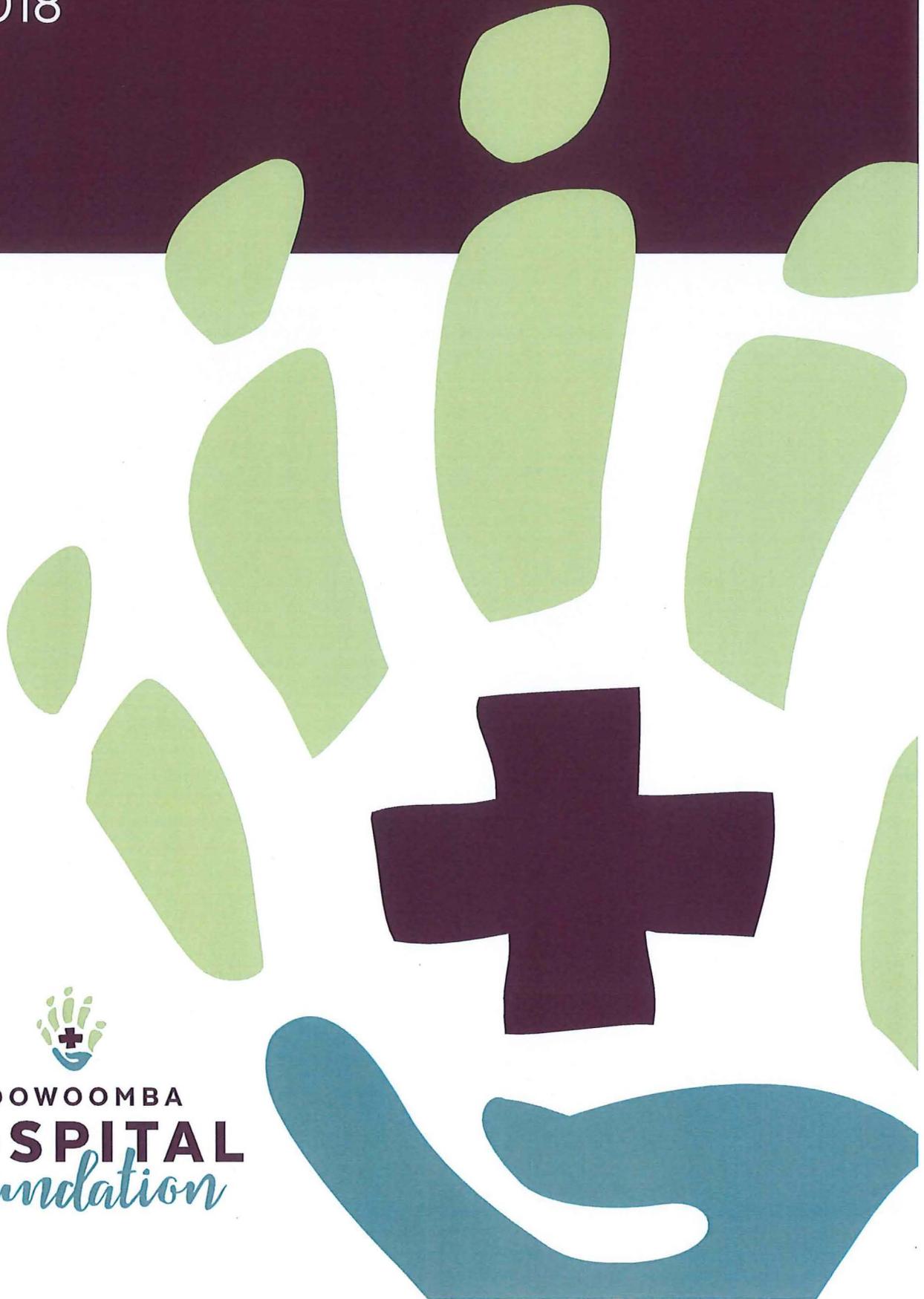


ANNUAL REPORT

2018



TOOWOOMBA
HOSPITAL
foundation

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Public Availability

An online version of this report is available on our website
www.toowoombahospitalfoundation.org.au/annual-reports.

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Content from this annual report should be attributed as: The State of Queensland Toowoomba Hospital Foundation Annual Report 2017-2018.

17 December 2018

The Hon Steven Miles MP
Minister for Health
Minister for Ambulance Services
C/- Office of Health Statutory Agencies
GPO Box 48
BRISBANE QLD 4000

Dear Minister

I am pleased to submit for presentation to the Parliament the Annual Report 2017-2018 and financial statements for the Toowoomba 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 at pages 22-23 of this annual report.

Yours sincerely



Raymond F. Taylor
Chairman
TOOWOOMBA HOSPITAL FOUNDATION

Chairman's Report

It is with a great deal of pride and pleasure that I present the Chairman's report for the 2017-18 financial year. The Toowoomba Hospital Foundation continues to grow and retain outstanding credibility in the local community which equates to valuable support for our hospitals and health service within the region.

The Foundation is committed to making a difference in the lives of Darling Downs Hospital and Health Service staff, patients and their families. We are incredibly fortunate to work with many generous organisations, community groups and individuals who assist us to achieve this goal. In total this financial year, the Foundation contributed \$1,788,951 in vital equipment, staff development, scholarships and medical research to the Toowoomba Hospital, Baillie Henderson Hospital, Mt Lofty Heights Nursing Home and local health services. This valuable support could not be achieved without a solid business base, and our excellent fundraising program along with the generosity of our donors, sponsors, supporters and volunteers.

The Toowoomba Hospital Foundation has always lived by the saying "*we'll get by with a little help from our mates*", and it is definitely true that we have many very supportive mates. A special heartfelt thank you to all the businesses, corporate sector, community groups, service clubs and individuals that embrace the work of the Foundation. It is through your generosity that we are able to achieve our goals and make a real difference in the healthcare of Toowoomba and surrounding areas.

The generosity of the supporters of the Foundation is greatly appreciated. A very warm thank you to our generous "*mates*" from the Pure Land Learning College who provide a significant donation annually. These funds are awarded to researchers who aspire to undertake innovative medical research relevant to our local hospitals and health service. Many thanks also to the Chairman and Members of the Research and Ethics Committee who oversee the applications for this research, and make prudent decisions on awarding funding to the worthy recipients.

Working closely with Mr Mike Horan OAM, Chair of the Hospital and Health Board and Dr Peter Gillies, Chief Executive of the Darling Downs Hospital and Health Service ensures that the Foundation continues to support the needs and the vision of the Hospital and Health Service.

To be afforded the honour of leading the Foundation has always been very humbling and a great privilege, however I could not perform in this role if it wasn't for the support I receive from my fellow board members. All members give generously of their time and play an integral part in ensuring the Foundation maintains a reputation of transparency, accountability and innovation. I thank each and every one of you, your loyalty as a voluntary group speaks volumes of the spirit that exists to ensure that the community is well served.

The success of any organisation can only be gauged by the quality and the efforts of its staff. The continued performance and achievements of our Foundation are testament to the manner in which our staff carry out the wishes of the board and hospital community. I am very proud of the work ethic and dedication of this wonderful team led by Alison, thank you all so much.

In closing, to all who have contributed to our work at the Foundation, thank you for sharing our vision of connecting with our community to assist our local hospitals, I am proud to have been a part of our ongoing success.

Raymond F. Taylor | CHAIRMAN

Chief Executive Officer's Report

As I reflect on what has been an incredible 12 months we've had at the Toowoomba Hospital Foundation I'm reminded of the wonderful support and generosity we receive from across the community both big and small.

This financial year was a huge testament to the shared passion of our staff, Board and donors with over \$1 million of fundraising and donations reached in 2017-18. Not only is this a tremendous effort but it highlights the vital role our local health service plays throughout the region.

With the support of the community 2017-18 also marks a record year for grants and donations of equipment gifted by the Toowoomba Hospital Foundation back into the Darling Downs Hospital and Health Service with over \$1.78 million invested — our highest amount to date. (*see footnote on page 5)

The Toowoomba Hospital's Theatre Seven operating theatre project which we were honoured to have been able to contribute \$500,000 towards construction has enabled an increase of 15 percent more surgeries per month and we are delighted to have been able to support such an important project.

In what was a mammoth accomplishment from everyone involved, 2017 saw the Foundation host not one but two Women of Strength functions. Our luncheon with the inspiring Ita Buttrose raised \$29,665 for the Toowoomba Hospital Midwifery Department and our Magda at the Mills event with the ever-charming Magda Szubanski raised \$35,000 to support the Mt Lofty Heights Nursing Home.

The fantastic support from donors and community groups never cease to amaze us and this year their altruism has given staff many wonderful moments and allowed them to continue their exceptional care of patients.

Moments like the introduction of three robotic seals to the Toowoomba Hospital thanks to the \$32,000 donated from the Lions Club of Toowoomba West's Toowoomba Christmas Wonderland. These seals are already doing their part in helping patients with dementia.

Our littlest of hospital patients have also experienced the generosity of our donors and community. Each year the Woolworths wall tokens fundraiser raises much-needed funds for our local health service. And this year shoppers helped raise \$51,500 towards the purchase of a digital interactive play system called Play9. This play system is now a highlight of the Paediatric Unit and the Emergency Department waiting room.

The Play9 is bringing joy and entertainment to sick kids visiting the Toowoomba Hospital and now thanks to the Lions Club of Westbrook's donation of a cutting-edge procedural puppet who goes by the name of Dylan, children are also getting the comfort they need during the times they need it the most.

This year we had the goal of providing four new vital paediatric monitoring machines and because of Harvey Norman's support their annual birthday sale has helped raise \$15,000 towards seeing this goal turn into reality.

September 2017 also introduced a first in the Toowoomba Hospital Foundation's 26-year history. The Foundation together with the Darling Downs Hospital and Health Service entered a float into the Toowoomba Carnival of Flowers Grand Parade for the very first time.

