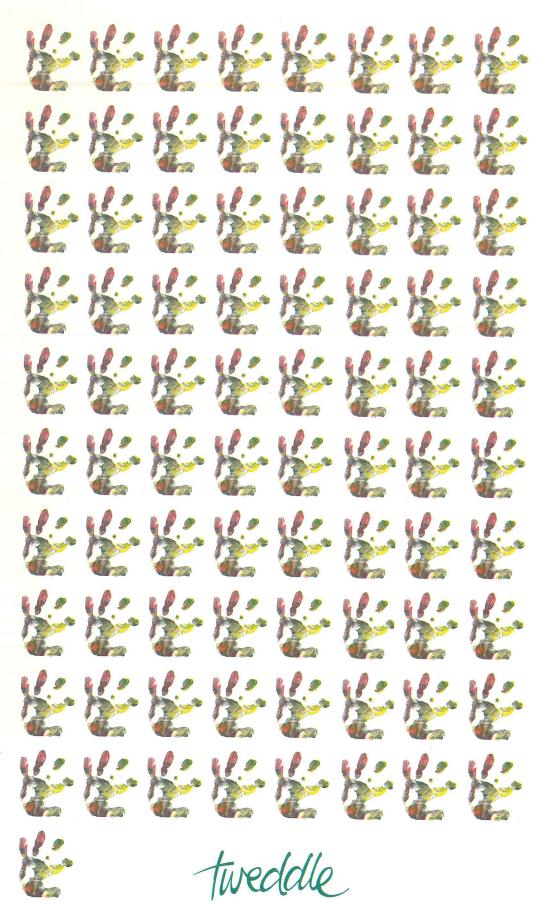
${\sf EIGHTY}$ FIRSTDITION



Child & Family Health Service

ANNUAL REPORT - 2001

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TWEDDLE CHILD & FAMILY HEALTH SERVICE



Our Mission

Tweddle Child and Family Health Service provides a specialist health development and family support program aimed at strengthening independent family functioning, promoting health and preventing illness and injury. It is concerned with the optimal health, growth and development of all clients.



OUR OBJECTIVES



To provide a specialist health promotion, education and family support day and residential service directed towards assisting parents in caring for their infants and young children.



To efficiently utilise appropriate physical and human resources to promote health and well being and to prevent disease, injury and suffering.



To facilitate and encourage involvement in services by liaison and networking and to assist users of services to make informed decisions about health care.



To foster continuing improvement in health care standards through education, training and dissemination of information.



To develop and implement services at Tweddle, and within the community, which will enhance and improve the quality of the services already provided to children, families, and community with a view to promoting health and social equity.

TWEDDLE

CHILD AND FAMILY

HEALTH SERVICE

ANNUAL REPORT

2001

PRESIDENT'S REPORT

Last year I indicated that having settled happily into the remodeled Adelaide Street facilities, Tweddle had turned its attention to a range of ways and directions in which it might deliver its services. Being mindful of the great demand on its programs and those programs offered by other Early Parenting Centres, innovation and excellence were required to do this.

So what has Tweddle and the Board done about these issues?

It has not overlooked it's core activities from a services perspective, the year can be described as highly successful, with all targets being achieved and just on 2000 families receiving a service. From the information, demonstration and learning provided through the Tweddle Education Network, a total of 2,530 community contacts and 1,228 professional contacts were made testifying the Education Network fulfils a community need.

All staff have worked particularly hard towards achieving quality accreditation by December 2001. We are confident of achieving this and to do so within a year reflects highly on all involved in the process.

The last financial year has seen Tweddle provide a Parent Assessment and Skill Development Service to families referred by the Department of Human Services. Previously, Tweddle had only participated in limited trials. Both Board and Staff felt that this was an area of need and an area in which Tweddle skills could be put to good use.

Whilst well known in the Western Region of Melbourne for the parenting skills and services Tweddle provides, we have nonetheless sought to raise Tweddle's profile and public image over the last year. A highlight was a visit by the Hon. Christine Campbell MP Minister for Community Services and we were proud to show her our facility and explain the service provision options.

The staff have presented numerous service evaluations and clinical reviews, seminars and conferences and Tweddle has sought to link with other relevant agencies in collaborative consortia and network, offering our skill and expertise to strengthen local communities and to generally extend the knowledge and understanding of early parenting and family life. We remain an active member of the Victorian Parenting Centre and have taken a lead role in the National Parenting Skill Development partnership.

The Board has also put in motion, steps by which it can measure its own performance and provide maximum support to management in their endeavors and to ensure its governance of Tweddle is of the highest standard.

"FROM A SERVICES

PERSPECTIVE,

THE YEAR CAN

BE DESCRIBED

AS HIGHLY

SUCCESSFUL."

Last year like any year saw Tweddle facing many challenges. Two major challenges in the year under report both relate to funding. In the year 2000-2001 a budget deficit was planned, in order to facilitate the provision of the Parent Assessment and Skill Development Service. The Board deliberately and consciously subsidised this program so that Tweddle could demonstrate its skills and capabilities in this area, but it cannot continue the subsidy.

The other significant funding matter was related to the various issues surrounding the Nurse's Enterprise Bargaining Agreement. Over arching these two specific funding issues is the current historical funding base for Tweddle by the Department, which in the considered view of the Board, significantly and unfairly, disadvantages and discriminates against Tweddle in its endeavours and its service delivery role. All those matters are currently being pursued with the Department.

The Board has striven to its agreed policy of maximising income with minimal risk in the management of its private capital base and our thanks go to Mr Trevor Edwards of D&D Tolhurst for his advice and support throughout the year.

Tweddle has been fortunate for many years to have the wise advice of Mr Val Adami as its Honorary Solicitor. I am delighted to announce the Board has unanimously agreed to confer Life Governorship on Mr Adami in recognition of his contribution.

It is with sincere appreciation I personally, and on behalf of the Board, acknowledge and thank our many donors who have given so generously to Tweddle and the work we do. Thanks are also extended to our primary funding body the Department of Human Services. We look forward to working with it in a constructive way so that our common goal of quality service delivery to as many families as possible is achieved.

My thanks to all the Board of Management Members for their support and continued interest in the governance of Tweddle. I particularly extend my thanks to Mrs Bella Irlicht the retiring Board Member after three years of valuable service.

Finally, I wish to extend the Boards gratitude for the work and commitment of all staff but in particular, Betty Hassold as CEO and Jan O'Connell as Director Nursing Services. Tweddle is committed to confident parenting and the development of committed nurturing families. This is a huge challenge but one which we relish as we seek to improve quality of life for children and families in Victoria.

Rod Jones President

CHIEF EXECUTIVE'S REPORT

It gives me great pleasure to review and report on the year 2000 – 2001. The year has been one of further change and development as community needs, staff and service directions alter. However, all at Tweddle have met the challenges of the year and the achievements have been considerable.

A highlight of the year was the informal visit by the Honourable Christine Campbell, Minister of Community Services. It allowed us to showcase Tweddle's service continuum, highlight the service innovations and talk about Tweddle's future directions. Board; staff and clients appreciated the Minister's visit.

During the year the committed and dedicated Board and staff have worked together as part of a team to ensure that our vision - *Confident Parenting* - becomes a reality. The aim being to assist families to experience and enjoy the warmth and love that make up a positive, close knit family life.

The principles on which Tweddle operate recognise the value and importance of individuals and their ability to grow, develop and change. Translated into service provision these principles have two major outcomes. Firstly, families utilising Tweddle's services participate in and contribute to their care planning and secondly they are the central focus of all service interventions. It is clearly recognised that the service is here to meet and respond to the needs of clients, not the other way round. Feedback from clients is valued and sought on a regular and ongoing basis.

Tweddle's greatest asset is our people, staff growth and development is a major priority. Service excellence is fully achieved and maintained if staff participate in and feel ownership for the directions and operations of the service. The escalating pace of change in the workplace and the demand for a range of flexible service options requires a system of staff support and development. At Tweddle that system is set in place through regular in-servicing, debriefing and professional appraisal.

Emphasis in the past year has been on:

Service Consolidation & Management of Risk – industry demands and staff changes resulted in an internal review and restructure of service and support responsibilities and operations. The establishment of a service support function and separation of the financial from environmental functions will, it is believed, facilitate the achievement of goals in each of these areas.

"THE PRINCIPLES

ON WHICH TWEDDLE

OPERATE RECOGNISE

THE VALUE AND

IMPORTANCE OF

INDIVIDUALS AND

THEIR ABILITY TO

GROW, DEVELOP AND

CHANGE."

Standards, Quality and Accreditation – Tweddle is seeking to create a centre of excellence based on evidence based practice. The aim is to develop a learning culture capable of supporting expertise, growth and diverse disciplines. This will build upon Tweddle 's well established credibility and reputation as a value driven organisation that will attract quality staff to further enhance our status.

As part of that process Tweddle has become a member of the Australian Council of Healthcare Standards with a view to achieving accreditation by December 2001.

Strategic Alliances – Tweddle has focused on building relationships with other organisations in the family support and community care service sector and in the academic and commercial world. An outcome of this strategy is funding of a National Consortium consisting of Tweddle as the lead agency, Ngala Family Resource Centre, Perth, Queen Elizabeth 11 Family Centre, Canberra, Tresillian Family Care Centres, NSW and The Victorian Parenting Centre in the development of a Parenting Skill Development Framework. The aim of the project is to develop a standardised parent assessment and skill development tool to assist professionals and families to identify need and guide the development and acquisition of skills. This tool supports parent learning and practice of competencies. The project has national applicability in that families including those with special needs and at high risk will receive equitable case management from service providers that can be transferred between services, across State boundaries and within different contexts eg support, risk management and within protective service and legislative requirements.

Other collaborations have also been developed with a range of service providers:

- * Day Stay Program with Terang Mortlake Health Service
- * Corrective Services/prison sector
- Universities and research units eg Victoria University of Technology,
 Victorian Parenting Centre, The Key Centre for Women's Health in Society.

A major issue facing the early parenting sector is the lack of a coordinated strategic alliance that has influence in raising issues and setting the agenda for early parenting in Victoria. By strengthening service connections and networks a cohesive early parenting sector will develop and assist the process of raising early parenting issues.





TWEDDLE

CONTINUES TO SEEK

TO EXPAND OUR

INFORMATION

TECHNOLOGY AND

COMMUNICATIONS

SYSTEMS.

- Tweddle has provided a contracted Parent Assessment and Skill Development Service (PASDS) to the Department's High Risk Infant Strategy. 51 families were provided with a PASD Service, 16 of whom received a responsive non residential PASD service in their own homes. This service is responsive to the Department of Human Services' increasing focus towards high-risk families and children.
- Tweddle continues to seek to expand our information technology and telecommunications systems. A planned approach to the development, maintenance and replacement of both hardware and software has been implemented but resources remain a major issue.

I would like to take this opportunity to thank Mr Rod Jones and the Board for their consistent support of and interest in Tweddle. Particular thanks are extended to Mrs Bella Irlicht as she retires from the Board after three years of service. On behalf of the staff I would like to wish Bella and her family all the best for the coming year.

