



Karitane

Caring for Families



Annual Report 2007



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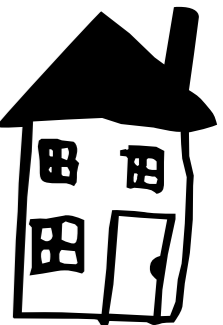


## Our Purpose

To achieve a recognised leadership position and set the standards for best practice in the provision of child and family services.

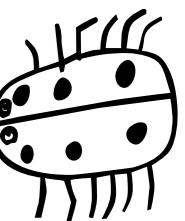
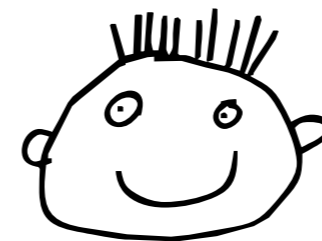
## Our Goals

- Healthy and vibrant families
- Accessible health care for all
- High quality health care delivery
- Responsible resource management
- An energetic, progressive and innovative organisation



## Our Values

- Kids, family and community
- Accessible
- Respect
- Innovation
- Teamwork
- Accepting individuality
- Nurturing
- Empowering



# Caring for Families with Young Children (Pregnancy to Five Years)

## History of Karitane

In 1905 Dr Frederick Truby King founded a system of mothercraft which subsequently spread throughout the British Empire and beyond. Truby King's movement was the first in Australasia to specialise in the feeding and care of expectant mothers, nursing mothers, infants and toddlers. The founding motto was: "To Help the Mothers and Save the Babies". This reflected Truby King's lifelong interest in reducing infant mortality.

In 1923, the Karitane Mothercraft Society was founded in Australia, based at Coogee, NSW. Throughout the years the organisation provided specialist services at various locations within Sydney. In 1974 the Karitane Residential Unit moved to Randwick and in 1993 the Liverpool Family Care Cottage was opened. In 1994 the Residential Unit, Administration and Education Departments relocated to a purpose-built centre at Fairfield in South West Sydney. In 1996 a specialised day service, Jade House, was opened, to support women experiencing perinatal mood and related disorders, then in 2000, the Volunteer Home Visiting Program was established.



Nurse Glasson 1962



Mobile Clinic Mt Colah 1951

## Board of Directors



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FAICD  
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Registered Company  
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Committee, Treasurer



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Ms Wendy Machin  
BA (UTS), M.Comm  
(UNSW)  
Karitane Patron

## Executive Manager



Mr Robert Mills  
RN, CM, MPH(UWS)  
Executive Manager Secretary to the Board

## Karitane Careline, Email and Website

Karitane provides a 24-hour state-wide telephone information service  
- Ph 1300 Caring (227464),  
- TTY (02) 9794 1848.

Child and family health nurses are available for consultation on a wide range of issues eg. feeding, sleep patterns, establishing a routine and toddler management. Information can also be obtained by email [karitane.online@sswahs.nsw.gov.au](mailto:karitane.online@sswahs.nsw.gov.au) and by accessing [www.karitane.com.au](http://www.karitane.com.au)

## Residential Unit (RU)

The Residential Unit is a tertiary level public hospital available for state wide referrals. It provides professional inpatient care and guidance for families with infants and young children.

This service promotes a care model which is flexible and responsive to the family's individual needs. A professional referral and comprehensive pre-admission interview is required. Parent and baby are admitted with boarder accommodation available for partners. Siblings (up to the age of 5 years) can also be accommodated.

In keeping with Karitane's holistic approach, clients are also offered services such as massage, hairdressing and relaxation therapy.

## Randwick & Liverpool Family Care Centres (FCC)

The FCCs are centre-based, secondary level, day stay services located at Randwick and Liverpool.

These facilities provide education, support and information to help parents improve their parenting skills. Clients are offered individual consultation with a member of the multidisciplinary team and/or may attend the educational groups.

- Programs include:
- Parentcraft education
- Toddler Management and Education
- Women as Mothers Group (LFCC)
- Lactation Consultancy
- Sleep and Settling Techniques
- Postnatal Depression and Anxiety Therapeutic
- Groups (RFCC)
- Outreach Services.

## Jade House

Jade House opened in 1996 as a specialised Parent and Baby Day Unit for women during pregnancy and with babies up to 12 months of age, who have, or are at risk of developing, a

perinatal mood disorder. Jade House is available to families living within the Sydney South West Area Health Service (SSWAHS) Western Zone.

The following services are provided:

- Individual and couple psychotherapy
- Sessional psychiatric services
- Prescription and monitoring of medications as required
- Day stay to provide parentcraft assistance
- Therapeutic group programs, including mother-infant therapy, anxiety management, postnatal depression.

Jade House also offers education programs to health professionals on perinatal mood and related disorders.

## Karitane Volunteer Programs (KVP)

The Karitane Volunteer Programs include:

- Professional and volunteer home visiting
- Supported playgroups
- Parenting programs
- Community development
- Transport

KVP services are offered to families in the antenatal period and those who have children up to three years old (home visiting service) and up to five years old (for all other services) living in the Bankstown, Liverpool and Fairfield Local Government Areas.

Specially trained volunteers bring their own parenting experience to families in the community offering practical and social support to multicultural and aboriginal families. They may help parents by providing home visits and telephone contact, visiting women in hospital maternity units or by assisting at parent groups organised and/or supported through Karitane Volunteer Programs.

## Karitane Toddler Clinic

The Toddler Clinic was established in 2005 in response to an identified need for a program to address parenting difficulties in the 15 month to 4 years age group. The program aims to enhance the parent-child relationship and to give parents skills to manage toddler behaviours such as: aggression, non-compliance and withdrawal. The clinicians work with the parent and the child together through play. Referrals are made by health professionals.

## Education Services

Karitane provides specialised education and clinical experience to parents, carers and students within and outside the health service.

A consultancy and education service regarding child and family health issues is available to community groups, health organisations, Non-Government Organisations and other groups

who are working with families with children under 5 yrs.

In conjunction with the University of Western Sydney, a Graduate Diploma in Nursing: (Child and Family: Karitane) is offered to Registered Nurses. This is a distance education course with clinical experience undertaken at Karitane facilities.

For Enrolled Nurses there is a Certificate IV in Parentcraft Nursing. Karitane staff continuing development programs include regular seminars and workshops.

## Contact Karitane

Karitane Care Line  
(24 Hour Telephone Counselling)  
Ph 1300 Caring (227464)  
TTY (02) 9794 1848  
Email: [karitane.online@sswahs.nsw.gov.au](mailto:karitane.online@sswahs.nsw.gov.au)  
[www.karitane.com.au](http://www.karitane.com.au)



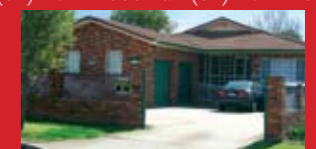
Administration, Education,  
KVP and Residential Unit  
Cnr The Horsley Drive & Mitchell Street  
Carramar NSW 2163  
Ph (02) 9794 1800 Fax (02) 9794 1858  
Education Ph (02) 9794 1844



Randwick Family Care  
Cottage  
146 Avoca Street  
Randwick NSW 2031  
Ph (02) 9399 6999 Fax (02) 9399 8510



Liverpool Family Care  
Cottage  
10 Murphy Avenue  
Liverpool NSW 2170  
Ph (02) 9821 4555 Fax (02) 9821 4559

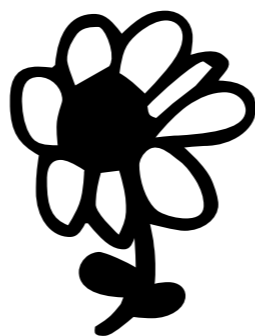


Jade House  
(Parent Baby Unit)  
130 Nelson Street  
Fairfield Heights NSW 2165  
Ph (02) 9754 2655 Fax (02) 9754 2644

## Postal Address

PO BOX 241  
Villawood NSW 2163

# The Year in Review



Karitane has embraced and moved through many changes over the last year, including the delivery of client services and organisational direction. The most significant, however, experienced by both staff and clients, has been the extensive alteration happening to the Karitane facility as a result of the capital redevelopment program which commenced in January 2007.

The redevelopment program on the Carramar site will ensure that our families receive these essential services in a purpose-built, state of the art facility. The new capital works will include an expanded Education & Research facility with a 140-person conference venue, an Outreach service, the expanded Toddler Clinic and Jade House, our day unit for women with perinatal anxiety, depression and related problems. NSW Health has supported Karitane by providing a \$1,000,000 grant towards the redevelopment which is due for completion around March 2008.

Karitane underwent The Australian Council on Healthcare Standards (ACHS) Organisational Wide Survey (OWS) in May 2007 and successfully achieved accreditation for a further four years. Not only did we achieve the required Moderate Achievement (MA) rating for the fourteen mandatory criteria, but Karitane also

achieved Outstanding Achievement (OA) ratings for two criteria. Karitane remains committed to the ongoing provision of a consumer focussed safe, quality health care service.

