

# 2020 2021 Annual Report



Y D H S



YARRAM + DISTRICT  
HEALTH SERVICE



Front Cover: celebrating NAIDOC week in the circular driveway, Commercial Road, Yarram & District Health Service

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The Annual Report of the *Yarram and District Health Service* is prepared in accordance with all relevant Victorian legislation. This index has been prepared to facilitate identification of the YDHS' compliance with statutory disclosure requirements.

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## Traditional Owners

Yarram and District Health Service acknowledge the Gunai Kurnai community, the traditional custodians of the land on which we stand.

## Board Chair and Chief Executive Officer

### The Year in Review:

The 2020-2021 year has proven to be one of many challenges, none more pertinent is managing the health service in a COVID environment.

Whilst it is easy to highlight the negative impacts of a COVID environment I would like to focus on some of positives for YDHS as COVID has forced us to operate differently.

YDHS now has a focus on tele-health services like never before. Strategically this is a fantastic benefit for our community as patients and residents can access specialist medical services without leaving Yarram. This year we successfully navigated specialist medical consultations into Aged Care for the first time ever.

The impact on health care delivery for rural health services cannot be understated as moving forward we will have access to numerous specialty services via tele-health platforms.

YDHS has contributed to the regional COVID response via rapid response testing clinics, a significant vaccination contribution, in addition to working collaboratively with the Gippsland Public Health Unit on COVID response. We are proud to provide a comprehensive vaccination clinic for the local community to make access to vaccines easy.

Our medical workforce is stabilising with 2 full time GP's, Dr Charles Luiz and Dr Jimmy Wang. We have a number of potential additions to this which we will be working through over the next twelve months to get to an ideal workforce of 4 GP's. This work has been of strategic importance to the health service, however we now have a very stable and skilled platform that we can build on.

YDHS is working collaboratively with all our local health care providers so we can provide a smoother client experience to the community. We have been proud to welcome back Dr Qubian from the King Street Clinic and also work alongside our two local pharmacists. We have enjoyed working closely as a team to deliver on outcomes that matter to our community.

### Expectations for the Future:

As we focus to the future, we have big dreams and high expectations for the development of services at the Health Service. We are embarking on expanding into Home Care Packages whilst building the internal structures and programs to provide seamless integration of services for our clients. We have a strong and passionate team who are focused on developing our services to deliver on the needs of the local community.

YDHS has developed sound working relationships with Latrobe Regional Hospital (LRH) and other surrounding health services to deliver on sustainable, safe care that meets the needs of our various different communities in Gippsland. This is an exciting time for YDHS as we are part of a collaboration that will deliver on real outcomes through shared services across the region.



Shaun Braybrook  
Board Chair  
Yarram, 20 October 2021



Paul Head  
Interim Chief Executive Officer  
Yarram, 20 October 2021

## Yarram and District Health Service – Report of Operations

### Responsible Bodies Declaration

In accordance with the Financial Management Act 1994, I am pleased to present the Report of Operations for Yarram and District Health Service for the year ending 30 June 2021.



Shaun Braybrook  
Board Chair  
Yarram, 20 October 2021

## About Us

The Yarram and District Health Service (YDHS) is located 220 kilometres south east of Melbourne on the South Gippsland Highway in rural Victoria. In relation to regional centres it is 73 kilometres south west of Sale and 62 kilometres south east of Traralgon. The township of Yarram, which is the principal service centre of the area, is located in the Shire of Wellington and services an area of approximately 1,840 square kilometres and a catchment population of 5,580.

The Health Service originally commenced operation as the Yarram and District Hospital. It was inaugurated on 1<sup>st</sup> January 1912 and admitted its first patient in January 1917. In 1993, the hospital name was changed to the Yarram and District Health Service to reflect its evolution into an integrated health service, more appropriately positioned to meet the needs of the wider community.

YDHS offers acute care services including a 24-hour urgent care facility. General medical and post-surgical care, rehabilitation, respite, dialysis and palliative care are all available at YDHS. St Elmo's Nursing Home is located on the grounds of the main campus and provides recreational activities, outings, volunteer companionship and a wide range of other services to its residents. Crossley House is located adjacent to the Health Service and is a 30 bed residential aged care facility. Crossley House was formally amalgamated with YDHS in November 2009.

The construction of the new Integrated HealthCare Centre (IHCC), located on the former site of the Community Service/Yarram Medical Centre building was fully operational in September 2020. This new complex houses the Yarram Medical Centre and all primary care and community services.

