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**Cover:** Dr Shane George, as part of a Queensland wide study, is leading vital research into early detection of the potentially life-threatening condition, sepsis in children.

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Help. Care. Save.

# Letter of compliance

29 August 2018

The Honourable Steven Miles MP Minister for Health and Minister for Ambulance Services GPO Box 48 Brisbane Old 4001

Dear Minister Miles,

I am pleased to submit for presentation to the Parliament the Annual Report 2017-2018 and financial statements for Gold Coast Hospital Foundation.

I certify that this Annual Report complies with:

- The prescribed requirements of the Financial Accountability Act 2009 and the Financial and Performance Management Standard 2009, and
- The detailed requirements set out in the *Annual Report requirements for Queensland Government agencies*.

A checklist outlining the annual reporting requirements can be found on pages 28-29 of this Annual Report.

Yours sincerely,

Wayne Hunt CA Chairman

**Gold Coast Hospital Foundation** 

# On behalf of the Board and Executive Team, I am pleased to present Gold Coast Hospital Foundation's Annual Report for 2017-2018.

The past 12 months have been extremely busy for Gold Coast Hospital Foundation with more than \$2 million raised through fundraising and sponsorships.

This remarkable achievement resulted in the purchase of world-class medical equipment; life-changing support services for patients and their families; improved hospital facilities and patient spaces; as well as specialist education and training opportunities for Gold Coast Health staff. These vital programs and initiatives have directly and positively impacted around 150,000 people in our community and further afield.

Since the Foundation was established 24 years ago, our commitment has always been to assist in delivering the best care and treatment on the Gold Coast to help people affected by illness, injury or disease overcome medical distress and hardship.

I am delighted to see the Foundation's growth and success during 2017-18 was underpinned by our strong focus on patient and family centred care. This approach has and will continue to pave the way for delivering improved public health care at Gold Coast University Hospital, Robina Hospital and all Gold Coast Health public clinics.

Being able to support the care of patients and their families during difficult times of medical crisis is only made possible thanks to the unwavering support of our community. The ongoing commitment and generosity of our donors, supporters, business partners, volunteers and staff contribute significantly to every positive impact we make on someone in our community. For that, we thank you.

# **Moving forward**

So much has been achieved in the last financial year and even more is planned for 2018–2019. Moving forward, the Foundation will continue to streamline operations, expand patient support services, develop long-term fundraising programs, and grow public support to further increase our funding and impact in line with our Strategic Plan.

A number of other exciting fundraising projects are also in the pipeline for future expansion during 2018-19 and beyond.

We are continually working closely with the Gold Coast Hospital and Health Service (GCHHS) to identify areas requiring support and having the most impact for the health service and patients. We would like to acknowledge the support the Foundation receives from the GCHHS Chair, CEO and Executive Team.

### Heartfelt thank you

The Foundation relies on the continued generosity of individuals, families and businesses in the community to enable us to further our impact and to assist in the provision of world-class health care services and facilities for all patients and their families at Gold Coast public hospitals.

Fundraising and philanthropy is part of who we are and I am incredibly proud to witness the spirit of giving in our community.

On behalf of the Board and our Executive Team, we thank you wholeheartedly for your enduring belief in our lifesaving cause and supporting our efforts to help patients and families in their time of greatest need.

Together, as a community, we can continue to fulfil our mission and vision to relieve the distress and financial hardship for every child and adult suffering illness, injury or disease.

Weffet

Wayne Hunt CA Chairman



# **Our mission**

No one in our community experiences hardship caused by illness or disability

# **Our vision**

Raise funds to relieve the distress of illness, promote wellbeing and further medical enhancements

# Our purpose

To relieve distress and financial hardship caused by illness, disease and injury.

# **Our priorities**

- Supporting patients facing financial and emotional hardship caused by being unwell or injured.
- Improving treatment, equipment and the patient experience to reduce distress and discomfort.
- Increasing medical knowledge and specialist skills through research and education.

# **Our values**

# PASSIONATE

We enthusiastically raise funds to help our community overcome hardship caused by illness and disability

# DYNAMIC

We are enthusiastic, creative and forward-thinking in our approach

# ACCOUNTABLE

We take pride in what we do and are responsible for all actions. We achieve targets and deadlines.

# QUALITY

We are helpful and friendly, providing quality service to all stakeholders. We use good systems and appropriate processes. The positive impact of Gold Coast Hospital Foundation on patients and their families during times of illness, injury and disease was significant in 2017-2018.

As a purpose-based organisation, the activities and services of Gold Coast Hospital Foundation (GCHF) really help people in the Gold Coast community who are suffering physically, emotionally and financially due to serious medical hardship. Our goal is to help these babies, children and adults feel better, achieve superior health outcomes, or stay as comfortable as possible during their time of need.

# Record impact of giving in 2017-2018

With the ongoing support and generosity of our community, GCHF has really started to move closer towards a level of activity and impact that the community both needs and deserves. Proudly, this year GCHF experienced its most successful fundraising year ever in its 24-year history.

The impact of this incredible giving was felt far and wide across the Gold Coast Hospital and Health Service and the Gold Coast region. It allowed GCHF to raise more than \$2 million to make an increasing number of vital health care initiatives and projects possible, which helped nearly 100,000 people overcome medical distress.

This outstanding effort is all thanks to the hard work and commitment of our wonderful Board, staff, volunteers and our big-hearted community of givers – the individuals, families and local companies who give back to our lifesaving cause. Thank you for the essential support you provide to GCHF time and again.

### Highlights of 2017-18

- The Gold Coast Health and Gold Coast Hospital Foundation Collaborative Research Program was launched and nine cutting-edge projects approved for funding.
- Members of the Gold Coast community generously donated \$100k to fund research led by Dr. Shane George that seeks to rapidly diagnosis sepsis in children to reduce child mortality.
- The Emergency Accommodation Service provided 465 nights of emergency accommodation to the families of patients in several hospital units.
- The Cancer Patient Transport Service made more than 7,000 journeys to help people affected by cancer get to and from hospital for vital treatment.

- Successfully secured funding for 108 items that will help children receiving care at six GCHHS facilities including the purchase of 10 specialist Kanmed baby beds that will provide optimal care to babies in NICU (pictured left).
- 27 items from the general equipment and refurbishment list were funded
- A group of generous local people donated the funds to purchase every item on our Cancer Day Unit wish list, resulting in 10 new state-of-the-art chemotherapy chairs
- More than 300 Gold Coast Health staff benefited from GCHF's education workshops and scholarship program.

Read more highlights on page 14.

# Key priorities for 2018-2019

The coming 12 months will see GCHF continue to press forwards on our mission to help even more people in our community during times of illness and injury. To achieve this, the focus will be on:

- Increasing awareness of GCHF within our community.
- Growing our fundraising income to deliver greater impact with a key focus on further developing our Scrub Up September TM appeal, our relationships with Trusts and Foundations; business and generous individuals.

While the last financial year has seen GCHF grow its impact steadily, there is still so much we must achieve to continue our great work of helping even more patients and their families overcome the challenges of medical hardship.

Once again, I warmly thank each and every one of our dedicated donors, supporters, business partners and volunteers for their continued generosity and care. It is only with your help that we have been able to help literally tens of thousands of people receive the best health care services, right here on the Gold Coast.

Kim Sutton CFRE, BBSc (Psychology Hons.), GAICD, MFIA Chief Executive Officer



Helping people in our community overcome medical hardship.

#### Who we are

Gold Coast Hospital Foundation is a locally-based not-for-profit charity dedicated to improving health care at Gold Coast public hospitals. Each year, GCHF's services support thousands of patients and their families who are suffering physically, emotionally and financially due to serious illness, injury and disease.

As the official charity for the Gold Coast Hospital and Health Service, GCHF raises much-needed funds to help deliver better health outcomes for patients and their families receiving care at Gold Coast University Hospital (GCUH), Robina Hospital and all Gold Coast public health clinics. These community health facilities include family and child health, post-operative care, rehabilitation, mental health, and indigenous health care services.

#### What we do

GCHF provides essential support to patients and families suffering emotional distress and financial hardship due to a medical crisis through:

- Two vital support services the Cancer Patient Transport Service and Emergency Accommodation Service
- Lifesaving medical equipment
- · Innovative hospital-based health research
- Education, training and scholarships for Gold Coast Health staff
- Improved hospital facilities and patient spaces

Refer to pages 9-11 for additional information on our services.

# **Funding**

GCHF receives no government subsidy. We work with our valued supporters, corporate partners and the Gold Coast community to raise crucial funds through donations, events, appeals, gifts in wills, regular giving and other fundraising activities. GCHF invests these funds into vital patient services, specialised clinical training, world-class medical equipment and community health programs that would otherwise not be available to local public hospitals and community health clinics.

#### Historu

GCHF was established in 1994 and has raised more than \$17 million for Gold Coast public hospitals and health care during this time.

# Alignment with government's objectives for the community

Two of the Queensland Government's objectives for the community – delivering quality frontline services and building safe, caring and connected communities – are advanced by the strategic partnership between Gold Coast Hospital Foundation and the Gold Coast Hospital and Health Service. GCHF helps to relieve the poverty and distress caused to patients suffering from illness and disease by providing patient and family support programs; improving patient outcomes through medical research, vital equipment and specialised training for clinical staff; delivering educational health programs to the community; and operating a professional and efficient organisation that is accountable and transparent to all stakeholders.

# Open data

Additional annual report disclosures relating to expenditure on consultancies are published on the Queensland Government's open data website at www.data.qld.gov.au

How generous community fundraising supports patients and families in crisis.

# **Cancer Patient Transport Service**

To help take the worry out of getting to and from hospital for chemotherapy, radiation therapy, tests and appointments, GCHF funds and manages the Cancer Patient Transport Service. This vital service completes more than 7,000 journeys annually across the Gold Coast to help patients too ill to drive or unable to afford transport.

One patient who realises the importance of the transport service is 28-year-old Gold Coast local, Jason. After finding a lump in his groin, Jason was diagnosed with testicular cancer. Living away from his family not only took its toll emotionally as he began a journey into an uncertain future, but also practically. Jason had to give up work as aggressive treatment to cure the cancer started, and he and his girlfriend were forced to survive on one income. If it wasn't for the donor-funded cancer bus, Jason wouldn't have been able to get to and from hospital providing a huge support for him in his time of need.

#### **Emergency Accommodation Service**

When Lenka Danson underwent urgent fetal laser surgery after suffering from twin-to-twin transfusion syndrome (a condition that occurs in multiple pregnancies when the babies share one placenta), there was no time for her family to make plans.

Husband, Kurt had to remain by his wife's side while also caring for eldest daughter, Kaitlyn. The family was extremely grateful for the Emergency Accommodation Service, which helped a total of 465 nights funded in 2017-2018, as it meant Lenka's Brisbane-based mum could remain close by providing 24-hour rotating family care for both Lenka and Kaitlyn.

