

**Far North Queensland Hospital Foundation**

**2014 Annual Report**

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## GENERAL INFORMATION

These financial statements cover the Far North Queensland Hospital Foundation.

The Far North Queensland Hospital Foundation is a Hospital Foundation established under the *Hospitals Foundations Act 1982*.

The Far North Queensland Hospital Foundation is controlled by the State of Queensland.

The head office and principal place of business of the Far North Queensland Hospital Foundation is:

Ground Floor  
Block E  
Corner Grove & Digger Streets  
CAIRNS QLD 4870

A description of the Foundation's objectives and principal activities is included in the notes to the financial statements.

For information in relation to the Foundation's financial statements please call (07)4226 6634, email [ceo@fnqhf.org.au](mailto:ceo@fnqhf.org.au) or visit the Foundation website [www.fnqhf.org.au](http://www.fnqhf.org.au)

Amounts shown in these financial statements may not add to the correct sub-totals or totals due to rounding.

## INTERPRETER SERVICE

If you have difficulty in understanding the Annual Report, you can contact us and we will arrange an interpreter to effectively communicate the report to you.

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**COMPLIANCE LETTER**

26 August 2014

The Honourable Lawrence Springborg MP  
Minister for Health  
Level 19, Queensland Health Building,  
147-163 Charlotte Street  
BRISBANE QLD 3000

Dear Minister

I am pleased to present the Annual Report 2013-2014 and financial statements for the Far North Queensland 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*.

Further, to the best of the knowledge of this Board, during the course of the last financial year there have been no breaches by the Far North Queensland Hospital Foundation of the *Hospitals Foundations Act 1982* or other applicable legislation.

A checklist outlining the annual reporting requirements can be found on pages 13 & 14 of this report.

Yours sincerely,



Dr Ken Chapman  
Chairman  
**Far North Queensland Hospital Foundation**

## ABOUT THE FOUNDATION

The Far North Queensland Hospital Foundation was established on March 21, 1997 under the provisions of the *Hospitals Foundations Act 1982*. As such it has all of the objects, functions and powers set down in the *Hospitals Foundations Act 1982* and various other Acts of Parliament.

The Foundation is a non-profit, charitable organisation that endeavours to assist the activities and services of the Cairns Hospital and Cairns and Hinterland Hospital and Health Service.

### Vision

“Superior Health Care in Far North Queensland”

### Mission

“To contribute to improvement in the quality of health care in Far North Queensland through the funding of modern equipment, facilities, education, training and research and through the provision of support services.”

### Principal Activities

- Fund the purchase of state-of-the-art equipment and establishment of first class health related facilities
- Assist in the establishment of Far North Queensland as a centre of excellence in health services by funding, supporting and encouraging education and research
- Provide support services for the patients and staff.

### Friends of the Foundation

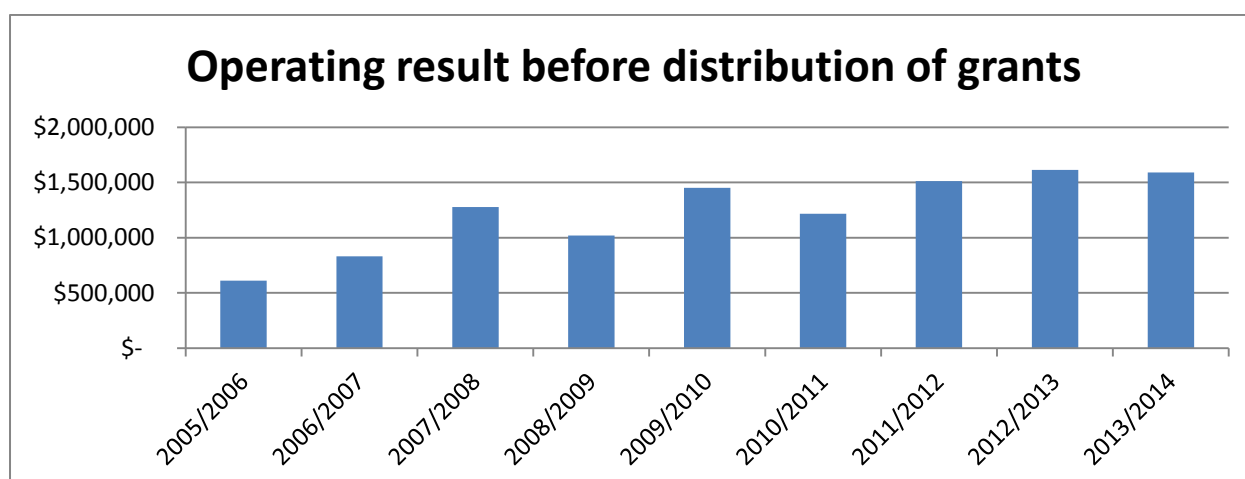
The community based activities are undertaken under the banner of the Friends of the Foundation.

The "Friends" are an active volunteer group who have an interest in aiding the Foundation in its objective. The "Friends" have branches in the following locations: Cooktown, Cow Bay, Mareeba, Gordonvale, Babinda and Innisfail.

## THE YEAR IN REVIEW

The 2013-14 financial-year proved to be another successful year for the Far North Queensland Hospital Foundation.

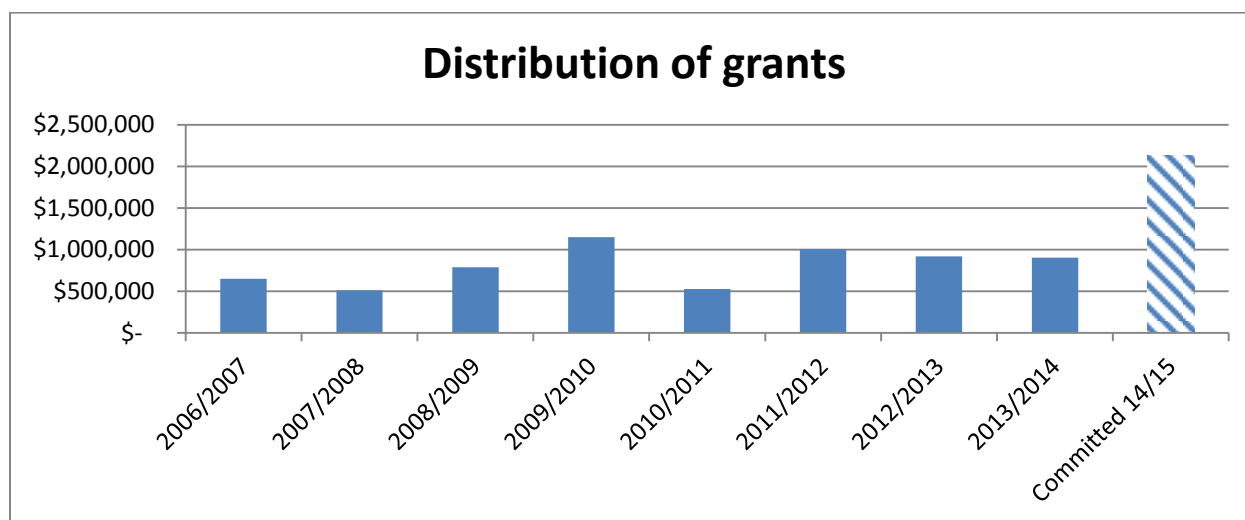
Revenue from continuing operations totalled \$3.8 million, representing an increase of 2.4 percent on the previous year's result of \$3.7 million.



