constructing and furnishing the new five-bed hospital was 46.567 pounds, of which a portion was paid by money raised by the community with the remainder paid by a Government grant.



Construction of Hospital commenced on 1950 current site



1988



1998



Nursing Home dining room, acute rooms and 2011 garden area

2009



Redevelopment of Kolor Lodge Hostel



Completion of Cora's way outdoor entertaining area Installation of 200

solar panels

Penshurst community serviced by Bush **Nursing Hospital** 1955



Extension completed to incorporate Nursing Home -W.J. Lewis Wing, and acute beds



Redevelopment

and upgrade of

Nursing Home

1997

Hostel established **WDHS** amalgamated with 4 local Health Services

Kolor Lodge





Upgrade of new laundry area and kitchen with installation of new walk in cool room



New driveway and kerbing





PENSHURST ADVISORY COMMITTEE CHAIRPERSON

It is with great pleasure that I write this report for the 2019 financial year. As with past years, there have been many achievements made by everyone involved at the Penshurst Campus. It is through the involvement and dedication shown by all that Penshurst continues to be the great facility that it is. There are many small things achieved on a daily basis that make up the 'sum of the whole' and it is these small steps that allow the achievement of the bigger and more visible things to occur.

We opened Cora's Way (in February 2019). This is a fantastic outdoor covered space which allows Residents', their families and their visitors to enjoy getting together and having some great times. It can also be used by the Lifestyle team for outdoor activities and also as a facility for Staff who want to enjoy an outdoor eating space. This facility was made possible through a generous donation from the Linke Family.

The amount of \$326,628 was obtained through the Regional Health Infrastructure funding for the purpose of refurbishment of the Penshurst Nursing Home.

Commonwealth funding has been used for various equipment for the Lifestyle program and also for amenities within the Hostel and Nursing Home. This has included the purchase of a Sofa, Smart Television, Chairs, Sing-a-long DVD's and items for Armchair exercises.

The Hospital market continued with another successful event in March 2019. The efforts from these markets raised \$12,400 over the past three years which is a fantastic and commendable outcome for everyone involved. Our heartfelt thank you to all involved for your time and dedication.

The success and continued growth of such an enterprise as the Penshurst Campus does not

'just happen', there are many people involved to ensure a viable and cohesive facility for all to benefit from. In no particular order -

The entire Staff at WDHS Penshurst Campus. What a fabulous team. The dedication you all bring to your chosen field is exemplary. The WDHS Board & Staff, the Penshurst Advisory Committee, the Residents and their Families all extend their gratitude for the work and the outcomes that you achieve. Thank you.

Volunteers. No organisation can exist without them! The work done by our volunteers is extremely important and each of us at WDHS Penshurst campus express our deepest gratitude for the endless hours you so selfishly give each year. Your time and your willingness to give is deeply appreciated.

Executive Team. None of the above happens without the important work of good Governance and Leadership. Rohan Fitzgerald Chief Executive (CE) of WDHS, Catherine Loria Director of Nursing (D.O.N) Penshurst Campus, Nick Templeton Manager Finance & Budget all ensure that the facility is kept on the 'straight and narrow'! Their on-going work to ensure that the viability of the Penshurst campus is maintained is much appreciated by everyone. It is here that I would like to make special mention of Katherine Armstrong who was the previous D.O.N and with whom I worked closely with when I first commenced on the Advisory Committee. Katherine, thank you for the immense amount of work and effort you put in to the Penshurst campus. Your 'can do' attitude and your dedication made my small part in the facility a lot easier to do.

The Penshurst Advisory Committee, Staff and Residents would like to extend their gratitude to the WDHS Board for their on-going and overall

guidance and governance to the Penshurst Campus. A heartfelt Thank you to Jen Hutton for her years of dedication to the Committee as the WDHS representative. We will miss you! Welcome to her replacement in Peter Besgrove who has taken Jens' place; we look forward to working with you Peter.

A huge thank you must go to Margaret Eales who has been involved with the Committee, and the Campus in varying ways, for many years. You, and your work, will always be remembered Margaret. I took over from Margaret as Chairperson and unfortunately I have now resigned due to my personal situation changing. I have thoroughly enjoyed my short tenure at such a great facility and thank you all for your support.

Thank you to all of the local Community businesses and organisations that help the facility, in a variety of ways, maintain its community spirit. Your support is invaluable.

A final thank you to the people we are here to assist, the Residents and Patients. Thank you all for your valuable input in to the Facility through varying means. Your feedback is important in allowing the facility to meet your requirements and to make this facility YOUR HOME. We sincerely hope that this is what we achieve.

Wishing you all continued success, good health, friendship and happiness.

Trevor Godenzi

Chairperson









Penshurst and District Health Service (PDHS) has continued to ensure our services meet best practice and needs of our consumers, including residents, patients and the community.



ACCREDITATION FOR KOLOR LODGE
& NURSING HOME
ACHIEVED



AGED CARE

SERVICES HUB



MOBILITY TRAINED NURSE EDUCATION

AGED CARE

Aged Care Governance

In response to the increased focus on improving performance in aged care, through the Royal Commission into Aged Care Quality and Safety and the development of the new Aged Care Quality Standards, WDHS identified the need for a robust governance structure to oversee accountability and performance in aged care and has established an Aged Care Governance Board Subcommittee.

As part of the Royal Commission into Aged Care Quality and Safety, all Victorian Public Sector Residential Aged Care Services were required to provide a response to specific questions from the Commission. All incidents and complaints from July 2013 to June 2018 were reviewed and themes from this analysis will form quality improvement actions at our aged care facilities.

Aged Care Services

In response to consumer feedback, we established an aged care hub, providing a 'one stop shop' for information and support services for aged care customers. An Aged Care Services Manager was recruited to manage and work with the Aged Care Services team, consisting of Home Care Packages, Aged Care Placement and Aged Care Finance. The team is assisting customers to navigate and use aged care services and will market WDHS Aged Care facilities and services throughout the region.

Home Care Packages

The number of Home Care Package clients continues to increase each month, with a 72% increase from 50 to 86 packages in the last year. As a result WDHS has recruited additional case manager resources.

Supporting People with Dementia

Best practice cognitive impairment (dementia and delirium) continues to be a focus across WDHS. Quality improvement activities included a WDHS hospital wide delirium survey in partnership with Safer Care Victoria, which provided baseline audit results and identified areas for improvement. Best practice cognitive impairment guidelines and a screening tool were developed and staff education provided. WDHS is participating in the IHI Delirium Collaborative with Barwon Health to share resources and best practice.

Improving Resident Wellbeing

WDHS is working with aged care residents to deliver a consumer directed service that is responsive to the diverse range of services and activities requested. Recent accreditation audits focussed on the delivery of care, where residents have choice, dignity of risk and maintain their identity. Staff are currently having conversations with residents and their relatives to better support them to live their lives as they choose. The Cycling without Age Program was launched at the Grange and has been extremely successful with most residents signed up to enjoy the benefits of the program. Plans are in place to rotate the Trishaw bicycle through all WDHS aged care facilities so that all residents have an opportunity to benefit from the program. The Birches residents were the recipients of a mini bus specific for their use and made possible thanks to the Birches Auxiliary and other local donors. This has allowed for spontaneity of activities and outings, enhancing resident choice, decision making and wellbeing.