### Health research

GCHF proudly launched a new major research program in partnership with Gold Coast Health in 2017. In this inaugural year, nine high-quality research projects were selected to receive funding ranging from \$20,000 to \$100,000. The impact of this cutting-edge program can be best explained by sharing the story of Gold Coast toddler Lily, who was diagnosed with sepsis and faced a shocking 2% chance of survival aged just 18-months of age.

When little Lily started to experience flu-like symptoms, it was only on her second hospital visit that the life-threatening condition was identified. Due to a delay in diagnosis, the infection had travelled into her bloodstream, attached to her heart and her survival depended on lifesaving open heart surgery. A timely sepsis diagnosis is at the core of a positive patient outcome. For every hour delay in administering antibiotics, children are 6% less likely to survive.

Following on from initial research which has shown that gene-expression testing can offer a faster diagnosis, this vital two-year study carried out in conjunction with health staff and researchers across Queensland aims to investigate the potential of gene-expression testing in real-world situations to help more children receive an early diagnosis thus reducing mortality for sepsis patients across the state. This vital research project will mean that children just like Lily have more chance of an early diagnosis and less chance of experiencing life-threatening complications.

This project is just one example of many similarly serving and impactful projects.

#### Lifesaving medical equipment purchased

Having the most up-to-date specialist equipment can mean the difference between life and death for patients receiving treatment in Gold Coast public hospitals.

This year GCHF was able to purchase 27 items of equipment and medical aids to help adult patients across a large variety of units and GCHHS facilities. In addition, 108 items were funded to specifically help children who are injured or unwell. Visit www.gchfoundation.org.au/past-grants for the full list of equipment, services and grants funded in 2017-18.

# Hospital facilities enhanced

To promote patient relaxation, respite and comfort, GCHF provides tranquil, private and family-friendly environments by refurbishing patient areas and enhancing hospital facilities. Nine rooms for children and adolescents with mental health needs as well as a family lounge, complete with stunning beach wall wraps, kitchen facilities and bathroom, for parents and carers of children in the Children's Critical Care Unit were beautifully transformed by GCHF in 2017-18.

# Our services and impact (cont.)

# **Education, training and scholarships**

Each year, hundreds of Gold Coast Health staff benefit from GCHF's education grants and scholarships. Expert training is delivered to doctors, nurses and other medical staff via Foundation-funded education workshops and seminars to improve knowledge in specialist health areas.

An example was the 'Retraining Lower Limb Skills Following Stroke and Brain-Injury' workshop held at GCUH over three days in April 2018. Over 30 clinicians who attended found the presentations by StrokeED Collaboration valuable offering a practical insight into how they can provide stroke and brain-injured patients with better outcomes from rehabilitation.

In addition, GCHF has proudly supported the administration of the P.A.R.T.Y. (Prevent Alcohol Trauma in Youth) program for the third year running. Delivered by the GCUH Trauma Service. Hundreds of Gold Coast teenagers benefited from this trauma prevention initiative in 2017-18.

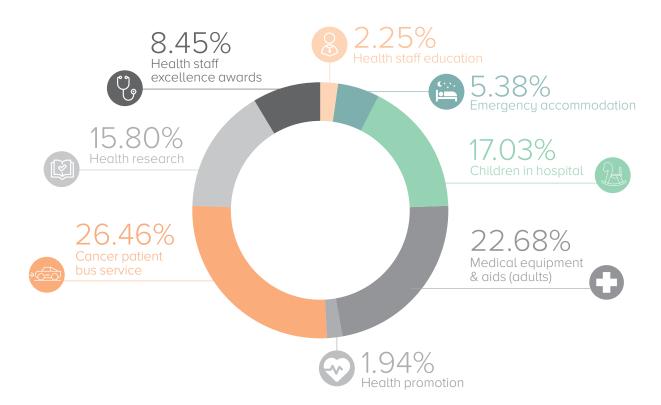
### **Compassionate patient support**

Over the past two years, GCHF has provided essential funding to develop and pilot a part-time Child Life Therapy Service. As far as we are aware this service is a first of its kind for Australia, and involves a clinically trained therapist accompanying and supporting perioperative children and their families throughout their hospital and surgical (perioperative) journey. This is very useful for children with anxiety, ongoing medical conditions and care needs or those with disability.

Child Life Therapy has proved to be highly beneficial for young patients in the Operating Theatre, Holding Bay, Recovery, Surgical Admissions Unit and Paediatric Ward at GCUH and as such GCHF has secured funding to continue the service and will next seek support to increase it to a full-time service that will allow all children to have access to the service and an opportunity for us to test the model for future potential state-wide or even national roll out.

# How the Foundation's services and programs help people in our community

Percentage of financial resources allocated to our various programs.



# Our total impact

150,000+

people helped in our community.



# Support services

7,021 <sup>®</sup>

journeys made by Cancer Patient Transport Service to help people affected by cancer get to and from hospital for vital treatment. 150,000+km travelled by the Cancer Patient Transport Service.

465 NIGHTS of emergency accommodation close to the hospital provided to help more

unwell children and adults.

than 150 family members of seriously

# Equipment and projects funded

108<sub>ITEMS</sub>

delivered on the children's medical equipment and aids wish list. An additional 343 sensory items were delivered to children in Robina and Southport facilities.

27<sub>ITEMS</sub> Continued off the general me

funded off the general medical equipment wish list such as the wound irrigation system.

9 ₹

hospital and patient spaces improved in total such as the new relatives room in Children's Critical Care.

#### Education and Research

304 HEALTH STAFF

received education and training

SCHOLARSHIPS C

Cutting-edge health research projects funded

9 HEALTH RESEARCH Significant health research

projects funded

# Compassionate patient support

698
toys and gifts
distributed to
children in hospital.

**520** HOURS of Child Life Therapy delivered to help calm and prepare children awaiting surgery.

# Strategic objectives and performance indicators

Gold Coast Hospital Foundation's Strategic Plan for 2017-2020 has one central goal – to significantly increase the positive impact that GCHF has on public health care in our region.

This goal will be met through a focus on three strategic themes, including relieve hardship caused by illness or disability; sustainable future; excellent governance; as well as our six strategic goals below.

# **Our strategic objectives**

- Improved impact
- Recruit and retain talented staff
- Secure public support
- Cost management
- Revenue growth
- Experienced Board of Directors

The first year of this Strategic Plan has now been delivered, and many of our objectives and targets have been achieved earlier than planned.

Strategic objective	Key strategies		
Improve impact	<ul> <li>Allocate resources to projects and programs that add value to health care delivery, support patients and their family during medical hardship</li> <li>Respond to emerging needs</li> <li>Administer funds that provide relief from hardship and disability</li> </ul>	<ul> <li>Improve benefits provided to the community by an increasing rate per annum comparable to the performance of other foundations in Australia.</li> <li>Allocate funding and resources approved in the 17/18 FY budget.</li> </ul>	On track. Money expended on service delivery was our highest to date at over \$1million.  The patients benefitting from the projects funded and approved in 2017/18 exceeded 126,000 compared to 95,000 benefiting from our 2016-17 projects.  Achieved: all expenditure was contained within budget.
Secure public support	<ul> <li>Develop and deliver engagement plan to raise profile of the GCHF with schools, corporates and GCHHS</li> <li>Successful introduction of the GCHF mascot</li> <li>Develop and deliver high profile ambassador program to secure public support</li> </ul>	Unprompted brand recognition increases to: 2017/2018 10%     Two high-profile ambassadors secured and representing the GCHF	Survey is currently in progress: figures as of 2017/18 will be available by late September 2018. Partially achieved: One new Ambassador, Paralympian gold medalist and double leg amputee, Mr. Curtis McGrath signed up and active from August 2018. A second potential ambassador was engaged and invited to take on the role but declined.
Revenue growth	<ul> <li>Increase income from philanthropy and fundraising</li> <li>Target corporate partnerships and sponsorships</li> <li>Grow individual giving</li> <li>Deliver revenue targets from signature events</li> </ul>	<ul> <li>Six new corporate partnerships secured</li> <li>Meet the approved revenue targets</li> </ul>	Achieved  Partially achieved: Fundraising was the highest in GCHF's history but feel just short of our targeted \$2.2 million at \$2.035m. This was due to a large anticipated grant being announced as unsuccessful in late June.
Recruit/retain talented staff	Staff training and development plans developed, and budget expended     Create a supportive and rewarding workplace through professional development, recognition and employee feedback	Continuously revise and develop staff training and development plans, implement and monitor staff training and staff development programs and budget spend     Develop and administer annual staff satisfaction survey as per our HR Strategy - 80% staff satisfaction rating	Achieved.  New 'My Success Plans' developed with the help of a HR Intern.  All marketing and income-generating team members completed the FIA Code and many undertook specialist training.  A new staff survey developed and based on a comprehensive survey developed and delivered over a number of years by a large national Nfp peer. Survey responses revealed staff are highly engaged at 89% overall engagement.

Strategic objective	Key strategies		
Cost management	Organisational structure supports our growth strategy but remains lean     Use internal KPIs and industry benchmarks to measure financial performance	Operate within approved budget	Achieved, with numerous cost savings being achieved (see financials)
Experienced Board of Directors	Members recruited according to their skills and characteristics     Members are committed to add value through regular and consistent attendance and contribution at meetings     Members introduce GCHF to their networks and support the success of activities	Diverse well-connected board of directors     Board members actively contribute to the success of GCHF through ambassador and donor introduction activities	In progress: new nominations and re-nominations lodged 30 June for treasurer, marketing and ambassador role.  In progress: Board actively seeking opportunities to introduce their networks to the foundation.

GCHF Board is currently reviewing the strategy with an aim to finalise a new refreshed three-year strategy for the period 2018-2021.

# **Operating environment**

GCHF works to deliver its mission across the Gold Coast region, and its purpose to be the official charity for the Gold Coast Hospital and Health Service.

After a scan of the risks that could affect GCHF's performance, GCHF's strategy includes a focus on working to ensure:

- Sufficient funds are raised to meet increasing need for support
- Grow the team and secure the resources required to deliver revenue growth targets
- Improve brand awareness resulting in continued growth
- Patient services and support and grants are project managed sufficiently resulting in benefits being measured and stakeholders trusting in GCHF as a responsible steward of funds and resources
- The business operating efficiently to investigate unnecessary administration costs

GCHF is delivering the Strategic Plan including developing robust business development and philanthropy units that are effectively staffed with a business development manager and coordinator; a philanthropy manager and fundraising officer; direct marketing officer (to secure increased revenue); marketing manager to launch a marketing and awareness campaign (to build supporter base); and a program officer to oversee the delivery of patient services and grants (clarity in direction of funds). Further risk mitigation will be by way

of tracking operational and financial benchmarks and carefully monitoring performance against targets.