The Health Service operates under the Department of Health and Human Services Small Rural Health Service program and provides a comprehensive range of services. In addition to this operational agreement, our service delivery is further enhanced through partnership arrangements with the Commonwealth Government Department of Health, Department of Social Service and Local Government. YDHS is well supported by its teams of volunteers and fundraising Auxiliary.

## Purpose, functions, powers and duties

*Our Vision: YDHS to be a respected and caring partner in a strong community*

*Our Mission: Work with our community and our partners to improve health and wellbeing*

*Our Values: Integrity, collaboration, Acceptance, Respect, Enthusiasm – I. C.A.R.E*

The Board of the Yarram and District Health Service is appointed by the Governor in Council on the recommendation of the Minister for Health in accordance with the Health Services Act 1988. The functions of the Board are to:

- Monitor the performance of Yarram and District Health Service.
- Appoint and determine the employment terms (including remuneration) of a Chief Executive Officer.
- Oversee the management of Yarram and District Health Service and monitor the performance of the Chief Executive Officer.
- Develop statements of priorities and strategic plans for the operation of Yarram and District Health Service and monitor their compliance.
- Develop financial and business plans, strategies and budgets to ensure accountable and efficient provision of health services by Yarram and District Health Service and its long-term financial viability, as well as to ensure they are adhered to.
- Establish and maintain effective systems to ensure that the Health Service meets the needs of the community served by Yarram and District Health Service and that the views of users and providers of health services are taken into account.
- Ensure that Yarram and District Health Service operates within its budget and that its systems accurately reflect its financial position and viability.

## Nature and range of services provided

### Services

YDHS provides and supports the provision of a range of services that are designed to meet the needs of individuals and groups within its catchment population of approximately 5,580 people.

### Acute Services

- 20 bed facility
- Medical, Post-Surgical
- Urgent Care Services
- Respite Care
- Maintenance Dialysis
- Transitional Care Program

### Allied Health Services

- Physiotherapy
- Occupational Therapy
- Dietetics
- Podiatry
- Social Work
- Speech Therapy

### Ancillary Services

- Pathology
- Visiting Radiology
- Pharmacy

### Community Mental Health Services

- Gippsland Psychiatric Services (this is a LRH co-located service)

### Community Participation

- Women's Health Event
- Yarram Agricultural Show

### Community Services

- Community Nursing
- Regional Assessment Service
- Maternal and Child Health
- Diabetes education
- Foot Care Clinic
- Health Promotion
- Palliative Care
- Counselling
- Home Support Services
- In Home Respite
- Delivered Meals
- Domestic Assistance
- Transport
- Personal Care Assistance
- Home Maintenance and Minor Modifications
- Allied Health Services
- Housing and Homelessness Support
- Integrated Family Services
- Commonwealth Emergency Relief Vouchers
- Engage! Youth Projects
- Stepped Care Mental Health Program
- Social Support Group
- Volunteer Coordination

### Residential Services

- St Elmo's Nursing Home - 30 beds (now Ageing in Place)
- Crossley House – residential aged care, 30 beds
- Respite accommodation

### Yarram Medical Centre

- General Practitioners
- Practice Nurse
- Women Health Nurse

### Visiting Services

- Optometrist
- Cardiac Diagnostics
- Continence Nurse
- Podiatry (Gippsland Foot Clinic)
- Audiology Service
- Psychologist and Counselling Service
- Women's Health GP – Royal Flying Doctor Service
- Anglicare Financial Counselling
- Royal Flying Doctors Service Counselling
- SPOT Rural Speech Pathology

## Responsible Ministers

Yarram and District Health Service is established under the Health Services Act 1988 (Vic). The responsible Ministers during the reporting period were:

### Minister for Health and Minister for Ambulance Services

Jenny Mikakos MP, 1 July 2020 to 26 September 2020  
The Hon Martin Foley MP, 26 September 2020 to 30 June 2021

### Minister for Mental Health

The Hon Martin Foley MP, 1 July 2020 to 29 September 2021  
The Hon James Merlino MP, 29 September 2020 to 30 June 2021