Most importantly none of this would have been possible without a little help from our “mates” and last year we helped one of our long-standing supporters celebrate their 10th anniversary. Murphy’s Creek annual Fossil Downs Bush Rodeo has raised a total of \$26,990 since 2008 which the Foundation has channelled back into the Hospital’s renal and oncology units.

All this incredible work can only be made possible through the generous support of the caring people, army of volunteers and corporate and community partners who continue their commitment to the vision, mission and passion of the Toowoomba Hospital Foundation. So, to you I offer my sincerest thanks.

Thank you also to the unwavering dedication of the wonderful Toowoomba Hospital Foundation team who stand steadfast behind what we do every single day.

The Toowoomba Hospital Foundation is truly making a difference in the lives of those who come to the Toowoomba Hospital, Baillie Henderson and Mt Lofty Heights Nursing Home, both staff and patients. I look forward to another incredible year and sharing in the successes of our community and staff who continue to contribute to the Foundation.

Alison Kennedy | CHIEF EXECUTIVE OFFICER

Footnote: *\$1,788,951 - This is the amount of grants/funding approved by the Foundation Board in the 2017-18 financial year, the amount expended as at the 30th June 2018 was \$934,540, leaving an outstanding grant commitment as per note 19 of the Financial Statements.

The Role and Main Functions of the Toowoomba Hospital Foundation

The Toowoomba Hospital Foundation is a non-profit, charitable organisation that provides fundraising support to the Toowoomba Hospital, Baillie Henderson Hospital and Mt Lofty Heights Nursing Home and promotes healthy lifestyle initiatives in our community.

The Toowoomba Hospital Foundation (THF) is a statutory body incorporated under the *Hospitals Foundations Act 1982*. Originally formed as the Toowoomba Health Services Foundation in June 1991, a name change under the provisions of the Act saw the emergence of the Darling Downs Health Services Foundation in April 1992 and then a further name change to Toowoomba Hospital Foundation in October 1996.

We are committed to achieving excellence in what we do as one of the most recognised and supported charities in the Toowoomba and Darling Downs region, where trust and respect is valued and to inform, consult and engage with our community and key stakeholders in a transparent, ethical and responsive way. We value our donors, our sponsors and our reputation.

Our vision:

Connecting with our community to assist our local hospitals.

Our 5-year priorities:

- Ensure that hospital patients and their families have access to convenient accommodation and parking facilities;
- Grow partnerships with corporate sponsors, other charities and businesses related to our core work to be major contributors to our funds portfolio;
- Ensure that all people in our community wishing to make a bequest are aware of the Foundation as an option and find making a bequest easy; and
- Raise and distribute funds across a broader scope of community and hospital needs in order to maintain our sustainability and grow the THF brand.

Our values:

- **Energy** - We are active, enthusiastic and accountable. We make things happen and take pride in our contribution to the community.
- **Collaboration** - We connect with our community, our sponsors, donors and partners to respond to the needs of our hospitals.
- **Empathy** - We are compassionate and we inspire compassion in others through the stories of the people in our community and the accomplishments of our hospitals.

The THF office is situated at 41 Joyce Street, Toowoomba which backs on to the Toowoomba Hospital campus.

Our Operating Environment

As a statutory body the Toowoomba Hospital Foundation (THF) is subject to the provisions of the *Financial Accountability Act 2009* and subordinate legislation. In accordance with section 30A of the *Auditor General Act 2009* the THF has been approved for exemption from audit by the Queensland Audit Office for years ending June 2016 – 2018. The THF is audited annually by external auditors, this year our auditors are Horizon Accounting.

The THF is endorsed by the Australian Tax Office as a Deductible Gift Recipient and an Income Tax Exempt Charity under the *Income Tax Assessment Act 1997*. It is also endorsed for GST concessions under a *New Tax System (Goods and Services Tax) Act 1999* and it is exempted under the *Fringe Benefits Tax Assessment Act 1986*.

The THF has engaged its stakeholders and the local community about the importance of supporting local hospitals and health services of the region through a number of specific fundraising events. Children's Health Services at the Toowoomba Hospital have once again been well looked after through the Triple MMM Give Me 5 For Kids Appeal and the Toowoomba Hospital Children's Appeal (THCA). The THF supports the Fossil Downs Bush Rodeo who celebrated their 10th anniversary this year and from this event they make a sizable donation to the us to support the Toowoomba Hospital oncology and renal units. The THF continues to be involved with a number of charity golf days including "Firies", Oil Patch Carnival, Leon Treadwell Memorial Day, Concept Tiles Golf Day and S & T Glass & Toowoomba Fasteners Golf Day and more and funds raised at these days are dedicated to a variety of units at the Toowoomba Hospital. Fitzys' Colour of Change Luncheon raised money and support for BreastScreen Queensland Toowoomba Service and Fitzys' Feasts continue to raise money for Men Health.

The funding we disperse is mainly provided from the profits of the business base of the Foundation, however the THF fundraising events also contribute significantly for equipment and facility enhancement, staff development, scholarships, health and medical research and special grants and awards provided to the Toowoomba Hospital, Baillie Henderson Hospital and Mt Lofty Heights Nursing Home. In 2017-18, the total amount contributed through these initiatives amounted to \$1,788,951. The Foundation is grateful to the local community for helping us reach this total. Since inception the THF has contributed close to \$11 million into our hospitals and health service. The THF is grateful to all our generous sponsors, donors, volunteers and the local community who make these events possible and help us reach this total, we could not do it without you.

This year the THF has continued to direct much energy and focus into increasing our social media presence which allows us to communicate our achievements, events and activities quickly, effectively and in real time with our donors, sponsors, supporters and the wider public. This has increased the transparency in which we operate, and also provided the community with a greater understanding of and empathy for, the work that we do.

The THF is grateful and proud to be a beneficiary of the Pure Land Learning College who have again donated \$120,000 to fund health and medical research grants. This is vital for our local medical researchers to help pave the way for innovation that serves to create a more efficient and productive health service.

The THF Board of Directors has continued to focus on the Foundation's contribution to the DDHHS as a key driver in its decision making process, keeping in mind that we have a duty to ensure that all money donated to and raised by the Foundation is managed and spent on initiatives that achieve the maximum public benefit. An application process for equipment and facility enhancement, staff development, scholarships and medical research, along with

consultation with Health Service Executives sets the guidelines Board Directors use to make these judgements at monthly Board Meetings.

The THF has continued to work with the Darling Downs Hospital and Health Service (DDHHS) through the Wellness Program which promotes healthy living to staff and the wider community. The Foundation manages the vending machines situated at local health facilities and these machines are constantly being reviewed to ensure healthier options are available. The Coffee Shop at the Toowoomba Hospital is also part of the Foundation's business base and since the inception of the Wellness Program a variety of healthy options have been introduced to their menu.

There have been no machinery of government changes in Queensland to affect the Foundation's operating environment.

Support for the Queensland Government's Community Objectives

The Queensland Government's plan is to advance Queensland – both now and into the future.

- Create jobs in a strong economy;
- Give all our children a great start;
- Keep Queenslanders healthy;
- Keep communities safe;
- Protect the Great Barrier Reef: and
- Be a responsive government.

These objectives emphasise Queensland Government's core values in committing to taking care of all Queenslanders – particularly those who are the most vulnerable and disadvantaged, or those doing it especially tough – regardless of where they live. The government will regularly report its achievements against the Our Future State: Advancing Queensland Priorities. A performance dashboard will be published online at www.ourfuture.qld.gov.au.

The Toowoomba Hospital Foundation supports the Government's community objectives and contributes as much as possible by :

- Undertaking fundraising activities that are reflective of our local economy and appropriate for our diverse community enabling us to provide funding now and into the future for the public health facilities we serve;
- Working with our public health facilities to promote and raise awareness in our local community of the importance of adopting healthy behaviours and lifestyles to reduce the risk factors for chronic disease;
- Building our capability to deliver services and funding now and into the future;
- Raising awareness and engaging in protecting our environment by reducing waste, reducing the amount of water we use, conserving energy, using recycled products and materials;
- Helping our local community understand the work of our public health service to help create a caring local community; and
- Maintaining accountability and financial sustainability.

Support for Queensland Health's Strategic Objectives

Queensland Health's purpose is to provide leadership and direction, and to work collaboratively to enable the health system to deliver quality services that are safe and responsive for Queenslanders.

The Toowoomba Hospital Foundation supports Queensland Health's Values of Putting customers first, Putting ideas into action, Unleashing potential, Being courageous, Empowering people and the following strategic objectives:

Supporting Queenslanders to be healthier: The THF provides funding for programmes and services across the Darling Downs Hospital and Health Service (DDHHS) that directly help to assist our patients to live a healthier life and we also work with the DDHHS to develop wellness programs to support the staff of the health service. An initiative of the THF has been implemented to address this objective, with the provision of a sunscreen trailer that can be utilised by any local community sporting group when having an event;

Enabling safe, quality services: The THF takes advice from members of the DDHHS executive to ensure that the equipment and services we fund are safe and appropriate;

Equitable health outcomes: The THF funds equipment and services for all of our patients, no matter their background, socio-economic status, etc.

High Performance: The THF is governed by a board of medical and business professionals who ensure the Foundation's activities are of the highest standard. We support and adhere to the DDHHS values of Compassion, Integrity, Dignity, Innovation and Courage;

Dynamic policy leadership: The THF works with the DDHHS executive to ensure that our funding streams are used to support the strategic policy direction of the health service;

Broad engagement with partners: The THF engages with a wide cross section of our community from businesses to service clubs to ensure we have a wide community reach;

Engaged and productive workforce: The THF funds education, training, professional development, scholarships and health and medical research grants for DDHHS staff.