#### Legislation

The Gold Coast Hospital Foundation operates according to:

- The Hospitals Foundations Act 1982
- The Hospitals Foundations Regulations 2005
- Financial Accountability Act 2009
- An independent annual financial and operational audit
- A requirement to produce an Annual Report detailing operations and financial results. This public document is lodged with the Parliament of Queensland by the Minister for Health and Minister for Ambulance Services

#### Tax status

On 29 May 1995 the Australian Taxation Office approved our status as a Public Ancillary Fund. In December 2015, our status changed to being endorsed as a Deductible Gift Recipient Type 1 as a Public Benevolent Institution. It is covered by Item 2 of the table in Section 30-15 of the *Income Tax Assessment Act 1997*.

### GCHF is:

- GST Concession effective from 1 July 2005
- Income Tax Exempt effective from 1 July 2000
- Endorsed as a Deductible Gift Recipient effective from 1 July 2000
- Covered by Item 2 of the table in Section 30-15 of the *Income Tax Assessment Act 1997*

# Fundraising highlights

### **Gold Coast Hospital Foundation Annual Gala**

GCHF's spectacular Hollywood-themed Gala, was held in October at the Gold Coast Exhibition and Convention Centre. More than 320 guests generously raised over \$45,000 to fund the Cancer Patient Transport Service and help children in hospital get the very best care.

#### **Annual appeals**

The tax and Christmas appeals are Gold Coast Hospital Foundation's two main annual appeals, which are supported through a fully integrated and multi-channel campaign across direct mail (DM), electronic direct mail (EDM), telemarketing (TM), website content, social media and advertising. The appeals helped to fund important patient support services and ongoing projects, including reducing sepsis-related mortality in children health research project.

# **Major donors**

The generosity of individuals in our community continued to grow this year, resulting in hundreds of thousands of dollars being raised to help cancer, paediatric, palliative and, emergency and trauma patients overcome the hardship that so often comes with being unwell. We are truly grateful for the compassion of these donors.

#### **Woolworths Wall Token Appeal**

The annual Woolworths Wall Token appeal has grown from just over \$50k income for Gold Coast Hospital Foundation in 2015 to \$186,000 in 2017. This incredible appeal, facilitated by the Children's Hospital Foundation, is a hugely important initiative for the children and babies that receive care across Gold Coast Health. Staff at the 18 Gold Coast Woolworths stores work incredibly hard and are externally passionate about the impact that they and their customers are having for children and families across our region.

#### Give Me 5 For Kids

The annual Southern Cross Austereo Give Me 5 For Kids radio appeal was held in June 2018 by 92.5 Gold FM's breakfast team and raised approximately \$70,000 to help purchase vital medical equipment for special little patients in the children's ward at GCUH. This years' appeal was launched at the GCUH with a fun event that involved local celebrities and business and sporting figures such as Mark Knowles, Australian Hockeyroo and flag bearer of the 2018 GC Commonwealth games.

#### **Southport Sharks**

In the 2017-18 financial year, Southport Sharks continued to generously donate funds made by their staff, members and customers. They have now supported local patients and their families for more than seven years. It is with much appreciation that they have agreed to apply this years' funding to help keep our vital cancer patient transport service on the road.

### **Nick Lory Construction**

Generously donated funds to help babies in hospital with the purchase of specialist Kanmed Baby Warmers that provide state-of-the-art care for critically unwell babies needing to spend a prolonged period in our special care and neonatal intensive care units. They also donated \$20,000 to make our Sepsis in Children research project a reality.

# **Queensland Theatre of Puppetry**

Queensland Theatre of Puppetry continued to generously donate their puppet show ticket entry sales to improve outcomes for sick babies receiving treatment at GCUH. This incredible community support allowed GCHF to buy special Doernbecher Crib and two Kanmed Baby Warmer and Beds to provide the best care for children in ICU and fragile preterm babies.

#### **Rotary Broadwater Southport**

Rotary Broadwater Southport has continued their wonderful support for children in hospital by donating funds to help us purchase three Kanmed Baby Warmer Beds to provide the best care for critically ill babies receiving lifesaving care in NICU.

# Palazzo Versace

Palazzo Versace has continued to offer valuable support since early 2015. This year they worked with us to officially launch our annual Care for Cancer lunch, which was a magical event that raised over \$35,000 to help provide care and support to local cancer patients. With their stunning Melbourne Cup event, they also raised enough funds to purchase a specialised bed for NICU babies.

# **Ray White Surfers Paradise Group**

The team from Ray White Surfers Paradise Group hit the green in early 2018 for its corporate golf day to help sick kids in the children's ward at GCUH, raising nearly \$20,000 and a wonderful day was had by all.

#### First National Broadbeach

First National Broadbeach continued their wonderful support for children in hospital with a fun-filled charity race day. This fantastic support provided essential funding towards our sepsis in children research project. Principle, Pamela Bayles continues to be a loyal ambassador of GCHF by introducing us to her network of business colleagues.

# **Gold Coast Convention and Exhibition Centre**

Gold Coast Convention and Exhibition Centre hosted Melbourne Cup sweeps for the Cancer Patient Transport Service, continued their support – now raising over \$20,000 to help children and cancer patients. The venue has once again signed up to raise funds for GCHF at Melbourne Cup in 2018.

# State-of-the-art chemotherapy chairs

This year, one very generous local donor 'Pure Land Buddhist', the Greek Community and the Mclaren Family funded eight state-of-the-art chemotherapy chairs, three flotation chairs, one stationary exercise bike and on 65" LED LCD television to improve the experience of all patients receiving treatment at the GCUH Cancer Services Day Unit. This was a major project that the team and the Cancer Day Unit are extremely proud to have made possible.

# \$100,000 raised to reduce mortality caused by sepsis in children

Gold Coasters donated generously to GCHF's tax appeal which launched in May and raised \$100,000 to fund vital research into early detection of the potentially life-threatening condition, sepsis. Aged 18-months-old, Gold Coast toddler Lily was given only a 2% chance of survival and underwent open-heart surgery after the sepsis infection travelled into her bloodstream and attached to her heart. The opportunity for a prompt and more accurate diagnosis of sepsis will give other children like Lily a better chance of survival. We were overwhelmed and heartened by the generosity of so many local individuals, businesses and trusts that donated to this appeal to make this state-wide research project possible.

# Community comes together to raise \$60,000 for Gold Coast babies

Local generous individuals, businesses and community groups raised almost \$60,000 to fund ten specialised Kanmed Baby Warmers to provide optimal care to severely sick babies in the NICU and special care units at GCUH.



Community raised \$60k to buy 10 new specialised beds for NICU and special care babies.

# Little Lily had a 2% chance of survival...

When 18-month-old Lily was taken seriously ill with flu-like symptoms, mum Anita knew there was more to her condition than a virus the doctor had initially diagnosed.

With Lily showing no signs of improvement and dissatisfied with her initial diagnosis, Anita persisted. Even though the ordinarily-lively Gold Coast toddler was too young to put into words what was wrong, mum Anita knew her condition was serious.

On the second visit to her GP, Anita received news she hadn't even prepared to dread.

Lily had sepsis and, because of the delay in her diagnosis, the infection had already entered her bloodstream and had attached to her heart.

Worse news was to come.

Lily only had a 2% chance of survival and needed immediate open-heart surgery, quite literally as a matter of life or death.

Lily's case of sepsis was potentially devastating for the Gold Coast family, but sadly, theirs wasn't an isolated incident.

More than 500 children a year across Australia and New Zealand experience life-threatening consequences as a result of undiagnosed sepsis. If left, the infection can attack the organs leading to organ failure, or in 10% of cases, death.

Every hour is critical for sepsis patients. The infection can take hold quickly and with devastating consequences. Unfortunately, using existing diagnostic techniques, results can take up to 48 hours. It's during this critical time-period where complications can arise, rendering treatment options much more complicated.

With thanks to the generosity of Gold Coast donors, GCHF is funding a two-year state-wide research project that will assist in the early detection of sepsis and reduce potentially life-threatening complications that arise from the infection to help more Gold Coasters just like Lily.

We're delighted to let you know that even though brave Lily's life hung in the balance, she defied the bleak medical odds and has gone on to make a full recovery. Lily joined us on stage at this year's Hospital Heroes Ball to help us motivate our local community to get behind our health research program that is raising funds for cutting edge projects such as the rapid diagnosis of sepsis in children project. Well done and thanks Lily and Anita, you're amazing.



Lily only had a 2% chance of survival and needed immediate open-heart surgery, quite literally as a matter of life or death.

Every hour delay in diagnosing sepsis increases mortality by 6%."

# Community steps up to purchase state-of-the-art equipment for Gold Coast cancer unit.

As life for most 23-year-olds is just getting started, Gold Coast student Georgia McLennan was baffling doctors by how she was still alive.

After three months of battling excruciating pain in every area of her body, relentless discomfort and extreme fatigue. The nursing student had left medical professionals no closer to a diagnosis. Frequent visits to her medical practitioner even had them questioning whether her debilitating symptoms were all in her head.

After an agonising three months, Georgia was finally diagnosed with Burkitt's Lymphoma, a rare type of blood cancer which had spread to every other area of her body. Cancer was in her lungs, breast, liver, spleen and even her fat.

From that moment on, Georgia's life – as it does for any cancer patient - revolved around the illness.

She endured daily chemotherapy and regular spinal injections. But, far from letting her diagnosis and subsequent treatment get her down, because of the pain she'd endured leading up to her diagnosis where it even hurt her to breathe, Georgia found immediate relief and began to count her blessings rather than her woes.

Cancer is a stark reality many Gold Coast locals will face and from the point of diagnosis, life changes.

Not only must they live through the emotional journey; fear, anger, sadness, and determination; but also, the practical elements. Life becomes a blur of treatment options, recovery, and rehabilitation.

Cancer is overwhelming, but it's a common illness and the GCUH Services Day Unit alone treats more than 15,600 patients a year with chemotherapy and intravenous vitamin infusion treatments.

Some, for as many as eight arduous hours a day.

It goes without saying that when experiencing their worst-case scenario, patients must be comfortable to get the best possible outcome from their treatment.

GCHF aims to reduce the distress of Gold Coast patients going through cancer treatment by providing a comfortable and welcoming hospital environment that offsets often-gruelling treatment programs.

This year, Gold Coast locals funded eight state-of-the-art chemotherapy chairs to make patients like Georgia more comfortable when receiving chemotherapy, two flotation chairs, one stationary exercise bike and a 65" LED LCD television to improve the experience of all patients receiving treatment at the GCUH Cancer Services Day Unit.

