

Sent: Thursday, May 21, 2009 11:05 PM
Subject: Re: Re: PREVIOUS CONSTANT CONTACT

Yes of course you'll do it baby I have total faith in you because your so passionate and smart!

Yes I'd like to change jobs ideally but nows not a good time with the economy so fooked, not many jobs about. I'd like to have more options in a years time maybe. Nikki works up the road from me actually yes, which works out well because we car share.

Nothing solid planned next week depends on the weather which has been good in spells recently. One thing we do have is a hospital appt. can tell you this because we are still close - we are now on and IVF programme and going to get the drugs to start with that (not telling anyone by the way) because you get too many questions but I know your cool and I'll tell you if there's any news. Hey you never know you may have to give me the low down on twins someday. What else...oh yes I'm training for a charity bike ride so will try and get out next week.. I'm doing it in memory of Danni and it's 54 miles in June.

BACK on the subject of work Niks hours have been cut and she losing one day a week but its across the whole dept. and it was either that or look for reduncies, times are tough right now. So what else have you been doing to keep busy other than the business plan?

EPSTEIN
- MAXWELL
KNOWLEDGE
MED BUS PLAN

The stuff about Shaun and what his mum said, I think maybe you guys just need more time together, you'd be mad to rush in to marriage again but you know that and I think your response was natural, you'd be the same at the thought of marrying anyone. Your a lovely lady Jac and have had some shit but that history I'm sure your future is rosy

XXXXXXXXXX

TWINS - KNOWLEDGE OF TARGETED VICTIMS FAMILY
SHAUN - SHAUN STEELE - 2007-2009 CONSPIRED SEXUAL TARGETING - MOTORCYCLE GANG MEMBER CONNECTED TO MICHAEL FETHERSTONHAUGH - 2007-2010 BUS ADVISER MEDICAL BUS PLAN - MSIC.

E-mail message checked by Spyware Doctor (5.5.1.322)
Database version: 5.11110e
<http://www.pctools.com/spyware-doctor/>

SHARING PERSONAL INFORMATION - PORTRAYED AS DEEP FRIENDSHIP.

NIKKI - INFORMED BY ADAM/MAXWELL THAT NIKKI WAS HIS WIFE AND THAT THEY MET IN COLLEGE AND WERE CHILDHOOD SWEETHEARTS AND WERE TRYING TO HAVE A BABY
FIRST BABY WAS A BOY - CONTACT CONTINUED

[Redacted]

* From: [Redacted]
* To: "Max Well" [Redacted]
Sent: Thursday, May 21, 2009 11:40 PM
Subject: Re: Re:

Yes you have always believed in me, never doubted me at all. Can you tell that i'm very persistent and a determined women. You know some men find me a little confronting, even intimidating. I must admit though i am a strong women, not the shy type,lol!

Thats true what you said about the economy, but i'm not scared to venture out because, well have you ever heard of a broke doctor? The medical system doesnt go into recession. Think about it babe??!!

Thats soo cool about the IVF hun, i hope you really get your hopes and dreams this time babe.

I wish you both the best of luck with that. xxxx
Thanks for sharing babe, that made me feel pretty special.Mwah!

Been getting ready to move again, same town but different part. So been packing again which really sucks but its necessary as well. Smaller place, less rent and in town more. Shaun recons i'm a city girl and like being around the middle of town better. I said yeah, closer to the shops, lol!
Hes a real country boy, loves bush camping and fore wheel driving, which i love to, i think i'm city / country, a good mix of both, what do you think??

STUFF THAT!!! I know its for a good cause babe which is such a nice thing to do. But personally between you and me, i'm glad thats you riding not me, i'd be so sore and worn out,lol!! You must be really fit hey??

* Adam, i've been doing lots of thinking and i think, well, because i'm in a committed relationship and, well, now i find out this wonderful news about you and Nikki, i do think its time to let us go. We really do need to concentrate on our real lives, don't you think? I don't regret meeting you and i will forever treasure and remember all our times together, i will always have a special place for you in my heart.
But i need to be true to Shaun and respect him and our relationship. I feel guilty about doing this and it gets that little bit harder all the time. I need to be a honest good women to shaun as he really is a good guy, kind hearted and loves me, just the way i am. But i need to give us a proper chance and give our relationship the full attention it deserves.
I hope you can understand this babe, i dont want to hurt you, i do love you. But i cant live with loving to men. like you said if we had have lived close to each other it would have been different. But this is the way it is.
I'm sorry we have to say goodbye honey, but it think for all its the right thing to do, dont you. (i want you to be completely honest with me cause this is last chance to be ok)

I have to be able to concentrate on my real life here babe, you know. So i think we should end it tonight ok.
xxxxxxxxxxxx

Original Message
* From: Max Well
* To: [Redacted]

MSIC LOGO %20 - maxwell_858@yahoo.com - EPSTEIN/MAXWELL
ADAM [Redacted] ADAM - NEW LETTERHEADS - ADAM

NEIS - DENIED FUNDING & SUPPORT

2010 - 2011

TIFF FILES - DESIGNERS - PROFESSIONAL
20% EMAIL LOGO MAXWELL - EMAIL NEIS - GOV DEPARTMENT

medical association letter	18/04/2012 4:58 P
MSIC letterhead mockup	10/11/2010 9:37 A
*MSIC Letterheads Adam	10/11/2010 9:37 A *
MSIC logo	10/11/2010 9:37 A
MSIC logos	10/11/2010 9:37 A
MSIC mockups	10/11/2010 9:37 A
MSIC v2	10/11/2010 9:37 A

EVIDENCE MAXWELL/EPSTEIN CONNECTED TO AUST GOV - TARGETING

medical association letter	18/04/2012 4:58 P
MSIC letterhead mockup	10/11/2010 9:37 A
*MSIC Letterheads Adam	10/11/2010 9:37 A *
MSIC logo	10/11/2010 9:37 A
MSIC logos	10/11/2010 9:37 A

EMAIL MAY 2009
MAXWELL
ADAM CORRELY - "A"
LONDON UK

MSIC LOGO RECEIVED VIA EMAIL (20%) - (MAXWELL/ADAM)

MSIC v5	10/11/2010 9:37 PM	Adobe Acrobat
MSIC%20logo[1] (2)	7/11/2010 3:11 PM	IPG File
MSIC%20logo[1] (2)	7/11/2010 3:13 PM	IPG File - EMAIL
MSIC%20logo[1] (3)	7/11/2010 3:14 PM	IPG File
MSIC%20logo[1] (4)	7/11/2010 3:15 PM	IPG File
MSIC%20logo[1] (5)	7/11/2010 3:16 PM	IPG File
MSIC%20logo[1]	7/11/2010 3:17 PM	IPG File
MSIC%20logo[1]	7/11/2010 3:18 PM	IPG File
PublicationL pub Supplies mix figures.pt...	7/11/2010 3:19 PM	IPG File

NEIS/GOV DEPT/AUST - RECEIVED VIA EMAIL - (20%) - AUST GOV

NEIS%20Training%20and%20Skills%20As...	8/04/2011 2:10 PM	DOC File
RPL RCC Application form	8/04/2011 2:29 PM	DOC File
RPL Assessment Matrix_2011 (1)	8/05/2011 10:31 AM	DOC File
RPL Assessment Matrix_2011 (2)	8/05/2011 2:51 PM	DOC File
RPL Assessment Matrix_2011	8/04/2011 2:29 PM	DOC File
Statutory Declaration 200602	8/05/2011 3:10 PM	DOC File

MEDICAL PROFESSIONALS 2007.

MARKET RESEARCH - PROFESSIONALS

Terry Reschelt

REGIONAL DEV BOARD

TERRY R.

Ms



Date:

RE: Dermatology and Allergy centre. Proposal

Dear Dr

I would like to take this opportunity to introduce myself, my name is Jacqueline McDiarmid, I have been a resident of Port Pirie for 6 years. In this time, it ~~has~~ ^{has} come to my attention through my own experience and conversations with the ~~public~~ ^{general population} that there is a great need for specialist treatments within ^{our} the country regions. Therefore I ~~started~~ ^{am in the} process of developing a business plan for the opening of a Dermatology and Allergy centre ^{within this region,} and would like to offer you ~~the~~ the opportunity to take part in this venture.

a referral service for your clients.

The Dermatology and Allergy centre will combine the services of a dermatologist, immunologist ^{allergist} and Dietician working in conjunction with each other, ~~in order to treat opening the country~~ ^{in order to} ~~and the general public within the country regions~~ ^{and the general public within the country regions} the opportunity to ~~refer~~ ^{referred} be referred to ~~the~~ ^{The D&A will assist your clients by} the centre, ~~thus~~ reducing the waiting periods and travel costs for consultations and treatments of all skin allergy and diet related ~~conditions~~ ^{disorders}. ~~usually conducted with~~ ^{usually conducted with} ~~metropolitan specialists.~~ ^{metropolitan specialists.}

I am currently researching access to a range of financial assistance ^{programs} in order to establish the proposed venture ~~in order to~~ within this region ~~at the very~~ with the hope of establishing the centre by the ~~near future with the~~ predicted start up date of January 2008.

* →

All aspects of this project are of a strictly Confidential matter including the market research I am conducting which include customer surveys and the ~~required~~ ^{statistical} information. I ~~require~~ ^I and would appreciate your confidentiality regarding ~~the~~ ^{this} business proposal, ~~I have~~ disclosed in this letter.

* ~~in order to~~ To establish this centre in Port Pirie I firstly need to gather some statistical information regarding ~~referrals~~ ^{referrals} to specialists of a Dermatology, Allergist/immunology and dietician nature within a 12 month period in order to assess the long term commercial validity of the centre. Therefore I am making contact with you specifically to request access to this information. ~~is~~ required. I understand your clients details are of a private matter and do not require anymore information other than ~~statistical~~ ^{that} of a statistical ~~data~~ nature. ~~Therefore~~ ^{all} personal information will not be required.

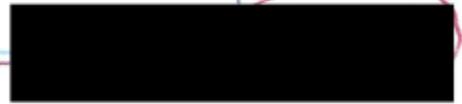
You can contact me direct to discuss this matter

or I can ~~please~~ contact you or your staff next week to follow up this information ~~or in order to~~ ~~or to~~ make an appointment ~~in order to make an~~ with you to discuss this further.

I thank you for your time and ~~appreciate~~ appreciate your consideration and confidentiality ~~regard~~ regarding this matter.

yours sincerely

~~Ms~~



* PT PIRIE MEDICAL CLINICS & DOCTORS. *

(Ring) PIRIE MEDICAL CENTRE

(Ring) Risdan Clinic

(Ring) Central clinic

* ✓ ✓ DR AM Kajani (senior) ✓ ✓ *

✓ ✓ DR ASIF Rasheed ✓

✓ ✓ DR AZKA Kajani ✓

✓ ✓ DR Kiran: ASIF ✓

~~✓ ✓ DR RISWAN Kajani ✓~~

* ✓ ✓ Golding ✓ *

✓ ✓ HUSSAIN ✓

✓ ✓ Lau FYH ✓

✓ ✓ Martin D. ✓

✓ ✓ Onwuchekwa Uche ✓

* ✓ ✓ Pillay G ✓ *

✓ ✓ Suleman M. ✓

(15)

28 SEPT 2009 PC SYSTEM TOWER BEIGE EXTRACTION - THE MEDICAL SPECIALIST CENTRE PORT PIRIE - ORIGINAL COMPUTER - MARKET RESEARCH CONDUCTED ON ORIGINAL COMPUTER 2007

* 2006 - COMMENCEMENT OF DIRECT TARGETING EPSTEIN-MAXWELL ONLINE - ORIGINAL PC SYSTEM

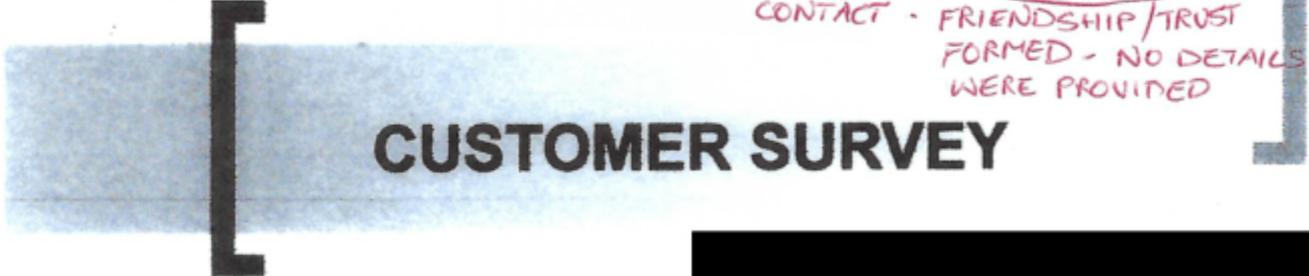
* REGISTERED CLIENT REGIONAL DEVELOPMENT P. 2

FRENCH ST **RE: MARKET RESEARCH**

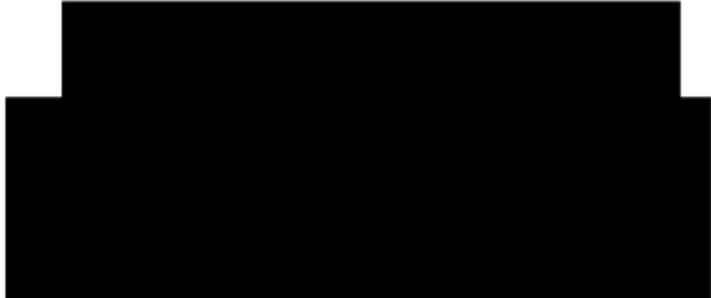
10/9/07

INFORMED OF BUSINESS PLAN IN 2007 - MID 2007 - MAXWELL

* CONTACT - FRIENDSHIP/TRUST FORMED - NO DETAILS WERE PROVIDED *



CUSTOMER SURVEY



Dear Sir / Madam,

I would like to take this opportunity to introduce myself , my name is [REDACTED] I have been a resident of Port Pirie for [REDACTED] You have been selected to participate in a market Research study as I am in the process of developing a business plan in order to establish a NEW Health Clinic in Port Pirie. It would be sincerely appreciated if you could take the time to complete the survey, answering as honestly as you can and returning it in the stamped envelope provided. As this research is of a statistical nature , your personal details are not required and any information you provide is strictly confidential. I sincerely thank you for taking part In this very important research. As a token of my appreciation I would like to offer you a 10% discount voucher to use on 1 non-prescription product on sale within the clinic on it's opening in January 2008.