### Minister for Equality

The Hon Martin Foley MP, 1 July 2020 to 30 June 2021

## Board Committee Representation

### Board Membership:

Mr Shaun Braybrook, Chair: commenced 2011  
Mr Trevor Yong, Deputy Chair: commenced 2014  
Ms Lauren Daly, Board Director: commenced 2020  
Dr Jenny Davis, Board Director: commenced 2019  
Mr Ian Jaggard-Hawkins, Board Director: commenced 2020  
Ms Clara Mandaletti, Board Director: commenced 2020  
Mr Peter O'Reilly, Board Director: commenced 2018  
Dr Amanda Ormerod, Board Director: commenced 2018  
Ms Angela Jacob, Board Director: commenced 2018, resigned 26 November 2020  
Mr Stuart Jillings, Board Director: commenced 2016, resigned 21 July 2020  
Mr Len Neist, Board Director: commenced 2017, resigned 30 September 2020

### Board Sub-Committee Membership:

#### Audit & Risk Committee:

Ms Clara Mandaletti and Mr Ian Jaggard-Hawkins. Independent Chair Ms Robyn McLachlan and Community Representatives Mr Alan Hall and Ms Zita Youens

#### Quality Improvement Committee

Dr Jenny Davis (Chair) and Ms Lauren Daly

#### Finance Committee

Mr Peter O'Reilly (Chair), Mr Trevor Yong and Mr Ian Jaggard-Hawkins

**Medical Appointment Advisory Committee: disbanded 26 May 2021**

## Senior Officer's

**Acting Chief Executive Officer:** Mr Paul Head

**Director Corporate Services:** Ms Jane Millard

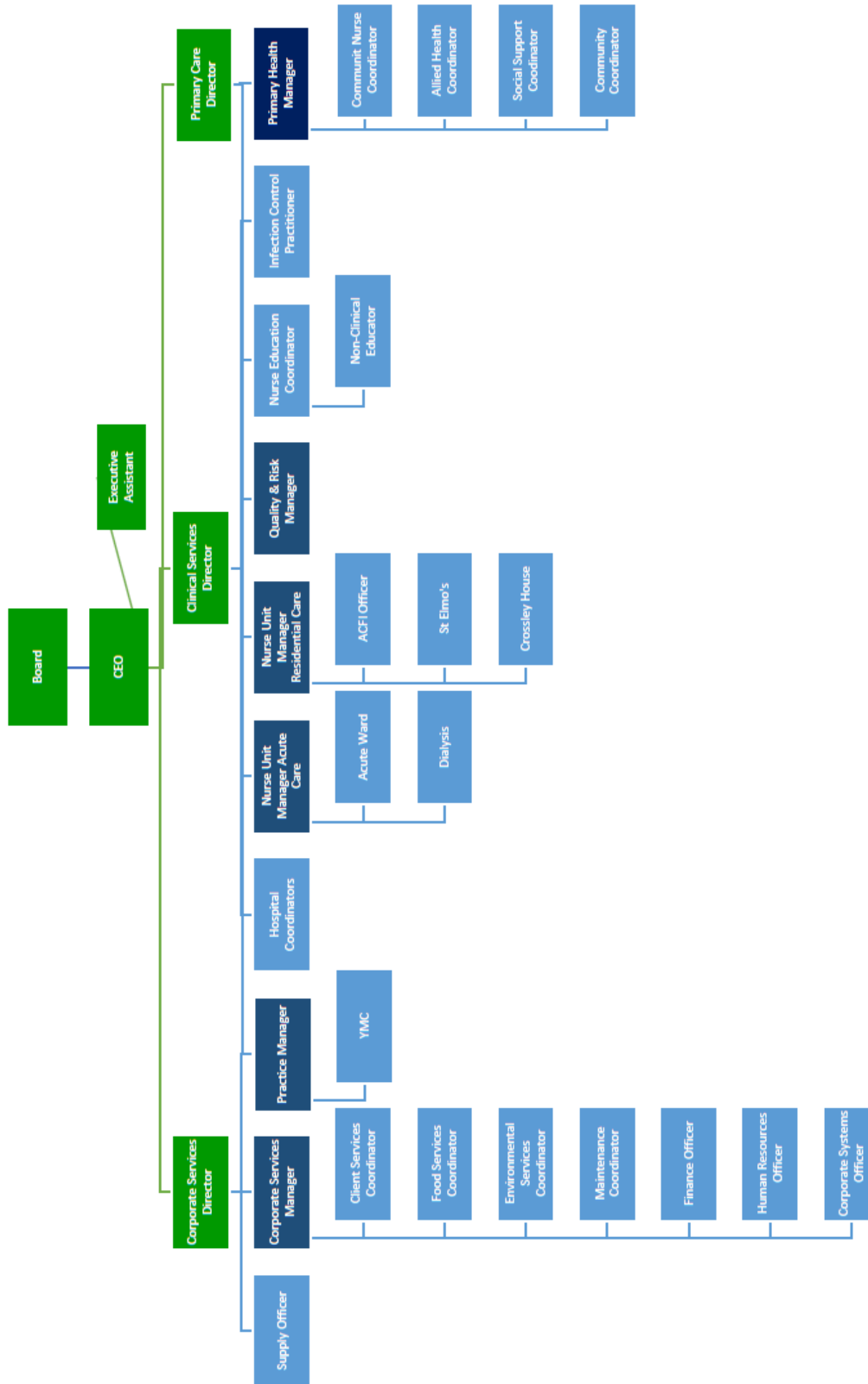
**Acting Director Primary Care:** Ms Caroline Lubach