The Foundation posted an operating surplus, before distribution of grants, of \$1.59 million – which was slightly below the previous year's result of \$1.61 million.

The Foundation's strong financial performance ensured that it achieved the main objective of the organisation's Strategic Plan – to grow and maximise the benefits of the principal activities that appear on page four of this report.

The Foundation's grant funding totalled \$0.9 million which was in line with the previous year's figure of \$0.9 million. However, the Foundation has committed in excess of \$2.1 million in 2014-15 to cover the Paediatric Playground Project, the Foundation's contribution of \$0.7 million towards the purchase of a new PET/CT Scanner, and \$134,000 has been set aside to fund the electronic ultrasound mapping software Viewpoint for Obstetrics/Medical Imaging at Cairns Hospital.



The Foundation made a number of significant contributions during the course of 2013-14, including the purchase of a STORZ Navigation System, an innovative optical-based image guidance machine, designed specifically to aid in ear, nose and throat surgeries at Cairns Hospital at a cost of \$100,000.

The Foundation also funded the purchase of a \$78,000 point of care ultrasound tool for the Cairns Hospital Cardiology Unit.

In addition, the Foundation spent \$68,000 of cardiac monitoring equipment for the East Ward at Mareeba Hospital, bought three VersaCare and two CareAssist beds at a cost of \$47,000 for the Oncology Unit at Cairns Hospital and funded two dialysis machines for the Cooktown Renal Service at a cost of \$31,000.

The Foundation once again funded the annual research small grant awards with 12 successful applicants sharing in a total of \$33,000 in grant funding.

The Foundation's fundraising team worked tirelessly to fulfil the strategic objective of increasing fundraising income albeit to fall short of last year's result by \$26,000. The result was \$1.23 million (revenue before direct costs) which was 2% down on the previous year's result of \$1.26 million.

The Foundation faces some real challenges in maintaining and increasing its fundraising income each year. At times fundraising is difficult to predict and budget given that third party fundraisers can come and go. There is no certainty that third party events will remain on the calendar each year and the Foundation relies on these events to boost revenue.

For example, the Swisse Color Run that took place in Cairns on July 28, 2013 and raised \$32,000 for the Foundation will not return in 2014.

Additionally, the Foundation faces stiff competition from other charities. The Ironman triathlon event that is held in Cairns annually recently chose a different charity to be their charity partner, something the Foundation had secured in the events first three years.

The continued achievements of the wonderful Friends of the Foundation groups ensured that the Foundation met another objective – to continue to expand services throughout Far North Queensland. This achievement also enabled the Foundation to demonstrate its support of the Queensland Government's values, including the desire to improve health outcomes for Queenslanders by providing better healthcare in the community and empowering local communities with a greater say in their hospital and local health services.

## Volunteer Services

The Foundation's Volunteer Program is now in its 25<sup>th</sup> year. Our volunteer team continues to be the foundation stone of commercial and fundraising activities, and support services to patients, visitors and staff at the Cairns Hospital, as well as a number of other hospitals and clinics in the Cairns and Hinterland Hospital and Health Service. We are extremely fortunate to be able to count on these people to donate their time and skills to help the Foundation achieve its vision.

The scope of volunteer activities is truly impressive. Their services at the Cairns Hospital alone include staffing the hospital information desk; assisting in the Cardiac conditioning program; coordinating the Paediatric Playscheme Program; helping with food and beverage services to patients and visitors in the Liz Plummer Cancer Care Centre; providing clerical and administrative support services; and generally assisting wherever possible.

During the course of 2013-14, around 140 Foundation volunteers contributed more than 23,506 hours of unpaid labour to the Cairns Hospital. Hundreds more Foundation volunteers lent their support to fundraising events during the year, devoting a total of around 6,972 hours.

## Friends of the Foundation

Community-based fundraising activities are organised under the banner of the Friends of the Foundation.

The Friends are an active and growing network of volunteer groups, with branches in Cooktown, Cow Bay, Mareeba, Gordonvale, Babinda and Innisfail.

Collectively, they have raised more than \$181,000 towards the improvement of healthcare services in their respective communities. During the year, they funded the purchase of:

- A tonometer for the Cooktown Hospital
- Five Connex vital signs monitors complete with mobile stands for the Innisfail Hospital
- Portable blood pressure machine, scales, ophthalmoscope, otoscope and foetal dopplers to support the commencement of the Innisfail Midwives implementing the Innisfail Midwifery Group Practice model at the Innisfail Hospital
- Two Masimo Radical-7 pulse oximeters for the Innisfail Hospital
- Three deluxe alloy wheelchairs for the Innisfail Hospital
- Two Dalcross electronic recovery recliners for Day Surgery at the Innisfail Hospital
- A hand held AV400 AccuVein vein illumination machine for the Innisfail Hospital
- A Honda hedge cutter for the Gordonvale Hospital
- A Dell projector for the Gordonvale Hospital
- Five ActiveCare transit wheelchairs for the Gordonvale Hospital
- Three Breakdown electric beds for the Gordonvale Hospital
- Materials for the construction of a bridge for the Rehabilitation Unit at Mareeba Hospital
- A Thomas EMS Paediatric Pack for the Cow Bay Clinic

## Commercial Operations

The Foundation operates a number of profitable commercial businesses, which enable the organisation to cover its administration and operating expenses, and at the same time maximise the funds available for donation back into healthcare services.

During the past year, the Sea Breeze Café, Block E car park, television service and telephone system continued to ensure that patients and visitors to the Cairns Hospital received quality services that enhanced their comfort.

