

125
Celebrating
1885 - 2010



Royal
District Nursing
Service

Bringing healthcare to you™



Royal District Nursing Service
Annual Report 2010

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THANK YOU

To the clients and staff of RDNS who have so graciously participated in this Annual Report, we extend our heartfelt thanks and appreciation. Thank you for allowing us into your homes and lives, for providing insight and understanding, and for generously sharing your stories.

Home and Community Care (HACC) services provided by Royal District Nursing Service are jointly funded by the Victorian and Australian Governments.

Flexible, Responsive, Efficient, Progressive.

These words are not just a list of ideas. They are an answer to the question of who we are, what drives us and why we do what we do.

This year, through our Annual Report, we'd like to demonstrate what these words mean to all of us at Royal District Nursing Service.



Our 1,664 staff cared for 34,907 clients. They made 1,818,305 visits,* delivering 697,363 hours of care. Our fleet of 605 cars travelled a total of 9.2 million km

* Visits include direct care and client-related contacts
NB: Figures comprise operations in Australia and New Zealand

From the Chairman and CEO

This year we celebrate 125 years of Royal District Nursing Service providing quality, caring and compassionate services. Whilst it is easy to look back, reflecting on the many and varied achievements and accomplishments of our staff and supporters over that time, our focus and attention is set firmly forward when considering the important issues confronting healthcare in the future.



Paul Montgomery



Dan Romanis

Four critical ideals that guide all of our activities are themed in various ways throughout this report – flexibility, responsiveness, efficiency and progressiveness – and we trust that you will gain valuable insights into our work and our directions which are in line with these important values.

Twelve months ago we reported on the path of growth and diversification which we had enthusiastically begun, with services and staff being appointed in Tasmania, and in Wellington and Auckland in New Zealand. This year we have continued that growth and established new services in parts of regional Victoria and in New South Wales.

Our program of worker health checks under the auspice of WorkSafe Victoria is now well established and we are currently looking at opportunities to extend this service offering more broadly, both within Victoria and interstate. This program, which has a strong preventative health underpinning, has taken us into a variety of different workplace environments. In parallel we have commenced a number of new initiatives addressing the needs of those with chronic diseases, including industry partnerships. These are important developments as the health industry's focus develops beyond the hospital

setting into an all embracing one in which the importance and value of community-based care takes higher significance.

Expanding our service through growth and diversification required changes to our management structure. We have complemented our already strong executive and experienced management group with a small number of new senior team members this year, bringing in experienced people from the corporate, consulting and New South Wales health sectors.

In June 2010, our Customer Service Centre commenced the delivery of a national telephone-based health advisory service under contract to government and this, together with a number of eHealth directions and initiatives in which RDNS is involved, heralds potential new areas of healthcare services and opportunities.

As we grow RDNS services beyond Victoria, we are ever mindful of the important work which our staff has undertaken across the greater Melbourne area day-by-day for the last 125 years. The Governor-General Quentin Bryce officially launched our 125th birthday year on 17 February atop the Eureka Tower. Looking out across modern Melbourne, we were given a moving account of the work of current RDNS nurse Catherine Quinless.

She reminded us in vivid and evocative form of the compassion each nurse brings to the delivery of care and the quality of the services provided.

Financially, the company has maintained a solid and sound position and whilst the value of some investments together with income earned on investments has continued to disappoint, our underlying focus on maximising the resources applied towards supporting client care has continued. The financial balance which not-for-profit organisations like RDNS need to achieve, between maximising services today, planning to develop and investing in future service needs for tomorrow and maintaining a healthy balance sheet cannot be underestimated. Our Board is very conscious of the valued support we receive from our staff, our funders, our supporters and our donors and considerable rigour continues to be applied in pursuing and maintaining strong and sustainable risk management and financial management practices and policies.


In November 2009 Jillian Pappas retired from the RDNS Board of Directors after nine years of service, including four years as Chairman. Jillian's leadership and focus on sound governance principles was valued by directors and management at RDNS and we wish her well for the future.

We have been undertaking a search for future directors and hope to soon be able to appoint someone with experience of the health industry in New South Wales. During the year we established a Board for our wholly owned New Zealand subsidiary company, RDNS New Zealand and have been successful in appointing three highly regarded and experienced New Zealand directors to that Board.

We thank our directors for their diligence and application to the governance of the affairs of RDNS. There is much for our directors to be concerned with and their support has been invaluable. Our senior management team has worked hard and applied themselves with great commitment to the many challenges and opportunities described in this report and we similarly thank them for their work.



Paul Montgomery
Chairman



Dan Romanis
Chief Executive Officer

Operational Highlights

Business development, progress in technology and success in research and education underpinned our many achievements throughout the year.

BUSINESS DEVELOPMENT

- Established new services in parts of regional Victoria and in New South Wales. Began providing services to around 30 Local Government Areas on behalf of the Department of Veterans' Affairs (DVA) under their Community Nursing Program. Also won the tender to provide more DVA funded services throughout all regions of metropolitan Melbourne. Appointed as an approved provider of domestic assistance, personal care and in-home respite by the HomeCare Service of New South Wales.
- Commenced initiatives addressing the needs of people with chronic diseases, including a partnership with Healthways Australia, resulting in people having access to integrated care at home that comprises nursing, allied health, domiciliary care, care coordination, telephonic and web-based support and telemonitoring.
- Introduced a new online referral system on the RDNS website, allowing prospective clients, family members and friends to make direct referrals to RDNS. This is part of our ongoing commitment to meet the changing needs of the community, as well as staying in touch with evolving modes of communication and technology.

