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**Government  
of South Australia**

**PORT PIRIE HEALTH SERVICE ADVISORY  
COUNCIL INC  
2021-22 Annual Report**

PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC

C/- Port Pirie Regional Health Service

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2021-22 ANNUAL REPORT for the Port Pirie Health Service Advisory Council Inc

To:

Hon Chris Picton MP

Minister for Health and Wellbeing

This annual report will be presented to Parliament to meet the statutory reporting requirements of the *Health Care Act 2008, Health Care (Governance) Amendment Act 2021* 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 Pirie Health Service Advisory Council Inc by:

Kendall Jackson

Presiding Member

Date 29 September 2022

Signature



## From the Presiding Member



Whilst the year started as another unusual period in health due to COVID-19 and all it brings; we have noticed the intensity of this fade slightly with the pressure of additional vaccination clinics winding up.

As a result of the State Election, the Port Pirie Regional Health Service Emergency Department will receive a \$12 million upgrade. Whilst this won't cover a new cancer treatment unit or expand the dialysis services at the hospital, we will continue to advocate these are imperative funding opportunities moving forward.

Funds are also being sought for a Clinical Simulation Lab, in conjunction with the Upper Spencer Gulf Uni Hub, which will allow students to complete practicals in the region. We see this to assist with nurse shortages across the Yorke and Northern Local Health Network.

Nurse shortages have been highlighted during COVID-19, and the Port Pirie Regional Health Service has worked hard to retain and attract staff during the last few years, no more so in the past 12 months.

The Yorke and Northern Local Health Network, with Governing Board Chair John Voumard, has played a key role in ensuring that HAC Presiding Members are regularly engaged quarterly, proving most useful.

The Hamill House Residential Aged Care Facility has upgraded its garden areas, thanks to support from our HAC. These gardens provide pleasant outdoor areas for residents, their families and friends.

We have taken part in a Consumer and Community Engagement Strategy, and the plan is continuing to roll out with a review planned in November 2022. Therefore, it was timely to appoint Tracie Hawkins as Senior Advisor Consumer and Community Engagement. Both the plan and having a new role formed hopes to improve our engagement across the network.

We look forward to having our historic photo display installed in the hospital's hallways over the next few months. Unfortunately, this project has been held up somewhat by COVID-19 but will be a real asset for the hospital and community.

Once again, it's important to thank our local service clubs, volunteers and hospital staff for their continued support. In addition, I would like to thank our HAC community members who donate their time, particularly our busy doctors who take the time to contribute.

Kendall Jackson

Port Pirie Health Services Advisory Council Inc

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## Overview: about the agency

### Our strategic focus

<b>Our Purpose</b>	<p>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.</p> <p>The constitution is available at <a href="http://www.sahealth.sa.gov.auPortPirieHAC">www.sahealth.sa.gov.auPortPirieHAC</a></p>
<b>Our Vision</b>	Not applicable
<b>Our Values</b>	Not applicable
<b>Our functions, objectives and deliverables</b>	<p>The Health Advisory Council undertakes an advocacy role on behalf of the community.</p>

### 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 Pirie Regional Health Service

A list of current members is available at:

[www.sahealth.sa.gov.auPortPirieHAC](http://www.sahealth.sa.gov.auPortPirieHAC)

### Changes to the agency

During 2021-22 there were no changes to the agency’s structure and objectives as a result of internal reviews or machinery of government changes.

## **Our Minister**



Hon Chris Picton MP 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 Broughton District Health Advisory Council Inc

Southern Flinders Health Advisory Council Inc

Yorke Peninsula Health Advisory Council Inc

## The agency's performance

### Performance at a glance

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

### Agency response to COVID-19

Not applicable

### 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

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

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 2021-2022 are attached to this report.

