



2011  

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2012

TWENTY EIGHTH ANNUAL REPORT  
MANNINGHAM CENTRE  
ASSOCIATION INC

*Support services for older people*

## Our Mission

To assist older people in the Manningham community to sustain and reinforce their independence, social relationships, personal wellbeing and community interaction.

## Our Values

- PROFESSIONALISM throughout the organisation
- RESPECT and COMPASSION for the individual
- WILLINGNESS to operate in an open and consultative way
- INTEGRITY and adherence to high ethical standards
- COMMITMENT to excellence and continuous improvement
- OPENNESS to innovation
- SOCIAL JUSTICE within the local community
- SUSTAINABILITY into the future

## Board of Governance

Directors donate their services on a pro bono basis

Chairman	<b>David Meiklejohn AM</b>
Deputy Chairman	<b>Darrell Treloar</b>
Directors	<b>David Alcock</b> (from 20/6/12)
	<b>Ray Barrington</b> (from 14/12/11)
	<b>Cr Geoff Gough</b>
	<b>Ron Kitchingman</b>
	<b>Ray Lewis</b>
	<b>Terry Maher</b> (from 14/12/11)
	<b>Cr Stephen Mayne</b>
	<b>Erica Mounter</b>
	<b>Lyn Sowersby</b>



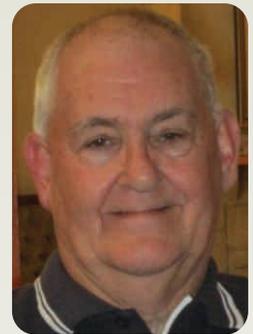
David Meiklejohn AM



Darrell Treloar



David Alcock



Ray Barrington



Cr Geoff Gough



Ron Kitchingman



Ray Lewis



Terry Maher



Cr Stephen Mayne



Erica Mounter



Lyn Sowersby

## Senior Staff (as at 30th June 2012)

Chief Executive	Ross Dawson
Finance Manager	Helen Zhou
Manager Support Services	Jenny Backholer
Quality Systems Coordinator	Shantel Farmer
Residential Services Manager	Dianne Jones
Cassia House Manager	Pat Fernandez
Doncaster Melaleuca Lodge Manager	Kay Plymin (to October 2011) Kim Greenham (from October 2011)
Manager Rehabilitation and Aged Care Packages	Bert Brown
Manager HACC and NRCP	Maree Lucas

## Associated Firms

Auditors	Saward Dawson
Bankers	Westpac
Quality Assurance Auditors ISO 9001:2008	International Standards Certifications Pty Ltd

## Chairman's Report

It is my pleasure to report to you as Chairman on MCA's 27th year of operation.

Although there was continuing uncertainty during the year regarding our demerger from the Manningham City Council, it was pleasing to see this was resolved at year end. We now have a greater degree of autonomy and independence as an organisation and can now work with the Council and other parties to map out the future strategic direction of MCA for the years ahead.

### Board Membership

During 2012 there were a number of changes to the Board.

Three long serving and distinguished Board members, Bill Larkin OAM, Ron Bunn and Barry Mernagh retired and I pay a sincere tribute to their contributions to MCA over many years. Bill had been Chairman of MCA since inception, Ron looked after our finances for many years and Barry served as Deputy Chairman for a significant period.

I thank them for their contributions and wish them well in their retirement.

During the year we welcomed to the Board Ray Barrington, Terry Maher and David Alcock and I thank them for their contribution over the past year and we look forward to their input in the years ahead.



Cassia resident: Joan Painter

### Life Memberships

The Board presented Life Memberships to Bill and Helen Larkin at our AGM on 9 November, 2011.

Bill and Helen have worked tirelessly for MCA for over 25 years and have contributed substantially to the successful organisation we are today.

As Bill wrote in last year's report, when he accepted the position of Chairman of the Board in 1984, "I saw a paddock, a few horses and the foundations of a building". Today those foundations have expanded into millions of dollars of facilities which support a substantial number of people from the Manningham community.

We all thank Bill and Helen for their dedication and commitment and wish them well for the future.

### Staff and Volunteers

On behalf of the Board I congratulate our CEO, Ross Dawson, and his competent Management team for the great job that they have done over the 2012 year. It was a difficult year as we were uncertain of the outcome of the continued negotiations with Council and the Government and I am pleased that our team was not distracted by these negotiations.

Many thanks to all of our volunteers who devote many, many hours to support and assist the workings of MCA and a special thanks to the members of our Promotions Committee and to our Friends of MCA Group for the great work they both continue to do to assist MCA.

And finally, I thank my fellow Board members, who are also all volunteers, for the support they have given to me and for the excellent contribution they make to our deliberations and decisions around the Board table.

### The Way Ahead

Now that we are in relatively clear air, we are pushing on with preparing a detailed strategic plan for MCA. Our financial position is sound and we wish to build on this sound base to enhance and improve the services we provide to all of the people who depend on us. We are considering firm plans for the next couple of years and are working to develop aspirational plans for some ten years out which is a challenge in the current economic climate.