Over the last 12-months Karitane has worked very closely with Tresillian Family Care Centres in exploring opportunities for the Karitane 24-hour Careline and the Tresillian Parent Helpline to come together to provide a better service to the families of NSW. Karitane currently takes approximately 20,000 calls per annum with Tresillian handling approximately 55,000 calls per annum. NSW Health has supported the review of the two 24-hour Parent Carelines by providing the funding required to engage a communications Consultant to review both services and explore possibilities for the consolidation of both services. The report and recommendations are expected to be finalised towards the end of 2007.

The new Karitane Strategic Plan 2007 -2010 was approved by the Karitane Board in March 2007 and has a revised set of goals designed to address gaps in services, including disadvantaged families, parents with toddler issues and parenting service choices in the eastern suburbs of Sydney. The consultation and planning process for the new Strategic Directions commenced in June 2006 and included planning

days with the Board, Management Committee, individual Departments as well as a SWOT analysis of all Karitane staff. All Karitane staff and volunteers have been provided with a summary brochure of the new Strategic Plan that highlights the goals to be achieved over these next 3 years.

In June 2007, the Karitane Board and staff congratulated the Karitane Chairman, Professor Bryanne Barnett, on being mentioned in the Queens Birthday Honours List. She was awarded membership in the Order of Australia (AM) for her "Services to psychiatry and the community through research and the development of intervention programs in the areas of infant and maternal mental health and wellbeing, and services to professional organizations".

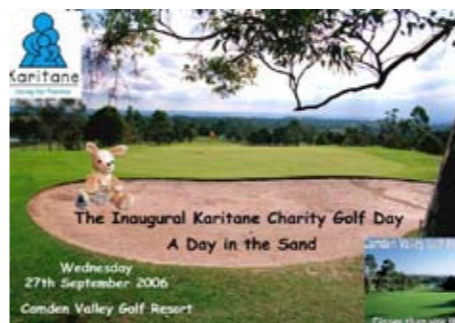
In May 2007 Karitane joined the Australian Association of Maternal, Child & Family Health Nurses (AAMCFHN) and Tresillian Family Care Centres to host the 2nd National Conference of the AAMCFHN: "Partnership in Practice". The Conference was a great success, educationally, socially and financially. Attendance at the conference surpassed all expectations with 793 delegates attending over the three days.

Karitane held its inaugural Charity Golf Day on 27th September 2006, called 'A Day in the Sand'. The winning team, consisting of players from the Karitane Auditors Weston, Woodley & Robertson, have had their names engraved onto the Andy Ayling Trophy in honour of a valued Karitane staff member who passed away in 2005. Karitane raised \$18,976 to purchase much needed new cots for all Karitane facilities. The money was raised through the generous sponsors and supporters of Karitane, many of which contributed money, prizes and donations for the day. The platinum sponsor for the event was the AMP Foundation who matched all money raised, dollar for dollar, up to \$10,000. The support from ADM Financial Services and the Rotary Club of Liverpool Greenway was invaluable to the success of the day. All sponsors of the golf day and Karitane are acknowledged further on in the report.

There were a number of Karitane fundraising activities held throughout the year, notably the Alpha Beta Preschool College at Westmead donated fundraising money from a child painting auction night and fete. Karitane staff were delighted to receive the proceeds at the end-of-year staff team-building day.



Iris Productions worked closely with Karitane staff, volunteers and families to produce the six-part miniseries, "Parent Rescue" in 2006 for SBS. By following clients through their contact and support from Karitane, the mini-series depicts the everyday parenting issues faced by families. Each episode illustrates a theme including postnatal depression, reflux, toddler behaviour, twins, sleep issues and families from multicultural backgrounds. The mini-series will be aired in September 2007 and will include an interactive website incorporating Karitane staff interviews, blogs (from staff and clients), a chat room, information brochures in a variety of languages and staff viewer interaction after each episode.



The Residential Unit was the pilot site for the Clinical Practice Improvement (CPI) Project, undertaken to focus on 'Comprehensive and Consistent Bio-psychosocial Assessments'. The outcomes of the project include revised processes and a set of assessment tools which promote working in partnership with families and reflect current 'best practice' informed by feedback from clients and clinicians. This project was awarded 3rd Prize in the 2007 SSWAHS Quality Initiative Activity poster competition. The next phase of the CPI program has commenced focusing on Karitane's Family Care Centres (FCC) including a review of the aims of the FCCs, determining appropriate intake criteria, multidisciplinary skill mix, staff support and resources.



Karitane received \$151,505.20 funding over 2 years from the Attorney Generals Department under the Crimes Prevention Grant, to work with the Juvenile Justice Department. Karitane appointed a Project Officer to manage the program. The Project Officer is based at Juniperina Juvenile Justice Centre and works with the young women in custody, providing them with knowledge and skills to assist in their role as parents now and in the future. The education sessions provided included the development and delivery of programs to inform and encourage positive life choices.

like to thank all the staff and volunteers for their dedication and hard work over the past year. We know that everyone is looking forward to moving into our new facilities and working closely together on the challenges ahead.

*Bryanne E. W. Barnett*

**Professor Bryanne Barnett AM**

Chairman, Karitane Board of Directors



*Robert Mills*

**Mr Robert Mills**

Executive Manager

A highly valuable component of the project was the partnership formed by the Project Officer with the Juvenile Justice staff which included participation in clinical team meetings and working collaboratively with the multidisciplinary team in the planning of support of young mothers and other young women in Juvenile Justice Custody.

During this financial year Karitane welcomed two new Board Directors in Mr Robert Casamento and Professor Jane Ussher but sadly farewellled our much respected Board Treasurer Mr Greg Peel. Greg passed away in April this year following a long illness. He was a highly valued Board Director, not only for his financial acumen but for his sense of humour and his overall contribution and commitment to Karitane.

The Karitane Board and Management would



*Mr Joe Tripodi MP Inspecting the new Karitane building*

# Residential Unit (RU)

The Residential Unit at Carramar underwent a number of changes in the last 12 months. In preparation for the new building works, the Anderson Stewart Wing was closed and staff offices from the Waterhouse Wing relocated to temporary accommodation. The client bedrooms are being refurbished with new colour schemes and soft furnishings.

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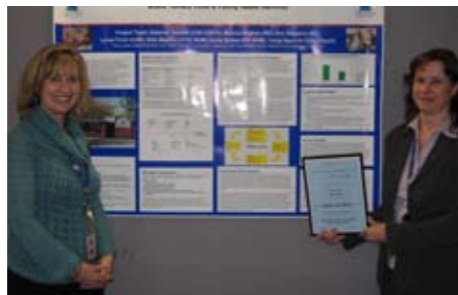
Families with toddlers had access to the expertise of staff from the Toddler Clinic which provided comprehensive and individualised support.

The waiting list for the Residential unit remained constant at 6-8 weeks. Day stay appointments were offered to many clients to provide support while awaiting admission and for follow up after discharge. During the last 12 months 1,114 parents/children were admitted to the Residential Unit.



Above: RU Team

Right: RU Presentation



## Staffing

Staffing on the Residential Unit has remained constant with 21.13 FTE. Two Registered Nurses were regraded to Clinical Nurse Specialist (CNS) giving the unit 6 FTE CNS support. One CNS was successful in her application to work part-time for the Toddler Clinic and one Enrolled Parentcraft Nurse (EPN) was successful in applying for a position as Project Coordinator for the MyTime Project. Three EPNs rotated through the Toddler Clinic and five staff returned from maternity leave.

## Allied Health

The Allied Health staff consisted of a full-time Social Worker and a part-time Clinical Psychologist. The Allied Health staff were available for referral for the RU clients. They also facilitated the in-house groups for parents including 'Connecting with Your Child', 'Parental Stress Management' and 'The Other Half' groups. 'The Other Half' group continued to facilitate an active involvement with fathers in residence each week. An average of 4 fathers attended each week. The RU Social Worker presented her evaluation from "The Other Half Group" at the United We Stand Conference in Perth in October 2006.

## Hotel Services Staff

The hotel services staff prepared over 600 meals for parents and 340 meals for children each month. They also provided in-house catering for meetings and in-services and were responsible for maintenance and cleaning of the Karitane sites.

## Consumer Feedback

"Staff were extremely supportive and friendly. Provided useful strategies to assist with day to day caring of my child. Maintained consistency with techniques and advice by all staff members."

"I was impressed with the dedication shown by all staff whom I came into contact with. Thank you, I feel a better person to have experienced this week here. My stay here outperformed all expectations."

"I'm very grateful for the time, resources and input I have received at Karitane. It has been extremely helpful and I would definitely recommend your service to other struggling mums".