REVIEWS AND BENCHMARKING

- Client satisfaction survey measured the opinions of 1,600 randomly selected clients regarding service delivery. A satisfaction result of 89.6% was received – 3.8 points higher than the industry benchmark. Above industry scores also received in key performance areas such as: how well nurses explain treatment and care; the technical skill of nurses; respect for clients and carers; the likelihood of clients recommending RDNS to others.
- Satisfaction of the RDNS Customer Service Centre (CSC) was surveyed. In-depth telephone interviews were conducted with almost 300 customers. Findings showed the CSC is achieving a high level of customer satisfaction (93%). Health professionals indicated 84% satisfaction, showing that we need to continue to address this aspect of our customer service to bring it in line with overall satisfaction levels.

From little things big things grow:
125 years of RDNS



RECOGNITION AND AWARDS

- Success in the 2009 Minister's Awards for Excellence in Aged Care with RDNS winning in the 'Excellence in Training and Staff Development – Community' category for the successful implementation of a training program to support the employment and integration of Division 2 Registered Nurses. High commendations received for our recent efforts in field-based computing and leadership in cultural liaison.
- Success in the Victorian Public Healthcare Awards with 'High Commendations' in two categories: the 'Premier's Award' category for the work of RDNS' Homeless Persons Program; and the 'Minister's Award' category for our commitment to cultural liaison.

TECHNOLOGY AND INFRASTRUCTURE

- A comprehensive refresh of the entire fleet of over 1,000 mobile computer devices was conducted. These devices represent the most important tools-of-trade for our clinical workforce, providing real-time access to client information, scheduling, on-line medical resources, email and other important functions to assist in the delivery of care.

Major improvements include: extended battery life, a three-fold increase in connectivity speed and the introduction of a superior standardised operating system. Each of these advances allows nurses to more fully and efficiently dedicate their time to client care.

RESEARCH AND EDUCATION

- RDNS' 'Leg Ulcer Prevention Program' (LUPP), led by the RDNS Helen Macpherson Smith Institute of Community Health, was completed and delivered substantive outcomes.

LUPP comprised a tailored client education package developed by RDNS clinicians and researchers, which was implemented and evaluated at eight RDNS sites.

The multimedia package was designed around key elements that influence venous leg ulcer healing; promote chronic disease management; optimise recurrence prevention; and which are conducive to better health and wellbeing. Refinement and full implementation of LUPP will be progressed as a priority in 2011.

HEALTHCARE REFORM

- Significant developments on the national healthcare front prompted an active response, with RDNS remaining firmly committed to ensuring that health reform delivers increased access, better services and more community-based healthcare options.

In a submission to the Senate Finance and Public Administration Committee, we commented further on COAG reforms relating to health and hospitals. We acknowledged that the Australian Government is taking on the challenge of introducing reform of Australia's healthcare system, but expressed concerns that the majority of funds and new spending appears to be allocated to existing programs.

We recognised there are many positive elements to the reforms in train but maintained that sustainability can only be assured if funding is shifted from the in-patient setting to the full spectrum of the community setting with a focus on keeping individuals and the community well, and less reliant on high-tech and expensive hospital treatment.



Staff Achievement Awards

The Staff Achievement Awards is a peer-nominated, annual awards scheme which recognises RDNS staff for their accomplishments. The awards identify excellence in client and customer service, leadership, innovation and creative thinking.

