

**COHUNA DISTRICT HOSPITAL**  
**60<sup>th</sup> ANNUAL REPORT**  
**AND**  
**COHUNA COMMUNITY NURSING HOME**  
**26<sup>th</sup> ANNUAL REPORT**

**Murray Valley Highway, Cohuna, 3568.**

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***ANNUAL REPORT STATEMENT***

The Cohuna District Hospital Annual Report 2012 will be presented for adoption at the Annual General Meeting to be held at Cohuna.

The following report is a legal document prepared in accordance with the Financial Management Act 1994 and the Health Services Annual Reporting Guidelines for 2011-2012.

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Cohuna District Hospital  
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Cohuna, Vic 3568

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*Audited Financial Statements 2011/12 are enclosed as a separate document.*

## ***MANNER OF ESTABLISHMENT***

The Cohuna District Hospital is a thirty-two bed health facility providing four main core services:

- A sixteen bed Acute Care facility provides medical, surgical and obstetric services;
- A sixteen bed Nursing Home;
- Community District Nursing service; and
- An Adult Day Activity Support Service (ADASS).

The Cohuna District Hospital was established as a public hospital in 1952. The hospital was originally operated as a private hospital and was purchased from the owner, Dr Stewart, in that year. The Hospital has 16 beds providing care for residents of Cohuna and the surrounding catchment area. In 1983, an appeal raised funds for a nursing home. A 14 bed nursing home wing was built adjacent to the hospital and opened in 1985. A further 2 beds were added during 1994.

The service also provides community and home based services such as district nursing, day care and meals on wheels in conjunction with the Shire of Gannawarra. Community health programs are provided by the Northern District Community Health Service.

The Transitional Care Program (TCP) involving government funding for 1 bed placement and 1 community placement commenced this past

## ***RELEVANT MINISTER***

The relevant Minister during the reporting period were the Hon. David Davis, MP, Minister for Health and Ageing Victoria from 1 July 2011 to 30 June 2012. This report is prepared for the Minister and, through him, the Parliament of Victoria, and the community.

## ***COMPLIANCE DISCLOSURE INDEX***

The Annual Report of the **Cohuna District Hospital** is prepared in accordance with all relevant Victorian legislation. This index has been prepared to facilitate identification of the Department's compliance with statutory disclosure requirements.

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### **Legislation Requirement**

### **Page Reference**

#### **Ministerial Directions**

#### **Report of Operations**

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#### **Management and structure**

financial year. This program provides care and restorative services for a short term period for older people who have been in hospital. This is a valuable addition to our range of services.

## ***ACKNOWLEDGMENTS***

### **Auditors:**

Auditor General Victoria  
Richmond, Sinnott & Delahunty Chartered Accountants

### **Accountants:**

Accounting & Audit Solutions Bendigo (AASB)

### **Banker:**

ANZ Bank  
Bendigo Bank  
Westpac Bank

### **Honorary Solicitor:**

Embleton & Associates (Cohuna)

### **Life Governors:**

Mr Ken Mawson, Mr Alan Fry, Mr Eric Bruce Lunghusen, Mr Graeme Hill, Mrs Val Rowlands, Mr Graeme Smith, Mr Graham Munzel, Dr. Peter Barker, Mrs Roma Dye and Mr Alan Rickey

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**Financial Statements**

**Financial statements required under Part 7 of the Financial Management Act 1994**

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SD 4.2(b)	Balance Sheet	AFS
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**Other requirements under Standing Directions 4.2**

SD 4.2(a)	Compliance with Australian accounting standards and other authoritative pronouncements	AFS
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**Legislation**

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AFS = Audited Financial Statements

*ADDITIONAL INFORMATION (FRD 22C APPENDIX)*

In compliance with the requirements of the Standing Directions of the Minister for Finance, details in respect of the items listed below have been retained by Cohuna District Hospital and are available to the relevant Ministers, Members of Parliament and the public on request (subject to the freedom of information requirements, if applicable):

- A statement that declarations of pecuniary interests have been duly completed by all relevant officers;
-

## **OBJECTIVES, FUNCTIONS, POWERS AND DUTIES OF COHUNA DISTRICT HOSPITAL AND COHUNA COMMUNITY NURSING HOME INC**

Cohuna District Hospital is a public Agency established under the Health Services Act 1988. It is authorized to provide public health and ancillary services as authorized under the Act, and operate Residential Care Services under the Aged Care Act 1997.