Yours Sincerely



CUSTOMER SURVEY

Q5: What is the usual waiting period for consultation and treatment with your required specialist?

2 Weeks 1 Month 6 Weeks Other

Please specify:

Q6: How often would you require the use of these specialists services?

Weekly Monthly Annually Other

Please specify:

Q7: How much do you usually pay for the services provided by the specialist for a consultation?

\$ 30 \$ 45 \$ 60 Other

Please specify:

Q8: How do you usually pay for the services and treatments provided ?

EFTPOS Credit card Cash Cheque
Other

Please specify:

Q9: What is your preferred structure of payment ?

EFTPOS Credit card Cash Cheque
Other

Please specify:

Q10: Do you claim Medicare rebates ?

Yes No Sometimes

CUSTOMER SURVEY

Q11: Are you a Healthcare card holder or Pensioner card recipient ?

Yes No Other card

Please specify:

Q12: Gender: Male Female

Q13: Marital status:

Married Separated Defacto Single

Q14: Age bracket:

10 - 16 16 - 21 21 - 30 30 - 40 Other

Please specify:

* **Q15: Location - Township** *

Please specify: Port Pirie.

Please return this survey in the provided envelope by 30th of September 2007. *
Thank you for providing this valuable Information and your support.

MEDICAL

PROFESSIONALS MARKET RESEARCH

Dr R S Jolly
36 Park Tee
Kimba

* Kimba *

* 19/10 (07) *

RE: Dermatology and Allergy Centre proposal

* Dear Dr Jolly, *

I would like to take this opportunity to introduce myself, my name is [REDACTED] [REDACTED] I have been a resident of Port Pirie for 6 years. In this time it has come to my attention, through my own experience and conversations with the general population, that there is a great need for specialist treatments within our country region. Therefore I am in the process of developing a Business plan for the opening of a Dermatology and Allergy Centre within this region.

The Dermatology and Allergy Centre will combine the services of a Dermatologist, Allergist / immunologist and a Dietician working in conjunction with each other in order to offer treatments to the country population and a referral service for your clients. The centre will assist your clients by reducing the travel costs and waiting periods for consultations usually conducted with metropolitan specialists.

To establish this centre in Port Pirie, I firstly need to gather some statistical information regarding referrals to specialists of a dermatology, allergy / immunology and dietician nature. This information will enable me to assess the long term viability of the centre. Therefore I am making contact with you specifically to request access to statistical information from the past 12 months. I understand your clients details are of a private matter and not relevant to my research, therefore I do not require anymore information other than that of a statistical nature.

All aspects of this project are of a strictly confidential matter, including the market research I am currently conducting. This includes customer survey's and the statistical information I am requesting. I would appreciate your confidentiality regarding this business proposal disclosed in this letter.

You may contact me directly to discuss this matter or I can contact you or your staff next week to follow-up this information to make an appointment with you to discuss this further.

I thank you for your time and appreciate your consideration and confidentiality regarding this matter.

Yours sincerely

[REDACTED]

*I have retired and do occasionally
occurs - can't help you much +
good luck*

SEPERATED MARRIAGE 30TH MARCH 2007

MARRIED NAME: McDIARMID - MAIDEN NAME: PEARCE

Dr Allen Golding
101 Florence St
Port Pirie

Ms [REDACTED]

5/10/07

RE: Dermatology and Allergy Centre proposal

* Dear Dr Golding, *

I would like to take this opportunity to introduce myself, my name is [REDACTED] [REDACTED]. I have been a resident of Port Pirie for 6 years. In this time it has come to my attention, through my own experience and conversations with the general population, that there is a great need for specialist treatments within our country region. Therefore I am in the process of developing a Business plan for the opening of a Dermatology and Allergy Centre within this region.

The Dermatology and Allergy Centre will combine the services of a Dermatologist, Allergist / immunologist and a Dietician working in conjunction with each other in order to offer treatments to the country population and a referral service for your clients. The centre will assist your clients by reducing the travel costs and waiting periods for consultations usually conducted with metropolitan specialists.

To establish this centre in Port Pirie, I firstly need to gather some statistical information regarding referrals to specialists of a dermatology, allergy / immunology and dietician nature. This information will enable me to access the long term viability of the centre. Therefore I am making contact with you specifically to request access to statistical information from the past 12 months. I understand your clients details are of a private matter and not relevant to my research, therefore I do not require anymore information other than that of a statistical nature.

All aspects of this project are of a strictly confidential matter, including the market research I am currently conducting. This includes customer survey's and the statistical information I am requesting. I would appreciate your confidentiality regarding this business proposal disclosed in this letter.

You may contact me directly to discuss this matter or I can contact you or your staff next week to follow-up this information to make an appointment with you to discuss this further.

I thank you for your time and appreciate your consideration and confidentiality regarding this matter.

Yours sincerely

[REDACTED]

EFTA00268280

REPLY - REFERRING PATIENTS TO CENTRE

Dr. Alan P. Golding

M.B., B.S., D.R.A.N.Z.C.O.G., F.R.A.C.G.P., F.A.C.R.R.M., A.C.C.A.M.
Provider 422345H
Email : [REDACTED]

CENTRAL CLINIC

101 Florence St.
Port Pirie SA 5540
Ph: (08) 8632 2144
Fax: (08) 8633 1366

* 10/11/07 *

[REDACTED]

Dear [REDACTED]

Re: Dermatology and Allergy Centre proposal.

I am sure you are aware that our visiting dermatologist has had to extend his consulting hours, and remains booked several months in advance. I have 4 patients under direct care of consultant allergists, and would happily refer another 8-10 if they could get an appointment anywhere within a reasonable time for an allergist assessment and advice. The Women's and Children's Hospital is only seeing life-threatening allergic conditions due to their excessive waiting list.

I have no doubt an allergy clinic would be supported, but have no idea where you might be able to source appropriate consultant staff for this. Good Luck.

Regards


* Dr A P Golding *



Regional
Development
Australia

YORKE AND MID NORTH

85 Ellen Street
Port Pirie SA 5540
P 1300 742 414
F (08) 8632 5724

E info@yorkeandmidnorth.com.au
W www.yorkeandmidnorth.com.au
ABN: 68 705 101 048

8 February 2016



Dear [REDACTED]

"The Specialist Medical Centre" Project

Further to your request for names of personnel involved in providing feedback associated with "The Specialist Medical Centre" during the period 2007 - 2010 we advise that the following officers were involved:

Michael Fetherstonhaugh - Business Adviser 2007

Craig Blieschke - Business Development Officer

Jarrad Davies - Workforce Development Officer

Terry Reichelt - Economic Development Officer 2007

Should you require further information please do not hesitate to contact us.

Yours sincerely

Kelly-Anne Saffin
Chief Executive Officer



An Australian Government Initiative



An Initiative of
Government
of South Australia

Local Government Partners
Clare & Gilbert Valleys Council | District Council of Barunga West
District Council of Mount Remarkable | Northern Areas Council
District Council of Peterborough | Wakefield Regional Council
District Council of Yorke Peninsula | Regional Council of Goyder
District Council of the Copper Coast | Port Pirie Regional Council
District Council of Orroroo Carrieton

customer survey



RE: Market research / Feasibility study Date:

Dear Householder,

I would like to take this opportunity to introduce myself, my name is Jacqueline McDiarmid. I have been a resident of Port Pirie for 6 years. You have been selected to participate in a market research feasibility study as I am in the process of developing a business plan in order to establish a new health clinic in Port Pirie. It would be sincerely appreciated if you could take the time to complete the survey, answering as honestly as you can and returning it in the provided stamped envelope. As this research is of a statistical nature your personal details are not required and any information you provide is strictly confidential. I sincerely thank you for taking part in this very important research. As a token of my appreciation I would like to offer you a 10% discount on

* customer survey sample. * 2007

to take this opportunity
~~#~~, I would like to introduce myself,
my name is [REDACTED]. I have
been ~~residing~~ a resident of Port Pirie
for 6 years. I have ~~comp~~ ~~been~~ ~~writing~~
~~selected to join in this~~ ~~survey~~ ~~you~~ ~~participate~~ this customer survey as part
of a market research study as I am in the
process of ~~currently~~ developing a business plan in order
to establish a new health clinic in Port Pirie.
It would be greatly appreciated if you could
take the time to complete the survey, answering
as honestly as you can and returning it in
the provided stamped envelope. * ~~All information~~
~~you provide will be completely confidential~~
~~and personal information is not compulsory.~~
~~but~~ I ^{sincerely} thank you ~~very much~~ for taking
part in this very important research and
as a token of my ~~the~~ appreciation I
~~selected~~ would like to offer you a ^{10%} discount on one ^{your}
non-prescription products ~~within~~
~~your first visit~~ to the clinic on its
opening in ~~the near future~~. January 2008.

PRODUCT ~~Product~~.
Discount Voucher.
market research participant
~~\$10.00~~. 10%.

Customer Survey sample.

Please tick the appropriate box. you may tick more than one.
Do you *suffer from any of the following or any family members conditions?

eczma YES NO SOMETIMES

acne

psoriasis

Dermatitis

scarring

cellulite

stretchmarks

substance airborne allergies seasonal medical diet related conditions

skin allergies

Food allergies

cosmetic desires
please specify:

other, please provide details:

Do you require the services of specialists for these conditions?

Do you require ~~ref~~ GP referrals ^{for} ~~the~~ specialists for treatment? YES NO SOMETIMES

Are you required to travel to these specialists for treatment? YES NO SOMETIMES

IF YES ~~to~~ ~~the~~ Do you require accomodation or consultation for treatments to commence? YES NO SOMETIMES

What is the usual waiting period for consultation with your required specialist?

2 weeks 1 month 6 weeks OTHER please specify:

*

or members of your household

~ REGIONAL DEV BOARD 2007 - MICHAEL F.

How often would you ^{require} need to use
these services of a specialist?
Weekly Monthly ANNUALLY OTHER please

specify:

How much do you usually
~~what would~~ you expect ~~to~~ pay for the
services provided by the specialist for
a consultation?

\$30 \$48 \$60 OTHER please specify:

Do you claim medicare rebates for this
service? YES NO

What is your preferred structure of payment?
EFTPOS CREDITCARD CASH CHEQUE

How do you usually pay for the services
and treatments provided?
EFTPOS creditcard CASH CHEQUE

Are you a healthcare card or pensioner card
holder? YES NO OTHER PLEASE SPECIFY:

* Any other comments: _____

MARKET RESEARCH



THIS CERTIFICATE ENTITLES **10% PRODUCT DISCOUNT**

to **MARKET RESEARCH PARTICIPANT**

Authorized by [REDACTED]

Expires N/A Thank you for your support

CUSTOMER SURVEY
VOUCHER

Market
* ESTIMATED COMMENCEMENT JANUARY 20
5 MONTHS FROM HAND WRITTEN PROJECTI
2007

2.1 Development & marketing

Implement ~~the~~ ~~business~~
personalise
business
is
cosmetic of the patient
issues eg. Scarring, birthmarks
lazer Rejuvenation
~~skin~~

REFERRALS
Professional
income need
through travel
consultation waiting periods
rounding

2.2 Development & marketing

The development structure basis of the business will consist of providing a professional, proficient, confidential and friendly environment in which to create a comfortable atmosphere for clients and all employees. This objective will be achieved by employing and applying the expertise of qualified professional staff who will assist in the education and experience of staff who are enrolled in training schemes. Employees will be educated on all OH&S procedures to ensure the safety and well being of staff and clients. Management will be responsible for monitoring and updating procedures being implemented on a continuous basis. As staff required to operate the business successfully are required to be of a high level of education and qualifications estimated time to develop and implement the business is set at 5 months. Estimated start up time is 5 months, January 2008. * Finance required to develop the centre has been estimated to be a

Development & Marketing

PUBLIC ANNOUNCEMENT - 2008 - OBJECTIVES / STRATEGY.

