



TOOWOOMBA
HOSPITAL
foundation

2016

Annual Report

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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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Interpreter Service



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Content from this annual report should be attributed as: The Toowoomba Hospital Foundation Annual Report 2015-2016.

2nd September 2016

The Hon Cameron Dick MP
Minister for Health
Minister for Ambulance Services
Queensland Health Building
147 – 163 Charlotte Street
BRISBANE QLD 4000

Dear Minister

I am pleased to present the Annual Report 2015-2016 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 19 & 20 of this annual report or accessed at www.toowoombahospitalfoundation.org.au.

Yours sincerely



Raymond F. Taylor
Chairman
TOOWOOMBA HOSPITAL FOUNDATION

Chairman's Report

It is with a great deal of pride that I present this annual report as 2016 marks the 25th anniversary of the Toowoomba Hospital Foundation.

To my past and present board directors and staff and our inaugural chairman, Michael Byrne, I say thank you. These people have all been instrumental in creating and shaping the Foundation and its future direction.

To our donors, sponsors, service clubs, community groups, and our Buddhist friends from the Pure Land Learning College, a heartfelt thank you for the years of ongoing and unwavering support. Without their generosity, support and commitment to this Foundation, we would have nothing. The Foundation is truly fortunate to have such a generous and supportive community to help us provide ongoing support for our patients and our staff – we could not achieve our results without them.

I am very proud to say that since our inception, the Toowoomba Hospital Foundation has provided close to \$8 million to the Toowoomba Hospital, Baillie Henderson Hospital and Mt Lofty Heights Nursing Home through equipment, staff development, research and scholarships.

The Foundation's first donation to the Toowoomba Hospital was a \$400 breast pump back in 1994. In contrast, our single biggest donation was \$1 million last year to outfit Toowoomba Hospital's second endoscopy unit with the latest state-of-the-art equipment. In this financial year the total funding to Toowoomba Hospital, Baillie Henderson Hospital and Mt Lofty Heights Nursing Home and local health services is \$1,349,493 and I am sure you will agree that this is an amazing achievement.

Our 2015-18 strategic plan, coupled with the arrival of our new CEO, Alison Kennedy, and the fantastic plans she has for the Foundation, will ensure we remain Toowoomba's charity of choice. Alison has been well supported in her endeavours by the Foundation team of Anna, Rosemary, Tammy, Melanie and Pam.

We are looking to the future and creating a new game plan for the Foundation to ensure our support for the Darling Downs Hospital and Health Service and our appreciation for our generous sponsors becomes even more transparent to the community.

I have had the great honour of being chairman of this great Foundation for many years now and I have thoroughly enjoyed doing it. Thank you for being part of another very successful year and I look forward to working with you all in the coming year.

Raymond F. Taylor
Chairman

Chief Executive Officer's Report

I am proud to present my first report as the new CEO of the Toowoomba Hospital Foundation.

In our 25th anniversary year we have successfully raised just over \$1.3 million dollars for the Toowoomba Hospital, Baillie Henderson Hospital and Mt Lofty Heights Nursing Home – a truly outstanding achievement.

Some highlights of our fundraising calendar were the JB's Cabaret concert which realised a donation of \$50,000 and the One Wish One Cure Blue Ball donation of \$50,000 to help local children with Type 1 Diabetes.

It was an honour to be a part of the Toowoomba's Christmas Wonderland celebrations as my first 'outing' as new CEO. The \$25,000 donation we received enabled us to purchase a critical care ultrasound machine valued at \$113,500. This is a huge achievement and one that is truly appreciated by our hospital staff.

The Toowoomba Hospital Foundation gala race day presented by McConachie Stedman raised \$40,000 for our Child and Youth Mental Health Service. The team at McConachie Stedman is so inspiring and we enjoyed every moment of working with them to make this a huge success.

This year we are particularly proud of two donations we have made: \$118,000 to fund a clinical trials nurse for our Regional Cancer Care Centre and the \$250,000 echocardiograph we have purchased for Toowoomba Hospital's critical care ward.

We are very proud to announce that we have now reached close to \$8 million worth of funding provided to the Toowoomba Hospital, Baillie Henderson Hospital and Mt Lofty Heights Nursing Home through equipment, staff development, research and scholarships.

Our relationship with the executive team and staff at the Toowoomba Hospital continues to strengthen, ensuring that we are matching our campaigns and activities with the needs of the hospital and health service, allowing us to be very transparent to our donors.

To all the businesses, volunteers and community members that support our organisation, we applaud you. We cannot do this on our own and our relationships with you are invaluable.

I would like to thank the wonderful Foundation team of Pamela Hammond, Anna-Louise Sauverain, Rosemary Davis, Melanie Coultas, and Tammy Wilson.

To the board whose energy and knowledge I rely on, thank you for the welcome to the new role and I look forward to the next 12 months and some exciting new plans.

Alison Kennedy
Chief Executive Officer

About the Toowoomba Hospital Foundation

The Toowoomba Hospital Foundation (THF) is a statutory body incorporated under the Hospitals Foundations Act 1982 (Qld). 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.

As a statutory body the 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.

There have been no machinery of government changes in this financial period that have impacted on the operation of the THF.

The Toowoomba Hospital Foundation office is situated on the Toowoomba Hospital campus at 41 Joyce Street, Toowoomba.

The Role of the Toowoomba Hospital Foundation

The Toowoomba Hospital Foundation is a non-profit, charitable organisation that exists to promote the activities and services of the Toowoomba Hospital, Baillie Henderson Hospital and Mt Lofty Heights Nursing Home.

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.

Our Operating Environment

The THF has now been in existence for 25 years and in operation for 22 years and we have come a long way from just a voluntary in-house committee to the region's most recognised and supported charity.

There have been some important changes at the THF in this financial period, all of which will have a positive and lasting impact on the future of the Foundation. The arrival of new CEO, Alison Kennedy, coupled with the adoption of our new five year strategic plan, will ensure that the Foundation remains fit for purpose and continues to grow its connection with donors, sponsors and the local community.

