

April 2025

MEMBER REPORT

McLaren Vale & Districts
War Memorial Hospital Incorporated



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MEMBER UPDATE APRIL 2025

We know that views about the hospital's recent direction have varied across our community. This bulletin is designed to keep all members updated on the practical steps the board is taking to secure our site's future, improve communication, and honour the hospital's legacy. Thank you for staying engaged as we continue working toward our shared goal – continuing health support for our community from Aldersey Street.

INCLUDED IN THIS MONTHS REPORT

Future Proofing Our Health Precinct

Tenants Update

The History Project

Board Ins and Outs

Court Case Resolution and CBS

FUTURE-PROOFING

Following a period of assessment and stabilisation of the actual state of our association, we are happy to inform you that several excellent opportunities have presented themselves for our hospital.

1. We are meeting with the South Australian health minister, Hon Christopher Picton, this month, April; the proposal for the meeting is :
 - a. To discuss the potential use of the site as a hospital or other health services provider in partnership with the government,
 - b. Reconsider the current lease terms of the ambulance station.
 - c. To understand the government's plan for health in the South so that the board can ensure tenants align with and support these plans.
- 2. The board has negotiated with the owners of South Australian NDIS provider VanaCare to establish a dedicated operations company to lease rooms to specialist providers.

WHY?

The objective is to split the hospital site into a high-traffic health hub area and a traditional respite/palliative care hospital service.

This agreement would see a professional manager handle business operations such as financial management, tenant management, services management, and maintenance for a fixed fee and share of profit.

WHAT'S IN IT FOR US?

The balance of profit would be paid to the association, applied to building maintenance, and used to further the association's objectives. It will reduce our present accounting expenses from approximately \$80,000 annually to around \$10,000 annually with further savings opportunities in maintenance.

HOW WOULD IT WORK?

This arrangement would require the manager to:

- a. Report to the board monthly and
- b. To attract and manage service providers in line with our association's objectives.

FUTURE-PROOFING

WHAT'S THE BOARD DOING TOWARDS THIS GOAL?

The board is in lockstep with VanaCare's owners to establish a dedicated operations company that will lease rooms to specialist providers. This approach ensures that the company managing our site will have access to extensive VanaCare networks across all medical and management areas, which includes over 100 industry professionals and specialists in the field.

They will target service providers offering optometry, podiatry, hearing specialists, diabetic services, nutritionists, occupational therapists, and other services.

This is a new management model. It is a 21st-century approach, a fusion of business with all of its drive and a community organisation with a significant asset that needs revitalisation. We understand that some may think this can't work, some may not understand how it will work, and because of this, if you wish a more detailed explanation, please email us at information@mclarenavalehospital.com.au.

We would be most happy to set up private time to go through it with any member who wishes to do so.

WHAT IF THE GOVERNMENT OFFERS TO SET UP A FULL HOSPITAL HERE AGAIN?

The board intends to establish an operating agreement allowing our organisation to generate income while ensuring a relocation clause or termination right that does not prohibit the site from returning to its status as a hospital.

WHY DOES THE BOARD THINK THIS IS THE BEST WAY?

The primary benefit of appointing an operator is that it allows the board members to focus on member communication and the charity work of our association, which is less complex than commercial operations management. This arrangement is considered a better option than employing a CEO or General Manager as the operator takes on some risk and leverages the resources of their (much larger) group of companies to deliver a lower total service cost to us.

The other alternative, a simple lease or "right to occupy", transfers operational control of the site to a third party and prevents the board from directly influencing how the site is run. A lease agreement with a larger operator for most of the site would unfairly bind future boards and prohibit the community from having a say over their asset.

We are a board of volunteers with no staff who can do the work for us. This is the easiest and financially safest way for us to manage the significant work needed to bring our association back from the brink.

We engage somebody to work for us; the harder they work, the more profit they make, and the more profit we make alongside them, we can reinvest in the building and the community.

TENANTS MAY MOVE IN SOON

We received several inquiries from Australian-based and Australian-owned research organisations regarding laboratory/trials, medical trials, and research facilities.

THE BEST FIT FOR US

We assessed their proposals and selected a currently registered charity and research organisation to fit our current needs best. They initially had an extensive walk-through in the capable hands of Trish and came back to negotiate terms with Henry and Michael on Thursday, 3 April. Our confidence is high that they will be leasing the most challenging section of the main building - the former surgical wing, whose hard floors and clinical spartan appearance are perfect for a laboratory setting.