* South Australia's
* GP Plus Health Care Strategy *

Dr David Panter

* 25 July 2008 *



* Government
of South Australia *

* SA Health *

2008 PUBLIC ANNOUNCEMENT

2006 MEDICAL BUS PLAN - INTELL PROP THEFT
SA COV - SA HEALTH.

SA GOV CONNECTED TO EPSTEIN - MAXWELL
0/20 MSIC LOGO - ADAM - EPSTEIN - MAXWELL
0/20 NEIS - GOV DEPT.

* THE MEDICAL BUSINESS PLAN - HAND WRITTEN FORM - PRIVACY OF HOME/NOT INSTALLED ON A COMPUTER 2006 - 2009
MINISTER OF HEALTH - KNOWLEDGE - DENIED FUNDING - SENT TO ROGER KIRCHNER FOR FUNDING - NO INFORMATION ABOUT DEVELOPMENT UNTIL APPLIED FUNDING 2012 - COMPLETED BUSINESS PLAN MSIC, COMMUNICATION TOOL.
SA Health Care Plan

* > Launched by the Premier and Minister for Health in June 2007 *

* > Based upon the Generational Health Review (2003) - FALSIFIED DOCUMENTS REFER TO STAGE 4 AND STAGE 3 SKAT

- > Sets the framework for
- Service redistribution
 - Demand management
 - Clinical engagement
 - Workforce development
 - Infrastructure investment

* HAND WRITTEN FORM ONLY
INTELLECTUAL PROPERTY THEFT PREVIOUS OCCURRENCE PREVIOUS TO 2006 - 2009

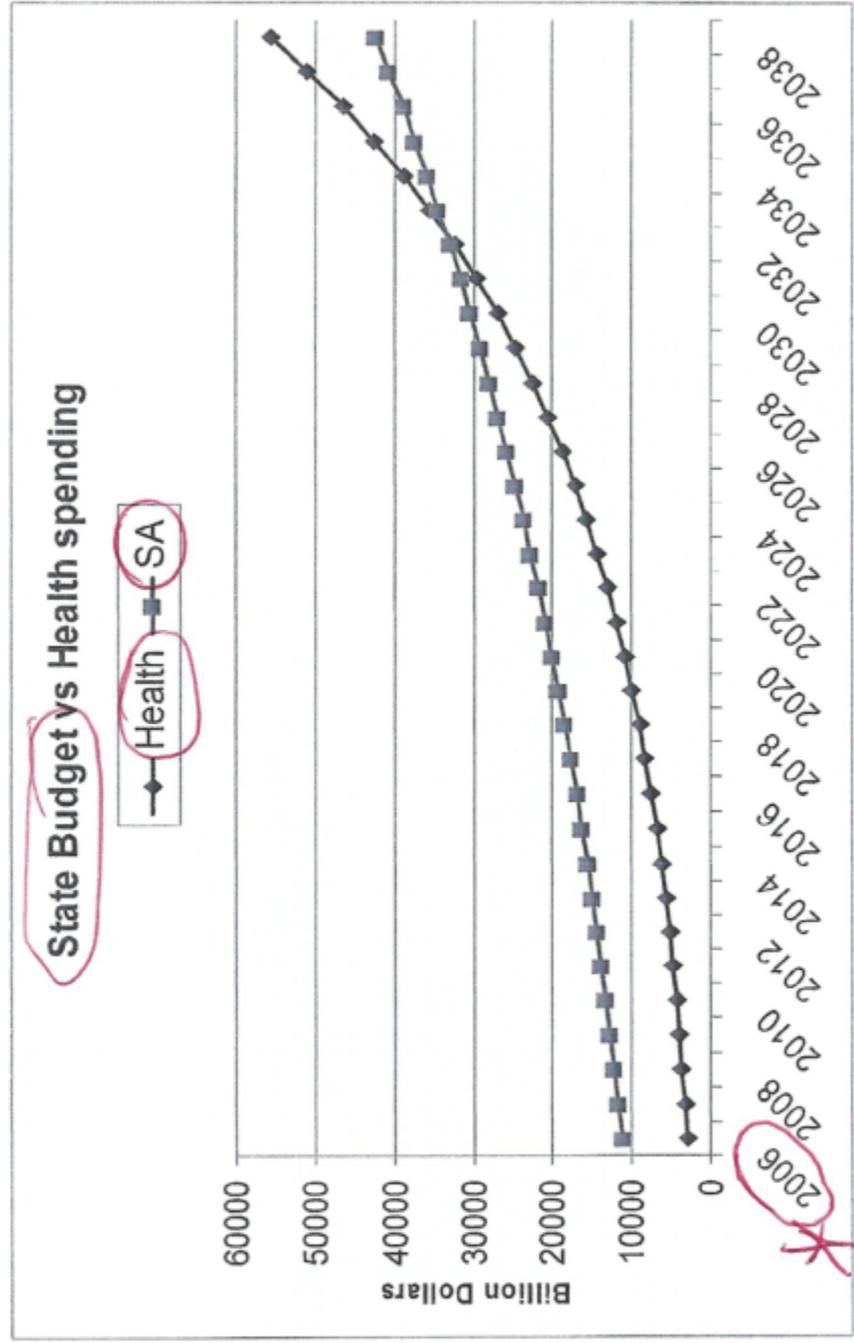
* 1993 - INFANT SLEEP POSITIONER - GOVERNMENT
* 2004 - FUN FAUNA PARK - VARIOUS
SA Health

Benefits

- * Established in country region in order to obtain country ~~and~~ GP's referrals to clinic usually referred to ^{city} ~~center~~
- * Three specialists working in conjunction with each other in order to diagnose ^{the disorder or condition} ~~condition~~ & ~~establish~~ develop a suitable treatment plan.
- * Savings to the customer in the form of, travel costs, accommodation costs, loss of wages due to travel;
- * waiting periods reduced for consultation & treatment ^{to the customers of location}
- * convenience of ~~being established~~ ^{location} in country region
- * competitive price structures for products & services
- * ~~convenient payment facilities~~
variety of payment facilities - for ease of payment
- * confidentiality & privacy assured to the customer through workplace ^{policy} confidentiality clause.
- * convenience of a variety of specialists ^{in one location} ~~able to~~ enabling the treatment & diagnosis of a vast array of disorders & conditions
- * convenience to the customer of availability of a referral system or appointment system. - MSIC
- * New technologies on offer through the use of the faxel laser system and introduction of ~~food~~ ^{food} preperatic classes and pharmacogenetics once clinic has been viably established.
- * follow-up service ^{for} ~~to~~ clients to access treatments and to inform ^{of} new products or services ~~on offer~~ being introduced.
- * medical & natural products on sale within the clinic offering convenience & choice to the customer to treat interrelated conditions & disorders that don't require a ~~sp~~ ^{sp} prescription. ~~or etc~~

2006 - CIP PLUS CENTRES - COST IMPACT STARTING AT 2006.

Cost Impact with no reform



EXACT/REPLICA CONCEPT AS 2006 - 2009 MEDICAL BUSINESS
HAND WRITTEN FORM ONLY 2006 - 2009. PLAN

GP Plus Health Care Strategy &

* Objectives *

> Strategy comprises

- * • GP Plus Health Networks
- * • GP Plus Health Care Programs (incorporating out of hospital initiatives)
- * • GP Plus Health Care Centres

> * Objectives *

- * • Increased primary prevention activities *
- * • Early detection of health status risk factors *
- * • Improved management of chronic conditions *
- * • Increased use of self management *
- * • Delivery of services closer to home *
- * • Managing the rate of growth in referrals to hospital *
- * • Increased research and teaching *

* SA Health *

GP Plus Health Care Centres

- > Local determination via Health Improvement Plans
- * > Add value and complement general practice *
- * > Enhance access to services for those most in need *
- * > Create new service delivery opportunities *

GP Plus Health Networks

- * > A forum for general practice and other primary care providers to work together
- * > 4 in Metro Adelaide (approx 250-300k pop) *
- * > 3 emerging with Country SA *
- * > Creating new working relationships *
- * > The creation of Health Improvement Plans *

* VISIONS *

~~not~~ To make a deal with the U.S. to be the first Australian clinic to get an American contract to bring the fraxel laser here to correct South Australian skin disorders and ~~conditions~~ ^{cosmetic} conditions. Acne - stretch marks etc.

To ~~bring~~ incorporate genetic testing ~~with~~ ^{into} the allergy treatments provided. Australian approval. PHARMACOGENETICS.

* To incorporate ^{Scar} burn treatments into the business. * (LASER, FRAXEL) AND cosmetic procedures

eg: wrinkle reduction, cellulite reduction, collagen injections, (lip plumping) to work in conjunction with

* To incorporate consultations ~~directed from local~~ ^{local} ~~and~~ ^{arranging} medical surgeries concerning tailoring of specific diets that relate to specific illnesses or conditions eg. Reflux, high sugar, high cholesterol levels in the blood stream. (DR KAJANI) Also specific skin conditions eg. dermatitis, itching stretch marks, scars, birthmarks etc.

To incorporate pharmacogenetics into the ~~allergy~~ Allergy sector of the business.

specialised

* To incorporate out of store service into the dietitian sector of the business. Trained staff to go shopping with clients - to show and educate them of diet choices - to buy once patients diet ~~has~~ ^{plans} ~~there~~ has been ~~established~~ developed. At ~~home service~~ - trained staff to ~~accompany patients~~ ^{conduct food preparation courses} ~~and~~ ^{in order} ~~to~~ ^{patients} ~~educate them on~~ ^{to} the specific ~~preparation techniques~~ ^{preparation techniques} to ~~assist~~ ^{assist} with their prepared diet plans. ~~Some~~ ~~times~~ ~~with~~

MOSAIC

* > Population segmentation for micromarketing by retail industry (30 years) *

* > UK, Hong Kong, Australia, NZ, USA, Japan

> Dr Foster adapted for health needs mapping in NHS (UK) - ERSTEIN - MAXWELL - KNOWLEDGE OF BUS PLAN 2007 - FRENCHIST

* > Information basis for Health Improvement Plans by Primary Care Trusts

GP Plus Health Care Programs

- * > Practice Nurse Initiative *
- * > Risk factor and Lifestyle Programs *
- * > Chronic Disease Management Programs *
- * > Self-management Programs *
- * > Metro Home Link Service *
- * > Complex Care Programs *
- * > Universal Home Visiting *
- * > Health Promotion Activities *

Practice Nurse Initiative

- > * Objective: To assist General Practitioners in the management of patients with chronic disease.
- > Activities include: *
 - Development of chronic disease registers
 - Recall systems
 - Patient assessment
 - Development of patient care plans
- > To date: 64 nurses placed in General Practice including Aboriginal clinics
- > Measure of success: Increased uptake of MBS items for GP Management Plans and Team Care Arrangements for people with chronic diseases

*Metro Home Link Service *

- > Focus – Rapid response for hospital avoidance and supported discharge
- > Referrals – From GPs or Hospitals
- > Brokered service provided by Home Support Service
- > Services – include nursing, allied health, home support & equipment for:
 - Wound care, medication management, respite, house keeping assistance and personal care
- > Provides – range of packages up to 7 days with option to expand to 14 days
- > Location – either home or residential aged care facility
- > Last financial year 14,700 packages were provided to 12,850 people

SA Health

* Complex Care Programs *

- > Target Group:
 - People with complex co morbidities
 - People who have frequent hospital admissions
- > Nurse Case Management
 - Joint initiative with RDNS, Western Division of General Practice and TQEH *
 - Provides monitoring of complex group for early signs of deterioration to prevent hospital admission
 - If admitted, works with hospital to get them home more quickly
 - Case load of about 50 people
- > Home tele-monitoring
 - Remote monitoring of high risk people for B/P; blood glucose; weight; and other vital signs
 - Nurse contacted by remote monitoring service when vital signs deviate from norm; home visit arranged for direct assessment and intervention

Background to the Plan

- > Population projections
- > Activity projections
- > Consideration of:
 - *• Improved patient access *
 - *• Future workforce needs *
 - *• Duplication of infrastructure *
 - *• Planning principles *

- healthy lifestyle and risk factor programs
- health assessment, education and counselling.