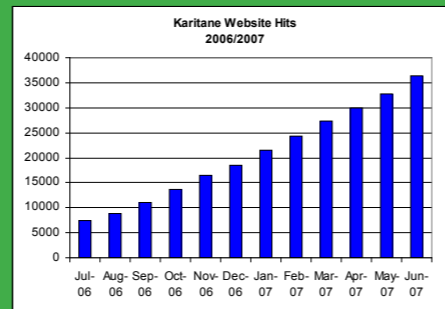
"The commitment by the staff to ensure we stayed and made it through the hard times, and provide the support that was needed to do so".

"I had a wonderful time here. That was a real help!!! Nurses are great! Thanks a lot for your service".

## Careline, Website and Emails

The Careline received 18,612 calls during 2006/2007. Of the calls received, 4,242 related to babies under the age of six weeks, while 3,341 calls were for breast feeding related issues. The weekend night shift Careline staff continued to answer email queries averaging 40 per month.

The Karitane website has proved to be an effective and popular means of communication.



## Individual client support

There were 3,127 individual occasions of service by staff. RFCC supported an increased number of distressed and anxious clients with elevated Edinburgh Depression Scale (EDS) scores over the first 6 months of 2007. The CNC, Perinatal Mental Health, assisted in evaluating service delivery and to develop clinical practice to support the identified staff needs.

## Groups

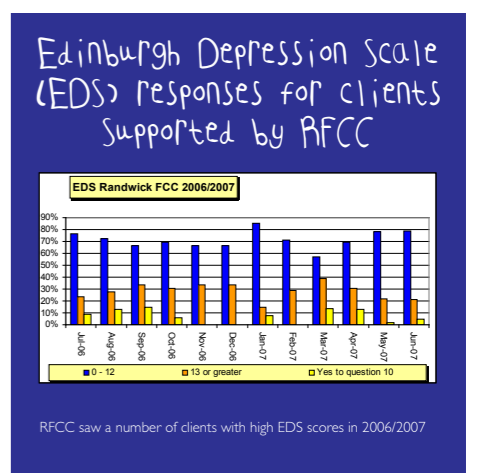
Over the last year RFCC held six parenting groups. Three groups were held in the community, and three were at the centre. A highlight in group work was the first Sydney Day Nursery early intervention group (held here in February) for mothers who need additional help with parenting. The group of young mothers was highly successful, and gave staff excellent feedback. RFCC held three Postnatal Depression (PND) groups during the year with the volunteers caring for the children. Three x 8-week groups were held over the 12 months with 22 participants, and all groups were well attended. Sleep & Settle groups were held three times per fortnight, and were continually booked out. These groups assisted in giving parents a sense of normality in responding to the challenges of being a first-time parent. The parents referred themselves and 63 sessions were held. As always, RFCC was supported by loyal volunteers who added to the success of all the groups.

## Outreach Service

Home visiting became a regular event for families of 'multiples' (twins or more). The families were appreciative of being seen at home, due to the difficulties associated with going out. The RFCC staff assisted with developing routines around management of twins. There were 12 x home visits to families with twins.

## Consumer Feedback

"I was thoroughly impressed with the professional manner, friendliness & overall assistance I received when I attended Karitane at Randwick".



RFCC saw a number of clients with high EDS scores in 2006/2007





# Liverpool Family Care Centre



# Jade House

## Individual client support

There were 3319 individual occasions of service at LFCC.

## Breast feeding Clinic

The need for breastfeeding support and information was identified as a health priority. LFCC had a twice weekly breastfeeding clinic facilitated by lactation consultants. Most referrals were self-referrals by mothers needing urgent assistance. 160 clients attended the breast feeding clinic in the year.

## Groups

Over the year LFCC held eight "Women as Mothers" Groups at the centre and five 'Parenting Groups' in the community. A successful Positive Parenting Program for parents of toddlers was held at the centre. Total attendees for all groups were 739. The Sleep and Settle groups for the younger infants were well attended throughout the year. In total, 45 sessions were held. The Women as Mothers Group (WAM) aims to assist women in making a positive transition to motherhood by providing practical parenting information, self-care skills and the opportunity to discuss issues relevant to becoming a mother in a supportive group environment. The 5-week WAM group successfully helped new mothers support each other to increase their confidence as mothers and to reduce their isolation and stress.

## Outreach Service

Staff provided an outreach service to the community through individual client consultations and to organisations such as the Sisters of Charity, Anglicare, and various playgroups. Reasons for home visits include lack of transport, specific requests, cultural appropriateness, maternal ill health or disability, or a decision by staff that it was more appropriate to work with the family in their own environment. During the year, 335 home visits were undertaken.

Liverpool Community Development & Support Expenditure (CDSE) funding

LFCC were successful in a funding proposal and received funding of \$1,000 to be utilised in developing and printing a WAM group resource manual.

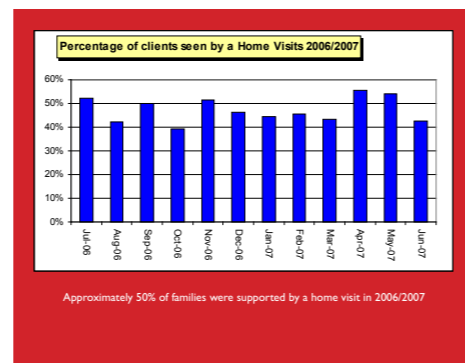
This would then enable other Child and Family Health service providers to utilise the manual to facilitate the WAM group in their specific areas.



## Consumer Feedback

*"If it had not been for the girls I met at mothers group, I would not have been able to complete my nursing degree, which I did at the end of last year."*

(Women as Mothers group participant)



## Individual and group client contacts 2006-7

Jade House provided 3,168 individual occasions of service, 135 referrals, 71 initial assessments and 86 discharges.

Group session includes:

Day Stay Programs	77
PND Groups	1
PND Fathers Groups	1
Baby Massage Groups	2
Stress Management Groups	1

A therapeutic Postnatal Depression (PND) group was held over 8 weeks. This was the first time this specific group was offered at Jade House and was a joint initiative with the Perinatal and Infant Mental Health Service (PIMHS) at Campbelltown. Pre and Post measures were used to evaluate its effectiveness in reducing clinical symptoms and improving self-esteem and quality of life. The outcomes were positive and the women continue to meet and support each other. The group included a partners' night to provide an opportunity to share their experiences, and help with coping strategies. This also proved to be successful and was highly regarded by the participants.

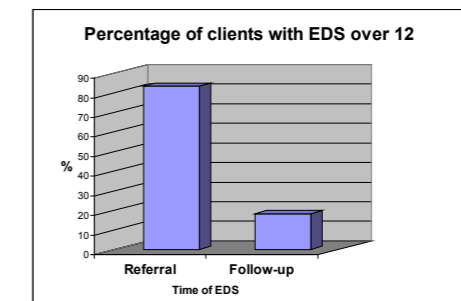
Day Stay expanded by presenting Parentcraft Groups – 3 were run in 2006 on Stress Management and Baby Massage.

Due to the increase in complexity of clients from Cambodia, a psychologist from STARTTS collaborated with Jade House staff in developing ways of supporting these families.

## Service Evaluation

Individual clients demonstrated both clinical improvement and reduction in Edinburgh Depression Scale scores following treatment. Jade House staff complete mandated mental health documentation (MH-OAT) and use this clinically.

Evaluation of Jade House services was ongoing throughout the year and included client progress 3 months after discharge. The evaluation revealed a high level of satisfaction with the service. Clients rated the helpfulness of each of the Jade House services very positively. The majority of clients spoke positively about their treatment programs at Jade House.



At follow-up only 18.2% scored above the likely threshold for major depression on the EDS, which represents a significant improvement from referral, where the great majority (83.3%) scored above this threshold. So comparisons of EDS scores obtained at referral and at follow-up revealed lasting improvements in depressive symptomatology



Rhonda Santi,  
Jade House Consumer Representative



# Karitane Volunteer Programs

Karitane Volunteer Program (KVP) consists of two programs, the Parent Support Program (PSP) funded by the Department of Community Services under The Community Services Grant Program and Linking Families (LF) funded by The Department of Community Services under the Families NSW Initiative.

The KVP services include volunteer training, volunteer home visiting, supported playgroups, mothers and fathers groups, young parents groups, transport and delivery of education and information sessions to families, other professionals and service providers.



Staff and Volunteers – Connecting people to support each other: -

Over the past year:

- An average of 111 volunteers worked across Bankstown, Liverpool and Fairfield Local Government Areas
- 10,561 Volunteer Hours worked
- 113 families supported by volunteer home visiting
- 356 families supported by staff & volunteers
- 4,564 group participants
- 1,682 women visited in maternity units at Fairfield, Liverpool and Bankstown Hospitals
- 510 occasions where transportation support was provided

Groups are an integral component of KVP. High numbers of families attended all groups with an increasing wait list for many families across the three local government areas.