Thankfully, Georgia's treatment is now over, but for many Gold Coast locals just like her, cancer is a journey that's just beginning.



I spent a lot of my time in the GCUH's chemotherapy chairs. It's so important to be comfortable when you have chemo.

# Our supporters

So many generous individuals, families and organisations, such as those listed here, have made this year's impact possible.

#### Individuals and families

We have a growing number of supporters who donate monthly and contribute to appeals throughout the year, and we are always overwhelmed to receive donations from patients who are grateful for their treatment and care in hospital.

### **Major supporters**

- AV Technology Australia
- Coca-Cola Amatil
- Dry July Foundation
- First National Broadbeach
- · City of Gold Coast
- Commonwealth Bank
- Gold Coast Convention and Exhibition Centre
- Gold Coast Private Hospital
- LinK Family Trust
- Loraine and David McLaren
- Mr and Mrs Joel
- Mrs Beverly McIlwain
- Mrs Maureen Stevenson
- Palazzo Versace
- Professor Ged Williams
- Pure Land Buddhist
- Radiation Oncology Centres
- Ray White Surfers Paradise Group
- Southern Pacific Developments
- Southport Sharks
- The Honda Foundation
- The Star Gold Coast
- Wood Family Trust
- Woolworths

### **Community groups**

- Gold Coast Cruiser Club
- Griffith University Student Guild
- Rotary Broadwater Southport
- Uniting Church Mudgeeraba
- Queensland Theatre of Puppetry
- The Historical Motorcycle Club of Tamborine
- Rotary Club of Robina
- Paradise Point Uniting Church Arts and Crafts
- Tamborine Mountain Creative Arts

# **Event sponsors**

- 92.5 Gold FM
- Bond University Faculty of Health Sciences and Medicine
- Calleija Jewellers
- Gold Coast Cabs
- Newscorp Australia
- Print Monster
- RACO
- The Gold Coast Bulletin
- Top Dog Advertising
- Villa World

# Corporate governance and structure

#### **Our Board**

Our Board is comprised of individuals who are volunteers dedicated to serving Gold Coast Hospital Foundation with passion, commitment, professionalism, and who bring specialised skills to the organisation.

Our Board is responsible for the overall corporate governance of GCHF, including determining its strategic direction and financial wellbeing, as well as guiding and monitoring business and activities on behalf of the stakeholders to whom it is accountable. Importantly, it is our Board's role to ensure the sanctity of the mission, vision and values of GCHF, as well as ensuring its financial viability.

To ensure we serve with transparency and integrity, our Board commissions auditors to provide independent checks and assurance, as well as advice on financial policy and procedures.

The following persons have been approved as current members of the Board by the Governor-in-Council, acting by and with the advice of the Executive Council, and under the provision of the *Hospital Foundations Act 2018*.

#### Mr Wayne Hunt - Chairman

Four-year term expires 30 September 2022

Wayne Hunt is a qualified chartered accountant and member of the ICA. His private consulting business provides specialised services in strategic planning, business development, financial management, information processing and business mentoring to a range of companies in the private sector. Wayne also sits on a number of commercial boards, and brings a wealth of strategic expertise to GCHF. He has been Chairman of the GCHF since 2014.

# Mr John Fradgley – Deputy Chairman

Four year term expires 30 September 2021

John Fradgley is a qualified solicitor and was a Senior Partner in Bell Legal Group from 1977 to 2016 before retiring from his equity position to become a Consultant and Head of Department – Wills, Trusts and Estate Planning. He is involved in numerous religious, charitable, educational and community organisations on the Gold Coast, including Chairman of School Council at All Saints Anglican School.

#### Associate Professor Teresa Withers

Three year term expires 30 September 2019

Associate Professor Teresa Withers commenced her medical career at the Royal Brisbane Hospital and entered general surgical training in 1991. She completed her training as a neurosurgeon in 1998, and was awarded a prestigious fellowship to work and train in Canada shortly after. Teresa returned to the Gold Coast in 2001 and was appointed Director of Surgery at the GCUH.

#### Dr Shirley Wee

Four year term expires 30 September 2021

Dr Shirley Wee is a clinical research fellow with Menzies Health Institute Queensland (MHIQ), Griffith University. Following a career in advertising, marketing and promotions in Singapore and Japan, she settled in Australia where she achieved a First Class Honours in Biomedical Science, a Graduate Certificate in Research Management and PhD in Cardiovascular Science. Dr Wee has been Griffith University's Biobank Manager since 2014 and has served as a Board member of GCHF since 2007.

#### Ms Canice Brown

Three-year term expires 30 September 2020

Canice Brown is acting assistant director of nursing entry practice at GCUH and a nurse educator. She holds a Master of Nursing and manages a team of 15 clinical facilitators. Canice previously held a Joint Position with Griffith University where she was a member of the Critical Care teaching team and continued to guide the education and professional development of graduate nurses at Gold Coast Health.

# Ms Colette McCool

GCHHS Chair's Official nominee

Colette McCool has more than 25 years' experience as a senior executive in large and complex public sector organisations. She has held senior leadership positions across economic and social portfolios in state, territory and local governments, in diverse functional areas such as community services and health, waste management and transport. Colette has been a member of many government boards including Chair of the Safety Quality and Clinician Engagement Committee, plus Deputy Chairperson of Regional Development Authority (RDA) Gold Coast.

# Corporate governance and structure (cont.)

#### Ms Anna Carroll

Two year term expires 30 September 2018

Anna Carroll has held leadership roles in sport, public infrastructure, health and human resources in both the government and not-for-profit sectors. Anna is now overseeing the redevelopment of the Gold Coast Cultural Precinct. Anna has received an Australia Day Award for her services to the Department of Transport and Main Roads, was named a finalist in the Telstra Business Women's Awards during her tenure as CEO of Netball Queensland and has served with the United Nations in New York and was an Australian representative at the UN World Conference on Women in China.

#### Ms Colette Gallagher

Two year term expires 30 September 2019

Colette Gallagher is the general manager of Torque Media Communications. With over 20 years' experience building and maintaining high performance sales and marketing teams across most media platforms, Colette has previously worked for some of Australia's leading media organisations including Seven West Media, Pacific Magazines, Bauer Media and more recently News Corp Australia. Throughout her career Colette has sat at the negotiation table with most major FMCG, Fashion, Beauty and Automotive brands.

# 2017-18 Board meeting dates

8 AUGUST 2017

14 NOVEMBER 2017 27 FEBRUARY 2018 24 APRIL 2018 26 JUNE 2018

#### **Board sub-committees**

Through committees established by the Board, Gold Coast Hospital Foundation can draw on the skills and expertise of Board members and other individuals to ensure that additional guidance and direction is provided in certain areas that the Board considers appropriate.

#### **Executive**

#### Purpose

To assist the Board in its governance role.

#### Members

Wayne Hunt (Chairman), John Fradgley (Deputy Chairman), Kim Sutton (CEO)

### Finance, Audit and Risk

#### Purpose

To assist the Board with its financial policies and practices; and also, in fulfilling its statutory and fiduciary duties relating to the internal control and risk management framework, the reporting of financial information to users of the financial reports, the oversight of GCHF's investments, the independence and effectiveness of audit and compliance with laws, regulations and internal policies.

#### Members

Wayne Hunt (Chair), John Fradgley, Anna Carroll, Kim Sutton (CEO)

#### **Programs**

#### Purpose

To examine potential patient services suitable for Foundation funding, provide recommendation of which projects to fund and report to the Board on outcomes from research funded by GCHF. This sub-committee selects the equipment and clinical and innovation grants for funding.

#### Members

Teresa Withers (Chair), Canice Brown (Deputy Chair), Colette McCool, Dr Shirley Wee, Kim Sutton (CEO)

# **Fundraising and Marketing**

#### Purpose

To provide strategic oversight and guidance to GCHF's fundraising activities and outcomes; and GCHF's marketing and communications activities and outcomes.

#### Members

Dr Shirley Wee (Chair), Canice Brown, Colette Gallagher, Kim Sutton (CEO)

# **Executive management**

# **Chief Executive Officer**

Kim Sutton, CFRE, BBSc (Psychology Hons.), GAICD, MFIA

Kim commenced as Chief Executive Officer in December 2012, after successfully leading charities in the UK and Australia since 2001. Her career experience has given her a wealth of knowledge in charity strategy, management, and philanthropic and commercial income generation. She holds the globally recognised certified fundraising executive (CFRE).

In 2017, she was awarded the Australian Institute of Company Director's Regional Scholarship and successfully graduated the Directors course shortly after.

Responsible for recommending the strategic and operational needs of GCHF, Kim guides the day-to-day performance to ensure all activities are conducted according to GCHF's policies and procedures.

Under Kim's exceptional leadership and responsible stewardship, the committed and passionate Foundation team has again delivered enhanced outcomes for the Gold Coast community in the 2017-18 compared to previous years.

# **Organisational structure** As at 30 June 2018 **Chairman and Board Chief Executive Officer Fundraising Manager** Finance **Major Gifts Development &** - Individuals, Officer Officer **Operations Manager Community and Trusts** Part Time Part Time **Senior Marketing** Community & Communications Fundraising Officer Coordinator Programs & **Events Officer** Part Time **Database Officer**

# Risk management and accountability

### **Risk management**

The Board, through the Finance, Audit and Risk sub-committee, monitors and addresses the key risks for GCHF. Operationally, the committee discusses financial budgeting; performance and controls; as well as reviewing and identifying actions required to manage risks in areas including reputation, investment, security and information technology. GCHF's risk management philosophy is to identify, assess and control those risks that may prevent GCHF from achieving its strategic objectives. GCHF's risk management system incorporates a Risk Register. The Finance, Audit and Risk sub-committee membership is outlined in the Board committees section on page 20.

#### Internal audit

This has not been carried out due to GCHF's operations and team being small, and the risks deemed too small to warrant this activity. The three Board Sub-committees reduce and monitor the risks for GCHF.

#### **External audit**

An external audit was conducted by a designate of the Queensland Audit Office. A qualified audit opinion was issued on the 2017-2018 financial statements.

#### **Audit committee**

The Audit Committee role is performed by the Finance, Audit and Risk Sub-committee listed on page 20, and is led by GCHF Chair. As with all Board and sub-committee positions, roles are held on a non-remunerated and voluntary basis.

The sub-committee provides assurance and assistance to the Board and Chief Executive Officer on:

- Risk, control and compliance frameworks
- External accountability responsibilities as prescribed in the Financial Accountability Act 2009, Auditor-General Act 2009, Financial Accountability Regulation 2009 and Financial and Performance Management Standard 2009

The sub-committee has due regard to the Queensland Treasury's Audit and Committee Guidelines.

