

# **Gold Coast Hospital Foundation**

# Annual Report 2020–2021

# **Acknowledgement to Traditional Owners**

Gold Coast Hospital Foundation would like to acknowledge the traditional custodians of the Gold Coast, the Yugambeh speaking people, whose land, winds and waters we all now share; and pay tribute to their unique values, and their ancient and enduring cultures, which deepen and enrich the life of our community.

We pay our respects to Elders past, present and emerging, and recognise those whose ongoing effort to protect and promote Aboriginal and Torres Strait Islander cultures will leave a lasting legacy for future Elders and leaders.

#### **Public availability**

Feedback is important for improving the value of our future annual reports. We welcome your comments, which can be made by contacting us at:

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# Public availability statement

This report is available on our website at www.gchfoundation.org.au/publications or telephone +61 7 5594 6986 for a paper copy. ISSN: 2200-1808 (print); 2200-1816 (online)

#### Interpreter Service Statement

The Queensland Government is committed to providing accessible services to all Queenslanders from all culturally and linguistically diverse backgrounds. If you have difficulty understanding the annual report, please contact us on (07) 5594 6986 and we will arrange an interpreter to effectively communicate the report to you.



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# Letter of compliance

2 September 2021

The Honourable Yvette D'Ath MP Minister for Health and Ambulance Services GPO Box 48 Brisbane Qld 4001

Dear Minister,

I am pleased to submit for presentation to the Parliament the Annual Report 2020-2021 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 2019, 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 26-27 of this Annual Report.

Yours sincerely,

Lawal

**Anna Carroll** 

Chair

Gold Coast Hospital Foundation

# Chair's report

Gold Coast Hospital Foundation (Foundation) continues to strengthen our impact in the community through the support of our valued supporters, sponsors, corporate partners, community groups and individuals.

In the wake of the many disruptions and unknowns of 2020 that COVID-19 presented us, the Foundation continued to raise much-needed funds to benefit the health and wellbeing of the Gold Coast community. We continued our steady program of fundraising activities and services, while moving into new forms of fundraising with our first Giving Day and exploring commercial opportunities.

The Board remains committed to our four-year strategic plan with a focus in the coming year to deliver meaningful financial growth. Our appetite for growing our impact is strong and led by our purpose of aiding our community in times of need.

The Foundation has been the recipient of significant generosity from bequests and donors allowing us to retain a strong balance sheet and sustainable future.

The work of the Foundation has been made possible by the commitment of the Board members to whom I extend my thanks and appreciation. I would like to acknowledge Samantha Wakerley who stepped down as Treasurer and thank her for the guidance and advice she provided to the Board and Chief Executive Officer (CEO). Through her knowledge, skills and commitment, Samantha ensured an always high level of reporting that assisted us in making timely decisions.

The Board continues to invest in ourselves. A commitment to planning, guest speakers and diverse skill sets ensures we are providing strong leadership.

Our Foundation team led by Ben Cox, CEO continues to diversify fundraising opportunities whilst increasing the awareness of the Foundation. The team has displayed a strong connection with our community and always represent our values well. I would like to thank them and our volunteers for their commitment to our work.

The support from the Chair of the Gold Coast Hospital and Health Service Board (GCHHSB) Mr Ian Langdon and his Board and Mr Ron Calvert, CEO and his Executive team is greatly appreciated. Their unwavering support and commitment to our work helps shape our success and contributes significantly to our achievements.

Moving forward, Gold Coast Hospital Foundation has promising and exciting times ahead.

**Anna Carroll** 

Landel

Chair

# **Chief Executive Officer's report**

As a local charity that is committed to helping patients and families in our community through a wide array of health challenges and hardships, 2020-2021 saw Gold Coast Hospital Foundation (Foundation) find new and innovative ways to continue our mission whilst also maintaining our tried and tested services, programs and grants.

Building on the work we undertook in previous years to strengthen our strategies, plans, relationships and culture, we saw increased success in our philanthropic pursuits as well as improvements in delivering essential services, programs, equipment, education and more.

We have seen wonderful improvements and growth across many areas including:

- Improvements to our grants model
- Expansion of our Cancer Patient Transport to Renal Transport Services
- Significant infrastructure projects including new children's and maternity health spaces
- Improvements in our financial reporting structures
- Staff and resourcing growth
- New fundraising campaigns and programs

Even though COVID-19 continues to have an impact on our community and the Foundation, we have remained committed to our mission through all levels of our organisation including our Board, staff, volunteers, supporters and donors. We have remained steadfast in an ever-changing environment and have only been able to do so as our vital partners - those who fund what we do, tell our story and deliver our mission - stand by our side through all the challenges we face, together.

The journey ahead for the Foundation will present many new challenges, but the last few years have seen us face insurmountable odds and yet we still continue our commitment to the community, to our doctors, our nurses, our health professionals and the patients who need our help. Together, we are changing many lives through our work and will continue to do so for many decades to come.

**Ben Cox** 

Chief Executive Officer

# **Highlights**

# Highlights of our impact in 2020-2021 include:

#### Research

Through an investment of \$150,000 the Foundation has assisted the Collaborative Research
Grant Scheme to facilitate innovative, collaborative and responsive health research with a
'bench to the bedside' focus that has seen key improvements in the direct delivery of health
care in our community.

# **Equipment**

 The Foundation funded 52 vital pieces of medical equipment on the wish list valued at more than \$420,000, allowing Gold Coast Health medical professionals to provide an enhanced level of care to patients in hospital.

#### **Facility upgrades**

Two hospital spaces were improved during the 2020-2021 financial year including a full
upgrade of the Children's Outpatients area and the Ring the Bell project, which gives children
with cancer a symbolic way to celebrate and acknowledge the end of their treatment.

#### **Services**

- The Emergency Accommodation Service provided 137 nights of emergency accommodation close to the hospital so direct family members of patients in intensive care could remain nearby to their loved ones during recovery from serious illness or critical injury.
- The Cancer Patient Transport Service continued providing critical transport assistance for local cancer patients, making 5,345 journeys to help people affected by cancer get to and from hospital for vital treatment.
- Thanks to a generous donor, the Foundation launched a new transport service supporting the
  most at-risk renal patients. The Renal Patient Transport Service completed approximately 560
  trips to hospital and helped more than 120 local renal patients.

#### **Programs**

The Child Life Therapy program, which is a first in Queensland (QLD), continued to provide
vital support to children and their families throughout their perioperative journey at Gold Coast
University Hospital. The program has set the standard for care for kids across multiple
disciplines in QLD and inspired many other services to implement the program in future years.

#### **Education**

 Through 12 scholarships, the Foundation has been able to grow the skills of Gold Coast Health nurses and midwives, keeping valuable and passionate nurses here on the Gold Coast.

#### Fundraising and philanthropy

- The Foundation held its biggest fundraising appeal on record at its first ever Giving Day in April 2021. The event raised an incredible \$151,698 in just 12 hours to fund lifesaving equipment across Gold Coast Health.
- The 2020 Christmas Appeal campaign exceeded expectations by raising \$72,000 as part of an integrated campaign approach. This result was a 188 per cent increase on the \$25,000 target.
- The Workplace Giving program increased by 70 per cent in 2020-2021 with 900 generous Gold Coast Health staff giving regular donations from their pay to help make a difference to patients in hospital.