The Foundation's new logo, brand refresh and new website – all introduced this year – will ensure that the Foundation continues to be highly visible in the local community, that information about the THF is easily accessible and that our sponsors, donors and supporters are well recognised for their contributions to our operations.

At the end of this financial year we have put plans in place to add a digital marketing officer to the THF team. This will greatly enhance our capacity to increase our social media presence, increase our reach into the Toowoomba community thus bringing in new donors and supporters, and will allow us to enhance our fundraising campaigns. We have also started working on a formal volunteering programme to ensure that our staff are well assisted in their endeavours.

This year we have continued to engage our stakeholders and the local community about the importance of supporting local hospitals and health services through a number of specific fundraising events. We are particularly grateful to our friends at McConachie Stedman for hosting the Toowoomba Hospital Foundation gala race day and donating \$40,000 to our Child and Youth Mental Health Service.

The Zombie Walk engaged with a much younger section of our local community, the Colour of Change luncheon raised money and support for BreastScreen Queensland Toowoomba Service, 4GR's Give Me 5 for Kids Appeal and the Toowoomba Hospital Children's Appeal raised money for children's health services at the Toowoomba Hospital, the Fossil Downs Bush Rodeo supported the Toowoomba Hospital oncology and renal units, and the It's a Bloke Thing luncheon raised money and support for men's health.

The THF has a long affiliation with charity golf days and this year saw our local 'furies' (Queensland Fire and Emergency Services - Toowoomba), the Treadwell family, Mater Dei school and the Rotary Club of Toowoomba East provide invaluable support for Toowoomba Hospital's emergency department, renal unit and oncology services.

The funds we disperse are mainly provided from the profits of the business base of the Foundation, however partnerships developed with the Foundation for fundraising events also contribute significantly towards equipment, staff development and programs conducted by the Toowoomba Hospital. In 2015/16, the total amount of support through these initiatives amounted to just over \$441,350. The Foundation is grateful to the local community for helping us reach this total.

The Board of Directors has continued to focus on the Foundation's contribution to the Darling Downs Hospital and Health Service (DDHHS) as a key driver in its decision making process.

Support for the Queensland Government's Community Objectives

The Queensland Government's plan to deliver a better way for the state includes:

- Creating jobs and a diverse economy;
- Delivering quality frontline services;
- Protecting the environment; and
- Building safe, caring and connected communities.

Integrity, accountability and consultation underpin everything the Queensland Government does and they will regularly report the outcomes achieved against these objectives.

The Toowoomba Hospital Foundation supports these community objectives by:

- Injecting as much money as prudently possible into our health facilities to assist staff to provide high quality front line health care services;
- Acting as a link between our local community and the health facilities we serve in order to help create and sustain connected communities;
- Undertake fundraising activities that are reflective of our local economy and appropriate for our diverse community;
- Help our local community understand the work of our health service to help create a caring local community;
- Building our capability to deliver services and funding now and into the future; 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 ensure the health system is able to deliver quality services that are safe and responsive for Queenslanders.

The Toowoomba Hospital Foundation supports Queensland Health's commitment to high levels of integrity and accountability and the following strategic objectives:

Supporting Queenslanders to be healthier: The THF provides funding for programmes and services across the DDHHS that directly help to assist our patients to live a healthier life;

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;

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 works with a wide cross section of our community from businesses to service clubs to ensure we have a wide community reach;

Engaged and production workforce: The THF funds education, training, professional development, scholarships for DDHHS staff.

Our Objectives and Performance Indicators

The Toowoomba Hospital Foundation supports the community by helping to improve 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 2015-2018 strategic plan, 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 enable 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.

The Toowoomba Hospital Foundation's five year priorities are to:

Ensure that hospital patients and their families have access to convenient accommodation and parking facilities;

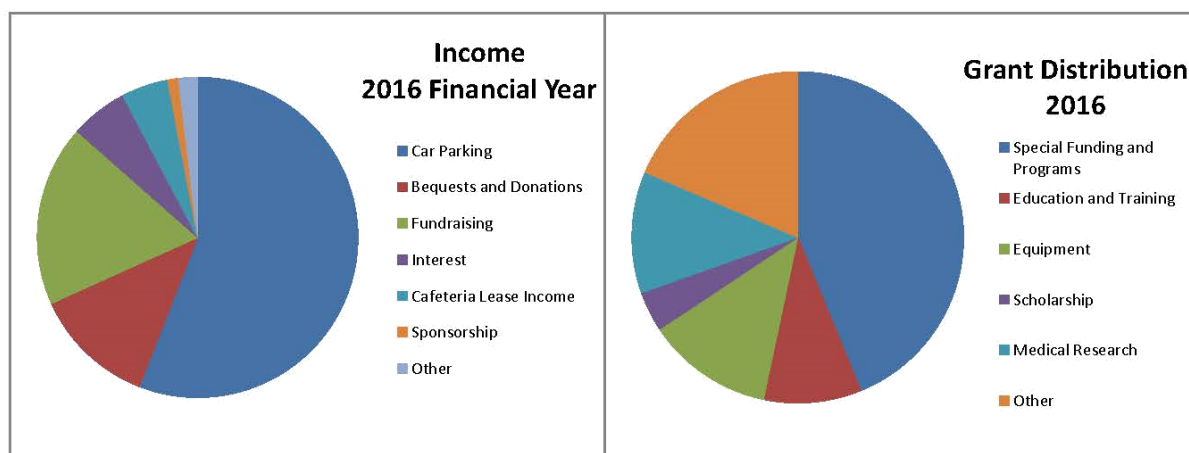
Grow partnerships with corporate sponsors, other charities and businesses related to our core work to be major contributors to our funds portfolio;

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;

Raise and distribute funds across a broader scope of community and hospital needs in order to maintain our sustainability and grow the THF brand.