#### Port Pirie Health Service Advisory Council Inc

Statement of Comprehensive Income	2021-22 Budget \$000s	2021-22 Actual \$000s	Variation \$000s	2020-21 Actual \$000s
Total Income	0	3	3	0
Total Expenses	0	5	(5)	0
<b>Net Result</b>	<b>0</b>	<b>(2)</b>	<b>(2)</b>	<b>0</b>
<b>Total Comprehensive Result</b>	<b>0</b>	<b>(2)</b>	<b>(2)</b>	<b>0</b>

Statement of Financial Position	2021-22 Budget \$000s	2021-22 Actual \$000s	Variation \$000s	2020-21 Actual \$000s
Current assets	0	0	0	0
Non-current assets	0	877	877	0
<b>Total assets</b>	<b>0</b>	<b>877</b>	<b>877</b>	<b>0</b>
Current liabilities	0	0	0	0
Non-current liabilities	0	0	0	0
<b>Total liabilities</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Net assets</b>	<b>0</b>	<b>877</b>	<b>877</b>	<b>0</b>
<b>Equity</b>	<b>0</b>	<b>877</b>	<b>877</b>	<b>0</b>

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2021-22 ANNUAL REPORT for the Port Pirie Health Service Advisory Council Inc

**Port Pirie Health Service Advisory Council Inc Gift Fund Trust**

<b>Statement of Comprehensive Income</b>	<b>2021-22 Budget \$000s</b>	<b>2021-22 Actual \$000s</b>	<b>Variation \$000s</b>	<b>2020-21 Actual \$000s</b>
Total Income	0	1	1	0
Total Expenses	0	1	(1)	0
<b>Net Result</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Total Comprehensive Result</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>Statement of Financial Position</b>	<b>2021-22 Budget \$000s</b>	<b>2021-22 Actual \$000s</b>	<b>Variation \$000s</b>	<b>2020-21 Actual \$000s</b>
Current assets	0	323	323	0
Non-current assets	0	0	0	0
<b>Total assets</b>	<b>0</b>	<b>323</b>	<b>323</b>	<b>0</b>
Current liabilities	0	0	0	0
Non-current liabilities	0	0	0	0
<b>Total liabilities</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Net assets</b>	<b>0</b>	<b>323</b>	<b>323</b>	<b>0</b>
<b>Equity</b>	<b>0</b>	<b>323</b>	<b>323</b>	<b>0</b>

**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**

<b>Consultancies</b>	<b>Purpose</b>	<b>\$ Actual payment</b>
Not applicable		0

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

<b>Consultancies</b>	<b>Purpose</b>	<b>\$ Actual payment</b>
Not applicable		0
	Total	0

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

See also the [Consolidated Financial Report of the Department of Treasury and Finance](#) for total value of consultancy contracts across the South Australian Public Sector.

**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**

<b>Contractors</b>	<b>Purpose</b>	<b>\$ Actual payment</b>
Not applicable		0

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

<b>Contractors</b>	<b>Purpose</b>	<b>\$ Actual payment</b>
Not applicable		0
	Total	0

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

The details of South Australian Government-awarded contracts for goods, services, and works are displayed on the SA Tenders and Contracts website. [View the agency list of contracts.](#)

The website also provides details of [across government contracts.](#)

## 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, 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 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 the Yorke and Northern Local Health Network Inc.

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

### 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: <https://data.sa.gov.au/data/dataset/yorke-and-northern-local-health-network-ynlhn>

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

## Reporting required under any other act or regulation

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

- *Act as an advocate to promote the interests of the community.*
  - Made calls to local media and wrote to the State Government regarding upgrading the Emergency Department and expanding the kidney dialysis and cancer treatment services at the Port Pirie Regional Health Service.
- *Provide advice about relevant aspect of the provision of health services, and relevant health issues, goals, priorities, plans and strategic initiatives.*
  - Played an active role in assisting with developing the Yorke and Northern Local Health Network Consumer and Community Engagement Strategy.
- *Encourage community participation in programs.*
  - Assisted in the promotion of COVID-19 vaccination clinics and encouraged vaccination on both local and social media.
- *Consult with other bodies that are interested in the provision of health services.*
- *Provide advice to the Minister about any matter referred to it by the Minister or CE.*
- *Provide advice to the Yorke and Northern Local Health Network Governing Board for an incorporated hospital about any matter referred to it by the Board.*
  - Lengthy discussions around doctor shortages and locum doctors versus local doctors.
  - Nurse shortages and promoting a possible nurse clinical laboratory at the Port Pirie Regional Health Service to support the Uni Hub and Nursing students in regional South Australia.
- *Participate in consultation or assessment process associated with the selection of senior staff.*
  - The Presiding Member was part of the selection panel for the newly appointed Senior Advisor Consumer and Community Engagement position.
- *Act as trustee and participate in budget discussions and financial management or development processes; and to undertake fundraising activities.*
  - Supported Hammill House Residential Aged Care Facility to install a new garden for its residents and visitors.
- *Provide advice about the management of resources for health services, and provide assistance with fundraising activities.*