GP Plus Health Care Centres

Metropolitan:

- [Aldinga](#)
- [Elizabeth](#)
- [Marion](#)
- [Morphett Vale](#)
- [Woodville](#)

Country:

- [Ceduna](#)

Being constructed:

- [Port Pirie](#)

GP Plus Super Clinics

- [Modbury](#) - Smart Road site and Gilles Plains site
- [Noarlunga](#)

To find health services currently available in your local area, visit the [Health Services Finder](#) and enter your suburb.

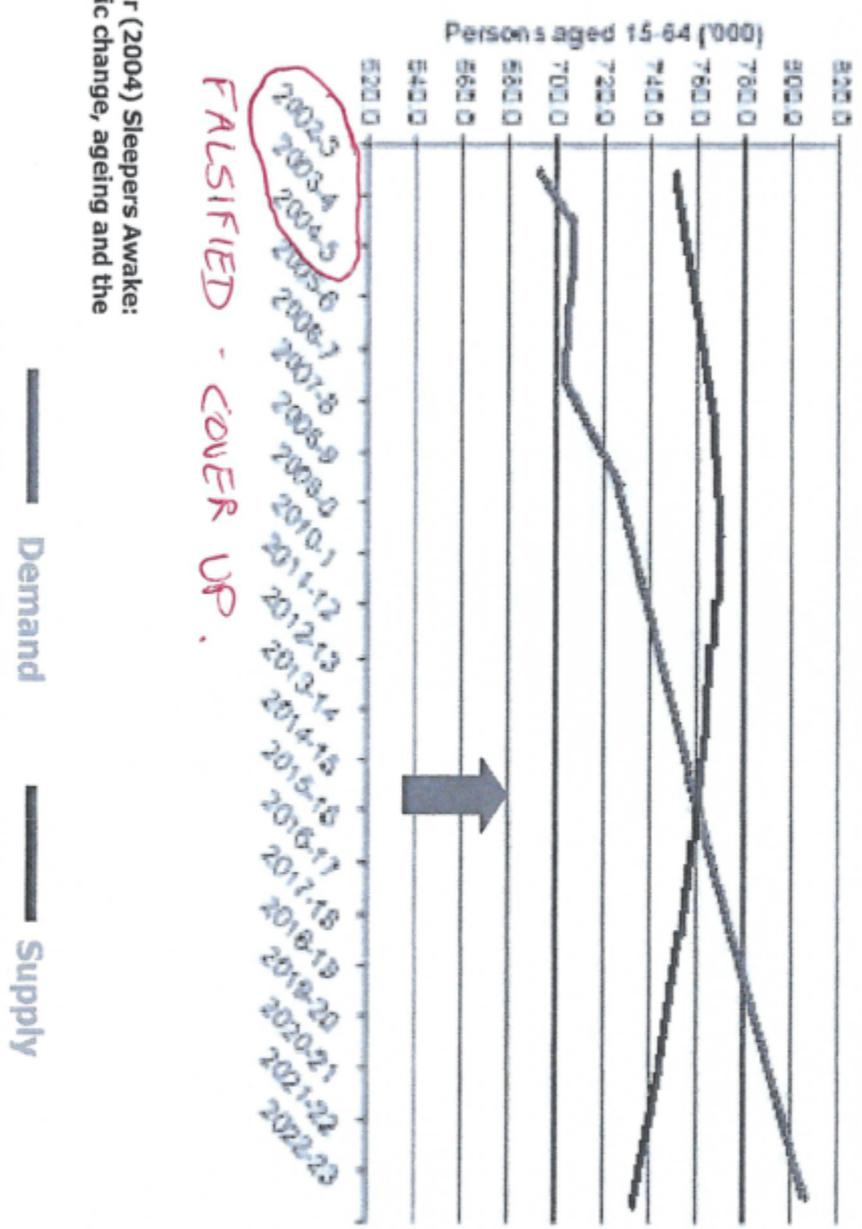
In country areas, browse the [Country Health SA services](#).

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Last Modified: 16 Jan 2013

WRITTEN 2008 - GP PLUS CENTRE PUBLIC RELEASE
 NOT WRITTEN IN 10 YEAR BUDGET PLAN - MEDICAL.
 NO NEW ESTABLISHMENT PROJECTIONS.

SA Projected labour demand and supply



FALSIFIED - COVER UP.

John Spoehr (2004) Sleepers Awake: demographic change, ageing and the workforce.

SA Health

10 YEAR GOV BUDGET PLAN - MEDICAL
NO NEW ESTABLISHMENTS - MEDICAL CENTRES - GP PLUS NOT

INCLUDED IN
BUDGET AS A
PROJECTION PROJECT

BUILDING SOUTH AUSTRALIA - INFRASTRUCTURE

SA HEALTH 10 YEAR STRATEGY.

COLLECTED/OBTAINED 2013 - CONTESTING: JOHNSON
LAWYERS
NO 2003 REVIEW - STARTS 2005

Projects

Project	Priority	2005/6-2009/10	2010/11-2014/15	SASP Targets
Transport				
Road amenity at Port Wakefield ■ Establish Port Wakefield bypass Lead - Australian Government	2		*	2.9
Growth in freight on road network ■ Continue to give priority to maintenance of the east coast road on Yorke Peninsula Lead - State Government	2	*	*	1.5
■ Develop a strategic needs analysis for a bypass at Clare, considering the needs of Balaklava and Blyth Lead - local government	3	*		1.5
Land				
Infrastructure for expansion of intensive animal keeping ■ Investigate the spatial and infrastructure requirements to support the expansion of intensive animal keeping and processing (poultry and pigs) at various locations throughout the region Lead - State Government	U/way	*		1.6
Provision of industrial land ■ Develop industrial estates in Blyth, north of Clare and other regional centres to support the wine and agriculture industries Lead - local government	2	*	*	1.6
Tourism facilities ■ Develop accommodation and recreational facilities to cater for increased tourist demand Lead - private sector	2	*	*	1.6
* Information and Communication Technology (ICT) - BROAD BAND INTERNET ONLY *				
Access to broadband ■ Improve telecommunications to southern Yorke Peninsula through 'Connecting Yorke Peninsula' project	U/way	*		4.7
■ Encourage towns to aggregate demand and develop a business case to support installation of broadband Lead - private sector	2	*		4.7
* Health - UPGRADING EXISTING INFRASTRUCTURE ONLY *				
Primary health care centres ■ Continue to upgrade hospital facilities to support the co-located delivery of primary health care services including general practice, allied health, mental health and Aboriginal health programs Lead - State Government, private sector	2	*	*	2.2
Aged care facilities ■ Provide more aged care and residential facilities and services to meet the increased number of retirees moving to the region Lead - private sector, Australian Government	2	*	*	2.2

Mid North And Yorke Peninsula

* Health

There are 19 health services in the region, located at Port Broughton, Ardrossan, Balaklava, Maitland, Minlaton, Moonta, Wallaroo, Riverton, Jamestown, Orroroo, Peterborough, Laura (Rocky River), Burra, Clare, Eudunda, Snowtown, Hamley Bridge, Yorketown and Booleroo Centre.

The significant numbers of early retired and aged persons in the region is a major issue for the provision of health services.

* There are some access difficulties to local and metropolitan health facilities due to limited public and community transport. *

Housing

Land values throughout the region, especially on Yorke Peninsula and around Clare, are rising as a result of interest from retirees and people seeking a different pace of life. This has seen an increase in housing, if not permanent residents, in residential developments at Port Vincent marina, Black Point, Wallaroo marina, Moonta and Marion Bay. Holiday homes held by absentee owners are increasingly becoming permanent retirement homes in many towns.

Expansion of Primo by another 200 full time employees (FTE) to 500 people over the next two years and new poultry facilities will increase the demand on housing.

Education and Training

- ◆ Hospital
- ▲ TAFE
- School
- Main road



A network of educational facilities including TAFE Regional Institute campuses in Kadina, Yorketown and Narungga (at Point [redacted] / Maitland) serves the Yorke Peninsula. The Mid North has three TAFE campuses located at Clare, Jamestown and Peterborough. There is training in the areas of tourism and hospitality, primary industry value-adding and aquaculture, as well as the aged care and retirement industries.

TAFE courses are available through distance education.

The demand for childcare facilities in the region has increased.

Waste Management

Many of the towns in the region are facing the renewal of solid waste disposal licences. The Central Region Local Government Association is developing a Mid North/Southern Flinders regional waste management strategy, including the potential for a new central solid waste disposal site.

The District Council of Copper Coast has a solid waste recycling system and separation plant, which it operates as a joint venture with the private sector.

Composting sites are required for the processing of waste from intensive animal farming and other agricultural sources.

South Australia's Strategic Plan Summary of Targets

South Australia's Strategic Plan, *Creating Opportunity*, contains 79 targets. They are set out below, with Plan reference numbers (T1.1 etc) in brackets.

Objective 1: Growing Prosperity

Jobs:	Better the Australian average employment growth rate within 10 years. (T1.1)
Unemployment:	Equal or better the Australian average within 5 years. (T1.2)
Youth unemployment:	Equal or better the Australian average within 5 years. (T1.3)
Competitive business Climate:	Maintain Adelaide's rating as the least costly place to set up and do business in Australia (KPMG Competitive Alternatives study) and continue to improve our position internationally. (T1.4)
Economic growth:	Exceed the national economic growth rate within 10 years. (T1.5)
Investment:	Match or exceed Australia's ratio of business investment as a percentage of the economy within 10 years. (T1.6)
Total population:	Increase South Australia's population to 2 million by 2050, rather than the projected population decline. (T1.7)
Interstate migration:	Reduce net loss to interstate to zero by 2008 with a positive inflow from 2009 (T1.8)
Overseas migration:	Match South Australia's share of international migrants to Australia with the State's share of the overall national population over the next 10 years. (T1.9)
Productivity:	Exceed Australia's average productivity growth within 10 years. (T1.10)
Industrial relations:	Achieve the lowest number of working days lost per thousand employees in Australia within 10 years. (T1.11)
Exports:	Treble the value of South Australia's export income to \$25 billion by 2013, with exporters assisted by the work of the industry-led Export Council which was established in 2004. Industry-agreed sectoral goals that will assist in meeting the overall target include \$7.5 billion by 2013 by the food industry in meeting the Food Plan target, over \$3 billion nationally by the wine industry by 2010, further developing our exports of motor vehicles, increasing the current 20% per annum sales and revenue growth of the electronics industry and further consolidating Adelaide as the defence industry capital of Australia and developing defence industry exports. Minerals will also contribute to the overall target by achieving ambitious exploration and processing targets. We will work to more than double our share of national services exports and increase our exports of elaborately transformed manufactures. (T1.12)
Tourism industry:	Increase visitor expenditure in South Australia's tourism industry from \$3.4 billion in 2001 to \$5.0 billion by 2008 by increasing visitor numbers and length of stay and, more importantly, by increasing tourist spending. (T1.13)
Share of overseas students:	Double South Australia's share of overseas students within 10 years. (T1.14)
Minerals and exploration:	Make South Australia a favoured mineral investment destination for private investment by 2010, with exploration expenditure targeted to almost treble to \$100 million by 2007, and minerals production to reach \$3 billion by 2020, with a further \$1 billion worth of minerals processing by that time. (T1.15)

Strategic infrastructure:	Increase investment in strategic areas of infrastructure, such as transport, ports and energy to support and achieve the targets in South Australia's Strategic Plan. (T1.16)
Credit rating:	Achieve a AAA credit rating, in line with other mainland States, within 3 years. (T1.17)
Performance improvement in the South Australian public sector – productivity:	Lead the nation in cost effectiveness of government services within 5 years. (T1.18)
Performance improvement in the South Australian public sector – quick decision-making:	Lead Australian governments in timely and transparent government decision-making within 5 years. (T1.18)

Objective 2: Improving Wellbeing

Quality of life:	Improve Adelaide's quality of life ranking on the William M. Mercer Quality of Life index to be in the top 20 cities in the world within 10 years. (T2.1)
Healthy South Australians:	Increase healthy life expectancy of South Australians to lead the nation within 10 years. (T2.2)
Infant mortality:	Continue to be the best performing State in Australia. (T2.3)
Psychological distress:	Equal or lower than the Australian average within 10 years. (T2.4)
Smoking:	Reduce the percentage of young cigarette smokers by 10% within 10 years. (T2.5)
Overweight:	Reduce the percentage of South Australians who are overweight or obese by 10% within 10 years. (T2.6)
Sport and recreation:	Exceed the Australian average for participation in sport and physical activity within 10 years. (T2.7)
Crime rates:	Reduce crime rates to the lowest in Australia within 10 years. (T2.8)
Road safety:	Reduce road fatalities by 40% by 2010, with an ongoing focus on reductions in fatalities and serious injuries across all modes. (T2.9)
Greater safety at work:	Achieve the nationally agreed target of 40% reduction in injury by 2012 (National OHS Strategy 2002–2012, National Occupational Health and Safety Commission). (T2.10)

Objective 3: Attaining Sustainability

The River Murray:	Increase environmental flows by 500 GL in the Murray-Darling and major tributaries by 2008 as a first step towards improving sustainability in the Murray-Darling Basin, with a longer-term target to reach 1500 GL by 2018. (T3.1)
Energy consumption – government:	Reduce energy consumption in Government buildings by 25% within 10 years and lead Australia in wind and solar power generation within 10 years. (T3.2)
Greenhouse emissions:	Achieve the Kyoto target during the first commitment period (2008–12). (T3.3)
Land biodiversity:	Have five well-established biodiversity corridors linking public and private lands across the State by 2010. (T3.4)

UPGRADING ESTABLISHED INFRASTRUCTURE ONLY.
GOVERNMENT NOT ADDRESSING ISSUES. - 2007

Better **Choices** Better **Health**

- provide for the needs of an ageing population, by support in the home, early intervention and improved recuperation, rehabilitation and respite facilities
- balance the need to centralise complex, expensive or rare treatments and procedures, with decentralisation made possible by information technology, telemedicine and community based care
- deliver high quality care through networked clinical services in local, regional and central settings.

