



RSL CARE SA

RSL Care SA Annual Report 2021 - 2022

"We thank you very much for the care, support and compassion you showed our late father during his residency. Our family was also shown great support, understanding and friendship and we thank you all. We miss our interactions with the staff and residents. Wishing you all the very best and keep up your wonderful work".

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BOARD CHAIR



Geoff Tattersall

I begin our 107th annual report with a continuation of the dominant theme from last year – COVID-19. The ongoing consequences of the pandemic and the necessary constraints to protect residents that have come with it has continued to have major implications for the Board, management team, residents, families and staff, especially in residential aged care. RSL Care SA has responded well to these challenges and despite the inconveniences felt by all, the vast majority of feedback from families and residents has not only been accepting of what has needed to be done, but appreciative of the actions taken to look after the resident's interests and facilitate visiting residents by family members to the extent possible under the "rules" imposed by government policy. We have not been without COVID-19 occurrences, but have largely avoided the sad experiences that some other organisations have had across Australia. I therefore start my report by commending and thanking our staff for what they have done, the positive manner in which they have done it, and what they continue to do in whatever role they play, noting all roles contribute to the wellbeing of residents. I also thank residents and their families for their good will.

As I expressed in last year's report, in my view the aged care sector generally, and those who work in

it, have been unreasonably tarnished in the media and by some political point scoring commentators because of the unacceptable examples of poor care by some providers. They fail or choose not to recognise the efforts of the many staff in the industry who have continued to come to work under difficult circumstances and not without risk to themselves and their own families, to care for the loved ones of others, day in, day out. I could well understand if our staff had "walked away" to try some other career, but they haven't. They have continued to turn up for work to care for residents, they have responded well to changing circumstances and taken the many constraints in their stride and have done so professionally, with good humour and grace. The Board is extremely grateful for the service of our staff and the leadership shown by the management team in steering us through this difficult time which is not yet over. Job well done and thank you.

RSL Care SA acknowledges there are weaknesses within the aged care system that require attention. Those weaknesses largely stem from government policy position rather than a lack of intent to provide the best possible care to residents, with a prime example being policy around adequacy of funding to enable the staffing and skill-sets required to meet service expectations. We welcome positive intervention in this space and support, at least in principle, most if not all of the reforms being contemplated, but have reservations that the execution of some reforms be removed from practical reality thereby falling short of achieving the desired effect. It is pleasing, and a deliberate thrust of RSL Care SA, that our clinical leadership team are ahead of these reforms, in many aspects years ahead, and therefore we are well positioned to respond. Our hope is that the aged care reforms will include addressing adequacy of funding as an essential enabler to the reforms.

The annual reports of the last 15 years or so have a common theme that change within the aged care sector, and at the organisational level can be expected. That pattern continues to be the case now and ongoing.

Despite the challenges alluded to above, we have had a successful year with many achievements that the CEO will expand on in his report, but I highlight

- Re-accreditation of the residential care facilities at Morlancourt and War Veterans Home by the Aged Care Quality and Safety Commission. Whilst accreditation has specific dates attached to it, and for WVH it was after the year in review, the effort to maintain standards for accreditation is perpetual over 365 days every year so it is appropriate to include here.
- Recognised by the industry peak body as the ACSA 'Provider of the Year' SA, and Lynn Rogers, recognised as the ACSA 'Employee of the Year' SA. Similarly, RSL Care SA was the winner of the 'Employer Excellence in Aged Care' Award in the SA Community Achievement Awards
- High occupancy in both residential aged care and retirement living which is not the case for many similar organisations. Affordable Housing also had high occupancy but is expected given the demand for rentals.
- Work upgrading the community centre at Hamilton retirement village was completed, with a history of the Hamilton family heritage to be included in the centre, which at one stage was the family home.
- Investment in our care, quality, business and information systems.
- Contribution to federal government policy formulation in regard to older Australians in aged care, the special needs of veterans in aged care, and veteran homelessness, particularly for contemporary veterans. A detailed submission was also made to the Royal Commission into Defence and Veteran Suicide.
- Our veteran homelessness program within ARVL is a relatively small component of our overall

operations but the importance and impact it has on the lives of veterans referred to it is huge. It has continued its positive impact and I acknowledge the role that Ryan Ollwitz has played in managing ARVL and developing the connections with agencies that provide the "wrap-around" support needed by our clients. It is also pleasing that we helped RAAFA (WA) and Kylie Russell (widow of Andrew Russell who the service is named after) to establish a similar service in Perth. We wish them every success.

It has again been a solid financial performance in difficult times. Unfortunately, mandated reporting requirements can make the interpretation of financial results difficult, but the underlying operating surplus, leaving aside asset valuation movements and the like, was of the order \$1.1m after incurring COVID related costs of \$360k not covered by the Government. It is a reality evidenced by independent experts, that the financial viability of residential aged care facilities has been eroding for some years, with indexation of the price government pays for care services provided falling short of the growth in the cost of those services. RSL Care SA is not immune from that trend and our margins are declining, however we are fortunate that financial success is not solely dependent on aged care and we have other revenue streams that enable pursuit of our objectives. I remind readers that RSL Care SA remains a Not For Profit, charitable organisation and although we are commercially prudent with our operations, any surplus is merely a means to pursue our benevolent activities and to have capacity for major capital investment in upgraded and new infrastructure that supports those activities.

January 2022 was the 10th anniversary of the merger of RSL SA accommodation assets into the War Veterans Home, Myrtle Bank (WVH) leading to the WVH changing its name to RSL Care SA. I came to the then WVH in 2011 as CEO to implement that merger and was aware that both organisations faced either short or long term challenges (or both) in remaining viable. I have no doubt that without the merger, the future of these operations in a stand alone environment was highly unlikely as they lacked

“For 11 years - through the trials and fears of Covid and Mum’s good days and bad days - you have provided love, care and tenderness to my Mum.

Throughout that time you have also provided kindness, support and reassurance to me.

You are without exception the very best aged-care professionals and set a standard in the industry that is surely unsurpassable.”

the critical mass to engage the contemporary management capacity to adequately meet the increasing compliance obligations of care standards, governance, workforce, growth, asset sustainment amongst others. I commend the boards of WVH and RSL-SA for their foresight in recognising change was necessary and paving the way for it to occur. I hope that they are well satisfied and proud that the objectives of the merger have and are being achieved. RSL Care SA has grown in scale to become a stable and solid organisation operating in a niche market that continues with its altruistic charter of supporting veterans and their partners as well as other members of the community. The introduction of the ARVL veteran’s homeless program, increased affordable housing capacity and the Veteran Social Support age care program are examples of benefits that they set in motion.

As for the future, the reforms in aged care will no doubt be a dominant factor over the next few years and while there are challenges, we are optimistic for the future, demonstrated by a \$20m investment in the Romani residential aged care facility soon to be opened at Murray Bridge. We intend to expand Retirement Living operations and while we look for new opportunities to do so, we are also utilising what we already have with an example being the build of additional units at Waterford. We look with interest and some concern at State Government consideration of potential legislative changes in the retirement living sector.

Veteran homelessness and affordable housing will continue to be important aspects of our operations as it has been since WVH began in 1915, and we hope there will be soon be news of some expansion in this area. Through the efforts of our CEO, Nathan Klinge, we expect to advocate and contribute to policy formulation regarding the wellbeing of veterans of all ages.

On behalf of the Board, I recognise and thank Nathan, his executive team and management across the organisation, for their outstanding efforts in what has been a difficult year. Much has been achieved and a platform laid for more to come. I also thank my board colleagues for freely giving of their time and expertise to provide the complicated governance that an organisation like this requires. Particular thanks go to the chairs of the sub-committees for the leadership they provide – Frank Kite (Audit Finance and Governance – AFG), Steve Knight (Property Strategy plus his technical guidance on the Romani build), Mark Prosser (Retirement Living) and Liz Clare (Care and Compliance - C&C and also as Deputy Chair of the Board). Those thanks extend to the external members of the board’s sub committees – Peter Moore (AFG) and Ruby Cantos (C&C). The efforts of all are allowing us to continue the mission that the organisation has had for over 100 years.

I conclude where I started – with a thank you and well done to all our staff. You make a huge contribution to the wellbeing of those we support.

CHIEF EXECUTIVE OFFICER



Nathan Klinge

direct quotes from the many letters, emails, texts, and comments we have received from our residents and families over this past year, and they reflect just how much our staff and volunteers mean to us all. Please enjoy these beautiful words as you discover them in your reading of this report.