Graduate Nurse Award

Erica Stewart, Moreland

Beyond the Call of Duty Award

Sharon Marshall, Berwick

Client Care Award

Santos Barrientos, Camberwell

Sharyn King, Moreland

Catherine Quinless, Berwick

Leadership Award

Janeen Rees, Frankston

Star Performer Award

Janie Beckhouse, Rosebud

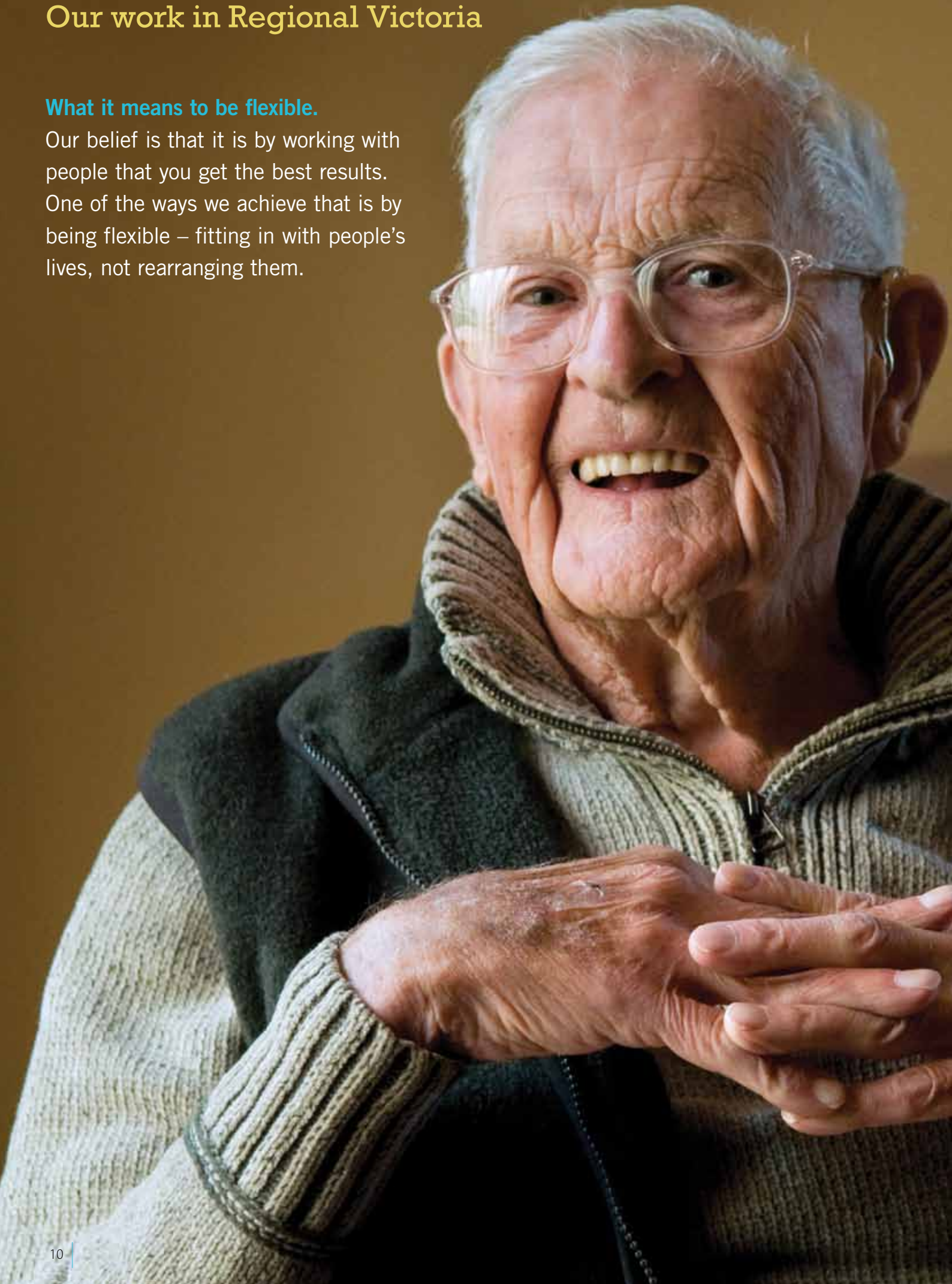




Our work in Regional Victoria

What it means to be flexible.

Our belief is that it is by working with people that you get the best results. One of the ways we achieve that is by being flexible – fitting in with people's lives, not rearranging them.





The first thing you notice about Gordon is the twinkle in his eye. It is playful, mischievous, boyish. It speaks of his long and eventful life, laden with experiences and brimming with memories. It speaks of his love of his family, his community and his love of life. And it protests the decline of his body as it has fought its battle with cancer over the last twelve months.

At first, doctors gave him only weeks to live, but the furnace that fires that ever-present glint in his eye has kept him going for a lot longer than that. He has seen out another Christmas and has enjoyed the frequent visits of his friends and family, even challenging his granddaughter to a recent wheelchair race.

His wit is keen, his mind engaged, his memory sharp. He recalls his days as an avid amateur carpenter, building boats, furniture, dolls' houses and the like. His stories of long days spent fishing, his love of the saxophone and his enjoyment of photography are rich and colourful.

And there is the jewellery shop. He and Flora, his wife of 60 years, opened the very first jewellery shop in Wodonga. On their first day, Flora and Gordon recall in perfect unison, they were inundated with 23 broken chiming clocks. It sparked the start of a family dynasty that continues today: the same shop, in the same location, is still going strong; these days run by their son and daughter-in-law.

But the last year has been hard on Gordon and Flora. His cancer attacked with devastating force, leaving the couple reeling physically and emotionally. Flora tried help from another healthcare provider but says she was left stressed and anxious after a spate of negative experiences.

After a desperate call to the local palliative care service, she was put in touch with RDNS, newly established in the town and eager to help local residents at their point of need. Flora remembers the sense of relief that washed over her as RDNS nurses Jo and Pauline entered their lives. Quickly the two experienced nurses, both local residents, went about assessing and attending to Gordon's nursing needs. They arranged the home to suit Gordon and Flora's way of living, while ensuring he got the care he needed, and visited at times that best suited this much-loved local couple.

With obvious heartfelt appreciation Flora explains: "It was such a relief, not only for Gordon but for me," placing a hand on Pauline's arm in a tactile show of gratitude. "We are so lucky to have them. I was in such shock early on with Gordie," she says.

Gordon nods his agreement. Flora explains how their daughter was afraid that he'd have to be in hospital a lot, given his condition. "No! Home delivery is better!" declares Gordon emphatically.

Pauline and Jo see the couple twice a day, every day. That's the way it has been for six months. That's the way it will remain as long as it is needed. Gordon's medical needs are considerable and they require skilful and patient hands. It brings Flora and Gordon's whole family relief knowing that their parents are in such hands.

As the sun gently warms Gordon in his favourite spot in the front yard, one can sense summer is not that far away. Summer, Christmas and maybe even a wheelchair race or two.

Our work in New South Wales

What it means to be responsive.

It's not enough to just let the world go by. Not when there's much to be done. With so many people in need of professional care, RDNS is perfectly positioned to answer the call. And answering it we are.

At 87 years old, Jack has had his fair share of challenges in life. He explains nonchalantly that he got through the war pretty well, recalling wistfully his three lengthy tours of duty and the fact that many of his mates got "banged up pretty badly". He was an air gunner on a Beaufort Bomber and saw action in many parts of the world. Ironically though, it was his love of rugby, skiing and golf that has required him to undergo four knee operations and two hip replacements.

He endured those procedures with the same resilience that got him through the war unscathed and enabled him to run a successful importing business in Sydney for many years. And his resilience has been tested again in recent times. It started with a fall in the middle of the night, one from which he couldn't pick himself up and for which the ambulance was called. "Once the ambos are called, it's hospital," Jack quips. It began a series of trying events that ultimately saw him in hospital for a long period of time.