Summary of Financial Performance

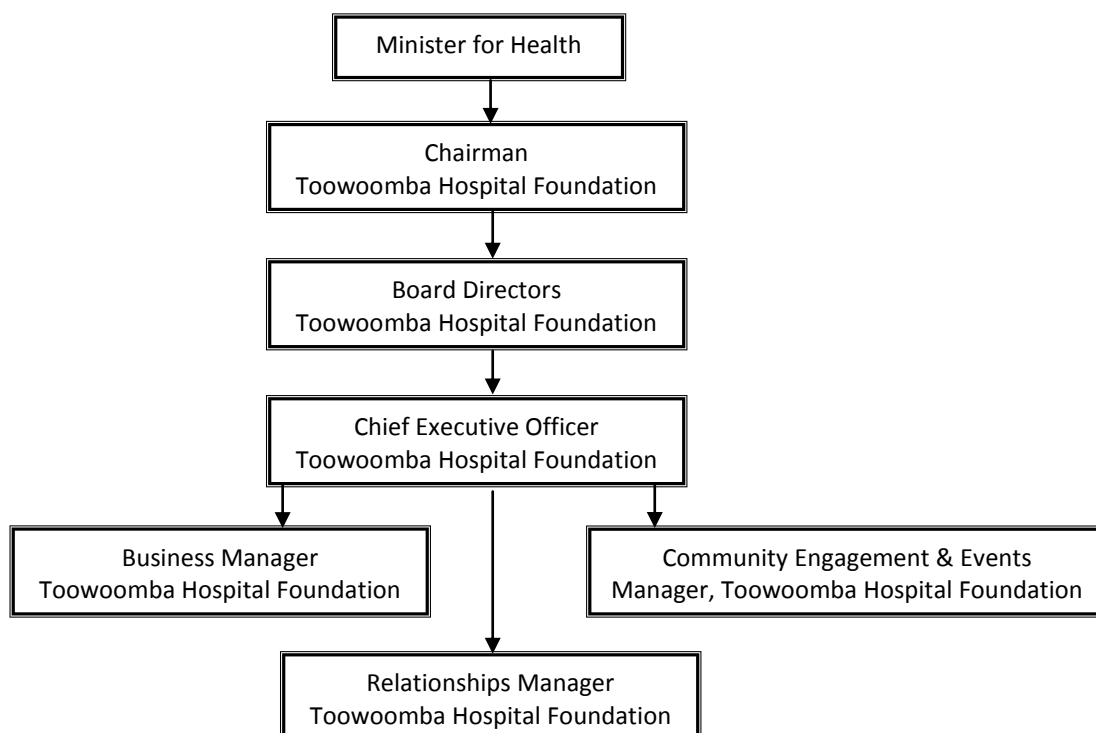
	2016 \$	2015 \$	Commentary
Operating Income			
Car Park Revenue	1,522,254.00	1,394,836.00	Car parking profit showed an increase of 11% on last year's figures due to the increase in hospital services.
Less Car Park Expenses	(479,413.00)	(452,826.00)	
Net Profit from Car Park	1,042,841.00	942,010.00	
Other Income	367,347.00	428,222.00	
Total Operating Income	1,410,188.00	1,370,232.00	Total operating income was on a par with last year's figures.
Less Employment expenses	(514,698.00)	(469,225.00)	Our employment expenses were slightly higher than last year due to additional staffing requirements.
Less Depreciation	(45,519.00)	(56,808.00)	
Less Other Operating Expenses	(202,567.00)	(228,186.00)	
Operating Profit	647,404.00	616,013.00	
Fundraising Income	497,032.00	434,189.00	100% of all donations and fundraising profits are dedicated to their nominated cause.
Bequests and Donations	334,987.00	339,201.00	
Less Fundraising Expenses	(259,946.00)	(265,800.00)	
Profit from Fundraising	572,073.00	507,590.00	
Total Profit	1,219,477.00	1,123,603.00	This year's grant distribution for special funding and programs included an amount of \$250,000 for an echocardiograph ultrasound machine for the Cardiac Diagnostic Unit, Toowoomba Hospital
Grant Distribution	(570,793.00)	(1,304,277.00)	
Funding - HREC Co-ordinator	(38,173.00)	(113,544.00)	
Donations	(458,550.00)	(202,703.00)	
Net Profit/(Loss)	151,961.00	(496,921.00)	



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
Rosemary Davis	Relationships Manager (Part time)
Tammy Wilson	Community Engagement and Events Manager (Part time)
Melanie Coultas	Community Engagement and Events Manager (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, Community Engagement and Events Manager and a Relationships Manager. The CEO is responsible for providing a written report to the Board 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 Her Excellency the Governor, acting by and with the advice of the Executive Council and under the provisions of the Hospitals Foundations Act 1982 (Qld).

The Toowoomba Hospital Foundation held 12 board meetings during the 2015/16 financial year.

Name	Type of Appointment	Date of Appointment – Term Expiration	Reason for Appointment	Eligible to Attend	Attended
Raymond Taylor	Chairman	28/03/2014 to 28/03/2017	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. 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 Committee of the Local Ambulance Committee.	12	10
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 & protection firm. Previously he was an Associate Director at Macquarie Bank. Andrew's other community engagement includes President of the Toowoomba Chamber of Commerce and Industry, and Director of the Empire Theatre Board.	12	11
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.	12	10
Dr Roslyn Reilly	Board Member	28/03/2014 to 28/03/2017	Roslyn is a Registered Nurse, recently retired from the Department of Nursing and Midwifery at USQ. Among positions held include Senior Nurse Educator, Head of Department, Clinical Coordinator and Director of Post Graduate Studies and Acting Chair of Academic Board.	12	11

			Dr Reilly was a member of the Garden Settlement Committee for several years. She is a founding and current 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. Additionally, as a woman she helps the Board address gender composition issues		
Horst Brosi	Board Member	28/03/2014 to 28/03/2017	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, is the Chairman of Downs Group Training, a board he has served on for the past 14 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.	12	10
Lew Rowling	Board Member	28/03/2014 to 28/03/2017	Mr Rowling has been a lawyer for the past 30 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.	12	8
Brenda Tait	Board Member	28/03/2014 to 28/03/2017	Brenda has served as a Board Director of the Toowoomba Hospital Foundation since October 1999. She is a Fellow of the Australian Institute of Company Directors. She has been the CEO of RHealth Limited from 1999 to 2012 and has been the rural and remote representative on the National Rural Health Alliance Council from 2003. She has a wealth of 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. Additionally, as a woman she helps the Board address gender composition issues	12	10
Megan O'Hara Sullivan	Board Member	12/02/2016 to 30/09/2018	Megan is an Optometrist with her own practice in Pittsworth and Clifton. Megan was recently elected as a councillor on the Toowoomba Regional Council. She is a current member of the Regional Development Australia Board, current member of the Professional Conduct Review Panel, State Government and a current member of the Clifton Co-operative Hospital Board. Additionally, as a woman she helps the Board address gender composition issues.	12	11