Growth of 5 percent boosted the revenue from our commercial operations to a total of \$2.3 million (revenue before direct costs).

- **Sea Breeze Café**

The Sea Breeze Café provides quality food and retail services to patients, staff and visitors to the Cairns Hospital, from its scenic location opposite the Cairns Esplanade. At the same time, it generates substantial funds that are used

to improve healthcare services in the region. The café, which boasts both indoor and outdoor dining areas that can cater for up to 60 people, has indeed become an integral part of the hospital's social life.

- **Vending Machines**

The Foundation coordinates the placement of a range of food and beverage vending services, including soft drink machines, coffee machines and snack food machines. The Foundation also manages the Automatic Teller Machine located at the hospital.

- **Cairns Hospital Block E Car Park**

The Foundation manages the Block E car park at the Cairns Hospital. With 667 car parking spaces, including 24 spaces reserved for people with a disability, the car park provides a crucial service to both hospital staff and visitors.

The parking fee represents a minor outlay in return for the security and ease of parking on site at the hospital. The car park is equipped with video surveillance which is particularly appreciated by hospital staff that finish their shifts at night or during the early hours. The car park also accommodates a large number of hospital pool vehicles, which ensure staff quick and easy access to transport.

- **Television Hire Service**

The Foundation installed and now operates an integrated multi-access television system throughout the Cairns Hospital. The self-access system allows patients to view their televisions without the assistance of hospital staff. A Foundation staff member visits patients daily to ensure prompt service and collect rental payments. The television hire service is widely appreciated by patients.

## **Fundraising**

As previously mentioned the Foundation covers all its administration and operating expenses from the profits generated by the organisation's commercial businesses, including the Sea Breeze Cafe and the Block E hospital car park. This means that 100 percent of monies donated to the Far North Queensland Hospital Foundation are guaranteed to be used for the purpose intended.

The Foundation has forged a number of strong and rewarding relationships with individuals, local businesses and service organisations that recognise the importance of the Foundation's goals and have been motivated to provide monetary and in-kind donations to help the charity achieve those goals.

## **ACHIEVING OUR AIMS**

During the past year, the Foundation has pursued its Vision to provide "Superior Health Care in Far North Queensland", through the donation of more than \$900,000 towards healthcare services in this region.

This figure was supplemented by the incalculable value of the many services and tasks undertaken by the Foundation's volunteer team, as well as its staff. Many of the services provided by the Foundation have become an integral part of hospital life. One can only imagine the total financial value of these services to the community, if they were costed appropriately.

The Foundation's major purchases this year included:

- A Clinitek Status Plus urine chemistry analyser for the Orthopaedic Ward, Cairns Hospital
- Six Connex vital signs monitors complete with mobile stands for the Orthopaedic Ward, Cairns Hospital
- A hand held AV400 AccuVein vein illumination machine for the Surgical Ward, Cairns Hospital
- A STORZ Navigation System to aid in ear, nose and throat surgeries, Cairns Hospital
- Two Ditto diversionary therapy consoles for the Emergency Department, Cairns Hospital
- Two MAC 5500 electrocardiographs for the Emergency Department, Cairns Hospital
- Four televisions for the rooming-in rooms in the Special Care Nursery, Cairns Hospital
- A linear probe for the Cardiology Unit, Cairns Hospital
- A point of care ultrasound tool for the Cardiology Unit, Cairns Hospital
- Three VersaCare beds for the Oncology Ward, Cairns Hospital
- A Connex Integrated Wall System vital signs monitor for the Oncology Ward, Cairns Hospital

- Two Care Assist beds for the Oncology Ward, Cairns Hospital
- A Righton Retinomax K-Plus 3 Refractor/Kearatometer for the Ophthalmology Department, Cairns Hospital
- Two EndoStratus Co2 insufflators and one EndoGator foot pump for the Endoscopy Unit, Cairns Hospital
- Four deluxe air comfort chair/tilt beds for Medical 5 Ward, Cairns Hospital
- A hand held AV400 AccuVein vein illumination machine for the Blood Collection Area, Cairns Hospital
- An OPMI pico diagnostic microscope for the ear, nose and throat clinic - Specialist Surgical Outpatients Department, Cairns Hospital
- Two hundred polo shirts in support of the Hand Hygiene Auditor program for the Infection Control Department, Cairns Hospital
- Two dialysis machines for the Cooktown Renal Service, Cooktown Hospital
- Four televisions complete with brackets and headphones for the Yarrabah Renal Unit, Yarrabah Hospital
- Two Monark arm rehab trainer bike ergometers, a Sportsart recumbent bike and a Sportsart upright bike for the Cardiac and Pulmonary Rehabilitation Units, Innisfail and Tully Hospitals
- A Tourniquet 9000 table unit with adult and paediatric silicone cuffs for the Atherton Hospital
- The equipment, installation and commissioning costs associated with the cardiac monitoring equipment for the East Ward, Mareeba Hospital
- A BiliSoft LED phototherapy system for the Maternity-Paediatrics Ward, Mareeba Hospital

The Foundation also funded the following:

- Rapid Access Chest Pain Clinic in the Cardiology Unit, Cairns Hospital
- The production of an educational DVD about angiogram/stent and cardiac surgery for the Cardiology Unit, Cairns Hospital
- Provided a scholarship grant to a Cairns Hospital Intensive Care employee to enrol in a graduate certificate course in intensive care nursing
- Provided a scholarship grant to a Cairns Hospital Intensive Care employee to enrol in a graduate certificate course in acute care nursing
- Contributed to the associated travel and course costs for a Cairns Sexual Health employee to attend a three-day pap smear provider course in Brisbane
- Contributed to the associated travel and course costs for a Gordonvale Hospital social worker to attend a dignity therapy workshop in Brisbane
- The annual Small Research Grants program
- Rental fees and the commissioning/decommissioning of the Vitalcall alarm service for numerous palliative care patients

## BOARD OF MEMBERS AND GOVERNANCE

Members of the Foundation, who are appointed by the Governor in Council under section 20 of the *Hospitals Foundations Act 1982*, are drawn from the business, medical and university communities.

The Board of the Foundation has 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.