#### Commercial programs

 A new collaborative project was established with Gold Coast Health and Nerang Express Recycling to deliver a recycling program across Gold Coast Health facilities.

# About the Foundation

Gold Coast Hospital Foundation (Foundation) is the official charity for the Gold Coast Hospital and Health Service (GCHHS). As a locally-based community organisation, the Foundation's purpose is to relieve medical hardship caused by illness, injury or disability while supporting GCHHS medical professionals to provide improved patient care, early diagnosis, enhanced treatment options and family support.

The Foundation operates in the GCHHS region and is committed to raising much-needed funds to benefit the health and wellbeing of children and adults across the Gold Coast region. Together with the wonderful support of generous community and corporate donations, the Foundation funds and delivers the vital extras that would not otherwise be available across GCHHS.

These vital support programs include:

- Cancer Patient Transport Service
- Renal Patient Transport Service
- Emergency Accommodation Service
- Purchasing medical equipment and aids
- Funding hospital-led health research
- Improving hospital facilities and patient spaces
- Providing scholarships for GCHHS staff

An aligned approach and close partnership with GCHHS helps support the sickest and most vulnerable in the community at local public hospitals and community health facilities.

### **Funding**

The Foundation relies on the generosity of its valued supporters, sponsors, corporate partners, community groups and individuals who raise essential funds through donations, events, appeals, bequests, regular giving and other fundraising activities.

#### **History**

The Foundation was established in 1994 and has raised more than \$20 million for Gold Coast public hospitals and health care during this time.

#### Legislation

The Foundation operates according to:

- The Hospital Foundations Act 2018
- The Hospital Foundations Regulation 2018
- Financial Accountability Act 2009
- Charities Act 2013 (Cth)
- Australian Charities and Not-For-Profit Commission Act 2012 (Cth)
- Public Ancillary Fund Guidelines 2011
- An independent annual financial and operational audit

#### 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.

The Foundation 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

# Vision, purpose and values

#### Our vision

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

#### Our purpose

To aid our community in times of need.

#### Our values

Integrity – To be open and accountable to the people we serve.

Community First – To have the community's best interest at heart.

Excellence – To strive for outstanding performance and outcomes.

Respect – To listen, value and acknowledge each other.

Compassion – To treat others with understanding and sensitivity.

Empower – To take ownership and enable each other to achieve more.

## 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.

# Support programs and services

The Foundation provides life-changing impact to patients, families and clinical staff across GCHHS through its commitment to funding and delivering vital support programs and services.

#### **Equipment**

Our Equipment Grants program is focused on identifying and supporting areas of need for equipment that will provide the best possible outcomes for patients including both physical and mental outcomes whilst also supporting the wellbeing of family members and loved ones. Whilst the requests for support from the GCHHS can be overwhelming, we take a triage approach to funding by seeking input at donor, staff, clinical and procurement levels to ensure the best outcomes and impact are achieved. Due to the varying nature of what we fund through this program, we measure this on the number of equipment, total value and reach of patients.

#### **Facility improvements**

Our Facility Improvements Grants program has a key focus on not only how we improve clinical spaces for our doctors, nurses and allied health professionals, but also how we contribute to the overall positive patient experience for families, loved ones and visitors to our hospitals, allied health precincts and community health facilities of the GCHHS. With this focus, we do not measure this program's success by number of projects, but rather by the reach and impact of improvements over a longer period of time (12 months) from the completion of the upgrade. As such, the two projects for 2020-2021 have only been completed for less than a month, so there is no relevant data captured at this reporting period.

## **Education and scholarships**

Our Grants program for education and scholarships is funded through the generosity of two donors, who are both former nurses and midwives. This program is measured on the number of scholarships awarded after a competitive and impartial judging system. This system assesses the current skills of nurses and award them to those whose new learnings will best benefit the departments they work in, as well as improve patient or family care. As such, there are no standardised metrics beyond numbers awarded.

#### **Emergency Accommodation Service**

The Emergency Accommodation Service helps families who are struggling financially stay close to loved ones who are being treated in the trauma, intensive care, neonatal intensive care, children's critical care and postnatal mental health units of Gold Coast University Hospital. This program, working in conjunction with referrals from the GCHHS social work team, is measured on the reach of the service into the community through nights of accommodation. In the reporting period, 137 nights of accommodation were delivered to help families assessed by the GCHHS social workers as having a need for support due to their social, financial or geographical disadvantage.

#### **Patient Transport Services**

Our Patient Transport Services have diversified this financial year from a service that supports cancer patients to now supporting long-term renal patients requiring ongoing dialysis. Both the Cancer Patient Transport Service and the Renal Patient Transport Service help transport patients to and from hospital for treatment and appointments. We measure success in this program area in many ways but are primarily focused on the reach of the service.

#### **Collaborative Research**

The Foundation has supported the Collaborative Research Grants Scheme for another year. This was developed in partnership with the GCHHS and university partners to support research that can help improve the Gold Coast community and the delivery of health care services. Research projects supported by the scheme included:

Effectiveness of caseload midwifery care in promoting maternal mental health and positive mother-infant relationships.

- Improving partnerships with family members of Intensive Care Unit patients: A phase II randomised trial of two family capacitation strategies.
- Objective Pre-oxygenation in paediatric Emergency Airway Management (The OPERA study).
- Spread of a structured Journal Club format into clinical services using WE-TREAT ("Webbased Expert system" for "Tailoring Research Evidence And Theory"): A knowledge translation approach.
- Group therapy for non-progressive dysarthria compared to individual therapy: A pilot randomised controlled trial.
- Identifying malnutrition risk via patient-led, technology-assisted screening: a feasibility study.
- Assessing the effect of melatonin on sleep behaviour and executive functioning in children with Fetal Alcohol Spectrum Disorder: a double-blind cross over trial.
- Enhancing clinician research: A mixed methods study examining Australian and New Zealand specialist trainees' experiences and research outputs.
- Improving hospital discharge medication communication through effective patient partnerships - (CHAT Study).
- Exploring end-of-life decision-making in the Emergency Department and Intensive Care Unit: What do clinicians know about the law, and how is it applied?
- EAsIEr study: Evaluating the use of clinical decision Aids In the Emergency Department.
- Feasibility of assessing clinical and cost-effectiveness of the UPLIFT program vs. usual physiotherapy care for people with low back pain: a pilot randomised controlled trial.

The Foundation continues to track and receive reporting on the outcomes of this research and the translational impacts.

# Queensland Government objectives for the community

Under the *Hospital Foundations Act 2018*, it is a statutory requirement that the Foundation contributes to the Queensland Government's *Future State – Advancing Queensland's Priorities* (established 2018) and that our strategic plan reflect this.

