

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC 2021-22 Annual Report

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC.

Drabsch Street, Loxton SA 5333

https://www.sahealth.sa.gov.au/LoxtonHAC

Contact phone number: 8584 85555

Contact email: Lesley.burgemeister@sa.gov.au

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2021-22 ANNUAL REPORT for the Loxton and Districts Health 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 <i>Public Sector Act 2009, the Public Finance and Audit Act 1987 and the Health Care Act 2008</i> and the requirements of Premier and Cabinet Circular <i>PC013 Annual Reporting</i> .
This report is verified to be accurate for the purposes of annual reporting to the Parliament of South Australia.
Submitted on behalf of the Loxton and Districts Health Advisory Council Inc by:
Sally Goode
Presiding Member
Date: 12/9/2022 SignatureSally Goods

From the Presiding Member

2021-2022 has been for the Loxton & Districts Health Advisory Council (HAC), like so many other organisations and community groups another very fractured year, thanks to COVID-19. We were somewhat dislocated by the very necessary restrictions placed upon our monthly meetings at the Hospital. Out of 11 possible meetings only five were held in our usual venue, the Hospital Boardroom. Fortunately, one of our HAC members is secretary at a local church who very kindly made their facilities available to us, often at very short notice. We offer our very grateful thanks to Living Waters Christian Community for their generosity.

Our Direct Care Attendant Scholarships are still in abeyance, while we wait for the restrictions around COVID-19 to reduce significantly. Although we did not see the hoped for employment within our Aged Care Unit, we may look at this again in the light of the huge labour shortages in regional South Australia.

We have however continued with our Scholarships for students undertaking their nursing degree, with two currently studying and working at the hospital.

Our midwifery scholarships have also been largely successful, although unfortunately one student who reneged on their bonding obligation had to be pursued through legal action to force the return of the \$10,000 scholarship grant. We did this ourselves, without recourse to the expense of lawyers thanks to the very knowledgeable help of Mark Weeding in the Riverland Mallee Coorong Local Health Network Finance Office.

We are now looking, with the assistance of the Loxton Health Centre, at how we can instigate some kind of Establishment Grant to encourage young doctors to commit to working at Loxton. This will be helped by the establishment of the Riverland Academy of Clinical Excellence by Professor Paul Worley, which will be a great asset to the Riverland.

Our fund raising has been greatly impacted by COVID-19, but one occasion which was held with great success was the RSL Dinner on 9th April 2022. Our Hospital Catering Team always turns on a great spread for the RSL Members and Guests, and the RSL very generously donated \$3,500 to the HAC Gift Fund.

We were able to provide a doughnut stall at the Loxton Lights Up Celebrations at the Loxton Oval. That was most successful, and we offer our grateful thanks to Greg and Donna Coombs for their generosity and time in providing their doughnut machine and expertise as resources for our doughnut sales. Greg and Donna run the Rusty Spoon Café and must devote their energies to this business, with the result that they have sold their doughnut machine and it is no longer available to us. We really appreciate their enthusiasm and willingness to support the HAC Fundraising efforts for a number of years.

Our plan to provide fencing around Aged Care, so that our Residents can go out into the garden safely whenever they wish, without the need for a Carer to accompany

2021-22 ANNUAL REPORT for the Loxton and Districts Health Advisory Council Inc.

them is progressing. This project is only possible because of the generosity of a bequest from Mr. Charles Harvey. This is also a project which is in thrall to the lack of tradesmen and the lack of building materials, which is a common delay in all construction work in the Riverland.

We are fortunate to have the unfailing support of a local charity group – Bingo for All. This is a group of enthusiasts who hold weekly bingo meetings, each one supporting a different local charity. Three meetings during the year were held in aid of the Loxton Hospital Complex, and as a result, nearly \$2,000 was donated to the Gift Fund. This fund raising venture is also unfailingly supported by the Catering Team, who organise the snacks and supper items that are sold at the Bingo nights. We are most grateful to the Team who contribute so much to the success of the evenings, and to our other fundraising events.

We also took advantage of a unique opportunity offered to us to provide food and drink on October 23rd 2021, during a "Super-Vax" weekend at the COVID-19 Vaccination Clinic in the Plaza at Berri. Thanks to the generosity of Nippy's Fruit Juices, and the Country Bakehouse Loxton, we were able to distribute refreshments to the many people who turned up to be vaccinated. We thank Riverland Mallee Coorong Local Health Network for organising this, and their donation of \$1,500 to our Gift Fund.