However we do need to agree a collective vision for our future. The Board members and Management of the past 27 years have provided us with the great facilities we enjoy today and we need to plan how to continue to improve and grow the services and facilities we will provide in the future.

I look forward to the input and support of all of our stakeholders in this process.

David Meiklejohn AM,  
Chairman

## Chief Executive's Report

In around 500 BC, the Greek philosopher Heraclitus astutely observed that nothing endures but change. Looking back on the past year for MCA, this ageless truth has once again manifested itself. Our year has been dominated by uncertainty and change in more than a usual measure.

We were on the verge of signing a new agreement with Manningham City Council, transferring the full operational and reporting responsibilities for the two residential aged care facilities and aged care packages to MCA from 1st July 2011. However, a last-minute spanner in the works came when the Department of Health and Ageing insisted that the transfer meant Council needed to repay approximately \$1.3 million — being the remaining liability of a capital grant given to help construct Doncaster Melaleuca Lodge in 1997.

Council immediately put the transfer on hold. Resolving the matter took most of the financial year, but finally left the way clear for the agreement to be signed and effective from 1st July 2012. Throughout this time, MCA struggled with the uncertainty of not knowing how long the resolution process might take, whether the proposed agreement with Council would have to be renegotiated from scratch, what form a new agreement might take and even whether the Councillors might reconsider their decision. This made it extremely difficult to plan ahead strategically.

On a broader front, after extensive community consultation the Australian Government released its response to the Productivity Commission's "Caring for Older Australians" report (which was released in June 2011).

In the 10 months leading up to the Government's response in April 2012, the aged care sector generally was supportive of the thrust of the Commission's recommendations, but uncertain as to how many the Government would adopt or adapt and as to how much new money it would be prepared and able to devote to implementation. This too, added to the difficulties MCA had in planning ahead with any reasonable certainty.

Now the sector has a clear idea of the Government's blueprint for the future of aged care: it is one of significant change.

This longer-term future includes:

- greater consumer empowerment through choice and enhanced access to information,
- a much greater emphasis on supporting older people and their carers to remain in the community,
- a more integrated range of services, and
- more competition and initiatives in the areas of workforce and dementia.

While we welcome this blueprint, our future will be a challenging one — particularly as the Australian Government has chosen an initial path of funding some of the costs of this change through reallocating money away from residential aged care through reductions in the Aged Care Funding Instrument. MCA is already feeling the impact of this change, but is working carefully to adapt to this new world.



Ross Dawson

It is a similar story to our new agreement with Council, which ushers in important changes in our relationship. Council no longer has a controlling influence on the Board. Instead, that influence is exercised through performance objectives and a complex network of reporting arrangements and approval processes. Importantly, the agreement gives MCA the time and opportunity to provide Council with an inspiring vision for the future of the services we manage, such that a much longer agreement than the current three years is willingly offered.

MCA has much to look forward to in the coming year — and years. This includes:

- A new website, which is due to be launched shortly and will be far more informative and contemporary,
- The Board is also considering a change in the Association's name to more accurately reflect who we are and what we do,
- Planning for a range of capital improvements is expected to culminate in a rush of works in the second half of the 2013 financial year,
- The most notable activity though will be the steadily emerging influence of a 10-year plan the Board is expecting to adopt later in the current year.

Our achievements and the challenges we have overcome in the past year would not have been possible without the invaluable contributions of many fine people. Within MCA, this encompasses all our staff: from those doing the most menial — but nevertheless important — jobs, to those with high-level responsibilities for the overall management of a service. Likewise, our 100-plus volunteers, including those on our Board, who all give freely and generously of their time and talents.

To all, I extend my sincere thanks for making a real difference to the lives of those we serve.

Ross Dawson

## 2012 Current Services and Client List

Service	Client list
MCA Community Aged Care Packages (low care)	35
MCA Extended Aged Care at Home Packages (high care)	5
Doncaster Rehabilitation Services	343
Manningham Home Maintenance Service	700
Grevillea House – Planned Activity Group	156
Grevillea House – National Respite for Carers Program (NRCP) Overnight Respite	45
NRCP Employed Carers	25
NRCP Day Guest Respite	35
Doncaster Melaleuca Lodge (low care)	60
Cassia House (low and high care)	90



Vanni, our musical therapist spending time with Cassia resident Bach Le-Nguyen

## Awards

### VOLUNTEERS

#### Long-service Awards

**25 years:** Olimpia Hansen

**15 years:** Merle Beasley, Zohreh Rahulan, Clare Topp

**10 years:** Lorraine Botham, Glenyse Elliot, Noeline Letcher, Sandra McGarry, Pamela McMillan, Colette Saunders

**5 years:** Geoff Chandler, Rajni Gandhi, Vera Hampson, Wendy Harpham, Irene Heymig, Barbara Leung, Carolyn Sadler, Mary Whincup