Mobility Training in Aged Care

The Physiotherapy Department has been delivering Mobility Trained Nurse education to acute areas at WDHS for two years. Following a request from staff, the scope of this program

was extended to include Aged Care. In April 2019, a modified Mobility Trained Nurse Program was rolled out to include nursing staff from regional aged care facilities. To date, this program has been delivered to 21 nurses, with great success in reducing risk and harm to residents as well as ensuring a reduction in walking aid equipment losses.

QUALITY & SAFETY

WDHS quality and safety initiatives ensure the community receives safe, appropriate and high quality care and services.

A number of improvements have been undertaken over the last year to address quality and safety which include updating emergency signage, replacement of the flammable liquids cabinet for appropriate storage of flammable liquids, recycling of batteries and ensuring compliance with WorkSafe legislation. A great achievement for Penshurst has also been that 100% of staff received the Influenza vaccination which protects both the staff member as well as the residents and patients.

ACCREDITATION

On a three year cycle WDHS is assessed against the National Safety and Quality Health Service (NSQHS) Standards. Accreditation is a mandatory process for all public acute health services, providers of residential aged care and community services. WDHS will be assessed for its compliance with the NSQHS Standards in October 2019. In January 2019 version 2 of the Standards was released, with new criteria including mental health, cognitive impairment and care at the end of life.

WDHS is required to comply with the Aged Care Quality Standards (AACQA). This is achieved through unannounced assessment visits. All WDHS



It is with great pleasure that we present a report on the past 12 months of the Penshurst Campus of Western District Health Service.

I commenced my role in mid-December 2018, following the resignation of Ms. Virginia Quirk. I would like to acknowledge Ms Bronwyn Roberts as Director of Nursing Aged Care Services Coleraine and Penshurst for the assistance she has provided since commencing in the role at Penshurst and her advocacy for the Penshurst Campus. I would also like to welcome Julie Riches as the Acting Nurse Unit Manager. Julie commenced in the role on 10th June.

I would like to thank the staff, residents, relatives, volunteers, Advisory Board and local community for welcoming me in my role as the Director of Nursing/Manager. This report provides an overview of the main areas over the past year.

One of the main focuses is ensuring that occupancy of the aged care facilities is maintained so that the health service remains viable. The Penshurst Nursing Home occupancy in the latter half of the financial year has been 74% (target 89%) and the acute beds has varied between 50-100%. Kolor has been at 100% occupancy. We will be striving to increase the occupancy of the Nursing Home in the coming 12 months. The Penshurst campus works closely with the WDHS Aged Care Placement Coordinator whose role is to assist with appropriate placement of residents into the aged care facilities across WDHS.

I would like to commend the staff for their ongoing dedication and effort in ensuring that all residents and patients continue to receive a high standard of care at all times. This was formally demonstrated through our most recent accreditation audit in May 2019, where both facilities successfully attained compliance with all 44 Aged Care Quality Agency Standards. The accreditation process provides an opportunity for staff to demonstrate their continuous commitment to providing quality care for the residents of both Penshurst Nursing Home and Kolor Lodge Hostel. The accreditors provided positive feedback from the residents with comments that they "felt safe", "staff were good", "respectful" and "food good". I am confident that this will again be reflected during our imminent acute care accreditation audit in October.

The Hotel Services team have participated in external food safety audits and have met the

requirements with positive feedback regarding the high standard of service provided.

As part of the WDHS vision to create healthier communities and engage with the community, the Community Lunches have continued this year. There was good attendance at the April Community Lunch with a presentation on the "Healthy Leg Club". The lunches are continuing on a quarterly basis and a guest speaker has been introduced to enhance the lunch and provide information on topics suggested by those that attend. The National Centre for Farmer Health (NCFH) continues to provide regular clinics at Penshurst for the farming community. The Hamilton Medical Group is continuing to provide regular clinics for the community as well as providing a medical service for the residents and acute patients in the health service.

The generous support that the Penshurst Community provides to the health service, year after year, is to be commended and the health service is indebted for this support as it would be difficult to provide the high standard of service without it. This includes the volunteers and the many hours put in by individuals as well as the Hospital Ladies Auxiliary. I would like to acknowledge Nanette and Pat Stanes for their efforts in organising and running the Hospital Market over the past three years. During that time the market raised \$12,400 for the health service which was used to support the activities program for the residents and other items. Pat and Nanette are no longer continuing to run the Hospital Market but a Fundraising Working Group has been established to develop a strategy for fundraising over the next 12 months.

The plans for the refurbishment of the Penshurst Nursing Home are progressing with the first step being the review of the Penshurst & District Health Service Master Plan. In the next financial year WDHS will be going to tender to engage a suitably qualified architectural services firm to progress this significant project.

We were fortunate to receive a grant from the Victorian Department of Health and Human Services for lifestyle amenities and equipment for the Nursing Home and Kolor in early June. This enabled the two main televisions in each shared living area to be upgraded to a smart TV, along with new sofas, chairs, DVDs, gardening equipment and items for chair exercises to be purchased.

Over the past year, capital improvements

have been undertaken with the completion of Cora's Way outdoor entertainment area, removal of asbestos in the workshop areas, solar panels installation and changeover to LED lighting throughout the facility. The latter two improvements will hopefully reduce the energy costs for the service.

I particularly wish to acknowledge the Penshurst Hospital Ladies Auxiliary, who are a wonderful support for the health service. The work of the Ladies Auxiliary is greatly appreciated as it enables the health service to purchase much needed equipment and provide additional amenities for the residents. Donations were also gratefully received from the Penshurst Combined Churches Community Carols which assisted to purchase a new television as well as The Bethlehem Lutheran Church Tabor and the Hospital Doorknock Appeal.

I would also like to thank Mr. Trevor Godenzi, Chair of the Penshurst Advisory Committee for his stewardship over the past 12 months and for his involvement with the Penshurst Advisory Committee since 2016. It was with regret that we accepted Trevor's resignation and wish him well in his new ventures. Thanks must also go to the Advisory Committee members who give so much of their time to provide us with their support and leadership.

Finally, on behalf of the staff and residents, I wish to thank Mr. Rohan Fitzgerald for his ongoing support and leadership of the Penshurst Campus. We look forward to continuing to provide a health service that is engaged and supportive of the health needs of the Penshurst and district community.

Thank you



Catherine LoriaDirector of Nursing



Julie Riches NUM (Acting)

CLINICAL SERVICES





OCCUPATIONAL EXPOSURES FOR STAFF



100%

INFLUENZA VACCINATION FOR STAFF



RESULT 90%

HAND HYGIENE

LEISURE AND LIFESTYLE

Reflecting on the past twelve months has made me realise how special the Penshurst Campus is and how lucky we are to have the amazing team that we do.

The Lifestyle Program continues to focus on identifying and meeting the needs of each resident in a holistic manner. This is achieved by providing opportunities for the residents to participate in group activities, individual activities with staff or volunteers, or self-directed activities. The Montessori Program principles ensure that every opportunity is utilized to provide resident choice and opportunity, with the aim of maintaining dignity, autonomy, self-esteem and sense of self.

Feedback from residents, family and friends is actively sought via the bimonthly Resident Meetings, via review of the assessments as part of the Resident of the Day process, and informally during activities and when I am interacting with the residents and their loved ones. Lifestyle assessments, and therefore the lifestyle calendar of activities, aims to reflect the changing wishes and requirements of the current cohort of residents.