Amongst our expenditures for the Complex this year has been the purchase of a Tovar-tel Interactive Table for our Aged Care residents. This has been installed and is in good use, and we look forward as a HAC to being able to visit Aged Care again to see this in action. We have also provided tables and chairs for Aged Care that give a more "café" feel and an electric breast pump for our new mothers.

A major and very noticeable project was the removal of 12 large gum trees from the grounds and car park of the hospital. These trees had been a potential threat for many years, as well as dropping a huge amount of litter, contributing to a fire risk. We engaged a professional tree lopping firm to bring the trees down, and then arranged for a local handyman to collect all the timber, for future sale, for which he gave us a generous donation to the Gift Fund.

We were very sorry to lose our Director of Nursing & Midwifery, Merridee Seiboth in December 2021, as she was seconded to a new role in which we wish her every success. We then welcomed Lizzie Platten as Acting DONM, and look forward to working with her, and the Executive Team. We were also sorry to lose our Administration Support, Kim Speziali, who has been such an outstanding administration officer for the HAC. Kim has also taken on another role, and we wish her every success.

We wish to express huge thanks to all the dedicated staff at the Complex, who have been under enormous strain this year, both from the extra work involved in keeping COVID-19 out of the Complex, and the chronic understaffing as a result of COVID-19. We are enormously grateful for their hard work and commitment to the Complex.

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The Loxton & Districts Health Advisory Council are a group of deeply committed volunteers, dedicated to providing the interface between the local community and the health services. My thanks are due to all of them:-

Graham Schulz Treasurer and Deputy Presiding Member

Ruth Firstbrook Resident Member

Mike Woosnam Resident Member

Karina Bates Resident Member

Steven Kruschel Resident Member

Deb Thiele Local Government Member

Bill Ebert Local Member of Parliament nominee

Peter Hamilton Medical Practitioner Member

Elizabeth Walker Staff Representative

Our deepest thanks are also owed to our local community who unfailingly support the Loxton Hospital Complex not only financially, but in kind as well.

Sally Goode

Loxton and Districts Health Advisory Council Inc.

2021-22 ANNUAL REPORT for the Loxton and Districts 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 – https://www.sahealth.sa.gov.au/LoxtonHAC
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
- Nominee of Local Government
- A local Member of Parliament or their nominee
- A medical practitioner member
- A worker from the Local Health Network

A list of current members is available at:

https://www.sahealth.sa.gov.au/LoxtonHAC

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.

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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)

Riverland Mallee Coorong Local Health Network Inc.

Berri Barmera District Health Advisory Council Inc

Coorong Health Service Health Advisory Council Inc

Mallee Health Service Health Advisory Council Inc

Mannum District Hospital Health Advisory Council Inc

Murray Bridge Soldiers' Memorial Hospital Health Advisory Council Inc

Renmark Paringa District Health Advisory Council Inc

Waikerie & Districts Health Advisory Council Inc

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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 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				

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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

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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.

Loxton and Districts Health Advisory Council Inc

Statement of Comprehensive Income	2021-22 Budget \$000s	2021-22 Actual \$000s	Variation \$000s	2020-22 Actual \$000s
Total Income	0	1,886	1,886	3
Total Expenses	0	650	(650)	509
Net Result	0	(1,236)	(1,236)	(506)
Total Comprehensive Result	0	(1,236)	(1,236)	(506)

Statement of Financial Position	2021-22 Budget \$000s	2021-22 Actual \$000s	Variation \$000s	2020-22 Actual \$000s
Current assets	0	0	0	0
Non-current assets	0	13,615	13,615	12,379
Total assets	0	13,615	13,615	12,379
Current liabilities	0	0	0	0
Non-current liabilities	0	0	0	0
Total liabilities	0	0	0	0
Net assets	0	13,615	13,615	12,379
Equity	0	13,615	13,615	12,379

Loxton and Districts Health Advisory Council Inc Gift Fund Trust

Statement of Comprehensive Income	2021-21 Budget \$000s	2021-21 Actual \$000s	Variation \$000s	2020-21 Actual \$000s
Total Income	0	43	43	226
Total Expenses	0	58	(58)	41
Net Result	0	(15)	(15)	185
Total Comprehensive Result	0	(15)	(15)	185