* GHR recognises the intentions and attempts made by the system to achieve system reform. However, this cannot be achieved without fundamental structural reform and government and health system commitment to it. *

The implications are clear. System reform is essential.

The health system is under stress, with increasing budget and demand pressures. It is not sustainable into the next generation on grounds of quality of care, efficiency and equity.

Despite this escalating pressure and demand, a professional, committed and passionate workforce staffs South Australia's health services, with many people working over and above required working hours. The workforce cannot sustain the pressures for much longer, despite the support of dedicated volunteers and family carers.

* GHR's proposals address this unsustainability. Unless they are acted upon, the government will face difficulties in achieving its health and social agenda commitments. *

The directions proposed in this report are not new or world-shattering. They are similar to what is happening internationally in health in countries comparable to Australia. It is not the directions that are controversial; it is the act of implementing them.

Systemic reform of the health industry is not easy. However, there are real reasons for optimism. Though there are no guarantees of success, the dynamics of change are much better understood. Knowing the challenges and the difficulty of the work will be an advantage and will thwart unrealistic expectations.

* **Chapter One** presents the case for change for the South Australian public health system. A wide range of factors impact on the health system. These include significant demographic, cultural, economic and social changes, and dramatic changes in health care delivery and technology. There is also increasing community awareness, with consumers expecting and believing they have the right to the best of the latest technology and treatments, despite the uncertain values of some of these interventions.

* By world standards, Australia has a good health system. However, there are inequalities. The role of the social determinants of health¹ are addressed in this context. The burden of disease has moved towards more chronic conditions. All of these factors cause pressure on the system and impact on the capacity of the system to maintain high quality, safe services.

* A modelling exercise carried out by GHR to the year 2011 indicates that, if the proposed reforms are not implemented, the future scenario is bleak. There will be a continuing demand for additional investment in acute hospital services at the expense of primary care. Treatment of illness will remain the dominant focus rather than prevention and early intervention.



Implementing the 10 Year Local Health Service Plans



* NOT PORT PIRIE

Country Health SA has established five local Taskgroups to prioritise and implement the recommendations of the 10 Year Local Health Service Plans.

The Taskgroups have been created according to geographical area and will cover:

- > Eyre, Flinders Ranges and the Far North
- * > Mid and Lower North, Yorke and Barossa
- > Inner Country
- > Riverland and Mallee Coorong
- > South East

Brett Humphrys (A/Manager, Planning Projects) said the five Taskgroups has commenced their role to determine the top health priorities for implementation across the region over the next three years.

* "The local community has been working for some time now on their 10 Year Local Health Service Plans which provide the strategic long term vision for their health services," Mr Humphrys said.

"Each Taskgroup has reviewed the directions outlined in the plans for their areas to determine the priorities and timing for new or enhanced health services."

The members of the Taskgroups come from a variety of professions including doctors, nurses, allied health staff, Aboriginal health delegates, local government representatives and HAC members.

* Mr Humphrys said the Taskgroups have considered the recommendations in the 10 year plans and are working with key stakeholders to outline how the priority services can be implemented.

"The Taskgroup will draft a 1-3 year implementation plan which will give consideration to aspects such as Aboriginal health, aged care and mental health; and what actions and resources are required to implement the important priorities in the short term," Mr Humphrys said.

The Taskgroups will aim to complete the 1-3 year implementation plan by the end of March 2012.

The 10 Year Local Health Service Plans were prepared by local Health Advisory Councils in conjunction with local clinicians and health services.

* In February 2011, the Minister released four of the 33 plans outlining strategic directions for Whyalla, Port Lincoln, Mount Gambier and the Riverland.

The 29 remaining plans will be finalised and released in the coming months.

Visit www.countryhealthsa.gov.au/planningservices to find out more about the 10 Year Local Health Service Plans. You can view the membership of the five Taskgroups and much more. Comments and feedback can be made to Taskgroups by emailing CHSAImplementation

Increased paediatric capacity at Mount Gambier



Children and parents in the South East have a new reason to smile with increased capacity in the paediatric team at Mount Gambier Hospital.

The facility now has two fulltime paediatricians and recruitment is ongoing for a further .5 position, a significant boost to children's health in the region.

The team is also supported by a full time medical officer and a paediatric registrar position which is filled by trainees on a six month rotation.

Paediatrician Dr Shahid Haque said the increased capacity was very good news for the South East.

"With the great paediatric team we have in place now we are better equipped to meet the needs of the local community," Dr Haque said.

"It's a significant increase to the level of service we're able to provide and this is reflected in the extra workload we're seeing now.

"We're getting busier and busier all the time."

Dr Haque said the vast improvement in the equipment available at Mount Gambier Hospital was also a big factor.

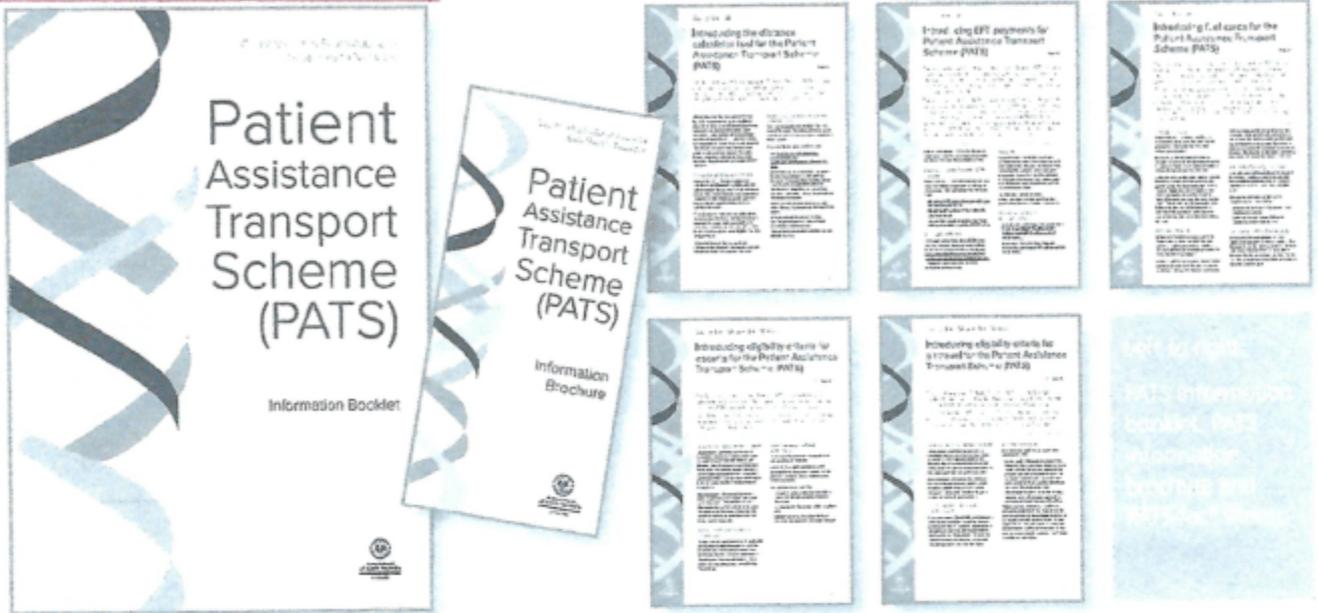
"Previously many patients were required to travel to Adelaide for simple diagnoses," Dr Haque said.

"It's hard for patients to make that journey especially when we're talking about parents with sick children.

"Now a vast majority can come to Mount Gambier Hospital which is much more convenient.

"This is a really positive thing for the Mount Gambier community."

Improvements to the Patient Assistance Transport Scheme announced



The Patient Assistance Transport Scheme (PATS) is a subsidy program funded by the Government of South Australia to assist people travelling more than 100km each way to receive approved medical services.

Nino DiSisto, Director of Country Health SA said enhancements are being introduced to the scheme to streamline the process when patients need to travel to access specialist health care.

"Earlier this year we introduced the first round of improvements which included an online distance calculator and electronic funds transfer," Mr DiSisto said.

"The new online distance calculator uses up-to-date GPS mapping data to allow patients, health practitioners and the broader community to determine how many kilometres need to be travelled and receive an estimate of their PATS reimbursement.

"Then instead of waiting for a cheque to arrive, patients will have the funds deposited into their account, avoiding frustrating delays in purchasing fuel and tickets."

Mr DiSisto said further changes were introduced from 1 November 2011 including pre-approved medical endorsement for air travel and clinical criteria for approval of air-travel and escorts.

"These PATS updates have been introduced to make the process faster, fairer and more consistent for all patients across Country Health SA," Mr DiSisto said.

"Under the new system South Australians will have a more efficient and secure service to support them when they need it the most."

All the changes are explained in a new Information Booklet, Brochure, Fact Sheets and Application Form.

Over 25 information forums were held across regional South Australia to explain the refinements, and deliver the new communications materials to stakeholders between September and October 2011.

Improvements from 1 November 2011

- > Eligibility criteria & pre approval for air travel (outlined in Information Booklet)
- > Eligibility criteria for escorts (outlined in Information Booklet)
- > New Information Booklet and Brochure
- > Facts sheets on escorts and air travel
- > Updated application form

How does the PATS process work?

STEPS

- 1 Go to the local doctor***
 - Verify that the specialist service is not available locally and seek authorisation for PATS assistance (transport, accommodation or escorts).
 - Local doctor completes section 1 of application form on first claim of this issue.
- 2 Go to the specialist***
 - Confirm attendance and need for further appointments and PATS assistance (transport, accommodation or escorts).
 - Specialist completes section 2 of application form.
- 3 After your medical appointments**
 - Patient/service provider completes section 3 of application form.
 - Send completed forms and receipts to PATS office.
- 4 Payment**
 - Payment of any assistance you're entitled to within six weeks of lodgement.

* In those limited instances where local doctors or specialist claims are found to be clinically essential, approval from PATS is required before you travel.

To find out more please visit www.countryhealthsa.sa.gov.au/pats or contact PATS on (08) 8721 1551.

ESTABLISHING SPECIALISTS CENTRES
COUNTRY REGIONS
FOLLOWING DENIED FUNDING 2009.

InCountryHealth

* Issue 1 – December 2011 *

3 Murray Bridge
embraces
Telephysiatry

Increased
paediatric capacity
at Mount Gambier

5 Improvements
to PATS

\$36 Million Ceduna Redevelopment Complete



The new Ceduna District Health Services main entrance.

* The Ceduna GP Plus Health Care Centre has opened its doors to local residents, marking the completion of the \$36 million Ceduna District Health Services redevelopment. *

GP services, Child and Adolescent Mental Health, dental services, community health, allied health and Home and Community Care Services are all now available.

Health Minister John Hill says the redeveloped facility is a great asset for the Ceduna community, offering a new - integrated - approach to health.

"The Government and Country Health SA are committed to enhancing primary health care services in country areas to help reduce demand on our local hospitals," Minister Hill said.

"The Ceduna District Health Services redevelopment is a fantastic example of this, with acute hospital services and primary health care services now under the same roof.

"Patients are able to access hospital services, GPs, dentistry, community health, allied health, physiotherapy, mental health, dietetics and a day activity centre, all from a single point of entry."

Stage One of the project was completed in March 2011 with a brand new Emergency Department, theatre suite, day procedure unit and residential aged care facility added on to the existing building.