We have had a wonderful twelve months of both Men's and Ladies Out and About Programs. The program allows for monthly outings for the residents of each of the aged care facilities of WDHS, to meet up and to socialise. The meetings are carefully planned and facilitated by the lifestyle staff from each facility, to ensure a successful result for each resident.

As a facility, we are well supported by volunteers and the local community. A big thank you to our hospital volunteers, music performers, school groups, community groups and our Church representatives for your ongoing interest and support. The Penshurst community supports us brilliantly, and we thank you for your ongoing contribution's which funds the lifestyle program for the residents.

INFECTION /WOUND DEPARTMENT

The Infection Control consultant works on site at Penshurst and works at the Hamilton campus of Western District Health Service one day per week.

Audit results and infection related issues are overseen by the infection wound department which reports to the infection control working party in Hamilton bi monthly.

INFECTIONS

Infection data is logged for all clients in our care with an infection record, generated for the aged care residents in an electronic documentation system.

The type and number of infections are monitored and managed according to Infection Control Guidelines and this is reported to the Infection Control Committee which monitors all campuses of WDHS.

CLINICAL SERVICES

AUDITS

Many and varied audits are conducted by infection control over the year. The audit process identifies education deficits and processes which can be improved. Improvements and education can then be implemented if required

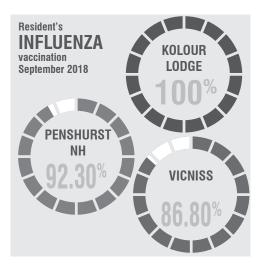
- Knowledge of Infection Control has been reinforced by a series of short quizzes.
 - Topics include Influenza and Standard and Transmission Based precautions, general knowledge of infection control and gastro
 - Infection control staff will provide further education related to the areas of deficit that were noted in these staff knowledge quizzes.
- The results of the Rural Infection Control Practice Group (RICPRAC) audit of Infection Control Practices at a Governance and Clinical level for the Penshurst campus was 95% & 97% respectively.

VACCINATIONS

This year staff influenza vaccination rate was again 100%. There are now two nurse immunisers working on site.

In 2018 PDHS topped the state for health care facility with <100 staff and received a certificate of recognition from VICNISS

Every resident's vaccination status is now assessed on admission and vaccines requested as required.



The benchmark target set is 80% from 2017 Audit CORRECT TOTAL COMPLIANCE MOMENTS MOMENTS RATE

Occupational exposure incidents

HAND HYGIENE AUDITS

There were no occupational exposures in the last year. These include splash of body fluids to nonintact skin or needle stick injury incidents to staff.

INFECTION CONTROL FUTURE IMPROVEMENTS

- Development of the hotel services education package
- Auditing of the staff Hepatitis B vaccination status to improve immunity status
- **Development of the Isolation Precautions** pamphlet for patient and visitors information
- Standardizing products across the region to assist with cost savings.

Resident's PNEUMOCOC vaccination September 2018 KOLOUR LODGE	71.4%
PENSHURST NH	92.3%
VICNISS	25.3 %

Resident's HERPES ZOSTER (70-79years) vaccination September 2018 **KOLOUR LODGE** PENSHURST NH

EDUCATION & TRAINING

WDHS Aged Care Practice Development Nurse (PDN) covers all four aged care sites within WDHS. Aged Care at WDHS consists of total of 173 beds. Our Practice Development Nurse spends one day per week at the Penshurst Campus mentoring Nursing staff and providing support to our Graduate Nurses and all nursing staff.

At Penshurst, the staff continue to maintain, improve and broaden their knowledge, expertise and competence, and develop the personal and professional qualities needed to fulfil their professional duties. Care based on best practice requires staff to keep up to date with current changes for both Residential Care residents and Acute Care patients.

Education is offered to all staff at the Penshurst Campus. This year there has been an emphasis on Elder Abuse which has seen face to face sessions being conducted onsite by our PDN. All staff are required to attend a session which focuses on all aspects of Elder Abuse, which include - Physical, Financial, Psychological/ Emotional, Sexual, Neglect, Social abuse. The process of mandatory reporting is also included in these sessions.

WDHS has an Online Learning System (SOLLE) which is a system that is more interactive for the staff to complete their mandatory competencies. Competencies on this platform are reviewed and updated accordingly, in line with best practice and legislation.

Education is essential for our staff to deliver the best quality care for people in our facility and Registered Nurses and Enrolled Nurses require a minimum of 20 hours of continuing professional development per year to maintain their registration. Staff also continue to participate in short education session (on-site). Education delivery is also delivered via video conferencing and programs such as Zoom.

WDHS also offers staff education days at the Hamilton Campus for staff to attend.

External education is also available on a wide range of topics. Staff are encouraged to attend external training and have access to the WDHS Staff Development Grant to the value of \$500-\$2000 that they can apply for.

Examples of a few of the topics for the upcoming year will include Dementia training, Charter of Rights and the new Aged Care standards - that come into effect on the 1st July 2019.

There is always something new to learn in an ever changing environment of Aged Care.



PRIMARY AND PREVENTATIVE

HEALTH





WOMEN'S HEALTH



WEEKLY SOCIAL SUPPORT GROUP START STAYING STRONGER EXERCISE CLASS

AN AVERAGE OF 9

ATTENDEES PER SESSION



ALLIED HEALTH

PODIATRY, PHYSIOTHERAPY, DIABETIC EDUCATOR AND DIETITIAN SERVICES

COMMUNITY SERVICES AND ALLIED HEALTH

PRIMARY AND PREVENTATIVE HEALTH DIVISION

Continence and Stomal

The WDHS Continence Service has visited Penshurst on a number of occasions following referral. Catheter care has been a major component of our service, both with education of staff and for the Penshurst and district residents.

The Continence team of Sharon Homberg and Annabelle Last continue to provide care to outpatients and inpatients at Penshurst and the surrounding community.

District Nursing Services

The district nurses visit the Penshurst and surrounding area every Monday, Wednesday and Friday, with more frequent services provided if required. The district nurses provide wound care, general monitoring of health, advice and comprehensive assessment. The Transition Care program is utilised by members of the Penshurst community with the provision of bed based services at the health service or in the community member's home. This service is a multidisciplinary program to support people who do not require acute care but benefit for some additional service provision giving the best opportunity to remain independent.

Nutrition and Dietetics

The Dietetics department continues to be strongly supported by the community in Penshurst. Outpatient clients can be seen for a range of conditions including diabetes, gastrointestinal disorders, cardiovascular disease and more. Dietitians are responsible for assessing the nutritional needs of clients, planning appropriate interventions and providing nutritional education. The Dietitian makes regional visits to Penshurst once a month. Referrals are appreciated but not required for our clinics. In addition to the outpatient clinic, we work with both nursing and food service staff whilst providing nutritional management of the Nursing Home and Kolor Lodge residents.

Occupational Therapy

Our Community Occupational Therapy team continues to provide services to Penshurst and District Health on an as needs basis. We provide services to inpatients, outpatients, Penshurst Nursing Home, Kolor Lodge and Transitional Care Program clients. These services range from helping patients get home safely by completing home assessments, assisting with home modifications and teaching skills to maximize independence with daily activities, to addressing concerns related comfort and independence such as suitable seating and pressure care needs, scooter and wheel chair assessments. A focus for 2019/2020 will be on staff education

around cognitive impairment and delirium screening and management in line with the new National Quality and Safety Health Service Standards (version 2).