Multiple scans and a battery of other tests revealed a number of clots on Jack's brain, for which he needed urgent cranial surgery. Jack points to the fine, faint line on his forehead, as he sits in the sun in the garden of his home in Sydney's northern suburbs. In the background, boats zigzag their way across the harbour and Jack relaxes on the back veranda of the house that he and wife Von bought in 1960.

He says that it was a long and testing episode for both of them. Four hospitals in eight weeks, he explains matter of factly, with Von travelling through Sydney traffic multiple times a week to support him. "I just wanted to get home!" Jack exclaims. And home he was able to come, once the threat of his initial situation had been addressed. But he needed support to get there, and Von needed support as well.

At the suggestion of the hospital discharge planner, and under the

Department of Veterans' Affairs Community Nursing Program, Jack did come home. Waiting to assist him was Kim and her colleagues from Royal District Nursing Service.

It's new territory for RDNS, the first time in New South Wales. It's new territory for Kim as well, who had previously worked in hospitals but was looking for something that would provide deeper involvement with clients and more continuity of care. Kim and her colleagues visit Jack everyday and have also linked him into podiatry and physiotherapy services. He has improved greatly, growing stronger with each visit, but there is still more work to do, and Kim will be there to do it.

"She's a wonderful girl, this Kim," says Jack, acknowledging that without the help of Kim and her colleagues, life would be very different. His gratitude is obvious, but as a self-made businessman,

war veteran, proud father of four and grandfather, he says he initially found it hard to accept the subsidised care that exists to help people just like him. Kim and Von reassure him that after a lifetime of giving to the community, it is his turn to receive the care that he needs to give him back quality of life and restore his independence.

The breeze has lifted as the sun plays in between the clouds. Von asks Jack if he is getting cold, as Kim completes her notes for the morning. "No, I'm fine thank you," says Jack, looking out on the view that he has enjoyed for half a century. Today though, after so long away from home, the stunning seascape seems just that little extra special for Jack.

Our work in Melbourne



What it means to be efficient.

Life can be busy. Particularly for families. That's why we are committed to providing care that is time effective and efficient. Which means more time for clients to enjoy life.

It's a beautiful day in Mount Evelyn in Melbourne's hills. The countryside is lush, evidence of the bountiful supply of rain over recent months. But local resident Cheryl knows not to be fooled by the abundance of luxuriant foliage. Within a few short weeks Melbourne's summer will strike with force and the green vistas will quickly turn brown and dry as a tinder box. "We have a really easy disaster plan – we jump in the car and we're out of here!" she says with straightforward bluntness.

Her sons Jarryd and Keagan shoot her a knowing look; they've seen their mother's determination many times in their life. And determined you have to be when you are raising a set of twins with cystic fibrosis.



Cheryll remembers the early days, when she was told her newborns were suffering from the menacing condition. The announcement left her numb and despairing.

With a daunting new world to navigate and as a single mother, it was with fear and trepidation that Cheryll stepped out into the unknown. "They were the hardest twelve months of my life," she recalls. But step out she did. And now, 15 years later, her sons have grown into young men, replete with the exuberance and mischievousness of adolescence.

The cystic fibrosis community is a close knit one, but with Jarryd and Keagan, there is a deep union. Unique and individual in their own right, they naturally share the special ties that being a twin brings, and the even deeper bond of sharing one of life's more cruel medical conditions.

But, with energy that stands in defiance of their condition, they tackle their days with spontaneous enthusiasm and, as far as they are able, refuse to let their condition get in their way. Their weeks consist of the usual raft of activities: school, homework, friends, computer games and walking their dog Diesel.

But every second week they have an important appointment with RDNS. Today it's their nurse Katie who visits, maintaining a watchful eye over their health, carefully monitoring them for signs of deterioration or possible infection, before guiding them in exercises to clear the sticky mucous from their lungs. On other visits, it's Julia, one of RDNS' physiotherapists, who applies her skill and considerable influence to oversee an even more rigorous regime of physiotherapy. It means that the boys' lungs remain as clear as they can, and with that comes less risk of infection and complications, which means less time in hospital.

Jarryd expresses his disapproval of hospital and is grateful for Katie and Julia's visits, as it allows him to live his life less interrupted. Keagan on the other hand declares his like of the hospital ward, before Jarryd enthusiastically dispels the myth by pointing out: "Keagan only likes it for the food!" Keagan nods a cheeky smile: "I eat everything," he winks.

The relationship between the boys and Katie is relaxed and trusting. Although all would prefer a life without CF, they are glad to have access to healthcare that comes to them: efficient, focussed and effective, helping them to live relatively normal lives. RDNS has been there since they were babies, and Cheryll says that without the help from the many RDNS nurses and physios over the years, things would have been more difficult. "We've been lucky to have them, especially early on. Apart from anything else, it's meant I haven't had to do it alone," she says, recalling the long journey her family and RDNS have travelled together.

And travel is what is at the top of the twins' minds, for within a few days they will be setting off to Fiji on holiday. Cheryll is also looking forward to the break; well-deserved and an important opportunity to recharge. For she and the boys know that soon enough, they will return to their "slice of heaven" in the foothills and continue their life journey, with all of its highs and lows, and with RDNS as their companion for as long as they need them.



Our work in Research and Education



What it means to be progressive.

It's easy to rest on one's laurels or just follow the crowd. We'd prefer to lead the way, particularly when it comes to best practice. Our Leg Ulcer Prevention Program is doing just that.



As the oldest of 10 children, Glen knew from an early age what it meant to work hard. At just three, she was walking to the shops to fetch daily supplies – money in one hand, shopping list in the other. She still works hard, but these days it's for different reasons.