Our Objectives and Performance Indicators

The Toowoomba Hospital Foundation supports the community by raising funds to provide improvements for local health facilities and services. We assist patients and their families by providing the hospital with equipment and resources and we support hospital staff through providing funding for training, education and research projects.

The table below sets out the Foundation's objectives, performance indicators and strategies, as outlined in our 2018-2021 strategic plan (updated 2018), which can be found at:

<http://www.toowoombahospitalfoundation.org.au>.

Objectives	Performance Indicators	Strategies
To create and maintain engaging relationships	The impact of our community engagement activities	Operate effective, sustained partnerships with our hospitals to ensure we attend to their priorities. Provide a broad range of community engagement events every year to increase awareness about the Foundation. Inform, recognise and support our donors. Maximise community exposure through online and social media.
To ensure our income streams are sustained at a level that enables us to achieve our vision	Growth in funds available for distribution to our hospitals	Secure new corporate donors. Implement a bequest program. Work with current and new business partners to grow partnership income. Host events that generate an acceptable financial return.
To operate an efficient, dynamic and sustainable charity	The Foundation is fully compliant and operates to a disciplined budget	Provide staff with access to appropriate professional development. Regularly review all processes, policies and procedures. Apply digital technologies to improve the efficiency and effectiveness of our operations.

Achieving our Objectives: The Toowoomba Hospital Foundation has worked hard this past year to meet our objectives utilising our performance indicators to measure that the strategies that we continue to implement to pursue our vision '*to connect with our community to assist our local hospitals*' through the donation of \$1,788,951 towards healthcare services in this region.

The Foundation has consolidated a number of strong and rewarding relationships with businesses, the community and service groups that recognise the importance of the Foundation's fundraising goals. This year the THF has seen an increase in the amount of new corporate sponsorships for a number of our events which has consolidated our already strong partnerships with the local business community. The increase in profits from events is then reflected by the amount of funding that is available for distribution to our health service facilities.

The THF has continued to direct much energy and focus into increasing our social media presence which allows us to communicate our achievements, events and activities quickly, effectively and in real time with our donors, sponsors, supporters and the wider public. This has increased the transparency in which we operate, and also provided the community with a greater understanding of and empathy for, the work that we do.

The Foundation's ongoing commitment to a Gifts in Wills and Bequest Program has been enhanced by the implementation of a Grateful Patient Program and this has enabled us to reach a wider audience of consumers of the Toowoomba Hospital, Mt Lofty Heights Nursing Home

and Baillie Henderson Hospital. Responses by consumers are collected and actioned according to their wishes allowing us to broaden our reach to our target audience.

The Toowoomba Hospital Foundation has met the minimum financial responsibilities as per the *Financial Accountability Act 2009*. The Foundation has also developed a Financial Management Practice Manual in accordance with Queensland Health's *Financial Performance Management Standard 2009* to ensure the necessary financial systems and processes are undertaken to enable the Foundation to fulfil its role as an independent statutory body. By following these controls the Foundation operates efficiently, effectively and economically.

A budget for the day to day operations and events of the Foundation is compiled for each financial year and this is reviewed by the THF Finance Committee and this is then tabled and approved by Board of Directors at the June monthly board meeting. Monthly financial reports are compiled and then scrutinised by the Board's Finance Committee in the first instance and then tabled at monthly board meetings. This ensures that operation of the Foundation is monitored and budgets are strictly adhered to, any variances are raised and approvals sought.

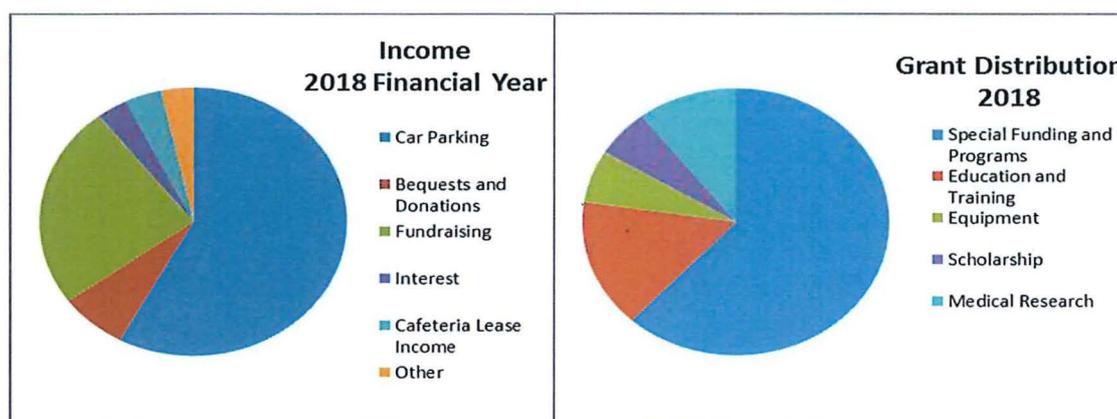
The THF is constantly reviewing policies, processes and procedures to meet compliance with statutory, financial, social and corporate governance requirements. A Financial Procedures Manual contains instructions and processes for all aspects of conforming to the Queensland Health's Financial Performance Management Standard 2009. Relevant THF Staff have access to this Manual which is reviewed annually or from time to time as processes change or new ones require to be implemented.

The day to day operations of the Foundation are contained in an Operations Plan/Manual which ensures that all Staff and Board Directors have access to this information. This Plan/Manual is reviewed yearly by the CEO and is updated and amended as required at this time.

A Policy Manual outlining the various policies for staff to ensure the efficient and effective manner in which we operate meet with the expectations of the organisation is available to all Staff and Board Directors. This Policy Manual is reviewed annually by the CEO and is updated and amended as required at this time.

Summary of Financial Performance

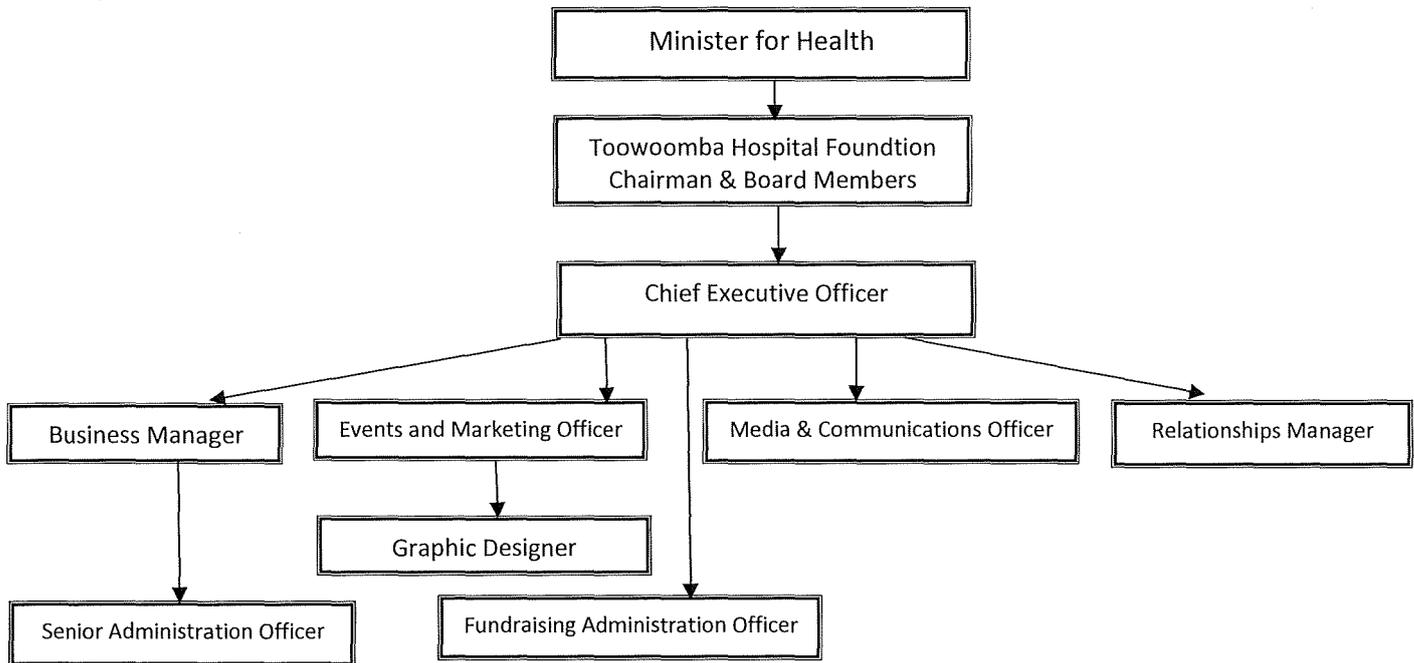
	2018	2017	Commentary
	\$	\$	
Operating Income			
Car Park Revenue	2,017,248	1,763,981	Due to the increase in the demand on the use of our health service we have more consumers accessing the Toowoomba Hospital, therefore an increase has been seen in the use of patients and visitors accessing the carpark.
Less Car Park Expenses	(458,227)	(466,006)	
Net Profit from Car Park	1,559,021	1,297,975	
Other Income	366,550	382,476	Other income was on a par with last year's figures therefore the increase in total operating income reflects the car park revenue increase.
Total Operating Income	1,925,571	1,680,451	
Less Employment expenses	(544,035)	(476,584)	Employment expenses have increased due to extra staff being appointed.
Less Depreciation and impairment expenses	(56,424)	(54,948)	
Less Other Operating Expenses	(190,527)	(160,628)	
Operating Profit	1,134,585	988,291	
Functions, Special Events and Other Fundraising Income	852,863	524,711	Due to the Toowoomba Hospital Foundation being made the charity of choice for the Toowoomba regions there has been a significant increase in our fundraising revenue.
Bequests and Donations	249,778	232,984	
Less Fundraising Expenses	(386,761)	(449,453)	
Profit from Fundraising	715,880	308,242	
Total Profit	1,850,465	1,296,533	
Grant Distribution	(934,540)	(522,596)	The Toowoomba Hospital Foundation has supported the Darling Downs Hospital and Health Service with a record number of applications for funding and grants being dispersed.
Funding - HREC Co-ordinator	(41,029)	(40,164)	
Donations	(360,538)	(452,193)	
Net Profit/(Loss)	514,358	281,580	