**Acting Director Clinical Services:** Ms Ruth Scaife

**Director Medical Services:** Dr Craig Winter



# Organisational Structure



## Workforce Data

Workforce				
Labour Category	JUNE Current Month FTE		Average Monthly FTE	
	2020	2021	2020	2021
Nursing	27.13	29.46	31.50	33.18
Administration and Clerical	24.80	24.15	24.93	24.75
Medical Support	0.00	0.00	0.00	0.00
Hotel & Allied Services	40.15	49.91	43.80	51.27
Medical Officers	2.00	0.00	1.00	0.00
Hospital Medical Officers	0.00	0.00	0.00	0.00
Sessional Clinicians	0.10	0.00	.10	0.00
Ancillary Staff (Allied Health)	14.48	14.08	15.90	14.63
<b>Total:</b>	<b>108.66</b>	<b>117.60</b>	<b>117.23</b>	<b>123.83</b>

FTE stands for full-time equivalent positions. Employees have been correctly classified in workforce data collections.

### Employment and Conduct Principles:

Merit and equity principles are encompassed in employment and are reinforced by our Code of Conduct.

### Occupational Health and Safety

Yarram and District Health Service maintains a standing Occupational Health and Safety Committee which normally meets monthly to assist in review, consultation and discussion, policy, procedure, planning and action around Occupational Health and Safety matters.

Occupational Health and Safety	2020-2021	2019-2020	2018-2019
Number of reported hazards/incidents per 100 full-time equivalent staff members	27	30	26
The number of 'lost time' standard WorkCover claims for the year per 100 FTE	3.8	5	2.4
The average cost per WorkCover claim for the year ('000)	\$16,521	\$19,305	\$13,914

### Occupational Violence

Occupational Violence Statistics	2020-2021
Workcover accepted claims with an occupational violence cause per 100 FTE	0
Number of accepted Workcover claims with lost time injury with an occupational violence cause per 1,000,000 hours worked.	0
Number of occupational violence incidents reported	8
Number of occupational violence incidents reported per 100 FTE	7
Percentage of occupational violence incidents resulting in a staff injury, illness or condition	0

## Finance Summary

Summary of the financial results for the year

### Financial Reporting

	2021 \$000	2020 \$000	2019 \$000	2018 \$000	2017 \$000
<b>OPERATING RESULT</b>					
Total Revenue	16,789	14,796	16,372	15,029	13,884
Total Expenses	16,088	15,323	15,803	14,255	15,144
<b>Net Result from Transactions</b>	701	-527	569	774	-1,260
Total other economic flows	38	-91	-47	252	10
<b>Net Result</b>	739	-618	522	1,026	-1,250
Total assets	33,494	31,864	33,793	26,288	24,384
Total liabilities	7,487	6,879	8,190	8,065	7,187
<b>Net Assets/Total Equity</b>	<b>26,007</b>	<b>24,985</b>	<b>25,603</b>	<b>18,223</b>	<b>17,197</b>

### Net Result from Transactions and Operating Result

	2020-21 \$000
<b>Net operating result *</b>	28
Capital purpose income	1,561
Specific income	0
COVID 19 State Supply Arrangements	84
- Assets received free of charge or for nil consideration under the State Supply	
State supply items consumed up to 30 June 2020	(84)
Assets provided free of charge	0
Assets received free of charge	0
Expenditure for capital purpose	(185)
Depreciation and amortisation	(703)
Impairment of non-financial assets	0
Finance costs (other)	0
<b>Net result from transactions</b>	701

\* The Operating result is the result for which the health service is monitored in its Statement of Priorities

### Significant changes in the financial position for the year included:

Cash and investments increased slightly which is reflected in the increase of Residential Aged Care Refundable Accommodation Deposits RADs / Bonds that has led to an increase in the monies in trust liability. This was offset with a high level of building works (property, plant and equipment).