**Reporting required under the *Carers' Recognition Act 2005***

Not applicable



## Public complaints

### Number of public complaints reported

A Regional Health Network response will be provided in the 2021-22 Yorke and Northern Local Health Network Annual Report, which can be accessed on the [SA Health website](#).

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

Additional Metrics	Total
Not applicable	

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

### Service Improvements

Not applicable

### Compliance Statement

Port Pirie Health Service Advisory Council Inc is compliant with Premier and Cabinet Circular 039 – complaint management in the South Australian public sector	Y
Port Pirie Health Service Advisory Council Inc has communicated the content of PC 039 and the agency’s related complaints policies and procedures to employees.	Y

## **Appendix: Audited financial statements 2021-22**



## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC.

### Report on the Financial Report

#### Audit Opinion

We have audited the accompanying financial report of Port Pirie Health Service Advisory Council Inc. (the Health Advisory Council), which comprises the statement of financial position as at 30 June 2022, 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 Pirie Health Service 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 Pirie Health Service Advisory Council Inc. as at 30 June 2022 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.

#### Emphasis of Matter

We draw attention to Note 1.4 of the financial report, which describes the effects of restructure activities. Our opinion is not modified in respect of this matter.

#### 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.

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## 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



**Jessica Kellaway** CA, CPA, Registered Company Auditor  
Director

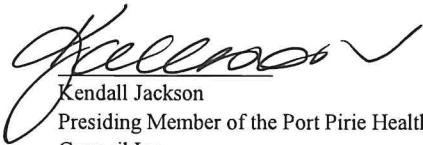
27/09/2022

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC**

**CERTIFICATION OF THE FINANCIAL STATEMENTS**

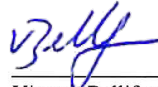
We certify that the:

- financial statements of the Port Pirie Health Service 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 Pirie Health Service Advisory Council Inc for the financial year over its financial reporting and its preparation of financial statements have been effective.



Kendall Jackson  
Presiding Member of the Port Pirie Health Service Advisory  
Council Inc

7 / 9 / 2022



Vincent Bellifemini  
Chief Finance Officer

07 / 09 / 2022

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC**  
**STATEMENT OF COMPREHENSIVE INCOME**  
**For the year ended 30 June 2022**

	Note	2022 \$'000
<b>Income</b>		
Resources received free of charge	2	3
<b>Total income</b>		<u>3</u>
<b>Expenses</b>		
Depreciation	4	2
Audit fees		3
<b>Total expenses</b>		<u>5</u>
<b>Net result</b>		<u>(2)</u>
<b>Total comprehensive result</b>		<u><u>(2)</u></u>

The accompanying notes form part of these financial statements.

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC**  
**STATEMENT OF FINANCIAL POSITION**  
**As at 30 June 2022**

	Note	2022 \$ '000
<b>Non-current assets</b>		
Property, plant and equipment	4	877
<b>Total non-current assets</b>		<u>877</u>
<b>Total assets</b>		<u>877</u>
<b>Net assets</b>		<u>877</u>
<b>Equity</b>		
Retained earnings		877
<b>Total equity</b>		<u>877</u>

The accompanying notes form part of these financial statements.

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC**  
**STATEMENT OF CHANGES IN EQUITY**  
**For the year ended 30 June 2022**

	Note	Retained earnings \$ '000	Total equity \$ '000
<b>Balance at 30 June 2021</b>		-	-
<b>Net result for 2021-22</b>		(2)	(2)
<b>Total comprehensive result for 2021-22</b>		(2)	(2)
Net assets received from an administrative restructure	1.5	879	879
<b>Balance at 30 June 2022</b>		<b>877</b>	<b>877</b>

The accompanying notes form part of these financial statements.



