



Ambulance Service
of New South Wales



“Celebrating the 20th anniversary
of women as ambulance officers in
the Service”

1999 / 2000 ANNUAL REPORT

Year ending 30 June



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Letter to the Director General

Mr Michael Reid
Director General
NSW Health Department
Locked Mail Bag 961
NORTH SYDNEY NSW 2059

Dear Mr Reid

I have pleasure in presenting the Annual Report of the Ambulance Service of New South Wales for the year ended 30 June 2000.

The report was prepared to comply with the provisions of the Annual Reports (Statutory Bodies) Act 1984, and the Public Finance and Audit Act 1983, as amended, and complies with standardised reporting formats for financial statements approved by the Treasurer.

The Service thanks you and the departmental officers who continued to assist and support the Service during the past financial year.

Yours sincerely

Greg Rochford
Chief Executive Officer

Report from the Chairman of the Board

On behalf of the Board of the Ambulance Service of New South Wales, I am pleased to introduce the Annual Report for 1999/2000. The report contains an overview of the operations and finances of the Ambulance Service of New South Wales for the year.

It has been an important year for the Service, a time of significant consolidation and planning. In the short term, the Service has laid the groundwork for the delivery of ambulance services during the Olympic and Paralympic Games. For the longer term the Board has been considering new strategic directions for delivering services in the 21st Century.

In doing so the Service has managed to meet the many demands placed upon it and continued the progress of initiatives developed in the preceding year. Importantly, in line with our responsibilities within the health care system and our vision to be a world leader, the Service has positioned itself to pursue a range of reforms to increase our capacity to meet the guarantees of service we make to our stakeholders.

The Ambulance Service of New South Wales operates in an environment of dynamic change. The release of the Government's *Action Plan for Health* stimulates the Board to consider strategies for improving the integration of the Service within the health care system. To achieve this the Service must consider new alignments, fresh concepts and new forms of service delivery in both metropolitan and rural New South Wales.

The Board fully endorses the Service's intention to improve and strengthen its approach to service development and planning. During the year the Board approved proposals to establish a new Executive team structure and regroup some functions within State Headquarters. I am confident that this will provide a better basis for supporting the operational arm of the Service and help deliver increasingly responsive and efficient services to the community.

The Board was pleased to see the successful roll out of the Computer Aided Dispatch System (CAD) across the State. We have made an important investment in CAD and look forward to CAD realising its potential to contribute to; improving response times, greater efficiency and improved forward planning.

The Board appreciates the support of the NSW Government and our commercial partners. Although it has been another difficult year in financial terms I am pleased to report that the Service has produced a better financial result in 1999/2000 and instituted improved financial and activity reporting systems.

The Government's *Action Plan for Health* reveals the intention to create more multi purpose services in rural New South Wales and provides the opportunity for the Service, the NSW Health Department and communities themselves to collaborate as partners in facility planning and service development. The Service is also interested in considering the emerging possibilities for more effective use of emergency and health care resources and integrating ambulance and health care services in ways that benefit rural communities and further enhance the skills of ambulance officers.

During the next year the Board will oversight a longer term planning process to set the stage for key reforms and initiatives. The Service wishes to; progressively enhance efficiency, improve training and career prospects, explore the expectations of our stakeholders, and promote the provision of integrated services to the community.

Given the progress made this year I am confident that the renewed emphasis being given to planning will reap dividends over the next few years and will keep the Ambulance Service of New South Wales true to its vision.

I would like to take this opportunity to thank the many and dedicated members of staff throughout the State for their work this year in providing services to the people of New South Wales. We have set a sound base during the past year and I encourage everyone to work together in the coming year to meet our vision of being the world leader in ambulance services providing a shield of protection to our community.

I commend the 1999/2000 Annual Report to you.



John Ducker
Chairman

Vision

Together we will be the world leader in ambulance services providing a shield of protection to our community.

Mission

As an integral part of the health care system we will provide responsive, high quality services in emergency clinical care, rescue and patient transport through quality of service, organisational performance, valuing our people, and meeting community needs.

Our Corporate Values

We put our patients first by:

- ✦ caring;
- ✦ respecting people;
- ✦ working together;
- ✦ showing accountability and responsibility;
- ✦ focusing on community satisfaction;
- ✦ fostering technical and professional excellence; and
- ✦ ensuring equity of service provision.

Our Objectives

- ✦ To provide high quality clinical care in emergency situations, including pre-hospital care, rescue and patient transport services.
- ✦ To ensure our internal support services are of a high quality and meet the needs of our clinical services.
- ✦ To ensure delivery of clinical care that is responsive and appropriate to the needs of our patients.
- ✦ To constantly review and improve our performance, ensuring that the services we provide remain appropriate and meet our patients' needs.
- ✦ To undertake research into relevant aspects of service delivery.
- ✦ To foster an environment that promotes accountability throughout the organisation.
- ✦ To implement and review Service infrastructures to maximise organisational performance.
- ✦ To capture and communicate information consistently throughout the organisation and ensure effective decision making.
- ✦ To effectively manage the physical and financial resources available to the Service.
- ✦ To foster an environment of empowered and accountable employees who are committed to achieving the goals of the Ambulance Service.
- ✦ To assist our people to further develop their professionalism in order to properly fulfill their roles.
- ✦ To provide a safe and equitable working environment.
- ✦ To encourage and promote innovation and creativity by our people.
- ✦ To promote the ongoing development of management and leadership skills throughout the Service.
- ✦ To meet community needs.
- ✦ To be responsive to the health care needs of our diverse community.
- ✦ To provide services to the community without discrimination.
- ✦ To ensure equity of access to our services for the entire community.

Our Stakeholders

Our stakeholders are the major groups and individuals who are affected by and influence the activities of the Ambulance Service of New South Wales.

- ✚ patients and those close to them;
- ✚ the community, including special needs groups, interest groups and disadvantaged groups;
- ✚ our employees and their families;
- ✚ our employees' industrial organisations;
- ✚ the Ambulance Service Board;
- ✚ all levels of government including the Minister for Health, other members of parliament, and local government;
- ✚ other health care providers;
- ✚ suppliers of goods and services to the Ambulance Service;
- ✚ other emergency and community services; and
- ✚ interstate and overseas ambulance services and health authorities.

Guarantee of Service

The Ambulance Service of New South Wales is committed to:

- ✚ Maintaining a 24 hours a day pre-hospital emergency care, medical retrieval and health related transport system.
- ✚ Ensuring that in an emergency the Service will urgently dispatch ambulance officers to provide treatment as rapidly as possible. For non-emergencies, ambulance officers will be dispatched as soon as possible within a reasonable time, according to the patient's condition.
- ✚ Improving or maintaining the health of patients in pre-hospital care and during transport to hospital or other health facilities.
- ✚ Providing accredited rescue services to specific locations throughout New South Wales.
- ✚ Co-ordinating aeromedical responses and retrievals as part of overall air ambulance services.
- ✚ Increasing community awareness of health issues by teaching cardiopulmonary resuscitation (CPR) techniques and first aid in schools and the workplace.
- ✚ Respecting the privacy and confidentiality of any personal information held about our patients.



Board Membership

John Ducker AO, KCSG

Chairman

Mr John Ducker was appointed Chairman of the Board effective from 30 August 1995. Previous appointments included Chairman of the Public Service Board, Chairman of the Manly Warringah Area Health Service, Foundation National Chairman Workskill Australia, and NSW Chairman of the Duke of Edinburgh Youth Award Scheme. Mr Ducker has been a Director of Qantas Airways since 1983.

Greg Rochford RN, Dip Crim, Dip Law

Chief Executive Officer

Mr Greg Rochford was appointed to the position of Chief Executive Officer on 16 August 1999. He holds qualifications in nursing, law and criminology. Previous positions include head of investigations with the Health Care Complaints Commission, five years with the central office of the NSW Health Department in policy implementation roles and five years as Chief Executive Officer of the Far West Area Health Service.

Keith Bagley AM

Mr Keith Bagley is a lawyer with an extensive practice in Sports Law, Business Law and Local Government and Planning Law. He is a senior partner of Thurlow Fisher Lawyers and Consultants.

Mr Bagley has more than 25 years experience as a community representative in the public health care sector. He has held numerous positions including Chairman of Directors of the Hospitals Contribution Fund of Australia (1983-1988), National President of the Australian Healthcare Association (1986-1988) following two terms as President of the NSW Branch and Chairman of several public hospitals and an Area Health Board. Mr Bagley is presently a member of the Board of Directors of AusHealth International.

Mr Bagley was awarded the Order of Australia in 1986 in recognition of his contributions to Public Health administration.

Wayne Burns

Mr Wayne Burns is the National Director of issues management and public affairs practice for The Millenium Group. He is a former acting and deputy chair of the NSW Cancer Council and media director of the Australian Republican Movement.

Philip Harris FASCH

Mr Philip Harris has extensive experience in business and marketing and is currently Chairman of advertising agency Harris Robinson & Associates and Forcefield Marketing. He is also a Member of the Australian Society of Clinical Hypnotherapists and holds a NSW Ambulance Board Long Service Medal for honorary ambulance work which commenced in 1954.

William Hawke

Mr William Hawke is a farmer and grazier, operating a family business in Forbes and has business interests in Sydney. Mr Hawke is a Director of the Skillshare Training Scheme and of the Parkes/Forbes Land Board and Carrowobitty Landcare. He also holds several trade certificates and is a qualified accountant.

Jon Isaacs BA FAICD FAIM

Executive Coach and Management Consultant. Mr Isaacs has over fifteen years experience as a senior executive and CEO leading change in government and community sectors. Mr Isaacs is a Director of the Sydney Harbour Foreshore Authority and chairs its Audit and Risk Management Committee. He is also a Trustee of Young Achievement Australia.

Maricka Kerekovic

Ms Maricka Kerekovic has been the Director of her own consultancy business MMK Enterprises Pty Ltd since 1992. Ms Kerekovic is a specialist in human resource management and industrial relations and has a wealth of practical experience in the retail, services, manufacturing and energy sectors. She has developed a well-earned reputation for assisting companies to manage major change projects and develop strategies which can be successfully implemented in the workplace.

Her particular skills and expertise lie in advising on the application of legislative requirements in the workplace. She has been involved in major organisational restructuring, merger and acquisition projects, and privatisation of government owned utilities in the energy sector.

Ms Kerekovic is the current Membership Secretary of Women in Politics, plays an active role in Women and Management, and is a member of the New South Wales Police Service - Promotional Selection Committee. She is also a member of the International Relations Association and a senior member of the Centenary Institute.

Angeline Oyang OAM

Ms Angeline Oyang is trained as a social worker and has a long history of involvement in ethnic affairs, refugee and migrant settlement and health campaigns. She was the Executive Director of the Hong Kong Council on Smoking and Health and a former President of the Australian Chinese Community Association. Ms Oyang is the Secretary of the Australian Nursing Home Foundation and a member of the New South Wales Board of Adult Education. She directs her own consultancy company.

Maria Pethard BSc (Hons), FASCT, AIBF (Aff), Asia

Ms Maria Pethard is the chief representative for Australia, New Zealand and the South Pacific for Banca Commerciale Italiana. She is a former physics lecturer at the University of Sydney and has worked for the CSIRO and as a visiting Fellow at the Massachusetts Institute of Technology in Boston, USA. Ms Pethard is a member of the Executive Committee and the National Congress Committee of the Australian Society of Corporate Treasurers, past president of the Overseas Bankers' Association of Australia, and a board member of various public companies.

Christine Thorne

Ms Christine Thorne was appointed to the Board in July 1995. Ms Thorne is the Chief Executive Officer of the Walgett Aboriginal Medical Service and an Executive Member of the Aboriginal Health and Medical Research Council (NSW).

Jim Arneman BHealthSc (PreHospCare), BLabourStudies (Hons), MIAOA

Mr Jim Arneman was elected to the Board as Staff Director in 1998. He joined the Ambulance Service of New South Wales in 1985 and has served at various ambulance stations in Sydney, New England, and outer Hunter areas. He is currently certified as an Advanced Life Support officer.

Mr Arneman has served as an OH&S Committee Chairman, and has more than a decade of active experience on both city and country Sub-Branch executive committees within the Health and Research Employees' Association. He has recent and ongoing involvement on the Ambulance Award Committee, the Annual Leave Working Party, and the Rural Staffing Implementation Committee. Mr Arneman is currently stationed at Tea Gardens.

Board Membership and Terms of Office

Board membership and terms of office are shown as at 30 June 2000.

Chairman of the Board	Terms of Office
Mr John Ducker	30.08.95 - 31.07.02

Chief Executive Officer	
Mr Greg Rochford	16.08.99 (Appointed)

Board Directors	
Mr Keith Bagley	01.08.98 - 31.07.02
Mr Wayne Burns	25.05.98 - 31.07.01
Mr Philip Harris	04.09.97 - 31.07.01
Mr William Hawke	02.07.90 - 31.07.02
Ms Maricka Kerekovic	01.08.98 - 31.07.02
Ms Angeline Oyang	04.09.97 - 31.07.01
Ms Maria Pethard	04.09.97 - 31.07.01
Ms Christine Thorne	31.05.95 - 31.07.02
Mr Jon Isaacs	17.03.00 - 31.07.02

Staff Elected Board Director	
Mr Jim Arneman	27.06.00 - 31.07.02

Meetings

The Board met on eleven occasions during the year. Attendances by Board Directors were:

	Meetings Attended	Total Meetings While in Office*
Mr Jim Arneman	9	11
Mr Keith Bagley	9	11
Mr Wayne Burns	4	11
Mr John Ducker	7	11
Mr Philip Harris	10	11
Mr William Hawke	11	11
Mr Jon Isaacs	4	4
Ms Maricka Kerekovic	10	11
Ms Angeline Oyang	10	11
Ms Maria Pethard	8	11
Mr Greg Rochford	11	11
Ms Christine Thorne	0	11

* These figures represent the total number of meetings held during 1999/2000 while the Board Director was in office.

Committees of the Ambulance Service Board as at 30 June 2000

- ✚ Corporate Governance Committee
- ✚ Finance Committee
- ✚ Audit Committee

Corporate Governance Committee

The primary function of the Corporate Governance Committee is to ensure there are appropriate measures in place to support the Board in the fulfilment of its functions, and that the statutory functions of the Service are being effectively and efficiently performed. Members of this Committee are:

Mr Jim Arneman	Staff Elected Board Director
Mr Keith Bagley	Board Director
Mr Wayne Burns	Board Director
Mr John Ducker	Chairman of the Board
Mr Philip Harris	Board Director
Mr William Hawke	Board Director
Mr Jon Isaacs	Board Director
Ms Maricka Kerekovic	Board Director
Mr Greg Rochford	Chief Executive Officer
Ms Angeline Oyang	Board Director
Ms Maria Pethard	Board Director
Ms Christine Thorne	Board Director

Finance Committee

The primary function of the Finance Committee is to assist the Board in fulfilling its responsibilities in respect of the financial management of the Service. Members of this Committee are:

Mr Keith Bagley	Board Director
Mr John Ducker	Chairman of the Board
Mr Philip Harris	Board Director (Chairman)
Mr William Hawke	Board Director
Mr Greg Rochford	Chief Executive Officer
Ms Maria Pethard	Board Director

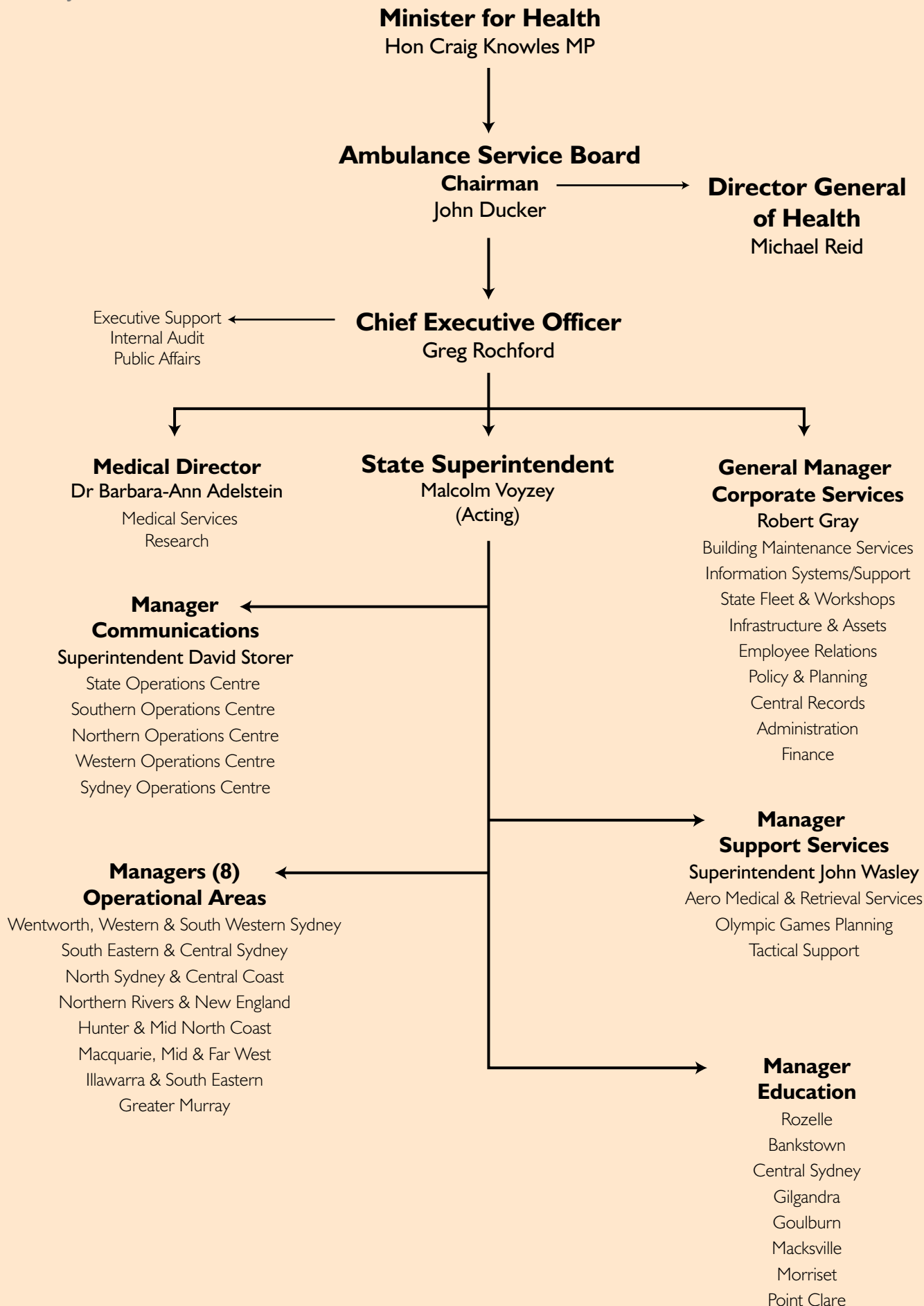
Audit Committee

The primary function of the Audit Committee is to assist the Board in fulfilling its oversight responsibilities by reviewing the financial accounts, the systems or internal audit controls which management and the Board have established, and the audit process. Members of this Committee are:

Mr Jim Arneman	Board Director
Mr John Ducker	Chairman of the Board
Mr Philip Harris	Board Director
Mr William Hawke	Board Director (Chairman)
Mr Greg Rochford	Chief Executive Officer

Organisational Structure

as at 30 June 2000



Senior Management

as at 30 June 2000

Greg Rochford

RN, Dip Crim, Dip Law.
Chief Executive Officer

Appointed to the position of Chief Executive Officer on 16 August 1999. Mr Greg Rochford holds qualifications in nursing, law and criminology and has substantial experience in the public health care system. Previous positions include head of investigations with the Health Care Complaints Commission, five years with the central office of the NSW Health Department in policy implementation roles and five years as the Chief Executive Officer of the Far West Area Health Service.

Malcolm Voyzey

Dip. HA, BHSc (Mgt)
Acting State Superintendent

Superintendent Voyzey is a career ambulance officer with 25 years service to the people of New South Wales. He began his career as an ambulance officer at Tamworth in 1975 and then served in several rural centres before moving into the resource deployment area in 1981.

Rising through the ranks he was appointed to his first Superintendent's position in Dubbo in 1987. In 1990, he was awarded a Diploma in Health Administration followed by a Bachelor of Health Science (Management) Degree from Charles Sturt University in 1992.

He then served in a number of senior management positions before being appointed to his present substantive rank of Area Manager, Hunter and Mid North Coast Area in 1998. In July 1999, he was seconded to the position of Acting State Superintendent.

Dr Barbara-Ann Adelstein

MBBCh, MBA, MA (Hons), FHSE, CHE
Medical Director

Appointed Medical Director in February 1995. Dr Adelstein was previously Medical Adviser, Planning and Performance Branch with the NSW Health Department where she dealt with issues relating to emergency departments, critical care and aeromedical services. She also has a strong clinical background and continues to practise medicine. Dr Adelstein is also an accredited surveyor for the Australian Council of Health Care Standards.

Robert Gray

AIMM, FAIM MMgt
General Manager, Corporate Services

Commenced with the Ambulance Service on 31 May 1999 following a 30 year career in local government. During his time in local government, Mr Gray fulfilled many roles including that of General Manager, Assistant General Manager, Director Corporate Services and Director Community Services at two of the largest councils in New South Wales.