I would also like to thank and congratulate our Board of Directors, who continue to provide strategic leadership and responsible stewardship of our organisation as they shape our culture and guide our future. Our Directors are all volunteers, and their commitment to our mission and to the principles of good governance have been evident throughout our monthly board meetings and also through the numerous activities that are undertaken at sub committee and working group level. I would like to specifically mention our Chair, Geoff Tattersall, who has guided the Board and our executive team through some very important and robust discussions over the past 12 months to achieve excellent results. I would also like to acknowledge and thank the Chairs of our sub committees (being Mark Prosser for Retirement Living, Frank Kite for Audit Finance and Governance, Stephen Knight for Property Strategy, and Elizabeth Clare for Care and Compliance). Each of these Directors has accepted additional leadership responsibilities to ensure that we continue to deliver and excel across all our lines of operations.

While it has been a year of challenges for the industry it has been one of positive transformation for RSL Care SA, as we moved ahead with introducing new systems, processes, and team roles that will help us to exceed the emerging and increasing regulatory requirements placed upon us. We recognise that the expectations of the aged care sector have evolved in recent years and will continue to do so, and while successive government audits of RSL Care SA have revealed that our residential care services have met

100 years ago the minutes of

our Board meetings show just how hard our staff at the time were working to fight tuberculous and the Spanish Flu; and now 100 years later the focus of this annual report is once again on our staff, who are the latest generation of our people to spend years on the frontline of a pandemic.

Very early in the COVID pandemic we chose to deal with the battle ahead of us as a campaign, not a skirmish, and this approach has certainly helped us to respond well over what has proven to be an extended period of time. That said, despite our successes I am incredibly mindful of the crippling fatigue that has been an ever-present companion for our staff for several years now, concurrent with the need for us to remain increasingly focused on the care and safety of all our RSL Care SA communities. No part of our organisation has been untouched.

Thankfully however, throughout the past 12 months all aspects of our operations have continued to perform safely and incredibly well, and our staff, residents and volunteers have displayed an amazing amount of tenacity and compassion in the face of such adversity. For this I thank them all, and this is why you will see words of gratitude and thanks to our staff and volunteers spread throughout the pages of this annual report. These words have all been taken as

"Thank you for this email. Living in WA I am so far away from my mum, but I have always been grateful for, and aware of, the care my mum has been given. My siblings keep me informed but this is just the extra touch. Thank you to everybody and please stay safe."

and in most cases exceeded all expectations, we appreciate that we can't stand still or we risk being overtaken by the pace of change. With more scrutiny and focus than ever on the providers of aged care and retirement living services, we continue to work hard at improving our governance infrastructure to stay ahead of the game, because forward-looking is never more essential than when times are tough.

In this regard the industry has entered a period of major reform now that the Royal Commission has concluded and we have the Australian Government's response to the recommendations from the Final Report. While the change of federal government this year slowed this reform progress somewhat, legislation has been passed that will enable us to work through the detail and see just how the government will deliver on their narrative of system reform. Early signs are encouraging, and we are optimistic and excited for what lies ahead for our residential aged care services.

If all reform elements are enacted, efficient and quality providers like RSL Care SA should be further strengthened by the models proposed, which positions us well. Happily the known areas of targeted reform are already areas of strength for us, including corporate governance, clinical governance, prudential controls, food and nutrition standards, registered nurses on site 24/7, and career pathways across our care staff. We are very pleased to see these issues are areas of key focus for the industry moving forward, because they have been priorities of ours for a number of years now.

Of course whilst we are supportive of the reforms proposed it is critical that government reinforces the reform program with adequate funding, otherwise the work required of our industry will simply become too challenging to deliver. At the national level we need to encourage our society to value our older Australians more dearly, and in RSL Care SA's case we are particularly concerned about the care of our nation's older veterans who are becoming largely invisible as the WWII population moves on and the Korean and Vietnam Veterans take their place as the oldest cohort. The valuing of older veterans and

older Australians is an issue for all of us, not just for the providers of residential aged care services. If as a community we don't appreciate older people better, the government simply won't fund the care they so richly deserve and the aged care industry will struggle as a result as the funding gap widens even more. Conversely, if we celebrate older Australians and venerate them as we should, then together our society can ensure they receive the care they deserve across all aspects of life. So I challenge the government to deliver on its funding promises, and I look forward to seeing what happens next.

Despite the broader funding challenges at the national level, RSL Care SA continues to perform well financially as we have also continued to deliver on our mission. You will find Aldo's report on pages 23 - 24, and through his report you can see that our Balance Sheet has remained solid throughout the year and that we continue to maintain strong and responsible prudential reserves. I am pleased to report that once again we have delivered a modest surplus for the FY which will be used entirely to further strengthen our organisation and to fund our altruistic activities.

Kellie's report on pages 14 - 17 summarises what has been an incredibly busy and in some ways unrelenting year for our residential care staff, and through her report you will see the fantastic work that has been done by our clinical governance and clinical leadership teams in what can only be described as the most trying of circumstances. I stand in awe of their achievements, and you will get a sense of why when you read Kellie's report.

At this point I'd like to acknowledge and celebrate the recognition we received through our peak body (ACSA) this year, where we were awarded the very honourable title of ACSA Provider of the Year for South Australia for 21/22. We couldn't be more thrilled with this level of recognition from our industry peers! See page 28 for some photos from the night.

Not only were we the Provider of the Year, but Lynn Rogers (one of our amazing nurses from MLC) was awarded the title of ACSA Employee of the Year for SA. We've always known that Lynn is amazing, and it's great that our industry peak body agrees!

“Thank you for your attention to detail in letting us know what is happening at Myrtle Bank during these trying times.”

Our retirement villages Waterford, Sturt, Hamilton and Myrtle Bank have enjoyed very successful and busy years, and I am happy to report that sales are strong in each village and our quality homes and communities are full of residents enjoying the benefits that our vibrant and socially connected villages bring. I'd like to thank all of our village committees and social groups for the significant contributions they make to village life, and to all our residents who have each contributed in their own ways towards the social fabric that makes our villages such pleasant places to be.

Other events of strategic significance to RSL Care SA over the past 12 months have included:

- Through our homeless veteran program (ARVL), we have now provided over 18,000 nights of emergency accommodation to South Australia's homeless veteran population. See pages 18 - 21 for the latest data on the veterans we've supported.
- RSL Care SA was pleased to provide support to the RSL SA state branch, in the form of a part time Finance Manager to assist the RSL over a 3-month period
- Our telephone system has been upgraded, enabling direct-dial and voicemail capabilities for our principle staff.
- We engaged an external agency (Standards Wise) to audit our care services, just to make sure we are at the top of our game. Happily, they confirmed we are.
- RSL Care SA helped to produce the 10 questions for veterans to ask when entering aged care, which is a document issued by the federal department of health. See page 7 for this brochure.
- The project to upgrade Hamilton House has been completed, including the installation of memorial cabinetry. This project was a long time in the making, and it great to see the final result.
- SACAA SA Community Achievement Awards – Employer Excellence in Aged Care Award – WINNERS!

- RSL Care SA made a very detailed submission to the Royal Commission into Defence and Veteran Suicide.
- Our Chief Operations Officer (Kellie Whelan) presented in a national webinar on Trauma Informed Care.
- We launched our new ARVL website – www.arvl.org
- The Governor of South Australia visited War Vets on 27 June, speaking with Board members, staff, and residents.
- We applied for and were successful in receiving a Supporting Younger Veterans grant of \$32K for ARVL, which was used to purchase furniture for our homeless veteran units.

Donations and bequests

The results of our donations and bequests are recorded in the financial papers found on the Australian Charities and Not for profit Commission (ACNC) website, but I would like to highlight the very important part these donations play in supporting our capacity to deliver our altruistic pursuits. I would like to personally thank all of the individuals and groups who have supported us through donations and bequests over the past 12 months. Your financial contributions, no matter how large or modest are gratefully received.

The coming year

By their nature annual reports are focussed on past activities, but I can assure you that Board and senior management of RSL Care SA have very much been looking towards the future. I will not duplicate the summary provided by the Chair in his report explaining the Board's strategic initiatives, but it's worth noting that management has been delighted to partner with the board in the strategic review process, and to get busy delivering on a range of new and exciting projects:

It is comforting to think that our loved ones are being protected by your well thought out protocols."