WHAT WILL THEY BE DOING?

The short answer is lab work and research trials. Their present lease at Flinders Medical Centre is about to expire, so they are keen to find another location quickly to avoid a lot of downtime. We are particularly interested in research trials. These will allow residents of McLaren Vale and the surrounding area to access cutting-edge treatments for immune conditions, respiratory ailments, sleep disturbance, and cancer.

CURRENT TENANTS.

At the time of writing this bulletin, all of our current tenants remain, and the board hopes that will continue.

BREASTSCREEN SA

We are delighted to announce that the BreastScreen SA mobile breast assessment truck will return to the McLaren Vale Hospital grounds from early January 2026 to early February 2026. Trish completed this deal on the morning of 4 April. Bookings for this service will go online via BreastScreen SA eight weeks before the commencement of their time with us.

This crucial service for our community will remain an annual fixture for the McLaren Vale Hospital and our association while this present board is in place. We hope that future boards will continue this essential service for our community's health and well-being.

Once actual dates are officially confirmed, we will circulate those along with information about how bookings can be made,

We hope that everyone who has a need will take this opportunity to ensure that they are in the best health possible.

THE HISTORY PROJECT

A PROPOSAL FOR THE LEGACY OF MCLAREN VALE HOSPITAL: HISTORY

History Community and Heritage Hospitality

The McLaren Vale & Districts War Memorial Hospital has stood for over 74 years as a beacon of care, resilience, and community spirit. As part of our Hospital's rebirth, the board feel we should honour that legacy by transforming underused spaces into a hub for history, storytelling, and sustainable community growth.

At the heart of this proposal is revitalising the former radio station studio, old OP shop sheds, and the upstairs of the heritage Tsong Gyiaou building. These spaces will transform into multi-functional, inviting areas celebrating the hospital's contributions to the region while boldly looking to the future.

WE ARE CALLING IT - THE HISTORY PROJECT

Key components of the project will include:

- A comprehensive hospital archive, preserving documents, photographs, oral histories, and artefacts.
- A series of podcasts featuring heartfelt interviews with former staff, patients, and local families who shaped the hospital's journey.
- Interactive history walks are offered as self-guided audio tours via QR codes and live weekend experiences with volunteer storytellers.
- Historically Inspired Revamped Accommodation upstairs in the Tsong Gyiaou building. It will be gradually restored into a simple heritage accommodation experience.
- A Community Art Project, rotating exhibitions showcasing local artists' work throughout public hospital spaces.
- A Canteen/Café. Initially, it will be more like an old-school canteen than a fancy café. It would be volunteer-run and totally for the community.

Instead of creating something new, this project honours the hospital's past. The upstairs quarters were originally home to the students of the girls' school that preceded the Aldersey home residence. They will be restored thoughtfully, cost-effectively, and with historical sensitivity. Each room will embody the character and simplicity of the original purpose, providing visitors with a unique opportunity to experience a piece of living history. Modest furnishings, community-donated décor, and interpretive signs will enable guests to connect deeply with this part of the hospital's heritage.

THE HISTORY PROJECT

This initiative is entirely community-driven. Volunteers, students, artists, and historians will all have the chance to participate, whether digitising records, painting murals, recording stories, or leading tours. Art exhibitions, curated by Trish with support from local artist Mrs Leanne Caune, will brighten our hallways and help raise funds for the hospital through modest commissions on sales.

Financially, the project could generate nearly \$50,000 in income during its first two years through donations, walking tours, art sales, and heritage accommodation.

All are achieved with minimal expenditure and maximum community value.

We invite all members to participate as volunteers, contributors, or simply supporters of this exciting new chapter in the hospital's journey.

The board has asked Maris and Trish to lead this project and engaged with the History Trust of South Australia. History Trust CEO Mr Greg Mackie, a patient in 1963 has offered guidance where required and to come on as guest interviewee.

PROJECTED OUTCOMES ARE IMPRESSIVE:

- A growing base of tourists and locals engage in walking tours and exhibitions.
- Ongoing collaboration with schools, historians, and local businesses.
- A thriving multimedia and arts precinct that supports both local talent and the hospital's continued relevance.



BE PART OF THE STORY

THE NEW CANTEEN/CAFÉ

The lower floor of the Tsong Gyaou building's rear rooms, gardens and grassed areas will be where history, good company, and perhaps a warm scone will meet.