### STAFF

#### Staff Award

Jade Jue Zhang

#### Education Awards

Paul Bronte, Philip Evered, Turina Harnett, John King, Anna Newman

#### Long-service Awards

**25 years:** Domenica Bianco

**20 years:** Debra Fraser, Helen Mazzolini, Marion McMillan, Pam Mountain

**15 years:** Anne Cameron, Angela Christou, Joan Hall, Barbara Wieladek

**10 years:** Darlene Balloch, Amalia Bloom, Brenda Corless, Kim Hannan, Satya Narayan, Maureen Storey, Prue Ryan, Vesna Trikilis

**5 years:** Nicola Brown, Hubert Brown, Julia Burns, Nicole Christou, Donato De Gregorio, Mary Doyle, Johanna Kelleher, Margaret Lugton, Dezie Marrison, Marina Patsiavos, Hongping Xiang

# Highlights, Challenges and Looking Ahead

## Corporate



**Dianne Jones**  
Residential Services Manager



**Jenny Backholer**  
Manager Support Services

### Highlights

- With our current website being designed nearly 10 years ago, and in preparation for our new agreement with Manningham Council to begin, we commissioned the design of an entirely new website. Our aim was to make this one contemporary, easy to use and informative. A website copywriter (Samantha Schelling) crafted the wording, while a website designer (Ben McAuliffe) constructed the digital framework and trained administration staff in maintaining it. We're expecting the new site to be launched early in the next financial year.
- We completed a comprehensive risk-management plan for MCA with help from Andrew Higgins of Cirk Risk Solutions, which the Board approved in September 2011. Risk assessment and management is now an established process, monitored regularly by the Board's Finance, Audit and Risk Committee.
- A further enhancement to risk management came with the Board's adoption of a clinical governance risk-reporting framework. The essence of clinical governance is to ensure the right things happen to residents/clients more often (by making it easy to do the right thing) and wrong things happen to residents/clients less often (by making it difficult to do the wrong thing). To this end, management gave — and will continue to give — the Board a comprehensive monthly report on key risk indicators.
- In June 2012, International Standards Certifications completed an annual audit of the compliance of our quality system with ISO 9001:2008; it subsequently approved continuing MCA's certification.
- Occupational health and safety, as measured by WorkSafe injury insurance, saw MCA maintain a three-year performance rating that is above the industry average (in a positive sense). Consequently, our injury insurance rate has hardly changed. The premium increased by less than 4%, with most of this increase accounted for by growth in staff numbers and hence our rateable remuneration.



**Shantel Farmer**  
Quality Systems Coordinator

### WorkCover Performance

	2009/10	2010/11	2011/12
MCA Injury insurance rate	2.1313%	2.1440%	1.9973%
Average Industry insurance rate	3.6871%	3.3793%	3.3676%
3 year performance rating	0.578029	0.634454	0.593094
Comparison with industry	42.19% better than average	36.55% better than average	40.69% better than average

### Challenges:

- Along with a new agreement with Council and a new website, we also considered changing MCA's name. While there is widespread agreement that the name needs to be changed to better reflect what we do, we have not yet made a decision.
- The continued expansion of services provided at or from the Centre at 371 Manningham Road has further exacerbated the car parking shortage during peak times (9am-3pm Monday to Friday). This has been of particular concern to clients attending Doncaster Rehabilitation Services, who, at times, could not find parking near the building — or anywhere else on site. We've begun planning to alleviate this shortage.

### Looking Ahead:

- The impact of the Commonwealth Government's aged care reforms are expected to be increasingly evident in 2012/13. Most of the reforms are now known, and will have a significant influence on MCA. Our 10-year strategic plan will need to be shaped around these reforms so that MCA — and our services — continue meeting community needs in the Manningham municipality.

## Home and Community Care (HACC) Program (Planned Activity Group, Home Maintenance Service)

### Highlights

- Both the Home Maintenance Service (HMS) and Planned Activity Group (PAG) received an increase in funded HACC hours to help address the growth in demand for HACC services in the municipality. The Victorian Department of Health, via the HACC program, also provided a minor capital grant of \$18,139. We used this to offset the cost of buying vehicles to deliver HACC services.
- The HMS helped more people in the community during the year, having completed 2,081 jobs compared with 1,733 jobs in 2010/11. This equates to more than 5,202 hours of service to 1,200 clients in need who are living in the City of Manningham.
- To improve booking management for service and reporting, we employed a new part-time administrative staff member, Rachel Strobbridge. Rachel's appointment has greatly helped in managing HMS's large waiting list and continuing referral growth. The large demand made it necessary to evaluate the services offered and to implement changes to ensure fairness.