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Statement of Financial Position	2021-22 Budget \$000s	2021-22 Actual \$000s	Variation \$000s	2020-21 Actual \$000s
Current assets	0	1,137	1,137	1,174
Non-current assets	0	0	0	0
Total assets	0	1,137	1,137	1,174
Current liabilities	0	0	0	22
Non-current liabilities	0	0	0	0
Total liabilities	0	0	0	22
Net assets	0	1,137	1,137	1,152
Equity	0	1,137	1,137	1,152

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
Not applicable		N/A

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

Consultancies	Purpose \$ Actual payment	
Not applicable		N/A
	Total	\$ 0

Data for previous years is available at: https://data.sa.gov.au/data/dataset/riverland-mallee-coorong-local-health-network-rmclhn

Data for years prior to 2019-20 related to the former Country Health SA Local Health Network is available at: https://data.sa.gov.au/data/dataset/country-health-sa-local-health-network.

See also the <u>Consolidated Financial Report of the Department of Treasury and Finance</u> 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.

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Contractors with a contract value below \$10,000

Contractors	Purpose	\$ Actual payment
Not applicable		N/A

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

Contractors	Purpose	\$ Actual payment
Not applicable		N/A
	Total	\$ 0

Data for previous years is available at: https://data.sa.gov.au/data/dataset/riverland-mallee-coorong-local-health-network-rmclhn

Data for years prior to 2019-20 related to the former Country Health SA Local Health Network is available at: https://data.sa.gov.au/data/dataset/country-health-sa-local-health-network.

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 list of contracts</u>.

The website also provides details of across government contracts.

Other financial information

Nil to report.

Other information

Not applicable

2021-22 ANNUAL REPORT for the Loxton and Districts Health Advisory Council Inc.

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 includes 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 Riverland Mallee Coorong Local Health Network Inc.

Data for previous years is available at: https://data.sa.gov.au/data/dataset/riverland-mallee-coorong-local-health-network-rmclhn

Data for years prior to 2019-20 related to the former Country Health SA Local Health Network is available at: https://data.sa.gov.au/data/dataset/country-health-sa-local-health-network.

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/riverland-mallee-coorong-local-health-network-rmclhn

Data for years prior to 2019-20 related to the former Country Health SA Local Health Network is available at: https://data.sa.gov.au/data/dataset/country-health-sa-local-health-network.

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

Act as an advocate to promotion the interests of the community.

- Provide advice about relevant aspect of the provision of health services, and relevant health issues, goals, priorities, plans and strategic initiatives.
- Encourage community participation in programs.
- 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 Chief Executive Officer.
- Participate in consultation or assessment process associated with the selection of senior staff.
- Act as trustee and participate in budget discussions and financial management or development processes; and to undertake fundraising activities (incorporated HAC).

Reporting required under the Carers' Recognition Act 2005

Not applicable

2021-22 ANNUAL REPORT for the Loxton and Districts Health Advisory Council Inc.

Public complaints

Number of public complaints reported

A Regional Health Network response will be provided in the 2021-22 Riverland Mallee Coorong Local Health Network Annual Report, which can be accessed on the <u>SA Health website</u>.

Complaint categories	Sub-categories	Example	Number of Complaints 2021-22	
	Not applicable			
		Total		

Additional Metrics	Total	
Not applicable		

Data for previous years is available at: https://data.sa.gov.au/data/dataset/riverland-mallee-coorong-local-health-network-rmclhn

Data for years prior to 2019-20 related to the former Country Health SA Local Health Network is available at: https://data.sa.gov.au/data/dataset/country-health-sa-local-health-network.

Service Improvements

Not applicable		

Compliance Statement

Loxton and Districts Health Advisory Council Inc. is compliant with Premier and Cabinet Circular 039 – complaint management in the South Australian public sector N/A refer to Riverland Mallee Coorong LHN Inc 2021-22 Annual Report
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2021-22 ANNUAL REPORT for the Loxton and Districts Health Advisory Council Inc.

Loxton and Districts Health Advisory Council Inc. has communicated the content of PC 039 and the agency's related complaints policies and procedures to employees.

N/A refer to Riverland Mallee Coorong LHN Inc 2021-22 Annual Report

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Appendix: Audited financial statements 2021-22





Mount Gambier

233 Commercial Street West PO Box 246, Mount Gambier SA 5290 P: [08] 8725 3068 F: [08] 8724 9553 E: admin@galpins.com.au

Stirling

Unit 4, 3-5 Mount Barker Road PO Box 727, Stirling SA 5152 P: (08) 8339 1255 F: (08) 8339 1266 E: stirling@galpins.com.au

Norwood

3 Kensington Road, Norwood SA 5067 PO Box 4067, Norwood South SA 5067 P: [08] 8332 3433 E: norwood@galpins.com.au

W: www.galpins.com.au

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INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC.