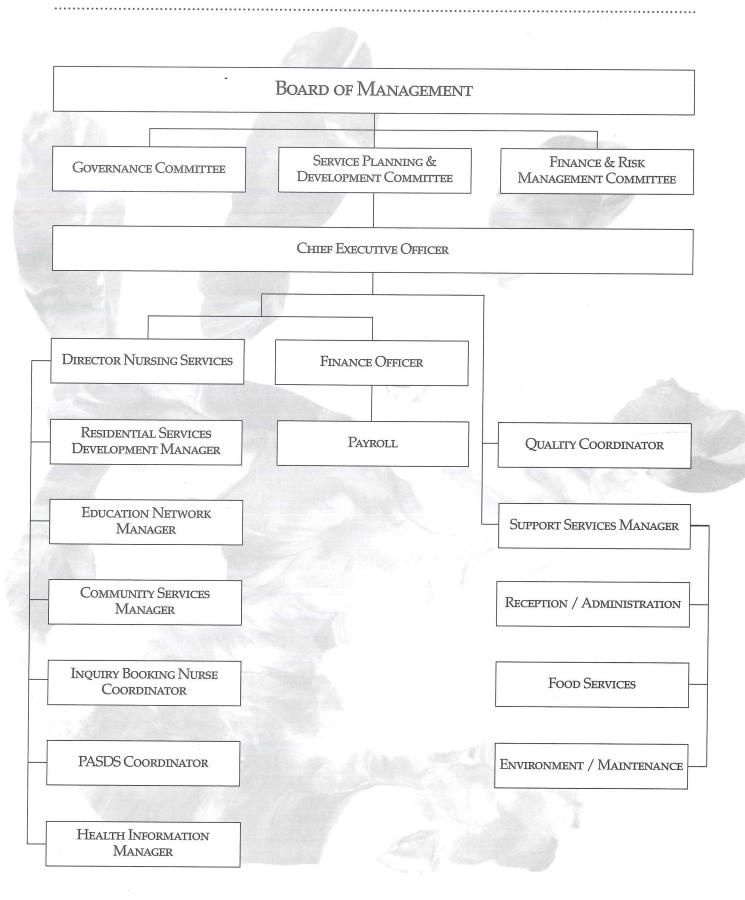
Special thanks must also go to Tweddle's honorary solicitor, Mr Val Adami for his unstinting support of Tweddle. He is always ready to share his legal knowledge and expertise and has always responded promptly to all requests for assistance.

Tweddle's donors are another very special group who deserve our acknowledgment and thanks. Their generosity assists Tweddle to maintain services and to undertake innovative service initiatives.

Finally, I would like to thank all of the dedicated staff who have worked so tirelessly to make Tweddle what it is today. Special acknowledgment must go to Ms Jan O'Connell, Director of Nursing Services for her efforts in developing and implementing new services and service innovations. With such a great team I look forward to the coming year when I am sure we will again meet all the challenges that come our way.

Betty Hassold Chief Executive Officer

Organisational Structure





President

MR RODNEY JONES LLB (MELB)

Rodney Jones is the Managing Partner of local solicitors Secombs. He has been a Board member since 1989 and President for the past two years.

Rodney practices principally in the area of Business Law and is an accredited specialist of the Law Institute of Victoria in this field. He is a past Chairman of the Accreditation Committee and a former member and Deputy Chairman of the Property Law Executive of the Law Institute.

Rodney has lectured and delivered papers on a range of business issues to professional colleagues and students. Of particular interest to him is the way in which Tweddle can make available its skills to as many people as possible through the use of programs other than the traditional residential programs.



VICE PRESIDENT

Ms Hilary Russell BA; B Soc Stud; DIP ED; Grad DIP Man: M Bus Admin Hilary Russell is Vice President of the Board of Management and has been a Board member since 1997. Hilary is also the Board's representative on the Victorian Parenting Centre and most recently was appointed to the Victorian Healthcare Association.

She is Deputy Director of the Division of Research and Education at Melbourne's Royal Women's Hospital and Manager of its Department of Perinatal Medicine.

She has held senior management positions at the Royal Children's Hospital and with the North Western Healthcare Network where she managed the Quality and Statistical Unit at Western Hospital.

"My particular interests as a Board member are in the provision of services to high risk families, in the formation of strategic partnerships and in monitoring performance at all levels of the organisation, including the Board. By measuring how well we perform we will be able to monitor performance over time and know where we need to focus our resources to achieve improvements". She is also keen to develop the organisation's research capability through partnerships with academic institutions. "By reviewing our practice and participating in research Tweddle can lead the early parenting field in fostering a culture of evidence based practice"

TREASURER

Ms Jennie Connolly B Bus (Acct), Grad Dir Ed, M Bus Man Jennie Connolly is Treasurer of Tweddle and has been a member of the Board of Management since 1998. Jennie is also a member of the Ethics Committee for the Northern Healthcare Network.

Her present position is Finance Manager of the Victorian Arts Centre Trust, a position she has held for the past three and a half years.

Her experience in the health sector dates back to 1975 at PANCH where she held the position of Administration Officer responsible for Outpatients and Casualty. After taking some time out to have a family Jennie spent 10 years in the private sector and returned to the health field in 1989 as Finance Manager at Bethlehem Hospital and later Deputy Chief Executive Officer and Acting Chief Executive Officer.

The Bethlehem Hospital experience was followed by three and a half years with Red Cross including nearly three years with the Australian Red Cross followed by ten months working for the International Federation of the Red Cross and Red Crescent Society located in Cambodia being responsible for the Finance and Administration of the IFRC office in Phnom Phen.

MEMBERS

Ms Fiona Benson BA (PR)

Fiona Benson joined the Board of Management in 2000, bringing valuable communication and reputation management skills to the Board.

Fiona has a Bachelor of Arts in Public Relations and is a consultant with Fenton Communications' Melbourne office. Her experience includes management of health, education and cause-related campaigns; as well as development of internal and stakeholder communication programs for Federal, State and Local Government, and corporate organisations.

"My involvement with Tweddle actually began many years ago when I donated some of my toys as a kid! I'm pleased to be able to re-establish that connection as an adult, through my Board membership."

"And as a new mum myself, I'm enjoying the opportunity to observe the benefits of Tweddle from both the inside and outside - allowing me to apply my professional skills to Board decisions in a more meaningful way."







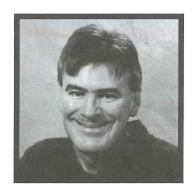
ROBERT BESWICK B Sc

Robert Beswick has been a Board member since 2000. He is the Information Services Manager at the Victorian Arts Centre. Robert graduated from the Australian National University in 1980 with a science degree in computer science.

He worked in the computer industry through the 1980s and the 1990s with the Co-Cam Computer Group, providing services to the insurance, banking, resources and financial industries. As Manager of Mid-Range Systems at Ansett Australia between 1993 and 1997 Robert was responsible for a major restructure of a number of the airline's key systems.

As Information Services Manager at the Victorian Arts Centre Robert is responsible for all aspects of information and communication services. He has developed a number of corporate strategies, including the Centre's online strategy. He is leading the Centre's "Into the Future" project which uses scenario planning techniques to respond to the challenges of future change. Robert represents the Arts Centre on Arts portfolio bodies in the online, IT and multimedia areas, and in work with other Australian performing arts centres in the area of ticketing and customer database futures.

Robert's interests as a Board member are in the area of information and communication services and the organisation's response to the challenges of a changing future. Robert has strong interest in organisational culture, leadership practices and motivation in the workplace.



Mr Ian Broadway B Comm FCPA

lan Broadway has been on the Board of Management since 1989. He is currently Chief Financial Officer for the Victorian Workcover Authority, a position he has held since late 2000.

Prior to this appointment Ian had thirteen years experience in the Victorian Public Health sector during which time he was Finance Director at Williamstown Hospital and Western Hospital, and Chief of Finance at Western Healthcare Network, and succeeding organisations, North West Health and Melbourne Health.

lan's primary objective throughout this period in all of these organisations, including Tweddle has been to ensure that the limited financial resources available are effectively used to maximise the quality and volume of patient and client care able to be provided.

Julie Collette RN, NM; B App Sc; M Bus Admin Julie Collette has been on the Board of Management since 1999. Julie is the Director of Nursing, Mercy Hospital for Women with extensive experience in maternity service and hospital management.

Prior to her appointment at the Mercy, Julie was involved in the amalgamation of St George's Hospital and Box Hill Hospital Maternity Services. This project included the development of a new maternity facility, known as Birralee Maternity Service, that supported a continuity model of care.

Julie is currently a member of the Maternity Services Advisory Committee and a member of the Reference Group for the Neonatal Transport Services Review, both sponsored by the Department of Human Services. Julie has been involved in a number of statewide committees as a midwifery representative.

Julie currently provides leadership to the Nursing Division at the Mercy Hospital for Women and is a member of the Executive who contributes to the strategic and operations management of the Hospital.

MR ADAM FRY DIP SOCIAL SCIENCE

Adam Fry has been a member of the Board of Management since 1998. Adam is a Sergeant in the Victoria Police Force and has been a Police member for 16 years. Adam was promoted to Sergeant in 2000 and is currently stationed at the Williamstown Police Station after 11 years service as a Detective. Adam is the Divisional Family Violence Liaison Officer for the City of Hobsons Bay. During his time as a Detective Adam was a co-founder of the Regional Child Abuse Investigation Unit at Altona North which was attached to the Community Policing Squad. (Now known as the Sexual Offence and Child Abuse unit.)

Adam has viewed and participated in Police and unit operations in Los Angeles, San Diego, Reno Nevada and the Royal Canadian Mounted Police Community Policing Directorate.

Adam is a part time investigator with the Australian Army Special Investigation

Branch, based in Canberra and is soon to be deployed as a member of the United Nations Civilian Police as a Police Observer and Advisor in East Timor.

Adam's particular area of interest is service planning and the development of positive parenting programs and the inception of an outreach service to assist in the prevention of child abuse and neglect.







Ms Jenni Gratton-Vaughan B App Sc OT; Grad Dip Rehab Studies, Grad Dip Management, M Bus

Jenni Gratton-Vaughan has been a Board member since 1999. She is currently Acting Program Manager for Ambulatory Services of the Melbourne Extended Care and Rehabilitation Service, which is part of Melbourne Health.

Her qualifications include a Bachelor of Applied Science (OT), Post Graduate Diplomas in Rehabilitation Studies and Management and a Master of Business.

Jenni's career includes 18 years experience in hospital, community and rehabilitation settings, occupational health and the disability sector, both as a practicing therapist and manager. She has also managed corporate services for a rural water authority, facilitating major organisational structure and systems change following the amalgamation of 5 water boards.

Prior to her current position Jenni was Director of her own consulting business with clients in Victoria and NSW including, the Department of Human Services, rural hospitals and not-for-profit agencies.

Jenni is committed to accountable and innovative management practice and the development of staff to help them achieve individual career goals and corporate objectives.



Dr Nigel Hocking M.B., B.S. (Hons), F.R.A.C.P.

Dr Nigel Hocking is an Honours graduate from Monash University. After 5 years training at the Royal Children's Hospital, Nigel worked at Western General Hospital, the Austin and the Royal Women's. He also spent 3 months working for the Red Cross in the Kampuchean Refugee Camps in Thailand (1979 – 80).

In 1982, Nigel undertook research at the University of Nottingham. Whilst there he completed his specialist training and became a Fellow of the Royal Australian College of Physicians. In 1983, Nigel returned to Australia and commenced practicing as a consultant paediatrician in the western suburbs holding visiting appointments at the Royal Children's Hospital, Western Hospital – Sunshine and Bacchus Marsh.

Nigel has been on the Board since 1983 and is a committed Board member with particular interest in the development of comprehensive child and family health services in the western suburbs of Melbourne.