Physiotherapy

The Physiotherapy Department continues to provide a weekly service to the Penshurst and District Health Service, and values the need to provide a quality care service in this area of the Western District region.

We continue to see residents of the Penshurst Nursing Home and Kolor Lodge, as well as Inpatients in acute care and Outpatients. Clients under the Transitional Care Program (TCP) in Penshurst are also seen for weekly therapy. The Physiotherapy Department also provides the therapists to implement the ACFI 4b Complex Care Pain Management for residents in Penshurst's Aged Care facilities which entail massage and/ or TENS for residents 4 times per week. Through good communication and team work with the Penshurst staff, we strive to provide access to best practice health care for all residents and the general public.

The Physiotherapy team continues to enjoy their time at Penshurst, interacting with the vibrant staff and residents, and appreciates the excellent team environment and well organised facility. We are looking forward to continuing this service into 2019/2020.

Creating healthier



communities



PREVENTATIVE HEALTH

SOCIAL WORK

Jaibu Philip, is our Social Worker. Being the sole Social Worker for the entire organisation, Jaibu responds to Social Work referrals from Penshurst campus too. This includes Acute, Aged care facility and TCP clients.

Speech Pathology

The Speech Pathology Department continues to provide services to Penshurst and District Health on an as needs basis. Referrals are received via the TRAK system and followed up as appropriate.

Assessment and management of swallowing and communication disorders are available to residents and patients. Our Speech Pathologist, Karen Abdullah, works closely with customers, their families and staff at Penshurst to ensure that everyone is eating and drinking safely. Staff education and in service are also provided as required.

Women's Health

The Women's Health Nurse Practitioner has held several pap smear days at Penshurst during the last financial year. She has the ability to bulk bill all appointments.

Women who have regular screenings are 90 per cent less likely to develop cervical cancer than those who don't. Many reasons are given for not attending for a pap smear including distance to travel, difficulty in obtaining suitable appointments as well as preference for a female practitioner.

The provision of this service in the local community is an effective way to encourage women to have regular screenings.

Podiatry

Podiatric treatment is available once a week at Penshurst. You can gain access to podiatric services through referral from your doctor, nurse or you can refer yourself for any foot conditions.

Penshurst Podiatry department treat a vast range of different foot conditions. In addition, we support clients in preventing and maintenance of foot complications by encouraging clients to participate in their own foot health through early education and management. The Podiatry Department consists of Phuong Huynh and Justine Somerville.

Diabetes

People living with diabetes in Penshurst and district have continued to receive local access to a Credentialed Diabetes Educator – Megan McLeish one day per month – funded by the Primary Health Network.

We are committed to providing access to diabetes education close to home, and to working together with other services, including visiting dietitians, podiatrists and GP's, for a team approach to care. We are looking forward to continuing this service into 2019/2020.

SOCIAL SUPPORT GROUP

Social Support Group continues to provide people living in the community to:

- Support to live well
- 2. To achieve and feel valued
- 3. Build on your skills and interests
- 4. Stay connected with the community through a supported environment
- 5. Maintain your independence

Members along with the support of dedicated staff participate in a wide range of activities, outings and Community Connections each week.

Social Support Group has seen significant changes over the past 12 months. With a decline in attendance the group became unviable to continue in its present form.

Two morning coffee meetings were held early 2019 inviting Community member's to tell us the Gaps in service provision at Penshurst and look at options to address the community's needs.

A new weekly program commenced on 2nd May 2019 at the Sheppard Centre, commencing at 10.00am and includes:

- 1. START STAYING STRONGER EXERCISE CLASS
- 2. SOCIAL GATHERING following exercise class, includes lunch.
- 3. COMMUNITY BUS TRIP (3rd Thursday of each month no exercises)

If you are interested in participating, it is a simple procedure to register and take part in one, two or three options available. Monthly programs available at Sheppard Centre.

We are delighted to continue providing a service in Penshurst in supporting healthy communities.



CORPORATE SUPPORT SERVICES



HOTEL SERVICE REPORT

Our Hotel & Environmental Services department strives to ensure that we always provide a safe service to our vulnerable residents. The catering department is highly regulated and each year we are required to undergo two external audits as well as quarterly internal audits.

Audits play a key role in verifying correct food safety and cleaning practices are being undertaken, they also give us important feedback to allow us to make continuous improvement in the delivery of the services we provide.

Our first external food safety audit was conducted in January by an External Health Officer. From the audit a certificate of compliance was given, in the site assessment report staff were congratulated on a well maintained and managed food premises and all food safety taken.

Our second external audit was in August conducted by the Southern Grampians Shire which reviewed our documentation and an inspection of all areas of the kitchen. A certificate of registration was issued.

Quarterly internal food safety audits conducted by WDHS Hotel Services Facilitator were found to be compliant with our food safety program.

The team of Environmental staff ensure that the environment for resident, staff and visitors is maintained at a high standard. To assist staff with this internal cleaning audits are undertaken monthly, with the results continuously above the state benchmark.

All results are testament to the hard work and commitment from staff in meeting the vigorous standards required.

FACILITIES AND EQUIPMENT

Maintenance has been effectively undertaken by Richard Casey for the Hospital & ILU's who responds in a positive manner to planned and emergency requests.

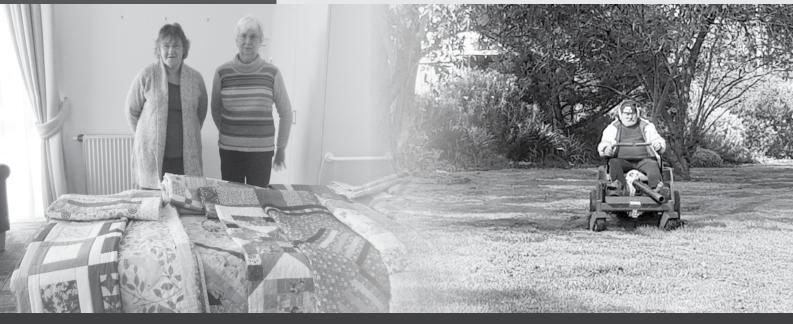
Penshurst campus had a 60 Kw solar power system installed as part of the South West regional project.

This system was completed late May with some 200 panels installed on the roof structure.

The system should have a big impact for power costs and is anticipated to produce around 280Kw / day in the summer months and close to 140Kw/day in the winter months, the payback period is just under 4 years.

OUR COMMUNITY

PARTNERSHIPS



\$8323

DONATIONS FROM COMMUNITY GROUPS AND INDIVIDUALS



VOLUNTEERS

\$5560

RAISED WITH THE HOSPITAL DOOR KNOCK APPEAL

AUXILIARY

On behalf of the Penshurst Hospital ladies auxiliary it is with great pleasure that I give you a report on our activities over the past twelve months.

The Auxiliary meet at 1.30pm on the third Tuesday of the month at the "Sheppard Centre", with an average of 8 members in attendance. We would sincerely welcome any new members. After each meeting we have a cuppa and afternoon tea.

The DON Catherine Loria joins us most months to give us an informative update of the proceedings of the hospital. We rely on Catherine for advice and direction as to where our contributions are best put to use, her "Wish list" has been for garden beds, furnishings and chairs for the "Cora's Way" outside area to which we have allocated the sum of \$2000. Our means of raising money are by catering for funerals, and morning tea at the "Cancer council's longest morning tea", which was held at our local market in March. We also catered for the "International bike club" ride.