Burdened by what she calls “dodgy hips”, these last years have been physically and mentally demanding, with multiple operations, diabetes and other ailments afflicting this cheery and warm-hearted grandmother. Her mood remains upbeat though and she says she is relaxed most of the time. She isn't phased by too much she insists, but the sight of blood “gushing out of a huge hole” in her leg recently left the 73-year-old rattled.

“Back as a kid, mum just put mercurochrome on everything!” she says with a laugh, aware of the reality that a good dose of the old-world antiseptic was not going to fix this latest problem. Glen had a serious leg ulcer which needed urgent attention. It was then that Glen met Royal District Nursing Service.

Initially it was about bringing the nasty wound under control. Soon though, when good progress had been made, Glen was invited by her nurses to participate in RDNS' Leg Ulcer Prevention Program (LUPP). LUPP is a new program at RDNS, pioneered by researchers within the RDNS Helen Macpherson Smith Institute of Community Health, which aims to educate and involve clients in the care

of their leg ulcers, using the latest evidence-based nursing care. It involves a multi-media education program presented by RDNS nurses to their clients in the comfort of their home and at the pace they require.

Glen's nurse Briony explains that Glen was an enthusiastic participant in LUPP, keen to understand the causes of her leg ulcer and how to best treat it and even keener to reduce the risk of it recurring. With time and patience Glen, Briony and her other nurses worked through the program and, like so many other RDNS clients – some of whom had suffered leg ulcers for years – Glen's ulcer healed within a matter of weeks.

Glen admits that at the outset she was nervous that her ulcer wouldn't heal and that she would be stuck with a chronic condition. “But as I did the Leg Ulcer Prevention Program, I became more confident and had a belief that it would heal,” she explains. “Being able to see pictures and hear the information with my nurses was a real help.”

Briony agrees, explaining that LUPP helps people to understand the process required to heal their leg ulcer and to take small steps at their own pace. “It encourages people to be more involved in their own care, which increases the chances of healing and of ulcers staying healed.”



Glen says that LUPP, which started as a pilot study at a handful of RDNS sites, is the reason that she achieved such good healing in a short period of time. “I don't think this would have healed without the program. I've got these dodgy hips; I'm diabetic. I just couldn't have got to a doctor three times a week for treatment,” Glen says, adding that being seen at home by RDNS brought “a great sense of relief.”

And it is at Glen's home, with its lively garden and rich bird life, that Briony finds herself again, this time for a bad cut that Glen received to her leg when getting out of her car. Briony says that there is no infection so she is hopeful it will heal with normal treatment. But Glen is reassured that if it does turn into another nasty ulcer, Briony, her colleagues and the LUPP manual are just a stone's throw away. And that brings a smile to Glen's already cheerful face.

Financial Summary

INCOME STATEMENT for the year ended 30 June 2010

	RDNS 2010	RDNS 2009
	\$	\$
REVENUES		
Revenue from Continuing Operations	103,764,432	95,522,645
Net Gain / (Loss) on Disposal of Property, Plant and Equipment	12,723	(86,004)
Total Revenue	103,777,155	95,436,641
Total Expenses	103,198,558	95,796,521
Surplus / (Deficit) from Continuing Operations	578,597	(359,880)
Restricted Purpose Reserve Transfer	–	37,733
Net Surplus / Deficit	578,597	(322,147)

BALANCE SHEET as at 30 June 2010

	RDNS 2010	RDNS 2009
	\$	\$
Total Current Assets	12,004,867	13,166,058
Total Non Current Assets	21,498,101	19,889,678
Total Assets	33,502,968	33,055,736
Total Current Liabilities	20,889,878	21,654,295
Total Non Current Liabilities	2,752,924	2,813,103
Total Liabilities	23,642,802	24,467,398
Net Assets	9,860,166	8,588,338
Reserves	3,589,423	2,896,192
Accumulated Surplus	6,270,743	5,692,146
Total Equity	9,860,166	8,588,338

Our Executive Team



Dan Romanis
Chief Executive Officer



Dr Georgia Hinton
Executive General Manager
New Ventures



Rosemary Hogan
Executive General Manager
Service Delivery



Kris Hume
Executive General Manager
New South Wales



Anushiya Ponniah
Executive General Manager
RDNS New Zealand



Vicki Sutton
Executive General Manager
Corporate Services



Stelvio Vido
Executive General Manager
Projects and Business
Development



David Aberdeen
General Manager
Human Resources



Anthony Boffa
General Manager
Finance and Assets



Ian Cash
General Manager
Information Services



Dr Lisa Donohue
General Manager
RDNS Helen Macpherson Smith
Institute of Community Health



Evan Gordon
General Manager
Marketing and Planning



Fiona Hearn
General Manager
Director of Nursing
(North and West)



Mark Smith
General Manager
External Relations



Martin Wischer
General Manager
Director of Nursing
(South and East)

Thank you!

Our generous donors

We would like to thank the individuals, philanthropic trusts and organisations listed below for their wonderful support during the past year. We also sincerely thank the many donors whose names we have been unable to list.

Every gift is important. As we strive to keep pace with the demand for our services, your support is more important than ever.

If you can help RDNS please send your gift today or call RDNS on **(03) 9536 5222** to donate. You can also make a secure online donation at **www.rdns.com.au**

Major Donors – \$15,000 and over

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Danks Trust

Estate of the Late Glen W A Griffiths

Estate of Glykeria Lambrou

Alfred E G Lavey Trust

Lord Mayor's Charitable Foundation

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\$10,000 – \$14,999

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(see overleaf for details)

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Mrs Marjorie Vaughan
Mr David V Hahn
Mrs Gail Bennett



Facts & Figures

**THE RDNS GROUP:
NUMBER OF CLIENTS
TREATED FOR THE
YEAR 2009/10**

34,907

EXPLANATION OF TABLES AND GRAPHS

Visits and client-related contacts

Comprises face-to-face visits with clients as well as a count of 'client-related contacts', which are activities undertaken on behalf of a specific client though not in their presence. (For example, a visit to a client's GP, attendance at a case conference or time spent communicating with other service providers involved in a client's care).