The 2017-18 Finance, Audit and Risk Sub-committee, encompassing the Audit Committee, met on the following dates in the reporting period:









# Information systems and recordkeeping

### **Information systems**

A new cloud-based CRM database system was implemented at GCHF at the start of the 2017-2018 financial year to improve donor and customer relationship management.

The transition to Salesforce will provide advanced capabilities and functionality that will enable GCHF to:

- Streamline CRM processes and Foundation operations
- Improve usability and data access
- Track and manage donor and customer information more efficiently
- · Facilitate automated workflow
- Provide enhanced reporting
- Connect to other Foundation software such as accounting systems, the website, MailChimp and peer-to-peer fundraising platforms
- Offer donor self-service facilities
- Have remote access on any device for ease of use and to maintain up-to-the-minute record keeping of customer activity
- · Aid future growth, planning and success

In addition, Salesforce will also be highly beneficial in simplifying and improving the donor communication journey by enabling GCHF to effectively manage and record all interactions with donors, customers and prospects such as phone calls, emails, direct mail, website visits and more.

GCHF's Business Development Manager is responsible for operating and trouble-shooting information systems and technologies so that Foundation staff members have access to the information needed to support GCHF's activities.

The Business Development Manager ensures:

- Reliable access to GCHF's major information systems
- Guidance in identifying and resolving information and technology implications of changes in GCHF's functions
- Guidance in developing and implementing information management and information and communications technology strategies, policies and standards

An external company is contracted to provide support and expertise, and also ensures daily updating and back up of the server.

#### Recordkeeping

GCHF is committed to improving recordkeeping practices to comply with the Public Records Act 2002, Information Standard 40: Record keeping and Information Standard 31: Retention and Disposal of Public Records.

A Recordkeeping Policy is endorsed by the Chief Executive Officer and fully implemented. Adherence to this policy in business activities and recordkeeping is implemented through recordkeeping procedures. The recordkeeping policy applies to all digital and paper records.

GCHF communicates roles and responsibilities for records management across the organisation via position descriptions, performance reviews, training and awareness activities.

Reliability and security of Foundation recordkeeping systems is implemented via a number of mechanisms including firewalls, systems security, secure paper storage and secure destruction bins.

#### **Recruitment and retainment**

GCHF aims to uphold a safe, healthy and harmonious working environment that promotes physical and mental wellbeing, while also being a nurturing workplace that attracts and retains staff and volunteers. Our HR Strategy 2015-2019 outlines our plans to deliver on our strategic objective of 'recruit and retain talented staff'.

We have a comprehensive recruitment, retention and performance management system in place and our strategic objective of 'recruit and retain talented staff' reflects our commitment to this. Our current HR Strategy maps out our recruitment, retention and workplace planning aims until 2019. GCHF advertises directly for new positions and uses agencies from time to time to assist recruitment of specialist positions. A detailed selection process is adhered to, ensuring an excellent match between the candidate and the needs of GCHF. Once appointed, new employees are inducted to orientate them in their new role, and familiarise them with GCHF's policies and procedures.

In the 2017-2018 period, GCHF recruited the newly created Corporate Partnerships Executive Role. As at June 2018, GCHF team consisted of 9.2 FTE staff.

# **Workforce planning**

GCHF's team is comprised of employees with a diverse range of qualifications, skills and experience ranging from finance, database, event management and marketing skills through to sponsorships, major gift fundraising and corporate partnerships. GCHF is focused on having a stable workforce, enhancing engagement levels and retaining staff members.

# Performance planning and development

GCHF is committed to the ongoing development of performance, behaviour and accountability. There is a robust performance planning and review process in place, along with training and information sessions for all staff.

Performance planning and development is undertaken annually by all staff with their managers. Individual and team performance plans are aligned with GCHF's strategy and team operational plans. All new employees go through GCHF's induction process, which includes a six-month probationary period.

#### **Professional development**

GCHF is committed to providing ongoing development opportunities for all employees to ensure a skilled, flexible and engaged workforce. A learning and development framework has been implemented based largely upon on-the-job training, combined with mentoring and formal training. All staff are provided access to professional development opportunities, including monthly training and coaching. Additionally, there is a wide variety of activities, programs and events throughout the year, providing staff with opportunities to build their leadership capability.

#### **Staff recognition**

Staff at GCHF are recognised both informally and formally for their performance and tenure during the year. A formal monthly team recognition program was developed and introduced in line with our strategic objective to recruit and retain talented staff.

# Flexible work arrangements

GCHF is committed to staff having a healthy work and personal life balance. All staff are made aware during induction that all reasonable requests for flexible work requirements will be reviewed. This may involve adapting start and finish times to suit circumstances; leave for special circumstances; working by remote in particular circumstances; and other situations. Requests are managed sensitively on a case by case basis.

# Industrial and employee relations framework

GCHF operates under the *Fair Work Act (2009)*. Employee relations issues are managed promptly and in accordance with the legislation and internal policies and procedures. GCHF regularly reviews its human resources policies and procedures to ensure organisational best practice and legal compliance. Any updated or new policies are implemented with employees through training sessions and team meetings.

# Early retirement, redundancy, retrenchment and voluntary separation

The permanent separation rate through the year was 1.6 full time members of the team dropping to 17% (compared to 24% in 2016-17) as at 30 June 2018.

No redundancy/early retirement/retrenchment packages were paid during the period.

# **Public Sector Ethics Act 1994**

GCHF team, volunteers and Board members adhere to a written Code of Conduct and a number of policies and procedures, which are shared when joining GCHF team via contracts, a Policy Handbook and the Board Member Handbook.

# Queensland public service values

# Customers first

- Know your customer
- Deliver what matters
- Make decisions with empathy

# Ideas into action

- Challenge the norm and suggest solutions
- Encourage and embrace new ideas
- · Work across boundaries

# Unleash potential

- Expect greatness
- Lead and set clear expectations
- Seek, provide and act on feedback

#### Be courageous

- Own your actions, successes and mistakes
- Take calculated risks
- Act with transparency

# Empower people

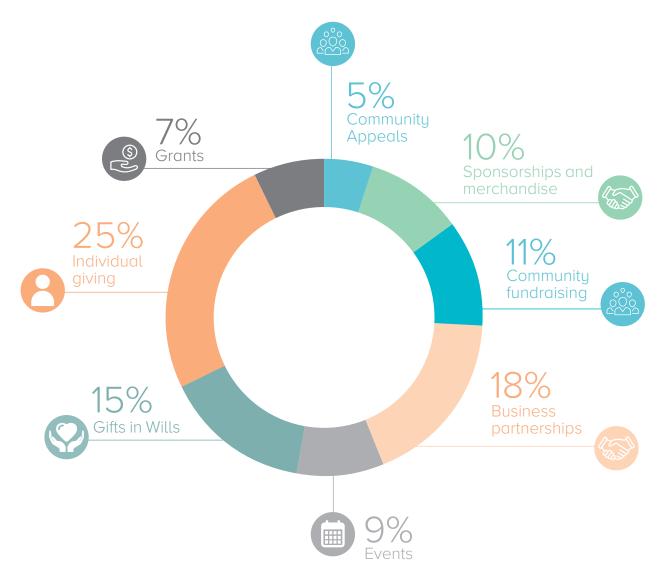
- Lead, empower and trust
- Play to everyone's strengths
- Develop yourself and those around you

# Financial performance summary

The 2017-2018 financial year has seen GCHF achieve its most successful financial result in its 24-year history. This will support the efficient and effective operation of GCHF into the future.

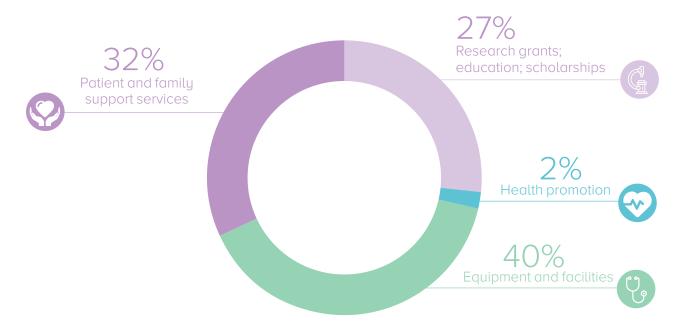
# **Donations and other contributions 2017-18**

GCHF's revenue predominantly comes from funds raised through the generous support of the community. GCHF generated \$2,138,048 in total revenue for the 2017-18 financial year. The following pie chart shows a proportional breakdown of donations and other contributions revenue:



#### Disbursement 2017-18

Total funding provided for equipment, facilities, grants, scholarships, patient and family support, and community programs was \$956,400. The following pie chart provides a breakdown of the areas where funds were allocated:



#### **Net assets**

GCHF maintained a solid financial position throughout 2017-18. As at 30 June 2018, GCHF's net assets totalled \$3,631,021.

#### **Financial reserves**

Financial reserves are funds retained by GCHF to ensure its sustainability and help meet its future needs. This is helpful for effective operation in times of economic difficulty and at times of unforeseen costs.

# Comparison with previous period

The table below provides a comparison of actual results for the 2017-18 financial year with the previous period's results:

Financial Year	2017-18	2016-17
Total Revenue	\$2,138,048	\$1,584,366
Total Expenses*	\$2,192,238	\$1,855,340
Net Assets	\$3,631,021	\$3,685,211

 $<sup>\</sup>hbox{\it *Figure includes program delivery costs.}$ 

# **Full financial statements**

The annual financial statements for Gold Coast Hospital Foundation for the 2017-18 financial year are included in Appendix 2 of this Annual Report.