On 1 December 2020 a new statement of the government's objectives for the community was tabled in Parliament. The Foundation contributes to the *Unite and Recover – Queensland's Economic Recovery Plan* government objectives in the following way:

- Safeguarding our health Our strategic themes of impact, investment and trust support the focus on safeguarding our health. Through our funding of research, programs, equipment, education for health professionals and facility improvements, we are empowering the Gold Coast community to safeguard their health through GCHHS.
- **Supporting jobs** Our strategic themes of engagement, investment and sustainability support the focus on employing a team of effective and responsible staff in Southeast Queensland. Our philanthropic growth will have the potential to create more jobs within with Foundation itself and in the activities we fund.
- Backing small business Our strategic themes of engagement, investment and sustainability support the focus on working with local businesses to support our philanthropic outcomes. Our statutory requirement to adhere to the Queensland Health Procurement policies also means we work with local suppliers of medical equipment and services to drive our mission.
- **Growing our regions** Our strategic themes of impact, investment and engagement demonstrates our commitment to growth in the Gold Coast community through our mission.
- **Investing in skills** Our strategic themes of engagement, investment and sustainability support the focus on continually growing the skills of our staff and volunteers.
- Backing our frontline services Our strategic themes of impact, investment, culture and
  trust support our focus on backing frontline service. As with the Government's focus on
  safeguarding our health, the Foundation delivers this through our funding of research,
  programs, equipment, education for health professionals and facility improvements through
  GCHHS.
- **Protecting the environment** Our strategic theme of trust demonstrates the Foundation focus to deliver ethical standards in all we do including utilising environmentally friendly goods and services to support and protect our environment.

# Strategic direction

Our 2020-2024 Strategic Plan is the guiding document that captures our strategic path to continue our critical purpose to aid our community in times of need.

This plan was developed with the values of the Foundation, in alignment with the values of GCHHS. As such, we remain committed to a plan that reflects an ongoing commitment to our purpose, our community, our donors and our stakeholders. This also includes our commitment to respect, protect and promote human rights in our decision-making and actions.

As an overview our strategic plan is focused on:

- Impact Maintain existing impact and identify new community needs that can be delivered through our programs.
- Sustainability Sustain fundraising income and attrition by growing workplace giving, commercial and major donor programs.
- Investment Invest in structures and staff that delivers efficient cost-effective operational performance.
- Culture Develop a strong philanthropic and best practice of culture within policies and procedures to support fundraising teams and stewardship of donors.
- Engagement Build the engagement framework to encourage our current community to become ambassadors and committed supporters of the Foundation.
- Trust Build trust in the community by enhancing transparency, communication and stewardship programs.

# Strategic objectives and performance indicators

Our performance against our Strategic Plan 2020-2024 is outlined below:

Strategic Objective	Goal	Performance Measure	Result
1. Impact	Deliver and measure meaningful and relevant impact on the health of our community	<ol> <li>Needs analysis completed annually.</li> <li>Program analysis completed annually.</li> <li>Impact measurement tools implemented.</li> </ol>	<ol> <li>Our annual needs analysis identified the projects our donors have funded have been predominantly for children's areas or allied health. We are now working to annually align this with a more complex community health framework.</li> <li>Developed a framework for each delivery channel that identifies community, corporate and commercial needs in a dashboard format.</li> <li>Our impact measurement tools are restricted to simple patient impact measures. Expansion of this in future years to grow impact measurement is underway.</li> </ol>

2. Sustainability	Implement sound fundraising, marketing and finance strategies to sustain the mission of the Foundation	<ol> <li>2.</li> <li>3.</li> </ol>	New income streams implemented with improved performance across acquisition, growth and retention. Systems and processes reviewed and new systems implemented. Impact report conducted annually.	2.	Launched new community fundraising, corporate fundraising and individual giving programs with improved performance results. Implementation of new systems to manage and track all tied and untied funds.  Donor survey conducted to track impact, satisfaction and improvement areas.
3. Investment	Invest in the people, processes and systems to allow us to achieve our mission well into the future	<ol> <li>2.</li> <li>3.</li> </ol>	Positions, performance plans and KPI's align with strategy. Annual review of processes completed. IT systems scoped and recommendations made.	<ol> <li>2.</li> <li>3.</li> </ol>	All relevant staffing performance structures aligned and completed. All annual reviews completed. IT system upgraded to iCloud.
4. Culture	Development of a strong impact, philanthropic and purpose centric culture	2.	Donor journeys, fundraising strategy and marketing and communications plan integrated with donor centricity. All internal and external stakeholder engagement has clear communication of impact and outcomes.	2.	New fundraising support models created and in process of implementation with investment in additional resourcing.  New marketing and communications models and resourcing implemented.
5. Engagement	Growth of engagement with all our stakeholders	<ol> <li>2.</li> <li>3.</li> </ol>	Number of collaborations with community organisations. Increase in ambassadors across corporate, community and individuals. Implementation of marketing strategy.	<ol> <li>2.</li> <li>3.</li> </ol>	Community collaborations have increased with more than 10 new partners. Ambassadorial activations in corporate, community and individuals increased threefold through our giving day initiative. Marketing strategy still in development due to delayed branding project.
6. Trust	Through ethical mission delivery, fundraising and governance we build stronger trust with our community, our people and stakeholders	<ol> <li>2.</li> <li>3.</li> </ol>	Measurement of ethical practice against GCHHS ethics principles. Annual completion of Fundraising Institute Australia (FIA) Code training and audit against FIA code. Board meets legislative requirements against Hospital Foundations Act 2018 and Queensland Audit Office (QAO) Audit.	2.	Developed a comprehensive mission delivery work flow and dashboard that is the central register for all mission/programs. All staff including strategic grants and Apple Marketing completed the FIA code. Annual review of Board Charter conducted.

# Opportunities and challenges

Under our new four-year Strategic Plan 2020-2024 we are focused on recovery and growth into the future.

Opportunities for the future success of the Foundation include:

- Philanthropy Diversification of philanthropic revenue through community fundraising, corporate partnerships and individual giving.
- Mission Partnering with health and community organisations to expand the impact of our mission.
- Commercial Expanding our commercial programs to benefit the community through food and beverage, accommodation, parking or other relevant opportunities.
- Identity Refinement of our whole of identity approach to engagement, communications and mission.

Whilst we have developed a strong strategic and operational plan to assist us in capitalising on these opportunities, we still face challenges in our future including:

- Gold Coast economic recovery.
- COVID-19's impact on healthcare need, philanthropy and workforce.
- Skills and resourcing in a competitive employer market.
- Charity growth and expansion on the Gold Coast diluting the giving capacity of the public.

We are confident that with the support of donors, partners, staff and government, our ability to recover from the impacts of COVID-19 and achieve a continued service to the community will be achievable.

# Governance

# **Our Board**

Our Board is responsible for the overall corporate governance of the Foundation, 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 the Foundation, as well as ensuring its financial viability.

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

Board members play a voluntary role and therefore do not receive any remuneration.

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.

#### Ms Anna Carroll – Board Chair

Originally appointed: 19 August 2016. Current term: 13 December 2018 to 30 September 2022 Board meetings attended: 4 of 5

Anna has held leadership roles in sport, public infrastructure, health and human resources in both the government and not-for-profit sectors. In January 2015, Anna commenced as Director, Cultural Precinct at Home of the Arts on the Gold Coast – the \$100 million redevelopment of the Gold Coast's Cultural Precinct including an international standard art gallery and outdoor stage. Anna is leading a program of organisational expansion and institutional strengthening for this emerging precinct.

Anna has received an Australia Day Award for her services to the Department of Transport and Main Roads and was named a finalist in the Telstra Business Women's Awards during her tenure as CEO of Netball Queensland. In addition, she has served with the United Nations in New York and was an Australian representative at the United Nations World Conference on Women in China. Anna is the Honorary Secretary of the Palm Beach Surf Life Club and is a former Board member of QSport.