Admissions by source of referral

The greatest proportion of referrals to RDNS continues to come from public hospitals where RDNS Liaison nurses are pivotal in coordinating discharge planning.

Top ten classification by occurrence

The table graphically demonstrates the diversity of conditions RDNS clients present with.

Visits by care type

The core focus of RDNS is clearly demonstrated to be the provision of support and maintenance services to clients in their homes.

THE RDNS GROUP: EPISODES OF CARE AND VISITS BY SUPPORT REGION/SITE

Region	Support site	Episodes	%**	Visits*	%**
METROPOLITAN MELBOURNE – EASTERN	Box Hill	2,390	6.2	101,955	5.6
	Camberwell	1,338	3.4	61,180	3.3
	Knox & Lilydale	2,920	7.5	141,603	7.8
	Eastern total	6,648	17.1	304,738	16.7
METROPOLITAN MELBOURNE – NORTHERN	Diamond Valley	2,715	7.0	105,347	5.8
	Heidelberg	1,864	4.8	63,990	3.5
	Moreland & Gisborne	2,619	6.7	106,533	5.9
	Yarra	1,191	3.1	58,088	3.2
Northern total	8,389	21.6	333,958	18.4	
METROPOLITAN MELBOURNE – SOUTHERN	Berwick	2,072	5.3	62,712	3.4
	Caulfield	1,692	4.3	102,271	5.6
	Frankston	1,970	5.1	83,375	4.6
	Moorabbin	1,758	4.7	140,959	7.8
	Rosebud	2,142	5.7	72,024	4.0
	Springvale	1,885	4.8	66,715	3.7
Southern total	11,519	29.9	528,056	29.1	
METROPOLITAN MELBOURNE – WESTERN	Altona	3,086	7.9	102,913	5.7
	Essendon	1,976	5.1	86,145	4.7
	Sunshine	3,884	10.0	107,011	5.9
	Western total	8,946	23.0	296,069	16.3
RALLY Healthcare total		58	0.1	2,380	0.1
Homeless Persons Program total		2,087	5.4	34,999	1.9
Customer Service Centre total				200,113	11
Liaison total		16	<0.1	45,695	2.5
REGIONAL VICTORIA	Regional Victoria total	15	<0.1	586	0.0
NEW SOUTH WALES	New South Wales total	37	0.1	684	<0.1
TOTAL AUSTRALIA		37,715	97.3	1,747,278	96.1
RDNS NEW ZEALAND	RDNS New Zealand total	1,067	2.7	71,027	3.9
TOTAL NEW ZEALAND		1,067	2.7	71,027	3.9
TOTAL		38,782	100	1,818,305	100

* Visits include direct care and client-related contacts

** % have been rounded up to 1 decimal point

**VICTORIA/NEW SOUTH WALES
TOP TEN ICD-9-CM* CLASSIFICATION OF DISEASES AND INJURIES:
NUMBER OF OCCURRENCES AND PERCENTAGE**

Classification of diseases and injuries within ICD-9-CM (Primary Diagnosis)*	Conditions at RDNS within the Main ICD-9-CM categories**	Occurrences	%
Symptoms, signs & ill-defined conditions	Urinary incontinence (8%)	7,178	17
Post Operative Care		6,369	15
Diseases of the skin & subcutaneous tissue	Leg Ulcers and Cellulitis (11%)	5,595	13
Injury & poisoning	Wounds (6%)	4,268	10
Neoplasms	Malignant Neoplasm (7%)	3,021	7
Endocrine, nutritional, metabolic diseases & immunity disorders	Diabetes (6%)	2,962	7
Mental Disorders	Dementia (4%)	2,792	7
Diseases of the circulatory system		2,633	6
Diseases of the nervous system & sense organs	Multiple Sclerosis, Alzheimer's, Parkinson's diseases (3%)	1,968	5
Genitourinary system	Urinary retention (2%)	1,126	3
Other		4,215	10
Total		42,127	100

As in the past years ulcers remain the highest diagnostic reason for admission to RDNS.

* International Classification of Diseases (9th Revision) Clinical Modification.

** Each ICD-9-CM classification consists of a number of conditions.

This figure represents the frequency of the conditions' occurrence within the ICD-9-CM classification.

**VICTORIA/NEW SOUTH WALES
VISIT HOURS BY CARE TYPE**

	Support and maintenance	Acute / Post acute	Palliative	Other	TOTAL
Visit at home	440,733	19,856	24,934	56,942	542,465
Visit at school / work	3,278	171	71	10,741	14,261
Visit to hospital (liaison)	455	311	73	10,222	11,061
Visit to hospital (not liaison)	560	0	17	1,616	2,193
Client attended centre	1,879	180	6	5,163	7,228
Bereavement visit	82	3	298	54	437
Other	151	0	0	2,184	2,335
Total	447,138	20,521	25,399	86,922	579,980

NB: Visit hours exclude client-related contact hours.

**VICTORIA/NEW SOUTH WALES
PERCENTAGE OF CLIENTS BORN IN ENGLISH/NON-ENGLISH SPEAKING COUNTRIES**



**VICTORIA/NEW SOUTH WALES
CULTURAL DIVERSITY OVERVIEW**

Cultural Diversity of Client Population

- RDNS clients originate from 154 countries.
- RDNS clients speak 118 languages.
- 35% of total RDNS clients are born in non-English speaking countries.
- 0.7% of total RDNS clients are Aboriginal and/or Torres Strait Islander.