# **Appendices**

# Appendix 1 – glossary and compliance checklist

Glossary

**CRM** - Customer Relationship Management

DGR1 - Deductible Gift Recipient Type 1

DM - Direct Mail

EDM - Electronic Direct Mail

Foundation - Gold Coast Hospital Foundation

NICU - Neonatal Intensive Care Unit

TM - Telemarketing

GCHF - Gold Coast Hospital Foundation

GCUH - Gold Coast University Hospital

**GCHHS** - Gold Coast Hospital and Health Service

Gold Coast Health - Gold Coast Hospital and Health Service/GCHHS

Compliance checklist

Summary of requ	irement	Basis for requirement	Annual report reference
Letter of compliance	A letter of compliance from the accountable officer or statutory body to the relevant Minister/s	ARRs – section 7	4
	<ul><li> Table of contents</li><li> Glossary</li></ul>	ARRs – section 9.1	3 28
	Public availability	ARRs – section 9.2	2
Accessibility	Interpreter service statement	Queensland Government Language Services Policy ARRs – section 9.3	2
	Copyright notice	Copyright Act 1968 ARRs – section 9.4	2
	Information Licensing	QGEA – Information Licensing ARRs – section 9.5	2
	Introductory Information	ARRs – section 10.1	8
General information	Agency role and main functions	ARRs – section 10.2	8-11
	Operating environment	ARRs – section 10.3	13
	Government's objectives for the community	ARRs – section 11.1	8
Non-financial	Other whole-of-government plans / specific initiatives	ARRs – section 11.2	N/A
performance	Agency objectives and performance indicators	ARRs – section 11.3	12-13
	Agency service areas and service standards	ARRs – section 11.4	N/A
Financial performance	Summary of financial performance	ARRs – section 12.1	26-27

Summary of require	ement	Basis for requirement	Annual report reference
	Organisational structure	ARRs – section 13.1	21
	Executive management	ARRs – section 13.2	21
Governance – management	Government bodies (statutory bodies and other entities)	ARRs – section 13.3	N/A
and structure	Public Sector Ethics Act 1994	Public Sector Ethics Act 1994 ARRs – section 13.4	25
	Queensland public service values	ARRs – section 13.5	25
	Risk management	ARRs – section 14.1	22
	Audit committee	ARRs – section 14.2	22
Governance  – risk management	Internal audit	ARRs – section 14.3	22
and accountability	External scrutiny	ARRs – section 14.4	22
	Information systems     and recordkeeping	ARRs – section 14.5	23
	Workforce planning and performance	ARRs – section 15.1	24
Governance - human resources	Early retirement, redundancy and retrenchment	Directive No.11/12 Early Retirement, Redundancy and Retrenchment Directive No.16/16 Early Retirement, Redundancy and Retrenchment (from 20 May 2016) ARRs – section 15.2	24
	Statement advising publication of information	ARRs – section 16	2
	Consultancies	ARRs – section 33.1	8
Open Data	Overseas travel	ARRs – section 33.2	Nil (requiring no open data return)
	Queensland Language     Services Policy	ARRs – section 33.3	2
Financial	Certification of financial statements	FAA – section 62 FPMS – sections 42, 43 and 50 ARRs – section 17.1	Appendix 2
statements	Independent Auditor's Report	FAA – section 62 FPMS – section 50 ARRs – section 17.2	Appendix 2

FAA Financial Accountability Act 2009

FPMS Financial and Performance Management Standard 2009

ARRs Annual report requirements for Queensland Government agencies

# Appendices (cont.)

# Appendix 2 – financial statements 2017-2018

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Independent auditor's report	50-5

# Treasurer's report

### **Results from operations**

The Foundation's operating results (prior to grants and disbursements) was \$902,210 compared to an amount of \$424,757 for the previous year. From this GCHF distributed \$956,400 in grants during the year compared to \$695,730 for the previous year. The end result was a post distribution deficit of \$54,190.

#### Revenue

Total revenue for the year of \$2,138,048 compares with \$1,584,366 for the previous year.

# **Operating expenditure**

GCHF separates the costs of operations into three categories:

- 1. Cost directly associated with the Fundraising activities, such as; prizes, advertising, marketing, distribution and administration;
- 2. Employment Expenses
- 3. Non Cash Charges for Depreciation and Amortisation
- 4. Other General Expenses

Fundraising costs for the current year amounted to \$287,962 compared with \$322,321 for the previous year. Employment Expenses for the current year amounted to \$800,738 compared with \$684,897 for the previous year. This increase is the direct result of the engagement of additional full time staff members.

# Disbursements, grants and donations

During the year an amount of \$956,400 was disbursed for the purpose of delivering patient support services such as the Cancer Patient Transport Service and Emergency Accommodation Service; medical equipment and aids; education workshops and scholarships for health staff; and health promotion activities. This compares with an amount of \$695,730 in the previous year.

#### **Balance** sheet

GCHF continues to maintain a strong Balance Sheet.

As of balance date Cash and Cash Reserves were \$3,631,021 decreased from \$3,685,211 at the end of the previous year.

Trade and Other Payables and accruals amounting to \$135,244 as at balance date consisted primarily of Trade Payables, Grants and Disbursements approved but not disbursed and Employment Related Accruals.

# Fiduciary duties, governance and financial management

The finance team prepare detailed financial information to present to each meeting of the Finance, Risk and Audit Committee. The Treasurer's Report presented to each meeting of the Finance, Risk and Audit Committee contains detailed information on expenditure, receipts, grants and disbursements, bank reconciliations, asset balances, liability balances and expenses tabled for approval. After approval by the Finance, Risk and Audit Committee a summary is presented to each subsequent Board meeting for approval.

# **Financial stability**

GCHF continues to maintain its strong Balance Sheet with the significant proportion of its assets held in lower risk term deposit investments spread across a number of highly rated Australian Banking Institutions.

GCHF will continue to benefit significantly from association with the Gold Coast University Hospital and anticipates having the capacity to invest further into the Gold Coast Health system by way of disbursements, grants and donations in the future.

Wayne Hunt CA Treasurer

Gold Coast Hospital Foundation

# Financial statements

# For the Year Ended 30 June 2018

Gold Coast Hospital Foundation ABN 95 387 912 125

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**Board Report** 

Our Board members submit the financial report of the Gold Coast Hospital Foundation for the year ended 30 June 2018.

#### **Board Members**

The names of the Board members throughout the financial year and at the date of this report are:

Member	Position
Mr Wayne Hunt	Chairman/Treasurer
Mr John Fradgley	Deputy Chair
Associated Professor Teresa Withers	Member
Ms Canice Brown	Member
Ms Colette McCool	Official HHS Representative
Dr Shirley Wee	Member
Professor Andrew Davey (resigned 18 September 2017)	Member
Ms Anna Carroll	Member
Ms Colette Gallagher	Member

#### **Principal Activities**

The principal activity of the foundation during the financial year was providing patent support and funding for medical equipment aids and resources to assist patients receiving treatment from Gold Coast Hospital and Health Service District. No change in the nature of these activities occurred during the year.

# **Operation Results**

The Surplus available from operations for delivery of program activities amounted to \$902,210 (2017 \$424,757). After disbursement of program activities and providing for income tax a net deficit of \$54,190 resulted (2017 \$270,093).

#### **After Balance Date Events**

No matter or circumstances have arisen since the end of the financial year that significantly affect or may significantly affect the operations of the Foundation, the result of those operations, or the state of affairs of the Foundation in future financial years.

Signed in accordance with a resolution of the Member of the Board.

Wayne Hunt 1

Chief Executive Officer

Dated this 10 day of Seplender 2018

# STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2018

Income from Continuing Operations	Notes	2018	2017
Income from Continuing Operations	2	\$	\$
Fundraising and Donation Revenue	2	1,912,350	1,364,404
Interest Income	2	83,199	67,681
Other Revenue	3	142,499	152,281
Total Income from Continuing Operations		2,138,048	1,584,366
Expenses from Continuing Operations			
Employee Expenses	4	(800,738)	(684,897)
Fundraising Expenses		(287,962)	(322,321)
Depreciation and Amortisation Expenses		(5,006)	(6,520)
Other Expenses		(142,132)	(145,871)
Total Expenses from Continuing Operations		(1,235,838)	(1,159,609)
Net Surplus Available for Program Delivery		902,210	424,757
Program Delivery Expenses		(956,400)	(695,730)
Net Surplus (Deficit) for the year		(54,190)	(270,093)
Other Comprehensive Income		æ:	-
Total Comprehensive Income for the year	3	(54,190)	(270,093)

The accompanying notes form part of these statements

# BALANCE SHEET **AS AT 30 JUNE 2018**

	Nata	2018	2017
	Notes	\$	\$
Assets			
Current Assets			
Cash and Cash Equivalents	5	3,559,817	3,808,891
Trade and Other Receivables	6	93,980	40,650
Inventory	7	7,499	8,420
Other Assets	8	14,420	660
Total Current Assets		3,675,716	3,858,621
Non-Current Assets			
Plant and Equipment	9	90,549	8,829
Total Non-Current Assets		90,549	8,829
Total Assets		3,766,265	3,867,450
Current Liabilities			
Trade and Other Payables	10	98,835	157,341
Accrued Employee Benefits	11	36,409	24,898
Total Current Liabilities	<del></del>	135,244	182,239
Total Liabilities		135,244	182,239
Net Assets		3,631,021	3,685,211
Equity			
Accumulated Surplus		3,631,021	3,685,211
Total Equity	-	3,631,021	3,685,211

The accompanying notes form part of these statements

# STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2018

	Accumulated Surplus \$
Balance as at 1 July 2016 Operating deficit from continuing operations Balance as at 30 June 2017	3,956,304 (270,093) 3,685,211
Balance as at 1 July 2017 Operating deficit from continuing operations Balance as at 30 June 2018	3,685,211 (54,190) 3,631,021

The accompanying notes form part of these statements

## STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2018

		2018	2017
	Note	\$	\$
Cash Flows from Operating Activities:			
Inflows:			
Receipts from Fundraising and Donations		1,811,097	1,442,019
Receipts from Other Income		142,499	52,994
Interest Received		83,199	69,815
GST Received from Customers		36,459	40,524
GST Received from ATO		96,511	74,168
Outflows:			- 0
Payments to Suppliers and Employees		(2,201,870)	(1,737,681)
GST Paid to Suppliers		(132,969)	(115,095)
Net Cash (Utilised)/Provided by Operating Activities		(165,074)	(173,256)
Cash Flows from Investing Activities:			
Payments for Plant and Equipment		(84,000)	(534)
Net Cash Utilised by Investing Activities		(84,000)	(534)
Net increase/(decrease) in Cash and Cash Equivalents		(249,074)	(173,790)
Cash and Cash Equivalents at beginning of financial year		3,808,891	3,982,681
Cash and Cash Equivalents at end of financial year	5	3,559,817	3,808,891

The accompanying notes form part of these statements

Notes to the Financial Statements for year ended 30 June 2018

#### NOTE 1: BASIS OF FINANCIAL STATEMENT PREPARATION

#### (a) General Information about the Reporting Entity

These financial statements cover the Gold Coast Hospital Foundation (the Foundation). The Foundation is a Statutory Body established under the Hospitals Foundations Act 1982. The Foundation does not control other entities. The financial statements include the value of all income, expenses, assets, liabilities and equity for the Foundation as an individual

#### (b) Authorisation of Financial Statements for Issue

The financial statements are authorised for issue by the Chief Executive Officer and Chief Finance Officer at the date of signing the Management Certificate.

#### (c) Compliance with Prescribed Requirements

The financial statements have been prepared in compliance with the Financial Accountability Act 2009 and the Financial and Performance Management Standard 2009.

The Foundation is a not-for-profit entity and these general purpose financial statements are prepared in compliance with the requirements of Australian Accounting Standards - Reduced Disclosure Requirements and Interpretations applicable to not-for-profit entities.

The financial statements are prepared on an accrual basis (with the exception of the statement of cash flows which is prepared on a cash basis).

## (d) Underlying Measurement Basis

The historical cost convention is used as the measurement basis.