### Board of Members – Role and Responsibility

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 responsibilities of the Board include:

- reviewing and approving strategic plans, business plans, the annual budget and financial plans, including available resources and major capital expenditure initiatives
- making decisions in relation to matters of a sensitive, extraordinary or strategic nature
- monitoring and assessing management's performance in achieving any strategies and budgets approved by the Board



- ensuring best practice corporate governance
- reviewing and approving applications for significant funding: equipment, facility enhancement, and research and education
- reviewing and approving annual statutory accounts and other reporting and monitoring financial results on an ongoing basis
- providing advice and counsel to management on a periodic and ad hoc basis
- appointing and where appropriate removing the Chief Executive Officer and approving succession plans
- ratifying the appointment and, where appropriate the termination of the direct reports to the Chief Executive Officer
- monitoring the performance of the Chief Executive Officer and senior management and approving remuneration policies and practices for such Chief Executive Officer and senior management
- enhancing and protecting the reputation of the Foundation
- reporting to the Minister for Health
- ensuring appropriate compliance frameworks and controls are in place and are operating effectively
- approving and monitoring the effectiveness of and compliance with policies governing the operations of the Foundation
- monitoring compliance with regulatory requirements and ethical standards
- monitoring the integrity of internal control and reporting systems and the findings of audits undertaken on an annual basis

### Board of Members – Appointment Criteria

The selection of candidates for membership of the Foundation takes into account the requirements and recommendations of section 18 of the *Hospitals Foundations Act 1982*, and any additional requirements of the Minister. The Foundation's membership currently comprises:

- the nominee of the chairperson of the Cairns and Hinterland Hospital and Health Service Board
- a practising hospital clinician
- senior persons from the James Cook University School of Medicine and Dentistry
- the CE and CFO of the Cairns and Hinterland Hospital and Health Service
- members with a strong commercial background
- members with strong accounting and finance skills
- members with strong legal skills
- members with strong community and fundraising expertise
- overall appropriate experience and gender diversity

### Board of Members – Term and Basis of Appointment

Name	Term	Basis of Appointment
Dr Ken Chapman MB BS (Qld) FAICD FAIM AFRACMA Chairman	Appointed 21 July 2011 Expires 21 July 2015	Dr Chapman is the Chief Executive Officer of Skyrail-ITM and executive director of the Chapman Group of Companies and has experience as a Director, Chairman and President of a number of Boards and Associations including Director of Amalgamated Holdings Limited.
Mr Charles Marino LLB FAICD Deputy Chairman	Appointed 21 July 2011 Expires 21 July 2013 Reappointed 2 August 2013 Expires 2 August 2017	Mr Marino is the Managing Partner of the law firm Marino Moller Lawyers Cairns.
Mr Graham Coonan BCom. FCA Deputy Chairman	Appointed 21 July 2011 Expires 21 July 2013 Reappointed 2 August 2013 Expires 2 August 2015 Resigned 18 March 2014	Mr Coonan is a senior partner of accounting firm KPMG and is responsible for the firm's Cairns audit practice.
Ms Patricia Bailey Board Member	Appointed 21 July 2011 Expires 21 July 2013 Reappointed 2 August 2013 Expires 2 August 2015	Ms Bailey is the Operations Manager and special events co-ordinator for the Cairns District Rugby League.

Ms Julie Hartley-Jones CBE Board Member	Appointed 21 July 2011 Expires 21 July 2015	Ms Hartley-Jones is the Chief Executive of the Cairns and Hinterland Hospital and Health Service.
Professor William McBride MB BS DTM&H FRACP FRCPA PhD Board Member	Appointed 21 July 2011 Expires 21 July 2015	Professor McBride is Head of James Cook University's School of Medicine clinical campus at the Cairns Hospital. He is an Infectious Diseases Specialist and Clinical Microbiologist.
Mr Robert McGill Board Member	Appointed 21 July 2011 Expires 21 July 2015	Mr McGill has been a proactive member in the Cairns community for over 40 years. He was joint Citizen of the Year (Cairns) 2008, is Deputy Chair of COUCH, a life member of Apex Australia, and a past President of the Rotary Club of Cairns.
A/Professor Jane Mills PhD RN MN Med BN FACN Board Member	Appointed 21 July 2011 Expires 21 July 2015	A/Professor Mills is Director of the Centre for Nursing and Midwifery Research at James Cook University and is recognised nationally and internationally for her achievements in nursing education and research.
Mr Steve Russell Board Member	Appointed 21 July 2011 Expires 21 July 2013 Reappointed 2 August 2013 Expires 2 August 2017	Mr Russell is a past member and Chair of the Innisfail and Cairns District Health Councils and is a long term community and health advocate.
Mr Mario Calanna B Pharm FACP FAIM MAACP MAICD Board Member	Appointed 14 June 2013 as Hospital and Health Service Board Chairperson's nominee	Mr Calanna is Cairns Hospital and Health Service appointee. He is a Pharmacist and CEO of Calanna Pharmacy Group, Fellow of Australian College of Pharmacy, Director of Pharmacy Guild Qld Branch and member and past President of Cairns Rotary Southside. He was City of Cairns Volunteer of the Year in 2004 and Australian Institute of Management Owner/Manager state winner in 2006.

Mr John Slaven is the Foundation's secretary and is Chief Finance Officer of the Cairns and Hinterland Hospital and Health Service.

During the year, six meetings of the Foundation were held.

Name	Number Eligible to Attend	Number Attended
K Chapman	6	5
G Coonan	4	4
P Bailey	6	5
J Hartley-Jones	6	3
C Marino	6	6
W McBride	6	6
R McGill	6	4
J Mills	6	5
S Russell	6	6
M Calanna	6	6

### Risk Management and Internal Audit Function

The Hospital Foundation has a robust financial management system and a safe work culture and it continues to work to the objective of maintaining and improving its good governance standards. The Foundation's track record is good and the organisation has an unblemished history in regards to the annual audit process, having never received a qualified audit.

The Foundation Board and senior management are committed to mitigating the risk of unacceptable costs or losses associated with the operations of the Foundation and managing the risks that may affect the ability of the Foundation to continue to provide services.