Language Services

- 6% increase in the use of accredited on-site interpreters.

Staff

- RDNS staff speak 39 languages.
- 10% RDNS staff speak a language other than English.

**VICTORIA/NEW SOUTH WALES
CLIENT ADMISSION BY SOURCE OF REFERRAL**

Source	Admissions	%
Acute hospital / public	10,764	38.1
Local doctor	2,531	9.0
Acute hospital / private	1,624	5.8
Relatives, friends, neighbours	1,910	6.8
Self Referral	1,495	5.3
Extended care rehabilitation facilities	338	1.2
Palliative care / hospice	1,586	5.6
Other Community Health Service	1,230	4.4
Other community service non-health	240	0.9
Aged Care Assessment Team	772	2.7
Nursing home / hostel / other residence	96	0.3
Respite care – except palliative	18	0.1
Mental health / psychiatric service	9	0.0
Other	5,621	19.9
Total	28,234	100%



NEW ZEALAND MAIN STATISTICS

Statistics	No.
Staff (carers)	109
Staff (office)	15
Clients visited	1,067
Visits made	71,027
Hours of care delivered	117,383
RDNS cars	3
Distance travelled	257,118 km

Our Directors



Noel Armstrong



Jan Begg



Desmond Benjamin



Peter Brindley



Marion Lau



Paul Montgomery



Dr Michael Murray



Professor Leon Piterman



Michael Roberts

NOEL ARMSTRONG

FPRIA

69, RDNS Director since 2006;

Deputy Chairman since 2009

**Member of RDNS Board Committee: Audit and Risk,
Remuneration and Nominations**

Noel's expertise in strategic communication is supported by over 35 years experience in the industry. Prior to moving into corporate and public affairs in 1972, Noel had worked for newspapers and radio; and produced television news and current affairs programs.

In 1978, Noel established a Victorian-based strategic communications consultancy which he sold to Hill and Knowlton in 1989. He continued to work as General Manager, Victoria, before becoming Chief Executive of the company's Australian operations.

He was later appointed Executive Chairman of Hill and Knowlton Australia and New Zealand and Executive Vice President of the company in the Asia Pacific Region.

In 1996, Noel became the Director of Corporate Affairs at Epworth Hospital and worked there until his retirement in May 2006. During that time, Noel worked on the integration of the Freemasons business with the Epworth Group and was partly responsible for the overall administration of the three hospital campuses at Richmond, Box Hill and Brighton.

Whilst working at Epworth, Noel successfully established a company to assess and analyse the customer performance of call centres of major corporations throughout Australia. Noel is also a past member of the Board of Management of Alexandra District Hospital.

JAN BEGG

BSc (Hons), MBA, FAICD

53, RDNS Director since 2004

Member of RDNS Board Committee: Assets

Jan has extensive experience at senior executive level in the areas of strategic consulting, project management, sales and marketing, change management, software development and business unit management.

As an experienced consultant, Company Director and Executive Manager, Jan brings a sound understanding of organisational change initiatives to RDNS - from strategic planning to harvesting benefits from successful implementation.

Jan's recent experience includes corporate governance of major projects at ANZ Banking Group, project setup and business case development for the Victorian Public Service and pharmaceutical research and development project management.

She has also consulted to major government and corporate business within Australia, New Zealand, UK and USA and is active in developing scholarship funding for the Melbourne Business School.

Apart from her role at RDNS, Jan is also Managing Director of Azulin Pty Ltd and a Fellow of the Australian Institute of Company Directors.

DESMOND BENJAMIN

FGAA FAICD

68, RDNS Director since 2001

Member of RDNS Board Committee: Audit and Risk

Des has had extensive experience as a Director, Chief Executive, Non-Executive Director, Chairman and Board consultant across a broad spectrum of both public and private companies.

His honorary work has included past President of the Company Directors Association, Save the Children, Toorak and South Yarra Rotary Clubs and Life Education.

Des was also a past Zone Chairman of the Salvation Army Red Shield Appeal and a past Treasurer of the Toorak Red Cross.

Apart from his responsibilities at RDNS, Des is currently a shareholder and Director of a privately owned home garden and agricultural chemical supplier and a Non-Executive Director of a privately owned retail lifestyle chain and has a consultancy business.

PETER BRINDLEY

Bachelor of Commerce (Economics & Finance), Grad Diploma of Business (Accounting), CPA

44, RDNS Director since 2009

Member of RDNS Board Committee: Assets (Chair)

Peter is a senior manager with a breadth of experience across various business disciplines in both local and international environments.

With a strong background in finance, strategy, sales and operations Peter has worked in key strategic planning and finance roles of major organisations such as Dulux New Zealand, Orica New Zealand and ICI Australia, as well as in general management roles in both mature and start-up businesses.

Peter has held various directorships and specific legal entity, statutory compliance and public relations responsibilities during his career. He is currently working with the RACV as General Manager, RACV Home Services.

MARION LAU OAM JP

RN Div 1; RM; Certificate in Gynaecology, Diploma in Nursing Administration; Bachelor in Health Services Administration (BHA)

67, RDNS Director since 1996

Member of RDNS Board Committee: Clinical Governance

Marion has excelled as an aged care consultant, registered nurse and midwife and is also a mentor and business coach to the health industry and small business.

Her vast experience includes Matron/Manager - Avenue Hospital, Windsor, Administrator and Advisor for the Commonwealth Department of Health & Aged Care; Justice of the Peace; Director - Management Consultants and Technology Services; Member - Ministerial Small Business Advisory Council; President - Chinese Health Foundation; Past President - Chinese Community Society of Victoria and Past Chair - Ethnic Communities' Council of Victoria.