The Board of Management consists of persons appointed by the Minister for Health under the Act who are empowered to provide strategic direction for the organization. Whilst the board provide directions for the Agency and determine what must be done, the responsibility for determining how services are delivered is invested in the Chief Executive Officer.

### **MISSION, VISION & VALUES**

#### ***Our Mission***

The Cohuna District Hospital exists to provide quality health care which meets the needs of our community in a safe and friendly environment.

#### ***Our Vision***

The Cohuna District Hospital aims to promote the health and wellbeing of the Cohuna and District community through the provision of flexible and integrated acute, aged care, community and support services, in an environment of continuing quality improvement.

#### ***Our Values***

We will respect the individual needs of clients by offering personalised service including emotional, social and physical support.

We will encourage innovative practice and attempt to achieve excellence in all service areas through continuous quality improvements.

We will provide a positive and satisfying work environment and encourage vigilance to health and safety.

We will keep abreast of changes in health services delivery and review services to ensure they continue to meet the needs of our local community.

### **HEALTH SERVICE PROFILE**

#### ***Registered Beds***

16 Acute

16 Residential Aged Care

#### ***Accreditation Status***

**Hospital** Australian Council of Healthcare Standards – October 2012

**Nursing Home** Aged Care Standards & Accreditation Agency – October 2012

### **LIST OF SERVICES**

Accident & Emergency	District Nursing	Meals on Wheels	Physiotherapy
Acute Psychiatry	ENT & Oncology	Obstetrics	Radiology
Adult Day Activity Service	General Medicine	Orthopedic Surgery	Renal Dialysis
Aids & Equipment	General Surgery	Paediatrics	Residential Aged Care
Coronary Care	Gynecology	Pathology	Respite Care
Dental Surgery	Intensive Care	Perinatal Care	Transitional Care Program

## *Board of Management & CEO Report of Operations*

On behalf of the Board of Management of the Cohuna District Hospital and the Cohuna Community Nursing Home Inc. it is our pleasure to present the 60<sup>th</sup> Annual Report for the year ending 30<sup>th</sup> June 2012. The Annual Report should be read in conjunction with 2011-2012 Quality of Care Report to gain a more comprehensive appreciation of the achievements and activities of both the Hospital and Cohuna Community Nursing Home over the reporting period.

### *Governance and Management*

The Board composition has remained unchanged for a further year providing ongoing stability and continued expertise within the Board. Three members re-nominated and the Minister for Health confirmed their appointments for a further 3 year term: - we look forward to their continued contribution and commitment.

- Geoff Hall, Graeme Smith and Lorraine Learmonth from 1 July 2012 to 30 June 2015

In August Lois Drummond was appointed President for a second consecutive term, Cameron Hodge as Vice President and Treasurer, and Bernice Mackenzie as Junior Vice President. Board Executive rotations are an important succession planning tool within the Board. We record our appreciation to all Board members for their ongoing commitment to CDH.

The Board continue to participate in forums and conferences organized by the Department of Health and the Victorian Healthcare Association. The Board Chair and Chief Executive Officer (CEO) also attend specific forums and workshops to ensure the health service has input and keeps abreast of changes and developments in health service policy and delivery.

The establishment of the Loddon Mallee Murray Medicare Local (LMMML) provides a new key stakeholder body in the region, focusing on medical and primary care services coordination and planning. The Board looks forward to following its development and achievements. The “Medicare Locals” are a Federal initiative and replaces former Divisions of General Practice.

The CEO is a member of the Board of the Southern Mallee Primary Care Partnership, also attended by our Director of Nursing, Anne Graham. CDH recognises its responsibility in having input into regional considerations encompassing health promotion and primary care. This is further illustrated through CDH having entered into a voluntary liaison partnership with Boort District Health and Northern District Community Health Service to discuss primary care and health issues of a common interest; with the aim to identifying opportunities for enhancement of primary services and other practical aspects of services delivery.

The Audit; Quality Improvement (Clinical Services); Medical Appointments Advisory; House and Finance Committee's have again been key advisory committees to the Board. The Executive Working Group; Department Heads & Quality Assurance; and Occupational Health & Safety Committees also report and provide advice to the Board, adding further strength to its governance and evaluation capability.

Teamwork and participative management are essential ingredients to effective leadership. The Board approved of a service agreement with the Victorian Hospitals Industrial Association (VHIA) for a Human Resources locum service. Arising from this contractual arrangement has been the establishment of a Human Resources Plan that is focused on devolving further responsibilities and resources to the management team and influencing workplace culture. The State Services Authority *People Matters Survey* will be the Board's tool for evaluating the results of these change processes.