The Foundation Board has deemed it inappropriate to establish an internal audit function due to:

- relatively small size of the Foundation
- since inception in 1997 the Foundation has never received a qualified audit
- when the issue of internal audit function has been referred to the Queensland Audit Office appointed auditor they have advised that they believe it not necessary due to the size of the Foundation
- the Foundation has well developed financial systems that operate efficiently, effectively and economically
- the existing governance structure and meeting schedule remains adequate

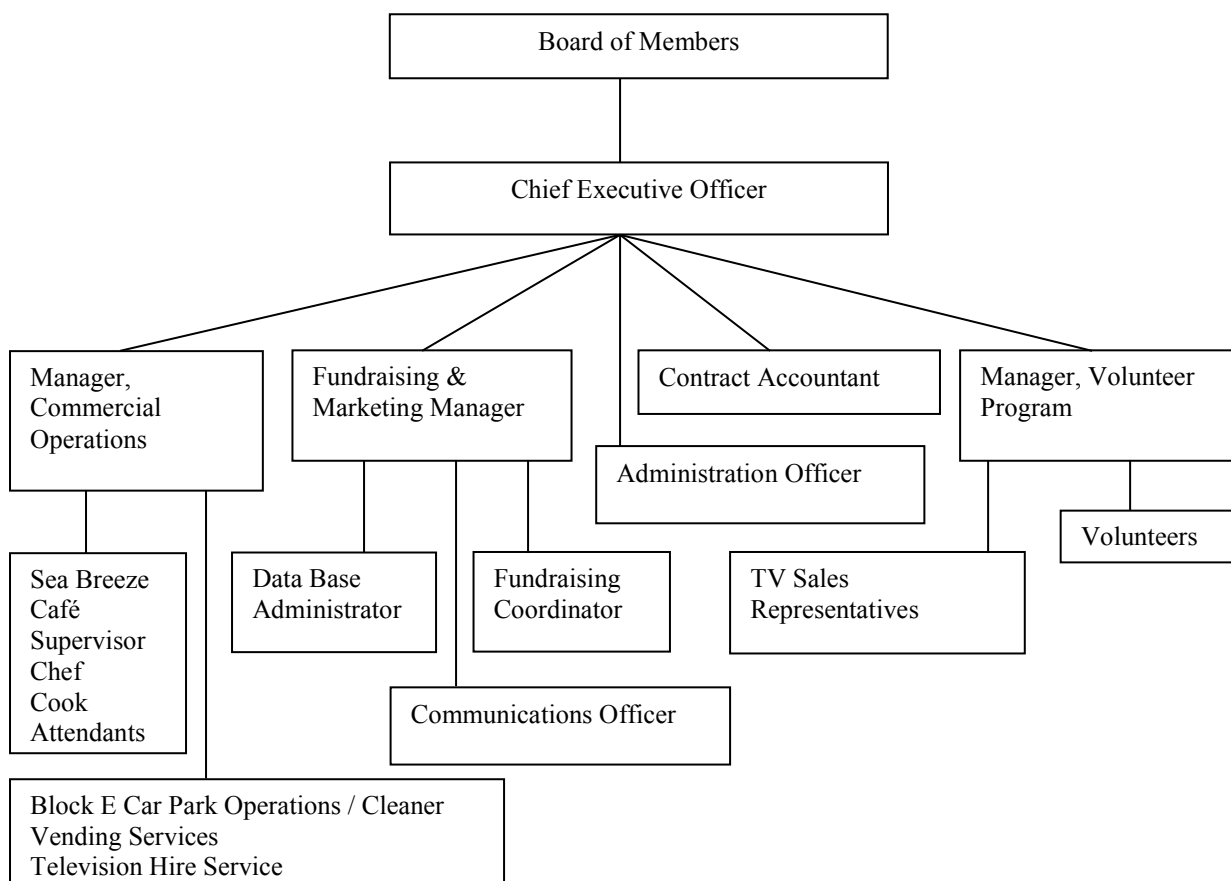
The Foundation established an Audit Committee on April 29, 2014 to assist with the review and compilation of the annual statutory account process.

### Information Systems and Record Keeping

The Foundation complies with the provisions of the *Public Records Act 2002, Information Standard 40: Record Keeping and Information Standard 31: Retention and Disposal of Public Records*.

## HUMAN RESOURCES

### Foundation Organisational Chart



### Senior Management Team

#### Tony Franz

Chief Executive Officer – joined the Foundation in February 2004

Responsibilities: to provide the Foundation with executive and strategic leadership, and operational management, including responsibility for managing progress towards achievement of the Foundation’s vision, objectives and strategic directions.

**Steve McGuinness**

Manager, Commercial Operations – joined the Foundation in June 2009

Responsibilities: to manage and administer the Foundation’s commercial operations in support of the Foundation’s objectives including the development of strategies and implementation of approved plans so as to advance the profitability of the Foundation’s commercial departments.

**Glenys Duncombe**

Fundraising and Marketing Manager – joined the Foundation in September 2004

Responsibilities: to develop and maintain relationships with communities, groups and individuals relevant to the Foundation and to develop and manage fundraising and marketing projects and activities that will benefit the Foundation.

**Anne Chirio**

Manager, Volunteer Program – joined the Foundation in June 2003

Responsibilities: to manage, administer and monitor the Volunteer Program in support of the Foundation’s objectives so as to advance the profile and services provided by the Foundation.

**Workforce**

The Foundation has a very committed team comprising of both staff and volunteers who are focused on achieving the Foundation’s vision, mission and strategic objectives. At June 30, 2014, the Foundation had 19 employees employed on a full-time equivalent basis.

The Foundation’s staff retention is very good which is indicative in the senior management team having a combined 36 years of service at the organisation.

To ensure 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.

The Foundation is committed to assisting staff balance their work and personal commitments.

**Redundancy**

A program of redundancies was implemented in June 2014 of which two employees received redundancy packages which totalled \$5,322.

The redundancies were necessary as the television hire service terminated as a result of the redevelopment of the Cairns Hospital. The decant of patient from Blocks A & B to the newly developed Block D where there are no television installed resulted in the redundancies of two part-time retail employees.

**PUBLIC SECTOR ETHICS ACT 1994**

The Foundation has established a Code of Conduct which applies to Board members and senior executives of which was formally approved by the Hon Lawrence Springborg Minister for Health on March 27, 2013. The Code was again tabled at the February 12, 2014 Board meeting for review and evaluation.

Foundation senior management have signed a copy of the Code of Conduct that states that they have read, understood and accept the Code and this can be found on their personal file.

The Foundation has adopted the Queensland Government Code of Conduct for all other employees and volunteers of which is signed by the individual stating that they have read, understood and accept the Code and this can be found on their personal file.

**OPEN DATA**

<b>Consultancy category</b>	<b>Total Expenditure</b>
Financial and Accounting	\$13,500
Communication	\$2,978
<b>Total Consultancy</b>	<b>\$16,478</b>

During the course of the 2013-14 year there was no overseas travel expenditure.