Ms Bella Iricht M. Ed; Grad Dip Student Welfare; Grad Dip Curriculum; Grad Dip Educational Admin; Cert A Edu; T.Sp.T.C; T.P.T.C Bella was appointed Principal of Port Phillip Specialist School (formally South Melbourne Special Developmental School), in 1989. Since this time she has developed an under-resourced school of 22 students into one of the most successful special schools in Victoria. As a community of students, staff and parents, she linked her vision to the interests of the corporate world gaining sponsorship and partnerships in the development of a Fully Serviced School with Integrated Service Delivery.

She became an Accredited Assessor with the National Association of Secondary School Principals U.S.A. and is a recipient of the Queens Trust Award. In recognition of her leadership Bella was invited to be a participant in the TV series 'Women in Leadership'. She was selected by The University of Melbourne to be a mentor to the Women in Leadership Program, which she led to the UK and USA.

Bella joined the Board of Management in 1998 and her interest, as a Board member has been to support and promote Tweddle's excellent work.

LESLEY YATES B. ED (ECONOMICS), GRAD DIP PR Lesley Yates, appointed in November 2000, is a new appointment to the Board of Management.

Lesley is the Market Development Manager for AGL Electricity and is responsible for business development and growing the infrastructure in the western region of Melbourne.

Lesley has particular interest in the business development of Tweddle services and setting the organisation on a path of sustainable growth. "We can do the right thing by our existing and future clients by looking for ongoing revenue from other sources".

Through her work with a range of public sector organisations and private companies, Lesley believes that we can learn from organisations outside of the health field as examples of how to grow and strengthen Tweddle without losing sight of our core principles. "There are a range of other opportunities that Tweddle can pursue that are consistent with our goals and can lead to better service delivery for our clients".

Her particular interests as a Board member is about ensuring a healthy future. "I'm interested in looking at where we want Tweddle to be in 5 and 10 years. "Our existing client base may have very different needs in the future, anticipating tomorrow's service needs and working to find tomorrow's solutions is an important Board responsibility".



Board of Management Attendance

MEETINGS ATTENDED

***************************************	***************************************
Rodney Jones (P)	9 of 10
Hilary Russell (VP)	8 of 10
Jennie Connolly (T)	7 of 10
Fiona Benson	8 of 9
Robert Beswick	8 of 10
Ian Broadway	5 of 10
Julie Collete	7 of 10
Adam Fry	5 of 10
Jenni Gratton-Vaughan	8 of 10
Nigel Hocking	5 of 7
Bella Iricht	5 of 10
Lesley Yates	7 of 10



EXECUTIVE & STAFF TEAMS



EXECUTIVE STAFF TEAM

CHIEF EXECUTIVE OFFICER
Ms Betty L Hassold
RN, RM, Grad Dip CHN & M&CHN,
Grad Dip Ed, BA, FRCNA

DIRECTOR, NURSING SERVICES
Ms Jan O'Connell
RN, RM, Grad Dip CHN & M&CH
Grad Dip Business

Business Manager (Resigned)
Mr Kurt Maybus
B Bus (Acct), Cert of Tech Electronics

FINANCE OFFICER (ACTING)

Ms Karen Haigh

Dip Bus – Accounting, Grad Dip Ed

"I would like to

THANK ALL OF THE

DEDICATED STAFF

WHO HAVE WORKED

SO TIRELESSLY TO

MAKE TWEDDLE

WHAT IT IS TODAY."

BETTY HASSOLD
CHIEF EXECUTIVE OFFICER

STAFF TEAM

CHIEF EXECUTIVE OFFICER
Ms Betty Hassold

DIRECTOR NURSING SERVICES Ms Jan O'Connell

Business Manager Mr Kurt Maybus – resigned

FINANCE OFFICER

Ms Karen Haigh – acting

Residential Services
Development Manager
Ms Lisa Foord – resigned

COMMUNITY SERVICES MANAGER
Ms Le Anne Williams

DAY STAY PROGRAM
CO-ORDINATORS
Tracy Brown - DSP Maribyrnong resigned
Ms Robyn Goodman - Djerriwarrh,
Maribyrnong
Ms Marjorie Raetz - Hume,
Williamstown - resigned
Ms Karen Clark - Wyndham

Inquiry Booking Nurse Co-ordinator Mrs Marie McHugh

Health Information Manager Ms Mabel Chao

EDUCATION NETWORK MANAGER Ms Rosey Cummings

EDUCATION TEAM

Ms Karen Clark

Ms Sue Turner

Ms Le Anne Williams

Ms Gina Ralston

Mr Jonny Isaacson – resigned

SUPPORT SERVICES MANAGER Ms Mary Theodorou

CONTINUOUS QUALITY
IMPROVEMENT OFFICER CONTRACT POSITION
Ms Irene Nicodemou

Administration

Mrs Pauline Ford

Ms Mary O'Brien – resigned

Ms Kathy Spry - resigned

Ms Milinda Steve

House Staff Ms Milinda Steve Mrs Irene Tsiflidis Mrs Lorraine Young Mrs Vera Milenkovic

REGISTERED NURSES
Mrs Marie Bradley

Ms Isabel Carbines
Ms Anne Carey - resigned
Ms Leonie Cartan
Mrs Linda Chilcott - resigned
Ms Sue Cross - resigned
Ms Marilyn Harnett
Ms Karen Houghton - maternity
leave
Ms Jo McAllister - resigned
Mrs Veena Rowe
Ms Hazel Speirs
Mrs Pam Wilson

MotherCraft Nurses

Ms Marion Wright

Miss Karen Clark
Ms Natalie Dobson
Mrs Lesley Henwood
Mr Jonny Isaacson - resigned
Ms Elizabeth Kinnane - resigned
Mrs Laura Kelly
Ms Prue Litchfield
Mrs Margaret Lynch
Mrs Julie Ryan – resigned
Ms Kris Saldukas
Ms Kathy Sorensen
Ms Heather Treloar

Ms Katrina Clement – maternity leave Mrs Leonie Welshe Ms Sue Turner

TABLE B: Workforce Data - as at 30th June 2001

	2000	2000	2001	2001
	People*	EFT**	People*	EFT**
Management	10	6.00	11	5.85
Nursing	31	17.70	28	20.43
Administration	5	1.25	3	2.04
Domestic Services	4	1.52	3	1.71
TOTAL	50	26.47	45	30.03

^{*} Represents Actual People Employed



^{**} Represents Effective Full Time (EFT) Positions

Sub Committees

TWEDDLE'S BOARD OF MANAGEMENT HAS THREE SUB-COMMITTEES:

THE GOVERNANCE COMMITTEE

Reviews the governance function and effectiveness of individual Board Members and the Board as a whole. It also advises the Board on changes and developments to governance and remuneration policies and practices.

Members

ADVISORY

Mr Rodney Jones (Chair)

Ms Betty Hassold

Ms Hilary Russell

Ms Jenni Gratton-Vaughan

THE SERVICE PLANNING AND DEVELOPMENT COMMITTEE Monitors and makes recommendations to the Board on matters relating to service development, quality assurance and monitors risks as they relate to service quality.

Members

Advisory

Ms Hilary Russell (Chair)

Ms Jan O'Connell (secretary)

Ms Fiona Benson

Ms Betty Hassold

Ms Julie Collette Mr Adam Fry

THE FINANCE AND RISK MANAGEMENT COMMITTEE

Monitors and makes recommendations to the Board on the financial operations of the service, risks to the viability of the organisation and risk management compliance with established laws, policies and regulations.

Members

Advisory

Ms Jennie Connolly (Chair)

Ms Karen Haigh (secretary)

Mr Ian Broadway

Ms Betty Hassold

Mr Rodney Jones

Ms Jan O'Connell

Mr Lesley Yates

STATUTORY AND FINANCE REPORTS

Incorporation

Tweddle is a Schedule 1 Public Hospital incorporated under the Health Services Act 1988.

ACCOUNTABILITY

Tweddle is accountable to the Honourable Christine Campbell, MLA, Minister of Community Services, through the Department of Human Services.

BUILDINGS AND MAINTENANCE COMPLIANCE

The buildings and infrastructure have been maintained at an appropriate level. As a result of a Fire Safety Audit conducted by the Department of Human Services, Tweddle has successfully installed a Fire Sprinkler System in the Residential Unit.

Consultancies

The total expenditure for consultancies in 2000/2001 was \$4,500.

EOUAL OPPORTUNITY

Tweddle is an Equal Employment Opportunity employer and continues to work toward the full application of public sector employment and conduct principles in the work place.

FREEDOM OF INFORMATION

During the past year 12 requests have been received under the Freedom of Information (FOI) Act 1982.

LIFE GOVERNORS

- * Miss E M Angliss, MBE * Mr A J Mangan
- * Mrs W Clark * Ms D McGregor
- * Mrs J Mercer
 - * Mrs A Downe
- * Ms L Glanville
- * Mrs W Stephens
- * Mrs G Redman
- * Mr G Jasper
- * Miss I Brennan
- * Mrs M Maskell
- * Ms P. Digby
- * Mrs J Price
- * Mr K Hambly
- * Miss Stevenson

* Mrs A Lock

MINISTERIAL DIRECTIONS

The information listed in the Directions of the Minister for Finance Part 9.1.3(v) is available upon request.

National Competition Policy Compliance Statement

Tweddle continues to work towards the implementation of the Commonwealth Government's National Competition Policy and the Victorian Government's Competitive Neutrality Policy.

STATUTORY DISCLOSURE

No employee is required to complete a declaration of pecuniary interests. Board of Management members are required to disclose any pecuniary or other interests in any matter under consideration by the Board.

LEGISLATIVE CHANGES 2000-2001

The following Acts and Regulations were changed in 2000 – 2001:

Acts

Building (Legionella) Act 2000
Essential Services Legislation (Dispute Resolution) Act 2000
Health (Amendment) Act 2001
Health Records Act 2001
Health Services (Amendment) Act 2001
Health Services (Health Purchasing Victoria) Act 2001
Information Privacy Act 2000
Nurses (Amendment) Act 2000
Superannuation Acts (Beneficiary Choice) Act 2000
Victorian Managed Insurance Authority (Amendment) Act 2001

REGULATIONS

Accident Compensation (Amendment) Regulations 2000 Accident Compensation Regulations 2001 Building (Cooling Tower Systems Register) Regulations 2001 Building (Legionella Risk Management) Regulations 2001 Dangerous Goods (Storage and Handling) Regulations 2000 Drugs, Poisons and Controlled Substances (Drugs of Dependence) Regulations 2000 Health (Infectious Diseases) Regulations 2001 Health (Legionella) Regulations 2001 Health (Prescribed Consultative Councils) (Amendment) Regulations 2000 Health (Prescribed Accommodation) Regulations 2001 Health Services (Community Health Centre Elections) Regulations 2001 Mental Health (Amendment) Regulations 2001 Occupational Health and Safety (Plant) (Amendment) Regulations 2001 Pathology Services Accreditation (General) Regulations 2001 Pathology Services (Exempted Tests) Regulations 2001 Pharmacists (Fees) Regulations 2000

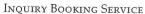
Psychologists Registration Regulations 2001

OPERATIONAL REPORTS & ANNUAL STATISTICS

PARENTING SERVICES

Tweddle offers Victorian families with children 0-4 years of age specialist parenting services to support them during this very important time of their life. Parenting brings many joys as well as challenges that can, at times, be quite stressful, confusing and tiring. Our experienced and supportive staff assist families to understand and learn more about their young child's development and behaviours as well as develop new skills, knowledge, confidence and competence in their approach to parenting. Our staff understands the importance of tailoring interventions to suit each family's needs.