Characteristic of most small rural health services, CDH has a very limited number of full time (clinical and non clinical) managerial positions. Most managerial portfolios also have direct patient care roles or are held by part time employees. The Board has found it necessary to approve some increase in administrative resources, due to the burden of regulatory compliances and to enable our continuous improvement program to be at the forefront. The relatively heavy clinical workload presents challenges in balancing clinical and administrative demands.

During the year the Board advertised for and appointed a Community Consultative Forum. The Forum will provide a consultative process whereby the Board can seek community input into areas of health service operations, planning and review, and to enable input from a community perspective. The forum held its first meeting in January. Membership comprises 12 community representatives from the district, 2 board and 3 staff representatives.

The Board recognises its role in effective governance and this was confirmed through its annual self evaluation program. Setting direction is managed through the strategic planning program; operational standards through the governance reporting structure and financial diligence through the Finance and independent Audit Committees.

The Australian Centre for Healthcare Governance conducted a workshop entitled: *Governing Quality in Public Sector Residential Aged Care: Organisational Readiness*. The Board records its appreciation to the Department of Health for inviting CDH to participate in this review program and for the grant of \$7000 to cover costs. The Board and the senior management group analyzed the rigour and effectiveness of CDH clinical governance systems. The workshop defined the dimensions of quality care, strategic goals and specific objectives to support quality services to patients and residents. The Board sees the outcomes of this successful planning workshop as the basis for reviewing the clinical governance system throughout the health service. As an outcome of this project, we aim to streamline our accreditation reporting systems wherever practical. The over arching goal is to ensure all quality information to the Board is reliable, relevant and reflects the dimensions of quality care.

### *Strategic and Service Planning*

The Board submitted a brief to the Department of Health for approval and financial assistance to undertake a *Needs Analysis and Service Plan*. We were pleased to receive a grant of \$20,000 and this has enabled the engagement of a health service planner to undertake the first stage, involving an environmental and service profile analysis. Once this stage is complete we aim to procure funding to complete the next stage involving synthesis, analysis and service configuration for CDH.

The Service Plan's complete scope incorporates community and stakeholder consultation, drafting and ultimately the finalization of a Service Plan & Mode of Care Report. It will encompass all services of CDH, will identify any gaps in services and highlight our strengths and weaknesses relating to existing service provision. This is an important exercise upon which the approved future role and function for CDH should be agreed upon between the Board and the Department of Health, based on extensive data and trend analysis. This is a necessary precursor to CDH progressing to master-planning in relation to future building redevelopment and configuration.

### *Service Provision*

The Kerang District Hospital engaged a consultant to review the model of care for maternity services across the Gannawarra Shire to ensure a sustainable service model that addressed the needs of women, midwives and medical staff. The report, covering maternity services provision provided by Kerang and Cohuna hospitals, has highlighted that the existence of a sole GP Obstetrician at each site means that independently both services are fragile. The health services will form a joint working party to consider various recommendations in the report and a collaborative approach to a sustainable maternity service within the Gannawarra Shire.

CDH has commenced a new service program under the auspices of Bendigo Healthcare Group called the *Transitional Care Program*. This jointly funded Commonwealth and State program requires an assessment by the regional Aged Care Assessment Team (ACAS) of eligible clients. CDH has both a bed and community placement funding source, to enable the development of a personalized care plan and comprehensive therapy for eligible clients. Our District Nurse is the Program & Case Manager for eligible clients. The overarching aim is to allow clients to recover or improve their health situation and to be able to go home earlier and settle back into their local community; avoiding what might otherwise be a long period of hospitalization or admission to an aged care facility. We see this new service as an important addition to the comprehensive range of services CDH provides to its local community.

### *Community*

CDH has tremendous support from its community and the pillars of this support remain the following key organizations that act as our ambassadors. The Cohuna Hospital Ladies Auxiliary, Murray to Moyne Bike Group, Cohuna Bridge to Bridge (Lions Club), Cohuna Bus Committee and the Bingo Group devote a great deal of time and effort into raising funds for the hospital and nursing home. A number of trusts and individuals also provide financial support on a regular basis, the absence of which would make it impossible to maintain the quality of medical equipment our medical and nursing staff have at hand.