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).	12	9
Dr Peter Gillies	Board Member	12/02/2016 to 30/09/2018	Dr Peter Gillies is the Chief Executive, Darling Downs Hospital and Health Service. Peter was appointed to the Toowoomba Hospital Foundation Board on 12 th February 2016 while he was the General Manager, Toowoomba Hospital. Peter 's varied career has included positions such as Auckland NZ Hospitals Regional Manager, Director of Medical Services Hunter New England Health Armidale and Executive Director Toowoomba Hospital and Medical Services, Darling Downs Hospital and Health Service.	6	6
Karen Gordon	Board Member	12/02/2016 to 30/09/2018	Karen is the Service Manager/ Nursing Director (Medical) at Toowoomba Hospital. She has over 25 years' experience in the DDHHS health service in the areas of clinical management and leadership, critical care nursing, organ donation and education. Additionally, as a woman she helps the Board address gender composition issues.	12	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 member 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.	4	3

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
- Providing assistance with strategic direction and developing policies, plans and budgets
- 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 finance committee consisting of two Board Members, the CEO and the Business Manager was established in November 2015. 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.

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 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 research initiatives for the year. Research funding is generously donated every year by the Pure Land Learning College, Toowoomba.

Together with the CEO and the Community Engagement and Events Managers, the Board develops and oversees fundraising projects with an emphasis on raising the awareness of the needs of the hospital and health services.

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. A copy of this Code of Conduct has been provided to THF staff and Board Directors.

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.

Staff employment contracts and performance reviews will be congruent with the ethics priorities as outlined in the Code and the PSEA. All employees are expected to uphold the code by committing to and demonstrating the intent and spirit of the ethics principles and values. Any staff member wishing to undertake training in relation to ethics and conduct is able to do so.

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

Customers first: At the THF we take the time to ensure that we know our community, sponsors, donors, partners, and supporters and we 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.

Be courageous: The THF acts with transparency and is responsible for our actions, successes and mistakes.

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.

The THF operates in line with the District Health Services Award and utilises and complies with contemporary human resource management, health and safety, equal employment opportunity, and anti-discrimination requirements.

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.

Among other things, the Foundation ensures that it maintains adequate insurance cover, reviews health and safety measures, and reviews and maintains a business continuity plan.

Risk management plans are individually created for events such as our zombie walk, fun runs, etc to ensure that public safety and the safety of our staff and volunteers, is of paramount importance.

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

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.

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 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 initiatives for the year.

External Scrutiny

The Foundation has been audited by the Queensland Audit Office and no significant issues were identified. The THF 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

The Toowoomba Hospital Foundation has access to Queensland's recordkeeping legislative framework, through the Queensland State Archives, and complies with the provisions of the *Public Records Act 2002* and as such has an obligation to make and keep 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.

In September, the Queensland State Archives is set to release a revised general retention and disposal schedule (GRDS) for administrative records for Hospital Foundations. They are also developing tools and advice to support the Foundations in the transition to the revised GRDS.

Human Resources

Workforce planning, attraction 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 attraction of talented applicants to the Foundation is vital to ensuring the ongoing success and growth of the Foundation and to ensure that the aims and mission of the Foundation are achieved.

Further study and education opportunities are offered to Foundation staff on an annual basis.

The Foundation offers flexibility in work hours for staff to ensure a balance in work and family commitments.

Early retirement, redundancy and retrenchment

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

Open Data

The Toowoomba Hospital Foundation has nothing to declare under Open Data.

Glossary

ARR	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
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 8	2
Accessibility	<ul style="list-style-type: none"> Table of contents 	ARRs – section 10.1	1
	<ul style="list-style-type: none"> Glossary 		18
	<ul style="list-style-type: none"> Public availability 	ARRs – section 10.2	1
	<ul style="list-style-type: none"> Interpreter service statement 	Queensland Government Language Services Policy ARRs – section 10.3	1
	<ul style="list-style-type: none"> Copyright notice 	Copyright Act 1968 ARRs – section 10.4	1
	<ul style="list-style-type: none"> Information Licensing 	QGEA - Information licensing ARRs – section 10.5	1
General Information	<ul style="list-style-type: none"> Introductory Information 	ARRS – section 11.1	5
	<ul style="list-style-type: none"> Agency role and main function 	ARRs – section 11.2	5
	<ul style="list-style-type: none"> Operating environment 	ARRs – section 11.3	6
Non-financial performance	<ul style="list-style-type: none"> Government objectives for the community 	ARRs – section 12.1	7
	<ul style="list-style-type: none"> Other whole-of-government plans/specific initiatives 	ARR's – section 12.2	7
	<ul style="list-style-type: none"> Agency objectives and performance indicators 	ARRs – section 12.3	8
	<ul style="list-style-type: none"> Agency service areas and service standards 	ARRs – section 12.4	N/A
Financial performance	<ul style="list-style-type: none"> Summary of financial performance 	ARRs – section 13.1	9
Governance – management and structure	<ul style="list-style-type: none"> Organisational structure 	ARRs – section 14.1	10
	<ul style="list-style-type: none"> Executive management 	ARRs – section 14.2	10-14
	<ul style="list-style-type: none"> Government Bodies (statutory bodies and other entities) 	ARRs – Section 14.3	N/A
	<ul style="list-style-type: none"> Public Sector Ethics Act 1994 	Public Sector Ethics Act 1994 ARRs – section 14.4	15
	<ul style="list-style-type: none"> Qld public service values 	ARRs – Section 14.5	15