Our Organisational Structure

Organisational Structure

The structure of the Toowoomba Hospital Foundation (as at the end of the financial year) is depicted here:



Toowoomba Hospital Foundation Staff

Alison Kennedy	Chief Executive Officer
Anna-Louise Sauverain	Business Manager
Stacey Edwards	Relationships Manager
Erin Kehoe-O'Shea	Events and Marketing Officer
Laura Conroy	Media & Communications Officer
Rosemary Davis	Senior Administration Officer (Part Time)
Libby Coghlan	Fundraising Administration Officer
Sarah Rafferty	Graphic Designer (Part Time)

Executive Management

The Chief Executive Officer (CEO), Alison Kennedy is responsible for the day to day operation and management of the Foundation and the implementation of strategies as outlined in the strategic plan and agreed to by the Board of Directors. The CEO is assisted by a dedicated team of staff including a Business Manager, Relationships Manager, Events and Marketing Officer, Media & Communications Officer, Senior Administration Officer, Fundraising Administration Officer and Graphic Designer. The CEO is responsible for providing a written report as well as a financial report at each of the monthly board meetings.

Our Board of Directors

The Chairperson, Deputy Chairperson and board members of the Toowoomba Hospital Foundation Board have been approved by His Excellency the Governor, acting by and with the advice of the Executive Council and under the provisions of the repealed *Hospitals Foundations Act 1982* and continued under the provisions of the *Hospital Foundations Act 2018*.

The Toowoomba Hospital Foundation is a strong advocate for driving positive change within our community, this includes ensuring fair and equal gender representation on our Board. To this end, we support the Queensland Women's Strategy 2016-21 of achieving gender parity for Queensland Government bodies by the year 2020. Knowing that equality also brings sustainability and diversity, we recently recruited for new board members with this national target in mind and a female was successful in being nominated for the Board. This will increase our gender composition to 38.4%, however we recognise there is still a long way to go before we achieve complete gender parity.

The Toowoomba Hospital Foundation held 11 board meetings during the 2017-18 financial year.

Name	Type of Appointment	Date of Appointment – Term Expiration	Brief Synopsis of Board Member	Eligible to Attend	Attended
Raymond Taylor	Chairman	28/04/2017 to 30/09/2022	Raymond Taylor is a founding member of the Toowoomba Hospital Foundation which was established in 1989. Firstly appointed to the Board on 29 th June 1991 as Deputy Chairman and then later as Chairman in 1999. Currently Ray is the Managing Director of Taylors Removals and Chairman of Directors of National Moving Group, Chess Moving Australia. Ray served 17 years as Director of the Qld Road Transport Association including 3 years as President. He has been a Member of Toowoomba Rotary Club since 1980, serving as President in 1992 & 1993. Ray was also Deputy Chair on the Board of Fatima Home for Children and sat on the Local Ambulance Committee. Ray was Chairman of St Theresa's Parish Council from 2011 to 2017 and continues as Chairman of St Theresa's Parish Finance Committee from 2011. Ray has been a Member of the Range Probus Club since 2013 and is President for the 2018-2019 year.	11	6
Andrew Wielandt	Deputy Chairman	12/02/2016 to 30/09/2018	Andrew Wielandt is Deputy Chair of the Toowoomba Hospital Foundation and Chair of the Toowoomba Hospital Foundation Health & Medical Research Committee. He has served on the Board since 1 st February 2006. Andrew is the Managing Director of Dornbusch Partners, a local wealth management firm. His community engagement includes being Chairman of the Toowoomba Empire Theatre Board and Past President of the Toowoomba Chamber of Commerce.	11	10
Mike Horan	Board Member	Chair, Darling Downs Hospital & Health Service Board	Mike Horan has been the Chair of the Darling Downs Hospital & Health Service Board since its establishment in May 2012.	11	7

Dr Roslyn Reilly	Board Member	28/04/2017 to 30/09/2022	Roslyn is a former Registered Nurse and Midwife, retired from the Department of Nursing and Midwifery at USQ. Among positions previously held include Senior Nurse Educator,(Toowoomba Hospital) Head of Department, Clinical Coordinator and Director of Post Graduate Studies and Acting Chair of Academic Board (USQ) Dr Reilly was a member of the Garden Settlement Committee for several years. She was a founding member of the Sister Elizabeth Kenny Memorial Foundation and has been a Director of the Toowoomba Hospital Foundation since November 1996. She holds the position of Adjunct Associate Professor at USQ.	11	10
Horst Brosi	Board Member	28/04/2017 to 30/09/2022	Horst was appointed to the Board of the Foundation in October 1999. Born in Toowoomba, Mr Brosi, was a Partner & Director of his own engineering business, Vettiger, Vidler & Co Pty Ltd. Horst, now retired. He was the Chairman of Downs Group Training, a board he served on for 15 years. Horst is a past President of the Old Toowoomba Club, the Toowoomba Golf Club and a founding member on the Police Citizens Youth Club Board.	11	8
Lew Rowling	Board Member	28/04/2017 to 30/09/2022	Mr Rowling has been a lawyer for the past 38 years and he is the Senior Partner of Wonderley & Hall, a firm he has been with since 1976. Lew brings a wealth of legal knowledge and advice to the Toowoomba Hospital Foundation Board. Lew was appointed to the Toowoomba Hospital Foundation Board in July 2002.	11	9
Brenda Tait	Board Member	28/04/2017 to 30/09/2022	Brenda has served as a Board Director of the Toowoomba Hospital Foundation since October 1999 and is a Fellow of the Australian Institute of Company Directors. Brenda has been involved in the health sector since 1998, and is currently Chief Operating Officer at Western Queensland Primary Health Network and previously 12 years as the CEO of RHealth Limited and 3 as General Manager, Wide Bay Medicare Local. She has extensive experience in policy, planning and developing strategies aimed at ensuring equity and greater access to health services for people living in rural and remote regions, and was a rural and remote representative on the National Rural Health Alliance Council for many years.	11	6

Megan O'Hara Sullivan	Board Member	12/02/2016 to 30/09/2018	Megan is a Councillor on the Toowoomba Regional Council. She is portfolio leader of the Finance and Business Strategy Portfolio. Her areas of interest lie in diversity, gender equality, the Customer Service Experience and stakeholder engagement. Megan is an qualified optometrist and continues to practice part-time. She is married and has five sons.	11	10
Peter Sedl	Board Member	12/02/2016 to 30/09/2018	A Certified Practicing Accountant, Peter is currently a Proprietor/Director of Sedl Agencies, a Toowoomba family business that was started in 1986. He is also a Director of the National Distributors Alliance (NDA).	11	9
Dr Peter Gillies	Board Member	12/02/2016 to 30/09/2018	Dr Peter Gillies was appointed as Heath Service Chief Executive in May 2016. Dr Gillies has been with the DDHHS since 2009 when he moved to Toowoomba to take up the role of Director Medical Services. Dr Gillies was appointed as Executive Director of Medical Services in February 2011 and subsequently General Manager Toowoomba Hospital in July 2013. In these roles he provided expert direction in improving patient care and meeting or exceeding clinical targets including timely surgery, outpatient waiting lists, and emergency department access. Dr Gillies is a Fellow of the Royal Australasian College of Medical Administrators and has a Masters of Business Administration from Otago University. He is also a Graduate of the Australian Institute of Company Directors. He has a background in general management, previously working as the general manager of a health software company and as the regional manager for a not-for-profit private hospital group in Auckland, New Zealand. He has been a doctor for nearly 25 years and has worked in South Africa and the United Kingdom (UK) in both hospital and general practice roles prior to immigrating to New Zealand in 1995.	11	7
Karen Gordon	Board Member	12/02/2016 to 30/09/2018	Karen is the Nursing Director -Medical Services at Toowoomba Hospital. She has over 27 years' experience in the Darling Downs Hospital & Health Service in the areas of clinical management and leadership, patient flow, critical care nursing and organ donation.	11	8

Harold Shelton	Board Member Secretary	24/02/2016 onwards	Harold has a Bachelor of Business (Accounting) and has in excess of 20 years' experience in commercial accounting fields both in the public and private sector and is a Fellow of CPA Australia. He is currently the Financial Controller for the Darling Downs Hospital and Health Service, a role that encompasses financial & management accounting including preparation of statutory accounts, budgetary and performance reporting.	11	9
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The Role of the Board

The Toowoomba Hospital Foundation is governed by a voluntary Board of Directors, appointed by the Governor in Council and drawn from the general, business, medical and university communities.

Membership of the Foundation's Board is established by s.18 of the *Hospitals Foundations Act 1982*, which provides that the Minister for Health may appoint to the Board persons "who, in the Minister's opinion, have an interest in, and are able to help in achieving, the Foundation's objectives".

The Board of the Foundation has a primary responsibility to establish strategic direction, pursue established objectives and monitor business performance. The Board recognises the importance of applying best practice corporate governance principles in fulfilling this responsibility and has committed to the highest level of integrity in the conduct of its operations.

The Board recognises its overriding responsibility to act honestly, fairly, diligently and in accordance with the *Hospitals Foundations Act 1982*, the *Financial Administration and Audit Act 1977* and the *Public Sector Ethics Act 1994* in serving the interests of the community, as well as the Foundation's employees, volunteers and supporters.