Stage Two of the project is now also complete following an extensive refurbishment of the old building which now houses the Ceduna GP Plus Health Care Centre.

"The facility has been specifically designed with patient flow in mind," Minister Hill said.

"The new layout is much easier for the community to navigate and is also more efficient because it shares staff and resources.

"The result is a modern, state of the art design which is accessible to everyone."

The facility was formally opened by the Health Minister on 30 September with an Open Day including tours of the facility, entertainment and a community BBQ.

BASED UPON RESEARCH

Hospitals that have a Country Health SA Local Health Network Home Delivered Meals Service.

Barmera

(08) 8588 0400

Bordertown

(08) 8752 9000

Cleve

(08) 8628 2399

Cooper Pedy

(08) 8672 5009

Elliston

(08) 8687 9110

Gumeracha

(08) 8209 9200

Hawker

(08) 8648 4007

Kangaroo Island

(08) 8553 4200

Kapunda

(08) 8566 2007

Kimba

(08) 8627 2095

Kingston

(08) 8767 0222

Loxton

(08) 8584 8555

Meningie

(08) 8575 2777

Mt Pleasant

(08) 8568 0000

Naracoorte

(08) 8762 8100

Penola

(08) 8737 2311

Pinnaroo

(08) 8577 9222

Country Health SA improves home delivered meal service



Country Health SA has streamlined its home delivered meal service, standardising meal packages and prices across the State.

Under the new system, clients in all parts of South Australia will now receive soup, a main course and dessert when they order their \$6.80 home delivered meal from 19 September 2011.

Country Health SA Executive Director Corporate Services Onno van der Wel said the changes are in keeping with Meals on Wheels SA three course meal service and prices, and will provide consistency to country residents.

"To date, the prices clients have been charged for home delivered meals have varied and there have been differing levels of service, with some clients receiving only main meals whilst others have received the full three courses," Mr van der Wel said.

Prior to 19 September, prices charged for home delivered meals varied from \$4 in Kimba, Cleve and Elliston to \$6.50 in many other locations.

CHSA has staggered the price increase for clients in Kimba, Cleve and Elliston over six months, with costs increasing to \$5.80 from 19 September and will reach parity with other sites from 1 March 2012.

"Standardising prices means that home delivered meals clients in all parts of the State will know that when they place their order, they will receive a nutritious three course meal," Mr van der Wel said.

Patients receiving home delivered meals now get more; they receive a fresh soup, main course and a dessert as a standard service. Previously, not all South Australians received this service.

"We recognise that for people on a fixed income, the increase may have an impact. This is why CHSA is phasing in the new pricing arrangement."

Under the scheme, healthy and nutritious meals are home delivered to clients, including older South Australians, those with disabilities and their carers.

Home delivered meals help improve overall wellbeing, enabling clients to stay in their own homes, enjoy improved health through balanced nutrition and keep in touch with their local community.

For more information about Country Health SA's home delivered meals service, visit www.countryhealthsa.sa.gov.au

InBrief

Midwives now visiting Roxby Downs every two weeks

Expectant mothers in Roxby Downs will now have fortnightly access to support and advice from Port Augusta midwives until the locally based position has been filled.

While the visits previously occurred every six weeks, demand has led Country Health SA (CHSA) to add more midwives to the rotation, meaning the service can now be offered at regular two week intervals.

Ros McRae, Director Flinders and Outback Health Service, CHSA said the visiting midwives provide ante-natal and post-natal appointments, free of charge for anyone in the community.

"Originally we weren't sure how much capacity the visiting midwives would have but with such a fantastic response to the service we've been able to secure more midwives to help staff it," Ms McRae said.

"With current staffing we can now confirm that the visits will occur approximately every two weeks.

*IMPLEMENT * BASED UPON RESEARCH

New contract extension for medical imaging in Port Pirie

Residents in Port Pirie will soon have greater access to radiologists locally with the announcement of an extended medical imaging contract.

Country Health SA has negotiated a three year extension of the contract with I-MED which will offer greater availability of radiologists and the re-introduction of mammography services. I-MED has sourced a new digital mammography machine which was installed last month.

Onno van der Wel, Executive Director Corporate Services said the new extension will offer Port Pirie residents more access to medical imaging services locally.

"I am confident that under this new agreement the service will deliver the high standard of care local residents deserve," Mr van der Wel said.

"The new contract extension will resolve the issues of radiologist and equipment availability in Port Pirie.

* Congratulations to the Port Augusta Community Health team

Joint winners of the Improving Community Wellbeing 2011 SA Health Award for the Aboriginal Community Foodies Program were announced on Friday 18 November 2011.

The program has expanded to include 45 active Aboriginal Community Foodies. Community Foodies is a South Australian nutrition program that aims to build the capacity of communities to make healthier food choices by training and supporting volunteer community members (the 'Foodies') to act as agents for change.



From left to right the Hon Jay Weatherill MP, Premier of South Australia, Carmel Daw, Selina Hill, Judy Johnson, and Lisa Lawton receiving the award.

* The State Government is undertaking the following capital investment projects:

* \$12.49 million for the development of a GP Plus at Port Pirie and upgrade of Hammill House is complete.

\$41 million for the redevelopment of the Riverland Country General Hospital in Berri has commenced construction. \$15 million to help build the \$69.3 million Regional Cancer Centre at the Whyalla Country General Hospital. The Whyalla Regional Cancer Centre will provide easier access to oncology treatment for patients living in the State's north and west.

Do you have an article for CountryHealth?

If you have any contributions or story ideas, please email CHSA@health.sa.gov.au

Applications now open for the 2012 Clinical Practice Improvement Program

Become graduates like Joanne McMillan and Julie Graney of the Mount Gambier & Districts Health Service, to receive a certificate for completing a Clinical Practice Improvement course project. Presented by Margaret Walker, the Project Manager of Surgical & Specialty

Services Division of the Flinders Medical Centre, the graduates completed their project on reducing the incidence of pressure ulcers in patients from the Mount Gambier Hospital. For more information about applying see www.sahealth.sa.gov.au/safetyandquality



From left to right Joanne McMillan, Margaret Walker, and Julie Graney.



www.giff.gov.au/

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Government of South Australia
SA Health

* HEALTH ADVISORY COUNCILS ESTABLISHED 2008 *
 FOLLOWING 2006 - 2009 HAND WRITTEN ONLY - MEDICAL
 SA Health BUSINESS PLAN - RESEARCH CONDUCTED
 * BELINDA MOYES *

Health Advisory Councils

Health Advisory Councils (HACs) are consultative bodies that advise the Minister for Health on issues related to specific groups or regions.

NOT BASED ON 2003 HEALTH REVIEW *
 * Health Advisory Councils were established under the Health Care Act 2008 to provide a more coordinated, strategic and integrated health care system to meet the health needs of South Australians. *

In country areas, Health Advisory Councils are based geographically to ensure a continuing strong link between communities and their health services. There are 42 country Health Advisory Councils (HAC) in South Australia.

The Country Health SA Local Health Network Board Health Advisory Council works with Country Health SA to plan health services for the people of rural and remote South Australia.

Health Advisory Councils in country South Australia may be incorporated or non-incorporated.

Incorporated Health Advisory Councils in country South Australia hold assets, manage bequests and provide advice on local health service needs and priorities. The Country Health SA Local Health Network Board Health Advisory Council holds assets on behalf of non-incorporated Health Advisory Councils.

[View the list of Country Health Advisory Councils](#)

Health Advisory Councils have also been established for SA Ambulance Service (SAAS) volunteers and for Veterans to advise the Minister for Health on particular issues related to these groups

* © 2012 SA Health. * ABN 99 084 024 963. - FORMED 2012
 * Last Modified: 30 Oct 2012 *

ILLEGAL FUNDING - GP PLUS HEALTH CENTRE
 REGISTERED - PRIVATELY OWNED - REGISTERED
 THE SPECIALIST CLINIC
 PRIVATELY FUNDED INVESTORS

INTELLECTUAL PROPERTY THEFT
 UPDATING IMAGING ONLY.

SOUTH AUSTRALIA GOV - FRAUD
 * ILLEGAL FUNDING
 10 YEAR STRATEGY PLAN.

InBrief

Midwives now
 visiting Roxby
 Downs every
 two weeks

Expectant mothers in Roxby Downs will now have fortnightly access to support and advice from Port Augusta midwives until the locally based position has been filled.

While the visits previously occurred every six weeks, demand has led Country Health SA (CHSA) to add more midwives to the rotation, meaning the service can now be offered at regular two week intervals.

Ros McRae, Director Flinders and Outback Health Service, CHSA said the visiting midwives provide ante-natal and post-natal appointments, free of charge for anyone in the community.

"Originally we weren't sure how much capacity the visiting midwives would have but with such a fantastic response to the service we've been able to secure more midwives to help staff it," Ms McRae said.

"With current staffing we can now confirm that the visits will occur approximately every two weeks.

* IMPLIMENT * BASED UPON RESEARCH
 * New contract extension for medical imaging in Port Pirie *
 * Congratulations to the Port Augusta Community Health team

Residents in Port Pirie will soon have greater access to radiologists locally with the announcement of an extended medical imaging contract.

Country Health SA has negotiated a three year extension of the contract with I-MED which will offer greater availability of radiologists and the re-introduction of mammography services. I-MED has sourced a new digital mammography machine which was installed last month.

Onno van der Wel, Executive Director Corporate Services said the new extension will offer Port Pirie residents more access to medical imaging services locally.

"I am confident that under this new agreement the service will deliver the high standard of care local residents deserve," Mr van der Wel said.

"The new contract extension will resolve the issues of radiologist and equipment availability in Port Pirie.

Joint winners of the Improving Community Wellbeing 2011 SA Health Award for the Aboriginal Community Foodies Program were announced on Friday 18 November 2011.

The program has expanded to include 45 active Aboriginal Community Foodies. Community Foodies is a South Australian nutrition program that aims to build the capacity of communities to make healthier food choices by training and supporting volunteer community members (the 'Foodies') to act as agents for change.



From left to right the Hon Jay Weatherill MP, Premier of South Australia, Carmel Daw, Selina Hill, Judy Johnson, and Lisa Lawton receiving the award.

* The State Government is undertaking the following capital investment projects:

\$12.49 million for the development of a GP Plus at Port Pirie and upgrade of Hammill House is complete.

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From left to right Joanne McMillan, Margaret Walker, and Julie Graney.



www.health.sa.gov.au

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Government of South Australia
 SA Health

EFTA00268315

-
- 4.12 DHS develop a strategy for coordinating ongoing public information and education across the health system.
-
- 4.13 DHS support the development of community capacity to provide independent consumer voices within the health system.
-

* Chapter 5: Workforce development

-
- 5.1 DHS and health services provide management training and development to ensure effective leadership capacity and creative responses to change.
-
- 5.2 DHS establish a statewide health workforce planning group with responsibility for:
- * (i) developing integrated information systems, including human resource systems, that will provide accurate workforce data and information *
 - (ii) developing a strategic planning process that employs appropriate evidence based methodologies and enables identification of future health workforce requirements
 - (iii) ensuring integration of workforce, service and financial planning
 - * (iv) developing partnerships with universities, technical and further education, and other key stakeholders, to facilitate implementation of health workforce plans
 - (v) developing a future clinical workforce that reduces demarcations, encourages teamwork, and enhances career opportunities and skills
 - (vi) developing a marketing and recruitment capacity for the health system with resources contributed by major public and private employers
 - (vii) developing an approach to regular staff satisfaction/climate surveys to be used by DHS and regional health services with the capacity for statewide benchmarking.
-
- 5.3 DHS develop a comprehensive strategy to attract mature age students from rural areas into health professional education. *
-
- 5.4 The State Government, through DHS and all South Australian universities, approach the Commonwealth Government to seek approval and funding for the introduction of a postgraduate distance education program for generic rural health practitioners. *
-
- 5.5 DHS provide a focus on the development of the Aboriginal health workforce by initially:
- (i) regulating and formally recognising the role of the Aboriginal health worker
 - (ii) extending funding for Aboriginal health worker training from an annual cycle to a three-year cycle
 - (iii) increasing the number of clinical placements for Aboriginal nurses
 - (iv) funding statewide cultural awareness training on an ongoing basis to address racism faced by Aboriginal health staff.
-

The South Australian health 'system' is fragmented and uncoordinated. This is exemplified by multiple planning processes, regional boundaries, project funding and governance arrangements.

The case for change provides a blunt message. System reform is the only way to ensure that the next generation of South Australians has a health system that meets its needs.

- * **Chapter Two** outlines how today's governance arrangements in the South Australian public health system are enshrined in the South Australian Health Commission Act 1976 (SAHC Act) which brought together a range of disparate hospitals and health services under a unified system of governance.

Times have changed. Today, one of the primary objectives of health systems around the world is to promote cohesion, ensuring service coordination and integration to best meet population health needs. The challenge for governments is to improve coordination and integration without losing the ability to remain responsive to local and regional communities.