Governance - Risk Management and accountability	• Risk management	ARRs – section 15.1	15-16
	• Audit Committee	ARRs – section 15.2	N/A
	• Internal Audit	ARRs – section 15.3	16
	• External Scrutiny	ARRs – section 15.4	16
	• Information systems and recordkeeping	ARRs – section 15.5	16
Governance – human resources	• Workforce planning and performance	ARRs – section 16.1	17
	• Early retirement, redundancy and retrenchment	Directive No 11/12 <i>Early Retirement, Redundancy and Retrenchment</i> ARRs – section 16.2	17
Open Data	• Consultancies	ARRs – section 17 ARRs – section 34.1	N/A
	• Overseas Travel	ARRs – section 17 ARRs – section 34.2	N/A
	• Qld Language Services Policy	ARRs – section 17 ARRs – section 34.3	N/A
Financial statements	• Certification of financial statements	FAA – section 62 FPMS – section 42,43 & 50 ARRs – section 18.1	42
	• Independent Auditors Report	FAA – section 62 FPMS – section 50 ARRs – section 18.2	43

Toowoomba Hospital Foundation
ANNUAL FINANCIAL STATEMENTS
30 June 2016

**TOOWOOMBA HOSPITAL FOUNDATION
STATEMENT OF COMPREHENSIVE INCOME**

FOR THE YEAR ENDED 30 JUNE 2016

	Notes	2016 \$	2015 \$
INCOME FROM CONTINUING OPERATIONS			
Bequests and donations	2	334,987	339,201
Functions, special events and other fundraising	3	497,032	434,189
Interest revenue		157,046	197,041
Car parking		1,522,254	1,394,836
Other revenue	4	210,301	231,181
Total Revenue		2,721,620	2,596,448
Total Income from Continuing Operations		2,721,620	2,596,448
EXPENSES FROM CONTINUING OPERATIONS			
Employee expenses	5	514,698	469,225
Functions, special events and other fundraising		259,946	265,800
Car parking expenses		479,413	452,826
Depreciation		45,519	56,808
Grants paid	18	570,793	1,304,277
Donations		458,550	202,703
Funding of HREC co-ordinator		38,173	113,544
Other expenses	7	202,567	228,186
Total Expenses from Continuing Operations		2,569,659	3,093,369
Operating Result from Continuing Operations		151,961	(496,921)
Total Comprehensive Income		151,961	(496,921)

The accompanying notes form part of these statements.

TOOWOOMBA HOSPITAL FOUNDATION

STATEMENT OF FINANCIAL POSITION

AS AT 30 JUNE 2016

	Notes	2016 \$	2015 \$
CURRENT ASSETS			
Cash and cash equivalents	8	5,297,098	5,380,102
Receivables	9	56,588	35,407
Other current assets	10	97,600	123,760
Total Current Assets		5,451,286	5,539,269
NON CURRENT ASSETS			
Plant and equipment	11	617,578	383,076
Total Non Current Assets		617,578	383,076
TOTAL ASSETS		6,068,864	5,922,345
CURRENT LIABILITIES			
Payables	12	113,156	106,601
Interest-bearing liabilities	13	-	5,431
Accrued employee benefits	14	73,204	86,242
Total Current Liabilities		186,360	198,274
NON CURRENT LIABILITIES			
Accrued employee benefits	14	11,044	4,573
Total Non Current Liabilities		11,044	4,573
TOTAL LIABILITIES		197,404	202,847
NET ASSETS		5,871,459	5,719,498
EQUITY			
Accumulated surplus		5,871,459	5,719,498
TOTAL EQUITY		5,871,459	5,719,498

The accompanying notes form part of these statements.

TOOWOOMBA HOSPITAL FOUNDATION
STATEMENT OF CHANGES IN EQUITY
FOR THE YEAR ENDED 30 JUNE 2016

	Accumulated Surplus	Total
	\$	\$
Balance as at 1 July 2014	6,216,419	6,216,419
Operating result from continuing operations	(496,921)	(496,921)
	<hr/>	
Balance as at 30 June 2015	5,719,498	5,719,498
	<hr/>	
Balance as at 1 July 2015	5,719,498	5,719,498
Operating result from continuing operations	151,961	151,961
	<hr/>	
Balance as at 30 June 2016	5,871,459	5,871,459
	<hr/>	

The accompanying notes form part of these statements.

**TOOWOOMBA HOSPITAL FOUNDATION
STATEMENT OF CASH FLOWS**

FOR THE YEAR ENDED 30 JUNE 2016

	Notes	2016	2015
		\$	\$
Cash flows from operating activities			
<i>Inflows:</i>			
Receipts from customers		2,547,348	2,436,792
Interest received		177,889	160,502
GST input tax credits from ATO		73,855	89,486
GST collected from customers		170,500	159,204
<i>Outflows:</i>			
Supplies and services		(2,010,699)	(2,557,189)
Employee expenses		(522,083)	(454,610)
GST remitted to ATO		(165,142)	(151,696)
GST paid to suppliers		(66,158)	(93,105)
Net Cash Provided by/(used in) Operating Activities		205,510	(410,616)
Proceeds from sale of property, plant and equipment		-	12,207
Payments for property, plant and equipment		(283,083)	(34,984)
Net Cash Provided by/(used in) Investing Activities		(283,083)	(22,777)
Increase in/(repayments of) borrowings		(5,431)	2,004
Net Cash Provided by/(used in) Financing Activities		(5,431)	2,004
Net increase/(decrease) in cash held		(83,004)	(431,389)
Cash and cash equivalents at beginning of financial year		5,380,102	5,811,491
Cash and cash equivalents at end of financial year	8	5,297,098	5,380,102

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 2016

Note 1:	Basis of Financial Statement Preparation
Note 2:	Bequests and Donations
Note 3:	Functions, Special Events and Other Fundraising
Note 4:	Other Revenue
Note 5:	Employee Expenses
Note 6:	Key Management Personnel and Remuneration
Note 7:	Other Expenses
Note 8:	Cash and Cash Equivalents
Note 9:	Receivables
Note 10:	Other Current Assets
Note 11:	Property, Plant and Equipment
Note 12:	Payables
Note 13:	Interest-Bearing Liabilities
Note 14:	Accrued Employee Benefits
Note 15:	Contingencies
Note 16:	Commitments for Expenditure
Note 17:	Financial Instruments
Note 18:	Other Information

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

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.