**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC**  
**STATEMENT OF CASH FLOWS**  
**For the year ended 30 June 2022**

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	Note	2022 \$ '000
<b>Net cash provided by/(used in) operating activities</b>		<u>-</u>
<b>Net cash provided by/(used in) investing activities</b>		<u>-</u>
<b>Net cash provided by/(used in) financing activities</b>		<u>-</u>
<b>Net increase/(decrease) in cash and cash equivalents</b>		-
Cash and cash equivalents at the beginning of the period		-
<b>Cash and cash equivalents at the end of the period</b>		<u>-</u>

The accompanying notes form part of these financial statements.

## **1 About Port Pirie Health Service Advisory Council Inc (the Advisory Council)**

The Advisory Council is a not-for-profit entity and was initially established as an unincorporated advisory council pursuant to the *Health Care Act 2008* (the Act) as part of Country Health Gift Fund Health Advisory Council Incorporated (CHGF HAC Inc). On 27 May 2021 the Minister for Health and Wellbeing (the Minister) declared the unincorporated Health Advisory Council to be incorporated.

The Advisory Council has received its share of the net assets of CHGF HAC Inc (refer to note 1.5).

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 is 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 as 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.

### **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 applying simplified disclosures

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.

### **1.3 Equity**

The Advisory Council uses the asset revaluation surplus to record increments and decrements in the fair value of land and buildings to the extent that they offset one another. Relevant amounts are transferred to retained earnings when an asset is derecognised.

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC**  
**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS**  
**For the year ended 30 June 2022**

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**1.4 Changes in accounting policy**

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

**1.5 Administrative restructure - transferred in**

On 27 May 2021 the Minister declared the Advisory Council to be incorporated and it received its share of the net assets of CHGF HAC Inc in 2021-22. Net assets transferred in consisted of land and buildings (\$0.879 million).

Net assets assumed by the Advisory Council as a result of the administrative restructure are at the carrying amount of those assets in the transferor's Statement of Financial Position immediately prior to the transfer.

**1.6 Impact of COVID-19 pandemic**

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

**2 Resources received free of charge**

Contribution of services are recognised only when a fair value can be determined reliably and the services would be purchased if they had not been donated.

The contribution of services recognised are for audit fees paid or payable of \$3,000 by Yorke and Northern Local Health Network Inc for the audit of financial statements of the Advisory Council performed by Galpins Accountants Auditors and Business Consultants.

Although not recognised, the Advisory Council also receives various administrative services from Yorke and Northern Local Health Network Inc for nil consideration.

**3 Property, plant and equipment**

**3.1 Acquisition and recognition**

Non-current assets are initially recorded on a cost basis, and subsequently measured at fair value. Where assets are acquired at no value, or minimal value, they are recorded at their fair value in the Statement of Financial Position. Where assets are acquired at no or nominal value as part of a restructure of administrative arrangements, the assets are recorded at the value held by the transferor public authority prior to the restructure.

The Advisory Council capitalises all non-current tangible assets that it controls valued at or greater than \$10,000.

**3.2 Depreciation**

All non-current assets, that have a limited useful life, are systematically depreciated over their useful lives in a manner that reflects the consumption of their service potential.

The useful lives and depreciation methods of all major assets held by the Advisory Council are reviewed and adjusted as appropriate on an annual basis. Changes in expected useful life or the expected pattern of consumption of future economic benefits embodied in the asset are accounted for prospectively by changing the time period or method, as appropriate.

Land and non-current assets held for sale are not depreciated.

Depreciation is calculated on a straight line basis over the estimated or revised remaining useful life of the following classes of assets as follows:

<u>Class of asset</u>	<u>Useful life (years)</u>
Buildings and improvements	40 - 80
Site improvements	40 - 80

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC**  
**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS**  
**For the year ended 30 June 2022**

**3.3 Revaluation**

All non-current tangible assets are valued at fair value after allowing for accumulated depreciation (written down current cost).

The Advisory Council revalues all land, buildings and site improvements on a regular cycle via a Certified Practising Valuer.

If at any time, management considers that the carrying amount of an asset greater than \$1 million materially differs from its fair value, then the asset will be revalued regardless of when the last valuation took place.

Non-current tangible assets that are acquired between revaluations are held at cost, until the next valuation, when they are revalued to fair value.