Initially, it will be more like an old-school canteen than a fancy café. It will be volunteer-run for and by the community. It won't go ahead straight away; its activation will match the growing commercial operations in the main building so that services are available to patients, visitors, service providers, history walk tour participants and anyone who wants a snack while they enjoy the calming feel of our community space.

BE PART OF THE STORY

In every sense, this is a project born from the community, for the community. It's about telling our story together and sharing it with the world. We invite all members, artists, baristas, managers, carpenters, plumbers, handy people, and history lovers to volunteer, get involved, contribute ideas, or cheer us on. With your support, The History Project will preserve our past, energise our present, and inspire our future. Email us! Please let us know if you have any feedback or questions or, most importantly, if you want to help!

ALL THINGS W.W.W.

We acknowledge the recent comments and concerns shared on the Hospital's Facebook® page, and we want to thank everyone for their passion and care for our local hospital. Our team is actively working to revitalise the site, enhance its potential, create new opportunities for tenants, and ensure it remains a valued community asset. This includes introducing a new canteen/café space, which we hope will become a welcoming place for patients, visitors, and staff alike.

As part of this revitalisation, the Facebook page and website will also receive a complete refresh in the coming weeks. The updated page will serve as a news and information space where the public can follow progress, read updates, and engage with the hospital's vision for the future. We're also working to improve communication channels. Once the new site is live, you'll be able to submit feedback, ask questions, and stay informed through regular bulletins. We genuinely want to build physical and online spaces that serve the community well, and we welcome your support and constructive feedback as we move forward.

Contact us:

Information@mclarenavalehospital.com.au



THE BOARD - INS AND OUTS

We, sadly, must inform you of recent changes to our board. Serving on the board during this heightened and stressful time requires a significant time commitment. Unfortunately, for various reasons, some of our 'new' board members (those appointed since the settlement of the legal case) found themselves unable to commit to the requirements of a board member.

At present, the board requires frequent meetings, far more often than the usual once a month, to advance the discussions from the precarious position the previous board left us in after the 2024 Annual General Meeting.

THE OUTS

Regrettably, board member Mr Trevor Spurr resigned a few weeks ago due to health reasons. We are incredibly grateful for his contributions to the previous and incoming boards and wish him a speedy recovery.

Likewise, board member Ms Lauren Walker could not attend many of the times proposed. This is entirely understandable with study, a young family, and work. Lauren expressed her ongoing commitment and support for our association and would love to be able to help in the future. She resigned on the 31st of March.

Both Lauren and Trevor are most welcome to re-stand and return to the board if time and health permit.

Two other members, Mr Gareth Carrel and former chair Ms Samantha James, could not find the time necessary to fulfil their board duties.

We wish them both all the best and success in their future endeavours.

We appreciate the dedication and contributions of all board members, past and present; however, the commitment needed from board members to act on ongoing remedial efforts is much more than many can offer.

At this critical stage, board members must have strong business acumen and time available at short notice; these things rarely come together.

It is important to note that the constitution has strict rules about needing eight board members.

The board must have eight members to conduct business.

So, while we would prefer to communicate with the members generally and invite people to participate, the association cannot function or make decisions on critical matters without an entire board.

This is the reason the casual vacancy rules exist.

We have included an explanation of how the interim appointment process works within our constitution at the end of this bulletin.

THE BOARD - INS AND OUTS

THE INS

Under Clause 8.4, we have appointed **Mr Maris Caune** to take over Gareth's term. Maris is a current member of the association and a 23-year resident of McLaren Vale who missed the application deadline for board positions last year. He subsequently wrote to the board, offering his time and skills for any available position. Maris has over 30 years of experience in the film, TV, and live performance industries in Adelaide and beyond. He holds tertiary qualifications in Educational Theatre, Media Communication, and Operational and Work Health & Safety. He has nearly completed his Master's Degree in Creative Writing and has been offered PhD candidacy. The board will use Maris's writing, events, and safety skills to revamp the hospital's written message and public relations presence, site and building safety compliance, and development of an exciting community-based history, arts, and events program. A very short summary: You have already read The History Project earlier in this bulletin.

Mr George-Alexander Mamalis, also a current association member, has filled Samantha's position. George is a strategic communications and social media specialist with over 13 years of experience spanning politics, science, government, campaigns, and media. Based in Adelaide, George is also the founder of the Instagram Community 'The Adelaide Set', A growing community of over 150,000 members. George's experience in social media will be a valuable addition to our community.