#### **Ms Samantha Wakerley**

Originally appointed: 13 December 2018. Current term: 2 October 2020 to 1 October 2025 Board meetings attended: 4 of 5

Samantha is a senior corporate finance professional with more than 15 years' commercial experience in listed multinationals such as John Wiley & Sons, Pacific Dunlop and News Corp, as well as large privately-owned Queensland businesses. The Neumann Group and The CMC Group. In August 2017, she started her own consulting business, providing a range of finance and corporate services to notfor-profits and small businesses, from Townsville to Tweed Heads.

During her career, she has led finance teams through transformation and periods of significant change, restructures, system implementations, transitions into shared service centres and process outsourcing. Samantha is a Member of the Institute of Professional Accountants and the Institute of Financial Accountants (United Kingdom). Samantha holds post-graduate qualifications in Business Administration from Griffith University, plus a Master of Commerce from the University of New England. Samantha also serves on the Executive Committee for the Pine Rivers Koala Care Association and was previously on the committee for the Courier Mail Children's Fund. She also runs the annual Triple Zero Charity Ball, which is attended by emergency services and hospital staff, and has raised in excess of \$162,000 for charity since it began in 2012.

#### Ms Canice (Candy) Brown

Originally appointed: 19 September 2014. Current term: 20 October 2017 to 30 September 2020 Board meetings attended: 2 of 5

Candy qualified as a registered nurse in the Australian Capital Territory in 1978 working predominately in critical care in the United Kingdom and Australia, before completing her Bachelor of Nursing Post Registration and Graduate Certificate in Critical Care at Griffith University in 2000.

Following completion of her Masters in Nursing (Advanced Clinical Education) in 2005, Candy accepted a position at GCHHS. The development and support of nursing students and graduate nurses was the major focus of her role as the Nurse Educator for the Entry to Practice Team. More recently, this support has extended to all nurses as the coordinator of the Nursing and Midwifery Professional Recognition program.

Highlights of her nursing career include a joint appointment to Griffith University as a member of the critical care teaching team, a presentation to the International Nurse Education in Practice Conference in Cambridge, reviewer for Nurse Education in Practice based in the United Kingdom and publication of her research 'Enrolled Nurse 2 Registered Nurse, transitioning to a new scope of practice' published in the Australian Contemporary Nursing Journal.

#### **Dr Shirley Wee**

Originally appointed: 18 November 2010. Current term: 27 January 2017 to 30 September 2021 Board meetings attended: 3 of 5

Shirley is a Clinical Research Fellow with Menzies Health Institute Queensland, Griffith University and possesses more than a decade of experience in clinical research.

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. A member of the Hunter Cancer Biobank Scientific Advisory Committee, Shirley has been Griffith University's Biobank Manager since 2014 and has served as a Board member of the Foundation since 2007.

#### Dr Sonu Haikerwal

Originally appointed: 13 December 2018. Current term: 13 December 2018 to 30 September 2020 Board meetings attended: 2 of 5

Sonu is the co-owner and Principal General Practitioner at the Haan Health Medical Centre. She brings a wealth of experience in health and general practice and is comfortable dealing with complex health problems.

Sonu graduated from the prestigious All India Institute of Medical Sciences College in New Delhi, India and has worked in both Australia and the United Kingdom before completing her Physicians training in London and obtaining her magnetic resonance cholangiopancreatography. Sonu completed training and further qualifications in obstetrics and gynaecology gaining her Diplomate of the Royal College of Obstetricians and Gynaecologists and has also completed training in family planning. With a passion for all aspects of healthcare, Sonu decided to train as a General Practitioner, completing her Membership of the Royal College of General Practitioners from London and gaining her Fellowship of the Royal Australian College of General Practitioners in Australia.

#### Ms Colette Gallagher

Originally appointed: 2 May 2017. Current term: 12 December 2019 to 30 September 2022 Board meetings attended: 4 of 5

Colette is the General Manager of Torque Media Communications. With more than 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 fast-moving consumer goods, fashion, beauty and automotive brands. Colette's rich history in sales and marketing has given her an innate ability to amplify an organisation's marketing spend. She has built a reputation on strong negotiation, strategic decision making and on maximising relationships.

## Mr Jeffrey (Jeff) Frazer – Board Deputy Chair

Originally appointed: 12 December 2019. Current term: 12 December 2019 to 30 September 2022 Board meetings attended: 5 of 5

Jeff is a Partner at KPMG, one of the big four consulting firms in Australia. He is a Chartered Accountant, Registered Company Auditor, Certified Internal Auditor and member of the Australian Institute of Company Directors.

Specialising in working with not-for-profit organisations, Jeff has more than 20 years' experience working with private and public companies in Australia. Prior to working for KPMG, Jeff worked at Macquarie Bank. Jeff works to provide solutions to accounting and financial problems that organisations encounter. He also has a broader skill set in project management, information technology solution analysis and general business advisory services.

#### Mr Timothy (Tim) Elliott

Originally appointed: 12 December 2019. Current term: 12 December 2019 to 30 September 2022 Board meetings attended: 5 of 5

Tim was admitted as a solicitor in Queensland in 2008 and is now an owner of Bell Legal Group. Tim is a Gold Coast local having been born here and completed schooling at All Saints Anglican School.

Tim is a partner in Bell Legal Group's Litigation and Dispute Resolution Department. His expertise covers a wide range of matters including shareholder, director and other company disputes as well as property and contractual disputes. He has a particular interest in insolvency law and is a respected practitioner in all aspects of corporate and personal insolvency.

# Gold Coast Hospital and Health Board (GCHHB) Chair nominated representative

Board meetings attended: 4 of 5

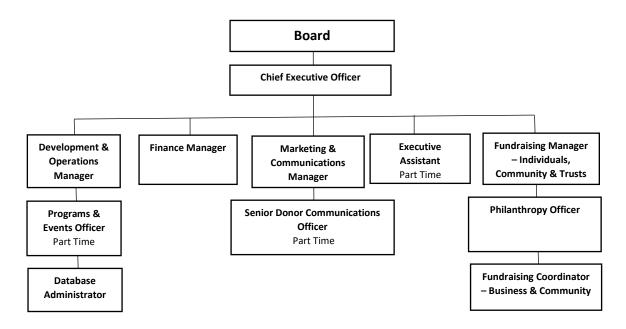
Mr Michael Kinnane is the nominated representative of the GCHHB Chair. Michael has had an accomplished career as Director-General of several Queensland government departments, including emergency services for more than 12 years, and CEO of the Queensland Ambulance Service for five years. Michael is a strategic change leader who is community and outcomes-focused, with a record of achievements resulting in positive patient outcomes for the community. Michael was appointed as Director of the Gold Coast Hospital and Health Board in 2018. He is a fellow of the Australian Institute of Company Directors as well as Fellow of the Australian Institute of Management.

# **Executive management**

The executive management team consists of:

- Chief Executive Officer Ben Cox
- Development and Operations Manager Joe Hanlon
- Finance Manager Michelle Patmore
- Fundraising Manager Vicki James
- Marketing and Communications Manager Sharon Bebb

# Organisational structure



## Roles and responsibilities

Chief Executive Officer – Responsible for the operational delivery of strategic key performance indicators, achieving the budget needs of the Foundation, lead generation of major gifts, providing human resources leadership to the Foundation's team members, as well as satisfying the legislative requirements.

Development and Operations Manager - Identifies and develops the Foundation's business and commercial fundraising income base through corporate sponsorships and partnerships. Leads day-today operations including service delivery of the Cancer and Renal Patient Transport Services and Emergency Accommodation Service.