Chief Executive Officer's Report

The 1999/2000 financial year marks my first full year as Chief Executive Officer of the Ambulance Service of New South Wales. I am pleased to present this report as an overview of the Service's operations in a year that is notable for both significant achievements and great challenges.

The Service's achievements include delivering safe and effective ambulance care during the millennium changeover and record winter workload levels while boosting ambulance officer establishments, radio, dispatch and fleet infrastructure and financial management and reporting systems.

The major challenges for the organisation appeared in financial and industrial relationships. While our financial position has improved from last year, further work is required to achieve the necessary alignment between expenditure and funding levels and this situation has contributed to a number of understandable tensions within the organisation. In the workplace the amount of disputation has caused concern to both managerial and employee representatives alike. However, some very positive signs have emerged from the period with a joint resolve among managers and employee representatives to build a common, participative approach in responding to the many exciting challenges facing the ambulance service industry.

Health and ambulance services across the world face the challenge of delivering services that are increasing in complexity and cost to a population that is aging, expanding away from existing service infrastructure and, quite rightly, expecting a higher level of service and accountability. Our response will be directed at building skill and flexibility within our workforce, working more closely with other health and emergency services and establishing a sound sustainable service base for the future.

We have made pleasing progress in improving our financial management and reporting processes and the advent of the new Professional Standards and Conduct Unit has provided greater clarity and professionalism in complaint management and our focus on ethical and conduct issues. Operationally, while the Service continues an excellent response record to major incidents and events such as the Glenbrook train accident and throughout the New Year celebrations, performance data shows a clear need to improve our response times to "routine" emergency calls and the timeliness of scheduled transports.

In the coming year, our focus will be on working with staff in all areas of the Service to chart a clear direction for our future while continuing to advance sound clinical practice, efficient use of resources and the building of a stable organisational base. The advent of new communications and dispatch technologies, advanced ambulance officer training and a range of health system reforms set out in the State Government's *Action Plan for Health* all present opportunities for increasing the contribution our Service makes to health and emergency care. By working openly and together the Ambulance Service of New South Wales will continue to grow and contribute further to the health and safety of our patients and communities.

I thank the Minister for Health, the NSW Health Department, the Ambulance Service Board, and the executive team for their strong support during the year and commend to you the work of all Service personnel.



Greg Rochford
Chief Executive Officer

Operational Report

Introduction

The 1999/2000 year has seen the Ambulance Service of New South Wales begin to reposition itself in comparison to other like Services in order to meet the range of challenges that the future will inevitably bring, spanning all aspects of our business. Preparing to meet these challenges will mean we will have to broaden our horizons and look to other successful ambulance operational models that can be adapted to meet the ever increasing demands placed upon our Service.

In doing this, we have to be mindful of our stakeholders' expectations and ensure that the change process is engineered in such a way as to provide a service that is timely and responsive to our community. We also have to recognise that we live in an ever changing world that quite rightly demands continual improvement in the range of services we provide, and how we deliver those services.

The past year has seen us begin to reflect on where it is that we really want to be as a well respected Ambulance Service within our vast community. Meeting community expectations is paramount as we move into a new millennium, bringing with it a new range of technical and medical advances and opportunities for further advancement. We need to be responsive in order to provide a wide range of clinical services and procedures and achieve desired patient outcomes.

As opportunities present themselves we need to be dynamic and outward looking to drive the Service forward. To facilitate that dynamism a great deal of emphasis will have to be placed on making available a range of accurate and timely data to our managers to analyse and determine future strategies and achieve set goals and objectives. These processes, combined with renewed financial management practices and a desire to succeed, will combine to propel the Service forward.

Ambulance Service Medal

The Prime Minister announced that Her Majesty the Queen has approved the institution of the Ambulance Service Medal (ASM) within the Australian Honours System. The medal may be awarded to a person who has given distinguished service as a member of an ambulance service. The number of awards of the medal for each State in a calendar year must not exceed:

- ✦ One award for each 1000, or part thereof, full time permanent members of the ambulance service, or combined ambulance services, of the State; and
- ✦ One award for each 5000, or part thereof, part time members, volunteers or auxiliary members of the ambulance service, or combined ambulance service of the State; and
- ✦ One additional award to a full time permanent member, part time member, volunteer or auxiliary member.

CAD Implementation

The implementation of the Computer Aided Dispatch (CAD) project is approaching finality. Mobile Data Terminals (MDT) are gradually being phased in with the assistance of the MDT Joint Consultative Committee (JCC). The closure of the remaining co-ordination centres is scheduled for early in the next financial year.

Fleet Improvements

An order was placed in February 2000 for 200 Mercedes Benz Sprinter ambulances to be delivered over the next 18 months to replace aging Ford F series vehicles. The Mercedes Benz Sprinter ambulance has set new standards as a platform for the delivery of pre-hospital emergency care. The vehicle was developed in conjunction with ambulance officers of varying clinical levels from around the State and offers the latest in passive safety devices such as anti-lock brakes, driver and passenger air bag, and traction control. Their introduction will realise reductions in fleet running and maintenance costs, as well as enhancing the level of patient care.

Three new BMW RT 1100 motorcycles have been ordered to replace existing units operating within central Sydney. These units are fitted with anti-lock brakes and the latest in suspension design.

The Service is phasing out the Toyota Tarago ambulance and replacing it with Volkswagen Transporter T4 units. These new units offer a higher degree of comfort and safety, with the added bonus of enhancing the fleet from the Toyota class three ambulance up to the Volkswagen class two ambulance. There were 45 units operational by June 2000.

New Ambulance Station

February 2000 saw the commencement of a permanent presence at Culburra utilising relief officers. Permanent appointees took up their positions in March 2000. The Ambulance Service is negotiating a contractual agreement with the Culburra community, who built the facility, regarding accommodation on a permanent basis.

Helicopter Base - Wollongong

The Illawarra based helicopter service commenced operations in January 2000. This followed rigorous training undertaken by paramedic officers who will crew the aircraft, consistent with normal operating requirements. One paramedic officer is rostered per shift to the aircraft which operates in daylight hours only.

Olympic Planning

The Olympic Planning Unit is in the final stages of preparation for the Sydney 2000 Olympic Games to be held in September. Operational plans and roster development are well advanced. Recruitment of personnel to cover the many preliminary events, venues and the urban domain areas will commence within the coming months.

The Service is planning for an increase in activity levels in the weeks leading up to and during the course of the Games. A major part of the planning process is to ensure that sufficient resources are available to cover normal workload commitments, as well as the activity resulting from the Games and other associated events.

Y2K

Two years of planning, evaluating and updating computer and allied technology paid dividends when Saturday 1 January 2000 passed with no effect on the Service being identified. February 29 was also identified as being another critical date on the Y2K calendar, however this also passed without incident.

Medical Director's Report

The pre-hospital phase of acute care is a vital component of health care. The Medical Directorate has continued to work to ensure that this care is up to date, effective, of high quality, and efficiently provided.

During the past year, the Medical Advisory Committee has continued to meet regularly, and to provide the Service with expert advice about clinical issues relating to the Service. While the practice of ambulance care has remained the core of deliberations, issues discussed have encompassed the interaction of ambulance officers with other health care providers at the scene, responsibility for care during transport, and the duty of care of ambulance officers.

The quality of clinical care has remained a core issue for the Medical Directorate and Medical Advisory Committee this year. This has encompassed ongoing review of the treatment currently provided to ensure its currency as well as discussion about new or different treatments to assess their relevance to the pre-hospital arena and ambulance officer practice. As a result of this, changes relating to the introduction of new treatments as well as extending current treatments have been made. Changes to the Protocols are presently being finalised, and will take effect with the release of a new edition of the Service's Protocols next year.

During 1999/2000, the Ambulance Service has continued to work with the NSW Health Department to review service provision and to plan and expand the integration of the provision of service. Much of this review has had a clinical focus, in order to ensure that systems in place optimise patient care at all stages of their treatment in the health system. The concentration has been predominantly on critically ill patients, and the response of the Critical Care System.

The Ambulance Service has been at the forefront of extending the trauma system, previously only in place in metropolitan areas, into the whole of New South Wales. With the introduction of the early notification of trauma (Rural Protocol 4), the whole State will now be able to benefit from a more coordinated trauma system, which decreases the time taken for those patients identified by ambulance officers as severely injured to reach definitive care. This has been shown to improve outcomes.

Documentation of clinical care by ambulance officers is an aspect of care that is often overlooked. The patient report form is important in documenting the care given to patients, as well as providing a source of data for use in evaluating care, and planning services. The patient report form is being revised to optimise the documentation of care and the accuracy of information captured.

As a result of information completed on the patient report form as well as from the newly introduced computer aided dispatch (CAD) system, the Ambulance Service has amassed a large amount of data relating to the pre-hospital care provided to patients, including the circumstances in which this occurs. The Service has provided information to the National Drug and Alcohol Research Centre and the NSW Injury Risk Management Research Centre, who have realised the utility of this information. The Ambulance Service has collaborated with these organisations in analysing the data.

Emphasis on increasing pre-hospital research is also ongoing, with the Service submitting several applications for grant funding during the year. In addition, collaboration with the cardiology department at Royal North Shore Hospital in assessing the regionalisation of heart attack treatment is also continuing.

During the year, evaluation of medical prioritisation of calls has also occurred, and we look forward to continuing this into the new financial year, as part of the strengthening of a clinical focus for the Service.

1999 / 2000 Key Achievements and Future Plans

The New Executive Structure

During 1999/2000, important executive and organisational changes were initiated to position the Service to proceed in new directions. The Board endorsed proposals allowing for the development of a new executive structure and the regrouping of functions at State Headquarters. The new structure will strengthen the corporate, clinical and operational arms of the Service. It has been designed to ensure that State Headquarters provides clear direction to help improve efficiency and deliver high quality services.

The new structure enables the formation of two distinct directorates covering metropolitan and rural New South Wales. This will help to ensure the different operational issues and challenges that influence the delivery of ambulance services in the Sydney metropolitan area and rural areas will be recognised and managed appropriately. It is intended that the new arrangements will provide increased support to the Service's eight operational areas.

All support functions have now been included in the Corporate Services area. The new Service Development and Planning Directorate will ensure that important activities like corporate planning and performance monitoring are closely aligned with the key clinical and service quality functions of the Service.

The Ambulance Computer Aided Dispatch (AmbCAD) System and Information Technology

As foreshadowed in the previous year, the Service completed the implementation of the core AmbCAD functions throughout New South Wales. With AmbCAD supplemented by a mobile radio network the Service now has a major computer based communications system for call taking and dispatch of ambulances throughout the State. The full transfer to the AmbCAD system is an important technological change with clear potential for positive impact upon the Ambulance Service of New South Wales.

The AmbCAD system also helps to replace some previous data collection systems and will assist in developing new benchmarks that the Service will use to develop reliable performance and utilisation indicators in the future. Unfortunately, fully accurate comparisons of performance and activity in previous years cannot be made in this report due to different methods of data collection over previous years. The first full annual data set will be available in the following year.

The year 2000 changeover occurred smoothly and an Information Management and Technology (IMT) Steering Committee has been formed to promote better information management and increase access to basic computer technology throughout the Service.

Financial and Activity Reporting

The Service has implemented revised financial management and AmbCAD based activity reporting processes. Financial management training has been provided to all operational managers together with the devolution of financial accountability. The financial result for the Service has been encouraging with a significant improvement when compared with previous years.

Standard Operating Policies and Procedures

A review of standard operating policies and procedures was implemented during the year with the intention of reorganising and integrating the Service's policy and procedures manual. It is expected that the finished product will provide a consistent user-friendly reference to guide day to day decision making and service delivery throughout the Service.

Professional Standards and Conduct Unit

The new Professional Standards and Conduct Unit was established this year to play a pro-active role in promoting professional standards and ensuring ethical practices throughout the Ambulance Service of New South Wales.

Olympic and Paralympic Games Planning

Considerable effort and detailed preparations for the Olympic and Paralympic Games ensured the Service was ready to respond to any emergencies during the course of these major international events.

Asset Strategic Planning

Preparations have been made for the development of an Asset Strategic Planning process in 2000/01. This will focus upon the maintenance of buildings, fleet, AmbCAD and the communications infrastructure.

Organisational Development, Service Integration and Training Issues

There is no doubt that the staff of the Service is our greatest asset. We will be examining the clinical and managerial skill profiles that will be required to foster and maintain a skilled, adaptable and valued workforce. We are developing a consultative process with staff to discuss directions for the Service and identify their expectations about what may be required to make this a more supportive and satisfying organisation in which to work.

We wish to invest in management training to ensure that managers at all levels are equipped to deal effectively with the many demands placed upon them and can respond appropriately to the increasing emphasis on accountability and the requirement to provide efficient, responsive, high quality services.

The Government's plan to expand the number of multi-purpose services in rural New South Wales provides important opportunities for considering the collocation and integration of ambulance services with hospital and community health services. The report of the Sinclair Committee recognises that ambulance officers have transferable skills useful to activities in other health care sectors. Although additional training may be required, ambulance officers will have the opportunity to work alongside their fellow health professionals in a range of health care settings.

Clearly there is anticipation of a different future for the Ambulance Service of New South Wales. Any moves in new directions will require the Service to consult widely. Consultations with our many stakeholders will identify and clarify the different expectations placed upon the Service. This process will lay the groundwork and assist in setting out priorities for further discussions with communities about future service developments and delivery.

Support Services

Support Services provides a range of operational services to support first line service delivery. The main services include:

- ✘ Fleet development and management
- ✘ Aeromedical services; fixed and rotary wing
- ✘ Tactical support for counter disaster and major events planning
- ✘ Olympic Games planning and co-ordination.

Fleet

The Ambulance Service of New South Wales' fleet comprises 880 operational ambulance vehicles and 250 support vehicles. This is the largest ambulance fleet in Australia and one of the largest in the world. The Service has recently undertaken an ambitious fleet modernisation program. The Ford "F" series ambulances currently in use will be phased out over the next three years and be replaced by new Mercedes Benz Sprinter ambulances.

The Mercedes ambulance underwent extensive testing and development over the past 12 months, with the latest production units incorporating passive safety devices such as anti-lock brakes, driver and passenger airbags, and traction control.

Arrangements have been made to commission 200 Mercedes ambulances during 2000/01, with 45 being utilised during the Olympic Games. It is intended to progress the program towards the replacement of the remaining 140 Ford "F" series ambulances by the end of the 2002/03 financial year. Over the past 12 months, 45 Toyota Tarago ambulances have been replaced by Volkswagen T4 ambulances, with the remaining 40 Toyota Taragos programmed for replacement during 2000/01. The Volkswagen T4 is also equipped with the latest passive safety devices.

The Ambulance Service is very mindful of fleet operating costs. With the introduction of the Mercedes Benz Sprinter and Volkswagen T4 ambulances there will be a dramatic reduction in fleet running costs. All new ambulances are specifically designed so that the base vehicle can be replaced on a three yearly cycle, with the ambulance module being refurbished and refitted on a new base vehicle.

A ten year program has been formulated to encompass replacement of all vehicles aged in excess of three years, and then maintenance of a three year replacement cycle. The Service will ultimately have a fleet of very specialised vehicles that will never exceed three years of age. The Ambulance Service of New South Wales strives to epitomise a world leader in pre-hospital emergency care, and the provision of a very modern ambulance fleet can only enhance the quality of patient care.

Aeromedical Services

The major components of Aeromedical Services are fixed wing air ambulance and helicopter services that are interfaced with and supported by a comprehensive clinical network service. These services are centrally co-ordinated by the Ambulance Service's Aeromedical Operations Centre that is located in the Medical Retrieval Unit at St George Hospital.

The Air Ambulance branch of the Service operates four Beechcraft King Air B200C pressurised twin engine turbo prop aircraft. Loaded with two stretcher patients, two sitting patients and a flight nurse, the aircraft have an operating range of approximately 850 nautical miles, at a cruising speed of 500 kms per hour. The interior has been designed to permit the management of up to two intensive care patients with access to the head of one or both patients while in flight. The main function of these aircraft is to undertake inter-hospital transports.

Equipment necessary for critical care is carried in custom designed fittings to permit its immediate access to either stretcher. A hydalift patient elevating trolley is used to allow stretchers to be loaded in and out of the aircraft with comparative ease. Ten additional hydalifts were introduced in the past year to improve services to regional New South Wales.

The Ambulance Service contracts out helicopter services. Bases are located at Prince Henry Hospital and Westmead Hospital in Sydney, and at Newcastle and Lismore. A base in the ACT provides services to South Eastern New South Wales. These helicopters only provide emergency services including primary response to accidents, rescue and medical retrieval. Twelve full time paramedic officers are assigned to the Sydney units and the regional units are crewed by ambulance officers attached to local ambulance stations.

The Aeromedical Operations Centre is responsible for the co-ordination of all aeromedical and road retrieval services in New South Wales. It has a centralised call taking service via a 1300 number for Air Ambulance operations or a 1800 number for medical retrieval requests. The service offered to medical personnel and patients has been greatly enhanced and streamlined over the past 12 months. By calling the Aeromedical Operations Centre, Medical Retrieval Unit doctors are able to obtain a bed for their patient using the Intensive Care Bed Finding Service with a database which is updated twice daily. The medical officer requesting the service can then be linked with a specialist retrieval doctor for consultation on the management of the patient. This is achieved by using the latest technology telebridge conferencing equipment that interfaces the telephone system with the computer system in the Unit.

The most appropriate means of transport; fixed wing, helicopter or road ambulance is then tasked with a medical team and the equipment necessary for the patient's retrieval.

Tactical Support

Tactical Support is responsible for responding to counter disaster scenarios and co-ordinating plans for major events. It also has a co-ordinating responsibility for Sports and Services, Rescue Services, Special Casualty Access Teams (SCAT) and Chemical, Biological and Radiological (CBR) response for New South Wales. An effective CBR training program was conducted during 1999/2000 giving the Ambulance Service a CBR response capability.

Strategic Directions for Health (SDFH)

SCAT paramedics have also received training as part of the State's Urban Search and Rescue response as required by HAZMATPLAN. During 1999/2000, a total of 870 major incidents were recorded in the major incident database, as compared to 760 in 1998/99. This represents a 14.5% increase in major incident attendance for the Service over the previous year.

Planning for the Olympic and Paralympic Games

Planning preparations were consolidated in readiness for the Service's involvement in the Olympic and Paralympic Games.

An Olympic Planning Unit has operated with four officers working full time on planning the Ambulance Service's response to potential incidents at the Games. The planning team consists of a planning coordinator, two assistants and a liaison officer to the Olympic Security Command Centre based at SOCOG Headquarters. They contributed to developing operational plans, a series of venue specific plans and other Olympic specific plans to be implemented during the Games.

A command structure for staff working at Olympic events has been developed, consisting of an Ambulance Controller, Ambulance Commander, two Precinct Commanders, two Deputy Precinct Commanders, and 17 Venue Commanders. Several liaison officers will be appointed to strategic areas such as the Sydney Harbour Operations Centre, Kingsford Smith Airport and the Olympic Security Command Centre. Regular meetings of the Executive Planning Committee, Operational Planning Committee combined with attendance at a number of SOCOG planning meetings continue to assist in the planning process.

The past year presented opportunities for the Service, in collaboration with other agencies and organisations, to test preparedness for the Games. In addition to the major events held at Stadium Australia, the Service assisted with the Olympic Torch Relay, UTI World Cup Triathlon, Host City Marathon and the Sydney International Three Day Event.

Policy & Planning

The Policy and Planning Unit has a diverse role which includes coordination of policy and planning activities on a Service wide level and photography and graphic design services. In addition, the Unit coordinates the production of key reports of the Service, such as the Annual Report and the Performance Agreement with the NSW Health Department.

Following the regrouping of functions at State Headquarters, the executive support and secretariat function was transferred to the newly formed Executive Support Unit. The Policy and Planning Unit will transfer to the new Service Development and Planning Directorate in 2000/01. Photography and graphic design services will transfer to the Public Affairs Unit.

The 1999/2001 Performance Agreement with the NSW Health Department is based around the planning document Strategic Directions for Health and the key performance areas of Healthier People, Fairer Access, Quality Health Care and Better Value.

Examples of progress in implementing aspects of the four goals and some future initiatives are provided below.

In 1999/2000 the Ambulance Service of New South Wales:

- ✘ Implemented the Memorandum of Understanding between the NSW Police Service and the NSW Health Department.
- ✘ Participated in statewide health promotion and prevention campaigns.
- ✘ Implemented Aboriginal cultural awareness training and pre-employment programs.
- ✘ Implemented the early notification of trauma program.
- ✘ Continued to prepare and consolidate planning, policy and procedures for support to the Olympic Games.
- ✘ Considered options for improving quality management.
- ✘ Established relationships with peak disability bodies.
- ✘ Established State and area level joint consultative committees.
- ✘ Improved activity and financial reporting processes and achieved an improved financial result.
- ✘ Reviewed and revised brochure "You and Your Ambulance Service".
- ✘ Completed Stage 1 of repairs and refurbishment to the Ambulance Education Centre.
- ✘ Introduced computer aided dispatch system throughout New South Wales.