The current governance and funding arrangements of the system, which has over 70 separately incorporated health units, present a significant challenge to establishing a coordinated and reoriented system for the future.

A population health funding model is recommended, supported by a regional governance structure to promote population health, meet equity objectives and find ways to enhance service coordination and collaboration.

- * **Chapter Three** outlines the weaknesses in the current care delivery system. Apart from the fragmentation and lack of cohesion previously mentioned, the Commonwealth-state funding arrangements provide an additional impediment to establishing a seamless primary health care focused system.

* The lack of information technology, telecommunications and appropriate community based resources has also retarded progress. * A framework is provided to assist in overcoming some of these obstacles to achieving a primary health care focused system that has a commitment to disease prevention, health promotion and early intervention. Key attributes are explored, from consumer and system perspectives. System components and mechanisms for integration, partnerships and coordination are described.

- * Engagement with the Commonwealth and local governments is required to ensure coherence of planning, policy and funding directions to enable an integrated primary health care system to be provided. Enabling infrastructure, specifically for information technology, telecommunications, capital, research and health futures, is addressed.

Chapter Four puts the case that accountable and effective management of public resources is a fundamental responsibility and challenge for government. Accountability and transparency for the quality and safety of health services is a key aspect of health system performance. However, information is typically poorly disseminated and engagement of the community, consumers and clinicians in decision-making processes happens more by chance than by design.

A framework is provided that will deliver accountable and transparent governance of the health system, founded on the principles of community, consumer and clinician involvement. Mechanisms and structures are proposed to provide meaningful community involvement in decision making and strong clinical governance.



Government
of South Australia

2009MHE-03570

Miss [REDACTED]

Office of the:
Minister for Health
Minister for the
Southern Suburbs
Minister Assisting the
Premier in the Arts
Level 9
11 Hindmarsh Square
Adelaide SA 5000
GPO Box 2555
Adelaide SA 5001
DX 243
Telephone (08) 8463 6270
Facsimile (08) 8463 6271
[REDACTED]

Dear Miss [REDACTED]

On behalf of Hon John Hill MP, Minister for Health, I acknowledge receipt of your letter of 18 September 2009 about a Specialist Medical Centre for Port Pirie.

Your correspondence is currently receiving attention and a response will be forwarded at the earliest opportunity.

Yours sincerely

R. Dow

for Carolyn Lee - NAME COMPARISON
Manager
Office of the Minister for Health

Date: 2.10.09

APPLY FOR FUNDING - COMPLETED MEDICAL BUSINESS PLAN
NO MENTION OF 2008 MEDIA RELEASE - GP PLUS CENTRES IN DEVELOPMENT
* Hon John Hill MP *
CLAIMED LAUNCHED BY MINISTER OF HEALTH



Government
of South Australia

2009MHE-03570

Miss [REDACTED]

Minister for Health
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Southern Suburbs
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11 Hindmarsh Square
Adelaide SA 5000
GPO Box 2555
Adelaide SA 5001
DX 243
Telephone (08) 8463 6271
Facsimile (08) 8463 6271
[REDACTED]

Dear Miss [REDACTED]

Thank you for your letter of 18 September 2009 about the establishment of a Specialist Medical Centre in Port Pirie.

SA Health recognises and encourages private medical services to be established within rural communities. SA Health and Country Health SA (CHSA) have a long established history of working collaboratively with private medical practitioners in the provision of health services to the residents of local communities.

Currently, CHSA and the local Health Advisory Council for Port Pirie are engaged in a 10 year health service needs and planning process. This process will identify the needs of the local community and support the planning of long term health services to meet those needs. You may wish to consider discussing your proposal to establish the Specialist Medical Centre in Port Pirie with Mr Roger Kirchner, Director Mid North Cluster, CHSA on telephone 8638 4575.

Thank you for bringing this matter to my attention and I trust this information will be of assistance to you.

Yours sincerely

MINISTER FOR HEALTH

Date: 10/11/09



Employment Directions

Links to Seek Employment On Line

South Australian Government's Notice of Vacancies website

<http://www.vacancies.sa.gov.au>

* SA Health - Roger Kirchner - ^{admin} Secret. 2009 *

<http://www.sahealthcareers.com.au>

Australian Job Search

<http://jobsearch.gov.au>

Seek

<http://www.seek.com.au>

Indeed

<http://www.indeed.com.au>

Jobs.com

<http://jobs.com.au>

Jobseeker

<http://www.jobseeker.com.au>

Career One

<http://www.careerone.com.au>

The Resource Channel (Mining Vacancies Australia Wide)

<http://www.theresourcechannel.com.au/job-board?>

[keys=&location=101&discipline=All&industry=All&q=Search+Jobs&level=All&class=Any&posted=All&quicksearch=true](http://www.theresourcechannel.com.au/job-board?keys=&location=101&discipline=All&industry=All&q=Search+Jobs&level=All&class=Any&posted=All&quicksearch=true)

To seek Mining vacancies go to each individual company website & apply direct eg:

- BHP Billiton
- Heathgate Resources
- Skilled
- Rio Tinto
- Brambles
- Monadelphous
- Oz Minerals
- Chandler Macleod
- Santos

To seek Retail vacancies go to each individual company website & apply direct eg:

- Kmart
- Auto Pro
- Supa Cheap
- Coles
- Supa Cheap Auto
- Reject Shop
- Woolworths
- Target
- Go-Lo

SALVEMINI (MAIDEN NAME)

REFER TO STAGE 3 - LANYER INVOLVEMENT - DETAINMENT (RESULT)
DENIED FUNDING.

Our ref: 13YNRR063



Government of South Australia

SA Health

Country Health SA Local Health
Network Inc.

Yorke and Northern Rural
Region

c/- Port Pirie Regional Health Service
The Terrace
PO Box 546
PORT PIRIE SA 5540

Phone (08) 8638 4581
Fax (08) 8638 4356
ABN 96 157 660 816

Website www.health.sa.gov.au

1 May 2013 - SUBMITTED TO JOHNSON LANYERS
JOHN JAMES

Ms [REDACTED]

Dear Ms [REDACTED]

I write in response to your letter dated 23 April 2013 in which you are seeking information on the meetings that have occurred during the year of 2009 between you and I so you can provide this information to the Minister for Health.

I can confirm that we have met on two occasions to discuss your proposed Business Plan and research and that these meetings were held on 11 December 2009 and 5 February 2010 as arranged by my then Executive Assistant, Ms Jemma Salvemini.

I also understand that you would like information on the role of the Port Pirie Health Advisory Council (HAC) and that you are considering applying to the HAC to become a member. Can I please suggest that you write to the HAC expressing your interest in becoming a member and ask that the HAC consider your nomination. The letter can be made attention to Mr Barry Hay, Presiding Member of the Port Pirie Health Advisory Council, PO Box 546, Port Pirie SA 5540.

I will be in contact with you shortly to discuss the role and function of the HAC.

Yours sincerely

Roger Kirchner - SA HEALTH 2009
Regional Director



Government of South Australia

SA Health

Port Pirie Regional Health Service

Country Health SA

The Terrace
PO Box 546

Port Pirie SA 5540

Tel 08 8638 4500

Fax 08 8638 4356

ABN 96 157 660 816



www.pprhs.sa.gov.au

www.health.sa.gov.au

* Ms [Redacted] *

WVC SA 520 EXPRESS POSTAGE PAID AUSTRALIA

* Book *
[Redacted]
(Danielle PA)
GEMMA (2009)
SALVEMINI - HEIDI
SALVEMINI

OBTAINED FROM REGIONAL DEVELOPMENT BOARD
ADVISED TO APPLY FUNDING WITH LOCAL GOVERNMENT OF PORT
PIRE - FOLLOWING COMMONWEALTH BANK DENIED FUNDING.

*** HOW TO APPLY GOVERNMENT GRANTS ***

When applying for government grants there are a few simple things to remember so the proposal isn't rejected. Make sure they aren't late, make sure they are on the appropriate forms, and make sure that they comply with the stated guidelines.

To ensure your proposal gets full consideration:

- Make sure the projects fit the guidelines and intent.
- Specify categories of costs to reflect the areas that funding can cover. In some cases, only actual costs are allowed. Keep accurate records of expenditures and receipts.
- Submit the required number of application copies.
- Submit the application on time.
- Consider payment procedures, schedules, and partial payment schedules. Evaluation reports are often essential to final funding.
- Check on copyrights and credits. Make sure you know if the funding organization requires credit. Check where copyright of materials is necessary and whose responsibility it is to get it.

OBTAINED FROM REGIONAL DEVELOPMENT BOARD
ADVISED APPLY FOR FUNDING.

Toni Bastian



Mid West Division of Rural Medicine

Barry W
Crystal Brook.

Rob Kerin

Vicki Manner
RECEPTIONIST

Generational Health
Review
2003

Conway - corner.
Brock-



FUNDING CONFIRMATION DENIED 2015
 Frome Electorate Office

* Dianah Mieglich *
 * Assistant to Geoff Brock MP *
 Member for Frome

Shop C, Ellen Centre, Port Pirie | PO Box 510, Port Pirie
 Ph: [REDACTED]

, two members)		
		Term
Ebenezer Ward	none	1884–1890
William Copley	none	1884–1887
Clement Giles	none	1887–1890
Laurence O'Loughan	Liberal	1890–1902
Clement Giles	Conservative	1890–late 1890s
	National Defence League	Late 1890s–1902
Second incarnation (1938–1977)		
Member	Party	Term
Mick O'Halloran	Australian Labor Party	1938–1960
Tom Casey	Australian Labor Party	1960–1970
Ernest Allen	Liberal Party of Australia	1970–1977
Third incarnation (1993–present)		
Member	Party	Term
* Rob Kerin *	Liberal Party of Australia	1993–2008 *
* Geoff Brock *	Independent	2009–present *

* - DENIED FUNDING
 DENIED PROOF OF
 APPOINTMENT / MEETING
 IN 2015 - 2016.
 DENIED ASSISTANCE
 ILLEGAL ACTIVITY

Election results

Main article: Electoral results for the district of Frome

South Australian state election, 2010: Frome				
Party	Candidate	Votes	%	±%
Independent	Geoff Brock	7,965	37.7	+37.7
Liberal	Terry Boylan	7,713	36.5	-12.0
Labor	John Rohde	3,900	18.5	-22.0
Greens	Joy O'Brien	644	3.1	-0.7
Family First	John McComb	561	2.7	-2.5
Save the RAH	Max Van Dissel	328	1.6	+1.6
Total formal votes		21,111	97.2	
Informal votes		587	2.8	
Turnout		21,698	94.8	
Two-party-preferred result				
Labor	John Rohde	10,585	50.1	+1.8
Liberal	Terry Boylan	10,526	49.9	-1.8

Electoral district of Frome

From Wikipedia, the free encyclopedia

Frome is an electoral district of the House of Assembly in the Australian state of South Australia. It is named after Edward Charles Frome, the third surveyor-general of South Australia. The electorate is based around the industrial city of Port Pirie and the agriculture areas of Clare and Gilbert Valleys. It covers a total of 6,889.7 km² and takes in the towns of Auburn, Clare, Crystal Brook, Gladstone, Laura, Mintaro, Penwortham, Port Broughton, Port Pirie, Snowtown, Tarlee and Riverton.

Frome has existed in three incarnations throughout the history of the House of Assembly: as a multi-member marginal electorate from 1884 to 1902, as a single member electorate in a multi member electoral system from 1938 to 1977, and as a marginal to moderately safe seat for the Liberal Party of Australia since 1993.

The first incarnation was, like the rest of the state, independent-held until the development of the party system until in the 1890s. The two seats were split evenly with a conservative and a liberal member from 1890 until the seat's abolition in 1902.

The second incarnation began in 1938 after the introduction of the Playmander. The electorate was dominated by the Labor-voting town of Port Pirie as a single member seat. The seat was won by Mick O'Halloran, who served as Opposition Leader from 1949 until his death in 1960. After the end of the Playmander which saw all electorates hold approximately the same number of voters, Frome took in more rural areas around Port Pirie, and was lost by Labor to the Liberal and Country League, until the abolition of the seat in 1977.

The third incarnation saw the seat revived at the 1991 redistribution as a marginal seat, which took in Port Pirie and surrounding rural areas. It was first contested at the 1993 election and was won by Liberal candidate Rob Kerin.

Kerin chose to retire in November 2008, which triggered a January 2009 Frome by-election. The seat was won by independent Geoff Brock after a very close preference contest in which Brock finished second place by 30 votes, with the Liberals in front and Labor coming third. Brock received sufficient preferences from the eliminated Labor candidate to prevail over the Liberal candidate by over 600 votes, or 51.7 percent of the two-candidate preferred vote. He increased his primary and two-candidate vote significantly at the 2010 election, and the Labor candidate notably won the two-party preferred vote against the Liberal candidate by 30 votes.