## Compliance Checklist – Annual Report

Summary of requirement		Basis for requirement	Annual report reference page
Letter of compliance	<ul style="list-style-type: none"> <li>A letter of compliance from the accountable officer or statutory body to the relevant Minister</li> </ul>	ARRs – section 8	3
Accessibility	<ul style="list-style-type: none"> <li>Table of contents</li> <li>Glossary</li> </ul>	ARRs – section 10.1	2
	<ul style="list-style-type: none"> <li>Public availability</li> </ul>	ARRs – section 10.2	2
	<ul style="list-style-type: none"> <li>Interpreter service statement</li> </ul>	<i>Queensland Government Language Services Policy</i> ARRs – section 10.3	2
	<ul style="list-style-type: none"> <li>Copyright notice</li> </ul>	<i>Copyright Act 1968</i> ARRs – section 10.4	2
	<ul style="list-style-type: none"> <li>Information licensing</li> </ul>	<i>Queensland Government Enterprise Architecture – Information licensing</i> ARRs – section 10.5	N/A
General information	<ul style="list-style-type: none"> <li>Introductory Information</li> </ul>	ARRs – section 11.1	2
	<ul style="list-style-type: none"> <li>Agency role and main functions</li> </ul>	ARRs – section 11.2	4-8
	<ul style="list-style-type: none"> <li>Operating environment</li> </ul>	ARRs – section 11.3	4-8
	<ul style="list-style-type: none"> <li>Machinery of Government changes</li> </ul>	ARRs – section 11.4	N/A
Non-financial performance	<ul style="list-style-type: none"> <li>Government objectives for the community</li> </ul>	ARRs – section 12.1	4-6
	<ul style="list-style-type: none"> <li>Other whole-of-government plans / specific initiatives</li> </ul>	ARRs – section 12.2	N/A
	<ul style="list-style-type: none"> <li>Agency objectives and performance indicators</li> </ul>	ARRs – section 12.3	4-5
	<ul style="list-style-type: none"> <li>Agency service areas, service standards and other measures</li> </ul>	ARRs – section 12.4	N/A
Financial performance	<ul style="list-style-type: none"> <li>Summary of financial performance</li> </ul>	ARRs – section 13.1	Financial Statements 1-3
	<ul style="list-style-type: none"> <li>Chief Finance Officer (CFO) statement</li> </ul>	ARRs – section 13.2	N/A
Governance – management and structure	<ul style="list-style-type: none"> <li>Organisational structure</li> </ul>	ARRs – section 14.1	11
	<ul style="list-style-type: none"> <li>Executive management</li> </ul>	ARRs – section 14.2	11
	<ul style="list-style-type: none"> <li>Related entities</li> </ul>	ARRs – section 14.3	N/A
	<ul style="list-style-type: none"> <li>Boards and committees</li> </ul>	ARRs – section 14.4	8
	<ul style="list-style-type: none"> <li><i>Public Sector Ethics Act 1994</i></li> </ul>	<i>Public Sector Ethics Act 1994</i> (section 23 and Schedule) ARRs – section 14.5	12

Summary of requirement	Basis for requirement	Annual report reference page	
Governance – risk management and accountability	• Risk management	ARRs – section 15.1	10
	• External Scrutiny	ARRs – section 15.2	N/A
	• Audit committee	ARRs – section 15.3	11
	• Internal Audit	ARRs – section 15.4	11
	• Public Sector Renewal Program	ARRs – section 15.5	N/A
	• Information systems and recordkeeping	ARRs – section 15.7	10
Governance – human resources	• Workforce planning, attraction and retention and performance	ARRs – section 16.1	12
	• Early retirement, redundancy and retrenchment	Directive No.11/12 <i>Early Retirement, Redundancy and Retrenchment</i> ARRs – section 16.2	12
	• Voluntary Separation Program	ARRs – section 16.3	N/A
Open Data	• Open Data	ARRs – section 17	12
Financial statements	• Certification of financial statements	FAA – section 62 FPMS – sections 42, 43 and 50 ARRs – section 18.1	Financial Statements 21
	• Independent Auditors Report	FAA – section 62 FPMS – section 50 ARRs – section 18.2	Financial Statements 22-23
	• Remuneration disclosures	<i>Financial Reporting Requirements for Queensland Government Agencies</i> ARRs – section 18.3	Financial Statements 20

FAA *Financial Accountability Act 2009* FPMS *Financial and Performance Management Standard 2009*  
ARRs *Annual report requirements for Queensland Government agencies*

**Far North Queensland Hospital Foundation  
(ABN 42 980 569 986)**

**Financial Statements**  
**For the year ended 30 June 2014**

**FAR NORTH QUEENSLAND HOSPITAL FOUNDATION**  
**ANNUAL FINANCIAL REPORT**  
**FOR THE YEAR ENDED**  
**30 JUNE 2014**



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**GENERAL INFORMATION**

These financial statements cover the Far North Queensland Hospital Foundation as an individual entity.

The Far North Queensland Hospital Foundation is a Hospital Foundation established under the *Hospitals Foundations Act 1982*.

The Far North Queensland Hospital Foundation is controlled by the State of Queensland.

The head office and principal place of business of the Far North Queensland Hospital Foundation is:

Ground Floor  
Block E  
Corner Grove & Digger Streets  
CAIRNS QLD 4870

A description of the Foundation's objectives and principal activities is included in the notes to the financial statements.

For information in relation to the Foundation's financial statements please call 07- 4226 6634, email [ceo@fnqhf.org.au](mailto:ceo@fnqhf.org.au) or visit the Foundation's website [www.fnqhf.org.au](http://www.fnqhf.org.au)

Amounts shown in these financial statements may not add to the correct sub-totals or totals due to rounding.

FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME  
FOR THE YEAR ENDED 30 JUNE 2014

	Note	2014 \$	2013 \$
<b>Income</b>			
<b>Revenue</b>			
Revenue from sale of goods	4(a)	2,326,420	2,218,539
Revenue from fundraising	4(b)	1,295,817	1,316,463
Finance income	5	166,792	169,310
Increase in market value of investments	10	15,209	9,875
<b>Total income</b>		<u>3,804,238</u>	<u>3,714,187</u>
<b>Expenses</b>			
Cost of sales	4(a)	792,686	751,788
Cost of fundraising	4(b)	184,107	178,760
Employment expenses	6	1,028,404	949,720
Supplies and services	7	153,636	143,637
Other expenses	8	28,508	30,664
Depreciation	9	26,238	47,129
<b>Total expenses</b>		<u>2,213,579</u>	<u>2,101,698</u>
<b>Operating result before distribution of grants</b>		1,590,659	1,612,489
Distribution of grants	11	<u>(901,709)</u>	<u>(918,117)</u>
<b>Operating result</b>		<u>688,950</u>	<u>694,372</u>
Other comprehensive income		-	-
<b>Total comprehensive income</b>		<u>688,950</u>	<u>694,372</u>

STATEMENT OF CHANGES IN EQUITY  
FOR THE YEAR ENDED 30 JUNE 2014

ACCUMULATED SURPLUS

<b>Balance as at 1 July</b>		4,254,526	3,560,154
Operating result		688,950	694,372
Other comprehensive income		-	-
<b>Total comprehensive income</b>		<u>688,950</u>	<u>694,372</u>
<b>Balance as at 30 June</b>	19	<u>4,943,476</u>	<u>4,254,526</u>

*The statement of comprehensive income and the statement of changes in equity are to be read in conjunction with the accompanying notes to the financial statements*

**FAR NORTH QUEENSLAND HOSPITAL FOUNDATION**

**STATEMENT OF FINANCIAL POSITION  
AS AT 30 JUNE 2014**

	Note	2014 \$	2013 \$
<b>CURRENT ASSETS</b>			
Cash and cash equivalents	12	5,107,702	4,543,343
Trade and other receivables	13	26,368	12,303
Inventories	14	<u>18,384</u>	<u>21,227</u>
<b>Total current assets</b>		<u>5,152,454</u>	<u>4,576,873</u>
<b>NON-CURRENT ASSETS</b>			
Property, plant and equipment	15	<u>311,367</u>	<u>113,176</u>
<b>Total non-current assets</b>		<u>311,367</u>	<u>113,176</u>
<b>Total assets</b>		<u>5,463,821</u>	<u>4,690,049</u>
<b>CURRENT LIABILITIES</b>			
Trade and other payables	16	<u>513,690</u>	<u>418,526</u>
<b>Total current liabilities</b>		<u>513,690</u>	<u>418,526</u>
<b>NON-CURRENT LIABILITIES</b>			
Provisions	17	<u>6,655</u>	<u>16,997</u>
<b>Total non-current liabilities</b>		<u>6,655</u>	<u>16,997</u>
<b>Total liabilities</b>		<u>520,345</u>	<u>435,523</u>
<b>Net assets</b>		<u>4,943,476</u>	<u>4,254,526</u>
<b>EQUITY</b>			
Accumulated surplus	19	<u>4,943,476</u>	<u>4,254,526</u>
<b>Total equity</b>		<u>4,943,476</u>	<u>4,254,526</u>

*The statement of financial position is to be read in conjunction with the accompanying notes to the financial statements.*

FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED 30 JUNE 2014

	Note	2014 \$	2013 \$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
<i>Inflows:</i>			
Cash receipts in the course of operations		3,858,962	3,772,846
Investment income		166,792	165,829
GST received from customers		2,396	1,117
GST input tax credits from ATO		147,228	137,508
<i>Outflows:</i>			
Cash payments in the course of operations			
Employee expenses		(1,028,407)	(949,720)
Supplies and services		(1,194,039)	(1,340,814)
Distribution of grants	11	(901,709)	(918,117)
GST paid to suppliers		(27,299)	(20,411)
GST remitted to ATO		(235,135)	(228,907)
<b>Net cash provided by from operating activities</b>	22	<u>788,789</u>	<u>619,331</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>			
<i>Outflows:</i>			
Payments for property, plant and equipment		<u>(224,430)</u>	<u>(17,209)</u>
<b>Net cash used in investing activities</b>		<u>(224,430)</u>	<u>(17,209)</u>
Net increase in cash and cash equivalents		564,359	602,122
Cash and cash equivalents at beginning of financial year		<u>4,543,343</u>	<u>3,941,221</u>
<b>Cash and cash equivalents at end of financial year</b>	12	<u><u>5,107,702</u></u>	<u><u>4,543,343</u></u>

*The statement of cash flows is to be read in conjunction with the accompanying notes to the financial statements.*

## **FAR NORTH QUEENSLAND HOSPITAL FOUNDATION**

### **NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014**

#### **1. OBJECTIVES AND PRINCIPAL ACTIVITIES OF THE FOUNDATION**

The Far North Queensland Hospital Foundation (“the Foundation”) was established on 21 March 1997 under the *Hospitals Foundations Act 1982* and is a statutory body.

The principal activities of the Foundation are to fund the purchase of state-of-the-art equipment and establishment of first class health related facilities; assist in the establishment of Far North Queensland as a centre of excellence in health services by funding supporting and encouraging education and research and provide support services for the patients and staff.

#### **2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

##### **(a) Statement of compliance**

The Foundation has prepared these financial statements in compliance with section 43 of the *Financial and Performance Management Standard 2009*.

These financial statements are general purpose financial statements and have been prepared on an accrual basis in accordance with Australian Accounting Standards and Interpretations. In addition, the financial statements comply with Treasury’s Minimum Reporting Requirements for the year ended 30 June 2014, and other authoritative pronouncements.

With respect to compliance with Australian Accounting Standards and Interpretations, the Foundation has applied those requirements applicable to not-for-profit entities, as the Foundation is a not-for-profit entity.

##### **(b) Basis of measurement**

The financial report has been prepared on the historical cost basis except for deposits and investments which are at fair value.

##### **(c) Functional and presentation currency**

The financial statements are presented in Australian dollars, which is the Foundation’s functional currency.

##### **(d) Accounting estimates and judgements**

The preparation of financial statements necessarily require 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.



## FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

### NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

#### 3. SIGNIFICANT ACCOUNTING POLICIES

The accounting policies set out below have been applied consistently to all periods presented in these financial statements.

##### (a) Cash and cash equivalents

For the purposes of the Statement of Financial Position and the Statement of Cash Flows, cash assets include all cash and cheques received but not banked at 30 June as well as deposits at call with financial institutions.

##### (b) Receivables

Trade 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 where necessary. There has been no provision for impairment as at 30 June as all receivables are collectable.

##### (c) 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 – held at amortised cost
- Deposits and investments – held at fair value through profit or loss
- Receivables – held at amortised cost
- Payables – held at amortised cost

##### (d) Inventories

Inventories are measured at the lower of cost and net realisable value. The cost of inventories is based on the first-in first-out principle, and includes expenditure incurred in acquiring the inventories and bringing them to their existing location and condition. Net realisable value is the estimated selling price in the ordinary course of business.