In 2000/01 the Ambulance Service of New South Wales will:

- ✘ Review impact of the Memorandum of Understanding and develop additional mental health training for ambulance officers.
- ✘ Continue to promote good health by implementing cancer and injury prevention strategies.
- ✘ Continue to promote cultural awareness amongst all staff and promote the participation of Aboriginal people in the Ambulance Service's workforce.
- ✘ Review impact and refine operation of the early notification of trauma program.
- ✘ Provide support to the Olympic Games and evaluate success.
- ✘ Introduce a clinical quality reform strategy linked to management development and clinical training initiatives.
- ✘ Establish a broadly based consultation program with key stakeholders and special interest groups.
- ✘ Arrange management and staff workshops to discuss future directions for the Ambulance Service of New South Wales.
- ✘ Maintain improvements to financial reporting processes and continue to improve financial results.
- ✘ Publish and disseminate brochure "You and Your Ambulance Service".
- ✘ Complete Stage 2 of repairs and refurbishment to the Ambulance Education Centre.
- ✘ Finalise web page on the NSW Health Department's Intranet.

Computer Aided Dispatch System

Planning for the development of the Ambulance Service's Computer Aided Dispatch System (AmbCAD) commenced in January 1996. It has been progressively developed in the succeeding years and in 1999/2000 installation and full commissioning of the AmbCAD system was achieved at four nominated sites in New South Wales.

The Service now has four Operations Centres providing core AmbCAD functions throughout the State. The Operations Centres are located at Sydney, Dubbo, Charlestown (Newcastle) and Warilla (Wollongong). The main functions of AmbCAD are:

- ✘ call entry and scheduling of requests/bookings;
- ✘ the dispatch of ambulance resources;
- ✘ status monitoring and management of ambulance resources;
- ✘ an audit trail of all events;
- ✘ management information and reporting.

The AmbCAD Project is part of a unified communications strategy that will enable:

- ✘ quicker call taking and dispatch of resources;
- ✘ optimised responses to incidents and efficient and effective utilisation of resources;
- ✘ immediate access to all incident information.

AmbCAD is designed to assist with the management and dispatch of ambulance resources to emergency situations and the provision of non-emergency transport.

The introduction of the statewide AmbCAD system resulted in the rationalisation of the existing eleven coordination centres to four newly constructed state of the art operations centres.

An integral part of the commissioning of the Ambulance Service's statewide Computer Aided Dispatch (CAD) system is the introduction of Mobile Data Terminals (MDT) and Automatic Vehicle Location (AVL) technology.

This new technology provides for accurate and up to date vehicle positioning through satellite tracking and enables the Operations Centre to transmit incident information and other messages directly to ambulance officers via the MDT. The MDT allows ambulance officers to send back to the CAD system both real time vehicle status information such as responding, on scene and depart scene times and other information pertaining to officer availability. The MDT is equipped with both visual and audio prompts to alert officers of incoming incidents and messages.

Throughout 1999/2000, the Ambulance Service has continued to further enhance the functionality of MDT technology to ensure more robust and reliable performance in the use of this technology in the field. The Service has also provided further training to all ambulance officers to highlight and reinforce the many features and capabilities of this new technology.

The introduction of MDT technology has resulted in a significant reduction in voice traffic over the radio system however, officers will still be able to converse directly with Operations Centre staff via radio at any time. The system is not designed to eliminate voice traffic, but provides a quick and accurate method of exchanging information between the Operations Centre and ambulance officers.

The implementation of the AmbCAD system is a significant step into the future for the Ambulance Service of New South Wales. It will be judged as a major milestone in the history of the Service.

Ambulance Education Centre

The Ambulance Education Centre (AEC) had one of its busiest years in 1999/2000. In 1999, the Centre successfully became a Registered Training Organisation (RTO) through the Vocational Education and Training Advisory Board (VETAB). This now binds the Service to comply with quality standards set by VETAB, setting a path to provide a structured route towards quality improvement in a specific training and development context. Our training courses meet these quality requirements and the accreditation provides State and National recognition, confidence in the qualifications achieved, meets industry needs and demands for competency based training and assists in identifying credit transfer arrangements between training organisations.

Curriculum development is ongoing and a number of short courses are currently being accredited. A new Skills Manual and student workbooks will shortly be available at each ambulance station across the State giving officers an insight into current level 1, 2 and 3 course subject matter.

The capital works program, which commenced at Rozelle in 1999, is progressing well. Each room has a new bed and the accommodation block is being refurbished to meet Local and State Government building codes. The most visual change will be the completion of male/female bathroom facilities on each floor.

During 1999/2000, a capital works program for equipment has resulted in the purchase of new manikins, text books, data projectors and computers, which all make the training experience more pleasurable.

The AEC also introduced distance education programs, primarily in core courses, giving officers the opportunity to study at their own pace in their own workplace. Over the next twelve months this program will be expanded to include a number of shorter courses.

From an education and training perspective the challenges ahead include pre-service education and higher academic qualifications for ambulance officers. Nationally, whilst each State has VETAB accredited training programs, the trend to move closer to Degree programs is gathering momentum. The industry is witnessing an increase in academic institutions and other private training providers offering pre-hospital care programs. The Ambulance industry together with Universities across the nation are in the process of establishing an Ambulance Education Council to promote and support the education component of Ambulance professionals.

Given the high workload during the past year, staff at the AEC have worked extremely hard to meet current demands on the organisation.

The following is a breakdown of courses and student numbers for 1999/2000:

Training Courses

Course	Number of Courses	Number of Students
Induction	7	167
Level One	7	156
Level Three	7	127
Level Four	1	22
Level Five	1	16
Patient Transport Officer	1	8
Level 4/5 1st Recert.	3	42
SCAT	1	8
Re-employment	1	7
Rescue	1	11
4X4 Driving	18	151
Voluntary Tutorials	16	185
First Aid	5	53
Clinical Assistance Program	45	52
Bushcraft	1	16
Total	115	1021

Employee Relations

The Employee Relations Unit provides strategic and operational human resource services to the Ambulance Service including; industrial negotiations and advocacy, recruitment and selection, personnel services; workplace reform; workforce planning; risk management, occupational health and safety and workers compensation; equal employment opportunity (EEO), ethnic affairs and employee assistance; and compliance with Freedom of Information legislative requirements.

Equal Employment Opportunity

To celebrate the 20th anniversary of women as ambulance officers within the Service, a video was produced tracing the development of our mixed gender uniformed officer workforce.

A comprehensive policy and procedure was developed for handling and managing gender based and/or sexual harassment complaints, in keeping with the Service's corporate responsibility to maintain a safe and harmonious work environment. Training activities continued during the year, with level I ambulance officers attending Organisational Awareness, EEO and Harassment Free Workplace training.

Senior uniformed and corporate managers received training in Grievance Handling and Staff Selection Techniques, to increase their skills and promote the principles of equity and merit based selection across all occupations and classifications.

The Employee Relations Unit continued to provide assistance in matters involving sexual, age and racial discrimination for managers and staff and appeared before various industrial and administrative tribunals.

A senior ambulance officer was awarded a NSW Public Sector Management Scholarship for 2001.

Disability Action Plan

The Service's *Disability Action Plan* was submitted to the Department of Ageing and Disability.

To enhance access to employment within the Service for people with a disability, the Service undertook major strategies, including:

- ✘ the review of all new buildings and major refurbishments for physical accessibility in the design stages, and to ensure compliance with relevant Australian Standards and Building Codes for people with a disability.
- ✘ Staff training for ambulance officers and patient transport officers in disability awareness.
- ✘ Multi-lingual publicity/brochures in plain English about the Ambulance Service for peak disability organisations.
- ✘ An apprentice motor mechanic commenced employment under the NSW Apprenticeship Program for people with a disability.

Employee Assistance

Following a comprehensive review of the Employee Assistance Program, approval was given to new specifications and tendering processes for the purpose of engaging a contractor to continue this statewide counselling service.

The Employee Assistance Program is a confidential work-based intervention program designed to enhance the emotional, mental and general psychological well being of all employees and their immediate family members through the early detection and resolution of work and personal problems that affect their performance and general well being.

Ethnic Affairs

In accordance with the 1997-2000 Ethnic Affairs Priority Statement, the Service administers policies of providing equity of access to the Ambulance Service; patient communication and helping our patients understand our products and services.

Community awareness about the Service continues to be raised through such programs as 'Billy Be Safe', 'What To Do After An Accident' and 'How to Call An Ambulance'. Indications are that these programs reach a large proportion of the ethnic community through talks given to church groups, retirement homes, youth groups, schools, child care centres, community fetes and events. News releases were also issued to ethnic media about the Ambulance Service of New South Wales for publication in various ethnic community newspapers.

Workforce Statistics

Staff	1996/97	1997/98	1998/99	1999/00
Uniformed	2324	2385	2524	2585
Non Uniformed	317	375	434	390
Senior Executives	0	4	3	2
Total	2641	2764	2961	2977

Aboriginal Employment

The Ambulance Service is committed to increasing the number of Aboriginal and Torres Strait Islander employees. During 1999/2000, two important programs were undertaken.

Firstly, under the Structured Training and Employment Program (STEP), ten indigenous people undertook 13 weeks pre-employment training to improve their prospects for employment as ambulance officers. Nine of the ten trainees finished the training, and five of these were successful in passing the selection tests and interviews for ambulance officer employment.

Secondly, in another employment program (known as the "Elsa Dixon Program"), five indigenous people commenced ten weeks training in May 2000 as communications assistants at the Sydney Operations Centre. Four of the five participants completed their training and are now working permanently as full time or part-time communications assistants.

The Service was also approved to nominate the above programs for the annual Baxter Health Care Awards, administered by the Australian Health Care Association.

Industrial Relations

Under a new industrial agreement, the Service assisted in transferring its vehicle and building maintenance tradespersons to the new *Public Hospital (Skilled Trades) Award*.

The Service also undertook a major review of the *Ambulance Services (Staff) Regulation 1995* and provided advice to the Department of Health in developing the new *Staff Regulation 2000*.

Discussions are also continuing to establish statewide industrial agreement on the issue of cold weather clothing to ambulance officers.

Recruitment and Selection

An extra 108 ambulance officer positions were specifically approved for rural New South Wales. Following recruitment from within the Service, 66 qualified and experienced ambulance officers were appointed for these rural positions. In addition, the Service conducted a further recruitment campaign to cover this resourcing shortfall and to fill vacancies generally as a result of workforce turnover.

A total of 166 trainee officers were recruited in 1999/2000 comprising 52 females and 114 males, and these will be progressively placed at rural and metropolitan locations.

In addition, 21 applicants were successful in gaining appointment as advanced life support (Level 4) ambulance officers, with a further 15 as paramedic (Level 5) ambulance officers.

Major improvements to operational/uniformed recruitment practices included the development of new computerised databases to track recruitment and selection processes for all uniformed personnel; the introduction of candidate feedback forms as a quality improvement measure, and the use of electronic mail to register candidate applications for vacancies.

Occupational Health and Safety (OH&S)

The *NSW Occupational Health and Safety Act 1983* contains clear obligations for employers, employees and persons who may visit Ambulance Service premises. Accident prevention and a proactive approach to issues relating to health and safety in the workplace remains the Service's main priority. During the year, new accident, incident and hazard reporting procedures were designed and implemented together with a new computerised database. This allows the Ambulance Service to record, report and act upon trends and risks within the workplace, and to develop and implement control measures to reduce costs and provide a safer work environment.

New and improved policies and procedures for workers compensation were also developed. These include clear and concise guidance to both managers and employees in how to lodge and manage workers compensation claims across the Ambulance Service. The policy and procedures provide full compliance with the *Workplace Injury Management and Workers Compensation Act, 1998* and the *Workers Compensation Act, 1987*. New procedures were also developed and implemented for the reporting of accidents and incidents to WorkCover under the *NSW Occupational Health and Safety Act, 1983* and the *Notification of Accident Regulations 1990*. As accident prevention (and reducing workers compensation) is an important part of the Service's OH&S strategy, comprehensive education and training is provided throughout the Service.

The State OH&S Committee continued to meet on a bi-monthly basis. The Committee provides a forum for employees and senior management representatives to discuss occupational health and safety issues, and to make recommendations and advise the Chief Executive Officer which will contribute to a safe and healthy working environment for all employees, patients and other persons involved with the Service. Local workplace OH&S Committees continue to be a consultative forum to identify issues and review and recommend changes and improvements to workplace health and safety.

The Portable Patient Handling Devices Ambulance Service/Health and Research Employees' Association Project funded by a WorkCover NSW grant was completed during the year. Several pieces of equipment designed to assist ambulance officers with manual handling tasks have been recommended.

There have been no prosecutions under the *NSW Occupational Health and Safety Act 1983* during the year. WorkCover NSW issued 23 Improvement Notices to the Service relating to a number of factors including risks associated with hazardous substances, building maintenance, electrical hazards, poor storage, oxygen cylinders and plant room floors. During the year, 533 open workers compensation claims were closed out of the 795 claims submitted. 597 claims remained open across the Service for claims submitted from 1 July 1989 to 30 June 2000.

Public Affairs Unit

Occupational Rehabilitation

During 1999/2000, the average number of employees on rehabilitation was 4% of total employee numbers. To meet the statutory requirements of the *Workplace Injury Management and Workers Compensation Act 1998*, the Ambulance Service works closely with the GIO Injury Manager to develop return to work injury management plans.

Risk Management and Insurance matters

Risk Management is the pro-active management of threats to business. It is the systematic application of management policies, procedures and practices within the Service as well as the identification, analysis, treatment and monitoring of risks. The Service actively incorporates Risk Management principles and practices in every area of its operation by using the *Australian/New Zealand Standards on Risk Management (4360.99)* as a guide.

The workers compensation premium deficit for the Service in 1999/2000 was \$1,545,192. The deposit premium for workers compensation paid by the Service in 1999/2000 was \$11,867,497. The motor vehicle premium deficit for the Service in 1999/2000 was \$139,251. The deposit premium for motor vehicle insurance paid by the Service in 1999/2000 was \$1,730,572. Public liability and property insurance premiums continue to remain within the overall NSW Health Department coverage.

Workers Compensation

During 1999/2000, there were 795 workers compensation claims lodged, categorised as follows:

Category	Number of Claims
Body Stress	343
Hit by Object (s)	111
Exposure (infectious)	87
Fall/Slip	77
Unknown	69
Vehicle	49
Mental Stress	44
Bites	4
Objects - Moving	5
Other	6
Total	795

The Public Affairs Unit attempts to raise the profile of the Service on a statewide basis. The Unit obtains newsworthy information on operational matters from Operations Centres then disseminates that information to the media, either through Sector Media Relations Officers, or directly from State Headquarters.

The Unit is responsible for liaison with Sector Media Officers, liaison with television and film crews regarding ambulance involvement in television and movie shoots, media training, communication strategies, liaison with media outlets and the proactive release of seasonal information and warnings to the media.

The role of media officers at a major incident is to liaise with the media, thus allowing ambulance officers and commanders to treat patients and co-ordinate the scene, without being interrupted by media representatives.

One of the major incidents of the year was the Glenbrook train collision. Officers from the Public Affairs Unit attended the scene and co-ordinated the Service's response for requests for interviews from radio, television and the press. The accident attracted considerable interest from local media, as well as from interstate and overseas.

The work of the Sector Media Liaison Officers is crucial to ensure the Service maintains a high profile in local communities.

Executive Support Unit

In April 2000, the Ambulance Service of New South Wales established an Executive Support Unit (ESU). This unit has a central support, monitoring and liaison role both internally (between core business units within the Service) and externally between the Service, the NSW Health Department and the Office of the Minister for Health. The ESU is a core function of the Service and reflects the arrangements in place within several Area Health Services.

Information Systems

Expansion of Wide Area Data Network

The Ambulance Service's data network was expanded considerably to connect to every Area and Sector office. This amounted to an additional 14 sites, giving operational and administrative staff access to electronic mail, the Internet, and corporate systems such as finance and payroll. The facilities will also allow for on-line CAD rostering.

Patient Record Data Management System

The PRDMS (Casesheet system) was transferred back to the Ambulance Service on 30 July 1999. The system had been operating for the previous eighteen months from the Data Centre at the NSW Health Department. A cost/benefit analysis was completed in late 1998, demonstrating that running the program on a new computer in-house would be more cost effective than the facilitation fees paid to the NSW Health Department. There are also benefits in faster access and response times, and closer integration of the Casesheet and SUN systems.

The PRDMS is being rewritten. In 1999/2000, the new system has been prototyped, refined and tested, and will be put into production the following year. This will be an opportunity to build more flexibility in the system, and provide user-defined reporting. Proposals were sought from three contractors to complete the business and systems analysis, and provide a prototype of the new system. *Axis Technology* was selected. The PRDMS will eventually link to the Health Information Exchange, and may also interface with the CAD system through a system currently being developed.

Information Management & Technology Steering Committee

The inaugural meeting of the IM&T Steering Committee was held on 28 October 1999. The Committee is comprised of members of the Executive, Operational Units and Corporate Services Managers, and two representatives from the NSW Health Department. Several working parties were established to investigate and report on the current state of information technology, data management, and personal computer acquisitions.

Health Information Exchange

The Health Information Exchange (HIE) project is an automated whole of Health data exchange. Initially, the HIE has been set up to collect clinical, financial and employee related data from Area Health Services, and is now being extended to the Ambulance Service. In the future, it is planned to collect a wider range of data, and provide the infrastructure for a statewide patient identifier.

The HIE will provide the Ambulance Service with the ability to analyse aggregated data from payroll (Workforce) and general ledger (SunSystems) systems. The information provided by the HIE will give managers specific and detailed analysis of staffing, payroll, costing and budgets.

Year 2000

Saturday, 1 January 2000 passed with no effect on the Service. Two years of planning, evaluating and updating paid off, ensuring the Service was able to deal with the busiest New Years Eve ever, and continue to operate as normal. However, the Year 2000 potential for problems has a number of critical dates to pass, including 29 February, 30 June and 31 December 2000. As with the first day of the year, we do not anticipate any problems resulting from these Year 2000 critical dates.

Data Network Infrastructure

During 1999/2000, a number of projects were initiated to provide rural administration offices with upgraded data network facilities. Replacement of network equipment, and in some cases data cabling, provided a more robust, reliable and efficient data network at these sites. Combined with similar upgrades at State Headquarters, the data network infrastructure will be able to support the ever increasing demands with new applications and new technologies.

Ambulance Service Website

The website now includes the Service's journal *Sirens*, as well as pertinent media releases. During May 2000, the site was visited 81,637 times. The site is at www.asnsw.health.nsw.gov.au

Committees of the Ambulance Service

- ✦ Information Management & Technology Steering Committee
- ✦ CAD & Communications Project Steering Committee
- ✦ Health Information Exchange Project Steering Committee
- ✦ Year 2000 Project Steering Committee

Ambulance Service Participation on Consultative Committees

- ✦ NSW Health Chief Information Officer Forum
- ✦ NSW Health Telecommunications Steering Committee

Rural Areas

Macquarie, Mid & Far West Area

Mid Far West

Baradine
Bourke
Brewarrina
Broken Hill
Cobar
Collarenebri
Coolah
Coonabarabran
Coonamble
Dubbo
Dunedoo
Gilgandra
Gulgong
Lightning Ridge
Mudgee
Narromine
Nyngan
Walgett
Warren
Wellington

First Responder

Gulgambone

Honorary

Goodooga
Ivanhoe
Menindee
Tibooburra
Trangie
Wanaaring
Wilcannia
Yeoval

Macquarie

Bathurst
Blayney
Canowindra
Condobolin
Cowra
Forbes
Grenfell
Kandos
Lake Cargelligo
Lithgow
Molong
Oberon
Orange
Parkes
Peak Hill
Tottenham

First Responder

Hill End

Honorary

Cudal
Eugowra
Manildra
Trundle

Hunter & Mid North Coast Area

Hunter

Belmont
Beresfield
Birmingham Gardens
Boolaroo
Bulahdelah
Cardiff
Cessnock
Cooranbong
Doyalson
Dungog
Gloucester
Hamilton
Kurri Kurri
Merriwa
Murrurundi
Muswellbrook
Nelson Bay
Raymond Terrace
Rutherford
Score
Singleton
Stockton
Stroud
Tea Gardens
Toronto

Mid North Coast

Bellingen
Coffs Harbour
Dorrigo
Kempsey
Laurieton
Macksville
Nambucca Heads
Port Macquarie
Taree
Tuncurry
Urunga
Wauchope

First Responder

South West Rocks

Northern Rivers & New England Area

Northern Rivers

Ballina
Bonalbo
Byron Bay
Casino
Evans Head
Grafton
Kingscliff
Kyogle
Lismore
Macleay
Mullumbimby
Murwillumbah
Tweed Heads
Urbenville

New England

Armidale
Ashford
Barraba
Bingara
Boggabri
Glen Innes
Gunnedah
Guyra
Inverell
Manilla
Moree
Mungindi
Narrabri
Quirindi
Tamworth
Tamworth South
Tenterfield
Walcha
Wyallda
Wee Waa



Greater Murray Area

Albury
Ardlethan
Balranald
Barham
Batlow
Berrigan
Coleambally
Cootamundra
Corowa
Deniliquin
Finley
Griffith
Gundagai
Hay
Hillston
Holbrook
Jerilderie
June
Leeton
Lockhart
Narrandera
Temora
Tumbarumba
Tumut
Wagga Wagga
West Wyalong