### *Plant and Equipment Replacement*

The continued refurbishment of our assets can only be achieved through government grants, fundraising efforts and accumulated capital reserves. The past year has been one of significance in this regard. State Government supported projects are listed, for which the Board records its appreciation.

- Contracts were let to install a new air conditioning system to the operating theatre suite and CSSD. The Department of Health provided an infrastructure grant of \$150,000 to cover project costs.
- A contract was awarded to replace the medical imaging equipment in radiology. A targeted equipment grant of \$61,000 was provided to cover this upgrade.
- An aged care minor capital grant of \$50,000 was provided as a contribution towards the hospital funded upgrade to the nursing home.

The Cohuna Ladies Auxiliary has made a number of significant donations during the year:

- |   |          |
|---|----------|
| • Contribution to new theatre instrument washer | \$10,000 |
| • Bathroom renovations to student accommodation | \$7,210  |
| • Jaundice Meter for newborns                   | \$5,000  |
| • Physiotherapy treatment table                 | \$1,750  |

Locally donated funds have been specifically drawn upon to enable the following projects to be completed or in progress:

- |  |           |
|--|-----------|
| • Cohuna Nursing Home Foundation initial grant towards hospital redevelopment. | \$206,000 |
| • Individuals and Trusts': New surgical lighting system                        | \$30,000  |

Community and Support Group grants are listed in the Annual Report and we sincerely record our appreciation for this vital ongoing community support.

## *Capital Works Program*

Envisage Design Group (Echuca) was retained to handle the tendering and contract management of the health service funded redevelopment works. The lowest tender was awarded to CJ and BT McLoughlan Builders Pty Ltd. Total design, management, secondary consultants and construction costs are estimated to total \$580,000. Building works are expected to be completed in August 2012. Key developments include a new patient's lounge in memory of the late Dr Peter Graham. Other developments include nursing home extensions; a new relocated dialysis unit capable of accommodating 3 clients (chairs); two new executive offices; provision of a medical/nursing (clinical) office and acute ward refurbishments to include en-suite bathrooms. In addition to the formal redevelopment contract, improvements and extensions were made to the reception area at a cost of \$15,000, drawn from capital reserves.

Key financial support has come from Mrs. Graham (\$85,000), the Cohuna Community Nursing Home Foundation Trustees (\$430,000), Department of Health (\$50,000), Bridge to Bridge (\$12,000) and various other estate (trust) donations. This is quite a significant range of building improvements and is a credit to the community in its support of the health service.

## *Finances*

As mentioned last year, our state grants are largely historically based and adjusted annually. The acute section has been down 15% in activity due to cancellations in elective surgery due to building works. The Accident & Emergency (A&E) Department has seen another record year for attendances, particularly when on call (weekend) for Kerang and Barham. Ambulance transfers of patients to larger hospital centres remain a significant aspect of our A&E activities. We receive no discreet funding for A&E services and the level of clinical presentations is unusual for a hospital of our relatively small size. Nursing on call provisions have been instituted to cover very busy attendance periods in A&E.

Changes to funding principles pertaining to last financial year has provided CDH with some financial respite, particularly in relation to acute inpatient fees income, that can now be fully utilized for service provision. Cohuna District Hospital and Cohuna Community Nursing Home have collectively incurred a modest operating surplus for the past financial year. Please refer to the financial section of this report for full details of the financial results for the 2011/2012 financial year.

## *Continuous Improvement*

The health service is committed to quality patient care and this is monitored through various avenues including the Victorian Patient Satisfaction Monitor. We were pleased to obtain an overall care index (OCI) of 88.6 in the latest hospital comparative survey report. This was the third highest across Victoria.

An audit from the Aged Care Accreditation Agency in January 2012 found that our police check system was inadequate and the nursing home failed regulatory compliance 1.2. The management responded positively in developing a more robust system and procedures relating to employment of staff and volunteers. In February 2012 the Agency reviewed improvements in practice and reinstated our compliance rating against the standard.

In September 2012 we will undergo an organisation wide survey by the Australian Council of Health Care Standards and the Nursing Home will again be audited by the Aged Care Standards and Accreditation Agency in August. These are significant processes and we record our appreciation in particular to Jill Moore, Quality Officer and Anne Harrison, Nurse Unit Manager (Aged Care) for months of preparation and to many staff supporting these preparations.

## Appreciation

The Board values the important partnership with the Department of Health and its willingness to provide support and guidance. We record our appreciation to Ann-Maree Connors, Director, Health and Aged Care, Loddon Mallee Region and her staff for their ongoing assistance.