During the 2000 – 2001 year, 3,598 families attended one of Tweddle's programs. The range of services Tweddle offers enable parents to select the service that suits the level of support that is most appropriate for them. The most common reasons for which parents seek specialist parenting services include disruptions in infant and young children's sleep and settling patterns, breast or formula feeding and eating concerns, challenging toddler behaviours and post natal depression, anxiety and tiredness.



The high demand for our services continues to create waiting lists for each of our programs. A review of the booking system has enabled a quicker response to the many parents who contact us requesting admission for support and assistance. The booking nurses talk with each parent about their particular concerns and together they select the service that will, through education and support, assist them. The length of time families wait for admission remains a concern as demand continues to exceed our capacity.

TABLE C: CLIENT COORDINATION SERVICES - AVERAGE WAITING TIMES

T T	1999/2000	2000/2001	Variance
Residential Program	10 weeks	10 weeks	0
Hume Day Stay Program	3.3 weeks	3.5 weeks	+0.2
Maribyrnong Day Stay Program	8 weeks	7 weeks	-1
Wyndham Day Stay Program	4 weeks	3.5 weeks	-0.5

TABLE D: CLIENT COORDINATION SERVICES - NUMBER OF TELEPHONE CALLS

				1
	1998/99	1999/00	200/01	Variance
New & Waiting List Contacts	11,616	10,836	8,493	-2,343
Bookings	4,224	4,204	2,593*	-1,611
Information Calls	N/A	384	2,562	+2,178
Interpreter Calls	N/A	36	36	0
TOTAL	15,840	15,460	13,686	-1,774
Average Calls per Day	66	60	40	-20

Note: Revised recording system commenced 2000/2001



THE HIGH DEMAND

FOR OUR SERVICES

CONTINUES TO

CREATE WAITING

LISTS FOR EACH OF

OUR PROGRAMS.

^{*} Booking process reviewed and modified, achieving an effective streamlined booking process.



THE AIM IS TO

STRENGTHEN FAMILY

FUNCTIONING TO

ENSURE SAFE,

EFFECTIVE CHILD

REARING PRACTICES.

TABLE E: RESIDENTIAL SERVICES - ADMITTED CLIENTS

	1998/99	1999/00	2000/01	Variance
Beds available each day of operation	24	24	24 (Mon-Sat)	
320		Q.F.	8 (Sun)	
Clients admitted	2, 627	2,910	2749	-161
Families admitted	n/a	1072	1000	-72
Clients admitted for one day	122	416	250	-166
Average length of stay	2.6 days	2.5 days	2.6 days	+0.1days
Total client bed days	6,928	7395	7317	-78
% Occupancy	99.1%	101.4%	99.8%	-1.6%

- * 1998/99 Bed Closures: Sundays x 52; Xmas & NY x15; in-service days x 2; public holidays x 5 = 74 days closed or 291 days of operation in 1998/99.
- * 1999/00 Bed Closures: Sundays x 44; Xmas & NY x 9; inservice days x 2; public holidays x 6 = 61 days closed or 304 days of operations in 99/00.
- * 2000/01 Bed Closures: Weekends x 9; Xmas & NY x11; in-service days x4; public holidays x 4 = 28 days closed or 337 days of operations in 00/01

RESIDENTIAL SERVICES

Tweddle offers a 1, 2 or 4 night stay depending on the complexity of the issues parents are experiencing. Emphasis is on parents active participation throughout their program. Parents identify the specific goals they wish to achieve during their stay and the family's care plan is designed to ensure that the strategies implemented are appropriate and flexible to suit individual preferences. The aim is to strengthen family functioning to ensure safe, effective child rearing practices. Parents work towards achieving their goals through one-to-one consultation with staff, group education sessions, modeling of new parenting techniques, self directed learning and supported practice of these skills.

Many families admitted to Tweddle's Residential Service are experiencing complex social and emotional issues that add further stress to parenting. Issues include family discord, mental health concerns, complex family relationships or the many demands experienced by families with young children through the increasing pressures of today's society. Tweddle staff work closely with community health providers and groups to promote continuity of care and ease of access for families. On discharge from Tweddle services, families are linked into relevant supports as required. These include the maternal and child health service, counseling services, maternity hospitals, general practitioners, family support services, mother/baby units, community health centres, locally based family and children services and support groups.

Comments from parents:

I've never met a group of staff more willing to talk, educate, reassure, reassure again, and give as much time as possible; I felt that I wanted to soak up as much information as possible. Thankyou so much!

- Thankyou just doesn't seem appropriate. I never believed that our lives could be so different and our son, so content and it has only been one and a half weeks since our stay at Tweddle. You have freed us from a sleep-deprived, angst existence and reintroduced us as a new and exciting family.
- We have successfully mastered her sleep; tackled the issue of her eczema flaring during the nights; dropped the excessive bottle feeding; stopped overmedicating her; worked on her difficult eating issues; found time to rest, tell stories, laugh and have time for "pillow talk". What an amazing four days!!!

Day Stay Program

Tweddle's Day Stay Programs continue to be very popular bringing effective outcomes for the families who attend. Day Stay Programs operate 3 days a week from the Footscray site and 1 day per week in Wyndham. The spread of days that Day Stay is available during week days and Saturday offer choices for parents to attend at a time that suit their home and work commitments and make it possible for partners to participate.

Tweddle continues its successful collaboration with other health services in providing Day Stay Programs to families in their local community. Strong partnerships continue with the Hume City Council and Djerriwarrh Health Services. These programs promote easier access for families and support a close link with other services they attend.

The Early Parenting Day Stay Program Tweddle established in partnership with The Williamstown Hospital during 2000 has enjoyed a very high level of community acceptance and support. As a result of this exceptional success, the program has expanded its services during the year from 2 to 3 days per fortnight. Ongoing funding has been committed by The Williamstown Hospital for the partnership to continue for a further 2 years.

In meeting our statewide role, Tweddle has a strong commitment to working collaboratively with other health services to promote easier access for families to early parenting programs. An important benefit of these partnerships is the sharing of our expertise with other health providers. This equips them to transfer knowledge to the parents they work with and minimise the development of parenting problems to more complex situations.

In April 2001, Tweddle's latest collaborative venture commenced in conjunction with Terang and Mortlake Health Service. A Day Stay Program is provided in Terang for families in the surrounding district. This service is demonstrating the need for such services in rural areas by the already high demand by local families.

Feedback from parents who attend all Tweddle Day Stay Programs continues to reflect a high level of satisfaction and positive outcomes.

The success of each of our services is attributable to the excellent calibre of our staff who consistently demonstrate a high standard of commitment and quality responsive care for families and their children.



TWEDDLE

CONTINUES ITS

SUCCESSFUL

COLLABORATION

WITH OTHER

HEALTH SERVICES

IN PROVIDING DAY

STAY PROGRAMS

TO FAMILIES IN

THEIR LOCAL

COMMUNITY.

Table F: Day Stay Programs - Admitted Non - Admitted Clients

Tweddle Funded	Programs			
	Admitted	Non-Ad	dmitted	Total
	Clients	Cli	ents	
	Maribyrnong	Wyndham	Maribyrnong	
1998/1999		0		
Individuals	0	414	598	1012
Families	0	180	260	440
1999/2000				
Individuals	379	358	0*	737
Families	164	155	0*	319
2000/2001				
Individuals	821	339	0*	1160
Families	339	152	0*	491
Variance				
Individuals	+442	-19	0	+423
Families	+175	-3	0	+172

^{*} The Maribyrnong Day Stay commenced to register clients as admitted rather than non-admitted in 1999/2000

TABLE G: COLLABORATIVE DAY STAY PROGRAMS

	Hume	Djerriwarrh	W'town	Terang/	TOTAL
		Tweddle*	Hospital Tweddle**	Mortlake ***	
1999/2000		Ų			
Individuals	408	298	118		824
Families	176	123	52		351
2000/2001					
Individuals	330.	340	467	60	1197
Families	141	134	206	26	507
Variance					
Individuals	-78	+42	+349	+60	+373
Families	-35	+11	+154	+26	+156

^{*} Djerriwarrh - Commenced operations in May 2000

TABLE H: TOTAL DAY STAY CLIENTS - ADMITTED, NON ADMITTED AND

	1998/1999	1999/2000	2000/2001	Variance
Individuals	1,616	1,710	2357	+647
Families	705	737	998	+261

^{**} Williamstown - Commenced operations in February 2000.

^{***} Terang/Mortlake - Commenced operations in April 2001

PARENTING ASSESSMENT AND SKILL DEVELOPMENT SERVICE (PASDS) In the past year Tweddle has continued the expanded 7-day service to provide a 10-day residential PASD service for mandated clients referred by the Department of Human Services Protective Services. This year 35 families were admitted.

This intensive parenting program enables a comprehensive assessment of parenting skills and knowledge and their ability to implement and sustain the practice of newly learnt skills. Staff work closely with families to build on existing competencies and develop further skills. The program aims to teach and support parents to provide protective and nurturing care for their children with increased confidence and competence. Parents implement the new skills and knowledge guided and supported by staff.

In order to work together productively and effectively, the nursing staff build rapport and a trusting relationship with families, many of whom do not access other services. This is important to enable learning and the integration of new skills and knowledge acquisition.

It is positive to see the progress of many of the families as they demonstrate that they can provide "good enough" safe, protective and nurturing parenting for their child over the 10-day program. In some instances, however, families are not able to sustain the level of parenting practices required to meet their child's global developmental needs. Then services, where possible, are engaged to facilitate smooth access from the program to identified community supports.

Day PASDS

Tweddle also provides an innovative medium-intensity combination day-stay and home-based Parenting Assessment and Skill Development Service. This addresses an identified gap in the support and education of parents referred by the Department of Human Services Protective Services. It assists them to learn and apply competent parenting practices in their home environment.

This service provides a flexible approach that addresses the learning needs of the parent whilst meeting the program's aims, the desired outcomes of the parent and the Department of Human Services Protective Services.

The PASDS programs have been coordinated by Ms Hazel Speirs, one of our most experienced and skilled maternal and child health nurses who also has a social work background. Her ability to engage with families, support staff and work collaboratively with a wide range of workers to link families into appropriate services has been invaluable to the success of these programs.



Tweddle Education Network

The Tweddle Education Network continues to expand providing innovative, and responsive programs for parents and professionals. The model acknowledges the need for parents and professionals to have access to high quality early parenting information which is evidence based and supported by clinical practice experience.

The Education Network offers a wide range of learning opportunities which aim to assist parents to feel more informed, confident and competent with their parenting and enhance the clinical practice of health professionals. All programs are presented within the context of the social model of health which acknowledges and respects adult learning principles.

SEMINARS ARE

CONDUCTED FROM

TWEDDLE, BALWYN

AND SANDRINGHAM

TO PROMOTE EASIER

ACCESS FOR

FAMILIES IN THEIR

LOCAL COMMUNITY.

The feedback, received from both parents and professionals, is testimony to the skill, enthusiasm and dedication with which the education team educators conduct their work. Achievements in 2000/2001 include:

PARENT EDUCATION SEMINARS

A well recognised calendar is printed and distributed annually across Victoria to health professionals and parents. The content and nature of the topics are developed in response to parent request.