## BANKSTOWN

- Villawood Playgroup in partnership with Uniting Care Burnside
- Young Parents Playgroup in partnership with Koorana Child and Family Centre
- Aboriginal Playgroup in the Park in partnership with Koorana Child and Family Centre
- Chinese Parent and Infant Joy Group in partnership with Karitane Volunteers

## FAIRFIELD

- Lil Possums Aboriginal Playgroup in partnership with Schools as Community, Bonnyrigg and Liverpool Health Service
- Assyrian/Arabic Playgroup in partnership with Schools as Community, Fairfield
- Vietnamese Playgroup in partnership with Schools as Community, Cabramatta and Vietnamese Women's Association

## LIVERPOOL

- Chinese Parents Support Group
- Living Street Playgroup in partnership with Parents as Teachers, Sadlier
- Leppington Chinese Playgroup in partnership with Playgroups NSW

## OTHER GROUPS

- Triple P Program – Positive Parenting for Vietnamese & Arabic families
- TIPS Program – Parenting program delivered to Assyrian and Vietnamese Families
- Men's Group – Partnership with Bankstown Creating Links and Anglican Church, Revesby
- Parents Support Group – in partnership with Yagoona Early Childhood Services and Bankstown Creating Links.
- Parenting Toddlers Group – in partnership with Bankstown Creating Links.



## KVP Staff

- 10 paid staff (6 full-time and 4 part-time)
- Bilingual staff – languages include Vietnamese, Assyrian, Arabic, Maltese, Spanish, Chinese (Mandarin and Cantonese).
- Aboriginal staff member

Staff accepts referrals, supported the volunteers in their role, provided additional support to families, case management, advocacy, health promotion, transport and community development.



## Initiatives

Karitane employed a CNC in Perinatal and Infant Mental Health. This position commenced in January 2007 and is based at Jade House. The role provides significant clinical input to Jade House as well as being organisational with opportunities to provide education, training and supervision across Karitane. Joint education around Perinatal Mood disorders has been established with the PIMHS team at Liverpool and workshops have been planned for 2007.

The Jade House consumer representative continued to be actively involved in service delivery. Her job description was reviewed to include regular attendance at Day Stay, assisting in reviewing documentation for clients and producing a client newsletter.

Bunnings Villawood volunteered their time to do a 'make over' of the Jade House garden. The staff and clients are grateful for the increased opportunity to spend time outside in a relaxing and lovely 'fairy garden'.

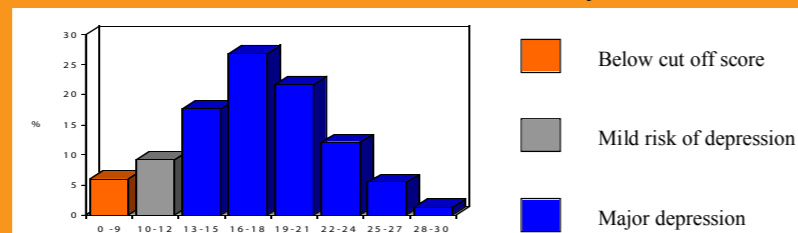
Jade House staff continued to facilitate clinical supervision to Karitane staff. They also facilitated a very successful Team Building for Karitane staff at the end of year training day.

## Papers and conference presentations

A paper for publication entitled 'Audit of an Australian perinatal mood disorder unit: client characteristics and outcomes' was submitted to a peer reviewed journal for publication. This paper reviews clinical and socio-demographic data on Jade House clients and evaluates clinical outcomes for clients who have completed treatment at Jade House.



EDS Scores of clients on referral to Jade House



Clients referred to Jade House generally present with high levels of psychological distress. Overall, the mean EDS score for this sample was 17 and this graph reveals that most women (75%) had a referral EDS score of 13 or more, which is indicative of a major depressive illness.

# Clinical Nurse Consultants, Allied Health Team + Toddler Clinic

## CNC, Child & Family Health - Deborah Nemeth Clinical Practice Review

The excellent results received in the ACHS Organisational Wide Survey demonstrated Karitane's commitment to high quality evidence-based care. The award of an 'Outstanding Achievement' rating for the planning and delivery of care in partnership with clients highlighted the success of integrating partnership into all aspects of clinical service provision.

The initiatives of the past year have included the review of intake prioritisation categories across Karitane services and discharge planning processes. A Discharge Risk Screen was developed and implemented to identify those clients with needs that require further assessment and follow-up before being discharged. Karitane also undertook a review of consent requirements, including the review of consent forms and practices utilised by similar services across Australia and legal consultation. The outcome has been the development and implementation of new consent forms and policy addressing the variety of issues related to client care across Karitane services.

The Karitane Parenting Confidence Scale (KPCS) has been implemented as part of the revised assessment processes, providing valuable information both at initial assessment and following discharge.

The KPCS was developed following the identification of parenting confidence as an important variable which impacts on parent and child outcomes and the Scale has demonstrated validity and reliability across various contexts including community-based and residential services. The Scale is sensitive to change and has therefore been found to be a useful outcome measure following child and family service intervention.

The Karitane Sleep & Settling Clinical Practice Guidelines have undergone extensive review with a multidisciplinary working group reviewing current literature, guidelines and practices of similar services and collated feedback from consultation with parents and community clinicians. The new guidelines include underpinning principles and a variety of settling options which can be utilised by families accessing services across the Child & Family Health spectrum.

Karitane continued to consult and collaborated on many projects including the expert review of content for the national Raising Children Website initiative and provision of information to a variety of media, i.e. monthly articles on sleep issues in the national Practical Parenting magazine. Karitane is actively involved in the development of the NSW Health Child & Family Health Nursing Practice Standards Framework and accompanying Clinical Skills Assessments and Resources (auspiced by NSW Nursing and Midwifery Office) and represented on the NSW Health Children & Young People's Health Priority Taskforce

## CNC, Perinatal Mental Health - Marion Stein

The clinical nurse consultant, Perinatal Mental Health position commenced in January 2007.

The position, based in Jade House, contributed to clinical services at a senior level, participating in clinical service planning to promote evidence-based services and responsive practice to the needs of the target population.

The position provided perinatal mental health expertise across the organization working collaboratively with managers and staff in assessing the needs of consumers and reviewing clinical practice. This involved case discussion with staff at two sites, identifying mental health issues in complex cases and developing strategies to address them.

The CNC provided clinical supervision for the supervisors of Clinical Supervision groups across the organisation, as well as individual and group supervision as needed.

The CNC worked collaboratively with the Karitane Education and Research Department (E&RD) to identify and develop programs, which addressed the perinatal mental health

training needs of staff from within Karitane, as well as other external health providers. This involved assisting the E&RD with reviewing of the mental health component of the Diploma in Child and Family Health UWS and planning for a two-day workshop for rural health workers. Other training included familiarising staff with the Mental Health Act and refresher training in the use of the Edinburgh Depression Scale.

The CNC was involved in providing in-services to SSWAHS hospital social workers, Community Mental Health Teams, and students of the Diploma in Infant Mental Health.

Liaison with other perinatal mental services such as PIMHS (SSWAHS) resulted in the co-facilitation of the 3-day Mental Health Issues in the Perinatal Period Workshop, which ran in March 2007 and will also be run in September 2007.

## CNC - Early Intervention - Sue Morgan

### Consumer Feedback

"The skills I have learnt in managing my sons have been invaluable. We now have a much happier household. I spend quality time with the boys every day and I feel our relationship is very strong. Thank you."

"My daughter has responded really well and I feel so much more confident in my approach with her."

"I am so glad that I came to the Toddler Clinic as I could see the relationship with my son wasn't going well and now I feel so much closer to him."

## Allied Health, Team Leader - Margie Stuchbery

Karitane's Allied Health Team of psychologists and social workers continued to work in collaboration with nursing and medical staff to provide a comprehensive approach to caring for families. Transition to parenthood and caring for infants and toddlers can present challenges to relationships and families. Where distress levels become unmanageable the Allied Health Team provided psychological interventions or referred families to appropriate services in their area. Focussed psychological interventions were delivered through individual work with clients and through group programs.

The Allied Health Team developed group programs to target areas of need for families in distress. These included a Mother-Infant Therapy group, Anxiety Management group, The Other Half Group (for fathers), Connecting with Your Child and a Postnatal Depression group, as well as delivering Triple P parenting groups.

Allied Health staff provided talks on perinatal mental health issues to the Department of

Community Services (DoCS), Mission Australia, Centacare, Early Childhood and Parenting Service (ECAPS), Mothers of Preschoolers (MOPS) and Women's Refuges. Allied Health staff provided the Attachment and Postnatal Depression education component of Karitane's Certificate IV, Parentcraft. In addition to their clinical and teaching role, Allied Health team members made a substantial contribution to Karitane's Education and Research Department by submitting papers for publication, evaluating clinical programs, presenting at conferences and developing clinical materials for distribution to clients. Allied Health staff provided mental health representation on Karitane's Clinical and Corporate Governance committees. Three Allied Health Staff completed higher qualifications, two completing Master's degrees in Counselling Psychology and one in Clinical Psychology.

To maintain and develop standards of clinical practice the Allied Health team have access to external specialist training programs relevant to their needs as well as regular formal external and informal internal clinical supervision.