Honorary

Moulamein

Illawarra & South Eastern Area

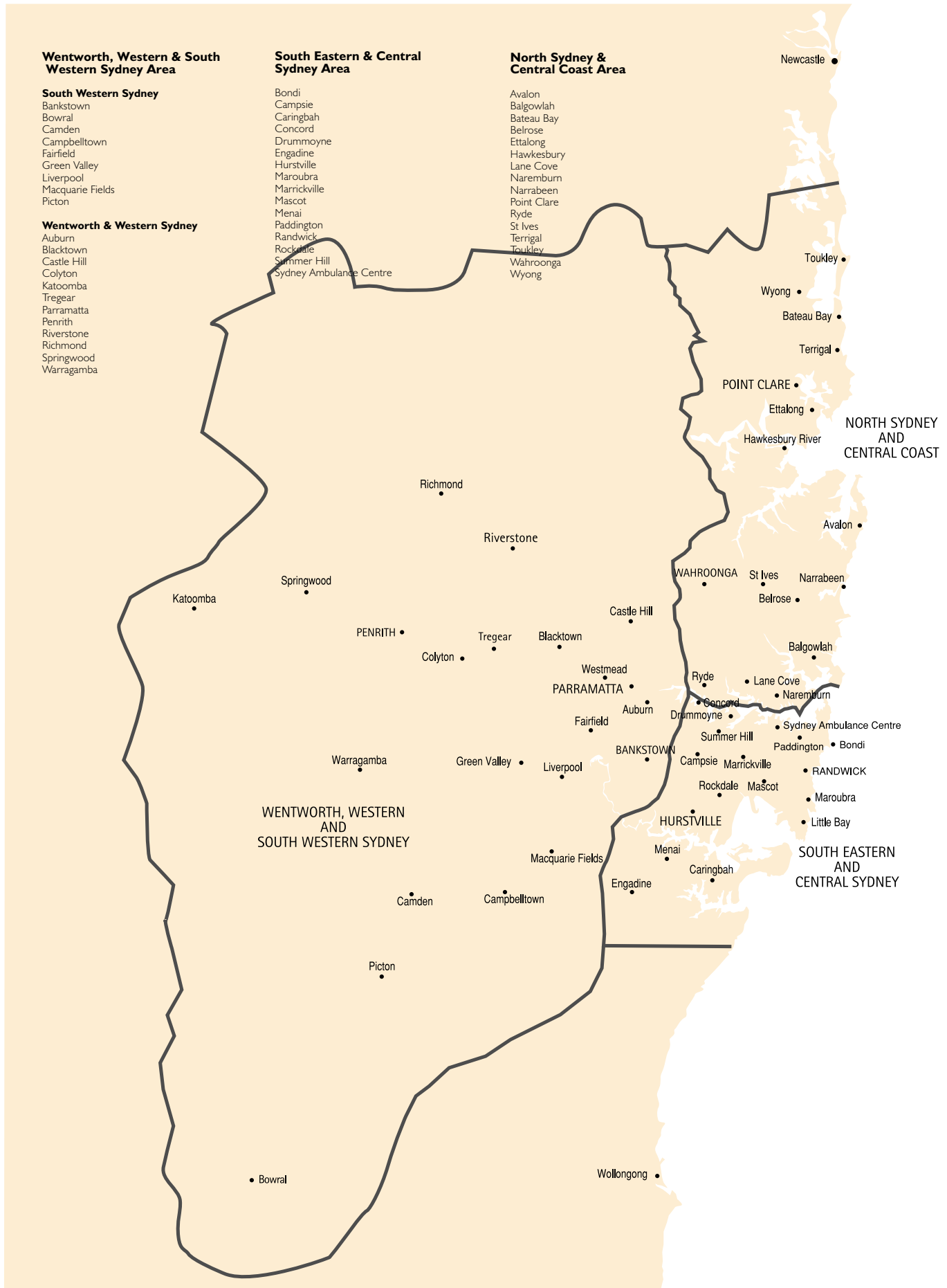
South Eastern

Batemans Bay
Bega
Bermagui
Bombala
Boorowa
Braidwood
Cooma
Crookwell
Eden
Goulburn
Harden
Jindabyne
Merimbula
Moruya
Narooma
Perisher Valley
Queanbeyan
Yass
Young

Illawarra

Bomaderry
Bulli
Culburra
Dapto
Helensburgh
Huskisson
Kangaroo Valley
Kiama
Ulladulla
Warilla
Warrawong
Wollongong

Metropolitan Areas



Highlights from around the State

North Sydney and Central Coast Area

The North Sydney and Central Coast Area has developed and implemented a one week *Trainee Ambulance Officer Orientation Program*, designed to familiarise trainee ambulance officers with the practical aspects of working with experienced officers at operational stations. Trainee ambulance officers are exposed to, and familiarised with, all probable situations they may encounter in their daily duties.

The Orientation Program also comprises:

- ✦ Introduction to the Area Manager and the Area's Senior Management Team, which assists in reinforcing trainee officers awareness of the command structure.
- ✦ General knowledge as to the location and procedures of local hospitals and community organisations.
- ✦ Major road familiarisation.

The Program is proving successful both with trainee ambulance officers and experienced ambulance officers who mentor newcomers to the Service.

The propensity of the Area to retain and attract an increasing population of retirees and elderly people continues to have significant impact on the effectiveness of ambulance services within the Area. There are increasing demands on the Ambulance Service to provide routine, non-emergency ambulance transport, which must be reconciled to ambulance availability to meet the urgent demands of emergency pre-hospital care and transport.

South Eastern and Central Sydney Area

Major events continued to dominate as South Eastern and Central Sydney Area coped with the huge crowds that gathered in the city for the New Years Eve millennium celebrations, the largest Mardi Gras staged and the massive turnout for Corroboree 2000. These coupled with the intensive planning and preparations for the Sydney 2000 Olympics and associated anti-terrorist exercises and training commitments have all contributed to a busy year. The South Eastern and Central Sydney Area also provided paramedical cover at the Homebush Olympic site during its construction under contract with the Olympic Coordination Authority.

1999/2000 also saw the opening of Sydney's Eastern Distributor and the new Airport Rail Link. Both of these events required significant time and input from the Ambulance Service in working with construction companies, consultants and other services in finalising emergency response plans and in conducting emergency exercises.

Major renovation has been carried out at Marrickville Station and the Area has addressed all OH&S issues including a detailed examination and refurbishment of all patient harness and safety restraint systems in all vehicles. Additional capital works programs are being pursued in an effort to rectify any outstanding maintenance requirements.

Wentworth, Western and South Western Sydney Area

During the year there were several major incidents in the Area which involved multiple casualty management. The Glenbrook rail accident on 2 December 1999 required ambulance transport for 51 patients to three local hospitals, and transport of seven corpses to the State Coronial morgue at Glebe. Ambulance officers attended to the medical needs of many other train commuters at the scene. Area ambulance officers also attended to a large number of road trauma incidents that caused death and serious injury.

Three new Mercedes Sprinter ambulance prototypes were tested in the Area, mainly around Parramatta with its high demand conditions.

A number of seminars conducted at Westmead and Liverpool Hospitals have created opportunities for ambulance staff to interact with other health professionals.

Major capital works renovations occurred at Tregear and Penrith Stations, with security at Bankstown Station enhanced. Security work has commenced at Liverpool and Green Valley Stations. The relocation of Bowral Station to the grounds of Bowral Hospital is well under way.

Hunter and Mid North Coast Area

The Hunter and Mid North Coast Area initiated Train-the-Trainer, Bushcraft and 4WD courses throughout the Area. More than one-third of the workforce was trained in these various disciplines. This has enabled the Area to ensure that trainee ambulance officers are afforded educated training officers and that the deployment of staff in 4WD vehicles or into rural areas is operationally effective.

The Coffs Harbour Co-ordination Centre was officially relocated to the Northern Operations Centre at Charlestown. As part of an effective change management strategy, existing staff were consulted and were able to decide on options such as retraining, voluntary redundancy packages, relocation to Charlestown or relocation to ambulance stations throughout the Area.

During 1999/2000, honorary ambulance officers provided initial care and treatment to the community of South West Rocks as part of an interim "First Responder" system. During this time, the Minister for Health announced that South West Rocks was to receive funding for a new ambulance station. Planning has commenced for this new facility which will provide three ambulance officers and two ambulances. It is anticipated that this station will be operational from July 2001.

Planning also commenced during 1999/2000 to build a new ambulance station to provide two ambulance officers, twenty-four hours a day at Tanilba Bay. Community consultation has been a feature of this project and it is anticipated that this facility will be completed in September 2001.

During the year, Newcastle paramedics completed their 5000th mission on the Hunter Region Westpac Rescue Helicopter. The Hunter based helicopter plays a major role in allowing the Hunter and Mid North Coast Area to provide advanced clinical care to remote locations.

Greater Murray Area

Pilot Transport Project (Western Area)

Representatives of the Service's Greater Murray Area and the Greater Murray Area Health Service collaborated to develop a Business Case for the establishment of a pilot project involving the setting up of a routine pre-planned transport network in the western part of the Riverina District. The Service's senior executive are currently considering the proposal which would provide for more efficient use of available resources.

NSW Ministerial Advisory Committee on Health Services in Small Towns (Sinclair Report)

In accordance with Recommendation 29 of the Sinclair Report, management of the Greater Murray Area have commenced discussions with the Area Health Service on the possibilities for redefining the role of ambulance officers in small rural communities. Early discussions have revealed that considerable opportunities do exist that would benefit staff of the Ambulance Service, the Area Health Service, and members of rural communities.

A discussion paper is currently being prepared to identify opportunities that may exist to develop alternate models of health service delivery.

Macquarie, Mid and Far West Area

The Macquarie Mid and Far West Area responded to several major incidents throughout the year. At the North Parkes mining site an underground air blast resulted in the loss of four lives and a number of minor injuries. Near Orange, in the Central West, flooding at the Acadia Gold Mine resulted in a number of patients being transported for minor injuries to Orange Base Hospital.

A significant number of motor vehicle accidents resulted in deaths and injuries on roads throughout the Area. As a consequence of this, major road safety programs have been put in place with signs of effective results.

Extensive preparations took place for new year celebrations and the Y2K changeover. There was also keen involvement in planning and participation for the Olympic Torch Relay.

A/O Tim Toynton of Wellington Station was nominated as Citizen of the Year for his outstanding contributions to community work. The passing away of S/O Martin Clift from Gilgandra Station on 1 April, 2000 came as a shock to all officers in the Area.

Five new station officers have been promoted following retirements and other staff movements. Both Sector Offices held meetings with their station officers early in the year as part of the continuing process of keeping staff informed of changes. The local community of Trangie commenced construction of a new honorary ambulance service in conjunction with the Trangie Health Service.

The Royal Flying Doctor Service opened at Dubbo Airport working with the Air Ambulance Service to provide improved aeromedical services to the Area.

Many of the rural officers in the Area have completed further tertiary studies, in particular the Pre-Hospital Care course.

Illawarra and South Eastern Area

In February 2000 a Memorandum of Understanding (MOU) was signed between the ACT Ambulance Service and the Ambulance Service of New South Wales. The MOU forms the basis for operational relationships with particular emphasis on routine ambulance services in areas close to the NSW/ACT border and the operational process to be followed between respective operations centres.

Financial management training was conducted in the Illawarra and South Eastern Area for senior managers, providing them with greater financial accountability from the commencement of the financial year 2000/01. The emphasis on the training days was to provide station officers with information and support to manage their stations with a high priority being placed on financial management.

Cooma Ambulance Station

In February 2000, a new ambulance station was built at Cooma adjoining the Nurses Training Centre as part of renovations to Cooma Hospital. The new station replaced the old station premises that were dilapidated.

Northern Rivers and New England Area

The Area has introduced regular senior officers' seminars. These include; segments on workshoping the scope for enhancing the empowerment of station officers, information dissemination and education in the areas of Aboriginal cultural awareness, OH&S and rehabilitation, harassment and discrimination, peer support officers' role, accident investigation, grievances and Y2K Critical Operation Standing Operations Procedures (COSOPS). The Area has also introduced strategies to improve the communication and information flow between all staff.

The Area has introduced a Clinical Support Officer (CSO) network to ensure the quality of patient care is maintained at a high standard and to provide a platform of support and educational assistance for all officers in matters of clinical care.

Operations Centres

Sydney Operations Centre (Eveleigh)

Commenced operation of the new Computer Aided Dispatch system on 10 July 1999. This represented a major technological change and advancement in call taking and dispatch functions undertaken at the Sydney Operations Centre.

Northern Operations Centre (Charlestown)

The Coffs Harbour Coordination Centre closed on 23 November 1999 and the Lismore Co-ordination Centre closed on 16 December 1999. Responsibility for local coordination of ambulance services within those areas was transferred to the Northern Operations Centre.

All Areas, except for the Hunter, are operating successfully on Mobile Data Terminals.

Western Operations Centre (Dubbo)

The Western Operations Centre highlights for the past year have centred on the consolidation of the VisiCAD Computer Aided Dispatch System. The successful integration of Mobile Data Unit technology across the Centre's operational areas has reduced response times in emergency cases and provided more timely and accurate case related information to operational crews.

The Centre has been able to utilise the significantly improved information available from the VisiCAD system with each Sector and Area Office able to access up to the minute data and performance information. At the time of publication monthly summary performance reports will be available to all managers for key operational data covering a diverse range of workload and system inputs.

Southern Operations Centre (Warilla)

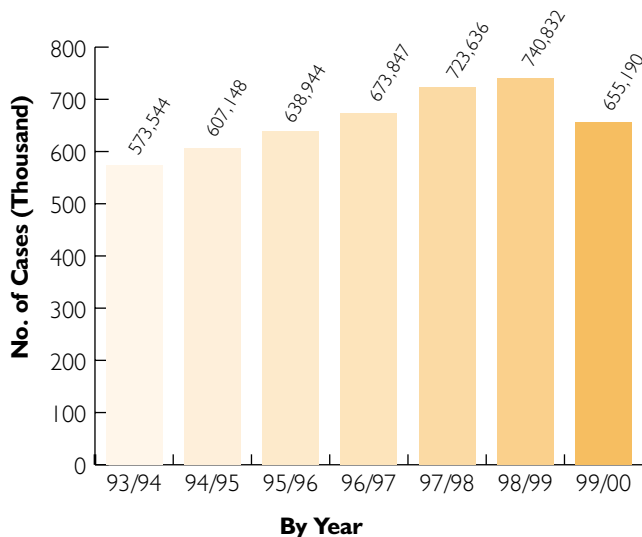
The Goulburn Coordination Centre closed on 23 August 1999. Implementation of Mobile Data Terminals occurred during the year.

1999/2000 The Year in Review

The following graphs and charts provide a snapshot of the Service's workload during 1999/2000. It is important to note that this year the data collection is incomplete and the workload report is understated (see page 13). The statistics shown in the charts and graphs on pages 26 and 27 are sourced from the Service's case sheet system.

Caseload

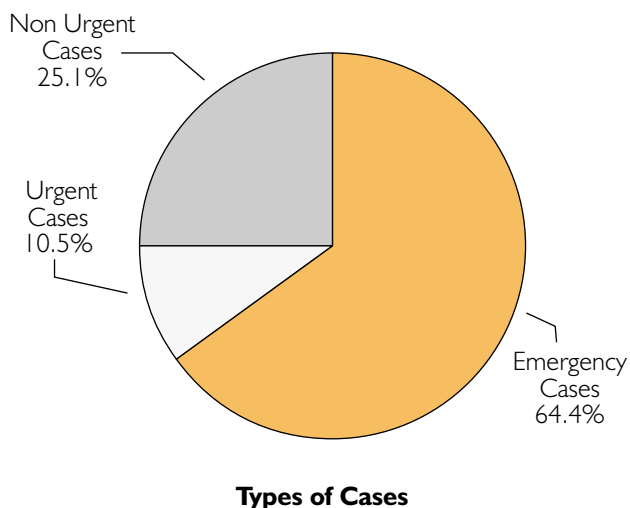
The present data set represents over 655,000 emergency, urgent (time critical) and non-urgent (routine) cases during 1999/2000. The following graph shows that this is a smaller caseload than in the preceding three years. Previous experience shows a steady increase from year to year. Any year to year and other comparisons made from this information should acknowledge that the 1999/2000 caseload is presently understated.



Emergency, Urgent and Non Urgent Cases

The caseload of the Ambulance Service of New South Wales can be categorised in various ways. The present convention is to categorise according to the degree of urgency and the following chart shows the proportion of emergency, urgent and non-urgent cases.

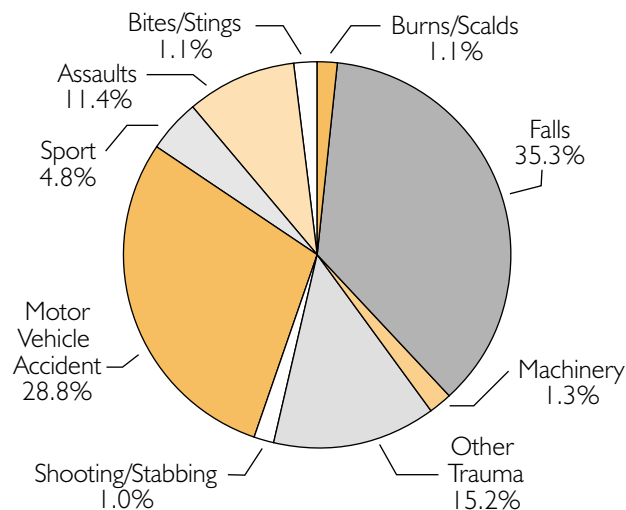
The non-urgent (or routine) category refers to booked transport for people attending and returning from day treatment, transfer to an aged care facility, discharge or non-urgent transfer to another hospital, or discharge. During the year, the Service was invited by the NSW Health Department to participate in a review to examine additional options for the provision of routine and health related transport services.



Types of Cases

Trauma

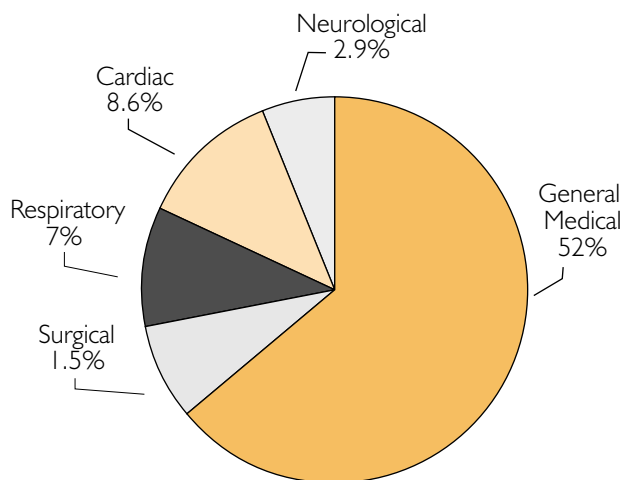
As part of its emergency case load the Service responds to a range of traumatic incidents. The following chart describes the range and most frequently occurring types of trauma. Falls and motor vehicle accidents continue to be the largest categories of trauma to which the Service responds. The "other trauma" category includes a proportion of drowning, electricity and poisoning cases.



Types of Trauma

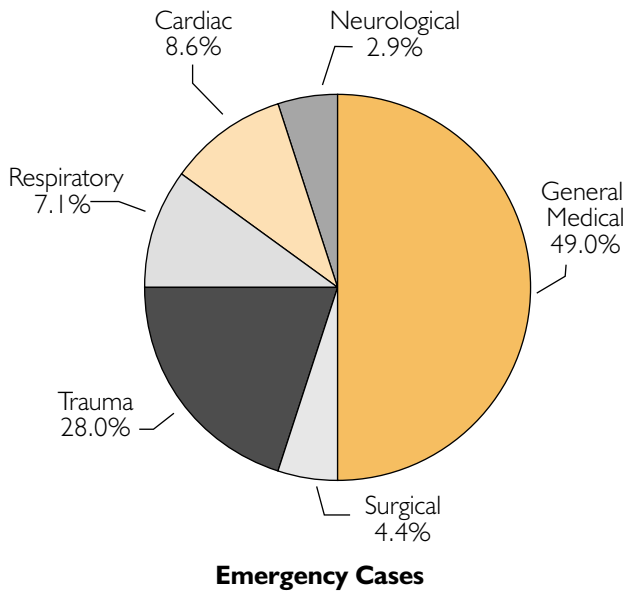
Other Emergencies

The main medical categories for emergency patients are shown in the following chart.



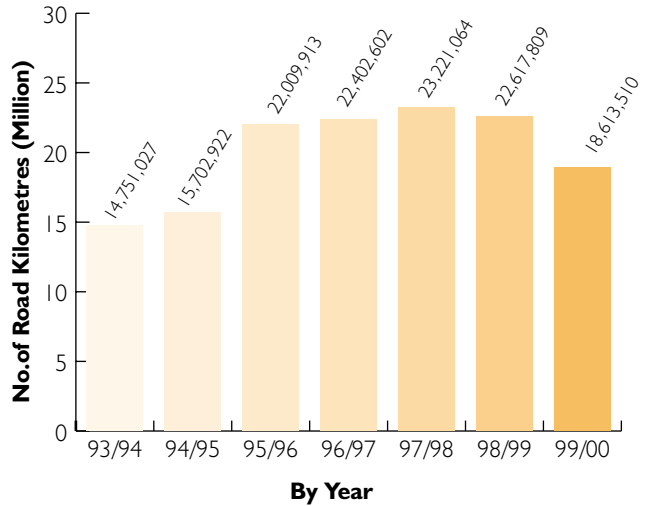
Cases by Major Diagnostic Category.