(b) 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*.

These financial statements are general purpose financial statements, and have been prepared on an accrual basis (with the exception of the statement of cash flows which is prepared on a cash basis) in accordance with Australian Accounting Standards – Reduced Disclosure Requirements (RDR) and Interpretations. The Foundation is a not-for-profit entity and the financial statements comply with the requirements of Australian Accounting Standards – RDR and Interpretations applicable to not-for-profit entities.

(c) The Reporting Entity

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.

(d) Underlying Measurement Basis

The historical cost convention is used unless otherwise stated.

(e) Other Presentation Matters

Currency and Rounding

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

Comparatives

Comparative information reflects the audited 2014-15 financial statements.

Current / Non-Current Classification

Assets and liabilities are classified as either 'current' or 'non-current' in the Statement of Financial Position and associated notes. 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 2016

(f) New and Revised Accounting Standards (including Early Adoption)

The Foundation did not voluntarily change any of its accounting policies during 2015-16.

There were no Australian Accounting Standard changes mandatorily applicable for the first time as from 2015-16 that had a significant impact on the Foundation's financial statements.

AASB 2015-2 Amendments to Australian Accounting Standards – Disclosure Initiative: Amendments to AASB 101 [AASB 7, AASB 101, AASB 134 & AASB 1049] has been early adopted by the Foundation for 2015-16.

This Standard amends the above Standards and seeks to improve financial reporting by providing flexibility as to the ordering of notes, the identification and location of significant accounting policies, the presentation of sub-totals and clarity on aggregating line items. It also emphasises only including material disclosures in the notes. The Foundation has applied this flexibility in preparing the 2015-16 financial statements and co-located significant accounting policies with the breakdown of financial information disclosed in each note.

(g) 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.

	2016	2015
	\$	\$
2. BEQUESTS AND DONATIONS		
Donations	334,987	336,201
Bequests	-	3,000
Total	334,987	339,201

Accounting Policy

Amounts donated can be recognised as revenue only when the Foundation gains control, economic benefits are probable and the amounts can be measured. At times it is impractical to maintain effective controls over the collection of such revenue prior to its initial entry into the Foundation's financial records. Therefore donations are recognised as revenue when they are recorded in the books and accounts of the entity.

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.

3. FUNCTIONS, SPECIAL EVENTS AND OTHER FUNDRAISING

Revenue from fundraising activities, special events and functions 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.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

	2016	2015
	\$	\$
4. OTHER REVENUE		
Cafeteria lease income	128,681	126,809
Rental income	4,203	-
Conference registration income	12,906	11,958
Vending machine income	21,390	18,461
Sponsorship	29,445	23,855
Grants received	-	42,880
Other revenue	13,676	7,218
Total	210,301	231,181

Accounting Policy

Revenue from 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.

5. EMPLOYEE EXPENSES

Employee Benefits

Salaries and wages	449,072	411,331
Superannuation expense	63,416	55,002

Employee Related Expenses

WorkCover expenses	2,210	2,892
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Total	514,698	469,225
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Accounting Policy

Salaries, wages, employer superannuation contributions, annual leave levies and long service leave levies are regarded as employee benefits.

Payroll tax and workers' compensation insurance are a consequence of employing employees, but are not counted in an employee's total remuneration package. They are not employee benefits and are recognised separately as employee related expenses.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

5. EMPLOYEE EXPENSES (continued)

Wages, Salaries and Sick Leave

Wages and salaries due but unpaid at reporting date are recognised in the Statement of Financial Position 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.

Annual Leave and Long Service Leave

Annual leave and long service leave liabilities are accounted for as short term employee benefits if the Foundation expects to wholly settle all such liabilities within the 12 months following reporting date. Otherwise, annual leave and long service leave liabilities are accounted for as 'other long-term employee benefits' in accordance with AASB 119, and split between current and non-current components.

Accounting for 'other long-term employee benefits' requires:

- determination of the deficit or surplus in the benefit plan - which involves using an actuarial technique to estimate the cost of the employee benefits earned by employees, discounting that benefit in order to determine the present value of the Foundation's obligation and current service cost, and deducting the fair value of plan assets from the present value of the Foundation's obligation;
- determination of the amount of the net defined benefit liability(asset); and
- determination of various amounts to be recognised in the operating result (e.g. service cost, net interest on the net defined benefit liability (asset) and remeasurements of the net defined benefit liability (asset)).

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.

Superannuation

Employer superannuation contributions due but unpaid at reporting date are recognised in the Statement of Financial Position at the current superannuation rate.

Other Employee Related Expenses

Payroll tax and workers' compensation insurance are a consequence of employing employees, but are not counted in an employee's total remuneration package. They are not employee benefits and are recognised separately as employee related expenses.

The Foundation pays insurance premiums to WorkCover Queensland in respect of its obligations for employee compensation.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

6. KEY MANAGEMENT PERSONNEL AND REMUNERATION

Key management personnel and remuneration disclosures are made in accordance with the *Financial Reporting Requirements for Queensland Government Agencies* issued by Queensland Treasury.

a) Remuneration of Board Members

No Board Member received or was entitled to receive any fees or other benefits during the year.

b) Key Executive Management Personnel

The following details for key executive management personnel include those positions that had authority and responsibility for planning, directing and controlling the activities of the Toowoomba Hospital Foundation during 2015-16.

Position	Responsibilities	Current Incumbents	
		Contract classification and appointment authority	Date appointed to position (Date resigned from position)
Chief Executive Officer	strategic planning operational planning human resource management business development	CEO Public Services Act 2008	26-Jan-91 (25-Apr-16)
Chief Executive Officer	strategic planning operational planning human resource management business development	CEO Public Services Act 2008	18-Jan-16

c) Remuneration

Remuneration for all employees of the Toowoomba Hospital Foundation is by individual agreement. The remuneration and other terms of employment for the key executive management personnel are specified in employment contracts.