Mother's day and Father's day raffles is another avenue which are well supported by the local community, thank you.

We would like to thank Kit Boyd for her ongoing donations to all our catering functions along with

Stella & Steve from the Penshurst hotel for their donation. Thanks to Rhonda for our lunches. Our Christmas lunch was held at "Burn Brae". Liz served us a delightful lunch, and a great time was had by all.

So to the ladies on the committee and the community for all the help they have given this past year "Thankyou"

Judy Drane

President - Hospital Ladies Auxiliary

VOLUNTEERS

Our Penshurst Campus has had 11 amazing volunteers who have regularly provided assistance to our residents through our lifestyle & leisure program this year.

Our volunteers bring with them a vast assortment of skills, knowledge and life experience that they willingly and generously give to our health service and community members. They contribute in many different ways improving the quality of lives for our patients, residents and community members.

We have been lucky enough to retain the services of Tony Auden, our long term volunteer gardener, who has been kind enough to stay on with us for another year. Tony has put in an astronomical amount of hours over the years and

we have been fortunate enough now to also have Gerard Coyle join Tony looking after our lovely garden.

- Visiting resident for discussion, company, and support.
- Walks.
- · Reading to residents.
- Door Knock Appeal
- Delta Dogs
- Crosswords, playing cards and games.
- Manicures
- Cooking sessions
- · Art sessions
- Gardening
- Football tipping
- Music and singing.
- Spiritual activities
- Group activities
- External outings.

We sincerely thank our dedicated volunteers and their supervisor- Elizabeth Howlett for supporting them.

ADVISORY COMMITTEE

The Penshurst Campus of the Western District Health Service Advisory Committee comprises members of the community who are appointed to advise the Western District Health Service Board on issues in relation to the Penshurst Community and District on health needs and services.

The Advisory Committee's operation is governed by the by-laws, rules and standing orders of the Western District Health Service.

Functions of the Advisory Committee

The functions of the Committee as authorised by the Board are:

- Review the performance and operations of the Penshurst and District Health Service.
- Be responsible for service planning, service delivery and service quality activities for the Penshurst Community and make recommendations to the Board of the Service.
- Make recommendations on the strategic plan of the Service (so far as it relates to Penshurst and District Health Service) to the Board of the Service.
- The Committee conduct bi-monthly meetinas.

The Advisory Committee are grateful for the assistance provided during the past year by Mr. Rohan Fitzgerald, Mr. Nick Starkie, Mr. Nick Templeton and staff of the Finance Department of the Western District Health Service in reviewing and planning performance, and Mr. Peter Besgrove the WDHS Board representative on the Advisory Committee.

Community Advisory Committee Members



Trevor Godenzi (President)

Commenced with Advisory Committee:2016

Term of Appointment: 2018-2019

Trevor has been involved in the Health Care industry for nearly 35 years first as

a Volunteer for people with disabilities, then as a House Supervisor for Deaf/Blind children and also an Instructor at an Adult Vocation Centre in the disabilities field. Gaining two Nursing degrees Trevor then branched into Aged Care eventually Managing a 94 Bed Unit for the Freemasons' and subsequently as CEO of two Aged Care facilities. the most recent being Eventide Lutheran Homes in Hamilton. Trevor currently owns and operates a Wine Bar in Penshurst.



Peter Besgrove

BCom, MIR (WDHS Board representative on Advisory Committee)

In an extensive Human Resources career with large global organisations, Peter

held senior executive positions based in Australia and overseas, as a HR Business Partner and Remuneration Specialist. Peter lived and worked in the UK and China and managed teams of HR professionals across a number of countries, with diverse social, industrial and legal environments. Having retired from corporate life, he is now a resident of Dunkeld and is also currently a member of the Grampians Tourism Board. Peter was appointed to the WDHS Board in July 2014 and his current term expires 30 June 2019.



Don Adamson

Commenced with Advisory Committee 2010

Term of Appointment: 2016-2019

Don worked for 29 years with General Motors. He is currently semi-retired. He is

very active in the local community, volunteering his time as a driver for the Social Support Group and the Penshurst Campus WDHS driving clients to appointments etc. He has been, and is still involved as a member of the Lions Club for 20 years, and has joined the Penshurst Progress Association, the Penshurst historical society and the Penshurst Bowling Club.



Tom Nieuwveld

Commenced with Advisory Committee: 2003

Term of Appointment: 2018-2021

Along with Tom's Service on the Advisory Committee he also holds the position

as a Justice of the Peace and is a member of the local C.F.A.



Anna Watson

Commenced with Advisory Committee 2014

Term of Appointment: 2017 - 2020

Anna is the Bank Manager at the Dunkeld & District Community Bank® Branch

of Bendigo Bank and has over 30 years of banking experience. She is the Treasurer of the Penshurst Lions Club, and the Cabinet Treasurer of the 201V2 Lions District. Anna has lived in Penshurst for the last 20 years and enjoys travelling to warm places.



Wendy Williams

Commenced with Advisory Committee: 2005

Term of Appointment: 2017-

Wendy spent approx. 35 years working for the Education Department of

Victoria as a Teacher, Historian, Archives and Records Management Officer in Charge and Principal.

She currently operates her own company which does Consultancy for Schools producing Annual Reports and Reviews including Data analysis, contracts workers to the mining industry. She is also a civil Celebrant qualified to undertake Marriages, Namings, Renewal of Vows, Funerals, Grief and Trauma Counselling, along with running a small farm which produces fine wool merinos.

Other than her service on the Advisory Committee she is also a Justice of the Peace and qualified Bail Justice.

Other that her service on the Advisory Committee Wendy is also Chairperson of the board of SGAE. a justice of the peace and qualified Bail Justice.



Lucy Cameron

Commenced with Advisory Committee 2011

Term of Appointment: 2017 - 2020

Lucy lives with her husband, Damian, and their two boys on a farm close

to Penshurst. As well as helping run the family business, for the past fifteen years Lucy has worked with Glenelg Hopkins CMA managing river protection projects. Lucy is also co-founder and secretary of Hamilton Unpackaged, a bulkbuying food group, and enjoys being part of the Advisory Committee for WDHS Penshurst Campus.



Shaun McCulloch

Senior Constable Victorian Police Force

Commenced with Advisory Committee 2019

Term of appointment: 2019-2022

Born in Johannesberg South Africa, ilmmigrated to Australia in 2002. Started in Police Force in 2013, Shaun has been Stationed at Werribee, Sunshine, Hamilton, Portland (plain clothes) and now Penshurst. Shaun is married with two Children and one dog.