Any accumulated depreciation as at the revaluation date is eliminated against the gross carrying amounts of the assets and the net amounts are restated to the revalued amounts of the asset.

Upon disposal or derecognition, any asset revaluation surplus relating to that asset is transferred to retained earnings.

**3.4 Impairment**

The Advisory Council holds its property assets for their service potential (value in use). Specialised assets would rarely be sold and typically any costs of disposal would be negligible, accordingly the recoverable amount will be closer to or greater than fair value. Where there is an indication of impairment, the recoverable amount is estimated. For revalued assets, fair value is assessed each year.

There were no indications of impairment of property and infrastructure as at 30 June 2022.

**3.5 Valuation of land and buildings**

An independent valuation of land and buildings, including site improvements, was performed in March 2018 by a Certified Practising Valuer from AssetVal (JLT) Pty Ltd, as at 1 June 2018.

Fair value of unrestricted land was determined using the market approach. The valuation was based on recent market transactions for similar land and buildings (non-specialised) in the area and includes adjustment for factors specific to the land and buildings being valued such as size, location and current use.

Fair value of specific land and buildings was determined using depreciated replacement cost, due to there not being an active market for such land and buildings. The depreciated replacement cost considered the need for ongoing provision of government services; specialised nature of the assets, including the restricted use of the assets; the size, condition, location. The valuation was based on a combination of internal records, specialised knowledge and acquisition/transfer costs.

**4 Reconciliation of property, plant and equipment**

The following table shows the movement:

2021-22	Land \$'000	Buildings \$'000	Total \$'000
<b>Carrying amount at the beginning of the period</b>	-	-	-
Acquisition / (disposal) through administrative restructuring	70	809	879
Depreciation	-	(2)	(2)
<b>Carrying amount at the end of the period</b>	<b>70</b>	<b>807</b>	<b>877</b>
<b>Gross carrying amount</b>			
Gross carrying amount	70	809	879
Accumulated depreciation	-	(2)	(2)
<b>Carrying amount at the end of the period</b>	<b>70</b>	<b>807</b>	<b>877</b>

**5 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.

## **6 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.

## **7 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.



## INDEPENDENT AUDITOR'S REPORT

### TO THE MEMBERS OF THE PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC. GIFT FUND TRUST

#### Report on the Financial Report

We have audited the accompanying financial report of Port Pirie Health Service Advisory Council Inc. Gift Fund Trust (the Gift Fund Trust), which comprises the statement of financial position as at 30 June 2022, 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 Pirie Health Service 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 Pirie Health Service Advisory Council Inc. Gift Fund Trust as at 30 June 2022 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.

#### Emphasis of Matter

We draw attention to Note 1.4 of the financial report, which describes the effects of restructure activities. Our opinion is not modified in respect of this matter.

#### 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.

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## 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



**Jessica Kellaway** CA, CPA, Registered Company Auditor  
Director

27/09/2022

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC GIFT FUND TRUST**

**CERTIFICATION OF THE FINANCIAL STATEMENTS**

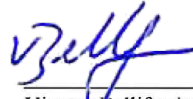
We certify that the:

- financial statements of the Port Pirie Health Service 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 Pirie Health Service Advisory Council Inc Gift Fund Trust for the financial year over its financial reporting and its preparation of financial statements have been effective.



Kendall Jackson  
Presiding Member of Port Pirie Health Service Advisory  
Council Inc (the Trustee)

7 / 9 / 2022



Vincent Bellifemini  
Chief Finance Officer

07 / 09 / 2022



**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC GIFT FUND TRUST**  
**STATEMENT OF COMPREHENSIVE INCOME**  
**For the year ended 30 June 2022**

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	Note	2022 \$'000
<b>Income</b>		
Resources received free of charge	2	<u>1</u>
<b>Total income</b>		<u><u>1</u></u>
<b>Expenses</b>		
Audit fees		<u>1</u>
<b>Total expenses</b>		<u><u>1</u></u>
<b>Net result</b>		<u><u>-</u></u>
<b>Total comprehensive result</b>		<u><u><u>-</u></u></u>

The accompanying notes form part of these financial statements.