Seminars are conducted from Tweddle, Balwyn and Sandringham to promote easier access for families in their local community. Tweddle acknowledges the Bayside Maternal and Child Health Service who identified the benefits of these seminars for their parents. They have supported the Sandringham seminars by providing a venue each month and encouraging interested parents to attend.

TABLE I: SEMINAR PARTICIPANT ATTENDANCES

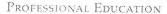
·				
	1998/99	1999/00	2000/01	Variance
Parent Seminars at Tweddle	1572	1,374	1222	-152
External Parent Seminars	-	705	673	-32
School Focused Youth Services	-	-	635	+635
TOTAL Community Attendances	1572	2079	2530	+451
Professionals Seminars at Tweddle	342	60	114	+54
External Professional Seminars*	-	217	1114	+897
TOTAL Professional Attendances	342	277	1228	+1001
TOTAL Participant Attendances	1,914	2,356	3758	+1402

^{*} Includes conferences/ forums

COMMENTS FROM PARENTS

- 🎒 "The seminars are a great idea. I'm glad I came."
- The seminar was excellent. I have attended a number and they have all been great. I like the way they are practical, down to earth and fun!"

- "A very enjoyable, informative session, great presentation with worthwhile information."
- "Great to hear we are not the only ones with this problem."
- "I feel like I am able to go away and solve this problem now"
- "You have made me realise that I'm doing an OK job and I am not a bad parent! – I was beginning to wonder!"
- "Thanks for travelling to the country. I felt I had no one to talk to about this."



Tweddle's flexible education program acknowledges the diverse education needs of professionals who work with families to support and build upon their practical skills and knowledge. An extensive consultation process identified the issues and topics requested by health professionals. The range of education opportunities includes:

MONTHLY FORUMS

Monthly forums on a range of stimulating challenging topics. These interactive and practical forums are designed to provide the latest information to support professionals in their practice.

FORUMS WITH VICTORIA UNIVERSITY, SCHOOL OF NURSING

Over the past year Tweddle, in partnership with Victoria University, has conducted three forums on current issues faced by health professionals. The aim is to present new evidence based information which the participants can integrate into practice.

PRECEPTOR PROGRAM

This intensive education service for both rural and metropolitan health professionals ensures that learning is tailored to specific goals as participants spend time working with Tweddle nurses in either a day stay or residential setting.

CUSTOMISED EDUCATION SEMINARS

These seminars, adapted to match specific needs, on a broad range of early parenting topics, are provided statewide and interstate. They have been provided in Stonnington, Moreland, Kiabram, Cohuna, Boort, Daylesford, the Freemason's Hospital and the Royal Women's Hospital.

EDUCATION RESOURCES

The very popular "Sleep Right, Sleep Tight" – Train the Trainer Kit" was produced to support health professionals to conduct a settling and sleep seminar for parents in their community.

The book, "Sleep Right Sleep Tight, A practical proven guide to solving your baby's sleep problems" is now published by Random House Publishing. Sales continue to be consistently high. Many parents and professionals contact Tweddle saying the book has helped them to manage the problems they were having.

"The Beginners Guide to Breastfeeding" is a video that provides educational information for mothers prior to and as they begin breastfeeding.





TABLE J: SEMINARS CONDUCTED

	1998/99	1999/00	2000/01	Variance
Seminars for Parents	58	95	118	+23
Seminars for Professionals	19	22	26	+4
Total Seminars Held	77	117	144	+27

SPECIAL PROJECTS

This year Tweddle has continued to demonstrate commitment to and achievement in leadership in the field of early parenting through the breadth of new projects and initiatives undertaken. Our commitment to evaluation enables us to learn more about parenting and parents needs and to continually improve the effectiveness of our services.

During 2000, Tweddle undertook an audit of families with a child up to the age of 1 year who were admitted to residential and day stay services over a three month period to explore the inter-related nature of breastfeeding and sleep disturbances. The results of this audit were presented at two Conferences – one in Victoria and the second in NSW. Analysis of the data enabled us to incorporate findings and recommendations into practice to better support breastfeeding mothers with young babies who are experiencing settling and sleeping difficulties.

Other Special Projects have included: Settling and Sleep seminars for Vietnamese parents, African Mothers Nutrition and Parenting Program, and a series of groups about early Parenting issues in conjunction with the Red Cross Asylum Seekers Program for East Timorese parents.

Another exciting project, funded by the Forest Hill Foundation has been to work with mothers who are completing custodial sentences at the Dame Phyllis Frost Centre at Deer Park. A group of six women attended four groups on information related to infant development, behaviour and play. Feedback from the women was very positive. This project will continue in the coming year.

RESEARCH

Sleep Problems in Infancy: Evaluation of an Intervention Strategy. This research, funded by the William Buckland Foundation, is being conducted jointly with the Victorian Parenting Centre. The research aim is to determine the efficacy of parents attending a 2 hour settling and sleep seminar in terms of their ability to implement and sustain change in their young child's sleeping patterns. The recruitment phase is now complete. It is anticipated findings will be published during 2001/2.

During the year Tweddle became the lead agency in a National Consortium of Early Parenting Services to develop a parent assessment and skill development tool. The project has been funded by the Federal Department of Family and Community Services and will take two years to complete.

Tweddle is also working with the Key Centre for Women's Health in Society to undertake a research project that will assist in establishing an evidence base for early parenting interventions.

CONTINUOUS QUALITY IMPROVEMENT

Whilst Continuous Quality Improvement (CQI) is embedded in Tweddle's every day practice and is the responsibility of all staff Tweddle recognises the importance of accreditation as a means of providing an assurance to our clients and other key stakeholders of the quality of our services.

Tweddle has recently joined the Australian Council on Healthcare Standards (ACHS) and is due for its first Organisation-wide Survey in December 2001. Through ACHS accreditation we endeavor to demonstrate to our clients an assurance of our commitment to providing high quality and responsive early parenting services. Through the support and direction of our Quality Coordinator Tweddle successfully completed the self-assessment phase and we are now preparing for our Survey.

During the past year Tweddle continued to demonstrate its commitment to CQI through a range of activities including CQI plans, program reviews, client evaluation, feedback and follow up to name only a few. The increasing need to measure the quality of care has drawn Tweddle's attention to the development of relevant and useful indicators for all organisational functions that are integral in supporting the provision of client care.

HIGHLIGHTS OF THE YEAR

- Quality Coordinator was appointed in August 2000.
- Processes and systems were reviewed and redeveloped to support and sustain CQI in the long term.
- Tweddle's CQI Framework was updated.
- Performance indicators covering all organisational functions were developed.
- Self-assessment phase for the Survey was completed.

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Table K: Client Coordination Services - Bookings for Services

Program Area	Bookings per week/month - Families				
	1999/2000	2000/2001	Variance		
Residential Programs					
1,2,& 4 Night Programs	23 p/week	22 p/week	-1		
Day Stay Programs					
Maribyrnong	32 p/month	32 p/month	0		
Hume	16 p/month	16 p/month	0		
Wyndham	16 p/month	16 p/month	0		

TABLE L: COMPARATIVE RESIDENTIAL CLIENT COSTS

	1997/98	1998/99 \$	1999/00	2000/01
	\$	\$	\$	\$
Total				
Inpatient Costs	1,466,789	1,436,069	1,571,508	1,949,298
Average				
Cost per Client	565	547	540	709
Cost per				
Client Day	207	207	202	266
Patient Fees	48,007	1,921	896	0
Government				
Grants	1,368,366	1,460,624	1,502,810	1,566,621
Other Revenue	5,978	19,802	15,306	15,879

Table M: Comparative Financial Results

	1997/98	1998/1999	1999/2000	2000/2001
4	\$000	\$000	\$000	\$000
Total Expenses	1,719	1,859	1,985	2,602
Total Revenue	1,662	1,987	2,001	2405
Operating Surplus /(Deficit)	(57)	128	16	(197)
Retained Earnings				
(Accumulated Deficit)	2,283	3,711	3,727	3,531
Total Assets	3,618	5,876	5,750	5,707
Total Liabilities	358	338	355	509
Net Assets	3,259	5,538	5,395	5,198
Total Equity	3,259	5,538	5,395	5,198

HEALTH INFORMATION MANAGEMENT

Health Information Management is a complex task in public hospitals. In the past year the aim has been to rationalise the health information reporting responsibilities, both internally and externally, within the role of the Health Information Manager.

As a consequence, responsibility of patient reporting, statistic reporting and Freedom of Information requests have been assigned to the Health Information Manager. Diagnosis coding responsibilities have consequently been transferred to the nursing staff, in order to facilitate the performance of the Health Information Manager function.

A major achievement in 2000/2001 was the tendering and acceptance of the off site medical record storage. In the coming year the Health Information Management will be a major focus of Tweddle's CQI program.

SUPPORT SERVICES

Fenton Communications

The Support Services Manager position was created this year to better manage the internal support services workload of the organisation. This position is now responsible for all non-clinical staff, which includes administration, food services, domestic services and environmental services and also for the upkeep and maintenance of Tweddle's facilities and infrastructure. All staff involved in these services, have continued to provide an excellent standard of service to our clients as well as to all staff throughout the year.

As part of our maintenance/upgrade program the residential accommodation building has now been successfully fitted out with an internal sprinkler system.

		TO DELLES METALLES
Donations - For year ended 30.6.01	TOTAL \$37,040	
Jean Littlewood Combined Charities	\$1000	THE INTERNAL
Joe White Bequest	\$1000	
Royal Victorian Bowls Association	\$1000	
Sue Gentry	\$20	SUPPORT SERVICES
Huntsman Chemical Company	\$15	JOH ORI JURVICES
WMK & JW Stephens	\$100	
Estate of the Late Joseph Thornton	\$476	1
B Drayton	\$200	WORKLOAD OF THE
The William Angliss (Vic) Charitable Fund	\$10,000	
P Norton	\$20	
Footscray St John Lodge No 71	\$50	ORGANISATION.
Infant Massage Institute	\$700	
Estate of George F. Green	\$11,512	
Miss Margaret L. Herring	\$50	
Trust Company of Australia	\$372	
Ken Davies & Co	\$10,000	
Ashley Tonkin Hill	\$10	
Karl Kempe	\$15	

\$500

THE SUPPORT

POSITION WAS

SERVICES MANAGER

CREATED THIS YEAR

TO BETTER MANAGE

Annual Financial Statements

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Annual Financial Statements 2000 - 2001

CERTIFICATION

In our opinion the Report of Operations and the Financial Statements of the Tweddle Child and Family Health Service comprising a Statement of Financial Performance, Statement of Financial Position, Statement of Cash Flows and Notes to the Financial Statements have been prepared in accordance with the provisions of the Financial Management Act 1994 and the Directions of the Minister for Finance - Part 9 Reporting Provisions.

In our opinion the Financial Statements present fairly the financial transactions for the year ended 30 June 2001 and the financial position as at that date of the Tweddle Child & Family Health Service

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

VICE-PRESIDENT

Ms H Russell

BOADD MEMBER PREASURER

Ms J.Connolly

B. R. Kerasyld CHIEF EXECUTIVE OFFICER

Ms B. Hassold

Karen in Harg

Ms K. Haigh

Dated the 20th Day of September 2001 (Melbourne)

GHTY FIRST

Treasurer's Report

Tweddle has been financially challenged during the 2000-2001 year as a result of changes to the Nurses Award and the funding associated with the PASDS program. Funding arrangements with the State Government in relation to full reimbursement of the flow-on effects of the award changes remain unclear and have had a significant effect in contributing to the year end deficit. In addition, the PASDS inpatient program has been operating at a deficit and negotiations on the continuation of the program are still being held with the funding agencies.

