

PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC 2020-21 Annual Report

PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC C/- Port Broughton District Hospital and Health Service Bay Street, Port Broughton SA 5522 <u>www.sahealth.sa.gov.au/PortBroughtonHAC</u> Contact phone number: 08 8635 2200 Contact email: <u>HealthPortBroughtonHAC@sa.gov.au</u> ISSN: 1837-3186 Date presented to Minister: 30 September 2021

To:

Hon Stephen Wade MLC Minister for Health and Wellbeing

This annual report will be presented to Parliament to meet the statutory reporting requirements of *Public Sector Act 2009, the Public Finance and Audit Act 1987, the Health Care Act 2008* and the requirements of Premier and Cabinet Circular *PC013 Annual Reporting.*

This report is verified to be accurate for the purposes of annual reporting to the Parliament of South Australia.

Submitted on behalf of the Port Broughton District Health Advisory Council Inc by:

Monique Button

Presiding Member

adjutta

Date 30 September 2021

Signature

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From the Presiding Member



I was delighted to take the reigns as Presiding Member at our October Annual General Meeting, after the outstanding service of Dr Alison Edwards. The HAC thank her for her contributions, particularly project managing the Helipad Project.

Late in 2020, our HAC was finally given Parliamentary permission for a new 'slim line' name to Port Broughton District Health Advisory Council (PBDHAC).

Our biggest project, the construction of the on-site helipad, was completed and welcomed the inaugural landing on 1 October 2020. The Powerline Environment Committee and Barunga West Council undergrounded the adjacent power lines in March 2021. Further landscaping will be undertaken after consultation with the Barunga West Council once they finalise their main street plans.

The Governor, His Excellency, the Honourable Hieu Van Le AC, Governor of South Australia, accompanied by his wife, Mrs Lan Le, attended and officially opened the Helipad on Sunday 11 April 2021, with the assistance of Mrs Joyce Humphrys. Mrs Humphrys was a significant donor towards the construction of the helipad and joined the Governor in the ribbon-cutting ceremony. A crowd of approx. 100 people followed COVID-19 regulations to witness the opening as well as special guests, helipad donors and HAC members. Whilst this was a somewhat smaller ceremony than originally planned pre-COVID-19, guests enjoyed afternoon tea in the Sporting Clubrooms after the ceremony. We are proud of the delivery of a helipad that is fully compliant as a secondary HLS site, capable of supporting future performance class operations in either PC1 or PC2WE.

The HAC is now focused on facilitating another Providers Forum for services and local stakeholders. Again, we are at the mercy of the current pandemic but still move forward with plans.

Like all HAC's we are in awe at how our local GP's, nursing, health staff and administration is handling the COVID-19 pandemic. We adapt when our meetings need to be via Teams, with masks, without masks, social distanced, sanitised and QR coded, but we are not on the front line. The PBDHAC thank our local health network for the way they have supported our community during this pandemic.

Monique Button Presiding Member

Port Broughton District Health Advisory Council Inc

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2020-21 ANNUAL REPORT for the Port Broughton District Health Advisory Council Inc

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Overview: about the agency

Our strategic focus

Our Purpose	The Health Advisory Council was established by the then Minister for Health and Ageing to undertake an advocacy role on behalf of the community and to provide advice in relation to health matters, amongst other functions. The constitution is available at – www.sahealth.sa.gov.au/PortBroughtonHAC
Our Vision	Not applicable
Our Values	Not applicable
Our functions, objectives and deliverables	The Health Advisory Council undertakes an advocacy role on behalf of the community.

Our organisational structure

Membership of the Health Advisory Council can include:

- Up to eight community members
- One Local Government nominee
- A local Member of Parliament, or their nominee
- Up to two Medical Practitioner members
- One employee from the Port Broughton District Hospital and Health Service.

A list of current members is available at:

www.sahealth.sa.gov.au/PortBroughtonHAC

Changes to the agency

During 2020-21 there were no changes to the agency's structure and objectives as a result of internal reviews or machinery of government changes.

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Our Minister

Hon Stephen Wade MLC is the Minister for Health and Wellbeing in South Australia.

The Minister oversees health, wellbeing, mental health, ageing well, substance abuse and suicide prevention.