Our staff across the health service, in partnership with our visiting medical staff, continues to demonstrate a commitment of the highest level to ensure CDH continues to provide personalized care to its patients and clients. We acknowledge the commitment of our Director of Nursing Mrs. Anne Graham both in clinical leadership and community activities.

The Board was very pleased to learn of the Victorian Rural Doctors Award being given to Dr Peter Barker for “outstanding contribution to his community in relation to his professional and personal commitment and leadership”. This Rural Workforce Agency award was submitted by the Gannawarra University of the Third Age in recognition of Dr Barker’s commitment to the local community. Dr Ghulum Khan retired as our visiting General Surgeon after many years and we record our sincere appreciation for his services. We welcome Mr. Shanthapriya Tellambura to this specialist position.

The redevelopment program and accreditation preparations have called for a significant effort from staff that has responded admirably. Our ladies auxiliary and volunteer groups have made a significant contribution again and play a major role in forging our close links with the community. Our thanks are extended to local politicians, in particular State Member for Rodney, Paul Weller MLA and the local media for their continued support and interest in Cohuna District Hospital and Cohuna Community Nursing Home. In closing we again thank everyone associated with our health service for another very progressive year.

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Lois Drummond  
CDH Board President

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Robert Bulmer  
Chief Executive Officer  
and Accountable Officer

## **RESPONSIBLE BODIES DECLARATION**

In accordance with the *Financial Management Act 1994*, I am pleased to present the Report of Operations for *Cohuna District Hospital* for the year ending 30 June 2012.

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Lois Drummond  
Board President  
Cohuna, Victoria

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## *DIRECTOR OF NURSING REPORT*

Our Hospital continues to focus on meeting the needs of our community and staff are committed to ensuring we continue to provide quality care and services. We have a dedicated mix of experienced long serving staff who are highly regarded in our community.

### *Acute Services*

Nursing staff continue to develop a coordinated approach to managing patient care. This year has seen:

- Extensive staff training in all areas to assist with the ongoing demand and changes. Examples of this includes, up-skilling of all our midwives and supporting medication endorsed enrolled nurses.
- Replacing the Operating Lights, Airconditioner and Theatre Table in our Operating Theatre.
- Staff continuing to manage the diverse range of services including Palliative Care, Dialysis along with extensive Medical and Surgical services.
- Our Midwifery program has been developed as a shared care program with the Cohuna Clinic. Midwives from the Hospital help provide ante-natal care to mothers with Dr. Peter Barker at his clinic. This is a funded program through ARWAV and has been very successful .
- On-call Hospital program with the neighbouring towns of Kerang and Barham has been developed over six years. The service gives the local doctors an opportunity to have time out and so give them quality of life.
- Accident and Emergency Department has seen an increase of presentations with a result of increasing the work load on the nursing staff. This has resulted in developing a system of on-call and problem solving as the issues arise
- Combined Midwifery Service between Cohuna and Kerang. Early planning stage to develop a support system for our communities as needs arise, eg combined education resources of the midwives.
- Ongoing commitment to having students/medical/nursing/work experience.

### *Nursing Home*

It has been another busy rewarding year as our demand for Residential Aged Care services has remained high with 99% occupancy. The fragility of our residents moving into care continues to increase and so reflects the need for extra services to be available in our community. Our Aged Care service provides a home like atmosphere for the residents while delivering expert nursing care. The quality of Residential life is enhanced by the vital role our volunteers play, their time given to our residents is highly valued.

### *District Nursing*

The District Nurses continue to travel many kilometers covering a wide area to provide outstanding community based services enabling many people to remain independent in their own homes for longer.

The Post Acute Care Program provides care and support to those patients recently discharged from Hospital.

The Transition Care Program was commenced providing older patients recovering from an acute illness the chance to assess whether they will be safe returning to their own homes and caring for themselves. We have two beds available, one in the Hospital and one in the community.

### *Adult Day Activity Support Service (ADASS)*

ADASS continues to provide recreational and social support to those people who continue to reside at home and to residents of our local residential aged care services. The people who volunteer their support, help as bus drivers, with outings, providing entertainment or at the centre, is gratefully acknowledged.

### *Domestic & Food Services*

The high standard of catering and cleaning procedures is maintained by the effort and dedication of the Domestic and Food Services staff. These services are an important part of providing the best care for our patients and residents.