Marion was the first woman to be elected as Chair of the Ethnic Communities Council of Victoria – the Victorian Peak Body for Ethnic Specific Organisations, as well as the first woman President of the Chinese Community Society of Victoria.

She was awarded an Order of Australia in 1996 for her services to older Australians, as well as to the Chinese community. In recent years, she received the Centenary Medal for her services to multiculturalism and for her work as Chair of the Victorian Ethnic Communities Council.

Other roles currently held by Marion include Executive member – Ethnic Communities' Council of Victoria; President 2009/2010 and Charter Member – Rotary Club of Elsternwick; Director – Doutta Galla Aged Services; Member – Small Business Mentoring Service; Victorian Multicultural Business Advisory Council Member; Member, The Royal Children's Hospital Bioethics Development Board; Member – Policy Council, Council of the Ageing.

PAUL MONTGOMERY

BA, LLB (ANU)

61, RDNS Director since 2005; Chairman since 2009

Member of RDNS Board Committee: Assets, Remuneration and Nominations (Chair)

Paul was a partner of the leading law firm, Freehills, in Melbourne for 28 years. The last 12 years were as managing partner of the Melbourne practice.

He is a director of Medisecure Pty Ltd, Now Hiring Pty Ltd, Katani Clothing Company Pty Ltd and Treelots Pty Ltd – all active businesses.

In addition to RDNS he is a director of the Mental Illness Fellowship, Victoria.

DR MICHAEL MURRAY

MBBS, FRACP, MPH

50, RDNS Director since 2004

Member of RDNS Board Committee: Clinical Governance (Chair), Remuneration and Nominations

Michael brings a broad range of management, clinical and clinical teaching experience to RDNS.

He has extensive professional networks in aged care including National Evaluation of the Innovative Care (Rehabilitation) Services Steering Committee; Continence Management Advisory Committee; Care of Older Australians clinical reference group Australian Centre for Evidence Based Aged Care (La Trobe University); Australian Association of Gerontology (Vic Branch); Continence Foundation of Australia (National); Lynden Aged Care Association Board of Governance; Australian Society for Geriatric Medicine and the International Continence Society.

Apart from his roles at RDNS, Michael is also Director of Geriatric Medicine - St Vincent's; Fellow - Australian Association of Gerontology (FAAG) and Adjunct Associate Professor – Australian Centre for Evidence Based Aged Care (ACEBAC) Latrobe University and Adjunct Associate Professor – University of Notre Dame.

PROFESSOR LEON PITERMAN AM

MBBS, MMed, MEdSt, MRCP(UK), FRCP (Edin) FRACGP

62, RDNS Director since 2006

Member of RDNS Board Committee: Clinical Governance

Leon has extensive expertise in medical education, medical research and clinical audit.

He has published widely on clinical and educational issues related to general practice and was awarded the F.H. Faulding Prize for research in General Practice in 1987, the Silver Jubilee Teaching Prize in 1992 and the Hong Kong College of General Practitioners Award for best research project in 1994. He has over 90 publications in refereed journals and co-authored the text "General Practice Psychiatry".

In June 2006, he was made a Member of the Order of Australia (AM) for service to family medicine through distance education for doctors in remote areas, to research and student training, and to international education.

Apart from his roles at RDNS, Leon is also Professor of General Practice - Monash University; Head of School - Primary Health Care and Deputy Dean - Faculty of Medicine Nursing and Health Sciences. He is also a member of the Board of Examiners of the Australian Medical Council and sits on numerous university, professional and government expert committees.

MICHAEL ROBERTS

Registered Nurse, Grad Dip Bus Admin

54, RDNS Director since 2005

Member of RDNS Board Committee: Audit and Risk (Chair)

Michael has more than 27 years experience in healthcare as a nurse, clinical service manager, and consultant. He worked in senior management and clinical roles at St Vincent's Hospital Melbourne and other hospitals.

Apart from his roles at RDNS, Michael is also a Director of Iridium Consulting - a Melbourne based healthcare consultancy. He specialises in problem solving, change management, service redesign and planning. Iridium's clients include health departments, professional bodies, hospitals, community services, aged care services and mental health services. He is also active in several community service fields.

Corporate Governance Statement

On 31 March 2003 the Australian Stock Exchange released the ASX Corporate Governance Council's Principles of Good Governance and Best Practice Recommendations ('ASX Principles'). Those ASX Principles require major publicly listed companies to disclose in their annual reports whether their corporate governance practices follow the ASX Principles on an 'if not, why not' basis.

RDNS is not a publicly listed company and is not subject to the ASX Principles – indeed some of them are not applicable to the not-for-profit sector. For over ten years the Board of Directors of Royal District Nursing Service has worked, as a key priority, on the development and adoption of processes and practices which are aimed at achieving best practice in good governance in the not-for-profit sector. So, whilst not technically required to comply with the ASX Principles, RDNS Directors have determined to use them as the basis for continuing to revise and update their own practices.

The RDNS Board Charter, originally developed in 1996/97, sets out the basis by which the RDNS Board fulfils its role and the Charter Statement (1999) provides further guidance on the way by which the Board/management/staff interface operates.

In summary, the Board is a strong advocate of good corporate governance and seeks to ensure that all officers and employees of the company fulfil their obligations and their responsibilities to all stakeholders.

RDNS Limited's Subsidiary Companies

RDNS 2007 Pty Ltd (Trustee for the RDNS Charitable Trust)

Directors:

Paul Montgomery (Chairman)

Noel Armstrong

Peter Brindley

Royal District Nursing Service New Zealand Limited

Directors:

Don Hunn (Chairman)

Noel Armstrong

Anne Blackburn

Ken Mason

Paul Montgomery

Contact us

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