Borrowings have decreased with repayments made in regard to amounts owing to Department of Health and for leased motor vehicles.

### Operational and budgetary objectives and performance against objectives

Yarram and District Health Service have recorded a net operating surplus of \$28,211 before capital and specific items in 2020 2021. The Statement of Priorities operating target was a net operating deficit of \$0 therefore the budgetary objectives for 2020 2021 were achieved. COVID-19 severely impacted the ability of patients to access services face to face within the hospital due to multiple lockdowns, additional COVID support funding from the State Government helped to offset the loss of patient fee revenue to ensure a small surplus was reported in 2020 2021.

### Subsequent events

There were no events subsequent to the balance sheet date that may have a significant effect on the operational objectives of the organisation in subsequent years.

## Consultancies

### Consultancies Under \$10,000:

In 2020/2021, there were nil consultancies where the total fees payable to the consultant were less than \$10,000. The total expenditure incurred during 2020/2021 in relation to consultants was \$0 (excl GST).

### Consultancies Over \$10,000

In 2020/2021, there was one consultancy where the total fees payable to the consultant was \$10,000 or greater. The total expenditure incurred during 2020/2021 in relation to this consultancy is \$31,339 (excl GST). Details of this consultancy is as follows:

Consultant	Purpose of Consultancy	Start Date	End Date	Total approved project fee (excl GST)	Expenditure 2020/2021 (excl GST)	Future expenditure (excl GST)
Tom Keating	Clinical Services Plan	08/11/2020	11/02/2021	31,339	31,339	0
<b>Sub Totals</b>				<b>\$31,339</b>	<b>\$31,339</b>	<b>\$0</b>

### Information and Communication Technology (ICT) Expenditure

The total ICT expenditure incurred during 2020/2021 is \$610,608 (excluding GST) with the details as below:

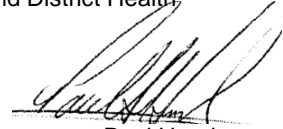
Business As Usual (BAU) ICT expenditure	Non-Business As Usual (non-BAU) ICT expenditure		
	Total = Operational expenditure and Capital Expenditure (excluding GST) (a) + (b)	Operational expenditure (excluding GST) (a)	Capital expenditure (excluding GST) (b)
Total (excluding GST)			
\$604,966	\$5,642	\$3,051	\$2,591



## Attestations and Declarations

### Data Integrity


I, Paul Head certify that the Yarram and District Health Service has put in place appropriate internal controls and processes to ensure that reported data accurately reflects actual performance. Yarram and District Health Service has critically reviewed these controls and processes during the year.

A handwritten signature in black ink, appearing to read 'Paul Head', written over a horizontal line.

Paul Head  
Interim Chief Executive Officer  
Yarram, 20 October 2021

### Conflict of Interest

I, Paul Head, certify that Yarram and District Health Service has put in place appropriate internal controls and processes to ensure that it has complied with the requirements of hospital circular 07/2017 Compliance reporting in health portfolio entities (Revised) and has implemented a 'Conflict of Interest' policy consistent with the minimum accountabilities required by the VPSC. Declaration of private interest forms have been completed by all executive staff within Yarram and District Health Service and members of the board, and all declared conflicts have been addressed and are being managed. Conflict of interest is a standard agenda item for declaration and documenting at each executive board meeting.

A handwritten signature in black ink, appearing to read 'Paul Head', written over a horizontal line.

Paul Head  
Accountable Officer  
Yarram, 20 October 2021

### Financial Management Compliance

I, Shaun Braybrook on behalf of the Responsible Body, certify that Yarram and District Health Service has no Material Compliance Deficiency with respect to the applicable Standing Directions under the Financial Management Act 1994 and Instructions.

A handwritten signature in black ink, appearing to read 'Shaun Braybrook', written over a horizontal line.

Shaun Braybrook  
Board Chair/ Responsible Officer  
Yarram, 20 October 2021

### Integrity, Fraud and Corruption

I, Paul Head certify that Yarram and District Health Service has put in place appropriate internal controls and processes to ensure that Integrity, fraud and corruption risks have been reviewed and addressed at Yarram and District Health Service during the year.

A handwritten signature in black ink, appearing to read 'Paul Head', written over a horizontal line.