Report on the Financial Report

Audit Opinion

We have audited the accompanying financial report of Loxton and Districts Health 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 Loxton and Districts 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 Loxton and Districts Health 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.

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

Jessica Kellaway CA, CPA, Registered Company Auditor

Director

21/09/2022

Skicemany

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC

CERTIFICATION OF THE FINANCIAL STATEMENTS

We certify that the:

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

Sally Goode

Presiding Member of the Loxton and Districts Health Advisory Council Inc

09 / 09 / 2022

Ken Brown

KA

A/Chief Finance Officer

09 / 09 / 2022

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC STATEMENT OF COMPREHENSIVE INCOME

For the year ended 30 June 2022

	Note	2022 \$'000	2021 \$'000
Income			
Resources received free of charge	2	1,886	3
Total income	_	1,886	3
Expenses			
Depreciation	4	647	506
Audit fees		3	3
Total expenses	_	650	509
Net result	_	1,236	(506)
Total comprehensive result		1,236	(506)

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC STATEMENT OF FINANCIAL POSITION

As at 30 June 2022

	Note	2022 \$ '000	2021 \$ '000
Non-current assets			
Property, plant and equipment	4	13,615	12,379
Total non-current assets	_	13,615	12,379
Total assets	_	13,615	12,379
Net assets		13,615	12,379
Equity			
Asset revaluation surplus		5,109	5,109
Retained earnings		8,506	7,270
Total equity	_	13,615	12,379

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC STATEMENT OF CHANGES IN EQUITY

For the year ended 30 June 2022

	Asset revaluation surplus \$ '000	Retained earnings \$ '000	Total equity \$ '000
Balance at 30 June 2020	5,109	7,776	12,885
Net result for 2020-21	<u> </u>	(506)	(506)
Total comprehensive result for 2020-21	<u> </u>	(506)	(506)
Balance at 30 June 2021	5,109	7,270	12,379
Net result for 2021-22	<u> </u>	1,236	1,236
Total comprehensive result for 2021-22		1,236	1,236
Balance at 30 June 2022	5,109	8,506	13,615

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC STATEMENT OF CASH FLOWS

For the year ended 30 June 2022

	2022 \$ '000	2021 \$ '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	-	_



LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

For the year ended 30 June 2022

1 About Loxton and Districts Health Advisory Council Inc (the Advisory Council)

The Advisory Council is a not-for-profit entity and was established as an incorporated advisory council under the *Health Care Act 2008* (the Act).

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 Riverland Mallee Coorong 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

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 Advisory Council 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.

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.

1.4 Changes in accounting policy

The Advisory Council 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 Advisory Council and is not expected to do so in the future.

2 Resources received free of charge



LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

For the year ended 30 June 2022

	2022 \$'000	2021 \$'000
Land and buildings	1,883	-
Services	3	3
Total resources received free of charge	1,886	3

During 2021-22 completed capital works at the Loxton Health Service were transferred to the Advisory Council from Riverland Mallee Coorong Local Health Network Inc for nil consideration.

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 by Riverland Mallee Coorong 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 Riverland Mallee Coorong 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:

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

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 Practicing 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.



LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

For the year ended 30 June 2022

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 Practicing 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	Buildings	Total
	\$'000	\$'000	\$'000
Carrying amount at the beginning of the period	320	12,059	12,379
Assets received free of charge	-	1,883	1,883
Depreciation	-	(647)	(647)
Carrying amount at the end of the period	320	13,295	13,615
Gross carrying amount			
Gross carrying amount	320	15,489	15,809
Accumulated depreciation	-	(2,194)	(2,194)
Carrying amount at the end of the period	320	13,295	13,615

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 Riverland Mallee Coorong 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.