George has a Bachelor of Science (Mineral Geoscience) from the University of Adelaide and was mentored by Bill Muirhead, founder of Satachi & Satachi (advertising agency) and former Agent General of South Australia. He was also runner-up South Australian Citizen of the Year 2014. You can't stop George; he is also a crazy fundraiser. He once walked over 450 kilometres from Adelaide to Mount Gambier in 15 days, raising money for Kurlo Yerlo, an Aboriginal action-based charity that empowers the local Aboriginal community. He raised around \$12,000 that time, and his Kangaroo Island charity walk raised \$15,000; they're the others, too.



THE BOARD - INS AND OUTS

Both George and Maris bring essential skills to managing hospital records and enhancing the hospital's public image, and we welcome them to the team.

We are working to confirm our 7th and 8th board members so that we can continue with board matters and execute agreements. We expect to accept a current medical professional to one of those positions.

The person we have asked is in the process of confirming their other commitments, and therefore, we cannot announce their name at this time; however, we are hopeful that they will join us very soon. Dr Rachel Wells remains the board's medical practitioner consultant (not a board member). If you have an interest and the time and skills to match what you've read here, please email the board at information@mclarenavalehospital.com.au and express your interest.

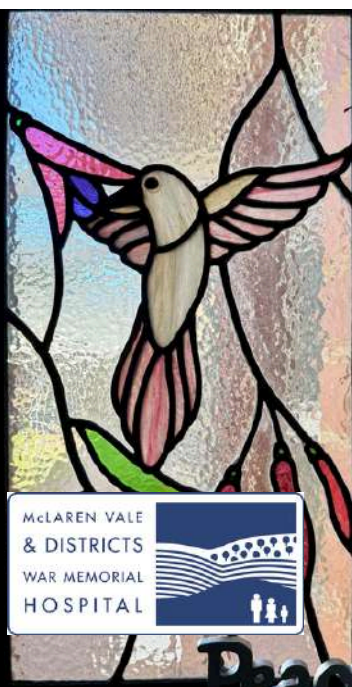
Board candidates should ideally have relevant experience in

- charity management or demonstrated communication skills
 - business experience at an executive level or experience in a health services discipline.
- and, adhere to a professional code of conduct (AHPRA, REISA, APESB or similar)

Unfortunately, board member departures and inability to attend meetings have slowed the entire process; however, despite this, significant progress has been made.

We are confident that the present board possesses the necessary skills to lead the hospital forward while actively working towards the goals set in last December's meeting and the path forward for many years.

From the current board team, thank you all for your continued support.



THE COURT CASE RESOLVED

The court case was resolved in March 2025 with the terms settled as communicated last year.

The association had to make public statements about the association's conduct and was ordered and agreed to pay the applicant's costs.

Costs totaled \$764,000

The breakdown of them is as follows:

- Applicants costs: Incurred by Belperio Connell Lawyers, Stephen Phillips of Bar Chambers and Arturo Dal Cin of Murray Chambers, Supreme Court of South Australia paid by settlement agreement - \$249,000
- **The applicant charged no fees and sought no damages or further costs, only reimbursement of third-party costs.**
- Respondents costs (Our Association) \$515,000, was payable to ADV Law.
- The new board sought further legal advice on a pro-bono (no fee) basis with an independent lawyer to determine the steps required to finalise the case.

Alternatives such as taxing or reviewing the cost order to the applicant were considered, and an offer to settle the outstanding costs for a lower figure was made.

These options were rejected because the applicant asked for no damages; the only claim was reimbursement of third-party costs, which were unavoidable because our association refused to mediate at any stage. The judgement was for the applicant, and the previous board determined the settlement terms, so we are legally obliged to pay.

WHAT'S TAXING IN THIS SENSE?

It has nothing to do with the ATO. When a legal bill is "taxed" in Australia, it means it is reviewed and assessed by a court or independent costs assessor to determine whether the charges are fair, reasonable, and in accordance with legal standards. This formal process exists to prevent court participants being overcharged for legal services.

Taxing the applicants costs was estimated to cost more than \$20,000 and the board was advised by two law firms that this was unlikely to result in savings. The applicants costs were less than half of the respondents. The applicant, as a lawyer was unlikely to have perused claims that were unlikely to succeed. Lastly, the applicant advised that further evidence was discovered after the trial, including deleted mailboxes and emails not provided during the court discovery process.