Our Executive team

Not applicable

Legislation administered by the agency

Not applicable

Other related agencies (within the Minister's area/s of responsibility)

Yorke and Northern Local Health Network Inc Balaklava Riverton Health Advisory Council Inc Lower North Health Advisory Council Inc Mid North Health Advisory Council Inc Northern Yorke Peninsula Health Advisory Council Inc Port Pirie Health Service Advisory Council Southern Flinders Health Advisory Council Yorke Peninsula Health Advisory Council



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The agency's performance

Performance at a glance

The Health Advisory Council undertakes an advocacy role on behalf of the community.

Agency contribution to whole of Government objectives

Key objective	Agency's contribution	
More jobs	Not applicable	
Lower costs	Not applicable	
Better Services	Not applicable	

Agency specific objectives and performance

Agency objectives	Indicators	Performance
Not applicable		

Corporate performance summary

Not applicable

Employment opportunity programs

Program name	Performance
Not applicable	

Agency performance management and development systems

Performance management and development system	Performance
Not applicable	

Work health, safety and return to work programs

Not applicable

Executive employment in the agency

Not applicable

Financial performance

Financial performance at a glance

The following is a brief summary of the overall financial position of the agency. The information is unaudited. Full audited financial statements for 2020-21 are attached to this report.

Port Broughton District Health Advisory Council Inc

Statement of Comprehensive Income	2020-21 Budget \$000s	2020-21 Actual \$000s	Variation \$000s	2019-20 Actual \$000s
Total Income	0	0	0	0
Total Expenses	0	0	0	0
Net Result	0	0	0	0
Total Comprehensive Result	0	0	0	0

Statement of Financial Position	2020-21 Budget \$000s	2020-21 Actual \$000s	Variation \$000s	2019-20 Actual \$000s
Current assets	0	0	0	0
Non-current assets	0	0	0	0
Total assets	0	0	0	0
Current liabilities	0	0	0	0
Non-current liabilities	0	0	0	0
Total liabilities	0	0	0	0
Net assets	0	0	0	0
Equity	0	0	0	0

2020-21 ANNUAL REPORT for the Port Broughton District Health Advisory Council Inc

Port Broughton District Health Advisory Council Inc Gift Fund Trust

Statement of Comprehensive Income	2020-21 Budget \$000s	2020-21 Actual \$000s	Variation \$000s	2019-20 Actual \$000s
Total Income	0	4	4	158
Total Expenses	0	85	(85)	28
Net Result	0	(81)	(81)	130
Total Comprehensive Result	0	(81)	(81)	130

Statement of Financial Position	2020-21 Budget \$000s	2020-21 Actual \$000s	Variation \$000s	2019-20 Actual \$000s
Current assets	0	167	167	248
Non-current assets	0	0	0	0
Total assets	0	167	167	248
Current liabilities	0	0	0	0
Non-current liabilities	0	0	0	0
Total liabilities	0	0	0	0
Net assets	0	167	167	248
Equity	0	167	167	248

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Consultants disclosure

The following is a summary of external consultants that have been engaged by the agency, the nature of work undertaken, and the actual payments made for the work undertaken during the financial year.

Consultancies with a contract value below \$10,000 each

Consultancies	Purpose	\$ Actual payment
All consultancies below \$10,000 each - combined	Various	\$ O

Consultancies with a contract value above \$10,000 each

Consultancies	Purpose	\$ Actual payment
Not applicable		\$ O
	Total	\$ O

Data for previous years is available at: <u>https://data.sa.gov.au/data/dataset/yorke-and-northern-local-health-network-ynlhn</u>

See also the <u>Consolidated Financial Report of the Department of Treasury and</u> <u>Finance</u> for total value of consultancy contracts across the South Australian Public Sector.

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Contractors disclosure

The following is a summary of external contractors that have been engaged by the agency, the nature of work undertaken, and the actual payments made for work undertaken during the financial year.