Types of Emergency



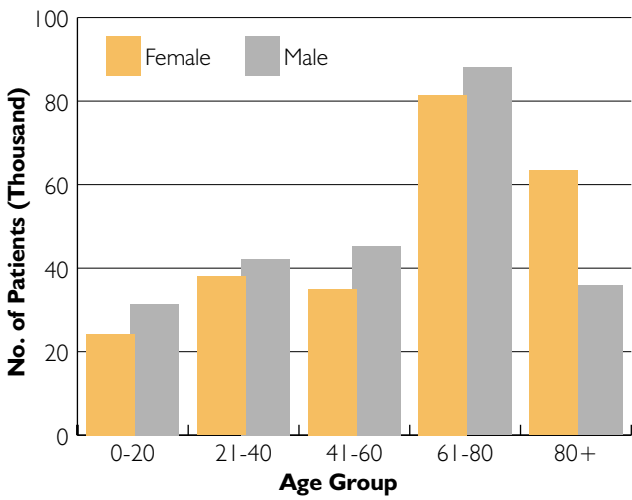
Kilometres Travelled

As the 1999/2000 data collection is incomplete the kilometres travelled by road are understated in comparison with previous years.



Age and Gender

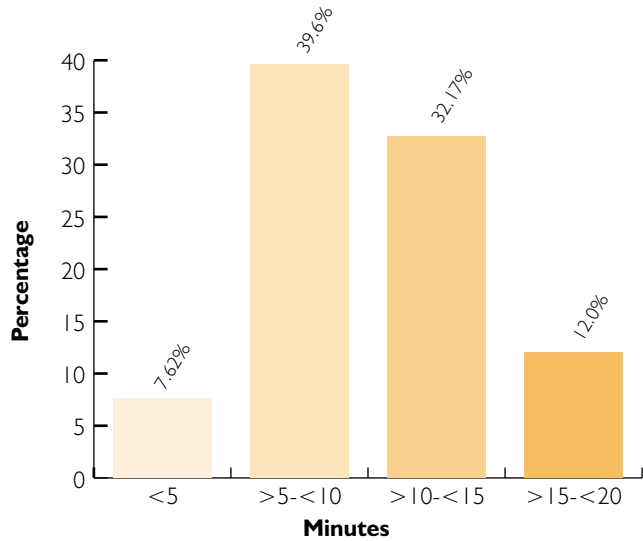
There is a roughly equal distribution of male and female patients transported by the Ambulance Service. As may be expected more males are transported in every age category except for the 81+ category, where the female population outlives the male population and makes increasing use of health care services.



Proportion of Patients Transported by Age and Gender

Response Times

The capacity of the Service to respond to emergency situations is an indicator of operational efficiency. The following graph shows that the Service responds to the majority of emergency cases within 15 minutes.



Response Times

Freedom of Information

These statistics are set out in accordance with the format prescribed in "Attachment A" to the circular dated 27 June 1991 issued by the Freedom of Information Unit, NSW Premiers Department.

During 1999/2000, FOI procedures had a significant impact on the Ambulance Service's administration with four major FOI compliance issues occurring. Two applications from Shadow Ministers were received and two from the Sydney Morning Herald.

There were no appeals to the District Court and no ministerial certifications issued during 1999/2000. The Service received three requests requiring formal consultation. There were no requests for amendment of personal records and no requests for notation of personal records for 1999/2000.

Results of FOI requests

	Personal		Other	
	1998-99	1999-00	1998-99	1999-00
Granted in full	54	47	0	1
Granted in part	1	0	1	2
Refused	2	8	0	6
Deferred	0	0	0	0
Completed	57	55	1	9

Costs and fees of requests processed

	Assessed costs		FOI fees received	
	1998-99	1999-00	1998-99	1999-00
All completed requests	\$1,820	\$2,400	\$1,610	\$2,248

Processing time

	Personal		Other	
	1998-99	1999-00	1998-99	1999-00
0 - 10 hours	49	63	0	0
11 - 20 hours	5	0	1	1
21 - 40 hours	3	0	0	0
Over 40 hours	0	0	0	0
Totals	57	63	1	1

Reviews and appeals

	1998-99	1999-00
Number of internal reviews finalised	0	1
Number of Ombudsman reviews finalised	0	0
Number of District Court appeals finalised	0	0

Details of internal review results

Basis of internal review. Grounds on which internal review requested	Personal				Other			
	Upheld*		Varied*		Upheld*		Varied*	
	1998-99	1999-00	1998-99	1999-00	1998-99	1999-00	1998-99	1999-00
Access refused	0	1	0	0	0	0	0	0
Deferred	0	0	0	0	0	0	0	0
Exempt matter	0	0	0	0	0	0	0	0
Unreasonable charges	0	0	0	0	0	0	0	0
Charges reasonably incurred	0	0	0	0	0	0	0	0
Amendments refused	0	0	0	0	0	0	0	0
Refused to deal	0	0	0	0	0	0	0	0

*Relates to whether or not the original agency decision was upheld or varied by internal interview.

FOI requests granted in part or refused

Basis for disallowing or restricting access	Personal		Other	
	1998-99	1999-00	1998-99	1999-00
Section 16 (a)(1)(1) (management of personnel)	1	0	0	5
Section 16 (b) (contrary to public interest)	1	0	0	0
Section 19 (application incomplete, wrongly directed)	0	0	0	0
Section 22 (deposit not paid)	1	0	0	0
Section 25(1)(a)(1) (unreasonable diversion of resources)	0	0	1	1
Section 25(1)(a) (exempt)	0	0	0	0
Section 25(1)(b)(c)(d) (otherwise available)	0	0	0	0
Section 24(2) (deemed refused, over 21 days)	0	0	0	0
Section 28(1)(b) (documentation not held by agency)	0	0	0	0
Totals	3	0	1	6

Discounts allowed

Types of discounts allowed	Personal		Other	
	1998-99	1999-00	1998-99	1999-00
Personal interest	0	0	0	0
Financial hardship -pensioner/child	6	3	0	0
Financial hardship -non profit organisation	1	0	0	0
Totals	7	3	0	0
Significant correction of personal records	0	0	0	0

Days to process

	Personal		Other	
	1998-99	1999-00	1998-99	1999-00
0 - 21 days	43	25	0	5
22 - 35 days	12	20	0	3
Over 35 days	2	10	1	1
Totals	57	55	1	9

New FOI requests

	Personal		Other	
	1998-99	1999-00	1998-99	1999-00
New (including transferred in)	57	55	1	9
Brought forward	0	0	0	0
Total to be processed	57	55	1	9
Completed	57	55	1	9
Transferred out	0	0	0	0
Withdrawn	0	0	0	0
Total processed	57	55	1	9
Unfinished (carried forward)	0	0	0	0

Capital Works

Major Works in Progress

Relocation of Cooranbong Ambulance Station to Morisset

Estimated total cost: \$640,000

Cost to date: \$610,000

Estimated completion date: August 2000

Redevelopment of Bowral Ambulance Station

Estimated total cost: \$620,000

Cost to date: \$37,000

Estimated completion date: May 2001

I.T. Year 2000 Conversion

Estimated total cost: \$1,188,000

Cost to date: \$1,046,000

Estimated completion date: October 2000

Rozelle Education Centre Refurbishment Stage 2

Estimated total cost: \$695,000

Cost to date: \$25,000

Estimated completion date: June 2001

Toyota Tarago Changeovers to Volkswagen Ambulances

Estimated total cost: \$1,260,000

Cost to date: \$924,000

Estimated completion date: February 2001

Real Property Disposals

A total of five properties were sold during the financial year.

Residential properties at Singleton and Deniliquin, a site at Doyalson, an industrial unit at Kelso and a former ambulance station at Walgett were sold for a total of \$509,945. These properties were surplus to operational requirements. Sale proceeds, after costs, are held in an asset management working account and will be allocated for capital projects to be approved and commenced in 2000/01 and subsequent financial years.

Ambulance Service real property disposals are approved by and processed through the NSW Health Department. Access to documents relating to disposals can be obtained from the NSW Health Department under the Freedom of Information Act.

Major Assets

The Ambulance Service's major assets, other than land holdings, are listed below. Major assets are those valued at over \$500,000. Major assets acquired or transferred to the Service during the financial year are separately listed.

Aircraft

Four Air Ambulance Aircraft - Beechcraft King Air B200C

Buildings

Armisdale Station & Workshop
Avalon Station
Balgowlah Station
Bankstown Station Complex
Bateau Bay Station & Residence
Bermagui Station & Residence
Blacktown Station
Bomaderry Station
Broken Hill Station & Residence
Bulli Station
Charlestown Operations Centre Complex
Drummoyne Station
Fairfield Station
Guyra Station & Residence
Hamilton Station Complex
Katoomba Station & Residence
Lismore Station Complex
Air Ambulance Base, Sydney Airport
Menai Station
Merimbula Station & Residence
Oak Flats Workshop & Store
Perisher Valley Station
Point Clare Station Complex & Residences
Richmond Station & Residence
Rozelle Building 45
Rozelle Building 47
Rozelle Education Centre Building 48
Summer Hill Station & Residences
Summer Hill Workshop
Terrigal Station
Tweed Heads Station
Warilla Operations Centre

Plant & Equipment

New England Communications Network
Sydney Radio Network
Western NSW Radio Network
Trade Centres, Sydney & Warilla

Assets acquired or transferred during the financial year

MDT-AVL
Sydney Ambulance Centre
Communications Network Northern
CAD System

Awards

Awards and Commendations as at 30 June 2000

National Medal

For recognition of 15 years diligent service.

A/O Louise ALDERSON
A/O Stephen BATES
A/O Gregory BELL
A/O Oswald BORG
A/O Stephen BROWN
S/O Roderick BRYANT-KING
A/O Wayne BULL
A/O Andrew CHAPMAN
A/O Darryl CUMMING
A/O Ian DAVIS
A/O Glen EVERETT
S/O Andrew FOSTER
A/O Wayne GARNER
A/O Ronald GAVIN
A/O Trevor HANNAN
A/O Colin HARDIE
A/O Terry HARTLEY
A/O Peter MATSINOS
A/O James McDONALD
A/O Gregory METZ
A/O Steven MOORE
A/O David MOTT
A/O Jennifer MUIR
A/O Craig PARSONS
A/O Brian POTTER
A/O Lexey QUINN
A/O Michael SMITH
A/O James STIRLING
A/O Gerry STORT
A/O Ian TOTTERDELL
A/O Brian WADSWORTH
A/O Malcolm WAITE
S/O Alasdair WEBSTER
A/O Christopher WILKINSON

1st Clasp to National Medal

For recognition of 25 years diligent service.

A/O Kevin ADAMSON
A/O Neil ATKINSON
A/O John BELL
S/O Grahame BISHOP
S/O Douglas BRODBECK
A/O Ronald BROWN
A/O Robert COX
A/O Phillip COX
S/O James FELLOWS
A/O David FITZCLARENCE
D/O Paul FLOWERDEW
A/O Dennis KEEGAN
S/O Paul LAUDER
A/O Jeffrey LUCAS
S/O Peter MURRAY
S/O Laurie OKE
S/O Alan PARKER
S/O Shane PAUL
A/O Ronald ROSE

Second Clasp to National Medal

For recognition of 35 years diligent service.

Supt Michael CUTLER
S/O Peter HOWLETT
S/O Alexander SMITH
A/O Graham STOREY
D/O Con VERNADOS

Distinguished Service Medal

For courageous acts beyond the line of duty.

S/O Murray TRAYNOR

State Superintendent's Commendation

For an act worthy of recognition.

Mr Rod BROWN
A/O Michael CONNOLLY
A/O Michael CORLIS
S/O David COTSIOS
A/O James DELANEY
A/O Milton DENING
S/O Warren GARNHAM
A/O Stuart GOURLAY
A/O David HARRIMAN
A/O Michael HUTCHESON
A/O Graeme JULIAN
A/O Robert KNIGHT
A/O Peter LANG
A/O Peter LARSEN
A/O Paul McLENNAN
A/O Frank MICHELMAYR
A/O David OVERTON
A/O Gary SIMPSON
A/O William STRALOW
Central Coast Sector Staff
Illawarra Sector Staff

Royal Humane Society of NSW

For bravery in attempting to save human life.

Bronze Medal

A/O Glen EKERT
A/O Richard HESELWOOD

Supplementary Information

Funds Granted to Non-Government Community Organisations

Nil funds have been granted to non-government community organisations in 1999/2000.

Group Service Activities

The Ambulance Service had no activity in this area in 1999/2000.

Disclosure of Controlled Entities

The Ambulance Service did not have any controlled entities in 1999/2000.

Overseas Visits

The Ambulance Service of New South Wales did not sponsor any official overseas visits during 1999/2000.

Legislation

NSW legislation which impacts on, or has relevance to, the Ambulance Service of New South Wales, includes the following:

Ambulance Services Act 1990 and Regulations 1995
Annual Reports (Statutory Bodies) Act 1984
Anti-Discrimination Act 1977
Charitable Fundraising Act 1991
Children (Care and Protection Act) 1987
Crimes Act 1900
Freedom of Information Act 1989
Government and Related Employees Appeal Tribunal Act 1980
Health Administration Act 1982
Health Care Complaints Act 1993
Health Insurance Levies Act 1982
Health Legislation Amendment Act 1999
Health Services Act 1997
Independent Commission Against Corruption Act 1988
Industrial Relations Act 1991
Local Government Act 1993
Mental Health Act 1990
Occupational Health and Safety Act 1983
Ombudsman Act 1977
Ombudsman Amendment (Child Protection and Community Services) Act 1998
Poisons and Therapeutic Goods Act 1966
Protected Disclosures Act 1994
Public Finance and Audit Act 1983
Public Sector Management Act 1988
Road Transport Acts 1999
State Authorities Non-Contributory Superannuation Act 1987
State Authorities Superannuation Act 1987
State Emergency and Rescue Management Act 1989
Superannuation Act 1916
Sydney Turf Club Act 1943
Workplace Injury Management and Workers Compensation Act 1998
Workers Compensation Act 1987

Consumer Response

The Ambulance Service of New South Wales, as an integral part of the State's health system, fully subscribes to the NSW Health Department's Commitment to Service monitoring of all consumer responses. The Service has complaint handling procedures in place to ensure all matters are investigated and a response to the complainant is provided. These procedures were reviewed and a more consistent Statewide approach to complaints handling was proposed to be developed within the new Professional Standards and Conduct Unit.

Compliments

Many people wrote to express their appreciation of the work that ambulance officers perform and in particular the way in which patients were treated and the kind consideration given to relatives and friends in their time of need. There was a total of 783 letters of appreciation received.

Complaints

During 1999/2000, the Service received a total of 678 complaints. The main categories of complaint were patient care, attitude of officers, response times, booking of ambulance services and staffing levels.

Recycling

The Service has continued its responsibility towards sound environmental practices with its participation in a recycling program of paper and paper products at State Headquarters. During 1999/2000, 23.35 metric tonnes of paper and paper products were collected from State Headquarters for recycling. This collection equates to a saving of 350 average size pulp trees over the year. Service facilities throughout the State have participated in recycling activities within their local area.

Publications of the Ambulance Service

The Ambulance Service of New South Wales produces a variety of community education brochures, posters and booklets in addition to the main publications listed below:

- ✚ Annual Report
- ✚ Corporate Plan
- ✚ Sirens

Consultants Engaged

Number of Consultancies costing greater than \$30,000 in expenditure: Eight.

NSW Department of Public Works & Services, Sydney for removing asbestos at State Headquarters, Rozelle: \$384,000.

Stafford Moor & Farrington for Bowral Ambulance Station relocation works: \$32,025.

NSW Department of Public Works & Services, Wollongong for Cooma Ambulance Station relocation works: \$39,494.

NSW Department of Public Works & Services, Sydney for construction of Sydney Ambulance Centre: \$45,291.

Axis Technology for Patient Records Data Management: \$68,000.

Axis Technology for Year 2000 Compliance Program: \$163,022.

Brian Davis & Associates for conducting investigation on professional conduct matters: \$37,130

Sandra Management for conducting disciplinary investigations: \$34,916

Number of Consultancies costing less than \$30,000 in expenditure: 44 consultancies costing \$163,407 in total.

Senior Executive Service Positions

The Service's senior management structure contained two Senior Executive Service (SES) positions as at 30 June 2000. Mr Greg Rochford was appointed Chief Executive Officer at SES level 5, and Mr Robert Gray was appointed General Manager Corporate Services, at SES level 3.

Name: Mr Greg Rochford
Position: Chief Executive Officer
Level: SES level 5
Period in Position: One year

Results:

- ✘ Progressed revision of the State Executive structure.
- ✘ Improved financial result in 1999/2000.
- ✘ Implemented core Ambulance Computer Aided Dispatch (AmbCAD) functions.
- ✘ Established revised financial management and reporting processes.
- ✘ Established Professional Standards and Conduct Unit.
- ✘ Implemented the review of Standard Operating Policies and Procedures.
- ✘ Established Olympic Games planning.
- ✘ Opened Medical Retrieval Unit.

Statement of Affairs

Section 14(1)(a) of the Freedom of Information Act requires a Statement of Affairs of the agency to be published every 12 months. Relevant information is contained within this Annual Report.

The Service has several committees, as listed in this Report, that assist with policy development within the Service.

The Freedom of Information Act allows a member of the public the right to apply for written information. Records can be amended if they are out of date; misleading; incorrect or incomplete. Members of the public can request to have records amended by applying in writing to:

The FOI Co-ordinator
Ambulance Service of New South Wales
PO Box 105
Rozelle NSW 2039
Tel: (02) 9320 7777

Financial Summary

Payment of Accounts

The average percentage of accounts paid on time during 1999/2000 was 50%.

- ✦ Total value of accounts paid on time - \$62,846,977
- ✦ Total value of all accounts paid - \$124,418,978

The above figures reflect the fact that the 1999/2000 financial year was a very difficult year for the Ambulance Service in terms of cash flow.

Comparative figures for the 1998/99 financial year are as follows:

- ✦ The average percentage of accounts paid on time - 32%.
- ✦ Total value of accounts paid on time - \$48,247,607
- ✦ Total value of all accounts paid - \$93,081,649

Accounts Payable - Comparative figures over last three financial years

	30 June 2000 \$000	30 June 1999 \$000	30 June 1998 \$000
Trade Creditors and Accruals	6,590	7,391	4,216
Capital Creditors	2,049	6,174	3,983
Other	37	164	309
Salaries & Wages Creditors	735	2268	-

(Salaries and wages creditors [e.g., Australian Taxation Office, health funds, insurance companies] prior to the 1998/99 financial year were held in the Salaries Clearing Account or included with Trade Creditors)

Accounts Payable - Age Analysis as at 30 June 2000

(Includes both recurrent and capital creditors)

Less than 30 days overdue	\$1,756,740	24%
30/60 days overdue	\$4,608,788	64%
60/90 days overdue	\$778,127	11%
Over 90 days overdue	\$26,981	1%
Total	\$7,170,636	100%

Accounts Receivable - Age Analysis as at 30 June 2000

Less than 30 days	\$5,979,195	66%
More than 30 and less than 60 days	\$942,903	10%
More than 60 and less than 90 days	\$112,435	1%
More than 90	\$1,979,271	23%
Total	\$9,013,804	100%

The accounts receivable figures relate to patient transport fees and reflect the "gross" position (i.e. excluding the provision for doubtful debts). The gross receivable figure has reduced from the previous financial year by \$2,445,281 due to an increase in the number of accounts raised and delay in processing of accounts. Although the level of accounts receivable has increased, the Service did not receive increased cash as the majority of accounts were uncollectable and doubtful debts.

Investment Management Performance

The following investments were made out of Special Purpose Trust funds at the year end:

\$150,000 for 30 days @ 6.15%, matured on 18 July 2000
 \$300,000 for 100 days @ 6.00%, matured on 26 July 2000
 \$700,000 for 183 days @ 6.03%, matured on 18 October 2000

Interest amounting to \$58,926 was earned from investments during the financial year.

All investments are made in accordance with the provisions of the Public Authorities (Financial Arrangements) Act 1987.

Liability Management Performance

The Ambulance Service have controlled cash flow and managed the liability effectively by controlling the increased level of expenditure and maximising revenue collection.

Monetary amount of annual leave and long service leave entitlements

Annual Leave	\$14,636,000
Long Service Leave	\$32,753,000

Committees of the Ambulance Service of New South Wales (ASNSW)

- ✦ Medical Advisory Committee
- ✦ Medical Retrieval Committee
- ✦ Change Management Project Team Committee
- ✦ Project Steering Committee
- ✦ Equipment Review Committee
- ✦ Equal Employment Opportunity Committee
- ✦ State Occupational Health & Safety Committee
- ✦ Protocol Committee
- ✦ Spokeswomen's Program Committee
- ✦ Olympic Games Executive Planning Committee
- ✦ Olympic Games Operational Planning Committee
- ✦ Year 2000 Project Steering Committee
- ✦ Professional Standards and Conduct Committee
- ✦ Various Joint Consultative Committees

Medical Advisory Committee

The Medical Advisory Committee provides expert advice to the Ambulance Service to ensure treatment protocols, procedures and pharmacology are representative of international best practice in pre-hospital care.