## Toddler Clinic

The Karitane Toddler Clinic, facilitated by the CNC Early Intervention, worked with 10 families each week with a growing waiting list. The families completing the program demonstrated significant improvements in strengthening the relationship with their children. The Parent Child Interaction model was modified to suit each family's identified needs. Evaluation of this user-friendly program identified that it improved families' appreciation of their toddler and re-established a closer relationship.

A study of 41 families was associated with a range of statistically and clinically significant



improvements in child behaviour, parent-child relationship, parenting confidence and maternal distress. A poster was presented at the Working in Partnership Conference Darling Harbour identifying the results of the study.

A 0.6 FTE position of a Registered Nurse with the Toddler Clinic gave the Clinic the capacity to increase family consultation and Professional Education. The nursing staff rotation from the Residential Unit augmented toddler management skills for staff. Allied Health support was an addition to the team in 2007.

The CNC was supported financially by the Rotary Club of Liverpool West and the Rotary Club of Liverpool Greenway to complete the Parent Child Interaction Therapy Workshop at the University of Florida, enhancing the knowledge and experience of the Toddler Clinic.

The Toddler Clinic Workshops which were offered to Karitane and external professionals

confirmed the increasing interest of clinicians in this early intervention field. Attendance numbers were full for all workshops.

## Consumer Feedback

"I used to be so reserved and never spoke to anyone about my problems or feelings. Now I feel comfortable talking about myself and understand myself better. I feel better about myself. I understand my relationships better too."

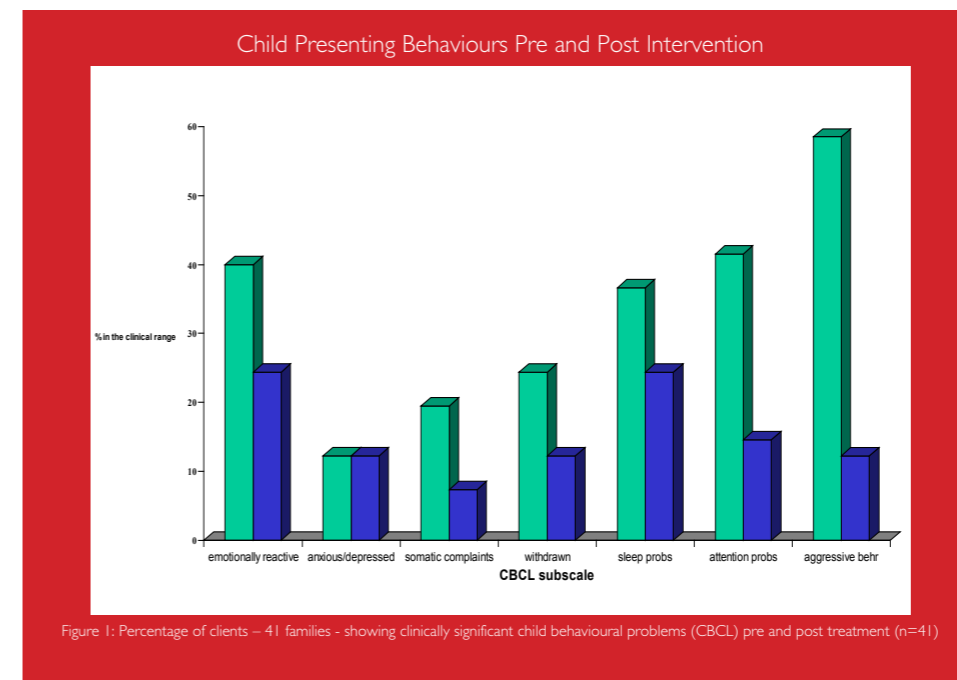


Figure 1: Percentage of clients - 41 families - showing clinically significant child behavioural problems (CBCL) pre and post treatment (n=41)

# Education & Research Department



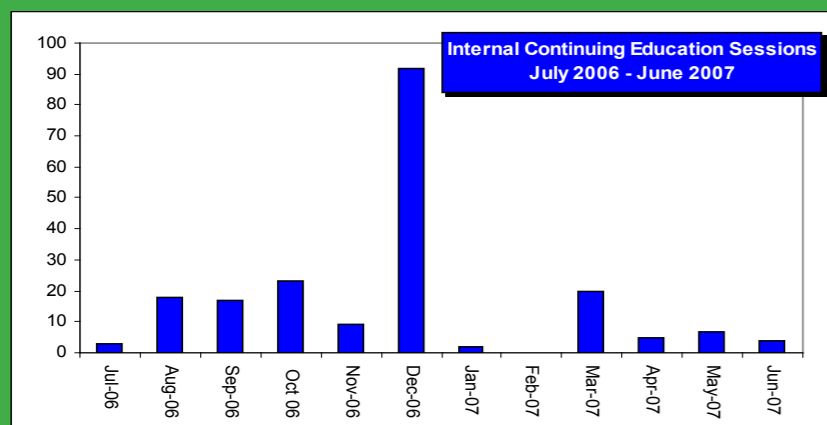
## Partnership in Practice Conference

In May 2007 Karitane partnered with the Australian Association of Maternal, Child & Family Health Nurses (AAMCFHN) and Tresillian Family Care Centres to host the 2nd National Conference of the AAMCFHN: "Partnership in Practice". The Conference was a great success, educationally, socially and financially.

## Continuing internal education

Mandatory training requirements were addressed by holding annual mandatory education days for all staff. These days offered the opportunity for staff from all Karitane sites to come together enhancing staff morale and promoting networking within the organisation. Training sessions included fire and evacuation, manual handling and CPR. In excess of 95% of Karitane staff fulfilled mandatory training requirements. The internal ongoing education program was developed in response to the education needs analysis performed annually and in response to needs for current clinical practice.

An education needs analysis identified that administration staff requested specific education. Second monthly administration meetings were commenced with a continuing education component included.



Staff participating in internal education sessions Mandatory education was conducted in December

## New initiatives

### Attachment-based Clinical Education Program (ACE)

The attachment theory framework based clinical education program (ACE), an internal education program for all clinical staff, was launched in 2007 to support Karitane's focus on attachment theory as our framework.

All Karitane clinical staff have access to a universal standard of education in attachment and associated clinical strategies and programs. The components include:

- "Keys to Caregiving"
- Attachment
- Family Partnership Training
- Introduction to PCIT/Working with Toddlers
- Introduction to Circle of Security
- Basic evaluation: tools and strategies.

## Evening Parenting Education

The E&RD delivered Evening Parenting Education sessions based at Pre-schools and Child Care Centres. The response to education for parents offered through centres was overwhelming, with excellent attendance at all sessions.

## Professional Development

### UWS

Karitane continued to work in Partnership with the University of Western Sydney to deliver the 'Graduate Diploma of Nursing – Child and Family Health, Karitane'. This remained the only Child and Family Health post graduate qualification in NSW offered at Graduate Diploma level.

Graduate Diploma in Child & Family Health (Karitane) Student Numbers

Year	2005	2006	2007
Number of Students	26	31	25

## Parentcraft

The Certificate IV in Parentcraft Nursing for Enrolled Nurses offered in partnership with the SSWAHS Centre for Education and Workforce Development and NSW Health has seen consistent participation since 2004.

This reflects the need for ongoing professional development for Enrolled Nurses and Karitane is committed to continuing to deliver this.

Certificate IV in Parentcraft Nursing for Enrolled Nurses Student Numbers

Year	2004	2005	2006	2007
Number of Students	12	8	11	14



## Rural Education

Karitane education team delivered rural education throughout the year at Dubbo, Port Macquarie and Coffs Harbour including: Toddler Workshops, seminars for health professionals and training for child care providers.

## Clinical supervision

Members of the Karitane Education & Research team were active in delivering and promoting clinical supervision both internally and externally. 95% of Karitane clinical staff had Clinical Supervision available to them. Karitane staff also delivered supervision to professionals in external organisations e.g. Bankstown C&FH Nurses, Tresillian, Hoxton Park C&FH Nurses and nurses from the Miller Early Childhood Sustained Home Visiting Program (MECSH). Evaluation of the Karitane internal Clinical Supervision program is underway.