The Board and management have been entrusted with the responsibility of ensuring that monies provided by donors, sponsors and the general public are effectively and efficiently managed.

The role of the Board includes and is not limited to:

- Maintaining high levels of accountability to our stakeholders and external regulators
- Monitoring the performance of the Chief Executive Officer
- Raising awareness of the Foundation throughout the Toowoomba and Darling Downs community
- Reviewing and approving strategic plans, business plans, the annual budget and financial plans
- Assessing and approving applications for funding for equipment, education, research and support to the hospitals and health services
- Ensuring compliance with statutory, financial, social and corporate governance requirements
- Monitoring risk and ensuring there is effective risk management controls and reporting procedures
- Ensuring the Toowoomba Hospital Foundation acts legally, ethically, responsibly, and transparently.

Board Members attend monthly meetings and oversee the financial performance and corporate governance of the Foundation. A comprehensive financial report is provided each month prior to meeting, for Directors to review the Foundation's day to day business. A budget is prepared for acceptance at the commencement of each financial year. The Finance Committee, consisting of two Board Members, the CEO and the Business Manager meet prior to the monthly board meeting to review the annual budget and compare to the actual budget and to ensure financial controls are being undertaken as per the THF Financial Management Practice Manual .

Directors assist staff in determining effective internal controls and oversee all contractual matters including the management and operation of the Toowoomba Hospital car park and coffee shop cafeteria.

Applications for funding are tabled and reviewed by the Directors at each monthly board meeting.

A sub-committee of representatives from the community, health service, university and Foundation, oversee the selection process and distribution of funds for research initiatives for the year. Research funding is generously donated every year by the Pure Land Learning College, Toowoomba.

Together with the CEO, the Events and Marketing Officer and the Media and Communications Officer, the Board develops and oversees fundraising projects with an emphasis on raising the awareness of the needs of the hospital and health services, at the same time ensuring the financial viability of the event.

The Board Directors give of their time and expertise freely and without remuneration.

Ethics and Conduct

In line with the requirement under the *Public Sector Ethics Act 1994 (PSEA)* for public sector agencies to have an approved code of conduct, the Toowoomba Hospital Foundation has adopted the Queensland Government Code of Conduct for the Queensland Public Service as the code of conduct for staff and Board Members and this has been duly approved by the Minister for Health and Ambulance Services.

A copy of this Code of Conduct has been provided to THF staff and Board Directors. At induction of new employees they are provided a copy of the Code as well as the link to the website. Training and further information is offered to all employees as required. All employees are expected to uphold the code by committing to and demonstrating the intent and spirit of the ethics principles and values. A Volunteer Policy and Procedures document and Volunteer Agreement which reflects the public sector ethics principles has been developed and implemented and is given to all THF volunteers once they have been approved to work for the Foundation.

The Code is based on the new public sector ethics principles as outlined in the PSEA: integrity and impartiality, promoting the public good, commitment to the system of government, and accountability and transparency.

Additionally, as Hospital Foundations are captured in the definition of public sector entities, the Toowoomba Hospital Foundation works towards the Queensland Public Service Values. The following five values guide our behaviour and the way we do business:

Customers first: The THF prides itself on taking the time to ensure that we know our community, sponsors, donors, partners, supporters and volunteers as this is integral to the success of our organisation. Over the last 12 months we have undertaken a donor survey and this has enabled us to reach a wider audience of consumers of the Toowoomba Hospital, Mt Lofty Heights Nursing Home and Baillie Henderson Hospital. After fundraising events we review feedback forms and put a plan in place to ensure that we deliver what matters, when needed and we make decisions with empathy.

Ideas into action: At the THF we are active, enthusiastic and accountable. We make things happen, we take responsibility for our actions and activities and we take pride in our contribution to the community.

Unleash potential: The THF expects greatness, we take the lead and set clear expectations and seek, provide and act on feedback. Our team constantly seeks new initiatives and ideas to raise money for the Hospital and Health Services, keeping in mind the financial viability of the same.

Be courageous: The THF acts with transparency and is responsible for our actions, successes and mistakes. Our annual audit to date has been unqualified and an annual report is tabled in parliament each year.

Empower people: The THF aspires to be the leader in our field of fundraising for our hospitals and health services. We continue to utilise everyone's strengths and provide opportunities for all of our team members to individually develop their skills. This in turn has established the THF Team as a strong trustworthy group and this is reflected in the community by the number of new businesses approaching the Foundation to become in our fundraising activities.

Risk Management

The Toowoomba Hospital Foundation is mindful that risk is inherent in all activities, functions and the day to day operation of the organisation. A risk management policy has been developed and implemented for the organisation. Risk management assessments and the subsequent plans are individually developed for events such as our large community events, fun runs, bike rides etc to ensure that public safety and the safety of our staff and volunteers, is protected and of paramount importance.

Among other things, the Foundation ensures that it maintains adequate insurance cover, reviews and maintains a policy manual for its employees, reviews health and safety measures, and an operations manual outlining its day to day functions and operations.

The THF has a robust financial management system and continues to work to the objective of maintaining and improving its good governance standards. The THF has an unblemished history in regards to the annual audit process, having never received a qualified audit.

Internal Audit and Audit Committee

The THF Board have not deemed it necessary to establish a formal audit committee due to the relatively small size of the Foundation and the unblemished history of never having received a qualified audit since inception.

The Foundation's Board and Management have the responsibility of ensuring that monies provided by donors, sponsors and the general public are effectively and efficiently managed utilising the well developed financial systems and existing governance structure.

A small number of Board Members have formed a Finance Committee to provide more in-depth analysis of the Foundation's financial activities.

Board Directors assist staff in determining effective internal controls and oversee all contractual matters including the management and operation of the Toowoomba Hospital car park and coffee shop cafeteria.

Applications for funding for Equipment and Facilities Enhancement, Staff Professional Development, and Scholarships are considered by the Directors at each monthly Board meeting.

A sub-committee of representatives from the community, health service, university and Foundation oversee the selection process and distribution of funds for health and medical research grants for the year.

External Scrutiny

The THF is audited annually by the QAO and has an unblemished history in regards to the annual audit process, having never received a qualified audit. No other external bodies have reported any significant findings.

Information Systems and Record Keeping Compliance

The THF complies with the provisions of the *Public Records Act 2012, Information Standard 40: Record Keeping & Information Standard 31: Retention and Disposal of Public Records*.

The THF ensures that records are created that document business decisions and activities and that these records are available and appropriately managed by our good record keeping systems and that they meet legislative and reporting obligations. The THF works towards continuing to improve recordkeeping systems, practices, policies and procedures to support access, movement, updating, storage, disposal of agency records and information management.

Strategic workforce planning and performance

The Toowoomba Hospital Foundation is an equal opportunity employer where people of all ages, genders and cultural backgrounds have equal opportunity for recruitment, promotion, remuneration and responsibilities.

The THF has a very committed team who focus on achieving the Foundation's strategic objectives and aims and mission. All THF staff are offered and encouraged further study and education opportunities to individually develop their skills. In December each year the THF staff undertake 2 strategic planning days where they review the performance of the past year and plan for the year ahead.

As staff vacancies arise at the Foundation they are advertised online with Seek and this provides a basis to attract talented applicants as it is vital to recruit the best possible employees ensuring the ongoing success and growth of the THF.

The THF offers flexibility in work hours for staff to ensure a work-life-blend and currently has a mix of full time employees and part time employees. To assist with flexible work arrangements for the staff, the Foundation reviews all reasonable requests from employees regarding flexible work requirements. This often involves changes to start and finish times, returning from parental leave in a part-time capacity and taking time off in lieu of additional hours worked outside of normal working hours. As at the 30th June the THF had 6 FTE and the permanent separation rate was 3 per cent.

Early retirement, redundancy and retrenchment

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

Open Data

No expenditure on consultancy, overseas travel and implementation of the Queensland Language Services Policy was incurred during 2017-2018.

Glossary

ARRs	Annual report requirements for Queensland Government agencies
DDHHS	Darling Downs Hospital and Health Service
FAA	Financial Accountability Act 2009
FMPS	Financial Practice Management Standard 2009
GRDS	general retention and disposal schedule
GM5FK	Give Me 5 For Kids
QAO	Queensland Audit Office
TH	Toowoomba Hospital
THCA	Toowoomba Hospital Children's Appeal
THF	Toowoomba Hospital Foundation
PSEA	Public Sector Ethics Act 1994

COMPLIANCE CHECKLIST – ANNUAL REPORT

Summary of requirement		Basis for requirement	Annual report reference
Letter of compliance	<ul style="list-style-type: none"> A letter of compliance from the accountable officer or statutory body to the relevant Minister(s) 	ARRs – section 7	2
Accessibility	<ul style="list-style-type: none"> Table of contents 	ARRs – section 9.1	1
	<ul style="list-style-type: none"> Glossary 		21
	<ul style="list-style-type: none"> Public availability 	ARRs – section 9.2	1
	<ul style="list-style-type: none"> Interpreter service statement 	Queensland Government Language Services Policy ARRs – section 9.3	1
	<ul style="list-style-type: none"> Copyright notice 	Copyright Act 1968 ARRs – section 9.5	1
	<ul style="list-style-type: none"> Information Licensing 	QGEA - Information licensing ARRs – section 9.5	N/A
General Information	<ul style="list-style-type: none"> Introductory Information 	ARRS – section 10.1	3-5
	<ul style="list-style-type: none"> Agency role and main function 	ARRs – section 10.2	6
	<ul style="list-style-type: none"> Machinery of Government Changes 	ARRs – section 31 & 32	8
	<ul style="list-style-type: none"> Operating environment 	ARRs – section 10.3	7-8
Non-financial performance	<ul style="list-style-type: none"> Government objectives for the community 	ARRs – section 11.1	8
	<ul style="list-style-type: none"> Other whole-of-government plans/specific initiatives 	ARR's – section 11.2	9
	<ul style="list-style-type: none"> Agency objectives and performance indicators 	ARRs – section 11.3	10-11
	<ul style="list-style-type: none"> Agency service areas and service standards 	ARRs – section 11.4	N/A
Financial performance	<ul style="list-style-type: none"> Summary of financial performance 	ARRs – section 12.1	12
Governance – management and structure	<ul style="list-style-type: none"> Organisational structure 	ARRs – section 13.1	13
	<ul style="list-style-type: none"> Executive management 	ARRs – section 13.2	13-18
	<ul style="list-style-type: none"> Government Bodies (statutory bodies and other entities) 	ARRs – Section 13.3	N/A
	<ul style="list-style-type: none"> Public Sector Ethics Act 1994 	Public Sector Ethics Act 1994 ARRs – section 13.4	18-19