- Dr Tony O'Connell** Director, Paediatric Intensive Care, New Children's Hospital (Chair)
Mr Greg Rochford Chief Executive Officer, ASNSW
Dr Barbara-Ann Adelstein Medical Director, ASNSW
Dr Rod Bishop Staff Specialist, Dept of Emergency Medicine, Nepean Hospital
Dr Anthony Burrell Staff Specialist, Nepean Hospital
Dr Robert Day Emergency Department, Hornsby & Kuring-gai Hospital
S/O Stephen Irons Ambulance Education Centre, ASNSW
Dr Greg McDonald Director of Emergency Care, Sydney Adventist Hospital
Supt Graeme Malone Manager, Ambulance Education Centre, ASNSW
Dr Richard Morris Director, Sydney Medical Simulation Centre, Royal North Shore Hospital
Professor Michael O'Rourke Medical Professorial Unit, St Vincents Hospital
Dr Trish Saccasan-Whelan Emergency Department, Goulburn Base Hospital
Ms Cate Salter Nurse Unit Manager, Blue Mountains Anzac Memorial Hospital
Dr Andrew Wilson Deputy Director General, Public Health & Chief Health Officer, NSW Health Department

Medical Retrieval Committee

The Medical Retrieval Committee provides advice and recommends policy on retrieval matters.

- Dr Anthony Burrell** Staff Specialist, Nepean Hospital (Chair)
Dr Barbara-Ann Adelstein Medical Director, ASNSW
Dr Andrew Berry State Medical Director, NETS
Dr Damien McMahon Aeromedical Retrieval Unit, Canberra
Dr Robert Herkes Staff Specialist, Intensive Care Unit, Royal Prince Alfred Hospital
Dr John McKeon Executive Member, Rural Doctors Association of NSW
Dr Ron Manning Medical Director, Medical Retrieval Unit, St George Hospital
Dr Tony O'Connell Director, Paediatric Intensive Care, New Children's Hospital
Dr Martin Rowley Deputy Director, Intensive Care Unit, John Hunter Hospital
Ms Lynda Smart Statewide Services Development, NSW Health Department
Supt John Wasley Manager, Support Services, ASNSW
Dr Bruce Sanderson Royal Flying Doctor Service
Dr Andrew Mather Emergency Department, Orange Base Hospital
Dr Bernie Hanrahan Medical Director, Careflight
Dr Gary Tall Medical Director, Sydney Aeromedical Retrieval Service

Change Management Project Team Committee

This Committee was responsible for determining change management issues in relation to the Computer Aided Dispatch (CAD) and Communications Project and to identify future strategies.

- Supt Dennis Willis** Illawarra & South Eastern (Team Leader) ASNSW
Supt Denis Beavan Illawarra & South Eastern, ASNSW
S/O Graeme Field Media Unit, ASNSW
Mr Peter Mylan Health & Research Employees' Association
Supt Stephen McPherson Northern Rivers & New England, ASNSW
Mr Derek Margerison Australian Services Union
Ms Janet Maughan Sydney Operations Centre, ASNSW
Supt Peter Payne CAD Project Team, ASNSW
S/O Garry Smith Northern Operations Centre, ASNSW

Project Steering Committee

This Committee oversees all programs and activities associated with the Computer Aided Dispatch (CAD) system and Communications projects.

- Mr Greg Rochford** Chief Executive Officer, ASNSW (Chair)
Dr Barbara-Ann Adelstein Medical Director, ASNSW
Mr Harold Graycar Associate Consultant, Price Waterhouse Coopers
Mr Roger Hanssen Manager Information Systems, ASNSW
Ms Julie Newman Director Finance & Data Services, ASNSW
Mr Robert Gray General Manager Corporate Services, ASNSW
Supt. Malcolm Voyzey Act/State Superintendent, ASNSW
Mr Graham Michalk Information & Asset Services Division, NSW Health Department
Supt Peter Payne CAD & Communications Project, ASNSW
Supt David Storer Communications Manager, ASNSW
Mr Ross Tyler Information Systems Audit Unit, NSW Health Department
Supt Dennis Willis Area Manager, Illawarra & South Eastern, ASNSW

Equipment Review Committee

This Committee oversees the research, development and evaluation of new and current operational equipment.

- Supt Graeme Malone** Manager, Ambulance Education Centre, ASNSW (Chair)
S/O Greg Cameron Illawarra & South Eastern, ASNSW
A/O Rod Dee Illawarra & South Eastern, ASNSW
Supt Allan Dent Area Manager, Wentworth, Western & South Western Sydney, ASNSW
A/O Neville Grieve Hunter & Mid North Coast Area, ASNSW (Health & Research Employees' Association representative)
A/Supt Rick Kruit Act/Sector Manager, South Eastern & Central Sydney, ASNSW
S/O Allan Simpkins Hunter & Mid North Coast, ASNSW
Ms Pam Smith Risk Management Co-ordinator, ASNSW
Mr George Freitas Stores Manager, ASNSW
S/O Susan Webster North Sydney & Central Coast, ASNSW

Equal Employment Opportunity (EEO) Committee

This Committee assists in identifying, evaluating and facilitating equal employment opportunity and equity objectives within the Service. It also drives the formulation and progress of the EEO Management Plan.

Ms Marlene Booth Equity Officer,

Employee Relations Unit, ASNSW (Chair)

S/O Stephen Giles North Sydney & Central Coast, ASNSW

Mr Howard Henler Information Systems, ASNSW

Supt Virginia McKenna Sector Manager,

Northern Rivers & New England, ASNSW

A/O Thanh Nguyen

Wentworth, Western & South Western Sydney, ASNSW

S/O Desiree O'Brien South Eastern & Central Sydney, ASNSW

A/O Craig Packer Southern Operations Centre, ASNSW

(Vacant Position) Spokeswomen's Program Committee Representative

(Vacant Position) Trades Representative

State Occupational Health and Safety Committee

This Committee is responsible for developing OH&S policies for the Service, and encouraging the establishment of OH&S Committees at Sector level across the State.

S/O George Brown Northern Operations Centre (Chair), ASNSW

S/O Warwick Booth

Illawarra & South Eastern & Greater Murray (Sec), ASNSW

Supt Allan Dent Management Representative, Area Manager,

Wentworth, Western and South Western Sydney, ASNSW

Mr Geoff Kiehne Patient Services Representative,

Gilgandra Education Centre, ASNSW

A/O Anthony Lonard Macquarie Mid & Far West, ASNSW

Mr Murray Mackell Support Services Representative,

Fairfield Workshop, ASNSW

S/O Bill Pittaway North Sydney & Central Coast, ASNSW

S/O Peter Reid Hunter & Mid North Coast and

Northern Rivers, ASNSW

Mr Ben Stenekes Administrative Representative, Pay Office, ASNSW

Ms Pam Smith Management Representative,

Risk Management Co-ordinator, ASNSW

Supt Graeme Willis Management Representative, Area Manager,

Greater Murray, ASNSW

Advisors:

Mr Robert Sams OH&S Co-ordinator, ASNSW

Mr Russell Cruikshank Manager, Employee Relations, ASNSW

Mr John Flynn State Fleet Manager, ASNSW

Protocol Committee

This Committee is responsible for the review and update of current Ambulance protocols, procedures and pharmacology.

Dr Barbara-Ann Adelstein Medical Director, ASNSW (Chair)

Dr Rod Bishop Staff Specialist,

Department of Emergency Medicine, Nepean Hospital

S/O Wayne Dunlop Illawarra & South Eastern, ASNSW

A/O Neville Grieve Hunter & Mid North Coast, ASNSW

Supt Graham McCarthy Manager, Clinical Education, ASNSW

Dr Greg McDonald Director of Emergency Care,

Sydney Adventist Hospital

A/O Nicole Judge North Sydney & Central Coast, ASNSW

A/O Craig Short Illawarra & South Eastern, ASNSW

A/O Garry Vincent Hunter & Mid North Coast, ASNSW

Spokeswomen's Program Committee

This Committee is a useful network for women in the Service to gain information on formal and informal aspects that impact on the workplace, and provides a communication link between the women in the Service and management.

Ms Marlene Booth Equity Officer,

Employee Relations Unit, ASNSW (Chair)

Ms Natalie Bryson Hunter & Mid North Coast, ASNSW

Ms Edna Kirkby Illawarra & South Eastern, ASNSW

A/O Michelle Lee Wentworth, Western &

South Western Sydney, ASNSW

A/O Gaye McKay Hunter & Mid North Coast, ASNSW

Ms Anne-Maree Neville Macquarie, Mid & Far West, ASNSW

Olympic Games Executive Planning Committee

This committee was established as the peak body for Ambulance Service planning for the Sydney 2000 Olympic Games and Paralympic Games. The aim of the committee was to identify, develop and address strategic planning issues.

Supt Tony Brennan Olympic Planning Coordinator, ASNSW

Supt Reg Cockburn Manager, Tactical Support, ASNSW

Supt Allan Dent Area Manager,

Wentworth, Western & South West Sydney, ASNSW

Supt Don Hart Area Manager,

North Sydney & Central Coast, ASNSW

Dr Mike Hills Olympic Committee, NSW Health Department

Ms Julie Newman Director Finance & Data Services, ASNSW

Supt Eric Marks Area Manager,

South Eastern & Central Sydney, ASNSW

Supt Malcolm Voyzey Act/State Superintendent, ASNSW

Supt David Storer Communications Manager, ASNSW

Supt Dennis Willis Area Manager, Illawarra & South Eastern, ASNSW

Olympic Games Operational Planning Committee

This committee was established from the Executive Planning Committee with the aim to identify and address operational issues relevant to the Olympic and Paralympic Games.

Supt Tony Brennan Olympic Planning Co-ordinator, ASNSW

Supt Reg Cockburn Manager, Tactical Support, Precinct Commander ASNSW

S/O Rosemary Hegner Technical Educator, South Eastern & Central Sydney, ASNSW

S/O Deborah Hogan Olympic Planning Unit, ASNSW

A/O Steve Matheson Olympic Planning Unit, ASNSW

D/O George Smith Ambulance Liaison, Olympic Security Command Centre, ASNSW

Supt John Stonestreet District Officer, Macquarie, Mid & Far West, Deputy Precinct Commander, ASNSW

Supt Bill Williams Sector Manager, Illawarra & South Eastern, Deputy Precinct Commander, ASNSW

Supt Dennis Willis Area Manager, Illawarra & South Eastern Area, Precinct Commander, ASNSW

Year 2000 Project Steering Committee

This Committee was formed to oversee the completion of any statutory obligations regarding the Year 2000 Millennium Bug.

Mr Greg Rochford Chief Executive Officer, ASNSW (Chair)

Dr Barbara-Ann Adelstein Medical Director, ASNSW

Mr Robert Gray General Manager, Corporate Services, ASNSW

Supt Reg Cockburn Manager, Tactical Support, ASNSW

Mr Roger Hanssen Manager, Information Systems, ASNSW

Ms Julie Newman Director, Finance & Data Services, ASNSW

S/O Alan Love Project Manager, ASNSW

Supt David Storer Manager, Communications, ASNSW

Supt John Wasley Manager, Support Services, ASNSW

Professional Standards and Conduct Committee

This Committee has the responsibility to guide the ethical governance of the Service and provide a clear focus to address professional standards and prevent corruption.

Mr Greg Rochford Chief Executive Officer, ASNSW (Chair)

Supt Malcolm Voyzey Acting State Superintendent, ASNSW

Dr Barbara-Ann Adelstein Medical Director, ASNSW

Mr Anthony Clarke Director, Audit, NSW Health

Mr Robert Gray General Manager, Corporate Services, ASNSW

Mr Neil Hart Audit Manager, Internal Audit Bureau

Ms Sharlene Wiebenga Policy Officer, ASNSW (until May 2000)

Ms Marian Birrell Manager, Professional Standards & Conduct Unit, ASNSW (from May 2000)

Supt Louise Hennessy Dubbo Sector Manager, Macquarie, Mid & Far West, ASNSW

Mr Robert Burgess A/Manager, Policy & Planning Unit, ASNSW

Supt Dennis Willis Area Manager, Illawarra & South Eastern, ASNSW

S/O David O'Toole Illawarra and South Eastern Area, ASNSW (from May 2000)

A/O Ian Johns South Eastern & Central Sydney, ASNSW (from May 2000)

Ambulance Service Participation on Consultative Committees

The Ambulance Service is represented on numerous external committees due to inter-relationships that exist between the Service and organisations involved in health and emergency services. Of significant note during the year was the Service's involvement within many and various Olympic Games committees, including the Athlete/Spectator Care Committee and the SOCOG Medical Disaster Management Committee. The following committees illustrate the range of our involvement.

Airport Emergency Planning Committees

Cardio Vascular Expert Working Group

CBR Threats Work Group

Confederation of Australian Motor Sport (CAMS) Trackside Advisory Panel

Convention of Ambulance Authorities

District Emergency Management Operations Committees

District Emergency Management Rescue Sub-committees

Emergency Department Strategic Implementation Group

Hazmat Emergency Response Training Group

Hazardous Chemicals Advisory Committee

Health Aged Care & Allied Industries Committee

Health Services Disaster Advisory Committee

Health Services Supply Association Committee

Hospital Sector Management Committees

Inpatient Data User Advisory Committee

Integrated Bed Management Committee

Life Threatening Only (LTO) Management Committee

Local Area Health Service Critical Care Committees

Local Area Health Service Trauma Committees

Local Disaster Planning Committees

Local Emergency Management Operations Committees

Local Emergency Management Rescue Sub-committees

Local Occupational Health & Safety Committees

Media Services Functional Area Supporting Plan Standing Committee

Neonatal Emergency Transport Service (NETS) Committee

NSW Critical Care Committee

NSW Disaster Medical Planning Committee

NSW Emergency Services Staff Support Advisory Group

NSW Health Year 2000 Project Managers Forum

NSW Rural Critical Care Committees

NSW Trauma Systems Advisory Committee

Public Health Emergency Management Committee

Red Cross Disaster Response Training Group

Retrieval Committees

SOCOG Medical Disaster Management Committee

State Emergency Management Operations Committee

State Rescue Board

✦ Training & Advisory Panel

✦ Rescue Vehicle Audit Team

✦ Rescue Operator Assessment Team

✦ Vertical Rescue Sub-Committee

State Supply Service on Contract Management Committee

Sudden Infant Death Syndrome Advisory Committee

Yellow Book Editorial Committee

1999 / 2000 Financial Statements

Certification of Financial Statements

The attached financial statements of the Ambulance Service of New South Wales for the year ended 30 June 2000.

- (i) have been prepared in accordance with applicable Australian Accounting Standards and other authoritative pronouncements of the Australian Accounting Standards Board (or Public Sector Accounting Standards Board) and Urgent Issues Group Consensus Views, the requirements of the *Public Finance and Audit Act, 1983* and its regulations, the Accounts and Audit Determination, and the Accounting Manual for Health Services, District Health Services and Public Hospitals; and
- (ii) present fairly the financial position and transactions of the Ambulance Service of New South Wales; and
- (iii) have no circumstances which would render any particulars in the financial statements to be misleading or inaccurate.



Greg Rochford
Chief Executive



John Ducker
Chairman

Independent Audit Report



BOX 12 GPO
SYDNEY NSW 2001

INDEPENDENT AUDIT REPORT

AMBULANCE SERVICE OF NEW SOUTH WALES

To Members of the New South Wales Parliament and Members of the Board

Scope

I have audited the accounts of the Ambulance Service of New South Wales for the year ended 30 June 2000. The Board is responsible for the financial report consisting of the statement of financial position, operating statement, statement of cash flows and program statement - expenses and revenues, together with the notes thereto, and information contained therein. My responsibility is to express an opinion on the financial report to Members of the New South Wales Parliament and the Board based on my audit as required by sections 34 and 45F(1) of the *Public Finance and Audit Act 1983* and the *Charitable Fundraising Act 1991*. My responsibility does not extend here to an assessment of the assumptions used in formulating budget figures disclosed in the financial report.

My audit has been conducted in accordance with Australian Auditing Standards and statutory requirements to provide reasonable assurance whether the financial report is free of material misstatement. My procedures included examination, on a test basis, of evidence supporting the amounts and other disclosures in the financial report, and the evaluation of accounting policies and significant accounting estimates.

In addition, other legislative and policy requirements, which could have an impact on the Ambulance Service of New South Wales' financial report, have been reviewed on a cyclical basis. For this year, the requirements examined comprised compliance with:

- core business activities being in accordance with the *Ambulance Services Act 1990*; and
- the *Ambulance Services Act 1990* in respect of the Chief Executive Officer's contract.

These procedures have been undertaken to form an opinion whether, in all material respects, the financial report is presented fairly in accordance with the requirements of the Act, Accounting Standards and other mandatory professional reporting requirements, in Australia, so as to present a view which is consistent with my understanding of the Ambulance Service of New South Wales' financial position, the results of its operations and its cash flows.

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

Audit Opinion

In my opinion, the financial report of the Ambulance Service of New South Wales complies with section 45E of the Act and presents fairly in accordance with applicable Accounting Standards and other mandatory professional reporting requirements the financial position of the Service as at 30 June 2000 and the results of its operations and its cash flows for the year then ended.

Report in accordance with section 24 of the Charitable Fundraising Act 1991

I report that:

- i) the accounts of the Ambulance Service of New South Wales show a true and fair view of the financial result of fundraising appeals for the year ended 30 June 2000;
- ii) the accounts and associated records of the Ambulance Service of New South Wales have been properly kept during the year in accordance with the Act;
- iii) money received as a result of fundraising appeals conducted during the year has been properly accounted for and applied in accordance with the Act; and
- iv) there are reasonable grounds to believe that the Ambulance Service of New South Wales will be able to pay its debts as and when they fall due.



M T SPRIGGINS, CA
DIRECTOR OF AUDIT

(duly authorised by the Auditor-General of New South Wales
under section 45F(1A) of the Act)

SYDNEY
18 September 2000

	Notes	Actual 2000 \$000	Budget 2000 \$000	Actual 1999 \$000
Expenses				
Operating Expenses				
Employee Related	3	192,571	190,339	184,030
Other Operating Expenses	4	49,092	47,358	45,506
Maintenance	5	7,545	6,041	6,824
Depreciation	6	13,008	13,008	12,187
Grants and Subsidies	7	562	546	-
Finance Costs	8	319	324	274
Total Expenses		263,097	257,616	248,821
Retained Revenue				
Sale of Goods and Services	9	59,411	59,063	56,787
Investment Income	10	140	140	154
Grants and Contributions	11	714	277	781
Other Revenue	12	1,512	1,060	9,338
Total Revenues		61,777	60,540	67,060
Gain/(Loss) on Sale of Non-Current Assets	13	208	300	(1,910)
NET COST OF SERVICES		(201,112)	(196,776)	(183,671)
Add Government Contributions				
NSW Health Department Recurrent Allocations	2(a)	167,460	167,460	145,817
NSW Health Department Capital Allocations	2(a)	13,651	13,651	23,875
Acceptance by the Crown Entity of Superannuation Liability	2(c)	14,406	14,406	13,495
Asset Sale Proceeds transferred to the Crown Entity	2(s)	-	-	(14,749)
Total Government Contributions		195,517	195,517	168,438
MOVEMENT IN ACCUMULATED FUNDS		(5,595)	(1,259)	(15,233)

The accompanying notes form part of these Financial Statements

	Notes	Actual 2000 \$000	Budget 2000 \$000	Actual 1999 \$000
ASSETS				
Current Assets				
Cash	16	51	51	384
Investments	17	1,150	1,172	1,172
Receivables	18(a)	5,293	6,998	7,301
Inventories	19	1,410	1,442	1,626
Total Current Assets		7,904	9,663	10,483
Non-Current Assets				
Land and Buildings	20	94,223	96,713	97,420
Plant and Equipment	20	57,850	61,201	61,535
Receivables	18(a)	522	528	528
Total Non-Current Assets		152,595	158,442	159,483
Total Assets		160,499	168,105	169,966
LIABILITIES				
Current Liabilities				
Accounts Payable	22	8,673	13,114	13,729
Borrowings	23(a)	2,785	2,425	1,812
Employee Entitlements	24(a)	22,548	21,679	22,938
Total Current Liabilities		34,006	37,218	38,479
Non-Current Liabilities				
Borrowings	23(b)	1,372	1,387	3,199
Employee Entitlements	24(b)	30,065	30,108	27,637
Total Non-Current Liabilities		31,437	31,495	30,836
Total Liabilities		65,443	68,713	69,315
NET ASSETS		95,056	99,392	100,651
EQUITY				
Accumulated Funds	25	88,136	92,472	93,731
Asset Revaluation Reserve	25	6,920	6,920	6,920
TOTAL EQUITY		95,056	99,392	100,651

The accompanying notes form part of these Financial Statements

	Notes	Actual 2000 \$000	Budget 2000 \$000	Actual 1999 \$000
CASH FLOWS FROM OPERATING ACTIVITIES				
Payments				
Employee Related		(176,129)	(174,721)	(162,655)
Grants and Subsidies		(562)	(546)	-
Finance Costs		(319)	(324)	(274)
Other		(51,942)	(50,946)	(46,230)
Total Payments		(228,952)	(226,537)	(209,159)
Receipts				
Sale of Goods and Services		53,683	59,366	52,792
Grants and Contributions		714	277	781
Interest Received		140	140	154
Other		1,512	1,060	4,004
Total Receipts		56,049	60,843	57,731
Cash Flows From Government				
NSW Health Department Recurrent Allocations		167,460	167,460	145,817
NSW Health Department Capital Allocations		13,651	13,651	23,875
Asset Sale Proceeds transferred to the Crown Entity		-	-	(14,749)
Net Cash Flows from Government		181,111	181,111	154,943
NET CASH FLOWS FROM OPERATING ACTIVITIES	30	8,208	15,417	3,515
CASH FLOWS FROM INVESTING ACTIVITIES				
Purchases of Land and Buildings, Plant and Equipment		(11,483)	(16,992)	(21,334)
Proceeds from Sale Of Land and Buildings, Plant and Equipment		3,774	2,441	15,882
NET CASH FLOWS FROM INVESTING ACTIVITIES		(7,709)	(14,551)	(5,452)
CASH FLOWS FROM FINANCING ACTIVITIES				
Repayment of Borrowings		(1,827)	(1,812)	(3,033)
Proceeds from Borrowings		-	-	5,011
NET CASH FLOWS FROM FINANCING ACTIVITIES		(1,827)	(1,812)	1,978
NET INCREASE / (DECREASE) IN CASH		(1,328)	(946)	41
Opening Cash and Cash Equivalents		1,556	1,556	1,515
CLOSING CASH AND CASH EQUIVALENTS	29	228	610	1,556

The accompanying notes form part of these Financial Statements

AGENCY'S EXPENSES AND REVENUES	Program 2.1		Program 6.1		Grand Total	
	2000 \$000	1999 \$000	2000 \$000	1999 \$000	2000 \$000	1999 \$000
Expenses						
Operating Expenses						
Employee Related	190,194	181,319	2,377	2,711	192,571	184,030
Other Operating Expenses	48,157	44,500	935	1,006	49,092	45,506
Maintenance	7,453	6,727	92	97	7,545	6,824
Depreciation	12,921	12,150	87	37	13,008	12,187
Grants and Subsidies	562	-	-	-	562	-
Finance Costs	319	274	-	-	319	274
Total Expenses	259,606	244,970	3,491	3,851	263,097	248,821
Revenue						
Sale of Goods and Services	59,228	56,635	183	152	59,411	56,787
Investment Income	140	154	-	-	140	154
Grants and Contributions	714	781	-	-	714	781
Other Revenue	1,512	9,338	-	-	1,512	9,338
Total Revenue	61,594	66,908	183	152	61,777	67,060
Gain/(Loss) on Sale of Non-Current Assets	242	(1,910)	(34)	-	208	(1,910)
NET COST OF SERVICES	(197,770)	(179,972)	(3,342)	(3,699)	(201,112)	(183,671)

The name and purpose of each program is summarised in Note 15.