Partly as a result of the factors outlined, Tweddle Child and Family Health Service concluded the 2000-2001 financial year with a \$189,328 deficit, which is a marked deterioration from the small surplus of \$15,770 achieved in the previous financial year. The Board of Tweddle hope that these issues can be resolved in the near future so that the financial impact on Tweddle services will not be compromised. The income from Services Supported by Health Services Agreement increased \$125,851 over the previous year, however there was an increase of \$382,116 in expenditure to support these services.

Despite these challenges, the Board has approved expansion of Day Stay programs in the Western District areas and we look to further expansion of these services in the future to strengthen networks and parenting skills across the community.

During the year the Board approved funding for a staff member to co-ordinate Accreditation activities and the Accreditation Survey is expected to take place in December 2001.

Tweddle Child and Family Health Service has once again been fortunate in supplementing the income from Services Supported by Health Services Agreements with other income including investments. The investments continue to be managed by D & T Tolhurst with guidance to the Finance and Risk Management Committee on appropriate investments for our funds.

Jennie Connolly Treasurer

Revenue and Expense Statement

	Note	Total 2000/01 \$	Total 1999/00 \$	STATEMENT OF
Revenue from Ordinary Activitie	2,2A	2,405,411	2,186,994	FINANCIAL
Expenses from Ordinary Activities	2b			
Employee Entitlements		1,833,454	1,462,722	Performance for
Depreciation	3	108,508	106,827	
Other Expenses		660,556	601,675	the Year Ending
		2,602,518	2,171,224	
Surplus/ (Deficit) for the Year		(197,107)	15,770	30 June 2001
Total changes in equity other than those resulting from changes in contributed capital	ĺ	(197,107)	15,770	

This statement should be read in conjunction with the accompanying notes.

Balance Sheet as at 30 June 2001

STATEMENT OF		Note	Total 2000/01 \$	Total 1999/00 \$
FINANCIAL	Assets			
	Current Assets			
Position as at	Cash Assets	7,8	307,896	148,912
	Receivables	9,8	57,057	114,281
· ·	Other Financial Assets	10,8	1,081,862	1,106,009
30 June 2001	Inventory	11	9,801	3,503
	Total Current Assets		1,456,616	1,372,705
	Non Current Assets			
	Property, Plant & Equipment	12	3,194,790	3,259,808
	Other Financial Assets	10	1,055,700	1,118,030
	Total Non-Current Assets		4,250,490	4,377,838
	Total Assets		5,707,106	5,750,543
	Liabilities			
	Current Liabilities			
	Payables	13,8	105,434	10,802
	Employee Entitlements	14	198,911	173,410
	Total Current Liabilities		304,345	184,212
	Non-Current Liabilities			
	Employee Entitlements	14	204,698	1 <i>7</i> 1,161
	Total Non-Current Liabilities		204,698	171,161
	Total Liabilities		509,043	355,373
	NET ASSETS		5,198,063	5,395,170
	Equity			
	Reserves	5,6	1,667,488	1,667,488
	Retained Surplus	4	3,530,575	3,727,682
	TOTAL EQUITY	. 15	5,198,063	5,395,170
	• > 5	500	and the second section is	

This statement should be read in conjunction with the accompanying notes.

Cashflow

	Note	Total 2000/01 Inflows/ (Outflows) \$	Total 1999/00 Inflows/ (Outflows) \$	STATEMENT OF CASH FLOWS FOR
Cash Flows from Operating Activities				ym,
Receipts				THE REPORTING
Government Grants		1,898,766	1,606,359	
Patient Fees		0	896	Period Ending
Interest Received		75,486	56,698	I ENIOD LINDING
Other	35	136,679	165,068	
				30 JUNE 2001
		2,110,931	1,829,021	
		1		
Payments				
Employee Entitlements		(1,774,416)	(1,450,181)	
Other		(308,918)	(390,436)	
		(2,083,334)	(1,840,617)	
NET CASH FLOWS USED IN				
OPERATING ACTIVITIES	16	27,597	(11,596)	provide
Cash Flows from Investing Activities				
Capital Grants		0	12,500	
Capital Donations		37,040	36,194	
Proceeds from Sale of Properties, Plant & Equip	ment	16,200	16,713	
Purchase of Properties, Plant & Equipment		(56,367)	(43,436)	
Proceeds from Sale of Investments		276,783	192,720	
Purchase of Investments		(166,416)	(60,741)	
Net Proceeds from Bank Bill Rollovers		(52,700)	(401,839)	
NET CASH USED IN INVESTING ACTIVITIES		54,540	(247,889)	
NET INCREASE/DECREASE IN CASH HELD		82,137	(259,485)	
Cash at 1 July		277,501	536,986	
Cash at 30 June	7	359,638	277,501	

This Statement should be read in conjunction with the accompanying notes

NOTES TO AND

Note 1. Statement of Accounting Policies

FORMING PART OF

THE FINANCIAL

STATEMENTS FOR

THE YEAR ENDING

30 JUNE 2001

The general purpose Financial Statements of the Tweddle Child & Family Health Service have been prepared in accordance with the provisions of the Financial Management Act 1994. These requirements incorporate relevant accounting standards issued jointly by The Institute of Chartered Accountants in Australia and the Australian Society of Certified Practising Accountants and other mandatory professional reporting requirements (Urgent Issues Group Consensus Views). They have been prepared on the historical cost basis whereby assets are recorded at purchase price plus costs incidental to their acquisition and do not take into account changing money values nor the current assets (unless specifically stated).

(A) ROUNDING OFF

All amounts shown in the Financial Statements are expressed to the nearest dollar.

(B) RECEIVABLES AND REVENUE RECOGNITION

Revenues are recognised when they are earned. Trade debtors are carried at nominal amounts due and are due for settlement within 30 days. Collectability of debts is reviewed on an ongoing basis. A provision for doubtful debts is raised where doubt as to collection exists.

(c) Investments

Investments are valued at cost and are classified between current and non current assets based on the Hospital Board of Management's intention at balance date with respect to the timing of disposal of each investment.

(D) DEPRECIATION

Assets with a cost in excess of \$1,000 are capitalised and depreciation has been provided on depreciable assets so as to allocate their cost -or valuation- over their estimated useful lives using the straight-line method. This depreciation charge is not funded by the Department of Human Services.

The following table indicates the expected useful lives of non current assets on which the depreciation charges are based:

Buildings

Up to 40 years

Plant & Equipment

Up to 10 years

Furniture & Fittings

Up to 10 years

(E) TRADE AND OTHER CREDITORS

These amounts represent liabilities for goods and services provided prior to the end of the financial year and which are unpaid. The normal credit terms are Nett 30 days.

(F) INVENTORIES

Inventories are valued at the lower of cost and net realisable value. Cost is determined principally by the first-in, first-out method.

(G) EMPLOYEE ENTITLEMENTS

Based on pay rates current at balance date. On costs such as WorkCover and superannuation are included in the calculation of leave provisions.

LONG SERVICE LEAVE

The provision for long service leave is determined in accordance with Accounting Standard AAS30. Generally, the entitlement under various awards becomes payable upon completion of ten years' service. The proportion of long service leave estimated to be payable within the next financial year is a current liability. The balance of the provision is classified as a non-current liability measured at the present value of the estimated future cash outflow arising from employee's services to date.

Wages and Salaries, Annual Leave and Accrued Days Off Liabilities for wages and salaries, annual leave and accrued days off are recognised, and are measured as the amount unpaid at the reporting date in respect of employee's services up to that date.

(H) REVENUE RECOGNITION / INCOME IN ADVANCE

Revenue is recognised in accordance with AAS15 which draws a distinction between reciprocal and non reciprocal transactions in the treatment of the contribution of assets to the entity. A reciprocal transaction is deferred and reported as Income in Advance due to the non completion of the service at reporting date. A non reciprocal transaction is recognised as revenue when the entity gains control of the transfer. As such income in advance has been taken up as revenue.

(t) Donations

Donations are recognised as revenue when the cash is received.

(J) FUND ACCOUNTING

The Hospital operates on a fund accounting basis and maintains two funds: Operating and Capital Funds. The Hospital's Capital Fund includes unspent capital donations and receipts from fund-raising activities conducted solely in respect of this fund.

(K) Services Supported by Health Services Agreement and Services Supported by Hospital and Community Initiatives

The Activities classified as Services Supported by Health Services Agreement are substantially funded by the Department of Human Services while Services Supported by Hospital and Community Initiatives are funded by the Hospital's own activities or local initiatives.

(L) Comparative Information

Where necessary the figures of the previous year have been re-classified to facilitate comparisons.

Notes to and

FORMING PART OF

THE FINANCIAL

STATEMENTS FOR

THE YEAR ENDING

30 JUNE 2001

Notes to and	Note 2: Revenue from Operating	Activities		
	Recurrent		2000/01	1999/00
FORMING PART OF			\$	\$
	Government Grants	5	1 566 601	1 502 010
	-Department of Human Services - Acute Ca	O	1,566,621	1,502,810
THE FINANCIAL	-Department of Human Services Protective	Services	174,520	119,368
	Income for Services Provided			
Control of the contro	-Djerriwarrh Health Services		11,456	11,136
STATEMENTS FOR	-City of Hume		33,096	33,916
	-Williamstown Hospital		20,494	6,239
THE YEAR ENDING	Tweddle Education Network		84,026	99,599
	Indirect Contributions by Human Services		NO. 101 KODSOV-10402	
	-Insurance		19,836	26,380
30 JUNE 2001	Patient Fees	(refer note 2c)	0	896
	Interest	*** Design apple Contractions and Contraction and	5,878	5,160
	Other Revenue		10,001	10,146
	cuter neverted		1,925,928	1,815,650
	Capital Purpose Income			
	State Government Capital Grants		0	12,500
	Donations		37,040	36,194
	Sub-Total Revenue from Operating Activiti	ies	1,962,968	1,864,344
	Revenue from Non-Operating Activities			
	Interest		78,181	49,257
	Dividends		63,708	49,598
	Property Income		6,217	12,730
	Proceeds from Sale of Non Current Assets	(refer note 2d)	16,200	16,713
	Proceeds from Sale of Investments	(refer note 2d)	276,783	192,720
	Other		1,354	1,632
	Sub-Total Revenue from Non-Operating Ad	ctivities	442,443	322,650
	Total Revenue from Ordinary Activities	(refer note 2a)	2,405,411	2,186,994

Indirect contributions by Human Services

Department of Human Services makes certain payments on behalf of the Hospital. These amounts have been brought to account in determining the operating result for the year by recording them as revenue and expenses.

It includes \$2,845 which relates to provisional year end adjustment, that is, the amount owed by the Hospital to the Department to finalise Hospital funding based on performance during the year under the Health Service Agreement.

NOTE 2A:	ANALYSIS	of Revenue	BY SOURCE

Revenue from Services Supported by Health

FORMING	PART OF
THE FINA	NCIAL

Notes to and

Services Agreement		2000/01	1999/00
		\$	\$
Government Grants			
-Department of Human Services - Acute C	are Program	1,566,621	1,502,810
-Department of Human Services Protective	Services	174,520	119,368
Indirect Contributions by Human Services			
-Insurance		19,836	26,380
Patient Fees	(refer note 2a)	0	896

STATEMENTS FOR

Indirect Contributions by Human Services		
-Insurance	19,836	26,380
Patient Fees (refer note 2a) 0	896
Interest	5,878	5,160
Other Revenue	10,001	10,146
Sub-Total Revenue from Services Supported		

THE YEAR ENDING

By Health Services Agreement

30 June 2001

Indirect Contributions by Human Services

Department of Human Services makes certain payments on behalf of the Hospital which for the year 2000-01 were \$19,836. These amounts have been brought to account in determining the operating result for the year by recording them as revenue and expenses.