**FOLLOWING DEPLETED SOURCE OF FUNDING - LANYER INVOLVEMENT
FRAUDULENT ACTIVITY - HOMESTART / UTILITIES**

Calling polities with ag backgrounds

Investment in SA country health



* 18 Jun 2009 01:13 PM *

The Budget guaranteed more than \$39 million in additional operating funds for country health in South Australia to help meet the increasing demand for healthcare services.

Health Minister John Hill said the total operating expenditure budget for Country Health SA in 2009-10 was \$630.4m, which is a 7 per cent increase on the last financial year.

"We're also investing \$51m over four years to fund 160 additional full-time nursing and midwifery positions across the State," he said.

Since 2002, 902 doctors have been employed and 2883 nurses.

The 2009-10 Capital Program for country SA includes:

* \$1.6m to upgrade Hammill House Nursing Home at Port Pirie Hospital.

* \$360,000 for the construction of the Port Pirie GP Plus Health Care Centre.

* \$15.6m towards the \$36m redevelopment of Ceduna Hospital.

* \$7m towards the \$15m redevelopment of Whyalla Hospital.

* \$5.7m to start the \$41m redevelopment of Berri Hospital.

* \$4.97m for Improving Care for Older Patients in Public Hospital which includes the implementation of privacy, fire and safety improvements in a number of country facilities.

* \$2.1m to replace two BreastScreen SA country mobile units that will incorporate digital mammography technology.

* \$900,000 for the provision of new intermediate care mental health facilities within Country Intermediate Care Facilities.

* \$579,000 for the upgrade of Ambulance Stations - Country Volunteer Staffed.

* \$440,000 for Urology equipment in Mount Gambier.

* \$75,000 for a new eye surgery machine in Port Lincoln.

John Hill

Source: <http://www.ministers.sa.gov.au>

POST A COMMENT

Screen name *

Email address *

Remember me?

02 November, 2012 - The Hon Mark Butler MP, *Minister for Mental Health and Ageing, Minister for Social Inclusion, Minister Assisting the Prime Minister on Mental Health Reform*

Respite Services to be Extended Across Australia

Minister for Mental Health and Ageing Mark Butler has announced an additional \$12.1 million in funding to extend the National Respite for Carers Program (NRCP).

*** BILL GATES + AUSTRALIAN GOVERNMENT - EASY EDITOR ***

02 November, 2012 - The Hon Tanya Plibersek MP, *Minister for Health*

*** Australia and Gates Foundation Fund Fight Against Drug Resistance -**

Australia is providing \$5 million to the World Health Organization (WHO) over the next three years as part of a project jointly sponsored by the Bill & Melinda Gates Foundation to deal with the emerging threat of drug-resistant malaria in the Greater Mekong Sub-region.

*** REFER STAGE 4 INTELLECTUAL PROPERTY THEFT ***

01 November, 2012 - The Hon Tanya Plibersek MP, *Minister for Health*

Improved Access to Medicare-Funded MRI Services

Thousands of patients, particularly children, will benefit from expanded access to Medicare-funded Magnetic Resonance Imaging (MRI) services.

01 November, 2012 - The Hon Mark Butler MP, *Minister for Mental Health and Ageing, Minister for Social Inclusion, Minister Assisting the Prime Minister on Mental Health Reform*

Baseball League to Tackle Binge Drinking

The Australian Baseball Federation and the Australian Baseball League have formed a landmark partnership to sign up to the Be the Influence: Tackling Binge Drinking campaign.

31 October, 2012 - The Hon Warren Snowdon, *Minister for Indigenous Health*

New Grants Build on the Work at 58 Men's Sheds

More than fifty Men's Sheds across Australia will receive funding from the Australian Government to upgrade their facilities or buy new equipment and tools, in the latest round of grants announced on 31 October.

31 October, 2012 - The Hon Catherine King, *Parliamentary Secretary for Health and Ageing*

Australians Warned of Late Effects of Polio

Doctors and the general community have been urged to learn about the late effects of polio, which

FOLLOWING DENIED FUNDING 2009.

* Work starts on GP Plus centre *

By Celeste Lustosa

Nov. 29, 2012, 10:38 a.m. *



The Department of Health released this concept of the GP Plus Health Care Centre, to be located on Gertrude Street.

Work is underway on the \$12.5 million project, which is expected to be completed by the end of next year.

Work has begun for the construction of a new \$12.5 million GP Plus Health Care Centre in Port Pirie, expected to be completed by end of next year.

The new facility will be built on Gertrude Street, at the site of the YMCA building, near the hospital and will provide physical infrastructure to support the delivery of integrated services, including space for consulting rooms, group meetings, therapy procedures and car parking.

The integrated health service will offer more access to preventative health care and an increase in the range of programs available.

"The new \$12.5m GP Plus Health Care Centre will help Port Pirie residents to prevent and manage chronic disease and stay healthy and out of hospital," said Roger Kirchner, Director of the Mid North Health Services.

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- [The Hon Tanya Plibersek MP - Minister for Health - Media Items](#)
- [The Hon Mark Butler MP, Minister for Mental Health and Ageing - Media Items](#)
- [The Hon Warren Snowdon MP, Minister for Indigenous Health](#)
- [The Hon Catherine King MP, Parliamentary Secretary for Health and Ageing](#)

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[Advanced Search](#)

All Portfolio Ministerial Media items from the current government

A A A

All portfolio ministerial media items.

14 April, 2013 - The Hon Tanya Plibersek MP, *Minister for Health*

[New Anti-Smoking Campaign 'Stop before the Suffering Starts'](#)

Health Minister, The Hon Tanya Plibersek, has launched a brand new wave of anti-smoking advertising in the Australian Government's latest world-leading efforts to help Australians stop smoking for good.

11 April, 2013 - The Hon Tanya Plibersek MP, *Minister for Health*

[Immunisation Rates High But More Work to Do](#)

10 November, 2012 - The Hon Mark Butler MP, *Minister for Mental Health and Ageing, Minister for Social Inclusion, Minister Assisting the Prime Minister on Mental Health Reform*

[New Aged Care Places Offered as Reform Plan Moves Forward](#)

More than 14,000 new aged care places will be offered across Australia for 2012-13 as part of implementing the Government's \$3.7 billion aged care reform plan – *Living Longer Living Better*.

09 November, 2012 - The Hon Tanya Plibersek MP, *Minister for Health*

[Transcript of Doorstop - Standing Council on Health - Perth - 9 November 2012](#)

09 November, 2012 - The Hon Tanya Plibersek MP, *Minister for Health*

[Federal Minister Welcomes Leadership on Medical Interns](#)

Health Minister Tanya Plibersek today congratulated those jurisdictions that are working with the Commonwealth to fund additional medical internship training in public and private hospitals.

09 November, 2012 - The Hon Tanya Plibersek MP, *Minister for Health*

[Minister Welcomes Western Australian Funding for Intern Training](#)

The Minister for Health, Tanya Plibersek, has welcomed the Western Australian Government's decision to fund additional medical internship training in the state's public and private hospitals.

09 November, 2012 - The Hon Tanya Plibersek MP, *Minister for Health*

[Springborg's Three Card Trick on Health Funding](#)

Health Minister Tanya Plibersek has said the Australian Government's investment in Queensland's health continues to grow.

* 09 November, 2012 - The Hon Tanya Plibersek MP, *Minister for Health*

* **[Davis' Three Card Trick on Health Funding](#)** *

* Health Minister Tanya Plibersek has said the Australian Government's investment in Victoria's health continues to grow.

09 November, 2012 - The Hon Tanya Plibersek MP, *Minister for Health*



Concept image of the Modbury Hospital redevelopment.

Budget highlights

2015 - 2016
 FOLLOWING
 2006-2009 MEDICAL BUSINESS
 PLAN RESEARCH + DEVELOPMENT

* Transforming our health system *

More than **\$260 million** has been committed to upgrade our metropolitan hospitals, so we can deliver the best care for patients first time, every time.

One year of helping some of our most seriously injured

This budget marks the one year anniversary of the Lifetime Support Scheme which is expected to invest around **\$14 million** in 2015-16 to help motorists severely injured in vehicle accidents in South Australia get the rehabilitation and support they need sooner, so they can return to their homes and community.

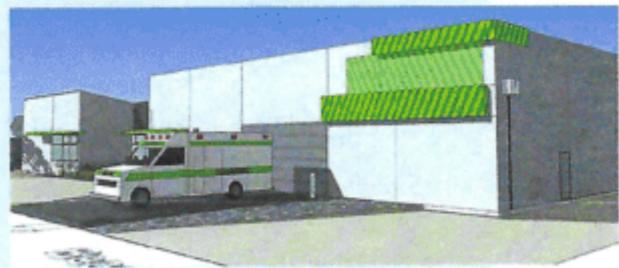
Supporting Health Research

An additional \$5.1 million over four years, on top of our **\$33.7 million** investment, has been made available by the State Government to support the South Australian Health and Medical Research Institute so that it can continue vital research to help us live healthier lives and reduce the level of healthcare we need in the future.

Making our paramedics jobs easier

This budget invests \$4.8 million in 2015-16 towards the **\$15.5 million** replacement of ambulance mechanical stretchers and handling units, to decrease the number of injuries experienced by our dedicated paramedics and increase patient comfort.

An additional **\$16.1 million** over two years will also be invested to expand the ambulance fleet by 12 vehicles and to build and expand ambulance stations in the North, West and South. In addition, SA Health is committing funding to help get more ambulance crews on our streets and support staff.



* 21 March, 2013 - The Hon Tanya Plibersek MP, *Minister for Health*

* **Record Number of GPs in Training** *

This year's record number of GPs in training will boost the number of doctors in country Australia and develop the next generation of qualified GPs.

20 March, 2013 - The Hon Mark Butler MP, *Minister for Mental Health and Ageing, Minister for Social Inclusion, Minister Assisting the Prime Minister on Mental Health Reform*

Greater Support for Younger Australians With Dementia

Thousands of people living with younger onset dementia will receive vital support thanks to a \$16.8 million investment by the Australian Government.

20 March, 2013 - The Hon Mark Butler MP, *Minister for Mental Health and Ageing, Minister for Social Inclusion, Minister Assisting the Prime Minister on Mental Health Reform*

More Scholarships for Aged Care Workers

Minister for Ageing Mark Butler has announced 72 new aged care nursing scholarships as part of the Australian Government's commitment to boost the aged care workforce.

19 March, 2013 - The Hon Tanya Plibersek MP, *Minister for Health*

Services Delivered by Medicare Locals to be Cut by Tony Abbott

The Federal Coalition has confirmed its policy to scrap Medicare Locals.

19 March, 2013 - The Hon Tanya Plibersek MP, *Minister for Health*

Bulk Billing Rates at Record Highs

Bulk billing rates for GP services are at an equal record high, with 82% of GP services bulk billed in the December quarter.

19 March, 2013 - The Hon Tanya Plibersek MP, *Minister for Health*

Speech - Breathing New Life into General Practice Conference

QUEENSLAND POLICE TARGETING - MONEY LAUNDERING

- OBTAINED 2016 - REASON FRAUDULENT ACTIVITY
- *BARCODE - QUEENSLAND POLICE INVOLVEMENT*
- * REMOTELY ACCESSING SERVERS, ACCOUNTS, COMPUTER HARDWARE - POLICE + GOVERNMENT SOURCES *
- * CONFIRMED ODRI TEBSTRA HEAD OFFICE *



* IDENTIFIED AS POLICE INVOLVEMENT *
 REMOTE ACCESS RESULTING IN ILLEGAL ACTIVITY
 QUEENSLAND POLICE INVOLVEMENT IN
 ORGANISED TARGETED CRIME
TELCO - MONEY LAUNDERING THROUGH UTILITY ACCOUNTS *

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Account number
 Tax invoice
 Issue date
 12 Oct 16
 Total amount due
 See the Account Summary on page 2

1 Nov 16

\$502.45
 AMOUNT CHARGED
 FOLLOWING \$65.00
 A FORTNIGHT PAYMENT
 ON ELECTRICITY -
 CENTRELINK DEDUCTION

\$12.00 fee may apply if paid after due date unless you're on Predictable Plan

DailySaver Choice ending 21 Aug 17
 Benefits available on this energy plan
 Guaranteed usage discount (16%)

Average cost per day \$5.52
 Average daily usage 21.38 kWh
 Same time last year N/A

Your indicative greenhouse gas emissions
 This bill 3.3 tonnes
 Same time last year N/A
 Saved with GreenPower N/A

\$5.52	21.38
COST PER DAY	DAILY USAGE

For more information on greenhouse gas emissions visit originenergy.com.au

POLICE INVOLVEMENT IN TARGETING

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