Romani

In November of this year we look forward to opening our newest facility, Romani, a 72-bed residential aged care service located adjacent to our Waterford Retirement Village in Murray Bridge. We are very pleased to be extending our services into a rural centre, and feel strongly about the need for the nation's country communities to have access to good quality residential aged care services. I look forward to reporting on the opening of Romani in next years' report, but for now please enjoy some pictures of the construction phase of the project on page 29.

Installation of CCTV cameras for the War Veterans Home

This important project has been made possible by the very generous bequest of Mr Leslie Brown, a former resident of the War Veterans Home who donated \$200K to the home as part of his estate. Our sincere gratitude goes to Les, we miss him dearly.

National Advocacy in Aged Care

I've been selected to sit on the Federal Diversity in Aged Care Committee, and will represent veteran issues in this group. Much work needs to be done to properly advocate for our veterans in aged care, and I am pleased to say that RSL Care SA is at the forefront of this advocacy work.

National Advocacy for homeless veterans

Our work at the national level will continue, as we push for more housing options to be made available for our homeless veteran population. Pleasingly this advocacy work generated a \$30m commitment by the Labor Government as part of their election commitments in 2022, and we look forward to working with them to implement this important program in the coming year.

Conclusion

In closing my report for 21/22, I'd like to end with words of thanks and acknowledgement to my executive team, our care staff, hospitality and maintenance staff, our corporate and retirement living staff, and our extensive army of passionate volunteers and supporters.

Collectively these folks enrich the lives of our residents through their empathetic and committed service and volunteerism, be that in our nursing homes, retirement villages, or through ARVL. While I am certainly proud of our governance, buildings, gardens, and extensive physical infrastructure, there is no doubt that the staff and volunteers of RSL Care SA are our greatest asset. I thank them most emphatically for choosing to serve others in this way during such a challenging time, and I commend them for their extraordinary efforts over this past year.

This leaflet is part of a series written by nurses, doctors and experts with experience in aged care. The series aims to make your journey into residential aged care easier. Look for other leaflets on questions to ask about specific care needs. These can be downloaded at: www.10questions.org.au

You may find these leaflets useful when:

- Searching for a high quality residential aged care facility
- Reviewing the quality of your current residential aged care facility
- Deciding between two residential aged care facilities that appear similar.

By law, some residential aged care facilities are not required to have registered nurses so it's important to ask the right questions if you need nursing care.

Many staff wear similar uniforms. Just because someone looks like a nurse does not mean they are. Here are the differences:

A **Registered Nurse (RN)** has undertaken a minimum three-year Bachelor of Nursing course. They can undertake nursing procedures, manage pain medication and help prevent unnecessary hospital admissions.

An **Enrolled Nurse (EN)** works under the direction of an RN. Both are registered by a regulatory body. Registration ensures professional standards are maintained and protects the public.

Assistants in Nursing (AIN)/Care Workers/ Care Service Employees (CSE) are unlicensed. They provide most of the care in residential facilities and community but their level of training is variable.

This leaflet has been developed and endorsed by:

For a full list of supporting organisations please visit www.10questions.org.au

If you have concerns about a residential aged care facility contact:

10 Questions to Ask

The best way to find a residential aged care facility that suits you is to visit a few. To find your local ones, or for more information about aged care services contact: **My Aged Care** 1800 206 432 myagedcare.gov.au

If you require advocacy or specialist advice about any matter not covered in this leaflet:

Seniors Rights Service 1800 424 079 www.srs.gov.au

OPENARMS 1800 VETERAN (1800 838 372) www.openarms.gov.au 1800 011 046

10 Questions to Ask

ABOUT VETERAN NEEDS IN RESIDENTIAL AGED CARE

1 Are there social activities that connect me to the ex-service community?
Check how many veterans currently live there and how staff encourage veterans to come together socially, including visits from the ex-service community. Ask if commemorative events such as ANZAC Day are honoured and you can attend external events. If a Veteran Welfare Officer or volunteers can provide transport, check if staff can accompany you, and if you pay extra for this.

2 How many staff or volunteers are veterans or members of the veteran community?
Ideally veterans and/or members from the veteran community relevant to your individual circumstances should be employed, and/or volunteers or ex-service organisations connected to the home. Check there's someone who can support you to maintain your individual veteran identity.

3 Can I bring my customised rehabilitation appliance or aid I have acquired through DVA's Rehabilitation Appliances Program (RAP)?
You may already have aids and equipment provided to you under the RAP. If so, you may be able to bring these items with you when you move in. It's worth checking beforehand which items you can bring as some may already be provided.

4 How will you support my veteran identity?
Look around to see if there's military memorabilia and artefacts on display and ask if you can bring items from your own home to personalise your room. If you don't feel safe to display photos and medals in your room, consider showing replicas instead. Make sure your military service is included in your care plan so staff know your individual history.

5 How will you support my veteran identity at end of life?
Staff should ensure any military background and preferences you wish to share are considered at end of life and recorded in an Advance Care Directive*. Staff turnover can be high so make sure this document is well known to all those caring for you.

6 How will you support me to claim all my financial entitlements?
Check staff know about the veterans supplement and how this can be used to support your mental and physical health needs. Some services may be exempt from your entitlements and its important staff know what you can and cannot claim to avoid having to pay unexpected charges.

7 How will I know what out-of-pocket expenses I'll have to pay?
Staff and management should explain to you any additional expenses, as you may still need to pay for some services or extras. It's best to understand what these are before you move in and they should be clearly stated in your aged care contract. For information on extra charges, contracts and fees, refer to other leaflets in this series.

8 How will you maintain my preferences and dignity?
You have the right to make choices about how you spend your time, how you want your care to be delivered, and by whom. Your care should not be determined by the routine of the home or staffing shortages. Make sure your preferences are written into your care plan and Advance Care Directive. You should be given a copy of the Charter of Aged Care Rights to keep.

9 Are the visiting GPs experienced with Department for Veterans' Affairs (DVA) clients?
Check if your own doctor can continue to look after you. GPs should preferably have some experience of or sensitivity to the mental and physical health needs of veterans, especially if they visit the home regularly. Check they are familiar with additional services offered by DVA so they can refer you to the full range of appropriate services such as allied health services.

10 How do you support veterans' mental health?
Staff should be trained to recognise PTSD and provide trauma informed care. Staff turnover can be high so check all staff receive training when first employed, and regularly updated. Check what counselling and mental health care is provided at the home. Also, it's staff know how to refer carers and family members of veterans to counselling services, including Open Arms - Veterans & Families Counselling, if needed.

*An Advance Care Directive outlines your preferences for your future care along with your beliefs, values and goals. You can also formally appoint a family member or nominated person for when you are no longer able to decide yourself. Advance Care Directives differ between states and territories. Learn more about directives in your state or territory: www.advancecareplanning.org.au

BOARD OF DIRECTORS



Geoff Tattersall (Chair)

Geoff has over 37 years experience in the public health system, prior to taking up roles in the aged care sector, culminating in his appointment as the inaugural CEO of RSL Care SA in 2011. Geoff has a Bachelor of Economics, is a Fellow of the Australasian College of Health Service Executives, is a former Chief Finance Officer SA Health, and former hospital Chief Executive Officer.

Concurrently to his civilian career he served 29 years in the Army Reserve as an Infantry Officer.

Geoff has been a Board member of RSL Care SA since 2016.



Elizabeth Clare (Deputy Chair)

Elizabeth Clare is a Communications Consultant and Project Management Adviser in the not for profit and SME sectors. She holds post graduate qualifications in Communications, Public Relations and Business Management.

She was previously the General Manager, Property for Masonic Homes and subsequently the Executive Director of the Mary Potter Foundation.

She has also served as interim CEO of the Repat Foundation and the Adelaide Benevolent Society.

She served as a Director of the Bedford Group for 10 years and Chaired the Bedford property committee for eight years.

Elizabeth has been a Board member for ten years and is a graduate of the Australian Institute of Company Directors (AICD)



Larry Opie

Larry was a legal practitioner for in excess of 45 years. During the last 25 or so years he was a partner of, and then consultant with, O'Loughlins Lawyers. He has extensive experience in corporate and commercial law matters including company mergers, takeovers, schemes of arrangement, and share and business acquisitions and disposals, and has acted for the State Government in respect of substantial and complex matters.

Larry is a member of the Law Society of South Australia, a past Deputy Chairman of the Burnside Hospital and a past Chairman of the SA Division of the Taxation Institute of Australia.