Contractors with a contract value below \$10,000

Contractors	Purpose	\$ Actual payment
All contractors below \$10,000 each - combined	Various	\$ O

Contractors with a contract value above \$10,000 each

Contractors	Purpose	\$ Actual payment
Not Applicable		\$ O
	Total	\$ O

Data for previous years is available at: <u>https://data.sa.gov.au/data/dataset/yorke-and-northern-local-health-network-ynlhn</u>

The details of South Australian Government-awarded contracts for goods, services, and works are displayed on the SA Tenders and Contracts website. <u>View the agency</u> <u>list of contracts</u>.

The website also provides details of <u>across government contracts</u>.

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Risk management

Risk and audit at a glance

Not applicable

Fraud detected in the agency

Category/nature of fraud	Number of instances
Not applicable	

NB: Fraud reported includes actual and reasonably suspected incidents of fraud.

Strategies implemented to control and prevent fraud

Health Advisory Councils have specific functions and powers as defined in the *Health Care Act 2008* and the Constitution (for incorporated Health Advisory Councils or Rules (for non incorporated Health Advisory Councils), including actions that cannot be undertaken without the approval of the Minister.

Health Advisory Councils are instrumentalities of the Crown and subject to relevant Department of Treasury and Finance Treasurers Instructions.

The Constitutions / Rules identify the actions to be undertaken in the event of a conflict of interest. All declared conflicts of interest are reported to the Minister for Health through Yorke and Northern Local Health Network Inc.

Data for previous years is available at: <u>https://data.sa.gov.au/data/dataset/yorke-and-northern-local-health-network-ynlhn</u>

Public interest disclosure

Number of occasions on which public interest information has been disclosed to a responsible officer of the agency under the *Public Interest Disclosure Act 2018:*

0

Data for previous years is available at: <u>https://data.sa.gov.au/data/dataset/yorke-and-northern-local-health-network-ynlhn</u>

Note: Disclosure of public interest information was previously reported under the *Whistleblowers Protection Act 1993* and repealed by the *Public Interest Disclosure Act 2018* on 1/7/2019.

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Reporting required under any other act or regulation

Act or Regulation	Requirement
Health Care Act 2008	Part 4 Health Advisory Councils, Division 2 Functions and Powers, 18 Functions

- Act as an advocate to promote the interests of the community.
- Act as trustee and participate in budget discussions and financial management or development processes; and to undertake fundraising activities (incorporated HAC).
 - Helipad Project fundraising activities, community and consumer feedback around local volunteer ambulance network, land use, and services for the community.

Reporting required under the Carers' Recognition Act 2005

Not applicable

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Public complaints

Number of public complaints reported

A whole of SA Health response will be provided in the 2020-21 Department for Health and Wellbeing Annual Report, which can be accessed on the <u>SA Health</u> website.

A Regional Health Network response will be provided in the 2020-21 Yorke and Northern Local Health Network Annual Report, which can be accessed on the <u>SA</u><u>Health website</u>.

Complaint categories	Sub-categories	Example	Number of Complaints 2020-21
Not applicable			

Additional Metrics	Total
Not applicable	

Data for previous years is available at: <u>https://data.sa.gov.au/data/dataset/yorke-and-northern-local-health-network-ynlhn</u>

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Service Improvements

A whole of Yorke and Northern Local Health Network response is provided in the 2020-21 Yorke and Northern Local Health Network Annual Report, which can be accessed on the <u>Yorke and Northern Local Health Network website</u>.

Compliance Statement

A whole of Yorke and Northern Local Health Network response is provided in the 2020-21 Yorke and Northern Local Health Network Annual Report, which can be accessed on the <u>Yorke and Northern Local Health Network website</u>.

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2020-21 ANNUAL REPORT for the Port Broughton District Health Advisory Council Inc

Appendix: Audited financial statements 2020-21

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PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC

CERTIFICATION OF THE FINANCIAL STATEMENTS

We certify that the:

- financial statements of the Port Broughton District Health Advisory Council Inc:
 - are in accordance with the accounts and records of the Advisory Council;
 - comply with relevant Treasurer's Instructions;
 - comply with relevant accounting standards; and
 - present a true and fair view of the financial position of the Advisory Council at the end of the financial year and the result of its operation and cash flows for the financial year.
- Internal controls employed by Port Broughton District Health Advisory Council Inc for the financial year over its financial reporting and its preparation of financial statements have been effective.