**Maree Lucas**  
Manager, HACC and  
NRCP Services

- In response to perceived needs, we expanded the HMS service offering to incorporate emergency gardening. This began in late 2011, and is available to clients following an illness or health incident for short-term help with garden maintenance that they would normally do themselves.
- Following an application to the Victorian Department of Health, HMS was successful in being funded to provide Occupational Therapy (OT) assessments for HACC-eligible clients in the City of Manningham as a supplement to existing assessment services provided by Manningham City Council and Manningham Community Health Service. The assessments provided have reduced the time taken for clients to receive needed services. Joan Magalong, who is an existing OT MCA employee in Doncaster Rehabilitation Services, was able to increase her hours and set up the HACC OT program. The program sits well with the other HACC services that MCA offers and helps ensure clients receive a coordinated service approach.
- PAG offered a range of varied centre-based and outing activities for clients living with a memory loss. In this inter-generational program with St. Gregory's the Great Primary School, clients volunteer in the classroom each Friday. It's continued to be successful in breaking down barriers and improving clients' self-esteem.
- The Saturday leisure group, which offers social activities to frail older Manningham residents twice a month, particularly enjoyed a weekend away to Port Arlington in November.
- In line with the Community Care Common Standards, we established and implemented a "Diversity and Active Service Model" plan to ensure that HACC clients' goals and diverse needs were considered. These philosophies are now embedded across all HACC and NRCP services that MCA runs.

#### Challenges:

- In implementing a coordinated quality system to ensure that all eligible clients had streamlined and equitable access to services (to meet the new Community Care Common Standards), we reviewed and restructured the HMS. All HACC and NRCP-funded services were consolidated under Maree Lucas's management. Implementing this change presented some challenges, as we reviewed long-standing practices. While initially difficult, we've made great gains across the services, and these have benefited clients directly.
- Supporting carers to recognise their stress and understand the importance of looking after themselves is a vital service. Respite support is of necessity both individual and varied to suit each carer. The range of carer support programs MCA offers help, but do not alleviate, the feeling of loss that most carers report. MCA is constantly reviewing and looking for ways to improve and expand carer respite options.

#### Looking Ahead:

- HACC and NRCP programs will continue to strive to help care recipients and carers to achieve their goals. Recognising goals will help with program planning, and ensure that clients' and carers' support and respite needs are met.

## National Respite for Carers Program (NRCP)

(Overnight Respite, Employed Carers Respite, Day Guest Respite)

#### Highlights

- After the uncertainty of the past two years as to whether funding for the three NRCP services would be extended beyond the end of each financial year, we were delighted when the Commonwealth Government announced the funding for all three services would continue to 30th June 2014. This is a great development and has been welcomed by carers, clients and staff alike. It has given us a sense that the government recognises the value of these programs, and therefore gives us all some hope that the funding will eventually become recurrent.
- NRCP services help carers to maintain work commitments and social connections. The flow-on effect of these initiatives is that care recipients remain at home longer. Therefore, it is important that the NRCP programs continue to provide flexible and responsive respite to carers.
- The Cassia Day Guest Respite service was able to provide carers with an additional day of respite each week during June, using a small surplus of funds accumulated over the year. Carers received this very well, and we hope to be able to offer at least one extra Wednesday of respite per month in the new financial year, subject to surplus funds being available.
- The table below allows one to glean the success of the three services in meeting the needs of carers and clients. In 12 months, some 136 primary carers were provided with a total of 44,120 hours of support.

#### NRCP Performance

	Overnight	Day Guest	Employed Carers
Delivered hours of service over the year	26,771	6,740	10,609
Primary carers who received support over the year	52	35	49
Carers from a CALD* background	12	24	11
Financially or socially disadvantaged carers	4	3	4
Carers who received emergency respite	27	5	4
Carers who were also employed	25	11	49
Carers who left the service during the year	19	20	13
Clients admitted to full-time residential aged care	15	11	7

\*culturally and linguistically diverse

### Challenges:

- Devising relevant programs for younger people diagnosed with dementia continues to be a challenge. During the year we submitted an application to the Aged Care Service Improvement and Healthy Ageing Grants Fund for a new program at Grevillea House called “Connected and Active”. This is targeted at providing enhanced age-relevant support for younger people with dementia, as well as their carers. Regretfully, despite the evident need, our application was unsuccessful.

### Looking Ahead:

- While the Commonwealth Government has guaranteed funding for a further two years, it still leaves all providers of NRCP-funded services (and the carers whom we serve) with long-term uncertainty. We will continue to work with our industry peak bodies to influence the decision-making process to give all those involved a firm hope for these vital services to continue.

## MCA Aged Care Packages

(Community Aged Care Packages, Extended Aged Care at Home Packages)

### Highlights

- We began the year with 30 Community Aged Care Packages (CACPs) and five Extended Aged Care at Home (EACH) packages. Following a submission to the Department of Health and Ageing in the aged care funding round, we were successful in being allocated five extra CACPs.
- In 2011/12 we provided 11,740 days of direct service to 35 clients, compared with 11,166 days in 2010/11 via our 35 packages. The table below gives further details for the two package types. Services not recorded in this table include social activities, social support groups and nursing services (such as wound and continence management).