Stephen Knight

Stephen has over 45 years experience in the commercial construction industry, primarily with Rider Levett Bucknall (RLB), an international property and construction consulting firm.

He was a Director of RLB for 25 years and Managing Director of their Adelaide, Darwin and Perth offices for 12 years.

Stephen's skills in the construction industry range from project initiation - establishing budgets, feasibility studies and financial modelling, property due diligence through to project procurement and delivery.

Stephen has significant experience in the aged care and retirement sectors through his work on numerous projects, and served on the Lakeside Villages and Karidis Corporation boards.

Stephen has a personal connection with RSL Care SA, as one of the wings at Morlancourt, Angle Park is named in honour of his father Harry Knight (DSM) and his mother, an Army nurse, was cared for at the War Veterans Home.



Andrew Boeyen

Andrew is a finance and general management professional with more than 30 years' work experience, including 20 years working with and reporting to Boards. Industry sectors worked in include mining, manufacturing, software development, advertising and education, but it was 10 years spent working in the disability field that generated a desire to give back to the community. In this capacity Andrew has been a Director in two other non-profit organisations and remains actively involved in industry bodies.

Andrew holds a Bachelor of Economics degree from Adelaide University and his post-graduate studies include the CPA Program and a Graduate Diploma in Applied Finance & Investment. He is a Fellow of CPA Australia.

Thank you

BOARD OF DIRECTORS



Alex Heidenreich

Alex is an Executive Director in CyberCX, Australia's largest sovereign cyber security company. Alex was a co-founder of Diamond Cyber Security (now a CyberCX company).

Alex is a former commander in the Australian Special Air Service Regiment. During a 23 year military career, Alex fulfilled challenging leadership appointments in a diverse array of environments, including three special operations deployments to Afghanistan and one to Timor Leste.

Alex has an MBA from the University of South Australia, and is a graduate of the Australian Company Directors Course.

Alex has an extensive background in the fields of telecommunications, information systems, cyber security consulting, crisis planning, risk management, entrepreneurship and leadership.



Frank Kite

Frank's substantive career was in professional services with Ernst & Young culminating in his appointment as a Partner in the Management Consulting division where his primary focus was in Financial Management and Performance Improvement. Frank set up and was Director of Centra Consulting in November 2001 until 2006, and reactivated Centra Consulting from 2010 to 2014, after almost four years as a General Manager for Spotless Services Australia Limited. At Spotless Services he gained insight into the management and delivery of outsourced industrial service contracts.

Frank has previously chaired the boards of Burnside War Memorial Hospital and the Women's and Children's Health Research Institute.

Frank's qualifications and memberships include a Bachelor of Economics University of Sydney, Master of Economics Macquarie University, former Fellow of the Institute of Chartered Accountants in Australia and Graduate, Australian Institute of Company Directors.

BOARD OF DIRECTORS



Mark Prosser

Mark has been an executive in the Australian retirement village industry over the past 20 years, he has an association with over 200 Retirement villages and 6500 residents, in both Australia and in Malaysia. Mark has been an active participant of the Property Council of Australia and formerly the Australian Retirement Village Association (RVA). He has held positions on the RVA National Board and as the South Australian Regional Chair for both the RVA and Property Council of Australia.

Mark is also a Director of Optimum Retirement Services, a boutique consultancy provider to the Retirement Village Industry for both Independent and Assisted Living, providing services to both the for-profit and not-for-profit sectors.



Anthea LeCornu

Anthea Le Cornu is a registered nurse with over 38 years' experience in residential care, community care and the retirement living sector.

Anthea has worked across a broad spectrum of roles from carer, through to Acting Chief Executive Officer over several organisations.

The last 12 years Anthea has worked as a consultant within the residential care, community care and retirement living sectors providing a wide range of services including assisting providers with accreditation obligations, professional development, clinical reviews, training, human resource support and structuring, operational restructures, developing governance systems, including clinical governance frameworks and general operations auditing.

As an experienced aged care assessor Anthea has also completed numerous re-accreditation and review audits, as well as assessment contacts for the Australian Aged Care Quality Agency across three states over 10 years.

Anthea is a graduate member of the Australian Institute of Company Directors, and maintains currency through ongoing professional development, in addition to serving as Board Chair of Community Support Incorporated, and as a committee member on various clinical governance committees.

Thank you

SUB-COMMITTEE MEMBERS



Peter CP Moore (AFG Sub-Committee)

In 1981 Peter started his firm CP Moore implementing business information systems into medium and large businesses, until 2018 when he merged the business to create APTUS Business Solutions, of which he became Managing Director.

In 1981, Peter enlisted into the Army Reserves reaching the rank of Brigadier and in 2020 was Commander of the unit coordinating the ADF response to COVID-19 in WA. It was at this time Peter resigned as Managing Director of APTUS.

Peter holds a Bachelor of Arts in Accountancy, is a Chartered Accountant and Fellow of the Certified Practising Accountants. He completed Staff College and attained a Post Graduate Diploma in Management as part of his Defence studies.



Ruby Cantos (C&C Sub-Committee)

Ruby currently works as a Clinical Nurse Consultant and has over 10 years extensive professional experience and significant leadership accomplishments in Aged Care.

Ruby has assisted providers with meeting their accreditation obligations, and with her strong clinical acumen, is passionate about continuous improvement in both the clinical and corporate governance settings.