Paul Head  
Accountable Officer  
Yarram, 20 October 2021

## Disclosures

### Additional Information FRD 22I:

Details in respect of the items listed below have been retained by the health service and are available to the relevant Ministers, Members of Parliament and the public on request (subject to the freedom of information requirements, if applicable):

- Declarations of pecuniary interests have been duly completed by all relevant officers;
- Details of shares held by senior officers as nominee or held beneficially;
- Details of publications produced by the entity about itself, and how these can be obtained;
- Details of changes in prices, fees, charges, rates and levies charged by the Health Service;
- Details of any major external reviews carried out on the Health Service;
- Details of major research and development activities undertaken by the Health Service that are not otherwise covered either in the report of operations or in a document that contains the financial statements and report of operations;
- Details of overseas visits undertaken including a summary of the objectives and outcomes of each visit;
- Details of major promotional, public relations and marketing activities undertaken by the Health Service to develop community awareness of the Health Service and its services;
- Details of assessments and measures undertaken to improve the occupational health and safety of employees;
- A general statement on industrial relations within the Health Service and details of time lost through industrial accidents and disputes, which is not otherwise detailed in the report of operations;
- A list of major committees sponsored by the Health Service, the purposes of each committee and the extent to which those purposes have been achieved;
- Details of all consultancies and contractors including consultants/contractors engaged, services provided, and expenditure committed for each engagement.

**Environmental Performance:**

YDHS continues to work towards improving performance by minimising consumption of water and energy, encouraging the procurement of sustainable products and services and where possible diverting equipment and furnishing from landfill.

Assisting us in reducing the consumption of electricity is the installation of a 150.22kW solar system and an LED lighting upgrade throughout the Health Service.

Emissions Source	Consumption units	Consumption	COS-e(tonnes)
<b>Direct Emissions</b>			
Natural Gas/LPG	litres	164 000	
Fuel	litres	N/A	
Electricity	kWh	441 317.9	453.93
Total		605 317.9	456.93

**Water Use:** 14590.193kL

**Waste Generation:**

- Clinical Waste: 19.400 litres
- General Waste: 312 sq metres



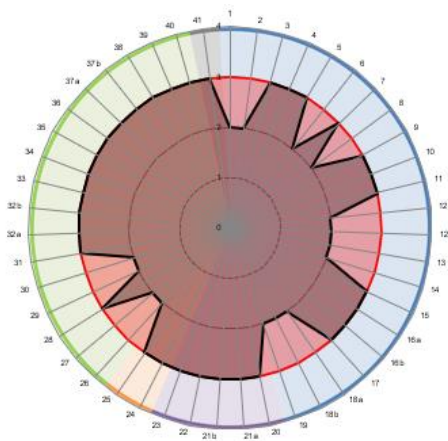
## Asset Management Accountability Framework (AMAF) Maturity Assessment

The following sections summarise Yarram & District Health Service assessment of maturity against the requirements of the Asset Management Accountability Framework (AMAF). The AMAF is a non-prescriptive, devolved accountability model of asset management that requires compliance with 41 mandatory requirements. These requirements can be found on the DTF website:

<https://www.dtf.vic.gov.au/infrastructure-investment/asset-management-accountability-framework>

Yarram & District Health Service's target maturity rating is 'competence', meaning systems and processes fully in place, consistently applied and systematically meeting the AMAF requirement, including a continuous improvement process to expand system performance above AMAF minimum requirements.

Results:



<b>Legend</b>	
<b>Status</b>	<b>Scale</b>
Not Applicable	N/A
Innocence	0
Awareness	1
Developing	2
Competence	3
Optimising	4
Unassessed	U/A

Target



Overall





## Disclosures

### Safe Patient Care Act 2015

Yarram and District Health Service have no matters to report in relation to its obligations under the Safe Patient Care Act 2015.

### Carers Recognition Act 2012:

As a care support organisation, Yarram and District Health Service:

- Takes all practicable measures to ensure that its employees and agents have an awareness and understanding of the care relationship principles.
- Takes all reasonable measures to ensure that persons who are in care relationships and who are receiving services in relation to the care relationship from Yarram and District Health Service have an awareness and understanding of the care relationship principles.
- Takes all practicable measures to ensure that Yarram and District Health Service and its employees and agents reflect the care relationship principles in developing, providing or evaluating support and assistance for persons in care relationships.