**Bert Brown**  
Manager, Rehabilitation  
and Aged Care Packages

### Aged Care Packages Performance

		2010/11	2011/12
<b>CACP</b>	<b>Days of service</b>	9,646	10,161
	Personal care/ Respite/home-care (hrs provided)	3,681	3,049
	Gardening/Maintenance (hrs provided)	248.5	202
	Transport provided by taxis (number of trips)	778	838
	Meals delivered to homes	1,744	2,481
<b>EACH</b>	<b>Days of service</b>	1,520	1,579
	Personal care/Respite/Home care (hrs provided)	1,834	1,532
	Gardening/Maintenance (hrs provided)	57.5	79
	Transport provided by taxis (number of trips)	235	290

- Maureen Oluigbo resigned as Case Manager at the end of this financial year, and Sajani Varghese, who was previously part-time, began working as our full-time Case Manager along with Prue Ryan. The Case Managers have a wealth of experience and qualifications, and, while having begun as a totally new team, have settled into their new roles admirably. They've also quickly developed their knowledge of the work needed — particularly with the new client-management system, TCM 7. Client feedback — both informally and formally via client satisfaction surveys — regarding the support provided by and through the Case Managers continues to be very positive.
- The service has met its budget requirements; staff have been trained and are now proficient in Medicare online claiming for faster and more accurate monthly payments.
- Following Board approval, we created a Business Development Manager position for 12 months to establish MCA's capacity to directly provide home and personal care services to clients rather than continuing to outsource this task to third-party agencies (as has been the practice since the service was established). Darlene James has been appointed to plan and implement this strategy. The aim is to improve the quality and cost effectiveness of direct-care services provided to support clients and free up funds to further enhance the services.
- Clients who would otherwise be at risk of social isolation continued to appreciate the social-support program. Some of the activities they've requested in the past year included visits to Mia Mia Art Gallery, Heidi Art Gallery, The Palace cinema, going to the movies and lunch, the Tesselaar Tulip festival and our half-yearly luncheon at the Old England Hotel.

### Challenges:

- The demand for in-home, community-based care is increasing, as the first of the post-war “baby boomers” begin to seek support so they can remain comfortably in their own homes. While MCA will submit an application in the aged care funding round for more packages later this year to help address this demand, the application process is highly involved and expensive, relatively few packages are on offer and the chance of success is not encouraging.

### Looking Ahead:

- MCA is well placed to provide comprehensive aged care services to its community. The CACP and EACH program will continue to integrate services more closely with Doncaster Rehabilitation Services, the Planned Activity Group (PAG) at Grevillea House, MCA's Home Maintenance Service (HMS), services provided through the National Respite for Carers Program and other allied health services within and external to MCA. By strengthening relationships with other organisations within the City of Manningham, and by providing our own home and personal care workers, our aim is to offer further comprehensive quality services.
- The services will be assessed in 2013 for compliance with the Department of Health and Ageing's new Community Care Common Standards. This new quality review system is consistent with MCA's aims of promoting quality programs that meet service users' needs. Assessment will be against three core standards, with 18 expected outcomes relating to those standards.

## Doncaster Rehabilitation Services (DRS)

### Highlights

- After many years of annual funding — with no assurances of our funding future beyond each year — we were pleased when the Department of Health and Ageing advised us that it had approved the program's funding for the next three years.
- Staff strengthened the continuum of services both within MCA and with other organisations. This includes closer working relationships with MCA's HMS and Aged Care Packages services and externally with the Peter James Centre, hospitals and community services, including general practitioners.
- DRS provided an important contribution to maintaining the health of Manningham's elderly population. The service operated at full capacity, with all staff being kept very busy. Some 220 clients a week were provided with physiotherapy, occupational therapy (OT), podiatry, exercise programs, counselling and physical-aids information and education. The waiting list for referred clients averages three to four weeks throughout the year.
- Staff continued to receive very positive feedback from clients in all of their programs. Program evaluations showed a high level of client satisfaction.
- Bert Brown remained an active participant in the Day Therapy Centre (DTC) Network meetings where DTCs are invited to meet quarterly with representatives from the Department of Health and Ageing to share ways in which to enhance service delivery.
- Staff have been actively supervising university and institute students this year. Student placements during this year were from the disciplines of allied health (Certificate III and IV), OT and exercise physiology.
- DRS managed to balance its budget without increasing client fees this year. The service waives fees in exceptional circumstances to ensure our community members are not financially discriminated against.
- We experienced more referrals from our growing Chinese-Australian community, so we're fortunate to have staff who are conversant in Mandarin and Cantonese. Other bilingual staff can converse in Punjab, Tagalog and Spanish.

### Challenges:

- DRS continued to receive hospital referrals for clients who need significantly more rehabilitation and staff support within the programs. While we have only a small team, our challenge is to continue to explore ways in which we can provide more intensive and supervised programs for our clients. DRS has been fortunate in having volunteers and students on placement, helping staff to run their programs.
- Due to increased services referrals for clients who have had a stroke, we are exploring ways to provide more programs to compliment and increase our existing upper and lower limb therapeutic groups.

### Looking Ahead:

- DRS will further strengthen the continuum of care services with the existing programs in the Manningham Centre, and strengthen links with the broader community of aged care service providers. We expect this service continuum to be enhanced by including the direct delivery of home and personal care services by MCA.