LIFE MEMBERS

RSL Care SA acknowledges our Life Members

Jock Statton AM

John Spencer OAM RFD

Graham Nybo OAM

Loretta Byers

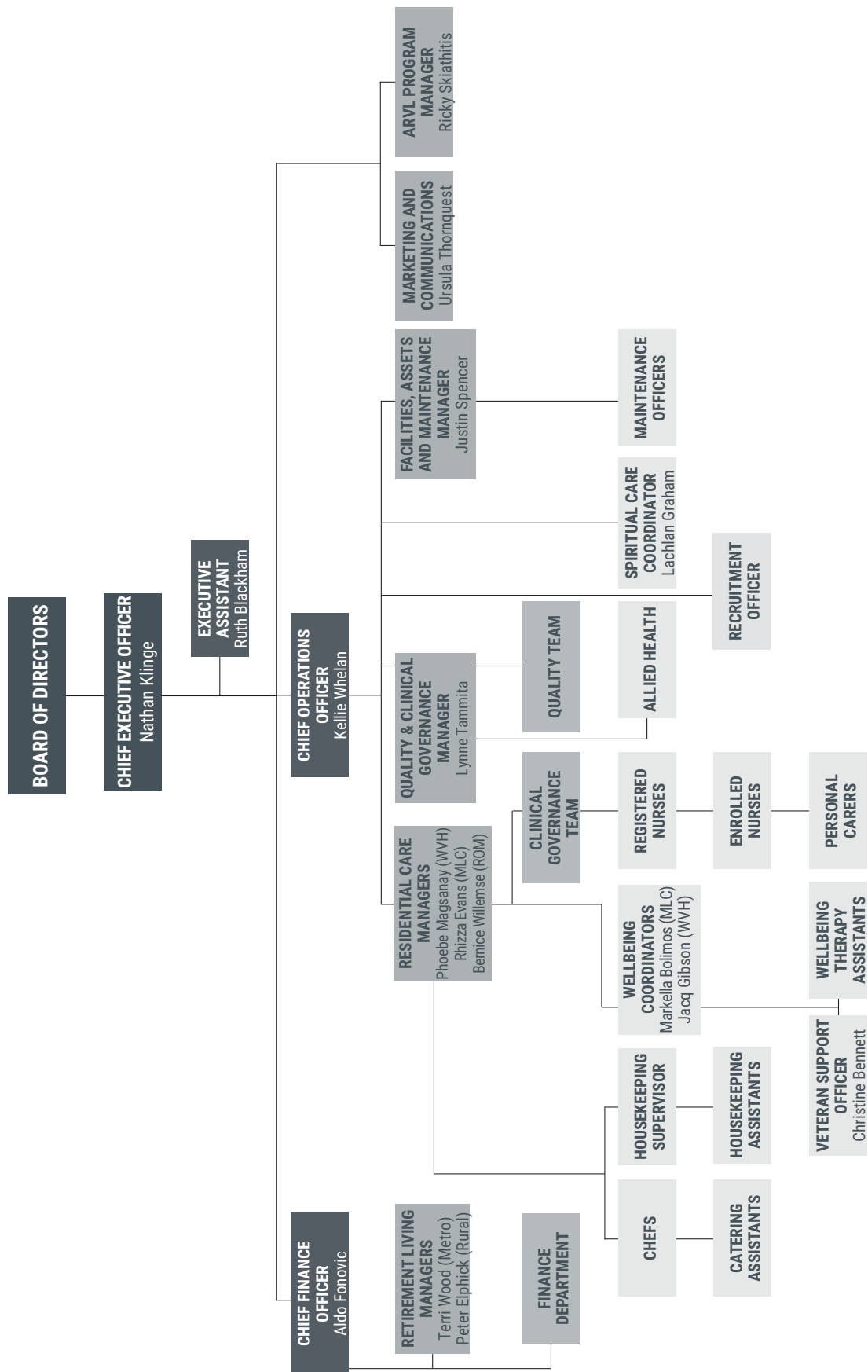
Dennis Chamberlain

Joan Ramsay OAM

Michael Mummary OAM

Julia Sweeney

ORGANISATION STRUCTURE



CHIEF OPERATIONS OFFICER



Kellie Whelan

I thought we were challenged in the previous year with the emerging and strengthening pandemic, however that challenge only prepared us for the battle ahead once the South Australian borders were opened. As Nathan has remarked in his report, our staff have been unrelenting in their resilience and commitment to our residents and families through the multitude of challenges that this past year has brought.

COVID-19

Our preparations for COVID-19 had us standing ready with the surge in cases from November 2021. The limitations within Residential Aged Care that continued under the Emergency Management Directions protected our residents as well as our very high vaccination rates. These directions outlined our legislative requirements to meet for Residential Aged Care, which included the requirements for any person entering residential aged care to have a current seasonal influenza vaccination, limiting social and support visits during various stages across the year, wearing of face masks, and education requirements for our staff.

Over the reporting period the following encounters with COVID-19 occurred.

War Veterans Home

- January 2022: 2 staff positive and 16 residents into quarantine for 14 days, with no resident cases detected,
- April 2022: 1 resident case detected with a further 19 residents into quarantine for 14 days with no further cases detected,
- June 2022: 1 resident case detected with a further 19 residents into quarantine for 14 days with no further cases detected.

Morlancourt

- January 2022: 1 positive staff case and full site into quarantine for 14 days, with no resident cases detected,
- April 2022: Outbreak of COVID-19 with resident cases totalling 39. At the peak of the outbreak, we had 30 active cases and 16 staff active cases.

Staff cases to 30 June 2022

- A total of 85 staff tested positive for COVID. Over a third of our staff, with this number increasing for the coming year,
- A total of 57 staff required quarantining as close contacts

The outbreak at Morlancourt in April was particularly challenging as is evidenced by the large case numbers that the team dealt with. Our families were very supportive of the actions taken and we are very grateful that all cases (including cases outside of the Morlancourt outbreak) recovered from COVID. This recovery is largely due to up-to-date vaccinations and the ability to provide anti-viral medications for those with significant symptoms. This outbreak was active for 28 days and our leadership team worked

"I want to say thank you. We are very comfortable with the care our mother is given at Morlancourt. The staff are loving and caring and do their best to make mum comfortable. She loves her home and I really appreciate what you are doing for mum's last years."

continuously through this period, as did many of our dedicated staff. As would be expected, the impact that this outbreak had on not only residents, but staff working under exceptional circumstances, demonstrate our Team Standards, organisational values and Janus Principles in every interaction. As a small way of recognising this incredible service, we recently presented all staff who worked during the April 2022 Outbreak at Morlancourt with a small commemorative pin. Our staff wear this with great pride.



As we look ahead to the coming year, with decreasing restrictions around our community, vaccination remains the safest option to protect and prevent against the seriousness of COVID-19 symptoms and illness. For those in our community who are yet to get fully vaccinated, we strongly encourage you to speak with your health practitioners regarding your individual risks and benefits of having one of the many safe and evidenced-based vaccinations. The current recommendations for 'up to date' COVID vaccinations are as follows:

- For those over 50 years, that you have 4 vaccinations against COVID-19
- For those over 30 years, that you have 3 vaccinations against COVID-19, with encouragement and eligibility to receive the 4th vaccination against COVID-19
- For those over 16 years, that you have 3 vaccinations against COVID-19
- For those over 5 years, that you have 2 vaccinations against COVID-19.

Accreditation/Compliance (Residential Care and Home Care)

Throughout the past year we have continued to have multiple contacts with the Aged Care Quality and Safety Commission (the Commission) as they have monitored our ongoing compliance with the Aged Care Standards.

In November 2021, Morlancourt underwent its re-accreditation, the first against the Aged Care Quality Standards that were introduced in 2019. The audit was conducted over three days and assessed our compliance against all 8 standards and 42 subsequent requirements. We were very pleased to receive full compliance and re-accreditation for a further 3 years, the maximum period of accreditation that can be provided.

In February 2022 we submitted our application for re-accreditation at the War Veterans Home, in readiness for re-accreditation due by August 2022. While in previous years we would have received a visit around May or June of 2022, the Commission has also been impacted by staffing shortages related to COVID and re-accreditation for War Veterans Home was still pending at the end of this reporting period.

As Nathan has reported, we are on the cusp of many legislative changes to reform aged care and RSL Care SA is well positioned to respond and continue to provide high quality care and services, focused on enhancing quality of life for our residents and clients in residential and home care.

Promotion and Development of the Janus Approach (Sensory Destination)

The Janus Approach is the philosophy of care by which we deliver person centred and holistic care and services within residential and home care services. Over the past year we continued to focus on the "Meaningful Engagement and Spirituality"

key. One of the projects that was developed through our Leadership Development Program held in 2020 was to provide “Sensory destinations” at each of our residential aged care facilities.

People living with dementia can have increased feelings of isolation, frustration, and unhappiness as they lose understanding of the world around them. As a result of these feelings these residents may display challenging behaviours that often require the assistance of pharmacological interventions (such as psychotropic medications including benzodiazepines) to reduce the impact of these behaviours.

The concept of a “sensory destination” enables people living with dementia (or some sort of cognitive impairment) to stimulate the five senses in a safe dedicated area that is free of interruptions and overstimulation from the environment. Stimulating the five senses can make a huge difference in mental health and provide a source of comfort and relief to people with dementia (or some sort of cognitive impairment) in an environment that is free from cognitive demands. Studies have demonstrated that the effects of a sensory destination can offer multiple benefits for people living with dementia such as:

- Decreased agitation and wandering behaviour
- Heightened awareness of surroundings
- Increased concentration or increased attention spans
- Improve their ability to move
- Improved cognitive function
- Improved mood and wellbeing

As a result of this project, we were successful in obtaining a Commonwealth Bank grant of \$10,000 to further develop these destinations which are currently in the process of being established.

Awards and Recognition

We have again been successful in awards that the sector hold each year, as Nathan has already mentioned. We participated in the Aged and Community Services (ACSA) awards as well as the

South Australian Community Achievement Awards (SACAA) and were successful in all our nominated categories:

- “Provider of the Year” winners for the South Australian Aged and Community Services Awards. We had very tough competition against Southern Cross (SA, NT, Vic) and Resthaven Incorporated.
- “Employee of the Year” winner Lynn Rogers for the South Australian Aged and Community Services Awards. Lynn is our Clinical Nurse at Morlancourt and has been an incredible leader throughout her time with us at RSL Care SA, but particularly through the COVID outbreaks along with Rhizza Evans (Residential Care Manager – Morlancourt).
- “Employer Excellence in Aged Care Award” winners for the South Australian Community Achievement Awards.

Awards such as these reinforce the quality of our employees and volunteers, and represent many of the employees and volunteers who choose to make a difference in the lives of our residents and clients within RSL Care SA’s aged care services.

Commemorations and Celebrations

Commemorations of Vietnam Veterans Day and Remembrance Day were again held at both sites to support residents and their families who have served. ANZAC day commemorations were again adjusted to our traditional services, given the restrictions that were in place for public gatherings at the time. As such we continued the 100+ year tradition of holding a Dawn Service at the War Veterans Home, however it was held in our ‘front yard’ for the surrounding community as part of ‘lighting up the dawn’. Private services were then held with our resident community including wreath laying ceremonies at both the War Veterans Home and Morlancourt to honour the fallen and those who have and continue to sacrifice for our freedoms.