For those who want to read more about all this legal stuff regarding taxing, there is more info at www.lawsocietyysa.asn.au

On the basis that the applicant had only perused claims that were likely to succeed and that further dispute could breach the agreement reached by the departing board members.

After this exhaustive process it was determined that it was in the best interests of our association to settle the matter promptly and avoid any further costs, thereby allowing the community to move to more positive undertakings.

CBS GOT INVOLVED

CBS (CONSUMER AND BUSINESS SERVICES) IS THE GOVERNMENT REGULATOR FOR INCORPORATED ASSOCIATIONS LIKE OURS IN S.A.

The Association also received an anonymous complaint investigation from Consumer and Business Affairs and was asked to provide copies of all documentation up to and including February 18th. The board has complied with this request and made all correspondence and records available. The board has received no further enquiry from CBS at this time.

THE FIRST QUARTER 2025 FINANCIALS

We have had one request for a breakdown of the entire 2025 first-quarter financials; however, due to this bulletin being very long already, that would add many more pages.

However, if we didn't have the court case payments to make, we can inform you that we would have seen a small profit of \$22,000.00 in the first quarter of 2025

if you wish any further explanation of financials, please email Michael at michael@mclarenavalehospital.com.au . He would be happy to arrange a mutually convenient time to sit down with anyone interested to explain everything in detail.

THE CURRENT BOARD ON 04 APRIL 2025

Mr Henry Davis – Chair.

Mrs Trish Tassie – Deputy Chair.

Mr Boyd Sparrow – Secretary.

Mr Michael Baragwanath – Treasurer/Public Officer

Mr Maris Caune – Board Member.

Mr George-Alexander Mamalis, – Board Member.

Two additional board members are yet to be appointed.

SUMMING IT ALL UP...

The past four months brought challenges, but April 2025 marks a meaningful step forward. This bulletin outlines how we're stabilising the hospital site, pursuing health partnerships, and honouring our community's legacy through thoughtful planning and real opportunities.

From meetings with the Health Minister to welcoming new tenants, the board is working to balance community care with financial sustainability. The proposed operator model brings experienced management while preserving the site's potential to return to a hospital. Alongside this, The History Project reflects our commitment to heritage, storytelling, and creativity, led by the community, for the community.

Board changes have slowed some processes, but new members bring vital energy and skills. We've met our legal obligations transparently, and our compliance with CBS remains current. Though the road has been complex, the direction is clear. We now invite all members to contribute as volunteers, supporters, or engaged voices. This site's future depends on steady hands, shared vision, and community spirit.

CONSTITUTION EXPLAINED

HOW INTERIM BOARD APPOINTMENTS WORK

When a board member steps down before their term ends, the hospital's Constitution allows the remaining board to appoint a replacement. This is called filling a "casual vacancy." The chosen person must already be a hospital member and will serve the rest of the original term. Once that term ends, they can stand for election like any other member. This process ensures the board can continue operating effectively between Annual General Meetings, maintaining good governance, stability, and momentum without leaving critical roles unfilled.

THE RELEVANT CONSTITUTION CLAUSES.

Clause 8.4: Casual Vacancies

"The Board shall have the power to appoint a Member to fill any casual vacancy occurring on the Board. The appointed Member will hold office, subject to these Rules, for the remainder of the Term of the vacancy being filled. The appointed Member shall be eligible for re-election at the completion of the Term."

This clause empowers the Board to appoint a Hospital Member to fill any vacancy between Annual General Meetings.

The replacement must be a Member of the Hospital, serves for the remainder of the original Board Member's term and is eligible for re-election once that term ends.

Related Clauses for Context:

Clause 8.6: Vacation of Office - Specifies when a Board Member's position is declared vacant, including: Death, Completion of their term, Resignation in writing, Disqualification under Clause 8.7

Clause 8.7: Disqualification of Board Members

Outlines grounds for disqualification, such as: Legal disqualification, Expulsion as a Member, Unapproved absences from three consecutive Board meetings, Criminal conviction or conflict of interest

These clauses ensure continuity and stability of governance by allowing the Board to promptly fill unexpected vacancies while maintaining transparency and compliance with the Constitution.



THANK YOU!



EMAIL_US_INFORMATION@MCLARENVALEHOSPITAL.COM.AU