ANZAC Day 2012

## Doncaster Melaleuca Lodge

### Highlights

- Residents Lila Wells and David Lovegrove both celebrated their 100th birthdays late in 2011. We now have three residents who have reached their centenary in Doncaster Melaleuca Lodge.
- Some improvements so far of our amenities are: the main lounge and dining room have been renovated (including a new kitchenette being installed); we have wood-look vinyl flooring in the dining room, carpet in the main lounge, plus new curtain rails and tie backs. We also installed new carpet in the entrance passageway and offices, finished air conditioning in the final two passageways and added a safety-railing extension to the balcony on the building's north-east corner.
- The Lodge introduced a physiotherapist-directed, pain-management program, offering residents who suffer chronic pain massage and Transcutaneous Electrical Nerve Stimulation (or TENS) therapy four times a week to help minimise their discomfort. Feedback from residents and the physiotherapists was very positive.
- We introduced the computerised program Oscar Hospitality to the kitchen; some of the main benefits are better managing residents' dietary needs and simplifying menus and recipes. An Oscar Hospitality chef consultant worked closely with the Lodge over eight weeks, and implemented new routines to improve quality and service to the residents.
- Lifestyle and Leisure began a weekend activity program, initially once a month on a Sunday. This included live entertainment and activity programs, and was well received by both residents and relatives.



Kim Greenham  
Manager

### Challenges:

- Residents' rapidly changing health status contributes to fluctuating income, the need for regular staffing-level reviews, and continuously providing education to up-skill staff.
- Managing residents who suffer from dementia in a non-purpose-built facility proves difficult at times, due to monitoring residents' whereabouts, providing suitable dementia-specific leisure activities, and minimising disruption to other residents.
- Residents' health conditions continue to decline rapidly, increasing the percentage of high-care residents as they age in place. We began additional personal care shifts throughout the year to accommodate our residents' growing needs.

### Looking Ahead:

- We will begin planning to redevelop the southern wings to incorporate a Dementia Specific Unit (including the existing 18 beds) and extending the South Lounge to create a dining room and lounge room. We have already created "Memory Lanes" using photographs from the early-mid 1900s and each hallway has a different theme.
- We will continue senior-level education in preparation for the Person Centred Model of Care being introduced. We've also begun personal care staff education.



Resident Dorothy Hutchinson being creative with volunteers

## Cassia House

### Highlights

- Cassia House was successfully accredited for a further three years following a site audit by The Aged Care Standards and Accreditation Agency on 6th and 7th September 2011. This was followed up with three unannounced support visits by Accreditation Agency auditors. On each occasion they gave positive feedback regarding the care provided to residents.
- An audit of the facility kitchen by Manningham Council Environment Health Services in February 2012 resulted in it being awarded a five-star rating.
- Capital works completed during the year included installing air conditioning in various passageways in Acacia and Erica units to improve the living and working environment on hot days, and installing a Vergola adjustable roofing system in the main Acacia courtyard to provide weather protection and encourage resident use of this outside space. We also bought a large, new and expensive combi-steamer oven for the kitchen to improve the efficiency and effectiveness of food services.
- A thorough review of Aged Care Funding Instrument (ACFI) submissions for all residents of Cassia House resulted in a marked improvement in recurrent government funding. Notwithstanding changes in Commonwealth Government policy, this improved funding is expected to be sustainable because new residents being admitted into residential care arrive with higher and more complex health care needs.
- Thanks to generous funding from Manningham Community Development Grants Program, Aged Persons Welfare Foundation and the Freemasons Public Charitable Foundation, we established a multicultural music-therapy program in Cassia House and the Lodge. We employed a music therapist to run the program, which has been very well received.
- The Education Institute is now providing further support for staff: 18 employees are completing higher qualifications, with the education provided on site.



Pat Fernandez  
Manager

### Challenges:

- Recruiting and retaining suitably qualified staff is an ongoing challenge for all residential care. The increased complex health care needs of residents now being admitted into residential high care and the consequent need to refresh and up-skill staff adds to the challenge. To that end, we have appointed a Training and Orientation Coordinator to provide ongoing training and support for staff.
- The increasing frailty of residents necessitated a complete staffing structure review at Cassia House so we provide appropriate care and support. It is a constantly changing challenge to balance the care needs of residents with adequate staffing levels to provide this care and support.



Resident Eugene Apostol with daughter Mary and wife Eva

#### Looking Ahead:

- Management will be focused on ensuring we provide person-centred care to Cassia House's residents. Our aim is to ensure residents have choice and control over their lives, where possible.
- Another area of attention will be towards ensuring there is increased staff stability. Cassia House has many staff from multicultural backgrounds, and our training application has been approved to fund a workplace numeracy and literacy program to provide further support.
- Cassia House management is closely monitoring and preparing for the Aged Care Reform Package as outlined in the last federal budget to be implemented over the next two years.