1. The Ambulance Service of New South Wales

The Ambulance Service comprises all of the operating activities of the Service's facilities and the workshops under its control. It also encompasses the Special Projects funds, which while containing assets which are restricted for specified uses by the grantor or the donor, are nevertheless controlled by the Ambulance Service.

2. Summary of Significant Accounting Policies

The Ambulance Service's Financial Statements are a general purpose financial report which has been prepared on an accruals basis and in accordance with applicable Australian Accounting Standards and other mandatory professional reporting requirements, the requirements of the Public Finance and Audit Act 1983 and its Regulations, the Financial Reporting Directions published in the Financial Reporting Code for Budget Dependent Agencies or issued by the Treasurer under section 9(2)(n) of the Act and the requirements of the Ambulance Services Act 1990 and its Regulations.

Where there are inconsistencies between the above requirements, the legislative provisions have prevailed.

Statements of Accounting Concepts are used as guidance in the absence of applicable Accounting Standards, other mandatory professional requirements and legislative requirements.

Except for certain investments and land and buildings, plant and equipment, which are recorded at valuation, the financial statements are prepared in accordance with the historical cost convention. All amounts are rounded to the nearest one thousand dollars and are expressed in Australian currency.

Other significant accounting policies used in the preparation of these Financial Statements are as follows:

(a) NSW Health Department Recurrent Allocations

Payments are made by the NSW Health Department on the basis of the net allocation for the Ambulance Service as adjusted for approved supplementations mostly for salary agreements and approved enhancement projects. This allocation is included in the Operating Statement before arriving at the operating result on the basis that the allocation is earned in return for the ambulance services provided in 1999/2000 on behalf of the Department.

(b) Employee Entitlements

Wages and Salaries, Annual Leave, Long Service Leave, Sick Leave and On-Costs.

Liabilities for wages and salaries, annual leave, vesting sick leave and related on-costs are recognised and measured as the amount unpaid at the reporting date at current pay rates in respect of employees' services up to that date.

Long service leave measurement is based on the remuneration rates at year end for all employees with five or more years of service. It is considered that this measurement technique produces results not materially different from the estimate determined by using the present value basis of measurement.

Employee leave entitlements are dissected between "Current" and "Non-Current" components on the basis of anticipated payments for the next twelve months. This in turn is based on past trends and known resignations and retirements.

Unused non-vesting sick leave does not give rise to a liability as it is not considered probable that sick leave taken in the future will be greater than the entitlements accrued in the future.

The outstanding amounts of workers' compensation insurance premiums which are consequential to employment are recognised as liabilities and expenses where the employee entitlements to which they relate have been recognised.

(c) Superannuation

The Ambulance Service's liability for superannuation is assumed by the Crown Entity. The Ambulance Service accounts for the liability as having been extinguished resulting in the amount assumed being shown as part of the non-monetary revenue item described as "Acceptance by the Crown Entity of Superannuation Liability".

The superannuation expense for the financial year is determined by using the formulae specified by the NSW Health Department. The expense for certain superannuation schemes (i.e., Basic Benefit and First State Super) is calculated as a percentage of the employees' salary. For other superannuation schemes (i.e., State Superannuation Scheme and State Authorities Superannuation Scheme), the expense is calculated as a multiple of the employees' superannuation contributions.

(d) Insurance

The Ambulance Service's insurance activities are conducted through the NSW Treasury Managed Fund Scheme of self insurance for Government agencies. The expense (premium) is determined by the Fund Manager based on past experience.

(e) Revenue Recognition

Revenue arising from the sale of goods, the provision of services and the use of the Ambulance Service's assets is recognised when:

- i) the Ambulance Service has passed control of the goods or other assets to the buyer;
- ii) the Ambulance Service controls the right to be compensated for services rendered;
- iii) the Ambulance Service controls a right relating to the consideration payable for the provision of investment assets;
- iv) it is probable that the economic benefits comprising the consideration will flow to the entity; and
- v) the amount of the revenue can be measured reliably.

(f) Use of Outside facilities

The Ambulance Service uses a number of facilities owned and maintained by the local authorities in the Areas to deliver community health services for which no charges are raised by the authorities.

The Ambulance Service does not estimate the value of the services provided and reflect this figure in the financial statements because the financial value of such services is not considered to be material.

(g) Acquisition of Assets

The cost method of accounting is used for the initial recording of all acquisitions of assets controlled by the agency. Cost is determined as the fair value of the assets given as consideration plus the costs incidental to the acquisition.

Assets acquired at no cost, or for nominal consideration, are initially recognised as assets and revenues at their fair value at the date of acquisition.

Fair value means the amount for which an asset could be charged between a knowledgeable, willing buyer and a knowledgeable, willing seller in an arm's length transaction.

Land and Buildings which are owned by the Health Administration Corporation or the State and administered by the Ambulance Service are deemed to be owned by the Ambulance Service and are reflected as such in the financial statements.

(h) Plant and Equipment

Individual items of plant and equipment costing \$5,000 and above are capitalised. Donated physical assets are capitalised and brought into account at fair market value if such value is \$5,000 or more.

(i) Depreciation

Depreciation is provided for on a straight line basis for all depreciable assets so as to write-off the depreciable amount of each asset as it is consumed over its useful life to the Ambulance Service. Land is not a depreciable asset. Non-ambulance vehicles are not depreciated as their sales value approximates their purchase cost.

Details of depreciation rates for major asset categories are as follows:

Buildings	2.50%	Plant and Machinery	10.00%
Computer Equipment	20.00%	Ambulance Vehicles	11.75%
Computer Software	20.00%	Trucks and Vans	20.00%
Office Equipment	10.00%	Aircraft	5.00%

(j) Revaluation of Physical Non-Current Assets

Buildings and improvements, plant and equipment and infrastructure assets (excluding land) are valued based on the estimated written down replacement cost of the most appropriate modern equivalent replacement facility having a similar service potential to the existing asset. Land is valued on an existing use basis.

Land and buildings are revalued every five years by independent valuation. The last such valuation was completed with an effective date of 31 December 1997.

Where assets are revalued upward or downward as a result of a revaluation of a class of non-current physical assets, the Ambulance Service restates separately the gross amount and the related accumulated depreciation of that class of assets.

The recoverable amount test has not been applied as the Ambulance Service is a not-for-profit entity whose potential is not related to the ability to generate net cash inflows.

(k) Leased Assets

The Ambulance Service has entered into a number of operating lease agreements for buildings and motor vehicles where the lessors effectively retain all the risks and benefits incidental to ownership of the items held under the operating lease. Equal instalments of the lease payments are charged to the Operating Statement over the lease term as this is representative of the pattern of benefits to be derived from the leased property.

(l) Patient Fees

Patient transport fees are derived from inter-hospital transports, chargeable patients and patient insurers or employers, on the basis of rates specified by the NSW Health Department from time to time. Under Government policy and statutory determination, persons transported by the Ambulance Service are exempt from charge if they are in receipt of a Pension Card, Pensioner Health Benefit Card or other Health Care Card or have basic hospital coverage with a registered Health Insurance Fund, contribute to the State Ambulance Insurance Plan or are interstate Ambulance Fund members. Patients are invoiced at the time of transport unless they advise their exempt status. Any debt is written back if the patient subsequently advises their exempt status.

(m) Use of Ambulance facilities

Fees are charged for ambulance facilities provided for fixtures and sporting events at rates determined by the Ambulance Service of New South Wales.

(n) Research and Development costs

Research and development costs are charged to expense in the year in which they are incurred.

(o) Investments

Marketable securities and deposits are valued at cost unless specifically stated otherwise in Note 17. Non-marketable securities are brought to account at cost.

Interest revenues are recognised as they accrue.

(p) Inventories

Inventories are stated at the lower of cost and net realisable value. Costs are assigned to individual items of stock mainly on the basis of weighted average costs. Obsolete items are disposed of in accordance with instructions issued by the NSW Health Department.

(q) Change in Accounting Policy

There have been no changes in accounting policy during this financial year.

(r) Financial Instruments

Financial instruments give rise to positions that are a financial asset of either the Ambulance Service or its counterparty and a financial liability (or an equity instrument) of the other party. For the Ambulance Service these include cash at bank, receivables, investments, accounts payables and borrowings.

In accordance with Australian Accounting Standard AAS33, "Presentation and Disclosure of Financial Instruments", information is disclosed in Note 35 in respect of the credit risk and interest rate risk of financial instruments. All such amounts are carried in the accounts at net fair value. The specific accounting policy in respect of each class of such financial instrument is stated hereunder.

Classes of instruments recorded at cost and their terms and conditions at balance date are as follows:

Cash

Accounting Policies: Cash is carried at nominal values reconcilable to monies on hand and independent bank statements.

Terms and conditions: Monies on deposit attract an effective interest rate of approximately 4.05% as compared to 3.85% in the previous year.

Receivables

Accounting Policies: Receivables are carried at nominal amounts due less any provision for doubtful debts. A provision for doubtful debts is recognised when collection of the full nominal amount is no longer probable.

Terms and conditions: Accounts are issued on 21 day terms.

Investments

Accounting Policies: Investments reported at cost include both short term and fixed term deposits. Interest is recognised in the Operating Statement when earned.

Terms and conditions: Short term deposits have an average maturity of 4 days (4 days in 1998/99) and an effective interest rate of 5.04% as compared to 4.65% in the previous year. Fixed term deposits have an average maturity of 104 days (100 days in 1998/99) and effective interest rates of 5.14% to 5.15% as compared to 4.65% in the previous year.

Accounts Payable

Accounting Policies: Accounts Payable are recognised for amounts to be paid in the future for goods and services received, whether or not billed to the Ambulance Service.

Terms and conditions: Trade liabilities are settled within any terms specified. If no terms are specified, payment is made by the end of the month following the month in which the invoice is received.

Borrowings

Accounting Policies: Loans are carried at the principal amount. Interest (if applicable) is charged as an expense as it accrues.

Terms and conditions: Non interest bearing loans of \$635,750 are repayable in a gross monthly instalment of \$17,667 with the final instalment due in June 2003. Interest bearing loans of \$2,547,977 are repayable in a gross monthly instalment of \$133,333 with interest charged at 7.75%, the same rate charged in the previous year.

There are no classes of instruments which are recorded at other than cost or market valuation.

All financial instruments including revenue, expenses and other cash flows arising from instruments are recognised on an accruals basis.

(s) Proceeds on Sale of Motor Vehicles

The 1998/99 proceeds of sale of motor vehicles associated with Treasury negotiated leases of motor vehicles have been lodged to the credit of State Treasury. Such remittances have been deducted from Government Contributions in the Operating Statement.

(t) Goods and Services Tax (GST)

Commitments existing at 30 June 2000 are reported inclusive of the GST of 10% which had effect from 1 July 2000.

Additionally, contingent assets have been disclosed for amounts equivalent to any available input tax credits, which represents the GST that is expected to be recoverable from the Australian Taxation Office.

	Actual 2000 \$000	Actual 1999 \$000
3. Employee Related Expenses		
Employee related expenses comprise the following:		
Salaries and Wages	147,587	138,672
Long Service Leave {see Note 2(b)}	4,387	7,026
Annual Leave {see Note 2(b)}	14,454	12,875
Sick Leave {see Note 24}	3	25
Redundancies	323	303
Workers' Compensation Insurance	11,411	11,634
Superannuation {see Note 2(c)}	14,406	13,495
Fringe Benefits Tax	-	-
	<u>192,571</u>	<u>184,030</u>
4. Other Operating Expenses		
Cleaning and Laundry	782	805
Fuel, Light and Power	773	814
General Expenses	20,048	17,340
Insurance	2,318	2,257
Medical Supplies	4,764	4,203
Postal and Telephone Costs	3,431	2,980
Printing and Stationery	496	598
Rental Rates and Charges	887	838
Staff Related Costs	115	253
Aeromedical	15,049	14,691
Travel Related Costs	429	727
	<u>49,092</u>	<u>45,506</u>
(a) General Expenses include:		
Catering Costs	327	279
Contractors	1,142	1,286
Consultancies - Operating Activities	159	224
Debt Collection	501	324
External Audit Fees	79	80
Fuel and Oil	4,348	3,812
Internal Audit Fees	88	28
Legal Expenses	121	122
Officers' Uniforms	1,085	1,317
Operating Lease Expenses	3,329	2,267
Provision for Bad and Doubtful Debts	734	(1)
Provision for Write Backs	1,043	(105)
Rates	285	254
Relocation Costs	703	962
Vehicle Registrations	554	543
Waste Disposal	165	184
Fees/Other benefits paid to Board Members excluding payments made in the nature of normal employee salary.	31	54

	Actual 2000 \$000	Actual 1999 \$000
5. Maintenance		
Replacements and Additional Equipment less than \$5,000	1,426	1,291
Renovations and Additional Works	2,221	-
Repairs & Routine Maintenance	3,898	5,533
	<u>7,545</u>	<u>6,824</u>
6. Depreciation Expense		
Depreciation - Buildings	3,922	3,787
Depreciation - Motor Vehicles and Aircraft	5,674	5,859
Depreciation - Plant and Equipment	3,412	2,541
	<u>13,008</u>	<u>12,187</u>
7. Grants and Subsidies		
Non-Government Organisations	562	-
	<u>562</u>	<u>-</u>
8. Finance Costs		
Interest	319	274
	<u>319</u>	<u>274</u>
9. Sale of Goods and Services		
Patient Transport Fees	57,500	54,850
Use of Ambulance Facilities	1,911	1,937
	<u>59,411</u>	<u>56,787</u>
10. Investment Income		
Interest Revenue	140	154
	<u>140</u>	<u>154</u>
11. Grants and Contributions		
Contributions	714	781
	<u>714</u>	<u>781</u>
12. Other Revenue		
Other Revenue comprise the following:-		
Sundry Revenue	460	8,289
Subpoena/FOI	380	323
Rent	486	454
Bad Debts Recovered	186	272
	<u>1,512</u>	<u>9,338</u>

	Actual 2000 \$000	Actual 1999 \$000
13. Gain/(Loss) on Sale of Non-Current Assets		
Land and Buildings	786	3,400
Other Assets	2,272	25,933
Less Accumulated Depreciation	(1,825)	(8,603)
Written Down Value	<u>1,233</u>	<u>20,730</u>
Less Proceeds from Sale	1,441	18,820
Gain/(Loss) on Sale of Non-Current Assets	<u>208</u>	<u>(1,910)</u>

14. Conditions on Contributions

	Purchase of Assets \$000	Health Promotion, Education & Research \$000	Other \$000	Total \$000
Contributions recognised as revenues during current year for which expenditure in manner specified had not occurred as at balance date.	23	-	172	195
Aggregate of Contributions recognised as revenues during the financial year which were specifically provided for expenditure over a future period.	-	-	-	-
Revenues recognised in previous years which were obtained for expenditure in the current financial year.	11	-	-	11
Total amount of unexpended Contributions as at Balance Date.	<u>34</u>	<u>-</u>	<u>172</u>	<u>206</u>

(Comment on restricted assets appears in Note 21)

15. Programs/Activities of the Agency**Program 2.1**

Objective:

- Emergency Services

To reduce the risk of premature death and disability for people suffering injury or acute illness by providing timely emergency diagnostic, treatment and transport services.

Program 6.1

Objective:

- Teaching and Research

To develop the skills and knowledge of the health workforce to support patient care and population health. To extend knowledge through scientific enquiry and applied research aimed at improving the health and well being of the people of New South Wales.

	Actual 2000 \$000	Actual 1999 \$000
16. Current Assets - Cash		
Cash at Bank	-	329
Cash on Hand	51	55
	<u>51</u>	<u>384</u>
17. Investments		
<p>The investments are held as cash deposits which would suffer no capital losses if they are redeemed before maturity. The need does not therefore arise to restate them at net market selling values. Valuations of all investments are at cost. The cash deposits represent contributions received by the Ambulance Service from third parties related to special projects.</p>		
Cash Deposits	<u>1,150</u>	<u>1,172</u>
18. Receivables		
Current		
(a) Sale of Goods and Services		
Patient Transport Fees	9,014	6,569
Less Provision for Doubtful Debts	(6,204)	(4,427)
	<u>2,810</u>	<u>2,142</u>
Prepayments	214	176
Other	267	648
NSW Health Department (asset sale proceeds)	2,002	4,335
	<u>5,293</u>	<u>7,301</u>
Non-Current		
Prepayments	<u>522</u>	<u>528</u>
(b) Bad debts written off during the year	<u>4,327</u>	<u>4,389</u>
19. Current Assets - Inventories, at Cost		
Uniform	254	248
Medical Supplies and Equipment	312	604
Fuel and Oil	387	396
Motor Vehicle Parts and Other	457	378
	<u>1,410</u>	<u>1,626</u>

20. Property, Plant and Equipment

	Land	Buildings	Capital Works In Progress	Plant and Equipment	Vehicles and Aircraft	Total
	\$000	\$000	\$000	\$000	\$000	\$000
Balance 1 July 1999						
At valuation Dec '97	30,810	126,918	-	-	-	157,728
At cost	407	8,620	15,433	27,441	71,951	123,852
Revaluation adjustment	-	-	-	-	-	-
Asset adjusted on disposal	-	-	-	-	-	-
Adj. re. asset written off	-	-	-	-	-	-
Capital Expenditure/ Donations {see note 2(h)}	-	-	7,359	-	-	7,359
Reclassifications	-	1,186	(16,042)	13,187	1,669	-
Disposals	(173)	(613)	-	-	(2,272)	(3,058)
Closing Balance						
At valuation Dec '97	30,637	126,305	-	-	-	156,942
At cost	407	9,806	6,750	40,628	71,348	128,939
TOTAL	31,044	136,111	6,750	40,628	71,348	285,881
Depreciation						
Balance 1 July 1999						
At valuation Dec '97	-	69,281	-	-	-	69,281
At cost	-	54	-	13,747	39,543	53,344
Charge for the year {see note 2(i)}	-	3,922	-	3,412	5,674	13,008
Asset adjusted on disposal	-	-	-	-	-	-
Adj. re. asset written off	-	-	-	-	-	-
Adjustment for disposals	-	(325)	-	-	(1,500)	(1,825)
Revaluation adjustment	-	-	-	-	-	-
Closing Balance						
At valuation Dec '97	-	72,632	-	-	-	72,632
At cost	-	300	-	17,159	43,717	61,176
TOTAL	-	72,932	-	17,159	43,717	133,808
Carrying Amount	31,044	63,179	6,750	23,469	27,631	152,073

(i) Land and buildings include land owned by the NSW Health Department and administered by the Ambulance Service of NSW [See Note 2(f)].

(ii) Land and buildings were valued by the State Valuation Office on 31 December 1997 [See Note 2(j)].

(iii) Plant and equipment other than motor vehicles were valued by the Ambulance Service as at 30 June 2000 on the basis of depreciated cost.