HONOUR ROLL PENSHURST & DISTRICT HEALTH SERVICE

LIFE GOVERNORS:

Mr.	G.G.	Burger *	Mr.	T.A.	Rentsch*
Mr.	E.	Cottrill *	Mr.	J.	Ryan *
Mr.	F.	Dunkley *	Mr.	F.	Schramm
Dr.	L.	Jenkins	Mr.	R.	Schramm *
Mrs.	E.	Kinnealy *	Mr.	J.O.W.	Smith *
Mr.	W.	Lewis *	Mrs.	H.M.	Linke *
Mr.	A.	Thornton	Mr.	H.	Mirtschin *
Pasto	or E.V	V. Wiebusch *	Mr.	N.	Kruger
Mr.	Α.	Cottrill*	Mr.	T.D.	Hutton
Dr.	J.D.	Fleming			

PRESIDENTS OF THE BOARD OF MANAGEMENT:

1956 - 1959	PastorE.W. Wiebusch *
1959 - 1961	Reverend C.A. Gibson*
1961 - 1966	Mr. R. Cheshire*
1966 - 1969	Mr. J.G. Ryan*
1969 - 1974	Mr. K. Cropper *
1974 - 1977	Mr. G.G. Burger *
1977 - 1988	Mr. W.J. Lewis *
1988 - 1994	Mr. T.A. Rentsch*
1994 - 1998	Mr. T.D. Hutton

CHAIRPERSONS OF THE ADVISORY COMMITTEE:

011111111111111111111111111111111111111		
1998 - 2000	Mr. R.	Greig
2000 - 2007	Mr. P.	Heazlewood
2007 - 2009	Mr. T.	Nieuwveld
2009 - 2012	Mr. L.	Paton *
2012 - 2018	Mrs. M.	Eales
2018 - 2019	Mr. T.	Godenzi
2019	Mr. D.	Adamson (Acting)

MATRONS / DIRECTORS OF NURSING:

1956 - 1957	Mrs. J.	Chesswas *
1957 - 1958	Mrs. E.	Fairhurst
1958 - 1959	Mrs. A.	Pitt
1959 - 1960	Ms. M.	Higgins
1960 - 1966	Mrs. E.	Wilson *
1966 - 1971	Miss. S.	Murphy
1971 - 1975	Mrs. J.	Flynn *
1975 - 1978	Ms. A.	Black
1978 - 1979	Mrs. G.	Harrington
1979 - 1984	Mrs. M.	Jeremy *
1984 - 1987	Mr. J.	Drummond
1987 - 1992	Ms. E.	Duckmanton
1992	Ms. C.	Freckleton (Acting Don) *
1995	Mrs. N.	Gash (Acting Don 5Mths)
1999	Mrs. C.	Templeton (Acting Don 3 Mths)

DIRECTORS OF NURSI	NG/MANA	GER:
1992 - 1995	Ms. M.	Dadswell (Don/Administrator)
1995	Ms. J.A.	Davis (Honorary Administrator 5 Mths)
1995 - 1998	Ms. J.	Ross (Don/Administrator)
1998 - 1999	Ms. J.	Ross (Manager/Don)
1999 - 2003	Mrs. J.	Burton (Manager/Don)
2003	Mrs. J.	Paton (Acting Manager/Don 3 Mths)
2004 - 2008	Mr. D.	Clarke (Manager/Don)
2008 - 2010	Mr. D.	Malone (Manager/Don)
2010 - 2011	Mrs. J.	Paton (Acting Manager/Don 6 Mths)
2011 - 2013	Mr. A.	Doull (Manager/Don)
2013 - 2015	Mrs. B.	Roberts (Manager/Don)
2015 - 2018	Mrs. K.	Armstrong (Acting Manager/Don)
2018 - 2018	Ms. V.	Quirk (Don)
2018	Ms. A.	Cunningham (Acting Manager/Don 2 Months
2018	Mrs. J.	Carter (Acting Manager/Don 1 Month)
2018 - Pres	Mrs. C.	Loria



NURSE UNIT MANAGERS:

2002 - 2003	Ms. A.	O'Brien
2003 - 2011	Mrs. J.	Paton
2008	Mrs. B.	Joosen (6Mths)
2011 - 2013	Mrs. A-M	Wheaton
2013 - 2014	Mrs. C.	Templeton (Acting Num)
2014 - 2016	Mrs. J.	Morris
2016 - 2018	Ms. V.	Quirk
2018 - 2018	Ms. P.	Holmes
2019 - Pres	Ms .I	Riches (Acting Num)

MEDICAL PRACTITIONERS:

1956 - 1958	Dr.	J.P.	Watt *
1958 - 1963	Dr.	R.J.	Leitch *
1963 - 1970	Dr.	A.I.	Mackinnor
1970 - 1982	Dr.	L.	Jenkins
1982 - 1985	Dr.	Α.	Arkell
1985 - 2006	Dr.	J.D.	Fleming
2006 - 2011	Dr.	M.	Forster
2008 - Aug 08	Dr.	J.	Banerji
2010 - July 2014	Dr.	M.	Abdullah
July 2014 - Feb 2015	Dr.	Ifran	Hakeem
Feb 2015 - Dec 2015	Dr.	Loba	Haque

2016 - Present Hamilton Medical Group - On A Rotating Doctor Basis.

* Deceased

ACKNOWLEDGEMENT



PAT & NANETTE STANES

We would like to acknowledge and thank Pat and Nanette Stanes for their efforts and commitment over the past three-and-a-half years in coordinating and running the Penshurst Hospital Market. Pat and Nanette initiated the market to raise funds for the Penshurst & District Health Service and over their time they raised \$12,450 which has been used to assist the Leisure and Lifestyle program for the residents of the Nursing Home and Kolor Lodge. Pat and Nanette have handed the market over to the Penshurst Progress Association who will continue to run the market for the benefit of the local community.

DONATIONS

GENERAL

Bethlehem Lutheran Church Tabor Combined Churches Community

Carols Committee

Reverend Peter Cook

Tabor Ladies Guild

Uniting Church Penshurst

Mr. T. Auden

Mr. M. Mckiernan

Mrs. B. Barker

Mr. C. Burger

Mrs. I. Boyd

Mr. G. Aydon

Mr. K. Doyle

Mrs. H. & V. Lynch

Mrs. B. Finlay

Mr. C. & Mrs. S. Hines

Mr. B. & Mr. J. King

Mr. E. & Mrs. J. Kelly

Mrs. G. Linke

Mr. W. McDonald

Mr. B. O'Brien

Mr. M. & Mrs. V. Rentsch

Mrs. C. Loria

Mrs. G. Rentsch

Mrs. C. Casey

Mr. F. Wensley

Mr. R. & Mrs. L. Stewart

Mrs. N. & Mrs. P. Stanes

Mr. I. Thomson

Mrs. S. Haas

Mr. W. & Mrs. A. Virtue

Mr. J. & Mrs. J. Watt

Mr. D. Munro

Mr. J. & Mrs. R. Crawford

Mrs. H. Elsworthy

Mrs. J. Street

Mr. B. Ladlow

Mrs. J. Cowland

Mr. J. W. Allen

Mr. N. Van Der Breggen

Mrs. L. Toyer

Mrs. B. Basham

GIFTS IN KIND

Mr. D. Adamson

Mr. T. Auden Mrs. M. Brown

Mrs. H. Brown

Mrs. L. Cameron

Mrs. J. Coyle

Mrs. G. Tonissen

Mrs. S. Davenport

Mrs. J. Drane

Mrs. M. Eales

Mrs. I. Edwards

Mr. G. Coyle

Mr. G. Eykels

Mrs. K. Golding

Mr. T. Godenzi

Mrs. C. Casey Reverend Angle Griffin

Mrs. M. Keeble

Mrs. B. Mirtschin

Mr. S. Modra

Mr. T. Nieuwveld

IVII. I. IVIEUWVE

Mrs. G. Platt

Mrs. G. Rentsch

Mr. D. Taubert

Mr. D. Schultz

Mrs. J. Shalders

Mrs. K. Saligari

Mrs. A. Watson

Mrs. W. Williams

Mrs. M. West

Mrs. V. Rentsch

Penshurst Hospital Ladies Auxiliary Hamilton Quilters Group

Dunkeld Red Cross Jo and Graham Music, Mortlake

Penshurst Primary School Penshurst Kindergarten

Wooley West Fest

St. Joseph's Primary School, Penshurst

Tarrington Primary school

Tabor Male Choir

Hawkesdale Primary School

Penshurst Men's shed

Footprints in the custard choir

There are many individuals who give their time or other gifts in kind (including donations, sponsorships and assisting fundraising functions. Your efforts are greatly appreciated.