Governance – management and structure	<ul style="list-style-type: none"> • Qld public service values 	<i>ARRs – Section 13.5</i>	18-19
Governance - Risk Management and accountability	<ul style="list-style-type: none"> • Risk management 	<i>ARRs – section 14.1</i>	19
	<ul style="list-style-type: none"> • Audit Committee 	<i>ARRs – section 14.2</i>	19
	<ul style="list-style-type: none"> • Internal Audit 	<i>ARRs – section 14.3</i>	19 - 20
	<ul style="list-style-type: none"> • External Scrutiny 	<i>ARRs – section 14.4</i>	20
	<ul style="list-style-type: none"> • Information systems and recordkeeping 	<i>ARRs – section 14.5</i>	20
Governance – human resources	<ul style="list-style-type: none"> • Strategic workforce planning and performance 	<i>ARRs – section 15.1</i>	20
	<ul style="list-style-type: none"> • Early retirement, redundancy and retrenchment 	<i>Directive No 16/16 Early Retirement, Redundancy and Retrenchment</i> <i>Directive No 04/18 Early Retirement, Redundancy and Retrenchment</i> <i>ARRs – section 15.2</i>	21
Open Data	<ul style="list-style-type: none"> • Statement advising publication of information 	<i>ARRs – section 16</i>	21
	<ul style="list-style-type: none"> • Consultancies 	<i>ARRs – section 33.1</i>	N/A
	<ul style="list-style-type: none"> • Overseas Travel 	<i>ARRs – section 33.2</i>	N/A
	<ul style="list-style-type: none"> • Qld Language Services Policy 	<i>ARRs – section 33.3</i>	N/A
Financial statements	<ul style="list-style-type: none"> • Certification of financial statements 	<i>FAA – section 62</i> <i>FPMS – section 42,43 & 50</i> <i>ARRs – section 17.1</i>	46
	<ul style="list-style-type: none"> • Independent Auditors Report 	<i>FAA – section 62</i> <i>FPMS – section 50</i> <i>ARRs – section 17.2</i>	47 - 48

ARRs Annual report requirements for Queensland Government agencies
FAA Financial Accountability Act 2009
FMPS Financial Practice Management Standard 2009

Toowoomba Hospital Foundation
ANNUAL FINANCIAL STATEMENTS
30 June 2018

**TOOWOOMBA HOSPITAL FOUNDATION
FINANCIAL STATEMENTS**

FOR THE YEAR ENDED 30 JUNE 2018

The Financial Statements

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	Balance Sheet
	Statement of Changes in Equity
	Statement of Cash Flows
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Our Financial Performance

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Note 3	Bequests and Donations
Note 4	Functions, Special Events and Other Fundraising
Note 5	Other Revenue
Note 6	Employee Expenses
Note 7	Other Expenses

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Note 9	Receivables
Note 10	Other Current Assets
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Certification

Management Certificate

**TOOWOOMBA HOSPITAL FOUNDATION
STATEMENT OF COMPREHENSIVE INCOME**

FOR THE YEAR ENDED 30 JUNE 2018

OPERATING RESULT	Notes	2018	2017
		\$	\$
Income from Continuing Operations			
Bequests and donations	3	249,778	232,984
Functions, special events and other fundraising	4	852,863	524,711
Interest revenue		116,298	119,429
Car parking revenue	2	2,017,248	1,763,981
Other revenue	5	<u>250,252</u>	<u>263,047</u>
Total Revenue		<u>3,486,439</u>	<u>2,904,152</u>
Total Income from Continuing Operations		<u>3,486,439</u>	<u>2,904,152</u>
Expenses from Continuing Operations			
Employee expenses	6	544,035	476,584
Functions, special events and other fundraising		386,761	449,453
Car parking expenses		458,227	466,006
Depreciation	11(ii)	56,424	47,232
Impairment losses	11(ii)	-	7,716
Grants paid	1(g)	934,540	522,596
Donations		360,538	452,193
Funding of HREC co-ordinator		41,029	40,164
Other expenses	7	<u>190,527</u>	<u>160,628</u>
Total Expenses from Continuing Operations		<u>2,972,081</u>	<u>2,622,572</u>
Operating Result from Continuing Operations		<u>514,358</u>	<u>281,580</u>
Operating Result for the Year		<u>514,358</u>	<u>281,580</u>
Total Comprehensive Income		<u>514,358</u>	<u>281,580</u>

The accompanying notes form part of these statements.

**TOOWOOMBA HOSPITAL FOUNDATION
BALANCE SHEET**

AS AT 30 JUNE 2018

	Notes	2018 \$	2017 \$
Current Assets			
Cash and cash equivalents	8	5,587,344	5,031,167
Receivables	9	41,736	109,538
Other current assets	10	74,043	82,858
Total Current Assets		5,703,123	5,223,563
Non-Current Assets			
Property, plant and equipment	11	1,119,042	1,135,307
Total Non-Current Assets		1,119,042	1,135,307
Total Assets		6,822,165	6,358,870
Current Liabilities			
Payables	12	105,003	159,505
Interest-bearing liabilities	13	6,814	6,325
Accrued employee benefits	14	31,385	26,213
Total Current Liabilities		143,202	192,043
Non-Current Liabilities			
Accrued employee benefits	14	11,566	13,788
Total Non-Current Liabilities		11,566	13,788
Total Liabilities		154,768	205,831
Net Assets		6,667,397	6,153,039
Equity			
Accumulated surplus		6,667,397	6,153,039
Total Equity		6,667,397	6,153,039

The accompanying notes form part of these statements.

**TOOWOOMBA HOSPITAL FOUNDATION
STATEMENT OF CHANGES IN EQUITY**

FOR THE YEAR ENDED 30 JUNE 2018

	Accumulated Surplus	Total
	\$	\$
Balance as at 1 July 2016	5,871,459	5,871,459
Operating result from continuing operations	281,580	281,580
	<hr/>	<hr/>
Balance as at 30 June 2017	6,153,039	6,153,039
	<hr/>	<hr/>
Balance as at 1 July 2017	6,153,039	6,153,039
Operating result from continuing operations	514,358	514,358
	<hr/>	<hr/>
Balance as at 30 June 2018	6,667,397	6,667,397

The accompanying notes form part of these statements.

**TOOWOOMBA HOSPITAL FOUNDATION
STATEMENT OF CASH FLOWS**

FOR THE YEAR ENDED 30 JUNE 2018

	Notes	2018	2017
		\$	\$
Cash Flows from Operating Activities			
<i>Inflows:</i>			
Receipts from customers		3,431,118	2,720,772
Interest received		128,108	148,571
GST input tax credits from ATO		92,389	95,421
GST collected from customers		207,342	198,389
<i>Outflows:</i>			
Supplies and services		(2,440,430)	(2,053,449)
Employee expenses		(540,504)	(521,016)
GST remitted to ATO		(232,221)	(192,236)
GST paid to suppliers		(60,916)	(96,031)
Net Cash Provided by/(used in) Operating Activities		584,886	300,421
Cash flows from Investing Activities			
<i>Outflows:</i>			
Payments for property, plant and equipment		(29,198)	(572,677)
Net Cash Provided by/(used in) Investing Activities		(29,198)	(572,677)
Cash Flows from Financing Activities			
<i>Inflows:</i>			
Proceeds from borrowings		489	6,325
<i>Outflows:</i>			
Repayments of borrowings		-	-
Net Cash Provided by/(used in) Financing Activities		489	6,325
Net increase/(decrease) in cash held		556,177	(265,931)
Cash and cash equivalents at beginning of financial year		5,031,167	5,297,098
Cash and cash equivalents at end of financial year	8	5,587,344	5,031,167

The accompanying notes form part of these statements.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

1. BASIS OF FINANCIAL STATEMENT PREPARATION

(a) General Information

These financial statements cover the Toowoomba 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 entity.

(b) Authorisation of Financial Statements for Issue

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

(c) Statement of Compliance and Basis of Preparation

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 except for land and buildings which are measured at fair value.

(e) Other 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 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.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

1. BASIS OF FINANCIAL STATEMENT PREPARATION (CONTINUED)

(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. GST credits receivable from, and GST payable to, the ATO at reporting date are separately recognised in payables within Note 12.

(g) Grants Paid

Grants paid includes applications for funding approved by the Board to provide equipment and resources, education, training and professional development, health and medical research and scholarships.

(h) Key Accounting Estimates and Judgments

The most significant estimates and assumptions made in the preparation of the financial statements related to the fair value and depreciation of Property, Plant and Equipment. Details are set out in Note 11. The valuation of property, plant and equipment necessarily involves estimation uncertainty with the potential to materially impact on the carrying amount of such assets in the next reporting period.

(i) New and Revised Accounting Standards

AASB 2016-4 *Amendments to Australian Accounting Standards – Recoverable Amount of Non-Cash Generating Specialised Assets for not-for-Profit Entities* simplified and clarified the impairment testing requirements under AASB 136 for non-cash generating specialised Assets held by NFP entities. This amendment has not changed any reported amounts. References to the Depreciated Replacement Cost have been replaced with Current Replacement Cost in line with these amendments.