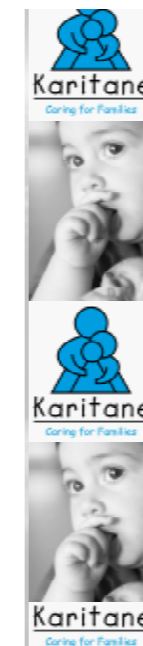
## Karitane Research

### Evaluation of Client Outcomes Following Residential Family Care Unit Admission

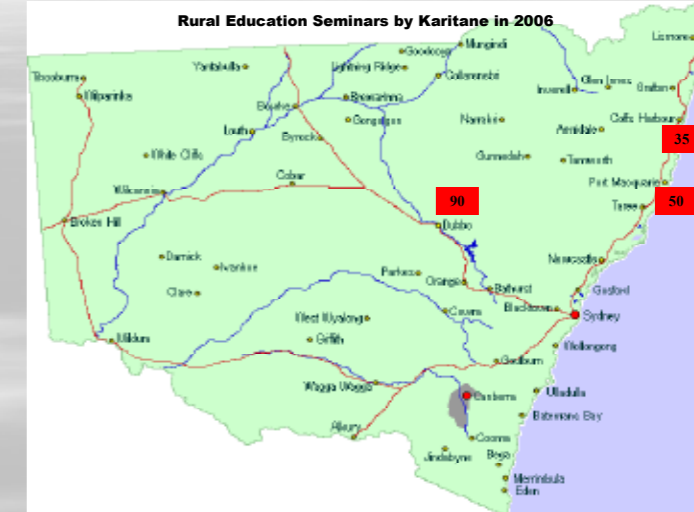
This study evaluated mental health and parenting outcomes associated with admissions to the Residential Unit. Results showed that the Karitane Residential Family Care Unit program is an effective intervention strategy for families experiencing complex early parenting difficulties, with significant and lasting improvements in infant sleep, maternal wellbeing and utilisation of strategies at home. Results have been disseminated at a number of conferences including the World Association for Infant Mental Health (WAIMH) Congress, Paris, July 2006, QEC 4th biennial conference, November 2006 and The Zero to Three National Training Institute conference, New Mexico, December 2006.

### Evaluation of the Karitane Toddler Clinic

The Karitane Toddler clinic was established in 2005 and an evaluation study was conducted in 2005/2006. Outcome variables included: parental depression, anxiety and stress; parenting distress; child psychopathology; and toddler attachment. Results showed the intervention to be associated with significant improvements in toddler behaviours, in the quality of the parent-child relationship and parenting confidence. Results were presented at the Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres) in May 2007.



## Mapping Rural Education



## Exploration of subtypes of postnatal mood disturbance

This study aims to determine whether there are identifiable subgroups of postnatal depression. Women with PND and a history of previous depression will be compared with women who have become depressed for the first time in the postpartum period. The study will seek to determine whether these groups of women are different in terms of cognitive style, maternal identity/self concept, personality style, adult attachment style and symptom presentation. The differences found between these groups may help to tailor PND interventions. Preliminary results have been presented at a number of conferences in 2007 including the 'Women and Depression conference' in Sydney in May and the Australasian Marce Society Conference in Surfers Paradise in June.

## Review of Jade House

In this study, a retrospective review of Jade House data and a post-discharge follow-up of Jade House clients was undertaken with the aims of providing a description of the clients who access Jade House, a description of the clinical services provided, consumer feedback and to report outcomes associated with the interventions provided.

## Development of the 'TAS-draw'

This project is being undertaken in conjunction with Dr John Kirkland in New Zealand. Dr Kirkland and colleagues from Massey University have recently developed the TAS-45, an observational procedure designed to assess the dynamics of parent-toddler relationships. The 'TAS-draw' will be an adaptation of the TAS-45. It is envisaged that the TAS-draw will be used to assess toddler attachment styles and to facilitate discussions about parent-child relationships with clients with low levels of literacy or from non-English speaking backgrounds.

## Evaluation of interventions for fathers at the Karitane Residential Unit

This project evaluated services provided for fathers at the Residential Unit and explored issues related to the experience of fathers within families experiencing complex early parenting difficulties. Results from this project were presented at the AASW National Conference in Perth, November 2006.



Bollywood Dinner at the Partnership in Practice Conference

# Conference Presentations

TITLE	CONFERENCE	VENUE	DATE	PRESENTERS
Evaluation of child and maternal outcomes following admission to the Karitane Residential Family Care Unit (poster)	10th Congress for the World Association for Infant Mental Health	Paris, France	July 2006	Phillips, J., Nemeth, D.
Evaluation of child and maternal outcomes following admission to the Karitane Residential Family Care Unit (poster)	'Zero to Three' National Training Institute conference	New Mexico, USA	December 2006	Phillips, J., Nemeth, D.
'Asleep at Last': Evaluation of Karitane's residential program for infant sleep difficulties	Queen Elizabeth Centre 4th National Conference	Melbourne	November 2006	Nemeth, D., Phillips, J.
'Working Together with 'The Other Half': The Development and Evaluation of a Dad's Group Within a Residential Child and Family Setting'	AASW National Conference	Perth	November 2006	Lennie, L.
De-Novo PND versus Recurrent PND: Are there subtypes of depression in the postpartum?	University of Sydney, School of Psychology Postgraduate conference	Sydney	November 2006	Phillips, J., Sharpe, L., & Matthey, S.
An investigation of subtypes of postnatal depression (poster)	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	Phillips, J., Sharpe, L., & Matthey, S.
Evaluation of the Karitane Toddler Clinic (poster)	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	Phillips, J. & Morgan, S.
Enabling Change with a Whole of Community Participation	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	K. Willcocks
Assessment and Partnership - Finding a Balance	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	Nemeth, D. & Simpson, A.
Comparison of Progressive Waiting and Parental Presence treatments for unsettled infant sleep behaviour	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	Nemeth, D., R. & Matthey, S.
A Partnership Approach to Practice Change (Poster)	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	Nemeth, D. & Maddox, J.
Why do nurses choose Child & Family Health Nursing as a speciality?	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	Hughes, M.
(2007), Impact of Client Satisfaction Surveys on Clinical Practice in Residential Care (poster)	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	Roach, T. & Teoh, C.
Karitane Supporting Men as Fathers.	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	Thomson, L.
Working in Partnership with Parents with an Unsettled Infant: Some techniques of parent-infant therapy using attachment principles	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	Harrison, I.
Does the Two to Five-Year-Old Fit in Child & Family Health Nursing Practice? (Poster)	Partnership in Practice National Conference (Australian Association of Maternal, Child & Family Health Nurses, Karitane & Tresillian Family Care Centres)	Sydney	May 2007	K. Myors, V. Schmied, E. White.
De Novo postnatal depression	Women and Depression Conference	Sydney	May 2007	J. Phillips, L. Sharpe, S. Matthey
An investigation of subtypes of postnatal depression	Australasian Marce Society Conference	Surfers Paradise, Qld	June 2007	J. Phillips, L. Sharpe, S. Matthey

# Quality

Karitane is committed to maintaining a culture of continuous improvement, ensuring a safe environment and providing high quality care. This is illustrated by our participation in the Australian Council on Healthcare Standards (ACHS) – Evaluation Quality Improvement Program (EQulP). ACHS is dedicated to improving the quality of health care in Australia, through continual reviewing of performance, assessment and accreditation. ACHS has developed a standards framework (called EQulP), which is applicable to all health facilities Australia wide. The standards are designed to focus on the essential elements of quality, safe care and service, as well as the organisational functions, which are important in supporting us to provide this care and service. It is these standards that provide us with a framework for quality improvement in our organisation. An important aspect of the accreditation assessment is that it is ongoing – a continuous cycle. Each year the organisation is required to complete requirements as set out by the ACHS. Every fourth year sees the organisation participate in a full Organisational Wide Survey (OWS) for accreditation purposes.

## What is an Organisational Wide Survey (OWS)?

The OWS consists of an on-site visit by independent peer surveyors for a period of three days. Prior to the visit, extensive documentation is completed and sent to the surveyors. This documentation indicates our achievements and states how well we feel we are performing against the set standards. There are 45 criteria that must be addressed.

Karitane underwent an OWS (accreditation survey) in May 2007 with a very positive report being returned. Two very experienced surveyors were on-site for three days. The surveyors were Mr John Hodge and Dr Grahame Robards. It is the surveyors' role to verify what was stated in the submitted documentation. In other words, are we actually doing what we say we are doing to provide quality healthcare in a safe environment and are we addressing the 45 criteria.

The assessment rating scale is used as a means for both the organisation and the surveyors to assess the level of achievement against the standards and criteria. We MUST achieve MA rating or higher for the 14 mandatory criteria. Here is an explanation of the rating scale (5 levels of achievement):

- Level 1  
Little Achievement (LA) - Awareness
- Level 2  
Some Achievement (SA) - Implementation
- Level 3  
Moderate Achievement (MA) - Evaluation
- Level 4  
Extensive Achievement (EA) - Excellence
- Level 5 Outstanding Achievement (OA) - Leadership

## Karitane's Results

We are pleased to announce that Karitane has successfully achieved accreditation for a further four years. Not only did we achieve the required Moderate Achievement (MA) rating for the fourteen mandatory criteria, but achieved Outstanding Achievement (OA) ratings for two criteria one of which was mandatory.

On the 45 criteria we achieved the following results:

Total Number	2007 Rating Achieved
2	OA
10	EA
27	MA
1	SA
4	NA
1	Not Rated

The two criteria for which we achieved OA ratings were:

- 1.1.2 Continuity of Care - Care is planned and delivered in partnership with consumer/patient
- 1.6.3 Consumer Focus – Culturally and linguistically diverse backgrounds and special needs

Karitane's Quality Program continues to progress with Management and staff at all levels becoming more involved in our overall quality improvement program.