Remuneration packages for key executive management personnel comprise the following components:-

- Short term employee benefits which include:
 - Salaries, allowance and leave entitlements earned and expensed for the entire year or for that part of the year during which the employee occupied the specified position.
 - Non-monetary benefits – consisting of provision of vehicle together with fringe benefits tax applicable to the benefit.
- Long term employee benefits include long service leave accrued.
- Post employment benefits include superannuation contributions.
- Termination benefits are not provided for within individual contracts of employment. Contracts of employment provide only for notice periods or payment in lieu of notice on termination, regardless of the reason for termination.

No performance payments are included in remuneration contracts.

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

FOR THE YEAR ENDED 30 JUNE 2016

6. KEY MANAGEMENT PERSONNEL AND REMUNERATION (CONTINUED)

1 July 2015 – 30 June 2016

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 (Resigned 25-Apr-16)	88	7	-	16	-	111
Chief Executive Officer (Appointed 18-Jan-16)	40	7	1	5	-	53

1 July 2014 – 30 June 2015

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	110	12	3	19	-	144

7. OTHER EXPENSES

	2016 \$	2015 \$
Conference and workshop expenses	19,494	17,602
Cafeteria expenses	1,813	49,332
Minor equipment purchases	1,910	20,251
Computer expenses	15,542	11,311
Loss on disposal of plant and equipment	3,062	2,864
Promotional items	5,319	15,497
Rebrand expenses	11,415	-
Insurance	8,046	6,770
25 th Anniversary function	18,372	-
Other expenses	117,594	104,559
Total	202,567	228,186

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

7. OTHER EXPENSES (continued)

Auditor Remuneration

Total audit fees paid relating to the 2015-16 financial statements are estimated to be \$4,850 (2015: \$4,850). There are no non-audit related services included in this amount.

	2016	2015
	\$	\$
8. CASH AND CASH EQUIVALENTS		
Cash on hand	6,938	6,440
At call deposits	425,160	258,662
Fixed term deposits	4,865,000	5,115,000
Total	5,297,098	5,380,102

Accounting Policy

For the purposes of the Statement of Financial Position and the Statement of Cash Flows, cash assets include all cash and cheques receipted but not banked at 30 June as well as deposits at call with financial institutions. It also includes term deposits with short periods to maturity that are readily convertible to cash on hand at the Toowoomba Hospital Foundation's or issuer's option and that are subject to insignificant risk of changes in value.

9. RECEIVABLES

Trade and other debtors	57,588	37,007
Less provision for doubtful debts	(1,000)	(1,600)
Total	56,588	35,407

Accounting Policy

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

The collectability of receivables is assessed periodically with provision being made for impairment. A provision has been made of \$1,000 for bad debts at 30 June 2016.

10. OTHER CURRENT ASSETS

Prepayments	1,549	1,477
Accrued other revenue	10,818	16,207
Accrued interest	85,233	106,076
Total	97,600	123,760

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

	2016 \$	2015 \$
11. PROPERTY, PLANT & EQUIPMENT		
<i>Land</i>		
At Fair Value	116,524	-
Total Land	<u>116,524</u>	<u>-</u>
<i>Buildings</i>		
At Fair Value	161,315	-
Less: Accumulated Depreciation	(1,171)	-
Total Buildings	<u>160,144</u>	<u>-</u>
<i>Improvements</i>		
At Cost	525,455	525,455
Less: Accumulated Depreciation	(215,375)	(179,660)
Total Improvements	<u>310,080</u>	<u>345,795</u>
<i>Plant and Equipment</i>		
At Cost	51,279	52,946
Less: Accumulated Depreciation	(20,449)	(15,665)
Total Plant and Equipment	<u>30,830</u>	<u>37,281</u>
Total Property, Plant and Equipment	<u>617,578</u>	<u>383,076</u>

Change in Presentation

The presentation of classes of fixed assets has changed from the prior year financial statements separating plant and equipment into an additional class – improvements.

Accounting Policy

Acquisition of Assets

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.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

11. PROPERTY, PLANT & EQUIPMENT (continued)

Accounting Policy (continued)

Acquisition of Assets (continued)

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.

Recognition Thresholds for Property, Plant and Equipment

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.

Revaluations of Non-Current Physical Asset

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 (refer also to an explanation later in this note regarding the impact of different methods of accounting for accumulated depreciation and accumulated impairment losses in conjunction with revaluations).

In respect of the abovementioned asset classes, the cost of items acquired during the financial year has been judged by management of the Foundation to materially represent their fair value at the end of the reporting period.

Plant and equipment and improvements are measured at cost in accordance with the Non-Current Asset Policies. The carrying amounts for such plant and equipment at cost should not materially differ from their fair value.

Separately identified components of assets are measured on the same basis as the assets to which they relate.

Property, plant and equipment classes measured at fair value (refer above) are revalued on an annual basis 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 Business Manager, who determines the specific revaluation practices and procedures. The Business Manager undertakes annual reviews of the revaluation practices (after each year's revaluation exercise), and reports to the Foundation's Board regarding the outcomes of, and recommendations arising from, each annual review.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

11. PROPERTY, PLANT & EQUIPMENT (continued)

Accounting Policy (continued)

Revaluations of Non-Current Physical Asset (continued)

Revaluations using independent professional valuer or internal expert appraisals are undertaken at least once every five years. However, 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).

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.

Where assets have not been specifically appraised in the reporting period, their previous valuations are materially kept up-to-date via the application of relevant indices. The Foundation ensures that the application of such indices results in a valid estimation of the assets' fair values at reporting date. The State Valuation Service (SVS) supplies the indices used for the various types of assets. Such indices are either publicly available, or are derived from market information available to SVS. SVS provides assurance of their robustness, validity and appropriateness for application to the relevant assets. Indices used are also tested for reasonableness by applying the indices to a sample of assets, comparing the results to similar assets that have been valued by an independent professional valuer or internal expert, and analysing the trend of changes in values over time. Through this process, which is undertaken annually, management assesses and confirms the relevance and suitability of indices provided by SVS based on the Foundation's own particular circumstances.

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.

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'; and
- 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'.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

11. PROPERTY, PLANT & EQUIPMENT (continued)

Accounting Policy (continued)

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.