Monique/Button Presiding Member of the Port Broughton District Health Advisory Council Inc 6 / 09 / 2021

VIL Vincent Bellifemini

Chief Finance Officer

07 / 09 / 2021

PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC STATEMENT OF COMPREHENSIVE INCOME For the year ended 30 June 2021

For the year ended 30 June 2021

	2021	2020
Income	\$'000	\$'000
Total income		-
Expenses		
Total expenses		-
Net result		<u> </u>
Total other comprehensive income		-
Total comprehensive result	-	<u> </u>



PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC STATEMENT OF FINANCIAL POSITION As at 30 June 2021

2021 2020 \$ '000 \$ '000 **Total assets** --Total liabilities --Net assets --**Total equity** --



PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC STATEMENT OF CHANGES IN EQUITY For the year ended 30 June 2021

	Asset revaluation surplus \$ '000	Retained earnings \$ '000	Total equity \$ '000
Balance at 30 June 2019	-	-	-
Net result for 2019-20		-	_
Total comprehensive result for 2019-20	-	-	-
Balance at 30 June 2020		-	-
Net result for 2020-21		-	
Total comprehensive result for 2020-21	-	-	
Balance at 30 June 2021	-	-	-



PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC STATEMENT OF CASH FLOWS For the year ended 30 June 2021

2021 2020 \$ '000 \$ '000 Net cash provided by/(used in) operating activities --Net cash provided by/(used in) investing activities --Net cash provided by/(used in) financing activities --Net increase/(decrease) in cash and cash equivalents --Cash and cash equivalents at the beginning of the period Cash and cash equivalents at the end of the period -



1 About Port Broughton District Health Advisory Council Inc

Port Broughton District Hospital and Health Services Health Advisory Council Inc was established as an incorporated advisory council pursuant to the *Health Care Act 2008* (the Act). The name was changed on 13 August 2020 to Port Broughton District Health Advisory Council Incorporated (the Advisory Council).

The financial statements include all controlled activities of the Advisory Council.

The Advisory Council does not control any other entity and has no interests in unconsolidated structured entities.

The Advisory Council is controlled by Yorke and Northern Local Health Network Inc.

1.1 Objectives and activities

The Advisory Council was established to undertake an advocacy role on behalf of the community, to provide advice, and to perform other functions as determined under the Act.

The Advisory Council is established to:

- advise on the health service needs, priorities and issues within the Local Area with particular emphasis upon those issues in the context of consumers of health services, carers and volunteers
- ascertain the health needs of the Community and the attitude of the Community to the development of health services within the Community
- advocate on behalf of the Community to support the planning and provision of health services as part of an integrated statewide health system for the benefit of the Community
- hold assets for the benefit, purposes and use of, the Health Unit(s) on terms and conditions determined of approved by the Minister
- undertake such other activities as the Advisory Council may determine for the benefit or support of health services in the Local Area

The functions of the Advisory Council are to contribute significantly to the improved overall health status of all people by acting as an advocate and providing advice about the provision of health services, health issues, goals, priorities, plans and other strategic initiatives both inside and outside the Local Area.

2 Contingent assets and liabilities

Contingent assets and contingent liabilities are not recognised in the Statement of Financial Position, but are disclosed within this note and, if quantifiable are measured at nominal value. The Advisory Council is not aware of any contingent assets and liabilities. In addition, the Advisory Council has made no guarantees.

3 Key Management Personnel

Key management personnel of the Advisory Council include the Minister, the Chief Executive of the Department for Health and Wellbeing, board members and the Chief Executive Officer of Yorke and Northern Local Health Network Inc and the members of the Advisory Council.

The Advisory Council did not enter into any transactions with key management personnel or their close family during the reporting period that were not consistent with normal procurement arrangements.

4 Remuneration of Council members

The total remuneration received or receivable by members was nil. In accordance with the Premier and Cabinet Circular No 016, government employees did not receive any remuneration for council member duties during the financial year. Unless otherwise disclosed, transactions between members are on conditions no more favourable than those that it is reasonable to expect the entity would have adopted if dealing with the related party at arm's length in the same circumstances.