The Food Safety Audit was passed in June with no recommendations and the Cleaning Audits also passed with no problems.

The cleanliness of the Hospital is important to successfully have an infection free environment and our cleaning staff play an important role in maintaining these standards.

### *Clinical Risk Management*

Clinical risk management is a strategic approach to patient care where systems are in place to provide an environment whereby risk to patients and staff is minimized. Patient satisfaction surveys, Quality projects and internal audits are conducted and reported through committees to the Board of Management. We continually try to improve our services to reflect best practice.

### *Acknowledgements*

I would like to thank the Board of Management for their commitment and support at all times. Thanks and appreciation also go to our VMO,s for the work performed and for their ongoing dedication and enthusiasm. We also appreciate the work performed by our visiting Specialists and to all staff who provide such outstanding care to our patients, residents and clients.

We also farewelled Marian Richardson who has been part of our team for many years.

I would also like to thank our management team and all the staff each and everyone for their commitment and dedication to providing the best care for our patients and residents.

I extend a big thank you to our community partners, Northern District Community Health, Neighbourhood House, Southern Mallee Primary Care, to our Bingo volunteers and especially our Ladies Auxiliary for their continued commitment and excellent work. We could not achieve our goals without them.

Anne Graham  
CDH Director of Nursing

## *COHUNA HOSPITAL LADIES AUXILIARY REPORT*

1<sup>st</sup> March 2011 to 28<sup>th</sup> February 2012

The Hospital Auxiliary has once again had a successful year.

This year was somewhat quieter as it was decided not to hold a large fundraiser in March. Instead we held a major raffle of accommodation in Echuca which included activities to be taken during the visit. We thank Beth and Charlie Wood for the very kind donation of their unit for this raffle. During May we held our Mothers Day Street Stall which once again was very well patronized. June, July and August were very quiet months with most of our members away, however we did cater for the Annual Indoor Bowls Tournament which once again proved to be very successful. Our Oaks Day in November was a great day which was run on a Black and White theme including the making and wearing of paper hats. Most people took up the challenge which made for a successful, fun day. The annual Christmas stocking was the best we have had to date as far as the amount of money raised. The stocking was well stocked and we thank everyone who donated the goods.

DON Anne Graham and CEO Rob Bulmer attended as many meetings as they were able and kept us informed of life in our hospital. We thank them for their time. Thank you to the entire auxiliary for their hard work and time over the past two years, they really are an amazing group of ladies to work with. Finally my thanks to Wilma and Claire for the time they have dedicated to their office, and in helping me and the auxiliary to have another successful year.

### **Wynsome Jackson (President)**

<b>Ladies Auxiliary Executive for 2012</b>	
<b>President</b>	Sandra Hancock
<b>Secretary</b>	Marion Payne
<b>Treasurer</b>	Margaret Henry

**BOARD OF MANAGEMENT**

<b>Name</b>	<b>Date Appointed</b>	<b>Term Expires</b>	<b>Profession/ Occupation</b>	<b>Representative on Health Service Committees</b>	<b>Board Meetings Attended</b>
Lois Drummond	01.11.2005	30.06.2014	Sessional Teacher	Board Executive, Finance, House, Audit, Medical Appointments, Quality Improvement	82%
Cameron Hodge	01.07.2008	30.06.2013	Self Employed Owner Farmer	Board Executive, Finance, Audit, Medical Appointments	54%
Geoff Hall	01.11.1994	30.06.2015	Business/ Marketing	Board Executive, Audit, Finance	100%
Ron Stanton	01.01.2000	30.06.2014	Insurance Owner	Board Executive, Finance	82%
George Payne	01.03.1999	30.06.2014	Retired Engineer	Audit, Finance, House, Medical Appointments, Quality Improvement	91%
Della McGraw	01.11.2004	30.06.2013	Retired Self Employed	Medical Appointments, Finance, House, Quality Improvement	100%
Graeme Smith	01.08.1984	30.06.2015	Self Employed Business Owner	Finance	82%
Ron Nicholls	01.11.2005	30.06.2013	Retired Broker	Finance, House	91%
Lorraine Learmonth	01.02.2010	30.06.2015	Neighbourhood House Co-ordinator	Finance, House, Quality Improvement	91%
Bernice Mackenzie	01.07.2008	30.06.2013	Business Manager	Board Executive, Finance, House	73%
Kim Hore	01.11.2008	30.06.2013	Relief Secondary School Teacher	Finance, House	82%