Fundraising Manager – Leads the fundraising direction for individual giving, community fundraising, and trusts and foundations to secure much-needed funding. This role also liaises with GCHHS staff to grow workplace giving contributions as well as build positive relationships to support fundraising activities.

Finance Manager - Responsible for the Foundation's financial needs including income reconciliation, accounts payable, accounts receivable, monthly financial reporting and providing support for the annual financial audit.

Marketing and Communications Manager - Develops and implements the Foundation's marketing and communications strategy to help raise its profile. The role is essential in taking the Foundation's brand, fundraising and engagement to new levels of success to provide even more impact to people who need our help.

# Strategic workforce planning and performance

The Foundation 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.

We have a comprehensive recruitment, retention and performance management system in place and our strategic objective to recruit and retain talented staff reflects our commitment to this. The Foundation 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 the Foundation. Once appointed, new employees are inducted to orientate them in their new role and familiarise them with the Foundation's policies and procedures as well as attend a tour of Gold Coast University Hospital.

In 2020-2021, the Foundation appointed a Marketing and Communications Manager and saw the return of the Senior Donor Communications Officer from maternity leave. As at 30 June 2021, the Foundation team consisted of 9.83 full-time equivalent staff. The permanent separation rate was 8 per cent as at 30 June 2021. <sup>1</sup>

## Performance planning and development

Performance planning and development is undertaken quarterly by all staff with their managers to monitor and review key performance indicators. The Foundation worked with Griffith University to develop a new performance reporting and tracking model. Individual and team performance plans are aligned with the Foundation's strategy and team operational plans. All new employees go through the Foundation's induction process, which includes a tour of the hospital to focus on units that have received Foundation funding.

#### **Professional development**

The Foundation is committed to providing ongoing development opportunities for all employees to ensure a skilled and engaged workforce. A learning and development framework has been implemented based largely upon on-the-job training, combined with mentoring and formal training. In addition, all staff are provided access to professional development opportunities. In 2020-2021, three staff attended the virtual FIA Conference and undertook the FIA Certificate in Fundraising. The Philanthropy Officer took the opportunity to participate in a mentoring program through FIA. All fundraising staff attended the FIA Superbolt event and took opportunities to watch webinars and online professional development sessions during COVID-19.

#### Flexible work arrangements

The Foundation 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 and working remotely in particular circumstances. A staff survey was conducted to better understand our response to COVID-19 and support offered to staff. The results were largely positive and management revisited the Foundation's work from home arrangements as well as shape communications through weekly team meetings and communications.

## Industrial and employment relations framework

The Foundation employs staff under the *Fair Work Act 2009*. Employee relations issues are managed promptly and in accordance with the legislation and internal policies and procedures. The Foundation regularly reviews its Human Resource 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 and retrenchment

During the period, there were no redundancy, early retirement or retrenchment packages paid.

**GOLD COAST HOSPITAL FOUNDATION** 

<sup>&</sup>lt;sup>1</sup> MOHRI FTE data for fortnight ending 23 June 2021

## Public sector ethics and values

The Foundation is committed to, and puts in practice, the Code of Conduct outlined for the Queensland public service agencies. The Foundation aligns with and supports the values and principles of this code and all Foundation staff members are obligated to comply with the code. The Foundation's own Code of Conduct delivers trust, accountability, and commitment to the community.

The Foundation implements an induction program for all employees who accept their responsibilities to embrace and practice the Code of Conduct on completion of the induction.

The Foundation aligns with the Queensland Public Service Values, being:

#### **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

## **Human Rights**

The Foundation actively supports *Human Rights Act 2019* by ensuring that all policies and procedures are in accordance with relevant rights, including workplace health and safety, discrimination, harassment and bullying.

We undertook several actions to ensure compliance with the objects of the act including;

- Annual review of all relevant policies and procedures
- Monthly review of our workplace health and safety systems
- · Quarterly review of all relevant risk and mitigation strategies
- Delivery of Employee Assistance Program
- Adherence to Human Rights Act 2019 in all recruitment and contractor engagements

We are committed to ensuring that all people of all ages, genders and cultural backgrounds have equal opportunity for recruitment, promotion, remuneration and responsibilities.

No recorded *Human Rights Act 2019* complaints were received during the 2020-2021 period.

# Risk management and accountability

The Board, through the Finance, Audit and Risk Committee, monitors and addresses the key risks for the Foundation. 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. The Foundation's risk management philosophy is to identify, assess and control those risks that may prevent the Foundation from achieving its strategic objectives. The Foundation's risk management system incorporates a business continuity plan, compliance certificate and risk register.

#### Finance, Audit and Risk Committee

The Finance, Audit and Risk Committee is led by the Foundation Treasurer.

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

- Risk, control and compliance frameworks
- Effectiveness of audit and compliance with laws, regulations and internal policies
- External accountability responsibilities as prescribed in the Financial Accountability Act 2009, Auditor-General Act 2009, Financial Accountability Regulation 2019 and Financial and Performance Management Standard 2019.

#### **Members**

Samantha Wakerley (Chair and Treasurer), Timothy Elliott, Jeffrey Frazer, Ben Cox (Chief Executive Officer)

The Finance, Audit and Risk Committee, met on the following dates in the reporting period:

- 17 July 2020
- 18 September 2020
- 13 November 2020
- 16 February 2021
- 13 April 2021
- 22 June 2021

The committee has observed the terms of the charter and has due regard to the Queensland Treasury's *Audit Committee Guidelines*.

#### Internal audit

This has not been carried out due to the Foundation's operations and team being small, and the risks deemed too small to warrant this activity. The Finance, Audit and Risk Committee reduce and monitor the risks for the Foundation.

#### **External audit**

An external audit was conducted by a designate of the Queensland Audit Office. An unmodified audit opinion was issued on the 2020-2021 financial statements.

# Information systems and recordkeeping

The Foundation information systems effectively and efficiently record data, procedures and practices, they also drive marketing and communications activity to execute campaigns. These systems include our CRM database Salesforce, Xero accounting software, Smarty Grants, MailChimp, Raisely and Autopilot.

These information systems help the Foundation to:

- Improve accuracy of information made accessible to all team members.
- Improve efficiencies in operations, processes, reporting, donor management and data integrity.
- Record all interactions with donors, supporters and prospects such as phone calls, emails, direct mail and more.
- Provide scope for future growth operationally and financially.

The following activities contribute to achieving the Foundation's fundraising goals:

- The IT system progressed to a full cloud based digital operation.
- Implemented a multi-layered security data protection and use of dual backup sources.

The Foundation's Development and Operations Manager is responsible for operating and troubleshooting information systems and technologies so that Foundation staff members have access to the information needed to support the Foundation's activities.

The Development and Operations Manager ensures:

- Reliable access to the Foundation's major information systems.
- Guidance in identifying and resolving information and technology implications of changes in the Foundation's functions to match industry standards.
- Guidance in developing and implementing information management and information and communications technology strategies and policies.
- SOMA IT is an external company contracted to provide information technology support and expertise, including monitoring of security and back-up processes.
- Deliver systems that best align the Foundation's operational strategy with scope for growth.
- Monitor costs to operate systems and identify opportunities that represent best value and product quality for the Foundation.

#### Record-keeping

The Foundation's record-keeping practices comply with the *Public Records Act 2002*, Information Standard 40: Record keeping and Information Standard 31: Retention and Disposal of Public Records.