1,776,856

1,664,760

Revenue from Services Supported by Hospital

& Community Initiatives

		\$	\$
Operating Services			
Tweddle Education Network		84,026	99,599
Other Income for Services Provided			
Djerriwarrh Health Services		11,456	11,136
City of Hume		33,096	33,916
Williamstown Hospital		20,494	6,239
Non-Operating Services			
Property Income		6,217	12,730
Capital Purpose Income	(refer note 2)	37,040	48,694
Proceeds from Sale of Non Current Assets	(refer note 2d)	16,200	16,713
Proceeds from Sale of Investments	(refer note 2d)	276,783	192,720
Other Initiatives		143,243	100,487
Sub-Total Revenue from Services Supporte	d by Hospital	628,555	522,234
and Community Initiatives			
	•		
Total Revenue from All sources		2,405,411	2,186,994
	5		

Notes to and	Note 2B Analysis of Expenses by	Source		
FORMING PART OF	Services supported byHealth Services Agree	eement	Total 2000-01 \$	Total 1999-00 \$
THE FINANCIAL	Employee Entitlements		1 507 707	1 241 227
	- Salaries and Wages		1,507,707	1,241,327
	- WorkCover		29,143	14,928
STATEMENTS FOR	- Long Service Leave		49,093	45,278
	- Superannuation		131,621	98,440
THE YEAR ENDING	Other Expenses		11 550	11 224
THE YEAR ENDING	- Buildings, Safety & Infrastructure		11,559	11,224
	- Food Supplies		64,612	58,341
30 June 2001	- Human Resources		21,310 13,241	13,414 7,976
30 JOINE 2001	- Information Technology			14,910
	- Property Charges		21,174 56,247	49,636
	- Telephone, Stationery & Postage		154,467	110,805
	- Other		134,467	110,003
	Sub-Total Expenses from Services Supporto	ed by		
	Health Service Agreement		2,060,174	1,666,279
	C	mitry Imitiatives		
	Services supported by Hospital & Commun	nity initiatives		
	Employee Entitlements		100.046	61 407
	- Salaries & Wages		108,946	61,487 1,262
	- Long Service Leave		0	0
	- Superannuation		6,944	U
	Other Expenses		FC 422	125 020
	- Administrative Expenses		56,432	135,828
	- Repairs and Maintenance		13,891	3,707
	- Consultants Fees		2,000	2,000
	Sub-Total Expense from Services Supporte	d by	100 012	204 204
	Hospital and Community Initiatives		188,213	204,284
	Depreciation	(refer note 3)	108,508	106,827
	Audit Fees			
	- Auditor General		4,000	8,000
	Written Down Value of Assets Sold	(refer note 2d)	12,877	10,584
	Written Down Value of Investments Sold	(refer note 2d)		175,250
	Total Expenses from Ordinary Activities		2,602,518	2,171,224
	(As per Statement of Financial Performance			
	er in En inne het presidentation despaten (get) 1, 50, 15, 12, 13	W		

Note 2C: Patient Fees					Notes to and
	Patient Fe	as Raisad	Patient Fee	s Receivable	
,	2000/01	1999/00	2000/01	1999/00	
4	\$	\$	2000/01	1999/00	FORMING PART OF
Acute Care	Ψ	Ψ			
Inpatients	0	254	0	0	THE FINANCIAL
Inpatient – Bad Debts Recovered	0	642	0	0	THE PINANCIAL
Total	0	896	0	0	
					STATEMENTS FOR
The Hospital charges fees in accor-	dance with	the Departm	ent of Human S	ervices	be the the transfer that the transfer to the text of t
directives.					
					THE YEAR ENDING
Note 2D: Sale of Non Curr	ENT Ass	ETS			
			Total	Total	
			2000/01	1999/00	30 JUNE 2001
Revenue from the disposal of asset	ts		\$	\$	
·					
Proceeds from disposal of investme	ents		276,783	192,720	
Less: written down value of investr	nents sold		228,746	175,250	
Net Revenue from disposal of inve	stments		48,037	17,470	
Proceeds from disposal of physical	assets		16,200	16,713	
Less: written down value of physic	al assets sc	old	12,877	10,584	
Net revenue (loss) from disposal of	physical a	ssets	3,323	6,129	
Total			51,360	23,599	
Note 3: Depreciation					
			Total	Total	
			2000/01	1999/00	
p. ((.1)			\$	\$	
Buildings			51,720	51,720	
Plant & Equipment			4.2.40	4.602	
- Transport			4,249	4,683	
- Computers & Communication			29,852	28,460	
- Furniture and Fittings			13,040	13,039	
- Other Total			9,647	8,925	
ividi			108,508	106,827	
Allocation of Depreciation					
- Services Supported by Hospital &	Communi	tv Initiatives	108,508	106,827	
Services supported by Hospital &	Communi	y minatives	108,508	106,827	
				100,027	

Notes to and	Note 4: Retained Surplus		
		Total	Total
		2000/01	1999/00
FORMING PART OF		\$	\$
	Retained Surplus at the Beginning of the Reporting Period	3,727,682	3,711,912
	Net Surplus/(Deficit) for the Year	(197,107)	15,770
THE FINANCIAL	Transfers to and from Reserves	0	0
	Retained Surplus at the Reporting Date	3,530,575	3,727,682
STATEMENTS FOR	Note 5: Asset Revaluation Reserve		
		Total	Total
		2000/01	1999/00
THE YEAR ENDING		\$	\$
	Asset Revaluation at the Beginning of the Reporting Period	od 1,251,014	1,409,776
	Revaluation of investments to original cost	0	(158,762)
30 June 2001	Asset Revaluation Reserve at the Reporting Date	1,251,014	1,251,014
	Note 6: Other Reserves		
		Total	Total
		2000/01	1999/00
		\$	\$
	Endowment Fund Reserve at the Beginning of		
	Reporting Period	416,474	416,474
	Transfer to and from Endowment Fund Reserve	0	0
	Endowment Fund Reserve at the Reporting date	416,474	416,474

Note 7: Reconciliation of Cash

For the purpose of the statement of cash flows, the Hospital considers cash to include cash on hand, in banks and investments in money market instruments which includes: petty cash, bank or financial institutions deposits and investments (at call or highly liquid and readily convertible to cash within 24 hours) which an entity uses in its cash management function on a day to day basis.

	2000/01	1999/00
	\$	\$
Operating Fund		
- Cash at bank and on hand	140,205	50,776
- Cash Management Account	0	80,556
Capital Fund		
- Cash at bank and on hand	167,691	98,136
- Cash Management Account	51,742	48,033
Total Cash at June 30	359,638	277,501

Note 8: Financial Instruments

Interest rate exposure 30/06/2001

	Fixed interest rate maturing			
	1 year or less	Non Interest	Total	
		Bearing	2000/01	
Financial Assets				
Cash	307,896	0	307,896	
Trade debtors	0	57,057	57,057	
Investments	1,081,862	1,055,700	2,137,562	
Total Financial Assets	1,389,758	1,112,757	2,502,515	
Financial Liabilities				
Trade creditors and accruals	0	105,434	105,434	
Total Financial Liabilities	0	105,434	105,434	
Net Financial Asset/Liabilities	1,389,758	1,007,323	2,397,081	

Weighted Average Interest Rate-Net Financial Assets

4.03%

Interest rate exposure as at 30/06/2000

Fixed interest rate maturing

			O
	1 year or less	Non Interest	Total
		Bearing	1999/00
Financial Assets			
Cash	148,912	0	148,912
Trade debtors	0	114,280	114,280
Investments	1,106,009	1,118,030	2,224,039
Total Financial Assets	1,254,921	1,232,310	2,487,231
Financial Liabilities			
Trade creditors and accruals	0	6,113	6,113
Total Financial Liabilities	0	6,113	6,113
Net Financial Asset/Liabilities	1,254,921	1,238,423	2,493,344

Weighted Average Interest Rate-Net Financial Assets

5.39%

Market Value

The net market value of the financial assets and liabilities are not materially different to the carrying value of the financial assets and liabilities.

Notes to and

FORMING PART OF

THE FINANCIAL

STATEMENTS FOR

THE YEAR ENDING

30 JUNE 2001

Notes to and

Note 9: Receivables

Forming Part of		Current	Non Current	Total 2000/01	Total 1999/00
		\$	- \$	\$	\$
-	Sundry Debtors	45,708	0	45,708	21,771
THE FINANCIAL	Accrued Investment	11 240	0	11,349	1,801
	Income - capital Accrued Investment	11,349	U	11,349	1,001
STATEMENTS FOR	Income - operating	0	0	0	975
STATEMENTS FOR	Government. Grant		Ţ.		
	- operating	0	0	0	89,734
THE YEAR ENDING	Total	57,057	0	57,057	114,281
30 June 2001	Note 10: Other Fin	ancial As	SETS		
		Operating	Capital	Total	Total
		Fund	Fund	2000/01	1999/00
		\$	\$	\$	\$
	Current				
	Bank Bills	0	1,030,120	1,030,120	977,420
	On Call Investment	0	51,742	51,742	128,589
	Non Current				
	Shares in publicly listed				
	companies	0	648,576	648,576	704,491
	Units in publicly listed				
	property trusts,				
	convertible notes and preference shares	0	407 124	407 124	412 E20
	TOTAL	0	407,124 2,137,562	407,124 2,137,562	413,539 2,224,039
	TOTAL		2,137,302	2,137,302	
	Analysed as follows:				
				2000/01	1999/00
				\$	\$
	Current				
	Aust Dollar Bank Bills			1,081,862	1,106,009
	Non Current				
	Shares in publicly listed	1,50		648,576	704,491
	Units in publicly listed p	roperty trusts,			

convertible notes and preference shares

Total

407,124

2,137,562

413,539

2,224,039

Note 10: Other Financial Assets (continued)

Reconciliations of the carrying amounts of each class of non-current other financial assets at the beginning and end of the current and previous financial year are set out below.