STAFF SERVICE



STAFF OF PENSHURST CAMPUS

CHIEF EXECUTIVE:

Rohan Fitzgerald BCOM

DON - AGED CARE SERVICES-PENSHURST & COLERAINE

Bronwyn Roberts

RN, ICU Cert, Grad Cert Bus Admin, MACN

DIRECTOR OF NURSING/ MANAGER -PENSHURST CAMPUS

Catherine Loria

RN, RM, CCU Cert, Oncology Cert, Grad Dip Community Health, Advanced Dip Management

NURSING UNIT MANAGER

Julie Riches

(Acting)

RN, BA, Nursing, Grad Dip Aged Care

SERVICES MANAGEMENT

Penny Holmes {Ceased 31.12.2018}

AFTER HOURS COORDINATORS

Carolyn Templeton

RN, Cert. Ster. & Inf. Control, Hep.C/HIV counsellor, Nurse Immuniser

Julie Carter (Costello)

RN

ASSOCIATE NURSE UNIT MANAGERS

Juby Jacob

Jishamol Abraham

Dzintra Clarke

Penny Holmes {Ceased 31.12.2018}

REGISTERED NURSES

Holly Dent Lorna Lo

Mary Pineda

Sherry Ayorinde

ENROLLED NURSES

Kate Jackson

Lyn Peach

Margaret Meulendyks

Kim Cameron Kate O'Neill

Sally Casey

Teresa Holmes

Joscelyn Mibus

Kim Fitzgerald

PERSONAL CARE WORKERS

Cheryle Casey

Pauline Mclean

Joy Lambourn {Ceased 17.02.2019}

Marie Shaw

Shane Benge

Beverley Olle

Sonam Choden {Ceased 09.12.2018}

Linda Anton

Emma Strawford

SUPPORT SERVICES

GENERAL SERVICES MANAGER

Rhonda Hamilton

FOOD AND DOMESTIC SERVICE ASSISTANTS

Liz Ewina

Belinda Hill

Norelle Bensch

Robyn Smith

Bianca Kelly

Precy O'Meara

Tessa Benge

Jodie Rowland

Tshering Dorji {Ceased 05.12.2018}

Aimee Baker {Ceased 18.06.2019}

EDUCATION

Russell Armstrong

LIFE STYLE CO-ORDINATOR

Beth Howlett

MAINTENANCE

Richard Casey

ADMINISTRATION ASSISTANTS

Gwen Rentsch

Heather Mckenry {Ceased 25.03.2019}

Melissa Pye

Jodie Nicholson

SOCIAL SUPPORT GROUP

Brenda Uebergang (SSG Manager)

Fiona Mitchell (SSG Co-Ordinator)

Kate Coote {Ceased 17.02.2019}

Michelle Maslen

Ruben Ross

Nelly Kelly

Michelle Ellis

Revenue and Expense Statement for the Year Ended June 30, 2019		
<u>.</u>	2018/2019	2017/2018
	\$	\$
REVENUE		
State Government Grants	1,790,404	1,714,187
Patients Fees	1,732,222	1,753,654
Other Revenue	95,064	98,868
Transfer of Accommodation Charge	254,000	331,630
Total Operating Revenue	3,871,690	3,898,339
EXPENDITURE		
Salaries & Wages	3,043,261	3,053,976
Direct Expenditure	206,201	217,873
Overheads	670,982	626,191
Total Operation Funerality	2.000.444	2 000 040
Total Operating Expenditure	3,920,444	3,898,040
OPERATING SURPLUS/(DEFICIT)	(48,754)	299
CAPITAL ITEMS		
Fundraising and Donations	19,355	74,643
INGOING RESIDENTIAL CHARGES - AGED CARE	309,773	330,413
Transfer of Accommodation Charge	(254,000)	(331,630)
CAPITAL GRANTS	1,103	-
Expenses using Capital Income	(29,693)	(28,354)
Depreciation	(444,202)	(431,282)
HEALTH SERVICE RESULT	(446,418)	(385,911)
STATEMENT OF CHANGES IN EQUITY		
Total equity at beginning of the year	9,885,721	9,749,967
Net result for the period	(446,418)	(385,911)
Gain on Revaluation of Land & Building	2,407,590	521,665
TOTAL EQUITY AT END OF THE YEAR	11,846,893	9,885,721