A Record-keeping Policy is endorsed by the Board and fully implemented. Adherence to this policy in business activities and record-keeping is implemented through record-keeping procedures. The record-keeping policy applies to all digital and paper records.

The Foundation communicates roles and responsibilities for records management across the organisation via position descriptions, performance reviews, training and awareness activities. Reliability and security of the Foundation's record-keeping systems is implemented via a number of mechanisms including installed firewall software, monthly information technology security reports from SOMA IT, secure paper storage and secure destruction bins.

# Financial performance summary

# Income performance 2020-2021

The Foundation generated \$3,976,726 in total revenue for the 2020-2021 financial year. Whilst the Foundation continued to support the community during the reporting period, total revenue was 162 per cent above the 2019-2020 total revenue of \$1,515,184.

The 2020-2021 result reflected a growth in community fundraising, major gifts and bequests with one large gift from the Estate of Siao significantly increasing the results.

The Foundation utilised \$810,337 in 2020-2021 to fund our projects, services and grants.

Financial year	2019-2020	2020-2021	%
Total revenue	1,515,184	3,976,726	(162)
Funds disbursed	882,861	810,337	(-9)

#### Income channels

Excluding bequests, the majority of our funds came from Community Fundraising, Corporate Fundraising and Individual Giving.

Grants, Trusts and Foundations, Major Gifts and Commercial Revenue also performed well.

#### Mission delivery investment 2020-2021

The total amount disbursed to deliver the Foundation's mission through Equipment and Facility Grants, Programs, Education, Research and Services was \$810,337.

Despite the impact of COVID-19 during the reporting period, the Foundation was able to maintain services for family and other support programs to ensure these vital activities continued.

Financial year	2020-2021	% of disbursement
Education	19,941	2.5
Equipment/Facilities	470,705	58
Programs and Services	319,691	39.5
Total disbursed	\$810,337	

## Open data

Information about consultancies, overseas travel and the Queensland language services policy is available at the Queensland Government's Open Data website (qld.gov.au/data). There was no overseas travel and Queensland Languages Services Policy expenditure for 2020-2021.

# **Appendices**

# Appendix 1 – glossary and compliance checklist

# **Glossary**

CRM – Customer Relationship Management
FIA – Fundraising Institute Australia
Foundation – Gold Coast Hospital Foundation
GCHHB - Gold Coast Hospital and Health
Board
GCHHS – Gold Coast Hospital and Health Service

ICU – Intensive Care Unit
 KPI – Key Performance Indicators
 QLD - Queensland
 SERTA - Study, Education, Research Trust
 Account

# **Compliance checklist**

**GST** - Goods and Services Tax

Summary of requ	uirement	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
Accessibility	Table of contents Glossary	ARRs – section 9.1	3 Appendix 1
	Public availability	ARRs – section 9.2	2
	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
General information	Introductory Information	ARRs – section 10	8
Non-financial performance	Government's objectives for the community and whole-of-government plans/specific initiatives	ARRs – section 11.1	12
	Agency objectives and performance indicators	ARRs – section 11.2	12-15
	Agency service areas and service standards	ARRs – section 11.3	10-11
Financial performance	Summary of financial performance	ARRs – section 12.1	24
Governance – management and	Organisational structure	ARRs – section 13.1	19
structure	Executive management	ARRs – section 13.2	19
	Government bodies (statutory bodies and other entities)	ARRs – section 13.3	16-18
	Public Sector Ethics	Public Sector Ethics Act 1994 ARRs – section 13.4	21

Summary of requ	uirement	Basis for requirement	Annual report reference
	Human Rights	Human Rights Act 2019 ARRs – section 13.5	21
	Queensland public service values	ARRs – section 13.6	21
Governance – risk management	Risk management	ARRs – section 14.1	22
and accountability	Audit committee	ARRs – section 14.2	22
uooountubiity	Internal audit	ARRs – section 14.3	22
	External scrutiny	ARRs – section 14.4	22
	Information systems and recordkeeping	ARRs – section 14.5	23
	Information Security attestation	ARRs – section 14.6	NA
Governance –	Strategic workforce planning and performance	ARRs – section 15.1	20-21
resources	Early retirement, redundancy and retrenchment	Directive No.04/18 Early Retirement, Redundancy and Retrenchment	20
		ARRs – section 15.2	
Open Data	Statement advising publication of information	ARRs – section 16	24
	Consultancies	ARRs – section 33.1	https://data.qld.gov.au
	Overseas travel	ARRs – section 33.2	24
	Queensland Language Services Policy	ARRs – section 33.3	24
Financial statements	Certification of financial statements	FAA – section 62 FPMS – sections 38, 39 and 46 ARRs – section 17.1	Appendix 2
	Independent Auditor's Report	FAA – section 62 FPMS – section 46 ARRs – section 17.2	Appendix 2

FAA Financial Accountability Act 2009

FPMS Financial and Performance Management Standard 2019

ARRs Annual report requirements for Queensland Government agencies

# Appendix 2 – financial statements 2020-2021

# Within this section:

Treasurer's report	28
Annual financial statements and independent auditor's report	29

# **Appendix 2 - Treasurer's report**

#### **Results from operations**

The Foundation's operating results allowed us to distribute **\$587,163** in grants during the year compared to **\$611,378** for the previous year.

#### Revenue

Total revenue for the year of \$3,976,726 compared with \$1,515,184 for the previous year.

## Operating expenditure

The Foundation separates the costs of operations into four categories:

- 1. Cost directly associated with 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 **\$156,766** compared with **\$170,972** for the previous year.

Employment Expenses for the current year amounted to \$789,764 compared with \$770,668 for the previous year.

## Disbursements, grants and donations

During the year an amount of **\$810,337** 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 **\$882,861** in the previous year.

#### **Balance sheet**

The Foundation continues to maintain a strong Balance Sheet.

As of balance date Cash and Cash Reserves were \$4,850,221 increased from \$2,844,621 at the end of the previous year.

Trade and Other Payables amounting to **\$271,745** 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 prepares detailed financial information to present to each meeting of the Finance, Audit and Risk Committee. The Treasurer's Report presented to each meeting of the Finance, Audit and Risk 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, Audit and Risk Committee a summary is presented to each subsequent Board meeting for approval.

#### Financial stability

The Foundation 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.