“To all staff, thank you for your prompt and comprehensive updates throughout our time with your organisation. Our family has always felt informed and confident our mother has the best care we could wish for and she feels safe and secure in her accommodation. The staff have remained consistently friendly and caring under difficult circumstances. We appreciate every effort is made to keep a sense of normality to daily life.”

Partnerships

We have continued our strong partnerships over the past year with participation in a research project undertaken by Flinders University at RSL Care SA. The researchers from Flinders University conducted study to learn about how RSL Care SA tailors our care to meet the needs of residents who have experienced difficult life events and trauma. Their research was solely conducted at RSL Care SA facilities through interviewing staff about their experiences of providing care, interviewing residents and family members about their experiences of receiving care, and observations of day-to-day care delivery and staff interactions at our residential aged care facilities. They selected RSL Care SA as we are recognised for our delivery of trauma-informed aged care. The results of this research have been published in peer reviewed journals and presented at numerous conferences to inform the sector about how trauma informed care can be integrated into everyday care delivery and interactions. We are very proud of the results of this study, with the following comments identified through the study from residents and relatives:

“Nothing is too much trouble”

“A touch on the shoulder shows they care”

“Kind, cheerful and attentive”

“...not just staff doing a job”

We look forward to further partnerships over the coming years.

Year ahead – Re-accreditation WVH, opening of Romani

As we look towards 2023, we continue to remain agile in our need to respond to the risks of COVID-19 in our residential aged care services. We have also readied ourselves for the accreditation of our War Veterans Home. As well as the opening and commissioning of our third residential aged care service, Romani, located in Murray Bridge.

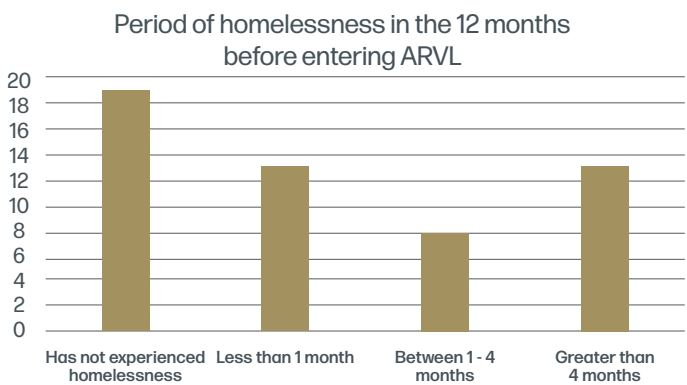
Finally, the successful achievements of the past year are not possible without the commitment and dedication of all staff that provide care either directly or indirectly to our residents and their families. Only by our collective efforts can our organisation continue to achieve its objective of providing quality aged care services to its consumers. To the veteran and wider community and to our many supporters, we thank you for your support and faith in our organisation, and to our residents and families we thank you for the trust you place in our team of excellent health care professionals.

ARVL (Andrew Russell Veteran Living)



Ryan Ollwitz

Fortunately, in the 12 months before entering ARVL emergency accommodation more than half of our residents had either not yet experienced homelessness or had been homeless for less than 1 month. This suggests that we are intervening early to avoid a chronic housing crisis for individuals, which is a key goal of ARVL. See the following table:



I am very pleased to present the Annual Report for the Andrew Russell Veteran Living (ARVL) Program, after what has been a year of national significance for the issue of veteran homelessness.

Firstly, over the past 12 months we hit a very important milestone for ARVL, that being the provision of over 18,000 nights of emergency accommodation in direct support of veterans experiencing homelessness in South Australia (over the life of the program).

As many of you will be aware we not only provide emergency accommodation through ARVL but we also have a comprehensive affordable housing portfolio (39 homes), and through this affordable housing portfolio we offer veterans and their spouse's long term affordable rental properties in what has become an increasingly competitive and hostile rental market. Since January 2012 ARVL has provided over 390-years' worth of affordable housing to the veteran community, which is a remarkable achievement.

For our emergency accommodation, of the 129 enquiries for housing support over the past 12 months, 91 were from veterans requiring emergency housing. This roughly worked out to be between 7 - 8 enquiries each month from veterans who were either actively homeless, or at direct risk of homelessness.

Each resident and their situation of homelessness is different, and it is our experience that although ARVL is based on a systematic framework, the program itself must be flexible enough to adapt to the veteran's individual needs. Of course, many residents come to us as they simply have no other suitable housing options and are experiencing a housing crisis, but for others ARVL may more simply provide a respite opportunity to allow them to catch their breath, or it can be the springboard from which they can then pursue other long-term accommodation goals up to and including home ownership. The only constant is that ARVL provides each of our residents with an opportunity to have access to a safe and affordable place to live, at a time when it is most needed.

Through our experiences with our ARVL residents however, we remain very concerned about the impact of mental health conditions on our veteran community, and in particular our homeless veterans. To offer you an insight into this problem, over the past

"I hope this support becomes nationwide. It was exactly what I needed at the time."

year our newly arrived ARVL residents have indicated that:

- 50% had suicidal thoughts in the preceeding 12 months,
- 17% had attempted suicide in the preceeding 12 months,
- 91% had been diagnosed with a mental health condition,
- 62% of residents admit to having a history of substance misuse.

It's important to note that ARVL is not a mental health program, and we do not possess the skills needed to fully address the range of complex issues that surround an experience of homelessness for our veterans. In this regard we know that we do the housing 'bit' very well, but we also know that we need experts to help us for the other critical wrap-around mental-health and wellbeing services essential for improving the veterans personal experience of wellbeing. Therefore we operate an assertive in-reach and wrap-around support model for ARVL, requiring residents to proactively engage with agencies such as DVA, Open Arms, community nursing and ex-service organisations, all as a condition of their tenancy with us. This approach ensures that residents have a comprehensive support network around them encompassing aspects such as social work, peer support and mental and physical healthcare, all of which can reinforce the benefits that stable housing can bring.

Through our housing first approach and our assertive in-reach program, we aim to ensure our residents secure a permanent and stable housing solution, which helps to break the cycle of homelessness. We are proud to say that so far 88% of residents have achieved this goal, by moving into long term housing such as a private rental, community housing, ARVL affordable housing, or even purchasing their own home.

The combination of emergency accommodation and affordable housing solutions has quickly seen ARVL become recognised as the specialist veteran housing provider in SA, and a key program on the national stage.

Drawing on our experiences through ARVL, RSL Care SA has made a detailed and very important submission to the Royal Commission into Defence and Veteran Suicide (RCDVS), through which we identified a broad range of issues concerning the homeless veteran community's vulnerability to suicidal ideations and attempts. Our 24-page submission to the RCDVS drew upon the lessons we have learned in supporting over 161 homeless veterans through ARVL, 50% of whom identified that they are experiencing thoughts of suicide upon arrival into the ARVL program. This is a very concerning statistic, and the key issues we raised with the RCDVS are as follows:

1. Veterans are at greater risk of homelessness than are general members of the community.
2. Veterans who are homeless are at greater risk of death by suicide than are other veterans.
3. Some aspects of service life can adversely affect the capacity of a veteran to obtain and maintain suitable housing post-separation.
4. Some aspects of the transition process can increase the likelihood that a veteran will find themselves on the homeless spectrum.
5. Veterans who discharge for medical, administrative and/or discipline reasons are at greater risk of homelessness.
6. Some aspects of the transition process for medical, discipline and administrative separations from Defence can increase the likelihood that a veteran will find themselves on the homeless spectrum.
7. If a veteran is on the homeless spectrum, it is much more difficult to provide them with the clinical, psychological, and social support they require to address their suicidal ideations.
8. By examining the 'upstream' causes of veteran homelessness, potential markers for later suicide attempts may be identifiable and interventions created.
9. During the transition process from defence, veterans who are 'housing vulnerable' should

"When you're homeless, the accommodation and support can be a God send to get you back on your feet, thank you all so much."

be managed separately by specialists to prevent them from becoming actively homeless once they discharge.