#### Residential Care Statistics

	Lodge	Cassia House
Average number on immediate waiting list at month end	5	10
Discharges of residents over the year	17	44
Turnover	28.3%	48.9%
Number of vacant unfunded place days	211	147
Occupancy rate	99.04%	99.55%

## Fundraising

The primary mode by which MCA raises funds from the community to support residents' and clients' special needs is via our one-day-per-week Fundraising Coordinator, Angie Lee. Over the year, we received \$43,068 (\$37,746 from Foundations and the like, \$3,552 from the Manningham Monster Community Raffle 2012, and \$1,815 from the Christmas appeal via MCA News) in grants and donations. Donors included:



Angie Lee  
Coordinator

- The Aged Persons Welfare Program, Manningham City Council Community Development Grant Program and The Freemasons Public Charitable Foundation to establish a multicultural music-therapy program in Doncaster Melaleuca Lodge and Cassia House,
- The Marian and EH Flack Trust to buy two tub chairs for residents in Cassia House,
- The William Angliss (Victoria) Charitable Fund and Tobin Brothers Foundation to purchase digital falls-prevention monitors for Cassia House,
- The Manningham community, via the Manningham Monster Community Raffle 2012,
- The MCA News Christmas Appeal, and
- The Rotary Club of Manningham, via the Rotary Rummage Shop.

We also received sponsorship support from the Doncaster East Community Bank – Bendigo Bank for our publications.

To all our benefactors, we say a heartfelt thank you.



Shirley Ampt and Vida Megna admiring their garden

## Financial Report



Helen Zhou  
Finance Manager

The Statements of Comprehensive Income, Financial Position, Changes in Equity and Cash Flows for and at the year ended 30th June, 2012 that follow are extracted from MCA's audited Financial Statements. The full Financial Statements are available on request from MCA's central office or can be downloaded from the website.

An overall surplus of \$688,298 was recorded for the year compared with a surplus of \$571,853 in 2010/11. This was largely driven by an 11.7% increase in income, with the most important contributor being a 14.4% increase in Government funding — mostly relating to residential aged care. Costs rose by 10.9%, with the biggest contributor being a rise in employee expenses.

This result increased our net assets from \$4,915,820 to \$5,604,118, improving our financial position and cash reserves. Through prudent management, MCA is well placed to meet its obligations under the new agreement with Manningham Council to maintain and improve the buildings and grounds it manages and to extend the services it provides to support older people in the Manningham community.

Many challenges lie ahead for MCA, and the aged care sector generally, given the Federal Government's aged care reforms, but MCA has entered this period of change in a sound financial position.

# Statement of Comprehensive Income for the Year Ended 30th June 2012

2011/12  
\$

2010/11  
\$

## Continuing Operations

### REVENUE

Residents' and Clients' Fees	2,950,100	2,822,242
Investment Income	325,829	307,550
Federal Government Grants	10,284,715	9,497,594
State Government Grants	582,757	542,978
Accommodation Charges	637,759	602,983
Donations and Subscriptions	54,617	45,844
Other Revenue	211,845	197,810

### TOTAL REVENUE

15,047,621 13,474,024

### EXPENSES

Employee Benefits Expense	10,956,473	9,903,321
Depreciation and Amortisation Expense	756,838	387,007
Administration Expense	353,873	335,287
Catering Expense	506,233	459,362
Cleaning and Laundry Expense	497,320	449,765
Client Supplies and Service Expense	315,305	329,001
Energy and Utilities Expense	165,809	179,022
Fundraising Expense	16,613	15,852
Repairs and Maintenance Expense	427,884	360,650
Loss on Sale of Shares	-	152,082
Finance Expense	18,385	57,767
Other Expenses	344,590	315,769

### TOTAL EXPENSES

14,359,323 12,944,886

### NET SURPLUS FOR THE YEAR

688,298 529,139

### OTHER COMPREHENSIVE INCOME

Net Asset Revaluation Increment	-	42,714
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### TOTAL COMPREHENSIVE INCOME FOR THE YEAR

688,298 571,853

# Statement of Financial Position as at 30th June 2012

	2011/12 \$	2010/11 \$
<b>CURRENT ASSETS</b>		
Cash and Cash Equivalents	1,139,712	919,752
Financial Assets	7,509,735	6,173,521
Trade and Other Receivables	268,429	375,025
Inventories	18,910	18,510
Other Assets	54,370	45,220
<b>TOTAL CURRENT ASSETS</b>	<b>8,991,156</b>	<b>7,532,028</b>
<b>NON-CURRENT ASSETS</b>		
Property, Plant and Equipment	1,553,292	2,142,815
<b>TOTAL NON-CURRENT ASSETS</b>	<b>1,553,292</b>	<b>2,142,815</b>
<b>TOTAL ASSETS</b>	<b>10,544,448</b>	<b>9,674,843</b>
<b>CURRENT LIABILITIES</b>		
Trade and Other Payables	1,190,545	905,859
Borrowings	6,158	5,153
Provisions	1,386,986	1,156,244
<b>TOTAL CURRENT LIABILITIES</b>	<b>2,583,689</b>	<b>2,067,256</b>
<b>NON-CURRENT LIABILITIES</b>		
Borrowings	18,147	753,267
Provisions	2,338,494	1,938,500
<b>TOTAL NON-CURRENT LIABILITIES</b>	<b>2,356,641</b>	<b>2,691,767</b>
<b>TOTAL LIABILITIES</b>	<b>4,940,330</b>	<b>4,759,023</b>
<b>NET ASSETS</b>	<b>5,604,118</b>	<b>4,915,820</b>
<b>MEMBERS' FUNDS</b>		
Reserves	2,557,746	2,865,988
Accumulated Surplus	3,046,372	2,049,832
<b>TOTAL MEMBERS' FUNDS</b>	<b>5,604,118</b>	<b>4,915,820</b>