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

#### Jeffrey Frazer

Deputy Chair - Gold Coast Hospital Foundation

# **Appendix 2 - Financial statements**

## GOLD COAST HOSPITAL FOUNDATION ABN 95 387 912 125

#### FINANCIAL REPORT

#### FOR THE YEAR ENDED 30 JUNE 2021

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Statement of Cash Flows	5
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# STATEMENT OF COMPREHENSIVE INCOME GOLD COAST HOSPITAL FOUNDATION FOR THE YEAR ENDED 30 JUNE 2021

	Notes	2021	2020
Income from Continuing Operations		\$	\$
User charges and fees	2	171,279	117,080
Grants and other contributions	3	3,501,042	1,276,993
Interest		9,982	47,385
Other revenue		294,423	73,726
Total Income from Continuing Operations		3,976,726	1,515,184
Expenses from Continuing Operations			
Employee expenses	4	789,764	770,668
Supplies and services	5	501,913	559,065
Grants and subsidies	6	587,163	611,378
Depreciation	9	33,876	29,245
Other expenses		-	6,273
Total Expenses from Continuing Operations		1,912,716	1,976,629
Operating result from Continuous Operations		2,064,010	(461,445)
Other Comprehensive Income			
Total Comprehensive Income		2,064,010	-461,445

# BALANCE SHEET GOLD COAST HOSPITAL FOUNDATION As at 30 June 2021

	Notes	30 Jun 2021 \$	30 Jun 2020 \$
Assets			
Current Assets			
Cash and cash equivalents	7	4,850,221	2,844,621
Receivables	8	38,871	24,867
Inventory		5,323	5,971
Other current assets		12,424	1,469
Total Current Assets		4,906,839	2,876,929
Non-Current Assets			
Plant and equipment	9	61,367	65,541
Total Non-Current Assets		61,367	65,541
Total Assets		4,968,206	2,942,471
Liabilities			
Current Liabilities			
Payables	10	271,745	308,900
Accrued employee benefits	11	49,726	53,205
Total Current Liabilities		321,471	362,105
Total Liabilities	_	321,471	362,105
Net Assets		4,646,735	2,580,366
Equity			
Accumulated Surplus		4,646,735	2,580,366
Total Equity		4,646,735	2,580,366
• •		· ·	

# STATEMENT OF CHANGES IN EQUITY

#### **GOLD COAST HOSPITAL FOUNDATION**

#### FOR THE YEAR ENDED 30 JUNE 2021

	Notes	Accumulated Surplus \$
Balance as at 1 July 2019		3,041,812
Operating result from continuing operations		(461,445)
Balance as at 30 June 2020		2,580,367
Balance as at 1 July 2020		2,580,367
Prior year accounting error		2,358
Adjusted balance as at 1 July 2020		2,582,725
Operating result from continuing operations		2,064,010
Balance as at 30 June 2021		4,646,735

#### STATEMENT OF CASH FLOWS GOLD COAST HOSPITAL FOUNDATION FOR THE YEAR ENDED 30 JUNE 2021

		2021	2020
	Note	\$	\$
Cash Flows from Operating Activities:			
Inflows:			
User charges and fees		157,663	139,285
Grants and the other contributions		3,422,397	1,272,182
Interest received		9,982	47,385
GST input tax from ATO		1,441	1,215
Receipts from other income		294,423	73,726
		3,885,906	1,533,793
Outflows:			
Employee expenses		(794,423)	(743,092)
Supplier and services		(498,378)	(315,170)
Grants and subsidies		(587,163)	(611,379)
Other expenses		-	(6,273)
2.000		(1,879,964)	(1,675,914)
Net Cash (Utilised)/Provided by Operating Activities		2,005,943	(142,121)
Cash Flows from Investing Activities:			
Less Payments for Plant and Equipment		(343)	(1,121)
Net cash flows from investing activities		(343)	(1,121)
Net increase/decrease in cash held		2,005,600	- 143,242
Cash at the beginning of the financial year	7	2,844,621	2,987,863
Cash at the end of the financial year	7	4,850,221	2,844,621

#### **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 not-for-profit and a Statutory Body established under the Hospitals Foundations Act 2018. 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 entity.

#### b) Authorisation of financial statements for issue

The financial statements are authorised for issue by the Chief Executive Officer and Chair of the Board 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 2019, and the Australian Charities and Not-for-Profits Commission Act 2012 and Regulation 2013. 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.

#### Comparatives

Comparative information reflects the audited 2019-2020 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

The most significant estimates and assumptions made in the preparation of the financial statements related to employee benefits and depreciation. Refer to note 11 and 9 for further details.

#### h) New and revised accounting standards

No new accounting standards have been adopted by the Foundation for the first time in 2020-2021.

**NOTE 2 - USER CHARGES AND FEES** 

	2021	2020
	\$	\$
Vending machine	56,601	54,574
Commercial Income	13,339	-
Course bookings	30,605	26,420
Other revenue	70,734	36,086
(Other revenue includes tickets from Gala Event		
held on 4/12/2020)		
Total	171,279	117,080

#### **Accounting Policy**

Revenue from User Fees and Charges is recognised on delivery of programs or sale of goods and services..

**NOTE 3 - GRANTS AND OTHER CONTRIBUTIONS** 

Total	3,501,042	1,276,993
Grants received	166,365	170,981
Donations - cash	3,334,677	1,106,012
	\$	\$
	2021	2020

#### **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 4 - EMPLOYEE EXPENSES**

Employee Benefits	2021	2020
	\$	\$
Wages and salaries	646,415	622,660
Annual leave expense	72,679	69,588
Employer superannuation contributions	60,425	58,588
	779,519	750,836
Employee Related Benefits		
Other employee related expense	6,214	15,501
Worker's compensation premium	4,031	4,331
	10,245	19,832
Total	789,764	770,668
Number of Employees	9.83	9.4

The number of employees as at 30 June, including both full-time 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.

**NOTE 5 - SUPPLIES AND SERVICES** 

	2021	2020
	\$	\$
Events and fundraising	181,487	170,972
Patient transport expenses	197,560	221,994
Emergency accommodation expenses	25,614	49,489
Other expenses	32,864	24,373
Fees and charges	36,341	28,069
Accommodation expenses	13,114	13,274
Merchandise	2,571	393
Education expenses	12,362	17,883
Contractors	-	32,617
Total	501,913	559,064
NOTE 6 – GRANTS AND SUBSIDIES		
	2021	2020
	\$	\$

Donated plant and equipment	426,112	300,524
Medical research	-	150,000
Donations - cash	141,110	150,433
Medical scholarships	19,941	10,422
Total	587,163	611,379
NOTE 7 – CASH AND EQUIVALENTS	2021 \$	2020 \$
Cash on hand	350	350
Cash at bank	2,732,984	427,384
Term deposit	2,116,887	2,416,887
Total	4,850,221	2,844,621

# **Accounting Policy**

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

**NOTE 8 – RECEIVABLES** 

	2021	2020
	\$	\$
GST input tax credit receivable	22,285	25,109
Less GST payable		2,884
	22,285	22,225
Interest revenue accrued	-	-
Fundraising receivable	14,370	627
Prepayment	2,216	2,015
Total	38,871	24,867

# **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.

#### **NOTE 9 – PLANT AND EQUIPMENT**

Plant and equipment	2021	2020
	\$	\$
Gross	34,496	36,039
Less accumulated depreciation	(31,061)	(32,578)
Total Plant and Equipment	3,435	3,461
Motor Vehicles – at cost	2021 \$	2020 \$
Gross	139,329	112,329
Less accumulated depreciation	(81,397)	(50,249)
Total Motor Vehicles	57,932	62,080
Grand Total	61,367	65,541

## **Reconciliation of carrying amounts**

	Plant & Equipment	Motor Vehicles	Total
Carrying amount as at 1 July 2020	3,461	62,080	65,541
Acquisitions	2,702	27,000	29,702
Depreciation	(2,728)	(31,148)	(33,876)
Carrying amount as at 30 June 2021	3,435	57,932	61,367

#### **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 assets acquired at no cost of for nominal consideration are recognised fair value at the date of acquisition in accordance with AASB116, Plant and Equipment in getting the assets ready for use, however, any training costs are expensed as incurred.

#### 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.) are 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. 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.

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.