	Shares	Units	Total
	\$	\$	\$
2001			
Carrying amount at start of year	704,491	413,539	1,118,030
Additions	101,227	65,189	166,416
Disposals	(157,142)	(71,604)	(228,746)
Carrying amount at end of year	648,576	407,124	1,055,700
	Shares	Units	Total
	\$	\$	\$
2000			
Carrying amount at start of year	853,405	537,896	1,391,301
Additions	60,741	0	60,741
Disposals	(68,000)	(107,250)	(175,250)
Revaluation	(141 ())	(17,107)	(158,762)
	(141,655)	(17,107)	(130,702)

Note 11: Inventory

	2000/01 \$	1999/00 \$
Pharmaceuticals	. 0	512
Domestic supplies	0	1,352
Administration stores	0	1,639
Books – Sleep Right, Sleep Tight	9,801	0
Total	9,801	3,503

Notes to and

FORMING PART OF

THE FINANCIAL

STATEMENTS FOR

THE YEAR ENDING

30 June 2001

Notes to and	Note 12: Property, Plant & Equipment		
		2000/01	1999/00
FORMING PART OF		\$	\$
TORMING LAKE OF	AT COST		
	Plant & Equipment		
THE FINANCIAL	-Transport	48,862	20,603
THE TINANCIAL	Less Accumulated Depreciation	0	(3,477)
	Ecos Accumulated Depression	48,862	17,126
STATEMENTS FOR		<i>y</i>	
STATEMENTS FOR	- Computers and Communication	163,446	157,220
	Less Accumulated Depreciation	(110,129)	(80,277)
THE YEAR ENDING	Less Accumulated Depreciation	53,317	76,943
THE TEAK ENDING		33,317	70,515
	- Other Equipment	110,362	109,083
30 June 2001	Less Accumulated Depreciation	(44,469)	(34,822)
	2	65,893	74,261
		120 717	120 717
	Furniture & Fittings	128,717	128,717
	Less Accumulated depreciation	(66,634)	(53,594)
		62,083	75,123
	Sub Total	230,155	243,453
	AT VALUATION		
	* Crown Land	830,000	830,000
	* Freehold Land	170,000	170,000
	* D. Chiller	2,068,796	2,068,796
	* Buildings	(104,161)	(52,441)
	Less Accumulated Depreciation	1,964,635	2,016,355
		1,964,633	2,010,333
	Sub Total	2,964,635	3,016,355
	Total	3,194,790	3,259,808

Note 12: Property, Plant & Equipment (continued)

Reconciliations of the carrying amounts of each class of land, buildings, plant & equipment and communication at the beginning and end of the current and previous financial year are set out below.

Notes to and

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THE FINANCIAL

STATEMENTS FOR

THE YEAR ENDING

30 June 2001

	Freehold	Buildings	Plant & Equipment				Total
Land			Transport	Computers	Furniture	Other	
				&	&		
				Communi-	Fittings		
				87208539075			
\$	\$	\$	\$	\$	\$	\$	\$
830,000	170,000	2,016,355	17,126	76,943	75,123	74,261	3,259,808
0	0	0	48,862	6,226	0	1,279	56,367
0	0	0	(12,877)	0	0	0	(12,877)
0	0	(51,720)	(4,249)	(29,852)	(13,040)	(9,647)	(108,508)
830,000	170,000	1,964,635	48,862	53,317	62,083	65,893	3,194,790
5							
830,000	170,000	2,068,075	11,790	84,871	88,162	80,886	3,333,784
0	0	0	20,603	20,532	0	2,300	43,435
0	0	0	(10,584)	0	0	0	(10,584)
0	0	(51,720)	(4,683)	(28,460)	(13,039)	(8,925)	(106,827)
830,000	170,000	2,016,355	17,126	76,943	75,123	74,261	3,259,808
	\$ 830,000 0 0 830,000 0 0 0 0 0 0 0	\$ \$ \$ 830,000 170,000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	\$ \$ \$ \$ 830,000 170,000 2,016,355 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ \$ & Communication \$ \$ \$ 830,000 170,000 2,016,355 17,126 76,943 0 0 0 48,862 6,226 0 0 0 (12,877) 0 0 0 (51,720) (4,249) (29,852) 830,000 170,000 1,964,635 48,862 53,317 830,000 170,000 2,068,075 11,790 84,871 0 0 0 20,603 20,532 0 0 (10,584) 0 0 0 (51,720) (4,683) (28,460)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

*The land and buildings were restated to valuations determined by Mr. F Trimboli, Registered Valuer, Frank Trimboli Real Estate, as at 16th June, 1999

The valuation of land and buildings is based on market value of the land and in-use value of building improvements as they stand, considering their age and obsolescence.

Notes to and	Note 13: Payables		
		2000/01	1999/00
		\$	\$
FORMING PART OF	Current		
I ORWING LART OF	Trade Creditors	47,250	3,612
	Creditors -Other (Consortium)	43,560	0
CHARLANCE AT	Accrued Expenses	11,779	2,500
THE FINANCIAL	Accrued Expenses – Government grant	2,845	0
	Prepaid Revenue – seminar registrations	0	4,690
STATEMENTS FOR	TOTAL	105,434	10,802
DIMILIVIDION	N. C.		
	Note 14: Employee Entitlements		
THE YEAR ENDING		2000/01	1999/00
		\$	\$
and Tarrita and of	Current		
30 June 2001	Long Service Leave	25,000	25,000
	Accrued Wages and Salaries	48,526	39,577
	Annual Leave	122,627	108,277
	Accrued Days Off	2,758	556
	TOTAL	198,911	173,410
	Non Current		
	Long Service Leave	204,698	171,161
	Total	204,698	171,161
	Movement in Long Service Leave:		
	Balance July 1, 2000	196,161	196,755
	Provision made during the year	49,093	46,540
	Settlement made during the year	(15,556)	(47,134)
	Balance June 30, 2001	229,698	196,161

In measuring present value a probability factor which varies in accordance with the number of years of service has been used in determining the retention rate for employees with a particular number of years of service.

Note 15: Equity

	2000/01	1999/00 \$
Total Equity at the Beginning		
of the Reporting Period	5,395,170	5,538,162
Total Changes in Equity Recognised in the		
Statement of Financial Performance	(197,107)	15 <i>,77</i> 0
Transfers from Reserves	0	(158,762)
	A	
Total Equity at the Reporting Date	5,198,063	5,395,170

Note 16: Reconciliation Of Net Cash Used In Operating Activities NOTES TO AND To Operating Result FORMING PART OF 2000/01 1999/00 \$ \$ Entity Surplus (Deficit) for the year (197,107)15,770 THE FINANCIAL less income designated for capital purposes (37,040)(48,694)Entity/(Deficit) prior to capital items (32,924)(234, 147)STATEMENTS FOR Non Cash Movements Depreciation 106,827 108,508 THE YEAR ENDING Increase / Decrease in Payables 94,632 (159)Increase / Decrease in Employee Entitlements 59,038 17,390 Net Profit from Sale of Plant & Equipment (6,129)(3,323)30 JUNE 2001 Net Profit from Sale of Investments (17,470)(48,037)Decrease / Increase in Receivables (78, 156)57,224 Increase / Decrease in Stores (975)(6,298)NET CASH USED IN OPERATING ACTIVITIES 27,597 (11,596)

Note 17: Commitments

The hospital had no capital, lease or operating commitments at 30th June 2001 which are not provided for in the Statement of Financial Position.

Note 18: Contingent Liabilities

The hospital had no contingent liabilities at 30th June 2001.

Note 19: Superannuation

This entity contributes to the Health Super Pty Ltd. Contributions made during this financial year were \$138,565.

There were no amounts outstanding in respect of the financial year. The basis for calculating superannuation payable to Health Super Pty Ltd is in accordance with the Hospital Superannuation Act 1988 and the State Superannuation Act 1988. There are no loans existing from any Superannuation Fund.

The unfunded superannuation liability in respect to members of State superannuation schemes is shown as a liability separately by the Department of Treasury and Finance.

Notes to and

Note 20: Responsible Person - Related Disclosures

FORMING PART OF

(A) RESPONSIBLE PERSONS

Minister for Health

The Honourable J. Thwaites

THE FINANCIAL

STATEMENTS FOR

THE YEAR ENDING

30 JUNE 2001

Board of Management Members

Ms F. Benson

Appointed 1st November, 2000 Appointed 1st November, 2000

Mr R. Beswick

Mr I. Broadway

Ms J Collette

Ms J Connolly

Mr A. Fry

Ms J. Gratton-Vaughan

Dr N. Hocking

Mrs B. Irlicht

.

Mr G. Jasper

Mr R. Jones

Ms. H. Russell

Ms L. Yates

Retired 31st October, 2000

Appointed 1st November, 2000

Nil

Accountable Officer

Ms B. Hassold (Chief Executive Officer)

(B) REMUNERATION OF RESPONSIBLE PERSONS

2001 2000

Nil

Total remuneration received or due and receivable by responsible persons from the reporting entity in connection with the management of the reporting entity amount to:

Members of the Board of Management all hold

honorary positions.

The remuneration of the Accountable Officer who is not a member of a governing board is reported under "Executive Officer Remuneration"

- (c) RETIREMENT BENEFITS OF RESPONSIBLE PERSON

 There are no retiring benefits provided to responsible persons.
- (D) OTHER TRANSACTIONS OF RESPONSIBLE PERSONS RELATED PARTIES There were no transactions with Board of Management related parties.

e) Other Receivables from and Payables to Responsible Persons and their Related Parties.

No amounts remain payable or receivable to any Board of Management Member.

(F) Amount Attributable to Other Transactions With Responsible Persons and their Related Parties.

No amounts were attributable to Other Transactions with responsible persons or their related parties.

(G) EXECUTIVE OFFICER REMUNERATION

There are no Executive Officers whose total remuneration exceeded \$100,000 during the reporting period.

Note 21: Transactions with Other Government Controlled Entities

During the 2000/01 financial year transactions undertaken with other State Government controlled entities were as follows;

	Intra Health Portfolio 2000/01 \$	Inter Health Portfolio 2000/01 \$	Intra Health Portfolio 1999/00 \$	Inter Health Portfolio 1999/00 \$
Assets	0	0	89,734	0
Liabilities	4,000	0	2,500	0
Revenue	1,760,977	65,046	1,661,058	51,291
Expenses	19,836	9,760	26,380	10,724

[&]quot;Intra" transactions are between entities within the Department of Human Services portfolio.

Notes to and

FORMING PART OF

THE FINANCIAL

STATEMENTS FOR

THE YEAR ENDING

30 June 2001

[&]quot;Inter" transactions are with entities outside the portfolio controlled by the Victorian Government



AUDITOR-GENERAL'S REPORT

To the Members of the Parliament of Victoria, the responsible Ministers and the Members of the Board of Management of Tweddle Child and Family Health Service

Audit Scope

The accompanying financial report of Tweddle Child and Family Health Service for the financial year ended 30 June 2001, comprising a statement of financial performance, a statement of financial position, statement of cash flows and notes to the financial statements, has been audited. The Members of the Board of Management are responsible for the preparation and presentation of the financial report and the information it contains. An independent audit of the financial report has been carried out in order to express an opinion on it to the Members of the Parliament of Victoria, the responsible Ministers and the Members of the Board of Management as required by the *Audit Act* 1994.

The audit has been conducted in accordance with Australian Auditing Standards to provide reasonable assurance as to whether the financial report is free of material misstatement. The audit procedures included an examination, on a test basis, of evidence supporting the amounts and other disclosures in the financial report, and the evaluation of accounting policies and significant accounting estimates. These procedures have been undertaken to form an opinion as to whether, in all material respects, the financial report is presented fairly in accordance with Australian Accounting Standards and other mandatory professional reporting requirements and complies with the requirements of the *Financial Management Act* 1994, so as to present a view which is consistent with my understanding of the Service's financial position, the results of its operations and its cash flows.

The audit opinion expressed in this report has been formed on the above basis.

Audit Opinion

In my opinion, the financial report presents fairly the financial position of Tweddle Child and Family Health Service as at 30 June 2001 and the results of its operations and its cash flows for the year ended on that date in accordance with Australian Accounting Standards and other mandatory professional reporting requirements and complies with the requirements of the *Financial Management Act* 1994.

MELBOURNE 26/9/2001 J.W. CAMERON

Auditor-General

Contact

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Born: Febuary 1920

81 YEARS ON TWEDDLE IS STILL GROWING

AND CARING FOR THE COMMUNITY

Twedale
Child & Family Health Service

ANNUAL REPORT - 2001