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC GIFT FUND TRUST**  
**STATEMENT OF FINANCIAL POSITION**  
**As at 30 June 2022**

	<b>Note</b>	<b>2022</b>
		<b>\$ '000</b>
<b>Current assets</b>		
Right to receive cash	1.4	<u>323</u>
<b>Total current assets</b>		<u><b>323</b></u>
<b>Total assets</b>		<u><b>323</b></u>
<b>Net assets</b>		<u><b>323</b></u>
<b>Equity</b>		
Retained earnings		<u>323</u>
<b>Total equity</b>		<u><b>323</b></u>

The accompanying notes form part of these financial statements.

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC GIFT FUND TRUST**  
**STATEMENT OF CHANGES IN EQUITY**  
**For the year ended 30 June 2022**

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	Note	Retained earnings \$ '000	Total equity \$ '000
<b>Balance at 30 June 2021</b>		-	-
Net result for 2021-22		-	-
<b>Total comprehensive result for 2021-22</b>		-	-
Net assets received from an administrative restructure	1.4	323	323
<b>Balance at 30 June 2022</b>		<b>323</b>	<b>323</b>

The accompanying notes form part of these financial statements.

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC GIFT FUND TRUST**  
**STATEMENT OF CASH FLOWS**  
**For the year ended 30 June 2022**

---

	<b>2022</b>
	<b>\$ '000</b>
<b>Net cash provided by/(used in) operating activities</b>	<b>-</b>
<b>Net cash provided by/(used in) investing activities</b>	<b>-</b>
<b>Net cash provided by/(used in) financing activities</b>	<b>-</b>
<b>Net increase/(decrease) in cash and cash equivalents</b>	<b>-</b>
Cash and cash equivalents at the beginning of the period	-
<b>Cash and cash equivalents at the end of the period</b>	<b>-</b>

The accompanying notes form part of these financial statements.

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC GIFT FUND TRUST**  
**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS**  
**For the year ended 30 June 2022**

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## **1 About Port Pirie Health Service Advisory Council Inc Gift Fund Trust (the Trust)**

The Trust is a not-for-profit entity and was established by virtue of a deed executed between the Department for Health and Wellbeing and Port Pirie Health Service Advisory Council Inc (the Trustee).

Previously the Trust was unincorporated with its net assets held within the Country Health Gift Fund Health Advisory Council Inc (CHGF HAC) Gift Fund Trust. Control of the Trust's share of the net assets of CHGF HAC Inc Gift Fund Trust was transferred to the Trust during 2021-22 (refer to note 1.4).

The financial statements include all controlled activities of the Trust.

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 applying simplified disclosures

These are the first financial statements prepared in accordance with Australian Accounting Standards - Simplified Disclosures. In the prior year, the financial statements were prepared in accordance with Australian Accounting Standards - Reduced Disclosure Requirements.

There has been no impact on the recognition and measurement of amounts recognised in the statements of financial position, profit and loss and other comprehensive income and cash flows of the Trust as a result of the change in the basis of preparation.

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.

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.

Cash flows include GST in the Statement of Cash Flows.

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.

### **1.3 Changes in accounting policy**

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

**PORT PIRIE HEALTH SERVICE ADVISORY COUNCIL INC GIFT FUND TRUST**  
**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS**  
**For the year ended 30 June 2022**

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**1.4 Administrative restructure - transferred in**

The Trust was established during 2021-22 and control of its share of the net assets of CHGF HAC Gift Fund was transferred to the Trust. Net assets transferred in consist of the right to receive cash (\$323,000). The physical transfer of cash will occur in 2022-23.

**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.

**2 Resources received free of charge**

Contribution of services are recognised only when a fair value can be determined reliably and the services would be purchased if they had not been donated.

The contribution of services recognised are for audit fees paid or payable of \$1,000 by Yorke and Northern Local Health Network Inc for the audit of financial statements and compliance with the *Taxation Administration (Public Ancillary Fund) Guidelines 2022* of the Trust performed by Galpins Accountants Auditors and Business Consultants.

Although not recognised, the Trust also receives various administrative services from Yorke and Northern Local Health Network Inc for nil consideration.

**3 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 Trust is not aware of any contingent assets and liabilities. In addition, the Trust has made no guarantees.

**4 Key Management Personnel**

Key management personnel of the Trust 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 Port Pirie Health Service Advisory Council Inc.

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.

**5 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.