Plant and Equipment

For each class of depreciable asset the following depreciation rates are used: 10 - 33%

Motor Vehicles

20%-25%

#### **NOTE 10 - PAYABLES**

Current – unsecured liabilities	2021	2020
	\$	\$
Accounts payable	244,180	163,021
Accrued expenses	3,066	107,988
Superannuation	16,555	17,735
PAYG withholding payable	7,944	8,248
Paid Parental Leave - Centrelink	-	11,908
Total	271,745	308,900

# **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**

Current	2021	2020
	\$	\$
Provision for annual leave	49,726	53,205
Total	49.726	53.205

## Accounting Policy - Refer to Note 4

# **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 AASB9 as follows:

	Note	2021	2020
		\$	\$
Financial Assets			
Cash and cash equivalents	7	4,850,221	2,844,621
Receivables at amortised cost	8	38,871	24,867
Total		4,889,092	2,869,489
Financial Liabilities			
Financial liabilities at amortised cost			
Payables at amortised cost	10	271,745	308,900
Total		271,745	308,900

#### 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 activities of the Foundation during 2020 – 2021 and 2019-2020. 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. Remuneration expenses for these key management personnel comprises the following components which include:

<u>Short term employee expenses</u> - 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;

<u>Long term employee expenses</u> - 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;

<u>Post-employment expenses</u> - 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.

Remuneration Expenses 2020 - 2021

	Short Term Em	ployee Expenses	Long Term Employee Expenses	Post-Employee Expenses	Total Expenses
Position	Monetary Expenses \$	Non-Monetary Benefits \$	\$	\$	\$
Chief Executive Officer (from 1 July 2020 to 30 June 2021)	142,860	-	-	13,327	156,187

Remuneration Expenses 2019 - 2020

Chief Executive Officer (from 1 to 28 July 2019)	10,453		993	11,446
Chief Executive Officer (from 29 July 2019)	134,574		12,685	147,259

#### **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**

Gold Coast Hospital Foundation provides donated plant and equipment and funds for services and research to the Gold Coast Hospital and Health Service in accordance with the objectives identified in the Hospital Foundations Act 2018 (QLD). The net cost of the arrangement to the Foundation in 2021 was \$522,628 (2020 was \$560,612.72). The Foundation also leases space in the foyer of the Gold Coast University Hospital for \$1.

#### **NOTE 15 – CONTINGENCIES**

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

#### NOTE 16 - 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.

## **NOTE 17 – AGENCY TRANSACTIONS**

The Foundation administer P.A.R.T.Y. program arrangements for Gold Coast Hospital and Health Service (GCHHS). As the Foundation acts only in an agency role in respect of the transactions and balance, they are not recognised in the financial statements. Funding under the arrangement is collected by the Foundation and later distributed to the Gold Coast Hospital and Health Service. There were no transactions in 2021.

P.A.R.T.Y. Program	2021 \$	2020	
		\$	
Receipts	-	35,645	
Payments to GCHHS	-	35,645	

### NOTE 18 - COVID-19 Impact

The impact of COVID-19 on the GCHF continues to affect the consistency of donations. However, the overall impact has not been as significant compared to previous years due to a focus on diversification of revenue sources. The income from the Federal Government Job Keeper Program continued assist in offsetting some impacts of COVID-19 as has the payroll tax concessions.

#### **NOTE 19 – LEASES**

# AASB 16 Leases

The Foundation has a peppercorn lease for accommodation which has been elected to recognise at cost, consistent with prior year accounting. The details of the lease are as below:

The Foundation has entered into a lease agreement with Gold Coast Hospital and Health Services 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 2023.

#### **GOLD COAST HOSPITAL FOUNDATION ABN 95 387 912 125**

## **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.39 of the Financial and Performance Management Standard 2019, the Australian Charities and Not-for-profits Commission Act 2012 and Regulation 2013 and other prescribed requirements. In accordance with s.62(1)(b) of the Act, and s.60.15 of the Australian Charities and Not-for-profits Commission Regulation 2013 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
- b) the financial statements have been drawn up to present a true and fair view, in accordance with prescribed accounting standards, and the Australian Charities and Not-for-profits Commission Act 2012, of the transactions of the Gold Coast Hospital Foundation for the financial year ended 30 June 2021 and of the financial position of the Foundation as at the end of that year; and

We acknowledge responsibility under s.7 and s.11 of the Financial and Performance Management Standard 2019 for the establishment and maintenance, in all material respects, of an appropriate and effective system of internal controls and risk management processes with respect to financial reporting throughout the reporting period

Anna Carroll Chairperson

Dated this 18th day of August 2021

Benjamin Cox

Chief Executive Officer



### INDEPENDENT AUDITOR'S REPORT

To the Board of Gold Coast Hospital Foundation

# Report on the audit of the financial report

# **Opinion**

I have audited the accompanying financial report of Gold Coast Hospital Foundation.

In my opinion, the financial report:

- a) gives a true and fair view of the entity's financial position as at 30 June 2021, and its financial performance and cash flows for the year then ended
- b) complies with the Financial Accountability Act 2009, the Financial and Performance Management Standard 2019, the Australian Charities and Not-for-profits Commission Act 2012, the Australian Charities and Not-for-profits Commission Regulation 2013 and Australian Accounting Standards - Reduced Disclosure Requirements.

The financial report comprises the statement of financial position as at 30 June 2021, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes to the financial statements including summaries of significant accounting policies and other explanatory information, and the management certificate.

# **Basis for opinion**

I conducted my audit in accordance with the *Auditor-General Auditing Standards*, which incorporate the Australian Auditing Standards. My responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of my report.

I am independent of the entity in accordance with the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* and 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 my audit of the financial report in Australia. I have also fulfilled my other ethical responsibilities in accordance with the Code and the *Auditor-General Auditing Standards*.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

## 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 the *Financial Accountability Act 2009*, the Financial and Performance Management Standard 2019, the *Australian Charities and Not-for-profits Commission Act 2012*, the Australian Charities and Not-for-profits Commission Regulation 2013 and Australian Accounting Standards – Reduced Disclosure Requirements, and for such internal control as the Board determines is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

The Board is also responsible for assessing the entity's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless it is intended to abolish the entity or to otherwise cease operations.



# Auditor's responsibilities for the audit of the financial report

My 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 my 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 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 – Reduced Disclosure Requirements, I exercise professional judgement and maintain professional scepticism throughout the audit. I 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 my 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. This is not done for the purpose of
  expressing an opinion on the effectiveness of the entity's internal controls, but allows me to
  express an opinion on compliance with prescribed requirements.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the entity.
- Conclude on the appropriateness of the entity's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the entity's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify my opinion. I base my conclusions on the audit evidence obtained up to the date of my auditor's report. However, future events or conditions may cause the 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.

I 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 I identify during my audit.



# Report on other legal and regulatory requirements

## **Statement**

In accordance with s.40 of the Auditor-General Act 2009, for the year ended 30 June 2021:

- a) I received all the information and explanations I required.
- b) I consider that, the prescribed requirements in relation to the establishment and keeping of accounts were complied with in all material respects.

# Prescribed requirements scope

The prescribed requirements for the establishment and keeping of accounts are contained in the *Financial Accountability Act 2009*, any other Act, and the Financial and Performance Management Standard 2019. The applicable requirements include those for keeping financial records that correctly record and explain the entity's transactions and account balances to enable the preparation of a true and fair financial report.

24 August 2021

C G Strickland as delegate of the Auditor-General

C. a. Stricked

Queensland Audit Office Brisbane