10. By preventing or at least reducing occurrences of veteran homelessness, suicide rates may be improved.
11. Veterans should be able to nominate who their primary support person is, and this person should be eligible to receive the support of Open Arms. For homeless veterans this support person is rarely the spouse.
12. Older veterans suicide at rates greater than the normal population, but this cohort is much less visible than occurrences of younger-veteran suicide. More research is required to increase visibility of this group.
13. Older veterans can become isolated from family and friends, usually as a result of complex mental health and substance abuse issues. As a result, older veterans can often find themselves on the homelessness spectrum.
14. Older veterans who are socially isolated and on the homeless spectrum have few options available to them to receive care and support, other than through the residential aged care industry.
15. Older veterans enter residential aged care at ages younger than the general population.
16. Older veterans seeking to move into residential aged care can face many barriers that will prevent them from gaining access to a funded place, meaning that many will not be receiving the support they require.
17. Older veterans are more likely to have experienced trauma during their life, and to suffer from other mental health disorders. However with the passing of the WWII population and the increasing number of aged care workers who come from overseas, the aged care industry is rapidly losing its capacity to provide culturally-specific care for veterans.
18. The aged care industry is not trained to provide Trauma Informed Care.

19. The majority of services provided by DVA for veterans do not extend into the residential aged care sector.

RSL Care SA also supported the Community Housing Industry Association (CHIA) to make their own submission to the RCDVS, in which they addressed a range of wider issues to do with social and affordable housing for veterans. I thank CHIA for their ongoing interest and advocacy around this important issue.

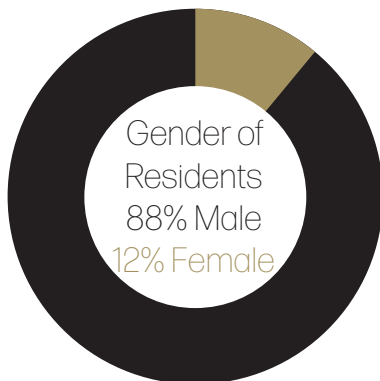
While this report has presented much of our success throughout this past 12 months, it really is the personal stories of accomplishment from our veterans themselves that demonstrates the true impact that ARVL has on their lives. The following quotes are just a few of the examples we have received through our feedback forms as veterans depart the ARVL program:

"The team involved have been an amazing support network at a time when needed. I can't thank the team enough for helping through a tough time and giving me a place to reside."

While we enjoy and celebrate these success stories, we are acutely aware that our job is not yet done. In this regard the Board of RSL Care SA is committed to expanding the ARVL program, and in the coming years we will be looking to increase our service offerings in South Australia, while also enhancing our ability to advocate on issues of veteran homelessness on the national stage.

In closing my report I'd like to pass on my personal thanks to everyone that has helped and supported ARVL throughout the year. Your generous interest has enabled ARVL to provide a roof over the heads of some of our state's most vulnerable veterans, and for this I thank you most warmly and sincerely.

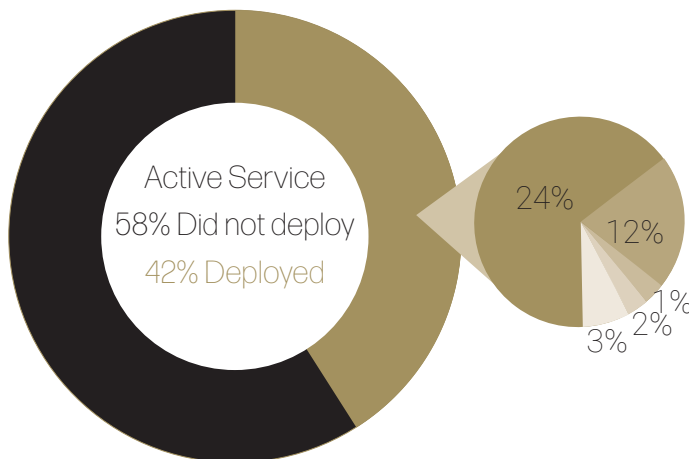
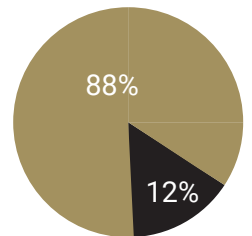
ARVL data from the past 12 months



Average length of service is 8.2 years

In the past 24 months, 88% of residents have secured long term housing, moving into:

- private rental
- community housing
- public housing
- purchase a home
- or returned to the family home



Of the 42% who deployed:
24% 1 deployment
12% 2 deployments
3% 3 deployments
2% 4 deployments
1% 5 or more deployments



Average age of ARVL resident is 46 years old.

The average length of stay for residents has been 118 days.
The shortest stay is 23 hours and longest is 309 days.

RETIREMENT LIVING

Aldo Fonovic

It's my pleasure to report on the past year across our four retirement villages located in Myrtle Bank, Marion, Glengowrie and Murray Bridge.

Our villages have 220 units and 9 apartments with near 100% occupancy and we extend a warm greeting to the 18 new residents that joined our community during the financial year.

The gradual easing of Covid-19 restrictions saw attendance at village functions return to near full capacity with residents attending Happy hours, craft mornings, exercise classes and indoor lawn bowls.

Completion of the refurbishment of Hamilton House at Hamilton Village was welcomed by residents this year. The redesign and refurbishment graciously blends contemporary aesthetics while maintaining the original heritage of the building. A new library, upgraded kitchen, new bathroom facilities, increased storage and an extension to the main lounge increase the amenity of this beautiful building for resident use.

We are looking forward to building 7 more units at Waterford Estate this financial year and planning is already underway for a renovation of the Community Centre at our Sturt Retirement Village.

I would like to extend my thanks to our retirement living team of Terri Wood, Peter Elphick, Steve Worster, Steve Brokate and the loyal team of trades and contractors for their efforts throughout the year.



CHIEF FINANCIAL OFFICER



Aldo Fonovic

Financial headlines for the year are as follows:

Revenue

Total Revenue reported of \$20.3m was \$0.1m (1%) lower than the previous year.

Minor increases in aged care revenue \$0.6m (4%) combined with continuing strong performance from our retirement village operations \$0.2m (11%) were offset by the weakening performance of our managed equity investments which dropped (-\$0.6m) in line with global markets.

Expenditure

Our reported expenditure grew \$0.9m (5%) to \$19.8m. The majority of this growth \$0.7m related to higher wages and salaries costs attributed to legislated wage increases, combined with extra time invested in managing our ongoing Covid-19 response.

Financial Position/ Balance Sheet

Our total equity at \$69m continues to grow in a steady and secure manner.

Gross assets grew by \$5.2m, with total liabilities growing by \$3.7m.

The increase in gross assets is represented by valuation increases in our retirement village and affordable housing portfolios. Our cash position of \$9.3m down from \$20.2m reflects the careful investment expenditure in our new Romani aged care facility.

Our focus remains on protecting our financial position which will enable us to deliver on our longer-term mission and strategic objectives, whilst ensuring we continue to support our vulnerable populations and the broader veteran community.

As a proud not for profit

organisation, all funds generated by RSL Care SA are invested to deliver on our mission to provide specialised accommodation services and related support for the benefit of the ex-service and wider community of South Australia.

Our financial focus this year has been funding the design and construction of Romani, a 72 bed brand new residential aged care facility in Murray Bridge. The \$20m investment in Romani forms an important addition to our portfolio providing quality care options to our Waterford Estate village residents as well as to Riverland residents in general.

The increasing resident complexity, demand for services, and effects of managing COVID has placed pressure on the financial operating resources of the aged care industry. The implications of managing COVID-19 impacts have added a significant financial and operational burden on the day to day business operations which included increased staffing for the support and protection of residents and ensuring safe visiting arrangements were able to continue

The financial statements meet all legislative requirements and have been audited by BDO Audit.

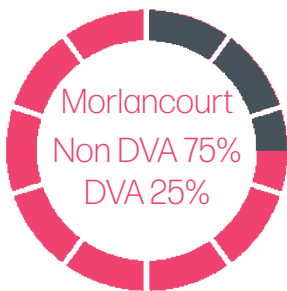
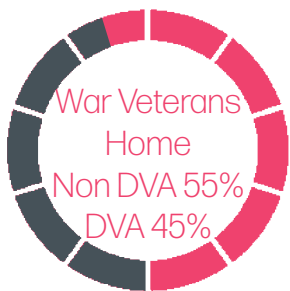
Altruistic Objectives

Direct and indirect funding was provided to support our ARVL veteran homelessness program, the ongoing employment of an ARVL Program Manager and Veteran Support Officers, as well as providing rental subsidies for our affordable and emergency housing portfolio.