#### (e) Presentation Matters

#### Currency and Rounding

Amounts included in the financial statements are in Australian dollars. Amounts are rounded to the nearest dollar.

Comparative information reflects the audited 2016-17 financial statements.

## Current / Non-Current Classification

Assets are classified as 'current' where their carrying amount is expected to be realised within 12 months after the reporting date. Liabilities are classified as 'current' when they are due to be settled within 12 months after the reporting date, or the Foundation does not have an unconditional right to defer settlement to beyond 12 months after the reporting date. All other assets and liabilities are classified as non-current.

#### (f) Taxation

The Foundation is exempted from income tax under the Income Tax Assessment Act 1936 and is exempted from other forms of Commonwealth taxation with the exception of Fringe Benefits Tax (FBT) and Goods and Services Tax (GST).

Receivables and payables in the Balance Sheet are shown inclusive of GST.

#### (g) Key Accounting Estimates and Judgments

There are no significant estimates or assumptions made in the preparation of the financial statements that require disclosure.

Notes to the Financial Statements for year ended 30 June 2018

#### NOTE 1: BASIS OF FINANCIAL STATEMENT PREPARATION (continued)

#### (h) New and Revised Accounting Standards

The AASB has issued a number of new and amended Accounting Standards that have mandatory application dates for future reporting periods, some of which are relevant to the Foundation. The Board members have decided not to early adopt any of the new and amended pronouncements. Their assessment of the pronouncements that are relevant to the Foundation but applicable in future reporting periods is set out below.

AASB 16: Leases (applicable to annual reporting periods beginning on or after 1 January 2019)

When effective, this Standard will replace the current accounting requirements applicable to leases in AASB 117: Leases and related Interpretations. AASB 16 introduces a single lessee accounting model that eliminates the requirement for leases to be classified as operating or finance leases.

The main changes introduced by the new Standard are as follows:

recognition of a right-of-use asset and liability for all leases (excluding short-term leases with less than 12 months of tenure and leases relating to low-value assets);

depreciation of right-of-use assets in line with AASB 116: Property, Plant and Equipment in profit or loss and unwinding of the liability in principal and interest components;

inclusion of variable lease payments that depend on an index or a rate in the initial measurement of the lease liability using the index or rate at the commencement date;

application of a practical expedient to permit a lessee to elect not to separate non-lease components and instead account for all components as a lease; and

inclusion of additional disclosure requirements.

The transitional provisions of AASB 16 allow a lessee to either retrospectively apply the Standard to comparatives in line with AASB 108: Accounting Policies, Changes in Accounting Estimates and Errors or recognise the cumulative effect of retrospective application as an adjustment to opening equity on the date of initial application.

Although the Board members anticipate that the adoption of AASB 16 will impact the Foundation's financial statements, it is impracticable at this stage to provide a reasonable estimate of such impact.

AASB 1058: Income of Not-for-Profit Entities (applicable to annual reporting periods beginning on or after 1 January 2019).

This Standard is applicable to transactions that do not arise from enforceable contracts with customers involving performance obligations. The significant accounting requirements of AASB 1058 are as follows:

Income arising from an excess of the initial carrying amount of an asset over the related contributions by owners, increases in liabilities, decreases in assets and revenue should be immediately recognised in profit or loss. For this purpose, the assets, liabilities and revenue are to be measured in accordance with other applicable Standards.

An entity may elect to recognise volunteer services or a class of volunteer services as an accounting policy choice if the fair value of those services can be measured reliably, whether or not the services would have been purchased if they had not been donated. Recognised volunteer services should be measured at fair value and any excess over the related amounts (such as contributions by owners or revenue) immediately recognised as income in profit or loss.

Although the Board members anticipate that the adoption of AASB 1058 may have an impact on the Foundation's financial statements, it is impracticable at this stage to provide a reasonable estimate of such impact.

Notes to the Financial Statements for year ended 30 June 2018

## NOTE 2 – GRANTS AND OTHER CONTRIBUTIONS

	2018	2017 \$
Fundraising Revenue	457,620	415,703
Donations Revenue	1,454,730	948,701
Total	1,912,350	1 <b>,364<u>,4</u>04</b>

## **Accounting Policy**

Donations, fundraising and gifts that are non-reciprocal in nature (i.e. do not require any goods or services to be provided in return) are recognised as revenue in the year in which the Foundation obtains control over them which is normally at the time of receipt.

#### NOTE 3 - OTHER REVENUE

Other income	82,549	95,824
Vending Machine Income	59 950	56 457
Total	142,499	152,281

## **Accounting Policy**

Revenue from the shop and vending machine is recognised on delivery of the goods.

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office.

Notes to the Financial Statements for year ended 30 June 2018

#### NOTE 4 - EMPLOYEE EXPENSES

B . B	2018	2017
Employee Benefits	\$	\$
Wages and salaries	678,053	586,366
Annual leave expense	11,511	6,842
Employer superannuation contributions	62,746	54,642
Employee Related Expenses		
Employment agency costs and advertising	15,054	11,980
Worker's compensation premium	4,582	2,986
Other employee and contractor costs	21,994	13,503
Professional development	6,798	7,699
Total	800,738	684,018
Number of Employees:	8	7.5

The number of employees as at 30 June, including both full-time employees and part-time employees, is measured on a full-time equivalent basis.

#### **Accounting Policies**

Short-term employee benefits - annual leave, wages, salaries and sick leave

Annual leave and wages and salaries due but unpaid at the reporting date are recognised in the Balance Sheet at the current salary rate(s). As the Foundation expects such liabilities to be wholly settled within 12 months of reporting date, the liabilities are recognised at undiscounted amounts.

Prior history indicates that on average, sick leave taken each reporting period is less than the entitlement accrued. This is expected to continue in future periods. Accordingly, it is unlikely that existing accumulated entitlements will be used by employees and no liability for unused sick leave entitlements is recognised. As sick leave is non-vesting, an expense is recognised for this leave as it is taken.

#### Superannuation

Superannuation benefits are provided through defined contribution (accumulation) plans, in accordance with employees' conditions of employment and employee instructions as to superannuation plan.

Defined Contribution Plans - Employer contributions are based on rates specified under conditions of employment. The Foundation's contributions are expensed when they become payable at each fortnightly pay period.

## NOTE 5 – CASH AND CASH EQUIVALENTS

	2018	2017
	\$	\$
Cash on hand	921	750
Cash at bank	558,896	764,570
Term Deposit	3,000,000	3,043,571
Total	3,559,817	3,808,891

## **Accounting Policy**

Cash and cash equivalents include all cash and cheques receipted at 30 June as well as deposits held at call with financial

Notes to the Financial Statements for year ended 30 June 2018

## NOTE 6 - TRADE AND OTHER RECEIVABLES

	2018	2017 \$
	\$	
GST receivable	33,642	16,847
Interest receivable	10,751	
Fundraising receivable	49,587	23,803
Total	93,980	40,650

## Accounting Policy

Trade debtors are recognised at the nominal amounts due at the time of sale or service delivery i.e. the agreed purchase/contract price. Settlement terms are within 30 days from invoice date.

The collectability of receivables is assessed periodically with provision being made for impairment. All known bad debts were written-off as at 30 June.

Inventory	7,499	8,420
Total	7,499	8,420

## **Accounting Policy**

Inventories held for sale are measure at lower of cost and net realisable value. Inventories held for distribution are measured at cost adjusted, when applicable, for any loss or service potential.

Inventories acquired at no cost, or for nominal consideration, are valued at current replacement cost as at the date of the acquisition.

## NOTE 8 - OTHER ASSETS

NOTE 0 - OTHER AGGETS		
Current Prepayments Total	14,420 14,420	660 660
NOTE 9 – PLANT AND EQUIPMENT		
Plant and equipment – at cost Less accumulated depreciation Total	32,734 (25,018) 7,716	30,008 (21,179) 8,829
Motor vehicles – at cost Less accumulated depreciation Total	84,000 (1,667) 82,833	
Reconciliation of carrying amounts Plant and equipment		
Carrying amount at 1 July 2017 Acquisitions Depreciation Carrying amount at 30 June 2018	8,829 2,726 (3,839) 7,716	12,610 534 (4,315) 8,829

Notes to the Financial Statements for year ended 30 June 2018

NOTE 9 - PLANT AND EQUIPMENT (continued)	2018	2017
	\$	\$
Motor vehicles		
Carrying amount at 1 July 2017		
Acquisitions	84,000	
Depreciation	(1,667)	
Carrying amount at 30 June 2018	82,833	

#### **Accounting Policy**

#### Asset Acquisition

Actual cost is used for the initial recording of all non-current physical asset acquisitions. Cost is determined as the value given as consideration plus costs incidental to the acquisition, including all other costs incurred in getting the assets ready for use, however, any training costs are expensed as incurred.

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of expense.

#### Recognition of Plant and Equipment

Items of property, plant and equipment with a cost or other value equal to or in excess of the following thresholds are recognised for financial reporting purposes in the year of acquisition:

Plant and Equipment and Motor Vehicles: \$500

Items with a lesser value are expensed in the year of acquisition. Expenditure is only capitalised if it increases the service potential or useful life of the existing asset. Maintenance expenditure that merely restores original service potential (arising from ordinary wear and tear etc.) is expensed.

Assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset.

## Measurement of Non-Current Physical Assets using Cost

Plant and equipment is measured at cost in accordance with the Non-Current Asset Policies. The carrying amounts for plant and equipment at cost approximate their fair value.

#### Impairment

All non-current physical assets (including intangible assets) are assessed for indicators of impairment on an annual basis. If an indicator of possible impairment exists, the Foundation determines the asset's recoverable amount. The asset's recoverable amount is determined as the higher of the asset's fair value less costs to sell and depreciated replacement cost. Any amount by which the asset's carrying amount exceeds the recoverable amount is recorded as an impairment loss.

An impairment loss is recognised immediately in the Statement of Comprehensive Income, unless the asset is carried at a revalued amount. When the asset is measured at a revalued amount, the impairment loss is offset against the asset revaluation surplus of the relevant class to the extent available.

Where an impairment loss subsequently reverses, the carrying amount of the asset is increased to the revised estimate of its recoverable amount, but so that the increased carrying amount does not exceed the carrying amount that would have been determined had no impairment loss been recognised for the asset in prior years. A reversal of an impairment loss is recognised as income, unless the asset is carried at a revalued amount, in which case the reversal of the impairment loss is treated as a revaluation increase.

#### Depreciation

Plant and equipment and Motor vehicles are depreciated on a straight-line basis so as to allocate the revalued amount or net cost of each asset (respectively), less its estimated residual value, progressively over its estimated useful life to the Foundation.