Risk Management continues to be a high priority area for Karitane with Corporate and Clinical risk assessments conducted and incorporated into the Risk Register. Senior staff have attended risk management education programs and internal communiqués to all staff have been undertaken to ensure a higher knowledge and awareness of risk management.

Karitane remains committed to the ongoing provision of a consumer-focused safe, quality health care service.

We would like to share with you some of the comments made by the ACHS Surveyors:

"The Karitane Toddler Clinic was commenced in 2005. ... The program is excellent, and the health workers involved are extremely enthusiastic. Karitane provides education on the program for other similar services, and health professionals within the specialty field" (Criterion 1.1.2)

"The Karitane Volunteer Program (KVP) is a superb example of catering for clients from a Culturally and Linguistically Diverse (CALD) background. There are more than 100 active volunteers involved in the program. ... This program has been the key factor in assigning the OA rating for this criterion. ... KVP is indeed an outstanding example of community, consumer and staff interaction in the development of a unique program for CALD clients." (Criterion 1.6.3)

"There are good links between work teams and the Executive, with formal and informal opportunities to meet with staff in order to identify issues which may impact on workplace relations." (Criterion 1.6.3)

"There is a clear commitment at the Executive level to provide a safe working environment for all staff."



# Occupational Health & Safety (OH&S)

Karitane is committed to providing and maintaining a high level of quality care in a safe and caring environment. The Karitane Board and Management Committee considers that the Safety of patients and employees is of the utmost importance, and endeavours to establish and maintain systems of work in its business culture to ensure incidents and injury are minimised. As a part of that commitment Karitane has appointed a permanent part-time Quality and Safety Management Coordinator to oversee the progress and effectiveness of its OH&S activities and to continue to systematically plan, implement and improve systems and processes that provide direction and consistency across the whole organisation. Karitane will continue to monitor quality and safety throughout the organisation using various indicators, audits, reviews and evaluation tools. That includes both internal and external audits to assist in the continual review and improvement of our services.

In May 2007, the Australian Council on Health Care Standards conducted an organisational wide audit using EQUiP 4 standards. Karitane received MA ratings for all Safe Practice and Environment Criteria.

The NSW Health Occupational Health Safety and Rehabilitation Numerical Profile Audit was conducted on the 24th November 2006. The audit assessed Karitane's performance in essential aspects of OHS and injury management including:

- Determining the existence and assessing the quality of programs, policies, systems and procedures for OHS and Injury Management
- Assessing the extent to which these are practically implemented and applied in Karitane's workplaces
- Assessing the awareness of these programs, policies, systems and procedures by staff, including employees, volunteers and contractors

As a result, Karitane's continued progress towards achievement of best practice in OHS&IM was awarded with a score of 86.9%.

This is an increase of 7.3% from the previous audit conducted in July 2004.

- As a part of the ongoing monitoring of a safe environment, previously completed risk assessments are being assessed and actioned. Risks are being rated using the NSW Health Severity Assessment Code (SAC) Risk Management rating system and prioritised in accordance with the score rating to ensure the risk is addressed in a timely manner.
- The Sydney South West Area Health Service Smoke Free Environment Policy has been implemented and adapted, in consultation with staff, and has proven to be effective.
- The OHS Policies and Procedures are continuing to be reviewed in consultation with the OH&S Consultative Committee and Corporate Governance Committee.
- The consultative process is undertaken at every opportunity and all staff are encouraged to contribute in OHS decision making. Trialling of equipment has been undertaken and staff have utilised the Product Evaluation forms on various items of equipment with the anticipation that some of these items will be purchased. The purchase of trolleys, step ladders and bed lifters has been an outcome of this exercise.
- A Manual Handling/Ergonomic Consultant conducted on-site training and a review of ergonomics and manual handling tasks. The resultant recommendations were adopted and manual handling tasks have been eliminated or minimised.
- Review of the Planning Design and Purchasing Policy. The implementation of this policy is under the auspices of the Finance Coordinator.
- Ongoing safety and environmental inspections continue. In addition to reviewing the previous year's observations, corrective action for identified issues is undertaken.
- An annual review of the storage, handling and disposal of hazardous substances was conducted. The register of substances was reviewed and updated. A comprehensive review and updating of all Material Safety Data Sheets (MSDS) was also completed. The MSDS are held at each centre. There were no hazardous substances incidents recorded for the year.
- Mandatory OHS training (CPR, Manual Handling, Fire and Evacuation, Infection Control) was provided with 98% of Karitane staff completing the training.
- Karitane continues to support the immunisation program of NSW Health by offering staff the opportunity to receive vaccinations to immunise them in accordance with NSW Health guidelines.
- Karitane engaged the services of a Fire Safety Consultant for the purpose of conducting a Fire Safety Survey. Corrective action for identified issues was undertaken and completed within a month of receipt of the report.
- An active injury management program is provided through SSWAHS. This is provided to employees injured at work and those recovering from injury and illness that have occurred away from work. Seven staff members have utilised the rehabilitation program this year. Four have returned to pre-injury duties.
- An Employee Assistance Program or Staff Counselling Service is available to all staff and their families for work-related and personal problems.

The OHS, Injury Management and Risk Management programs conducted reflect Karitane's ongoing commitment to incorporating and maintaining a culture of continuous improvement, ensuring a safe environment and providing high quality care.

OHS&R NUMERICAL PROFILE SCORE 1996-2006										
Year	1996	1997	1998	1999	2000	2001	2002	2003	2004	2006
Score %	24.5	43.6	54.0	59.2	67.2	79.4	81.2	68.1	79.6	86.9



Karitane staff attend annual fire training

# Treasurer's Report

## Operations

The combined activities of Karitane resulted in an operating profit for the year of \$524,989. This profit included grants from Beyond Blue of \$194,637 and Juvenile Justice Department of \$103,959 for projects which will be conducted over ensuing year's. The costs for these grants will be incurred and brought to account at the time the projects are undertaken. During the current year additional income \$295,060 was also derived from distribution of unit trust on funds invested, pending payments being made on the rebuilding expansion program. The rebuilding program is now anticipated to be completed in March 2008. The operating result for the prior year was a loss of \$73,003.

## Financial Position

During the year equity in the Group increased by \$1,037,969. The profit accounted for \$524,989 and the difference was mainly due the revaluation of freehold land and building owned by the Group. The properties were independently revalued at the 30 June 2007 in keeping with the three year program of review. The increase in value of the properties was \$541,734.

## General

The financial position of Karitane has been maintained in anticipation of the completion of the rebuilding program which is nearing completion. The balance sheet continues to provide a strong basis for continuation and expansion of the Group's activities. Where deemed appropriate by the Directors, improvements and expansion will be undertaken with a conservative utilization of available funds. Finally, the Karitane Board would like to congratulate the Karitane management and staff on how well the company's finances have been managed over the last financial year.

**Mr Garth Ross**  
Treasurer

# Statement of Financial Performance

## CONSOLIDATED INCOME STATEMENT FOR YEAR ENDED 30<sup>th</sup> JUNE 2007

	2007 \$	2006 \$
Revenue	6,277,573	5,808,042
Other Income	64,522	10,771
Employee benefits expense	(4,687,456)	(4,630,176)
Depreciation and amortisation	(191,747)	(195,100)
Occupancy expenses	(137,589)	(146,231)
Administration expenses	(56,453)	(72,530)
Fees written off	(36,666)	(43,450)
Printing and stationery expenses	(54,734)	(73,758)
Telephone expenses	(1,403)	(56,296)
Repairs and maintenance expenses	(87,274)	(69,390)
Conference management fees	(10,110)	(130,636)
VMO expenses	(120,065)	(94,524)
Other expenses	(433,609)	(379,725)
<b>Profit/(Loss) for the period</b>	<b>*524,989</b>	<b>(73,003)</b>

\*Note: The combined activities of Karitane resulted in an operating profit for the year of \$524,989. This profit included grants from Beyond Blue of \$194,637 and Juvenile Justice Department of \$103,959 for projects which will be conducted over ensuing year's. The costs for these grants will be incurred and brought to account at the time the projects are undertaken.