AASB 2017-2 *Amendments to Australian Accounting Standards – Further Annual Improvements 2014-2016 Cycle* clarifies the scope of AASB 12 by specifying that the disclosure requirements of AASB 12 apply to an entity's interests in other entities that are classified as held for sale, held for distribution to owners in their capacity as owners or discontinued operations in accordance with AASB 5. This amendment had no effect as the Foundation had no interests in relevant entities held for sale or discontinued operations.

Early Adoption of Accounting Standards and Interpretations

No Accounting Pronouncements were early adopted in the 2017-18 financial year.

Voluntary Changes in Accounting Policy

No voluntary changes in accounting policies occurred during the 2017-18 financial year.

2. CAR PARKING REVENUE

Accounting Policy

Revenue from car parking is recognised on the completed delivery of the car parking service to the customer (which occurs at the point of customer payment upon exiting the car park).

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

	2018 \$	2017 \$
3. BEQUESTS AND DONATIONS		
Donations	249,778	217,984
Bequests	-	15,000
Total	249,778	232,984

Accounting Policy

Donations 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 at the time of receipt.

Contributions of services are recognised only if the services would have been purchased if they had not been donated and their fair value can be measured reliably. Where this is the case, an equal amount is recognised as revenue and an expense.

4. FUNCTIONS, SPECIAL EVENTS AND OTHER FUNDRAISING

Revenue from functions, special events and other fundraising activities are recognised as income when received. The amount and timing of receipts is dependent on a number of fundraising activities including direct mail donations, personal and corporate donations and special events.

	2018 \$	2017 \$
5. OTHER REVENUE		
Cafeteria lease income	133,224	130,901
Rental income	46,841	36,674
Conference registration income	273	8,647
Vending machine income	23,738	26,097
Sponsorship	18,182	45,859
Other revenue	27,994	14,869
Total	250,252	263,047

Accounting Policy

Revenue from other services rendered and sale of goods are recognised as other revenue when the revenue has been earned. Interest revenue is recognised on an accruals basis at the interest rate applicable to the financial assets.

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.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

	2018 \$	2017 \$
6. EMPLOYEE EXPENSES		
Employee Benefits		
Wages and salaries	480,693	415,316
Employer superannuation contributions	60,454	58,151
Employee Related Expenses		
WorkCover expenses	2,888	3,117
Total	544,035	476,584
 Number of employees at year end	 6	 7

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 Policy

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

Wages and salaries due but unpaid at reporting date and annual leave liabilities are recognised in the Balance Sheet at the current salary rates. 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.

Other long-term employee benefits - long service leave

Long service leave liabilities are classified and measured as other long term employee benefits as the Foundation does not expect to wholly settle all such liabilities within the 12 months following reporting date.

Other long-term employee benefits are presented as current liabilities where the Foundation does not have an unconditional right to defer payment for at least 12 months after the end of the reporting period.

Other long-term employee benefits are measured at the present value of the expected future payments to be made to employees. Expected future payments take into account anticipated future wage/salary levels, expected employee departures and periods of ineligible service. These are discounted using market yields on Australian Government bond rates at the end of the reporting period that coincide with the expected timing of estimated future payments.

All directly associated on-costs (e.g. employer superannuation contributions, payroll tax and workers' compensation insurance) are also recognised as liabilities, where these on-costs are material.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

6. EMPLOYEE EXPENSES (CONTINUED)

Superannuation

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

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.

	2018	2017
	\$	\$
7. OTHER EXPENSES		
Conference and workshop expenses	293	8,311
Cafeteria expenses	83	1,204
Minor equipment purchases	4,402	1,524
Computer expenses	16,129	21,175
Promotional items	10,271	8,635
Function expenses	19,756	17,761
Legal expenses	16,458	-
Insurance	9,008	7,309
Other expenses	114,127	94,709
Total	190,527	160,628

Disclosure - Auditor Remuneration

Total audit fees paid relating to the 2017-18 financial statements are estimated to be \$4,850 (2017: \$4,850). There are no non-audit related services included in this amount.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

	2018 \$	2017 \$
8. CASH AND CASH EQUIVALENTS		
Cash on hand	6,838	6,938
At call deposits	1,775,506	1,199,229
Fixed term deposits	3,805,000	3,825,000
Total	5,587,344	5,031,167

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.

9. RECEIVABLES

Trade and other debtors	41,736	109,538
Less allowance for impairment loss	-	-
Total	41,736	109,538

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. No provision has been made for bad debts at 30 June 2018.

Disclosure – Movements in the allowance for impairment loss – trade and other debtors

Balance at 1 July	-	1,000
Amounts written off during the year	-	(600)
Increase/(decrease) in allowance	-	(400)
Balance at 30 June	-	-

10. OTHER CURRENT ASSETS

Prepayments	8,851	1,925
Accrued other revenue	20,911	24,842
Accrued interest	44,281	56,091
Total	74,043	82,858

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

	2018	2017
	\$	\$
11. PROPERTY, PLANT AND EQUIPMENT AND DEPRECIATION EXPENSE		
<i>(i) Property Plant and Equipment</i>		
<i>Land</i>		
At Fair Value	405,383	405,383
Total Land	405,383	405,383
<i>Buildings</i>		
At Fair Value	445,133	445,133
Less: Accumulated Depreciation	(21,169)	(10,041)
Less: Accumulated Impairment Losses	(7,716)	(7,716)
Total Buildings	416,248	427,376
<i>Improvements</i>		
At Cost	525,455	525,455
Less: Accumulated Depreciation	(274,795)	(245,085)
Total Improvements	250,660	280,370
<i>Plant and Equipment</i>		
At Cost	91,437	51,279
Less: Accumulated Depreciation	(44,686)	(29,101)
Total Plant and Equipment	46,751	22,178
Total Property, Plant and Equipment	1,119,042	1,135,307

(ii) Property Plant and Equipment Reconciliation

	Land	Buildings	Improve- ments	Plant & Equipment	Total
	\$	\$	\$	\$	\$
Carrying amount at 1 July 2017	405,383	427,376	280,370	22,178	1,135,307
Acquisitions	-	-	-	40,159	40,159
Depreciation	-	(11,128)	(29,710)	(15,586)	(56,424)
Carrying amount at 30 June 2018	405,383	416,248	250,660	46,751	1,119,042

**TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS**

FOR THE YEAR ENDED 30 JUNE 2018

**11. PROPERTY, PLANT AND EQUIPMENT
AND DEPRECIATION EXPENSE (CONTINUED)**

(iii) 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, including architects' fees and engineering design fees. However, any training costs are expensed as incurred.

Where assets are received free of charge from another Queensland public sector entity (usually via an involuntary transfer), the acquisition cost is recognised as the gross carrying amount in the books of the transferor immediately prior to the transfer together with any accumulated depreciation.

Assets acquired at no cost or for nominal consideration, other than from an involuntary transfer from another Queensland government agency, are recognised at their fair value at date of acquisition in accordance with AASB 116 *Property, Plant and Equipment*.

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 Property, 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:

Land	\$1
Buildings	\$10,000
Plant and Equipment	\$5,000

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.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

**11. PROPERTY, PLANT AND EQUIPMENT
AND DEPRECIATION EXPENSE (CONTINUED)**

(iii) Accounting Policy (continued)

Measurement of Non-Current Physical Assets using Fair Value

Land and buildings are measured at fair value in accordance with AASB 116 *Property, Plant and Equipment*, AASB 13 *Fair Value Measurement* and Queensland Treasury's Non-Current Asset Policies for the Queensland Public Sector. These assets are reported at their revalued amounts, being the fair value at the date of valuation, less any subsequent accumulated depreciation and accumulated impairment losses where applicable.

Revaluations of Non-Current Physical Assets

Land and buildings measured at fair value are revalued every five years either by appraisals undertaken by an independent professional valuer or internal expert, or by the use of appropriate and relevant indices. For financial reporting purposes, the revaluation process is managed by the Foundation's Board, who determines the specific revaluation practices and procedures.

If a particular asset class experiences significant and volatile changes in fair value, that class is subject to specific appraisal in the reporting period, where practicable, regardless of the timing of the last specific appraisal. Materiality concepts are considered in determining whether the difference between the carrying amount and the fair value of an asset is material (in which case revaluation is warranted).

It has been determined that significant and volatile changes have not occurred in relation to land and buildings of the Foundation from the previous valuation date, being 30 June 2017.

The fair values reported by the Foundation are based on appropriate valuation techniques that maximise the use of available and relevant observable inputs and minimise the use of unobservable inputs.

Any revaluation increment arising on the revaluation of an asset is credited to the asset revaluation surplus of the appropriate class, except to the extent it reverses a revaluation decrement for the class previously recognised as an expense. A decrease in the carrying amount on revaluation is charged as an expense, to the extent it exceeds the balance, if any, in the revaluation surplus relating to that asset class.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

**11. PROPERTY, PLANT AND EQUIPMENT
AND DEPRECIATION EXPENSE (CONTINUED)**

(iii) Accounting Policy (continued)

Revaluations of Non-Current Physical Asset (continued)

On revaluation, for assets revalued using a cost valuation approach (e.g. depreciated replacement cost) - accumulated depreciation is adjusted to equal the difference between the gross amount and carrying amount, after taking into account accumulated impairment losses. This is generally referred to as the 'gross method'. For assets revalued using a market or income-based valuation approach - accumulated depreciation and accumulated impairment losses are eliminated against the gross amount of the asset prior to restating for the revaluation. This is generally referred to as the 'net method'.

The cost of land and buildings acquired during the financial year has been judged by management to materially represent their fair value at the end of the reporting period.