Notes to the Financial Statements for year ended 30 June 2018

## NOTE 9 - PLANT AND EQUIPMENT (continued)

#### Accounting Policy (continued)

The estimation of the useful lives of assets is based on historical experience with similar assets as well as considerations such as manufacturers' warranties, asset turnover practices and the Foundation's strategic asset plan. Reassessments of useful lives are undertaken annually by the Foundation. Any consequential adjustments to remaining useful life estimates are implemented prospectively.

Any expenditure that increases the originally assessed capacity or service potential of an asset is capitalised and the new depreciable amount is depreciated over the remaining useful life of the asset to the Foundation. For each class of depreciable asset the following depreciation rates are used:

Plant and Equipment 10 - 33%Motor Vehicles 25%

#### NOTE 10 - TRADE AND OTHER PAYABLES

	2018	2017
Current – unsecured liabilities	\$	\$
Accounts payable	39,617	61,998
Audit fees	8,580	8,580
Accrued expenses	25,297	51,052
Superannuation	17,063	16,037
PAYG withholding payable	8,278	19 674
Total	98,835	157 <u>.</u> 341

#### **Accounting Policy**

Accounts payable represent trade creditors that are recognised upon receipt of the goods or services ordered and are measured at the agreed purchase/contract price, gross of applicable trade and other discounts. Amounts owing are unsecured and are generally settled on 30 day terms.

#### NOTE 11 - ACCRUED EMPLOYEE BENEFITS

	2018	2017
Current	\$	\$
Provision for Annual Leave	36 409	24,898
Total	36,409	24,898

Accounting Policy - refer Note 6.

#### **NOTE 12 – FINANCIAL INSTRUMENTS**

#### Financial Instruments - Accounting Policy on Recognition

Financial assets and financial liabilities are recognised in the Balance Sheet when the Foundation becomes party to the contractual provisions of the financial instrument.

Financial instruments are classified under Accounting Standard AASB 139 as follows:

Notes to the Financial Statements for year ended 30 June 2018

### NOTE 12 - FINANCIAL INSTRUMENTS (CONT)

	Note	2018	2017
Financial Assets		\$	\$
Cash and cash equivalents	5	3,559,817	3,808,891
Trade and other receivables	6	93,980	40,650
Total		3,653 <u>,</u> 719	3,849,541
Financial Liabilities			
Financial liabilities at amortised cost:			
Trade and other payables	10	98,835	157,341
Total		98,835	157,341

#### NOTE 13 - KEY MANAGEMENT PERSONNEL (KMP) DISCLOSURES

The following details for non-ministerial key management personnel include those Foundation positions that had authority and responsibility for planning, directing and controlling the activities of the Foundation during 2017-18 and 2016-17. Further information about these positions can be found in the body of the Foundation's Annual Report under the section relating to Executive Management.

Position	Position Responsibility

Board of Directors The strategic leadership, guidance and effective oversight of the management of the Foundation, including its operational and financial performance. Chief Executive Officer Responsible for the strategic leadership and direction

of the Foundation.

#### KMP Remuneration Policies

No Board Members received or were entitled to receive any fees or other benefits during the year.

Remuneration and other terms of employment for the Foundation's other key management personnel are specified in employment contracts. The contracts provide for the provision of performance-related cash payments and other benefits including motor vehicles. Remuneration expenses for these key management personnel comprises the following components:

Short term employee expenses which include:

salaries and allowances earned and expensed for the entire year, or for that part of the year during which the employee occupied the specified position.

non-monetary benefits - consisting of provision of laptop and mobile phone.

Long term employee expenses - mainly annual leave and long service leave entitlements earned and expensed for the entire year, or for that part of the year during which the employee occupied the specified position;

Post-employment expenses - mainly superannuation contributions.

The following disclosures focus on the expenses incurred by the Foundation during the respective reporting periods that is attributable to key management positions. Therefore, the amounts disclosed reflect expenses recognised in the Statement of Comprehensive Income.

Notes to the Financial Statements for year ended 30 June 2018

## NOTE 13 - KEY MANAGEMENT PERSONNEL (KMP) DISCLOSURES (continued)

## **Remuneration Expenses**

#### 2017 - 2018

Position	Short Term Employee Expenses		Long Term Employee Expenses	Post-Employment Expenses	Total Expenses
	Monetary Expenses	Non-Monetary Benefits \$	S	S	S
Chief Executive Officer	160,270	-	-	15,159	175,429

#### 2016 - 2017

Position	Short Term Employee Expenses		Long Term Employee Expenses	Post-Employment Expenses	Total Expenses
	Monetary Expenses \$	Non-Monetary Benefits \$	S	S	S
Chief Executive Officer	146,766	-		15,159	161,925

#### Performance Payments

The foundation did not incur any performance or bonus payments within remuneration packages of KMP during the financial year.

#### NOTE 14 - RELATED PARTY TRANSACTIONS

There were no transactions with related parties during the year.

### **NOTE 15 - COMMITMENTS**

The foundation has entered into a lease agreement with Gold Coast Hospital and Health Service for the premises located at Shop 3, Gold Coast University Hospital, 1 Hospital Boulevard, Southport. The rental consideration for the life of the lease is \$1.00 plus GST. The lease expires on 3 November 2018 with an option for a further 5 years.

## **NOTE 16 - CONTINGENCIES**

There are no known contingent assets or liabilities as at the reporting date.

#### NOTE 17 - EVENTS OCCURRING AFTER BALANCE DATE

The Board is not aware of any events that have occurred since the end of the reporting period that require adjustment or disclosure within the financial statements.

### Management Certificate of Gold Coast Hospital Foundation

These general purpose financial statements have been prepared pursuant to s.62 (1)(a) of the Financial Accountability Act 2009 (the Act), s.43 of the Financial and Performance Management Standard 2009 and other prescribed requirements. In accordance with s.62(1)(b) of the Act we certify that in our opinion:

- a) the prescribed requirements for establishing and keeping the accounts have been compiled with in all material respects; and
- the financial statements have been drawn up to present a true and fair view, in accordance with b) prescribed accounting standards, of the transactions of the Gold Coast Hospital Foundation for the financial year ended 30 June 2018 and of the financial position of the Foundation as at the end of that year; and
- these assertions are based on an appropriate system of internal controls and risk management processes c) being effective, in all material respects, with respect to financial reporting throughout the reporting period.

Wayne Hunt Chairman

Chief Executive Officer

10 day of Septente 2018 Dated this



## **DICKFOS DUNN ADAM**

AUDIT AND ASSURANCE

#### INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF GOLD COAST HOSPITAL FOUNDATION

#### Qualified Auditor's Opinion

We have audited the financial report of Gold Coast Hospital Foundation (the Foundation), which comprises the balance sheet as at 30 June 2018, statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the management certificate.

In our opinion, except for the financial effect of the matters referred to in the basis for qualified auditors opinion paragraph, the accompanying financial report of Gold Coast Hospital Foundation has been prepared in accordance with Div 60 of the Australian Charities and Not-for-Profits Commission Act 2012 including:

- giving a true and fair view of the Gold Coast Hospital Foundation financial position as at 30 June 2018 and its financial performance for the year then ended; and
- complies with the Financial Accountability Act 2009 and Australian Accounting Standards Reduced Disclosure Requirements and Australian Charities and Not-for-Profits Regulation 2013.

#### Basis for Qualified Auditors Opinion

- Given the nature of the Foundation's operations, established controls over income, including inter alia fundraising and donation revenue and other revenue, prior to the entry into the financials records are limited. Accordingly, our audit procedures with respect to income, including inter alia fundraising and donation revenue and other revenue, were restricted to the amounts recorded in the financial records. We therefore are unable to express an opinion as to the completeness of income recorded.
- The prior year audit report was qualified; this report should be read in conjunction with comparative data and opening reserves reported.

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 registered entity in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110: Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also 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.

## Matters Relating to the Electronic Presentation of the audited financial report

The audit report relates to the financial report of Gold Coast Hospital Foundation for the year ended 30 June 2018 included, or which will be included, on the Foundation's website. We have not been engaged to report on the integrity of this website.

This audit report refers only to the financial report identified above. It does not provide an opinion on any other information which may have been hyperlinked to/from the financial report. If users of this report are concerned with the inherent risks arising from electronic data communications they are advised to refer to the hard copy of the audited report to confirm the information included in the audited financial report presented on the Foundation's website.

#### Information Other than the Financial Report and Auditor's Report Thereon

The Board is responsible for the other information. The other information comprises the information included in the Foundation's annual report for the year ended 30 June 2018, but does not include the financial report and our auditor's report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.



Registered Company Auditors - Tracey Adam, Gavin Dunn Liability limited under a scheme approved under Professional Standards Legislation

## Responsibilities of the Board for the Financial Report

The Board is responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards - Reduced Disclosure Requirements and for such internal control as the Board determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the Board are responsible for assessing the Foundation's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Board either intend to liquidate the Foundation or to cease operations, or have no realistic alternative but to do so.

#### Auditor's Responsibilities 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 the 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 the 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 the 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 Foundation's internal control.

Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Board.

Conclude on the appropriateness of the Board' 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 registered entity'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 registered entity 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.

10th September 2018

We communicate with the Board 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.

DICKFOS DUNN ADAM

Audit & Assurance

SOUTHPORT

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## How to help

By supporting Gold Coast Hospital Foundation, you can help children and adults in hospital receive the very best care possible to overcome medical hardship.

## How you can help make a real difference

#### Individuals and families:

- Make a tax-deductable donation
- Join our regular giving program
- Leave a gift in your Will
- Support our annual fundraising appeals
- Attend our events
- Volunteer with us

## Companies and organisations:

- Make a tax-deductable donation
- Join our regular giving program
- Donate products and services
- Provide gifts-in-kind
- Offer pro-bono expertise
- Partner with us
- Join our workplace giving program
- Host a fundraising event
- Become a sponsor

To find out more about how you can get involved and support the Foundation, please contact us on:

- **(07)** 5594 6986
- 🗟 admin@gchfoundation.org.au
- www.gchfoundation.org.au

#### Sign up to our newsletter

Sign up to receive our print and digital newsletters at gchfoundation.org.au so you can keep up-to-date on the latest news and events, read heart-warming patient stories, and stay in the loop with lifesaving projects and initiatives.

#### **Share your story**

Have you or someone you know been treated at a Gold Coast public hospital or community clinic? Help us spread the word about Gold Coast Hospital Foundation's lifesaving impact on the community by sharing your story. We would love to hear from you on (07) 5594 6986.



# Help. Care. Save.



## Head office

Retail Tenancy 3, Gold Coast University Hospital 1 Hospital Boulevard, Southport QLD 4215

## Postal address

PO Box 23 Griffith University QLD 4222

**P:** (07) 5594 6986

**E:** admin@gchfoundation.org.au www.gchfoundation.org.au

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