# Consolidated Balance Sheet

AS AT 30th JUNE 2007

	2007 \$	2006 \$
<b>ASSETS</b>		
<b>Current assets</b>		
Cash and cash equivalents	218,648	108,199
Trade and other receivables	594,396	86,547
Available-for-sale financial assets	4,667,578	5,140,225
Other	126,589	25,088
<b>Total current assets</b>	<b>5,607,211</b>	<b>5,360,059</b>
<b>Non-current assets</b>		
Property, plant and equipment	8,515,255	7,026,902
Intangible assets	4,400	5,200
<b>Total non-current assets</b>	<b>8,519,655</b>	<b>7,032,102</b>
<b>TOTAL ASSETS</b>	<b>14,126,866</b>	<b>12,392,161</b>
<b>LIABILITIES</b>		
<b>Current liabilities</b>		
Trade and other payables	1,207,237	727,637
Provisions	1,321,277	1,040,936
Other	12,800	-
<b>Total current liabilities</b>	<b>2,541,314</b>	<b>1,768,573</b>
<b>Non-current liabilities</b>		
Provisions	107,384	183,389
<b>Total non-current liabilities</b>	<b>107,384</b>	<b>183,389</b>
<b>TOTAL LIABILITIES</b>	<b>2,648,698</b>	<b>1,951,962</b>
<b>NET ASSETS</b>	<b>11,478,168</b>	<b>10,440,199</b>
<b>EQUITY</b>		
Retained earnings	8,492,025	7,963,563
Reserves	2,986,143	2,476,636
<b>TOTAL EQUITY</b>	<b>11,478,168</b>	<b>10,440,199</b>

The above information was extracted from the Financial Statement of Karitane for the year ended 30th June 2007 and is included here for information purposes only. The Financial Statement can be obtained free of charge by writing to:  
The Executive Manager – Karitane PO Box 241, Villawood NSW 2163.

## Karitane Staff

### Executive Manager

Robert Mills, MPH (UWS)

### Visiting Medical Officers

Dr Ian Harrison, Psychiatrist

Dr Peter Hong, Paediatrician

### Quality Manager

Vicky Jelic

### Finance Manager

Katia Paton

### OHS Co-Ordinator/Fire/Security

Bob Hunter

Vicky Jelic

### Marketing and Promotions Manager

Vicki Samson

### Employee Services/Fleet Management Coordinator

Pina Filippone

### Clinical Nurse Consultants

Susan Morgan

Debbie Nemeth

Marion Stein

### Educators

Monica Hughes

Ann Simpson

### Research Officers

Jane Phillips

Dr Rudi Cmcec (post-Doctoral Fellow)

Charlie Zhang

Dr David Hawes

(Honorary Research and Teaching Fellow - Karitane)

### Residential Unit

Cecily Barton, Nursing Unit Manager

Lynette Finch, Acting Nursing Unit Manager

Michelle Aros, SW

Judith Arentz, RN

Joanne Bailey, EN

Dianne Brandt, EN

Angela Brus, EN

Karen Cawthorne, EN

Lynne Daly, RN

Fiona Donald, RN

Gail Dickens, EN

Susan Filacouridis, RN

Lynette Finch, CNS

Rebecca Gallagher, RN

John Gilbert, EN

Carol Giovanetti, EN

Mary Ha, PSC

Stephanie Harrison, RN

Tracy Heslin, EN

Kylie Hodge, CNS

Therese Holdsworth, RN

Debbie Holmes, CCW

Carol Hood, EN

Bronwyn Howard, EN

Maree Klafas, RN

Linda Lennie, SW

Patricia Meehan, RN

Tonya Mercer, RN

Jeanette Moore, CNS

Heidy Morales, CCW

Janice Oreb, EN

Johanna Read, EN

Thelma Roach, CNS

Margaret Simpson, EN

Edith Stenvert, EN

Judith Sullivan, RN

Ruth Tam, RN

Clare Teoh, CNS

Leanne Tucker, EN

Karen Willcocks, CNS

Wendy Williams, RN

Angela Wood, CNS

### Medical Records

Tia King

### Hotel Services

Stella Stankovic, Leading Hand

Maureen Beardsley

Aniceta Cruz

Radojka Krstic

Richard Miller

Antonietta Yomona

### Jade House

Vicki Samson, A/Manager

Karen Raine, Manager

Luisa Absell, Admin

Lesley Baxter, EN

Dr Rudi Cmcec, PSC

Maria Cullen, EN

Agata Kowalczyk, PSC

Dr Sunitha Job, PSC

Leone Thomson, CNS

Angie Scalise, PSC

Margaret Stuchbery, PSY

Marion Stein, CNC

Kim Thorpe, Admin

### Liverpool Family Cottage

Kate Mejaha, Nursing Unit Manager

Lesley Campbell, CNS

Mary Ha, PSC

Sophia Nabi, CNS

Zoe Paull, SW

Rose Propper, Admin

Randwick Family Cottage

Frances Stancombe, Nursing Unit Manager

Justine Adler, PSC

Kathy Hodge, ENSG

Shelley Lamotte, RN

Sarah Maiden Capel, RN

Karen Myors, RN

Christine Rosengren, Admin

Lesley Weiner, PSC

### Karitane Volunteer Programs

Rita Fenech, A/Nursing Unit Manager

Frida Azzopardi, Admin

Kardonia Daawod, HENG

Amy Leung, HENG

Heidy Morales, HENG

Chau Nguyen, SW

Tien Nguyen, HENG

Anh-Linh Pham, HSM

Joanne Ramjan, CNE

Freda Simpson, AHENG

### Administration

Susan Atterton

Frances Cascio

Maria Daniel

Teresa Kelly

Maureen O'Donoghue

Diva Ponzio

Julia Robards

Robyn Sargent

### Casual Staff

Cheryl Adams, EN

Angela Bugge, Admin

Debbie Parrington, RN

Jane Surgenor nee Adams, EN

Jacqueline Waine, EN

### Resignations

Michelle Aros, SW

Lesley Baxter, EN

Joanne Bailey, EN

Angela Bugge, Admin

Dr Rudi Cmcec, PSC

Maria Cullen, EN

Bob Hunter, OHS

Debbie Parrington, RN

Tanya Spencer, PSC

# Karitane Volunteers

Gladys Aguilar  
 Teresa Alexander  
 Shareema Allen  
 Helen Arabzadeh  
 Dawn Atkinson  
 Dolores Beke-Scalone  
 Lora Berridge  
 Judith Blanksby  
 Valmah Boccassini  
 Mary Fay Brennen  
 Peggy Brown  
 Joan Byrnes  
 Tania Canto  
 Tep Moni Chea  
 Lorraine Cheeseman  
 Marina Cheung  
 Laurane Christensen  
 Karen Cotterill  
 Sharon Cousins  
 Ruth Craven  
 Denise Darcy  
 Doreen Day  
 Anne Devine  
 Rajinder Dhuphar  
 Nam Du  
 Huda Fakhouri  
 Patricia Ferguson  
 Kam Fung  
 Colleen Fitzpatrick  
 Irene Fuller  
 Samira Hadou  
 Margaret Hayward  
 Buu Lien Hong  
 Hoa Huynh  
 Be Nam Huynh  
 Lorraine Jeacle  
 Alejandrina Jofre  
 Juliet Kalo  
 Cherri Kerr  
 Judith Langmann  
 Aline Laufoli  
 Fay Layton  
 Lynn Le Franc  
 Audrey Leishman  
 Tina Li  
 Deborah Little  
 Ann Liew  
 Thelma McPherson  
 Susanne Melia  
 Miriam Mendoza

Sandra Merritt  
 Jean Michaels  
 Alison Murphy  
 Valerie Mutch  
 Eileen Neale  
 Sanee Nipatcharoen  
 Siriphanh Nontanovan  
 Maureen O'Donoghue  
 Peggy O' Mahony  
 Johanna Perez  
 Yamilet Perez Martinez  
 Thu Huong Phan  
 Kathleen Pride  
 Jan O'Neil  
 Penny Robson  
 Susan A Scott  
 Terri Smith  
 Maria Suarez  
 Ira Talangbayan  
 Ut Tran  
 Nga Tu  
 Sengul Tunakan  
 Stephanie Turner  
 Anh-Van Vu  
 Jackie Waine  
 Kay Walsh  
 Juliet Warda  
 Robyn Wilson  
 Doris Wittmann  
 Sanaa Yako  
 Juliet Yawanis  
 Ting Liang Zhang  
 Maria Lupica  
 Roxene Quinn  
 Maragret Peade  
 Natalie Coulter  
 Donna Edwards  
 Christine Lumsen  
 Dina Mahab  
 Tina Musumeci  
 Maria Diavatiotis  
 Grace Lusoder  
 Elizabeth Shields  
 Jocelyn Glover  
 Robyn Quinnell  
 Karen Torres  
 Rhonda Campbell  
 Sahira Hindi  
 Josephine Ivancsik  
 Veronica Mak  
 Ann Robinson  
 Ana Maria Astudillo  
 Suzanna Trajkovska  
 Thao Tran  
 My-Nuong Loi  
 Effisia Okaro  
 Gloria Vi Nguyen  
 Una Wise  
 Sophie Crum

# Karitane Sponsors & Donations

Karitane sincerely thanks the individuals and companies who have donated over the past 12 months for their generosity. Due to their kindness we have been able to add value to the quality of care across the organisation



## Sponsors

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# Inaugural Charity Golf Day Sponsors



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A special thank you to the Rotary Club of Liverpool Greenway & ADM Financial Services for their valuable support to Karitane

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Karitane

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Caring for Families