(iv) The cost of physical non current assets that are fully depreciated and the Service still derives service potential and economic benefit include:

	\$000	Quantity
Ambulance Vehicles	18,449	307
Computer Equipment	3,560	11
Plant and Equipment	1,409	106

	Actual 2000 \$000	Actual 1999 \$000
21. Restricted Assets		
The Ambulance Service's financial statements include assets which are restricted by externally imposed conditions, eg. donor requirements. The assets are only available for application in accordance with the terms of the donor restrictions. Funds are to be spent on activities and equipment.	206	271
Category	Brief details of externally imposed conditions	
Activities	16	7
Equipment	190	264
	<u>206</u>	<u>271</u>
22. Accounts Payable		
Trade Creditors	6,590	7,391
Capital Works Creditors	2,049	6,174
Other Creditors	34	164
	<u>8,673</u>	<u>13,729</u>
23. Borrowings		
(a) Current		
Dept. Loan Against Recurrent Allocation	1,812	1,812
Bank Overdraft	973	-
	<u>2,785</u>	<u>1,812</u>
(b) Non-Current		
Dept. Loan Against Recurrent Allocation	<u>1,372</u>	<u>3,199</u>
The loans are payable to the Health Department and include amounts totalling to \$2,547,977 upon which interest is payable.		
Repayment of Borrowings		
Not later than one year	2,785	1,812
Between one and four years	1,372	3,199
	<u>4,157</u>	<u>5,011</u>
24. Current/Non-Current Employee Entitlements		
(a) Current		
Employee Annual Leave	14,636	14,509
Employee Long Service Leave	2,833	3,053
Accrued Salaries and Wages	4,388	3,037
Taxation and Other Payroll Deductions	691	2,339
	<u>22,548</u>	<u>22,938</u>
(b) Non-Current		
Employee Long Service Leave	29,920	27,476
Sick Leave	145	161
	<u>30,065</u>	<u>27,637</u>

25. Equity	Accumulated Funds		Asset Revaluation		Total Equity	
	2000 \$000	1999 \$000	2000 \$000	1999 \$000	2000 \$000	1999 \$000
Balance at beginning of financial year	93,731	108,964	6,920	7,495	100,651	116,459
Movement in accumulated funds	(5,595)	(15,233)	-	-	(5,595)	(15,233)
Increment/Decrement on revaluation of:						
Land	-	-	-	-	-	-
Buildings	-	-	-	(575)	-	(575)
Total	88,136	93,731	6,920	6,920	95,056	100,651

26. Commitments for Expenditure	2000 \$000	1999 \$000
(a) Capital Commitments		
Aggregate capital expenditure contracted for at balance date but not provided for in the accounts:		
Not later than one year	3,468	2,217
Total Capital Expenditure Commitment (including GST)	3,468	2,217

Of the commitments reported at 30 June 2000 it is expected that none will be met from locally generated funds.

(b) Other Expenditure Commitments

Aggregate other expenditure contracted for at balance date but not provided for in the accounts:

Not later than one year	542	743
Total Other Expenditure Commitments (including GST)	542	743

(c) Operating Lease Commitments

Commitments in relation to non cancellable operating leases are payable as follows:

Not later than one year	4,395	3,630
Between one and two years	4,161	3,526
Between two and five years	11,754	10,100
Later than five years	12,769	14,091
Total Operating Lease Commitments (including GST)	33,079	31,347

These operating leases are not recognised in the financial statements as liabilities.

(d) Contingent Asset related to Commitments for Expenditure

The total "Commitments" above includes input tax credits regarding GST of \$3.372M that are expected to be recoverable from the Australian Taxation Office.

27. Contingent Liabilities

(a) Claims on Managed Funds

Since 1 July 1989, the Ambulance Service has been a member of the NSW Treasury Managed Fund. The Fund will pay to or on behalf of the Ambulance Service all sums which it shall become legally liable to pay by way of compensation or legal liability if sued except for employment related discrimination and harassment claims that do not have statewide implication. The costs relating to such exceptions are to be absorbed by the Ambulance Service. As such, since 1 July 1989, apart from the exceptions noted above, no contingent liabilities exist in respect of liability claims against the Ambulance Service. A Solvency Fund (now called Pre-Managed Fund Reserve) was established to deal with the insurance matters incurred before 1 July 1989 that were above the limit of insurance held or for matters that were incurred prior to 1 July 1989 that would have become verdicts against the State. That Solvency Fund will likewise respond to all claims, prior to 1 July 1989, against the Ambulance Service.

(b) Workers' Compensation Hindsight Adjustment

When the New Start (to the) Treasury Managed Fund was introduced in 1995/96 hindsight adjustments in respect of Workers' Compensation (three years from commencement of the Fund Year) and Motor Vehicle (eighteen months from commencement of the Fund Year) became operative.

The hindsight adjustment has now been effected for the 1996/97 year and has resulted in a decrease in expenses of \$493,085.

A contingent liability/asset may now exist in respect of the 1997/98, 1998/99 and 1999/2000 Workers' Compensation Fund years. The Treasury Managed Fund provides estimates as at 30 June each year and the latest available, viz those advised as at 30 June 1999 estimate that an asset of \$1,364,234 is applicable as detailed below:

1997/98 Asset \$1,357,795 to be paid in 1999/00
1998/99 Asset \$6,439 to be received in 2000/01

This estimate is subject to further actuarial calculation and a better indication of quantum will not be available until the last quarter of 2000.

(c) Fringe Benefits Tax

The Ambulance Service reported in the previous financial year that significant uncertainty existed as to the quantum of the financial liability that the Ambulance Service might incur concerning the Fringe Benefits Tax. The uncertainty involves the question of whether the Ambulance Service has the status of a Public Benevolent Institution and the matter is still before the courts.

28. Charitable Fundraising Activities

The Ambulance Service of NSW did not conduct any direct fundraising activities during 1999/2000.

29. Cash and Cash Equivalents

For the purposes of the Statement of Cash Flows, cash includes Cash and Investments.

Cash at the end of the financial year as shown in the Statement of Cash Flows is reconciled to the related items in the Statement of Financial Position as follows:	2000	1999
	\$000	\$000
Cash on Hand	51	55
Cash at Bank/Bank Overdraft	(973)	329
Current Investment	1,150	1,172
	<hr/>	<hr/>
Closing Cash and Cash Equivalents (per Statement of Cash Flows)	228	1,556
	<hr/>	<hr/>

30. Reconciliation of Net Cost of Services to Net Cash Flows from Operating Activities

Net Cost of Services	(201,112)	(183,671)
	<hr/>	<hr/>
Adjustment for Items not involving Cash and Government Payments:		
(Gain)/Loss on Sale of Non-Current Assets	(208)	1,910
Depreciation	13,008	12,187
Provision for Employee Entitlements	2,038	7,880
Provision for Bad and Doubtful Debts	5,060	4,388
NSW Health Department Recurrent Allocations	167,460	145,817
NSW Health Department Capital Allocations	13,651	23,875
Asset Sale Proceeds transferred to the Crown Entity	-	(14,749)
Other revenue - Rozelle site	-	(5,334)
Acceptance by the Crown Entity of Superannuation Liability	14,406	13,495
(Increase)/Decrease in Prepayments	349	(1,067)
(Increase)/Decrease in Receivables	(5,728)	(4,100)
(Increase)/Decrease in Inventories	216	(147)
Increase/(Decrease) in Creditors	(932)	3,031
	<hr/>	<hr/>
Net Cash Flows From Operating Activities	8,208	3,515
	<hr/>	<hr/>

31. 1999/2000 Voluntary Services

It is considered impractical to quantify the monetary value of voluntary services provided to the Ambulance Service.

32. Unclaimed Monies

Unclaimed salaries and wages are paid to the credit of the Department of Industrial Relations and Employment in accordance with the provisions of the Industrial Arbitration Act, 1940, as amended.

All money and personal effects of patients which are left in the custody of the Ambulance Service by any patient who is transported or who dies while being transported and which are not claimed by the person lawfully entitled thereto within a period of twelve months are recognised as the property of the Ambulance Service.

33. Budget Review

Net Cost of Services

Net cost of services was higher than budget by \$4.34M due to increased employee related, goods and services and maintenance expenditure partially offset by increases in revenue.

Movement in Accumulated Funds

The movement in accumulated funds for the year was higher than budget by \$4.34M due to increased employee related, goods and services and maintenance expenditure.

Assets and Liabilities

Current Assets was lower than budget by \$1.76M due to receipt of the capital subsidy due from the NSW Health Department at the end of the previous financial year.

Non-Current Assets was lower than budget by \$5.85M due to significant delays in the capital expenditure program.

Current Liabilities was lower than budget by \$3.21M due to a decrease in employee entitlements partially offset by payment of capital creditors owing at the beginning of the year.

Non-Current Liabilities was less than budget by \$0.06M.

Cash Flows

Net cash flows from operating activities was less than budget by \$7.21M due to Net Cost of Services increase and net increases in provisions for employee entitlements.

Net cash flows from investing activities was \$6.84M above budget due to delays and reductions in the capital program.

34. Post Balance Date Events

a) Awards

A new Award has been negotiated with the Australian Services Union (Admin. & Clerical) and is awaiting ratification. The Award makes provision for the following salary increases:

2% effective from 1 January 2000

2% effective from 1 January 2001

The new Award will provide for an overall increase of 16% in member salary rates over the next four and a half years which is in line with other award negotiations.

b) GST

The Ambulance Service has implemented an updated version of its computerised general ledger system and reconfigured its business procedures to ensure that the introduction of the GST will pose no problems to the organisation.

32. Financial Instruments

(a) Interest Rate Risk

Interest rate risk is the risk that the value of the financial instrument will fluctuate due to changes in market interest rates. The Ambulance Service's exposure to interest rate risks and the effective interest rates of financial assets and liabilities, both recognised and unrecognised, at the Statement of Financial Position date are as follows:

Financial Instruments	Floating interest rate		Fixed interest rate maturing in:				Non-interest bearing		Total carrying amount as per the Statement of Financial Position		Weighted average effective interest rate*	
	2000 \$000	1999 \$000	1 year or less	Over 1 to 5 years	More than 5 years	2000 \$000	1999 \$000	2000 \$000	1999 \$000	2000 %	1999 %	
Financial Assets												
Cash	-	329	-	-	-	51	55	51	384	4.05	3.85	
Receivables	-	-	-	-	-	5,815	7,301	5,815	7,301	N/A	N/A	
Investments	-	-	1,150	1,172	-	-	-	1,150	1,172	5.09	4.65	
Total Financial Assets	-	329	1,150	1,172	-	5,866	7,356	7,016	8,857			
Borrowings - Other	973	-	1,600	1,600	948	636	848	4,157	5,011	7.75	7.75	
Accounts Payable	-	-	-	-	-	8,673	13,729	8,673	13,729	N/A	N/A	
Employee Entitlements	-	-	-	-	-	47,534	45,199	47,534	45,199	N/A	N/A	
Total Financial Liabilities	973	-	1,600	1,600	948	56,843	59,776	60,364	63,939			

* Weighted average effective interest rate was computed on a semi-annual basis. It is not applicable for non-interest bearing financial instruments.

b) Credit Risk

Credit risk is the risk of financial loss arising from another party to a contract or financial position failing to discharge a financial obligation thereunder. The Ambulance Service's maximum exposure to credit risk is represented by the carrying amounts of the financial assets included in the consolidated Statement of Financial Position.

Credit Risk by classification of counterparty.

	Governments		Banks		Patients		Other		Total	
	2000 \$000	1999 \$000	2000 \$000	1999 \$000	2000 \$000	1999 \$000	2000 \$000	1999 \$000	2000 \$000	1999 \$000
Financial Assets										
Cash	51	55	-	329	-	-	-	-	51	384
Receivables	2,002	4,335	-	-	2,810	2,142	1,004	824	5,816	7,301
Other Loans and Deposits	-	-	1,150	1,172	-	-	-	-	1,150	1,172
Total Financial Assets	2,053	4,390	1,150	1,501	2,810	2,142	1,004	824	7,017	8,857

There is no significant concentration of credit risk.

c) Net Fair Value

As stated in Note 2(r) all financial instruments are carried at Net Fair Value, the values of which are reported in the Statement of Financial Position.

d) Derivative Financial Instruments

The Ambulance Service holds no Derivative Financial Instruments.

END OF AUDITED FINANCIAL STATEMENTS

Contact Details

State Headquarters

Balmain Road
Rozelle NSW 2039
Postal Address: PO Box 105,
Rozelle NSW 2039
Telephone: (02) 9320 7777
Facsimile: (02) 9320 7800
8:30am to 5:00pm - Monday to Friday

North Sydney and Central Coast Area

60 Isis Street
Wahroonga NSW 2076
Telephone: (02) 9487 8056
Facsimile: (02) 9487 8051
9:00am to 5:00pm - Monday to Friday

South Eastern and Central Sydney Area

Emergency Services Centre
Level 1 / 5-9 Butler Road
Hurstville NSW 2220
Telephone: (02) 9580 3106
Facsimile: (02) 9580 3090
8:00am to 4:30pm - Monday to Friday

Wentworth, Western and South Western Sydney Area

153-155 Railway Street
Parramatta West NSW 2150
Telephone: (02) 9891 9227
Facsimile: (02) 9893 9646
8:00am to 5:00pm - Monday to Friday

Northern Rivers and New England Area

212-220 Keen Street
Lismore NSW 2480
Postal Address: PO Box 978,
Lismore NSW 2480
Telephone: (02) 6621 9911
Facsimile: (02) 6622 7967
8:30am to 5:00pm - Monday to Friday

Hunter and Mid North Coast Area

75 Denison Street
Hamilton NSW 2303
Postal Address: PO Box 17,
Hamilton NSW 2303
Telephone: (02) 4921 7500
Facsimile: (02) 4961 4549
8:30am to 5:00pm - Monday to Friday

Illawarra and South Eastern Area

18 Clifford Street
Goulburn NSW 2580
Postal Address: Locked Mail Bag 13,
Goulburn NSW 2580
Telephone: (02) 4827 0444
Facsimile: (02) 4827 0463
8:00am to 5:00pm - Monday to Friday

Greater Murray Area

54 Johnston Street
Wagga Wagga NSW 2650
Telephone: (02) 6921 7162
Facsimile: (02) 6921 9447
8:30am to 5:00pm - Monday to Friday

Macquarie, Mid and Far West Area

62 Windsor Parade
Dubbo NSW 2830
Postal Address: PO Box 15,
Dubbo NSW 2830
Telephone: (02) 6883 4333
Facsimile: (02) 6883 4363
8:30am to 5:00pm - Monday to Friday

Air Ambulance Service of New South Wales

Cnr Ross Smith Avenue and Eleventh Street
Mascot NSW 2020
Postal Address: PO Box 878
Mascot NSW 1460
Telephone: (02) 9317 4024
Facsimile: (02) 9667 1631
8:30am to 5:00pm - Monday to Friday

Ambulance Medical Retrieval Unit

Level 1, St George Hospital
Burt Nielsen Wing
Gray Street
Kogarah NSW 2217
Telephone: (02) 9553 2222
Facsimile: (02) 9553 4598
24 hours - 7 days a week

Ambulance Education Centre

Balmain Road
Rozelle NSW 2039
Postal Address: PO Box 105,
Rozelle NSW 2039
Telephone: (02) 9320 7777
Facsimile: (02) 9320 7809
8:30pm to 5:00pm - Monday to Friday

Sydney Operations Centre

Sydney Ambulance Centre
Australian Technology Park
Eveleigh NSW 1430
Postal Address: PO Box 530,
Alexandria NSW 1435
Telephone: (02) 8396 5111
Facsimile: (02) 8396 5147
24 hours - 7 days a week

Northern Operations Centre

1A Dudley Road
Charlestown NSW 2290
Postal Address: PO Box 544,
Charlestown NSW 2290
Telephone: (02) 4947 5441
Facsimile: (02) 4962 2874
24 hours - 7 days a week

Western Operations Centre

62 Windsor Parade
Dubbo NSW 2830
Postal Address: PO Box 15,
Dubbo NSW 2830
Telephone: (02) 6883 4341
Facsimile: (02) 6882 0305
24 hours - 7 days a week

Southern Operations Centre

10 Captain Cook Drive
Barrack Heights NSW 2528
Telephone: (02) 4297 9270
Facsimile: (02) 4297 9248
24 hours - 7 days a week

IN AN EMERGENCY:

Dial 000
Statewide - 24 hours - 7 days a week

AMBULANCE BOOKINGS:

Dial 13 1233
Statewide - 24 hours - 7 days a week

Annual Report Production

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Our History

1881 The Board of Health established a service to transport infectious disease cases to isolation wards.

1887 The Army Medical Corps gave a public demonstration of first-aid and as a result a proposal was made to form the first Sydney based civilian ambulance brigade which attended major sporting events only. The brigade's motto was "For Love and Life".

Despite this, the Army still had to bear the brunt of dealing with most casualties and, following an accident at a military review where a person fractured their leg and required treatment and transport, it became apparent that a full-time civilian ambulance service was needed.

1894 The Redfern Bicycle Club had the first bicycle ambulance and as one report stated "it could reach the scene with dazzling speed". A meeting was held and the Civil Ambulance and Transport Brigade was formed to provide an ambulance service.

1895 The Civil Ambulance and Transport Brigade commenced operations with officers occupying part of an old police station in George Street, Sydney. Their equipment consisted of one hand pushed stretcher. This Brigade is considered as the direct forebear of the Ambulance Service of New South Wales.

1902 The Brigade serviced the population residing within 20 miles of Sydney and travelled over 9,000 miles during the year, treating more than 2,000 patients. Many other ambulance stations opened around Greater Sydney, all operating and administered as separate ambulance services.

1904 The Brigade had a name change to the Civil Ambulance and Transport Corps.

1912 The Corps operated its first motor ambulance.

1914 World War I was declared and the Corps' equipment and vehicles were given to the State Government.

1919 The Corps dealt with the pneumonia influenza epidemic and did so with dedication and government help. Society began to rely on an ambulance service being there in time of need.

1921 A further name change took place with the Corp becoming the NSW Ambulance Transport Service.

1937 Two-way radios in ambulances were introduced, allowing more rapid response times to patients.

1941 The first Ambulance Cliff Rescue Unit (the originator of rescue services within NSW) was formed.

1960 Dedicated Ambulance Rescue Units were introduced.

1961 The Ambulance Training School was established and conducted by the NSW Ambulance Transport Service Board to standardise ambulance officer training. The School was located in the Board's offices on the second floor of Central District's headquarters building.

1967 The Air Ambulance Service took off - literally!

1976 Paramedic ambulance officers and intensive care ambulances were introduced in Sydney.

1977 The integration of ambulance services into the Health Commission (State Government) occurred with the implementation of the Ambulance Services Act 1976. All ambulance employees became section 14A employees of the Health Commission and not public servants.

1983 Helicopters were first used to help reach and treat patients.

1985 Advanced Life Support officers were introduced into city areas and soon after to other areas of the State.

1986 The Special Casualty Access Team (SCAT) was introduced.

1991 Every ambulance in NSW was equipped with a defibrillator.

1993 Ambulance motorcycles were introduced in Sydney's central business district.

1995 The Service celebrated 100 years of saving lives and caring for the people of NSW.

1997 The Ambulance Service directed medical operations at the Thredbo disaster which involved emergency services from around the country.

1998 Implementation of Computer Aided Dispatch system. The Service received VETAB accreditation for courses run by the Ambulance Education Centre. Introduction of paramedics in rural areas of NSW.

1999 Celebrated 20 years anniversary of women serving as uniformed officers in the Ambulance Service of New South Wales. Successful statewide implementation of Computer Aided Dispatch (CAD) system and commissioning of CAD centres.

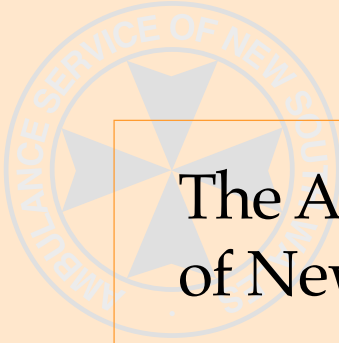
Today, the Ambulance Service of New South Wales employs close to 3,000 people at 228 locations across the State, and operates more than 1,100 ambulance vehicles, including support vehicles and ambulance aircraft.

The Service continues to be an integral and dynamic part of the New South Wales health system, often as innovators and leaders. The men and women of the Ambulance Service are dedicated to maintaining excellence in the provision of pre-hospital emergency care and health related transport services to the people of New South Wales.

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The Ambulance Service of New South Wales

The Maltese Cross has been the symbol of the Ambulance Service of New South Wales since 1919, when the NSW Ambulance Transport Board was created. The words surrounding the Cross have been adjusted over the years to reflect the different name changes, but the Cross and its significance still remain the same.

The Maltese Cross has, for hundreds of years, been associated with humanitarian deeds. It first came into being during the ninth century when a newly constituted religious order, the Knights of Malta, built a hospital in Jerusalem to care for ill pilgrims arriving in the city. The Knights wore black robes faced with a large eight-pointed cross but it was not until the late sixteenth century when they were given sovereignty power in Malta that the Cross earned its name. The humanitarian deeds of the Knights of Malta continued for more than two centuries as they continually built hospitals throughout the Mediterranean area. Everywhere they travelled they were instantly recognised from the Cross as people with a real concern for the welfare of others.

The Cross has since been adopted by many welfare and service organisations throughout the world, including the Ambulance Service of New South Wales.

Ambulance Officer's Attestation

"I solemnly pledge to uphold the Ambulance Service's statutory mandate, as enacted by the Queen's Most Excellent Majesty, that I will protect persons from injury or death, whether or not these persons are sick or injured, and further that I will carry out my duties in a manner commensurate with the best traditions of the Service, ensuring at all times that the dignity and privacy of my patients is maintained and that my personal conduct and behaviour will be as such as only to reflect credit upon the Service."