## Statement of Changes in Equity for the Year Ended 30th June 2012

	RESERVES \$	ACCUMULATED SURPLUS \$	TOTAL \$
<b>Balance at 1st July 2011</b>	<b>2,865,988</b>	<b>2,049,832</b>	<b>4,915,820</b>
Total comprehensive income for the year	-	688,298	688,298
Transfers (to)/from other reserves	(308,242)	308,242	-
<b>Balance at 30th June 2012</b>	<b>2,557,746</b>	<b>3,046,372</b>	<b>5,604,118</b>
<b>Balance at 1st July 2010</b>	<b>2,496,683</b>	<b>1,662,961</b>	<b>4,159,644</b>
Total comprehensive income for the year	-	529,139	529,139
Net gain on revaluation of assets	42,714	-	42,714
Gain on revaluation of financial assets	184,323	-	184,323
Transfers (to)/from other reserves	(478,222)	478,222	-
Transfers (to)/from other reserves	620,490	(620,490)	-
<b>Balance at 30th June 2011</b>	<b>2,865,988</b>	<b>2,049,832</b>	<b>4,915,820</b>

# Statement of Cash Flows for the Year Ended 30th June 2012

	2012 \$	2011 \$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Operating grants receipts	11,113,534	9,888,809
Receipts from customers	3,694,455	3,001,607
Sundry receipts	266,461	243,655
Payments to suppliers and employees	13,027,939	(12,363,822)
Interest received	429,478	307,550
Interest paid	(18,385)	-
<b>Net cash provided by operating activities</b>	<b>2,457,604</b>	<b>1,077,799</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Purchase of property, plant and equipment	(167,315)	(151,523)
Proceeds from investments	-	433,415
Redemption (placement) of term deposits	(1,336,214)	(1,442,595)
<b>Net cash provided by (used in) investing activities</b>	<b>(1,503,529)</b>	<b>(1,160,703)</b>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>		
Borrowings procured (repaid)	(734,115)	-
<b>Net cash provided by (used in) financing activities</b>	<b>(734,115)</b>	<b>-</b>
Net increase (decrease) in cash held	219,960	(82,904)
Cash and cash equivalents at beginning of financial year	919,752	1,002,656
<b>Cash and cash equivalents at end of financial year</b>	<b>1,139,712</b>	<b>919,752</b>



1.



2.

3.

1. Presentation of donation cheque June 2012 from The Freemasons Public Charitable Foundation.

2. & 3. Cassia residents and relatives enjoying an evening meal in the courtyard with entertainer Tony Temple.



4. Helen Zhou, Jade Zhang and David Meiklejohn at staff service award presentation. 5. Signing of new agreement with Manningham City Council.  
6. George Lamtzes with his wife Carmel enjoying a drink together.

# Services

## Manningham Home Maintenance Service

371 Manningham Road  
DONCASTER VIC 3108  
Phone 9856 1222  
Fax 9856 1242

## Doncaster Rehabilitation Services

371 Manningham Road  
DONCASTER VIC 3108  
Phone 9856 1210  
Fax 9856 1233

## Grevillea House

(Planned Activity Group, National Respite for Carers Programs)  
371 Manningham Road  
DONCASTER VIC 3108  
Phone 9856 1224  
Fax 9856 1284

## MCA Aged Care Packages

(Community Aged Care Packages, Extended Aged Care at Home Packages)  
371 Manningham Road  
DONCASTER VIC 3108  
Phone 9856 1218  
Fax 9856 1293

## Doncaster Melaleuca Lodge

383 Manningham Road  
DONCASTER VIC 3108  
Phone 9856 1244  
Fax 9856 1255

## Cassia House

371 Manningham Road  
DONCASTER VIC 3108  
Phone 9856 1200  
Fax 9856 1233

## Central Administration

371 Manningham Road  
DONCASTER VIC 3108  
Phone 9856 1201  
Fax 9856 1233

E-mail: [manningham@mcentre.asn.au](mailto:manningham@mcentre.asn.au)

Web: [www.manninghamcentre.com.au](http://www.manninghamcentre.com.au)

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Doncaster East **Community Bank** Branch  **Bendigo Bank**





**MANNINGHAM CENTRE**  
*Support Services for Older People*

371 Manningham Road Doncaster Victoria Australia 3108 **T** 03 9856 1200 **F** 03 9856 1233  
**E** [manningham@mcentre.asn.au](mailto:manningham@mcentre.asn.au) **www.manninghamcentre.com.au**