Accountants, Auditors & Business Consultants

David Chant CA, FCPA Simon Smith CA, FCPA David Sullivan CA, CPA Jason Seidel CA Renae Nicholson CA Tim Muhlhausler CA Aaron Coonan CA Luke Williams CA, CPA Daniel Moon CA



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INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC.

Report on the Financial Report

Audit Opinion

We have audited the accompanying financial report of Port Broughton District Health Advisory Council Inc. (the Health Advisory Council), which comprises the statement of financial position as at 30 June 2021, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising summary of significant accounting policies and other explanatory information, and the statement by the presiding member and operational finance manager.

In our opinion, the financial report of Port Broughton District Health Advisory Council Inc. presents fairly in accordance with Treasurer's Instructions promulgated under the provisions of the Public Finance and Audit Act 1987, Department of Health Accounting Policies, the Health Care Act 2008, applicable Accounting Standards and other mandatory professional reporting requirements in Australia, the financial position of Port Broughton District Health Advisory Council Inc. as at 30 June 2021 and the results of its operations and its cash flows for the year then ended.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the Health Advisory Council in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (including Independence Standards) (the Code) that are relevant to our audit of the financial report in Australia, and we have fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Health Advisory Council's Responsibility for the Financial Report

The Health Advisory Council is responsible for the preparation of the financial report that presents fairly in accordance with the Health Care Act 2008, Treasurer's Instructions promulgated under the provisions of the Public Finance and Audit Act 1987, Department of Health Accounting Policies, applicable Accounting Standards and other mandatory professional reporting requirements in Australia. This includes responsibility for the maintenance of adequate accounting records and internal controls that are designed to prevent and detect fraud and error, and for the accounting policies and accounting estimates inherent in the financial report.

Auditor's Responsibility for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Health Advisory Council's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Health Advisory Council's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

GALPINS ACCOUNTANTS, AUDITORS & BUSINESS CONSULTANTS

Simon Smith CA, FCPA, Registered Company Auditor Partner

10/09/2021

PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST

CERTIFICATION OF THE FINANCIAL STATEMENTS

We certify that the:

- financial statements of the Port Broughton District Health Advisory Council Inc Gift Fund Trust:
 - are in accordance with the accounts and records of the Trust;
 - comply with relevant Treasurer's Instructions;
 - comply with relevant accounting standards; and
 - present a true and fair view of the financial position of the Trust at the end of the financial year and the result of its operation and cash flows for the financial year.
- Internal controls employed by Port Broughton District Health Advisory Council Inc Gift Fund Trust for the financial year over its financial reporting and its preparation of financial statements have been effective.

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Monique Button Presiding Member of the Port Broughton District Hospital and Health Advisory Council Inc (the Trustee)

06 , CC/ / 2021

VZ Vincent Bellifemini Chief Finance Officer

07 / 09 / 2021

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PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST STATEMENT OF COMPREHENSIVE INCOME For the year ended 30 June 2021

Note 2021 \$'000 Income Interest 2 1 Other revenues/income 3 3 4 **Total income** Expenses Grants and subsidies 4 85 **Total expenses** 85 (81) Net result (81) Total comprehensive result

The accompanying notes form part of these financial statements.

2020

\$'000

2

156

158

28

28

130

130



PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST STATEMENT OF FINANCIAL POSITION As at 30 June 2021

Note 2021 \$ '000 **Current assets** Cash and cash equivalents 5 60 Receivables 6 _ 7 107 Other financial assets **Total current assets** 167 167 **Total assets Current liabilities** Payables 8 Total current liabilities -Net assets 167 Equity Retained earnings 167 **Total equity** 167

The accompanying notes form part of these financial statements.