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

Class	Rate %
Buildings	2.5
Plant and equipment:	
Motor vehicles	25 - 33.3
Leasehold improvements	2 - 20
Other equipment	10 - 20

Where assets have separately identifiable components that are subject to regular replacement, these components are assigned useful lives distinct from the asset to which they relate and are depreciated accordingly.

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.

Major spares purchased specifically for particular assets are capitalised and depreciated on the same basis as the asset to which they relate.

Impairment

All non-current physical [and intangible assets where applicable] are assessed for indicators of impairment on an annual basis. If an indicator of possible impairment exists, the Foundation determines the asset's recoverable amount. Any amount by which the asset's carrying amount exceeds the recoverable amount is recorded as an impairment loss.

The asset's recoverable amount is determined as the higher of the asset's fair value less costs to sell and depreciated replacement cost.

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.

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

11. PROPERTY, PLANT & EQUIPMENT (continued)

Accounting Policy (continued)

Impairment (continued)

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.

When an asset is revalued using either a market or income valuation approach, any accumulated impairment losses at that date are eliminated against the gross amount of the asset prior to restating for the revaluation.

Fair Value Measurement

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.

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, recent sales of similar properties.

Unobservable inputs are data, assumptions and judgements that are not available publicly, but are relevant to the characteristics of the assets/liabilities being valued. No significant unobservable inputs are used by the Foundation. Unobservable inputs would be used where sufficient relevant and reliable observable inputs are not available for similar assets/liabilities.

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.

As the land and buildings acquired by the Foundation were purchased in March 2016 the Board have determined that cost materially represents fair value.

Property Plant and Equipment Reconciliation

	Land	Buildings	Improve- ments	Plant & Equipment	Total
	\$	\$	\$	\$	\$
Carrying amount at 1 July	-	-	345,795	37,281	383,076
Acquisitions	116,524	161,315	-	5,244	283,083
Depreciation	-	(1,171)	(35,715)	(8,633)	(45,519)
Disposals	-	-	-	(3,062)	(3,062)
Total	116,524	160,144	310,080	30,830	617,578

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

	2016	2015
	\$	\$
12. PAYABLES		
Trade and other creditors	54,130	52,433
GST liability	35,460	22,405
PAYG withholding payable	5,830	6,648
Accrued expenses	17,736	25,115
Total	113,156	106,601

Accounting Policy

Trade creditors 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	-	5,431
Total	-	5,431

14. ACCRUED EMPLOYEE BENEFITS

Current

Annual leave	44,808	43,765
Long service leave	28,396	42,477
Total	73,204	86,242

Non-Current

Long service leave	11,044	4,573
Total	11,044	4,573

Number of employees at year end	6	6
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TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

15. CONTINGENCIES

There were no contingent liabilities of any significance at balance date (2015:\$NIL).

16. COMMITMENTS FOR EXPENDITURE

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 2016 the outstanding grants commitment was \$457,571 (2015: \$271,386).

17. FINANCIAL INSTRUMENTS

Recognition

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

Classification

Financial instruments are classified and measured as follows:

- Cash and cash equivalents - held at fair value through profit or loss
- Receivables - held at amortised cost
- Payables - held at amortised cost

The Foundation does not enter into transactions for speculative purposes, nor for hedging. The Foundation holds no financial assets classified at fair value through profit or loss.

18. OTHER INFORMATION

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.

Leases

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.

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). GST credits receivable from, and GST payable to, the ATO are recognised (refer to Note 12).

TOOWOOMBA HOSPITAL FOUNDATION
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2016

18. OTHER INFORMATION (continued)

Taxation (continued)

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. Receivables and payables in the Statement of Financial Position are shown inclusive of GST.

Accounting Estimates and Judgements

The preparation of financial statements necessarily requires the determination and use of certain critical accounting estimates, assumptions, and management judgements that have the potential to cause a material adjustment to the carrying amounts of assets and liabilities within the next financial year. Such estimates, judgements and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised and in future periods as relevant.

Estimates and assumptions that have a potential significant effect are outlined in the following financial statement note:

Property, Plant & Equipment – Note 11

Accrued employee benefits – Note 14

Rounding and Comparatives

Amounts included in the financial statements are in Australian dollars and have been rounded to the nearest \$1 unless disclosure of the full amount is specifically required.

Comparative information has been restated where necessary to be consistent with disclosures in the current reporting period.

TOOWOOMBA HOSPITAL FOUNDATION

CERTIFICATE OF THE 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 2016, and of the financial position of the Toowoomba Hospital Foundation at the end of that year.
- (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 First day of September 2016

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

Report on the Financial Report

I have audited the accompanying financial report of the Toowoomba Hospital Foundation, which comprises the statement of financial position as at 30 June 2016, 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.

Board's Responsibility for the Financial Report

The Board is responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards and for such internal control as the Board determines is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on the financial report based on our audit. The audit was conducted in accordance with Australian Auditing Standards. Those standards require that I comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance about whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error.

In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report 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 entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial report.

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

Independence

In conducting my audit, I have complied with the independence requirements of the Australian professional ethics requirements.

Opinion

In my opinion:

the financial report presents fairly, in all material respects, the financial position of the Toowoomba Hospital Foundation as at 30 June 2016, and its financial performance and its cash flows for the year then ended in accordance with Australian Accounting Standards.

Other Matters – Electronic Presentation of the Audited Financial Report

The audit report relates to the financial report of the Toowoomba Hospital Foundation for the year ended 30 June 2015. Where the financial report is included on the Toowoomba Hospital Foundation's website the Board is responsible for the integrity of the Toowoomba Hospital Foundation's website. I have not been engaged to report on the integrity of the Toowoomba Hospital Foundation's website. The audit report refers only to the subject matter described above. It does not provide an opinion on any other information which may have been hyperlinked to/from these statements or otherwise included in the report. If users of the financial report are concerned with the inherent risks arising from the publication on a website, they are advised to refer to the hard copy of the audited financial report to confirm the information contained in this website version of the financial report.

These matters also relate to the presentation of the audited financial report in other electronic media including CD rom.


TIM DAVIS

26 August 2016
Toowoomba



TOOWOOMBA
HOSPITAL
foundation

TOOWOOMBA HOSPITAL FOUNDATION

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