### National Competition Policy

It is Government policy that the costing policies of publicly funded organisations should reflect any competitive advantage not available to the private sector. The Yarram and District Health Service supports this policy and meets its requirements.

Yarram and District Health Service continues to comply with the Victorian Government's Competitive Neutrality Policy.

### Building Act 1993:

All buildings of the Health Service comply with the Building Act, 1993. The Health Service has a policy of consulting architects and engaging registered builders when renovating existing buildings or constructing new facilities. Plans are submitted to local government for approval and building permits issued prior to commencement.

All sites are subject to a Fire Safety Audit and Risk Assessment according to revised standards as directed by the Department of Health.

### Freedom of Information Act 1982:

The nominated Freedom of Information Officer is the Director Corporate Services who has the responsibility for Health Information Management at the Yarram and District Health Service. For information on how to make a FOI request and for associated costs visit [www.ydhs.com.au](http://www.ydhs.com.au) or phone 5182 0222.

During the 2020/2021 financial year 4 requests for information were received under the Freedom of Information Act 1982, 4 requests were granted in full.

In addition to requests under the Freedom of Information Act 1982, the Health Service recognises requests for "release of information" where information is sent directly to a designated Medical Practitioner for ongoing care. There were 56 requests for release of information this year.

### Public Interest Disclosures Act 2012

Yarram and District Health Service has developed a procedure for the protection of individuals from detrimental action. Guidance is available on the Yarram and District Health Services website and is contained in the organisation's policy and procedure manual. Nil protected disclosures have been received this year.

### Gender Equality Act 2020:

The Gender Equality Act 2020 (the "Act") commenced in March 2021. The objectives of the Act are to:

- promote, encourage and facilitate the achievement of gender equality and improvement in the status of women
- support the identification and elimination of systemic causes of gender inequality in policy, programs and delivery of services in workplaces and communities

- recognise that gender inequality may be compounded by other forms of disadvantage or discrimination that a person may experience on the basis of Aboriginality, age, disability, ethnicity, gender identity, race, religion, sexual orientation and other attributes
- redress disadvantage, address stigma, stereotyping, prejudice and violence, and accommodate persons of different genders by way of structural change
- enhance economic and social participation by persons of different genders
- further promote the right to equality set out in the Charter of Human Rights and Responsibilities and the Convention on the Elimination of All Forms of Discrimination against Women

YDHS plan to develop a Gender Equality Action Plan (GEAP) by 30 June 2022. To do this we are commencing a Gender Equality Audit to assist identifying any existing gaps. We are also commencing a review of our existing workforce inclusion initiatives already in place. These activities will ensure our plan identifies all actions required to improve gender equality in our organisation.

### Local Jobs First Act 2003

In 2020 2021 there were nil contracts to which the Local Jobs First Policy applied.



## Statement of Priorities (SoP) Report

### Part A: Strategic Priorities

For financial year 2020-21 there have been no individual deliverables that constitutes SoP Part A. Due to the COVID-19 pandemic the Minister for Health provided all health services with the below SoP Part A priorities to be focused on during the pandemic.

Maintain your robust COVID-19 readiness and response, working with my department to ensure we rapidly respond to outbreaks, if and when they occur, which includes providing testing for your community and staff, where necessary and if required. This includes preparing to participate in, and assist with, the implementation of our COVID-19 vaccine immunisation program rollout, ensuring your local community's confidence in the program.

*YDHS has remained COVID ready by establishing plans to respond rapidly in the event of an outbreak.*

*We have contributed heavily to the immunisation programme operating regular clinics to enable easy access to the vaccine for our community. Thus far we have immunised 1,100 people through our clinic.*

*Additionally, we have responded by operating rapid response swabbing clinics as required under the guidance of the Gippsland Public Health Unit.*

**Achieved**

Engage with your community to address the needs of patients, especially our vulnerable Victorians whose care has been delayed due to the pandemic and provide the necessary "catch-up" care to support them to get back on track.

*Current consumers of YDHS community services were contacted after each interruption to service to ensure appropriate catch up services were provided. Referrals back through My Aged Care have been crucial in this to ensure that community members have been assessed for the right care for their needs. YDHS have focused on ensuring each consumer has a current assessment for services which meets their care level, whether that be through Regional Assessment or Aged Care Assessment Team for higher level approvals (respite, home care package or residential care). Vulnerable clients who are registered with our Vulnerable Clients Register have been supported through connection to care, transport to medical appointments and GP reviews. Promotion of what services YDHS can offer to support the community is also underway.*

**Achieved**

As providers of care, respond to the recommendations of the Royal Commission into Victoria's Mental Health System and the Royal Commission into Aged Care Quality and Safety.