2020

\$ '000

142

105

248

248

-

248

248

248

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PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST STATEMENT OF CHANGES IN EQUITY For the year ended 30 June 2021

	Retained earnings	Total equity
	\$ '000	\$ '000
Balance at 30 June 2019	118	118
Net result for 2019-20	130	130
Total comprehensive result for 2019-20	130	130
Balance at 30 June 2020	248	248
Net result for 2020-21	(81)	(81)
Total comprehensive result for 2020-21	(81)	(81)
Balance at 30 June 2021	167	167



PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST STATEMENT OF CASH FLOWS For the year ended 30 June 2021

	Note	2021	2020
Cash flows from operating activities		\$ '000	\$ '000
Cash inflows			
Other receipts		3	156
Cash generated from operations		3	156
Cash outflows			
Payments of grants and subsidies		(85)	(28)
Cash used in operations		(85)	(28)
Net cash provided by/(used in) operating activities	_	(82)	128
Cash flows from investing activities			
Cash inflows			
Proceeds from sale/maturities of investments		-	10
Cash generated from investing activities		-	10
			10
Net cash provided by/(used in) investing activities		-	10
Net increase/(decrease) in cash and cash equivalents		(82)	138
Cash and cash equivalents at the beginning of the period		142	4
Cash and cash equivalents at the end of the period	5	60	142



PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS For the year ended 30 June 2021

1 About Port Broughton District Health Advisory Council Inc Gift Fund Trust

Port Broughton District Health Advisory Council Inc Gift Fund Trust (the Trust) was established by virtue of a deed executed between the Department for Health and Wellbeing (the Department) and Port Broughton District Hospital and Health Advisory Council Inc (the Trustee), formerly named Port Broughton District Hospital and Health Advisory Council Inc.

The Trust does not control any other entity and has no interests in unconsolidated structured entities.

The Trust is controlled by Yorke and Northern Local Health Network Inc.

1.1 Objectives and activities

The Trust is a public ancillary fund and has been endorsed by the Australian Taxation Office as a Deductible Gift Recipient (DGR).

The Trust is established to:

- seek, collect and administer donations and bequests, to be used for the benefit of the local area health services that are DGRs
- undertake fundraising activities, the proceeds from which are to be used for the benefit of the local area health services that are DGRs

1.2 Basis of preparation

These financial statements are general purpose financial statements prepared in compliance with:

- section 23 of the *Public Finance and Audit Act 1987;*
- Treasurer's Instructions and Accounting Policy Statements issued by the Treasurer under the Public Finance and Audit Act 1987; and
- relevant Australian Accounting Standards (with reduced disclosure requirements) applicable to not-for-profit entities, as the Trust is a not-for-profit entity.

The financial statements have been prepared based on a 12 month period and presented in Australian currency. All amounts in the financial statements and accompanying notes have been rounded to the nearest thousand dollars (\$'000).

The historical cost convention is used unless a different measurement basis is specifically disclosed in the note associated with the item measured.

Assets and liabilities that are to be sold, consumed or realised as part of the normal operating cycle have been classified as current assets or current liabilities. All other assets and liabilities are classified as non-current.

Significant accounting policies are set out below or in the notes.

1.3 Taxation

The Trust is not subject to income tax but is liable for goods and services tax (GST).

Income, expenses and assets are recognised net of the amount of GST except:

- when the GST incurred on a purchase of goods or services is not recoverable from the Australian Taxation Office (ATO), in which case the GST is recognised as part of the cost of acquisition of the asset or as part of the expense item applicable; and
- receivables and payables, which are stated with the amount of GST included.

The net amount of GST recoverable from, or payable to, the ATO is included as part of receivables or payables in the Statement of Financial Position.

Cash flows are included in the Statement of Cash Flows on a gross basis, and the GST component of cash flows arising from investing and financing activities, which is recoverable from, or payable to, the ATO is classified as part of operating cash flows.

1.4 Changes in accounting policy

The Trust did not change any of its accounting policies during the year.

1.5 Impact of COVID-19 pandemic

The COVID-19 pandemic has not had a material impact on the operations of the Trust and is not expected to do so in the future.

PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

For the year ended 30 June 2021

2 Interest

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-		2021 \$'000	2020 \$'000
	Bank interest	1	2
	Total interest revenue	1	2
;	Other revenues/income		
		2021	2020
		\$'000	\$'000
	Donations	3	153
	Other	-	3
	Total other revenues/income	3	156
ļ	Grants and subsidies		
		2021	2020
		\$'000	\$'000
	Other	85	28
	Total grants and subsidies	85	28
5	Cash and cash equivalents		
		2021	2020
		\$'000	\$'000
	Cash at bank or on hand	60	142
	Total cash	60	142
Í	Receivables		
		2021	2020
	Current	\$'000	\$'000
	Interest	-	1
	Total current receivables	-	1
	Total receivables	-	1
,	Other financial assets		
		2021	2020
	Current	\$'000	\$'000
	Term deposits	107	105
	Total current investments	107	105
	Total investments	107	105

Contingent assets and liabilities 8

Contingent assets and contingent liabilities are not recognised in the Statement of Financial Position, but are disclosed within this note and, if quantifiable are measured at nominal value. The Trust is not aware of any contingent assets and liabilities. In addition, the Trust has made no guarantees.

9 Financial instruments / financial risk management

9.1 Financial risk management

The Trust's exposure to financial risk (liquidity risk, credit risk and market risk) is low due to the nature of the financial instruments held.

9.2 Categorisation of financial instruments

The carrying amounts of each of the following categories of financial assets and liabilities: financial assets measured at amortised cost; financial assets measured at fair value through profit or loss; financial assets measured at fair value through other comprehensive income; and financial liabilities measured at amortised cost are detailed below if applicable.

Category of financial asset and financial liability	Notes	2021 Carrying amount \$'000	2020 Carrying amount \$'000
Financial assets			
Cash and equivalent			
Cash and cash equivalents	5	60	142
Amortised cost			
Receivables	6	-	1
Other financial assets	7	107	105
Total financial assets		167	248

⁽¹⁾ Receivable and payable amounts disclosed here exclude statutory receivables and payables such as GST receivables and payables.

10 Key Management Personnel

Key management personnel of the Advisory Council include the Minister, the Chief Executive of the Department, board members and the Chief Executive Officer of Yorke and Northern Local Health Network Inc and the members of the Advisory Council.

The Trust did not enter into any transactions with key management personnel or their close family during the reporting period that were not consistent with normal procurement arrangements.

11 Remuneration of Council members

The total remuneration received or receivable by members was nil. In accordance with the Premier and Cabinet Circular No 016, government employees did not receive any remuneration for council member duties during the financial year. Unless otherwise disclosed, transactions between members are on conditions no more favourable than those that it is reasonable to expect the entity would have adopted if dealing with the related party at arm's length in the same circumstances.



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INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE PORT BROUGHTON DISTRICT HEALTH ADVISORY COUNCIL INC. GIFT FUND TRUST

Report on the Financial Report

We have audited the accompanying financial report of Port Broughton District Health Advisory Council Inc. Gift Fund Trust (the Gift Fund Trust), which comprises the statement of financial position as at 30 June 2021, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising summary of significant accounting policies and other explanatory information, and the statement by the presiding member and operational finance manager.

In our opinion, the financial report of Port Broughton District Health Advisory Council Inc. Gift Fund Trust presents fairly in accordance with Treasurer's Instructions promulgated under the provisions of the Public Finance and Audit Act 1987, Department of Health Accounting Policies, the Health Care Act 2008, applicable Accounting Standards and other mandatory professional reporting requirements in Australia, the financial position of Port Broughton District Health Advisory Council Inc. Gift Fund Trust as at 30 June 2021 and the results of its operations and its cash flows for the year then ended.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the Health Advisory Council in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (including Independence Standards) (the Code) that are relevant to our audit of the financial report in Australia, and we have fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Health Advisory Council's Responsibility for the Financial Report

The Gift Fund Trust is responsible for the preparation of the financial report that gives a true and fair view in accordance with the Health Care Act 2008, Treasurer's Instructions promulgated under the provisions of the Public Finance and Audit Act 1987, Department of Health Accounting Policies, applicable Accounting Standards and other mandatory professional reporting requirements in Australia. This includes responsibility for the maintenance of adequate accounting records and internal controls that are designed to prevent and detect fraud and error, and for the accounting policies and accounting estimates inherent in the financial report.

Auditor's Responsibility for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Health Advisory Council's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Health Advisory Council's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

GALPINS ACCOUNTANTS, AUDITORS & BUSINESS CONSULTANTS

Simon Smith CA, FCPA, Registered Company Auditor Partner

10/09/2021