Mount Gambier

233 Commercial Street West
PO Box 246, Mount Gambier SA 5290
P: (08) 8725 3068
F: (08) 8724 9553
E: admin@galpins.com.au

Stirling

Unit 4, 3-5 Mount Barker Road PO Box 727, Stirling SA 5152 P: (08) 8339 1255 F: (08) 8339 1266 E: stirling@galpins.com.au

Norwood

3 Kensington Road, Norwood SA 5067 PO Box 4067, Norwood South SA 5067 P: [08] 8332 3433 E: norwood@galpins.com.au

W: www.galpins.com.au

Galpins Trading Pty Ltd ABN: 89 656 702 886

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INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC. GIFT FUND TRUST

Report on the Financial Report

We have audited the accompanying financial report of Loxton and Districts Health 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 Loxton and Districts 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 Loxton and Districts Health 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.

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

Jessica Kellaway CA, CPA, Registered Company Auditor

Director

21/09/2022

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LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST

CERTIFICATION OF THE FINANCIAL STATEMENTS

We certify that the:

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

Sally Goode

Presiding Member of Loxton and Districts Health Advisory

Council Inc (the Trustee)

Ken Brown

A/Chief Finance Officer

09 / 09 / 2022

09 / 09 / 2022

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST STATEMENT OF COMPREHENSIVE INCOME

For the year ended 30 June 2022

	Note	2022 \$'000	2021 \$'000
Income			
Interest		4	8
Resources received free of charge	2	2	2
Other revenues/income	3	37	216
Total income		43	226
Expenses			
Supplies and services		2	-
Grants		54	39
Audit fees		2	2
Total expenses		58	41
Net result	_	(15)	185
Total comprehensive result	<u> </u>	(15)	185

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST STATEMENT OF FINANCIAL POSITION

As at 30 June 2022

	2022 \$ '000	2021 \$ '000
Current assets		
Cash and cash equivalents	69	254
Interest receivable	2	5
Term Deposits	1,066	915
Total current assets	1,137	1,174
Total assets	1,137	1,174
Current liabilities		
Payables and accrued expenses		22
Total current liabilities	-	22
Total liabilities	-	22
Net assets	1,137	1,152
Equity		
Retained earnings	1,137	1,152
Total equity	1,137	1,152

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST STATEMENT OF CHANGES IN EQUITY

For the year ended 30 June 2022

	Retained earnings \$ '000	Total equity \$ '000
Balance at 30 June 2020	967	967
Net result for 2020-21	185	185
Total comprehensive result for 2020-21	185	185
Balance at 30 June 2021	1,152	1,152
Net result for 2021-22	(15)	(15)
Total comprehensive result for 2021-22	(15)	(15)
Balance at 30 June 2022	1,137	1,137

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST STATEMENT OF CASH FLOWS

For the year ended 30 June 2022

	2022	2021
Cash flows from operating activities	\$ '000	\$ '000
Cash inflows		-
Interest received	6	6
Other receipts	37	216
Cash generated from operations	43	222
Cash outflows		
Payments for supplies and services	(2)	-
Payments of grants	(76)	(17)
Cash used in operations	(78)	(17)
Net cash provided by/(used in) operating activities	(35)	205
Cash outflows		
Purchase of investments	(150)	-
Cash used in investing activities	(150)	-
Net cash provided by/(used in) investing activities	(150)	-
Net increase/(decrease) in cash and cash equivalents	(185)	205
Cash and cash equivalents at the beginning of the period	254	49
Cash and cash equivalents at the end of the period	69	254

LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

For the year ended 30 June 2022

1 About Loxton and Districts Health 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 Loxton and Districts Health Advisory Council Inc (the Trustee).

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 Riverland Mallee Coorong 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.

1.4 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.



LOXTON AND DISTRICTS HEALTH ADVISORY COUNCIL INC GIFT FUND TRUST NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

For the year ended 30 June 2022

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 \$2,000 (\$2,000) by Riverland Mallee Coorong 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 Riverland Mallee Coorong Local Health Network Inc for nil consideration.

3 Other revenues/income

	2022 \$'000	2021 \$'000
Donations	34	214
Other	3	2
Total other revenues/income	37	216

4 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.

5 Financial instruments / financial risk management

5.1 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 and the current assessment of risk.

5.2 Categorisation of financial instruments

All financial instruments are measured at amortised costs. Total financial assets of \$1,137,000 (\$1,174,000) consist of cash and cash equivalents \$69,000 (\$254,000), receivables \$2,000 (\$5,000) and term deposits \$1,066,000 (\$915,000).

Financial liabilities consist of accrued expenses \$0,000 (\$22,000).

The contractual maturities of all financial instruments are expected to be within one year.

6 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 Riverland Mallee Coorong Local Health Network Inc and the members of Loxton and Districts Health 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.

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.