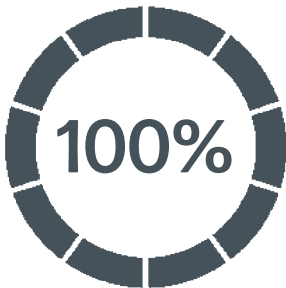
We also continue to contribute and financially support different elements of the ex-service community including, providing the services of a part-time Finance Manager to the RSL SA for a 3 month period, Military and Emergency Services Health Australia (MESHA), and the Veterans Social support program, as well as providing support for various current and ex-service related initiatives.

Finally, I would like to take this opportunity to thank the finance and administration team for their ongoing efforts in delivering high level services to our clients.

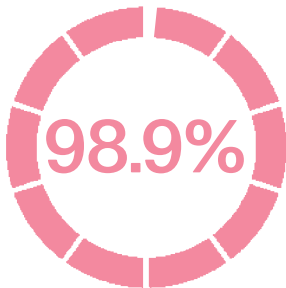
Residents



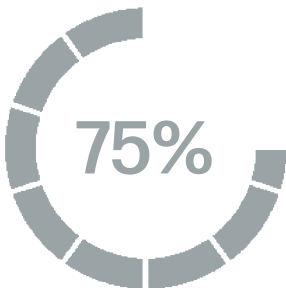
Occupancy



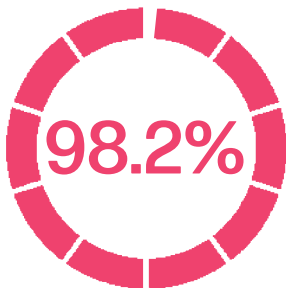
Retirement Living



War Veterans Home



ARVL



Morlancourt

Workforce FTE (excludes agency)



FINANCIAL PERFORMANCE

STATEMENT OF PROFIT AND LOSS

2022

2021

TOTAL REVENUE

\$ 20,305,429

\$ 20,433,556

EXPENSES

Salaries and employee benefits

(\$ 12,627,395)

(\$ 11,968,940)

Depreciation and amortisation

(\$1,256,000)

(\$1,222,029)

Other expenses

(\$ 5,930,624)

(\$ 5,729,686)

TOTAL EXPENSES

(\$19,814,019)

(\$18,920,655)

Revaluation gain - Retirement Villages

\$143,638

-

Revaluation gain - Housing Portfolio

\$865,869

-

Surplus for the year

\$ 1,500,917

\$ 1,512,901

STATEMENT OF FINANCIAL POSITION

2022

2021

ASSETS

Cash and investments

\$ 9,331,145

\$ 25,821,501

Investment property

\$ 76,991,947

\$ 74,748,311

Property, plant and equipment

\$ 65,872,592

\$ 53,538,938

Other assets

\$ 26,236,595

\$ 19,114,624

TOTAL ASSETS

\$178,432,279

\$173,223,374

LIABILITIES

Trade and other payables

\$ 2,286,294

\$ 1,204,322

Refundable loans

\$ 99,145,244

\$ 96,424,121

Other liabilities

\$ 8,062,794

\$ 8,157,901

TOTAL LIABILITIES

\$ 109,494,332

\$ 105,786,344

NET ASSETS

\$ 68,937,947

\$ 67,437,030

EQUITY

Accumulated funds

\$ 53,682,636

\$ 51,425,537

Reserves

\$ 15,255,311

\$ 16,011,493

TOTAL EQUITY

\$ 68,937,947

\$ 67,437,030

FINANCIAL COMPLIANCE

RSL Care SA received an unqualified audit report from BDO Audit (SA). Full copies of our financial statements are available to Association members, current and prospective residents on request, and are also available on the Australian Charities and Not-for-profits Commission (ACNC) website.

War Veterans Home/RSL Care SA Board History

Members of the Governing Body in its various forms

1. Original governance structure appears to have been President, Secretary, Treasurer and Executive Committee members. Appears to have also had positions of Hon Asst Secretary and Treasurer but not included on board.
2. The position of Hon Organiser appears to relate to a women's "auxiliary" type group.
3. Earlier governance structure changed on 28 Oct 1991 to the current board structure.
4. Sources: a) Honour Board b) Brian Dickey 2005 History
c) Annual reports d) Anecdotal advice
5. As at AGM 2022

Name	Years	Position Held	Name	Years	Position Held
J.H. Cooke	1916 - 1943	President	Sir Arthur Lee	1949 - 1967	
W.E. Rogers	1916 - 1935	Treasurer		1967 - 1991	President
A.R. Fuller	1916	Secretary	J.D. Lee	1953 - 1972	
C.J. Thomas	1917 - 1932	Secretary	R.J. Bridgland	1957 - 1981	
S Price Weir	1918 - 1932				
T. S. O'Halloran	1918 - 1935		R.L. Hooper	1950 - 1963	Various such as
	1935 - 1938	Treasurer			Asst secretary, Asst Treasurer, Auditor
C.F. Graebner	1930 - 1946			1963 - 1970	Secretary
W.D. Howard	1932 - 1963	Secretary		1963 - 1991	Treasurer
	1947 - 1963	Treasurer		1980 - 1991	Secretary
J.W. Bell	1932 - 1936			1991 - 2000	Chairman
W.J.F. McCann	1932 - 1943			2000 - 2006	
	1943 - 1957	President	W.H. Lake	1963 - 2009	
C.J. Thomas	1932 - 1941		F.E. Stahl	1967 - 1974	
C.E Spiller	1935 - 1938		A.J. Ewins	1970 - 1980	Secretary
	1938 - 1946	Treasurer	J.G. McKinna	1973 - 1988	
L.W. Jeffries	1936 - 1949		L.H. Ferrar	1973 - 1997	
F. Hardy	1938 - 1947		A.R. Read	1974 - 1991	
Sir William Bishop	1941 - 1967		R.J. Emmett	1981 - 2008	
C.C. Gillham	1943 - 1953		P.N. Fleming	1988 - 1991	Former State President RSL SA/NT
M.C. Lee	1946 - 1958			1988 -	
	1957 - 1967	President	K.W. Hoffman	1998	Former State Secretary RSL SA/NT
	1967 - 1972				
R.E. Reynolds	1950 - 1951	Secretary	N Paramor	1992 - 1994	
N. Jaensch	1946 - 1948		Dr R.B. Bennett	1995 - 1998	
W.H. Shepherd	1947 - 1949				
C.E. Kumnick	1948 - 1963				

Name	Years	Position Held		
W. Battams	1995 – 1996		B. Horan	2015 – 2016 Became State President RSL SA/NT
J.H. Statton AM	1996 – 2008	Former State President RSL SA/NT	Name	Years
	2008 – 2013	Chair	R. Hankins	2015 – 2018
	2015 – 2016		G. Tattersall	2016 – 2020
G.L. Parker	1997 – 2003			2021 – Chair
L. J. Lewis AM	1997 – 2008		A. Heidenreich	2017 – 2022
Miss J Ramsay OAM	1997 – 2006		F. Kite	2017 –
Dr A. Summers	1997 – 1999		L. Opie	2017 –
J.R. Black	1998 – 2000		M. Centofanti	2018 – 2021
	2000 – 2008	Chair	S. Knight	2018 –
R.D. Park	1998 – 2006		A. LeCornu	2021 –
Mrs S Carmody	1998 – 2003		M. Prosser	2021 –
N. Sheridan	2002 – 2010		A. Boeyen	2022 –
J.C. Marshall	2004 – 2008			
P.N. Krah	2005 – 2018		President/Chair	
J. Spencer OAM	2007 – 2013	former State Secretary RSL-SA/NT	J.H. Cooke	1916 – 1943
D. Everitt	2008 – 2013		W.J.F. McCann	1943 – 1957
	2013 – 2015	Chair	M.C. Lee	1957 – 1967
Commander S. Coulson CSM	2006 – 2009		Sir Arthur Lee	1967 – 1991
M. Mummery OAM	2006 – 2011	former State Secretary RSL-SA/NT	R.L. Hooper	1991 – 2000
L. Byers	2008 – 2015		J.R. Black	2000 – 2008
	2015 – 2020	Chair	J.H. Statton AM	2008 – 2013
J. Hazel	2008 – 2012		D. Everitt	2013 – 2015
J. Sweeney	2008 – 2017		L. Byers	2015 – 2020
G. (Moose) Dunlop	2009 – 2010		G. Tattersall	2021 –
R. Turner	2010 – 2018			
D. Chamberlain	2011 – 2017			
M. Bendyk	2012 – 2014			
D. White	2011 – 2017			
E. Clare	2012 –			







RSL CARE SA

ANDREW RUSSELL
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