Impairment

All non-current physical assets (including intangible assets) are assessed for indicators of impairment on an annual basis or, where the asset is measured at fair value, for indicators of a change in fair value/service potential since the last valuation was completed.

Where indicators of a material change in fair value or service potential since the last valuation arise, the asset is revalued at the reporting date under AASB 13 *Fair Value Measurement*. If an indicator of possible impairment exists, the Foundation determines the asset's recoverable amount under AASB 136 *Impairment of Assets*. Recoverable amount is equal to the higher of the fair value less costs of disposal and the asset's value in use subject to the following:

- As a not-for-profit entity, certain property, plant and equipment of the Foundation is held for the continuing use of its service capacity and not for the generation of cash flows. Such assets are typically specialised in nature. In accordance with AASB 136, where such assets measured at fair value under AASB 13, that fair value (with no adjustment for disposal costs) is effectively deemed to be the recoverable amount. Consequently, AASB 136 does not apply to such assets unless they are measured at cost.
- For other non-specialised property, plant and equipment measured at fair value, where indicators of impairment exist, the only difference between the asset's fair value and its fair value less costs of disposal is the incremental costs attributable to the disposal of the asset. Consequently, the fair value of the asset determined under AASB 13 will materially approximate its recoverable amount where the disposal costs attributable to the asset are negligible. After the revaluation requirements of AASB 13 are first applied to these assets, applicable disposal costs are assessed and, in the circumstances where such costs are not negligible, adjustments to the recoverable amount are made in accordance with AASB 136.

For all other remaining assets (including intangible assets) measured at cost, recoverable amount is equal to the higher of the fair value less costs of disposal and the asset's value in use.

Value in use is equal to the present value of the future cash flows expected to be derived from the asset, including the estimated net disposal proceeds.

**TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS**

FOR THE YEAR ENDED 30 JUNE 2018

**11. PROPERTY, PLANT AND EQUIPMENT
AND DEPRECIATION EXPENSE (CONTINUED)**

(iii) Accounting Policy (continued)

Impairment (continued)

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

Land is not depreciated as it has an unlimited useful life.

Buildings and plant and equipment 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 and asset turnover practices. 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.

(iv) Depreciation Disclosures

For each class of depreciable asset the following depreciation rates are used:

Class	Rate %
Buildings	2.5
Plant and equipment:	
- Motor vehicles	20 - 33.3
- Leasehold improvements	2 - 20
- Other equipment	10 - 20

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

	2018 \$	2017 \$
12. PAYABLES		
Trade and other creditors	24,411	88,781
GST liability	44,943	41,003
PAYG withholding payable	6,226	5,645
Revenue received in advance	1,983	2,023
Accrued expenses	27,440	22,053
Total	105,003	159,505

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.

13. INTEREST-BEARING LIABILITIES

Credit card	6,814	6,325
Total	6,814	6,325

14. ACCRUED EMPLOYEE BENEFITS

Current

Annual leave	25,082	22,699
Long service leave	6,303	3,514
Total	31,385	26,213

Non-Current

Long service leave	11,566	13,788
Total	11,566	13,788

Accounting Policy

Refer to Note 6.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

15. INFORMATION ON FAIR VALUE MEASUREMENT

What is Fair Value?

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date under current market conditions (i.e. an exit price) regardless of whether that price is directly derived from observable inputs or estimated using another valuation technique.

Financial Assets and Liabilities

The carrying amounts of trade receivables and payables approximate their fair value. The Foundation holds no financial assets classified at fair value through profit and loss.

Non-Financial Assets

A fair value measurement of a non-financial asset takes into account a market participant's ability to generate economic benefits by using the asset in its highest and best use.

Observable inputs are publicly available data that are relevant to the characteristics of the assets/liabilities being valued. Observable inputs used by the Foundation include, but are not limited to, published sales data for land and general office buildings.

Unobservable inputs are data, assumptions and judgements that are not available publicly, but are relevant to the characteristics of the assets/liabilities being valued. Significant unobservable inputs used by the Foundation include subjective adjustments made to observable data to take account of the characteristics of the Foundation's assets/liabilities, internal record of recent construction costs (and/or estimates of such costs) for assets' characteristics/functionality, and assessments of physical condition and remaining useful life. Unobservable inputs are used to the extent that sufficient relevant and reliable observable inputs are not available for similar assets/liabilities.

Disclosure – Assets Measured at Fair Value

Specific appraisals of the Foundation's land and buildings were most recently performed as at 28 June 2017 by the Foundation Board using fair value principles. The Board obtained evidence in relation to the market value of the properties held to support this judgement.

16. 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.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2018

16. FINANCIAL INSTRUMENTS (CONTINUED)

Financial Instruments – Classification and Presentation

	2018 \$	2017 \$
<i>Financial Assets</i>		
Cash and cash equivalents	5,587,344	5,031,167
Loans and receivables at amortised cost	41,736	109,538
Total	5,629,080	5,140,705
<i>Financial Liabilities</i>		
Interest-bearing liabilities	6,814	6,325
Financial liabilities at amortised cost	75,580	135,429
Total	82,394	141,754

17. KEY MANAGEMENT PERSONNEL (KMP) DISCLOSURES

Details of Key Management Personnel

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.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

17. KEY MANAGEMENT PERSONNEL (KMP) DISCLOSURES (CONTINUED)

KMP Remuneration Policies (continued)

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.
 - performance payments recognised as an expense during the year.
 - non-monetary benefits - consisting of provision of vehicle together with fringe benefits tax applicable to the benefit.
- 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; and
- Termination benefits - include payments in lieu of notice on termination and other lump sum separation entitlements (excluding annual and long service leave entitlements) payable on termination of employment or acceptance of an offer of termination of employment.

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

1 July 2017 – 30 June 2018

Position	Short Term Employee Benefits		Long Term Employee Benefits	Post Employment Benefits	Termination Benefits	Total Remuneration
	Base \$'000	Non-Monetary Benefits \$'000	\$'000	\$'000	\$'000	\$'000
Chief Executive Officer	105	7	-	14	-	126

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

17. KEY MANAGEMENT PERSONNEL (KMP) DISCLOSURES (CONTINUED)

Remuneration Expenses (continued)

1 July 2016 – 30 June 2017

Position	Short Term Employee Benefits		Long Term Employee Benefits	Post Employment Benefits	Termination Benefits	Total Remuneration
	Base \$'000	Non-Monetary Benefits \$'000	\$'000	\$'000	\$'000	\$'000
Chief Executive Officer	98	7	-	13	-	118

Performance Payments

No KMP remuneration packages provide for performance or bonus payments.

18. RELATED PARTY TRANSACTIONS

Transactions with people/entities related to KMP

Other than the transactions disclosed in Note 17, there are no transactions with KMP or entities related to KMP in the 2018 or 2017 financial years.

19. COMMITMENTS FOR EXPENDITURE

Grants Approved

The Toowoomba Hospital Foundation commit to expenditure for projects at Board meetings. The projects are recognised as a liability on receipt of an approved invoice for the research carried out. The grants approved by the Board which remain unpaid at balance date are recorded as Commitments. At balance date of 30 June 2018 the outstanding grants commitment was \$772,623 (2017: \$375,058).

Car Park Lease

The Car Park located at the Toowoomba Hospital is leased from Queensland Health. The current lease is a 15 year term commencing on 1 January 2016 to 31 December 2030. The rent payable is \$1.00 (GST-inclusive) per annum.

20. CONTINGENCIES

There were no contingent liabilities of any significance at balance date (2017:\$NIL).

21. EVENTS OCCURRING AFTER BALANCE DATE

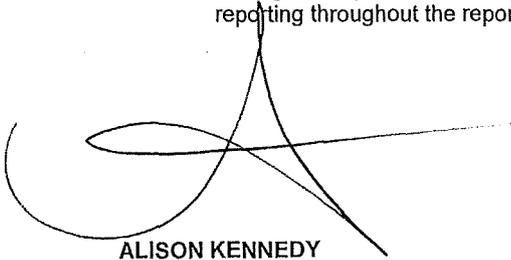
There were no events occurring after balance date which require disclosure in the financial report.

TOOWOOMBA HOSPITAL FOUNDATION

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



ALISON KENNEDY
Chief Executive Officer



RAYMOND TAYLOR
Chairman

Dated this 13 day of August 2018

**INDEPENDENT AUDITOR'S REPORT
TO THE MEMBERS OF
TOOWOOMBA HOSPITAL FOUNDATION**

Report on the Financial Report

I have audited the financial report of the Toowoomba Hospital Foundation, which comprises the balance sheet as at 30 June 2018, the 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's certificate.

In my opinion, the accompanying financial report of the Toowoomba Hospital Foundation has been prepared in accordance with Div 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- (i) Giving a true and fair view of the registered entity's financial position as at 30 June 2018 and of its financial performance for the year then ended, and
- (ii) Complying with Australian Accounting Standards and Div 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

Basis of Opinion

I conducted my audit in accordance with 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 registered entity in accordance with the auditor independence requirements of the ACNC Act and, the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 : *Code of Ethics for Professional Accountants* (the Code) that is relevant to my audit of the financial report in Australia. I have also fulfilled my other ethical responsibilities in accordance with the Code.

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

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

Responsibility of the Board for the Financial Report

The Board of the registered entity is responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the *Australian Charities and Not-for-profits Commission Act 2012* and for such internal control as the Board determines is necessary to enable the preparation of a 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 is responsible for assessing the registered entity'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 intent to liquidate the registered entity or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibility 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 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 the audit in accordance with the Australian Accounting Standards, 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, but not for the purpose of expressing an opinion on the effectiveness of the register entity'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'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 registered 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. My conclusions are based on the audit evidence obtained up to the date of my 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.

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.



TIM DAVIS
13 August 2018
Toowoomba



TOOWOOMBA
HOSPITAL
foundation

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