EQUITY S S S S S S S S S	Balance Sheet as at June 30, 2019		
Accumulated Surplus / (Deficites)	·	2019	2018
Accumulated Surplus / (Deficits) 6,602,801 6,462,762 Asset Replacement Reserve 728,910 714,860 Asset Revaluation Reserve 5,374,913 2,994,269 Equity Transfer to WDHS 1,255,811 (898,611) Total Equity Transfer to WDHS 1,255,811 (898,611) Total Equity Transfer to WDHS 1,255,811 (898,611) Total Equity Transfer to WDHS 1,255,811 (898,611) Total Equity Transfer to WDHS 1,314,828 1,040,037 Total Current Liabilities 1,314,328 1,040,037 Total Current Liabilities 1,075,993 Total Current Liabilities 1,075,993 Total Current Liabilities 1,075,993 Total Liabilities 1,915,055 1,655,778 Total Current Liabilities 1,915,055 1,655,778 TOTAL EQUITY AND LIABILITIES 1,915,055 1,915,05		\$	\$
Asset Replacement Reserve 728,910 714,800 Asset Revaluation Reserve 5,374,913 2,994,268 Specific Purpose Reserve 495,880 522,421 Equity Transfer to WOHS (1,255,611) (808,611) Total Equity 11,846,893 9,885,721 CURRENT LIABILITIES Employee Entitlements 492,729 539,886 Monies Held in Trust 1,314,328 1,040,037 Total Current Liabilities 1,807,057 1,579,923 NON CURRENT LIABILITIES 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Repulty AND LIABILITIES 1,915,055 1,555,178 TOTAL EQUITY AND LIABILITIES 3,012,179 3,419,79 Townsternet 522,421 2,825,230 Receivables 107,999 81,516 Monies Heid in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 4,956,927 4,826,061 Land, Buildings, Plant & Equipment 9,483,434 7,316,665 <td>EQUITY</td> <td></td> <td></td>	EQUITY		
Asset Revaluation Reserve 5,374,913 2,994,269 Specific Purpose Reserve 499,880 522,21 Equity Transfer to WDHS (1,255,611) (808,611) Total Equity 11,846,893 9,885,721 CURRENT LIABILITIES Employee Entitlements 492,729 539,886 Monies Held in Trust 1,314,328 1,040,037 Total Current Liabilities 1,807,057 1,579,923 NON CURRENT LIABILITIES Employee Entitlements 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES CURRENT ASSETS Cash at Bank 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,661 NON CURRENT ASSETS Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	Accumulated Surplus / (Deficits)	6,502,801	6,462,782
Specific Purpose Reserve 495,880 522,421 Equity Transfer to WDHS (1,255,611) (808,611) Total Equity 11,846,893 9.885,721 CURRENT LIABILITIES Employee Entitlements 492,729 539,886 Monies Held in Trust 1,314,328 1,040,037 Total Current Liabilities 1,807,057 1,579,923 NON CURRENT LIABILITIES 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS Cash at Bank 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 2 4,826,061 Land, Buildings, Plant & Equipment 9,483,434 7,316,666 Accumulated Depreciation (678,413) (601,827) <	Asset Replacement Reserve	728,910	714,860
Equity Transfer to WDHS (1,255,611) (808,611) Total Equity 11,846,893 9,885,721 CURRENT LIABILITIES **** **** Employee Entitlements 492,729 539,886 Monies Held in Trust 1,307,057 1,579,923 NON CURRENT LIABILITIES **** **** Employee Entitlements 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 3,761,948 11,540,899 CURRENT ASSETS *** 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS *** 4,985,927 4,826,061 NON CURRENT ASSETS *** 4,983,434 7,316,665 Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Ac	Asset Revaluation Reserve	5,374,913	2,994,269
Total Equity 11,846,893 9,885,721 CURRENT LIABILITIES Employee Entitlements 492,729 539,886 Monies Held in Trust 1,314,328 1,040,097 Total Current Liabilities 1,807,057 1,579,923 NON CURRENT LIABILITIES 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS Cash at Bank 3,012,179 3,419,179 Investments 522,421 265,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	Specific Purpose Reserve	495,880	522,421
CURRENT LIABILITIES Employee Entitlements 492,729 539,886 Monies Held in Trust 1,314,328 1,040,037 Total Current Liabilities 1,807,057 1,579,923 NON CURRENT LIABILITIES 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS 2 2421 285,230 Cash at Bank 3,012,179 3,419,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,815 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 2 4,936,927 4,826,061 NON CURRENT ASSETS 2 4,936,927 4,826,061 NON CURRENT ASSETS 3,012,179 3,419,179 4,943,434 7,316,665 Land, Buildings, Plant & Equipment 9,483,434 7,316	Equity Transfer to WDHS	(1,255,611)	(808,611)
Employee Entitlements 492,729 539,886 Monies Held in Trust 1,314,328 1,040,037 Total Current Liabilities 1,807,057 1,579,923 NON CURRENT LIABILITIES 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 1,3761,948 11,540,899 CURRENT ASSETS 2 2421 285,230 Cash at Bank 3,012,179 3,419,179 1,917,999 81,615 Monies Held in Trust 1,314,328 1,040,037 1,040,037 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 2,483,434 7,316,665 NON CURRENT ASSETS 2,483,434 7,316,665 4,7316,665 6,714,838 Total Non Current Assets 8,805,021 6,714,838 6,601,827) 6,601,827) Total Non Current Assets 8,805,021 6,714,838 6,601,827) 6,601,827) 6,601,827) 6,601,827) 6,601,827) 6,601,827) <td< td=""><td>Total Equity</td><td>11,846,893</td><td>9,885,721</td></td<>	Total Equity	11,846,893	9,885,721
Employee Entitlements 492,729 539,886 Monies Held in Trust 1,314,328 1,040,037 Total Current Liabilities 1,807,057 1,579,923 NON CURRENT LIABILITIES 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 1,3761,948 11,540,899 CURRENT ASSETS 2 2421 285,230 Cash at Bank 3,012,179 3,419,179 1,917,999 81,615 Monies Held in Trust 1,314,328 1,040,037 1,040,037 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 2,483,434 7,316,665 NON CURRENT ASSETS 2,483,434 7,316,665 4,7316,665 6,714,838 Total Non Current Assets 8,805,021 6,714,838 6,601,827) 6,601,827) Total Non Current Assets 8,805,021 6,714,838 6,601,827) 6,601,827) 6,601,827) 6,601,827) 6,601,827) 6,601,827) <td< td=""><td>CURRENT LIABILITIES</td><td></td><td></td></td<>	CURRENT LIABILITIES		
Monies Held in Trust 1,314,328 1,040,097 Total Current Liabilities 1,807,057 1,579,923 NON CURRENT LIABILITIES 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS 20,200,2179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 24,434 7,316,665 Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838		492.729	539.886
Total Current Liabilities 1,807,057 1,579,923 NON CURRENT LIABILITIES Employee Entitlements 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS Cash at Bank 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,826,061 NON CURRENT ASSETS Land, Buildings, Plant & Equipment 9,483,434 7,316,666 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838			
NON CURRENT LIABILITIES Employee Entitlements 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS 2 2 Cash at Bank 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 2 4 Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838		.,,,	.,,
Employee Entitlements 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS 2	Total Current Liabilities	1,807,057	1,579,923
Employee Entitlements 107,998 75,255 Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS 2	NON CURRENT LIABILITIES		
Total Non Current Liabilities 107,998 75,255 Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS 2 2 Cash at Bank 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 2 2 Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838		107.000	75.055
Total Liabilities 1,915,055 1,655,178 TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 2 4,956,927 4,826,061 NON CURRENT ASSETS 6678,413 (601,827) Total Non Current Assets 8,805,021 6,714,838	Employee Entitlements	107,998	75,255
TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS Cash at Bank 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS Land, Buildings, Plant & Equipment Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	Total Non Current Liabilities	107,998	75,255
TOTAL EQUITY AND LIABILITIES 13,761,948 11,540,899 CURRENT ASSETS 3,012,179 3,419,179 Cash at Bank 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 20,000 4,956,927 4,826,061 NON Current Assets 9,483,434 7,316,665 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	Total Liabilities	1,915,055	1,655,178
CURRENT ASSETS Cash at Bank 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 2 2 Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838			<u> </u>
Cash at Bank 3,012,179 3,419,179 Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets NON CURRENT ASSETS Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	TOTAL EQUITY AND LIABILITIES	13,761,948	11,540,899
Investments 522,421 285,230 Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	CURRENT ASSETS		
Receivables 107,999 81,615 Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS 2 Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	Cash at Bank	3,012,179	3,419,179
Monies Held in Trust 1,314,328 1,040,037 Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	Investments	522,421	285,230
Total Current Assets 4,956,927 4,826,061 NON CURRENT ASSETS Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	Receivables	107,999	81,615
NON CURRENT ASSETS Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	Monies Held in Trust	1,314,328	1,040,037
Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838	Total Current Assets	4,956,927	4,826,061
Land, Buildings, Plant & Equipment 9,483,434 7,316,665 Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838			
Accumulated Depreciation (678,413) (601,827) Total Non Current Assets 8,805,021 6,714,838			=
Total Non Current Assets 8,805,021 6,714,838			
	Accumulated Depreciation	(678,413)	(601,827)
TOTAL ASSETS 13 761 048 11 540 800	Total Non Current Assets	8,805,021	6,714,838
	TOTAL ASSETS	13,761,948	11,540,899



Farewell





Do not stand at my grave and weep.
I am not there; I do not sleep.
I am a thousand winds that blow.
I am the diamond glints on snow.
I am the sunlight on ripened grain.
I am the gentle autumn rain.



When you awaken in the morning's hush

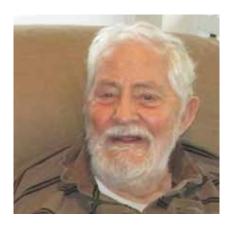


I am the swift uplifting rush
Of quiet birds in circled flight.
I am the soft stars that shine at night.
Do not stand at my grave and cry;
I am not there; I did not die.



- Mary Elizabeth Frye









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