*YDHS are proactively moving with the changes in the sector as a result of the Royal Commission recommendations, we are continuing to refine our model of care in addition to forward planning infrastructure that will enable us to provide safe patient/resident centered care.*

**Achieved**

Develop and foster your local health partner relationships, which have been strengthened during the pandemic response, to continue delivering collaborative approaches to planning, procurement and service delivery at scale. This extends to prioritising innovative ways to deliver health care through shared expertise and workforce models, virtual care, co-commissioning services and surgical outpatient reform to deliver improved patient care through greater integration.

*We have established strong tele-health links with our neighbouring health services for specialist care delivery and operational integration where possible. We are leverage off our Regional Health Service for specialised back of house functions such as payroll. We have plans to evolve further in this space with the health service partnerships roll out.*

**Achieved**

## Part B: Performance Priorities

### High quality and safe care

Key performance measure	Target	Result
<b>Infection prevention and control</b>		
Compliance with the Hand Hygiene Australia program	83%	88%
Percentage of healthcare workers immunised for influenza	90%	99%
<b>Patient experience</b>		
Victorian Healthcare Experience Survey – percentage of positive patient experience responses	95%	No surveys conducted in 2020 2021
Victorian Healthcare Experience Survey – percentage of very positive responses to questions on discharge care	75%	No surveys conducted in 2020 2021

### Effective financial management

Key performance measure	Target	Result
Operating result (\$m)	\$0.00	\$0.03
Average number of days to pay trade creditors	60 days	31 days
Average number of days to receive patient fee debtors	60 days	37 days
Adjusted current asset ratio (ACAR)	0.7 or 3% improvement from health service base target	1.42
Actual number of days available cash, measured on the last day of each month.	14 days	100 days
Variance between forecast and actual Net result from transactions (NRFT) for the current financial year ending 30 June.	Variance ≤ \$250,000	Not Achieved



## Part C: Activity and Funding

Funding type	Activity Totals
<b>Small Rural – Primary Health Flexible Service</b>	<b>Hours</b>
Counselling and Casework	659
Nursing	244
Allied Health	1219
Integrated Chronic Disease	238
<b>Home and Community Care (Program for Younger People)</b>	
Allied Health Dietetics	23
Allied Health Physiotherapy	150
Allied Health Occupational Therapy	161
Allied Health Speech Pathology	194
Allied Health Counselling	66
Allied Health Podiatry	23
Assessment and Care Coordination	401
<b>Community Care (Domestic Assistance, Personal Care, Respite)</b>	
Nursing at Home and Centre	390
Property Maintenance	43
Planned Activity Group	288
Volunteer Coordination	175
<b>Commonwealth Home Support Program</b>	
Allied Health & Therapy Services totals	1133
Nursing	2446
Social Support - Group	5212
Domestic assistance (General house cleaning)	2521
Assistance with self-care	1573
Other Food Services	3
Meals	2861
Home modifications	8890
Home maintenance	170
Flexible respite	516
Transport	488
Regional Assessment Service	234
Integrated Family Services	2394
Homelessness, Accommodation & Support	57 supports
Maternal & Child Health	919

Funding Type	Activity	Units
<b>Small Rural</b>		
Small Rural Acute	338.69	WIES Equivalent
Small Rural Residential Care	12 856	Bed Days

## Glossary of Terms

YDHS – Yarram & District Health Service

CEO – Chief Executive Officer

IHCC – Integrated HealthCare Centre

LRH – Latrobe Regional Hospital

GP – General Practitioner

LCHS – Latrobe Community Health Service

WPCP – Wellington Primary Care Partnership

PCP – Primary Care Partnership

DHHS – Department Health and Human Services

COPD – Chronic Obstructive Pulmonary Disease

EMR – Electronic Medical Record

OVA – Occupational Violence and Aggression

MARAM – Multiagency Risk Assessment and Risk Management Framework

FVISS – Family Violence Information Sharing Scheme

CISS – Child Information Sharing Scheme

CGHS – Central Gippsland Health Service

SoP – Statement of Priorities

FOI – Freedom of Information



*Yarram & District Health Service*

ABN 23682798533

# *FINANCIAL STATEMENTS*

YEAR ENDED 30 JUNE 2021

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Annual Report  
2020/2021

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