##### (e) Property, plant and equipment

###### *(i) Recognition and measurement*

Items of property, plant and equipment are measured at cost less accumulated depreciation and accumulated impairment losses.

Cost includes expenditures that are directly attributable to the acquisition of the asset. The cost of self-constructed assets includes the cost of materials and direct labour, any other costs directly attributable to bringing the asset to a working condition for its intended use, the costs of dismantling and removing the items and restoring the site on which they are located. Purchased software that is integral to the functionality of the related equipment is capitalised as part of that equipment.

When parts of an item of property, plant and equipment have different useful lives, they are accounted for as separate items (major components) of property, plant and equipment.

Gains and losses on disposal of an item of property, plant and equipment are determined by comparing the proceeds from disposal with the carrying amount of property, plant and equipment and are recognised net and included in the Statement of Comprehensive Income.

## FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

### NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

Items of property, plant and equipment with a cost or other value equal to or in excess of \$500 are recognised for financial reporting purposes in the year of acquisition. Items with a lesser value are expensed in the year of acquisition.

#### *(ii) Subsequent costs*

The cost of replacing part of an item of property, plant and equipment is recognised in the carrying amount of the item if it is probable that the future economic benefits embodied within the part will flow to the Foundation and its cost can be measured reliably. The carrying amount of the replaced part is derecognised. The costs of the day-to-day servicing of property, plant and equipment are recognised in expenses as incurred.

#### *(iii) Depreciation*

Depreciation is recognised in expenses on a straight-line basis over the estimated useful lives of each part of an item of property, plant and equipment.

The estimated useful lives in the current and comparative periods are as follows:

- Leasehold improvements            10 years
- Plant and equipment                5 – 10 years
- Furniture and fittings              5 - 13.3 years
- Motor vehicles                        6.67 years

Depreciation methods, useful lives and residual values are reassessed at the reporting date.

#### **(f) 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. 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.

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, but are not limited to subjective adjustments made to observable data to take account of the characteristics of the Foundation's assets/liabilities, internal control records 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.

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.

All assets and liabilities of the Foundation for which fair value is measure or disclosed in the financial statements are categorised within the following fair value hierarchy, based on the data and assumptions used in the most recent specific appraisals:

- Level 1 – represents fair value measurements that reflect unadjusted quoted market prices in active markets for identical assets and liabilities;
- Level 2 – represents fair value measurements that are substantially derived from inputs (other than quoted prices included within level 1) that are observable, either directly or indirectly; and
- Level 3 – represents fair value measurements that are substantially derived from unobservable inputs

Except for the managed investment scheme, none of the Foundation's valuations of assets and liabilities are eligible for categorisation into level 1 of the fair value hierarchy. As 2013-2014 is the first year of application of AASB 13 by the Foundation, there were no transfers of assets between fair value hierarchy levels during the period.



**(g) Impairment**

**(i) Financial assets**

A financial asset is assessed at each reporting date to determine whether there is any objective evidence that it is impaired. A financial asset is considered to be impaired if objective evidence indicates that a loss event has occurred after the initial recognition of the asset, and that the loss event had a negative effect on the estimated future cash flows of that asset that can be estimated reliably.

An impairment loss in respect of a financial asset measured at amortised cost is calculated as the difference between its carrying amount and the present value of the estimated future cash flows discounted at the original effective interest rate. Losses are recognised in finance costs and reflected in an allowance account against receivables.

Interest on the impaired asset continues to be recognised through the unwinding of the discount. When a subsequent event causes the amount of impairment loss to decrease, the decrease in impairment loss is reversed through income.

**(ii) Impairment of non-current assets**

All non-current physical and intangible assets are assessed for indicators of impairment on an annual basis. If an indicator of possible impairment exists, the Foundation determines the asset's recoverable amount. 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.

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.

**(h) Employee benefits**

Employer superannuation contributions, annual leave entitlements and long service leave entitlements are regarded as employee benefits.

Workers compensation insurance is a consequence of employing employees but is not counted in an employee's total remuneration package. It is an employee benefit, but is recognised separately as employee related expenses.

**(i) Superannuation**

Employer superannuation contributions are paid to nominated superannuation schemes. Contributions are expensed in the period in which they are paid or payable.

**(ii) Other long-term employee benefits**

The Foundation's net obligation in respect of long-term employee benefits is the amount of future benefit that employees have earned in return for their service in the current and prior periods plus related on-costs. That benefit is discounted to determine its present value, and the fair value of any related assets is deducted. The discount rate is the yield at the reporting date on AA credit-rated or government bonds that have maturity dates approximating the terms of the Foundation's obligations.

**(iii) Termination benefits**

Termination benefits are recognised as an expense when the Foundation is demonstrably committed, without realistic possibility of withdrawal, to a formal detailed plan to either terminate employment before the normal retirement date, or to provide termination benefits as a result of an offer made to encourage voluntary redundancy. Termination benefits for voluntary redundancies are recognised as an expense if the Foundation has made an offer encouraging voluntary redundancy, it is probable that the offer will be accepted, and the number of acceptances can be estimated



## FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

### NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

reliably. If benefits are payable more than 12 months after the reporting period, then they are discounted to their present value.

#### *(iv) Short-term benefits*

Short-term employee benefit obligations are measured on an undiscounted basis and are expensed as the related service is provided. As sick leave is non-vesting, an expense is recognised for this leave as it is taken.

A liability is recognised for the amount expected to be paid under short-term cash bonus plans if the Foundation has a present legal or constructive obligation to pay this amount as a result of past service provided by the employee and the obligation can be estimated reliably.

#### *(v) Key executive management personnel and remuneration*

Key executive management personnel and remuneration disclosures are made in accordance with section 5 of the Financial Reporting Requirements for Queensland Government Agencies issued by Queensland Treasury. Refer to note 24 for the disclosures on key executive management personnel and remuneration.

#### **(i) Provisions**

A provision is recognised if, as a result of a past event, the Foundation has a present legal or constructive obligation that can be estimated reliably and it is probable that an outflow of economic benefits will be required to settle the obligation. Provisions are determined by discounting the expected future cash flows at a pre-tax rate that reflects current market assessments of the time value of money and the risks specific to the liability. The unwinding of the discount is recognised as finance costs.

#### **(j) Payables**

Trade creditors are recognised upon receipt of the goods or services ordered and are measured at the nominal amount i.e. agreed purchase/contract price, gross of applicable trade and other discounts. Amounts owing are unsecured and are generally settled on 30 day terms.

#### **(k) Revenue**

##### *(i) Sales revenue*

Revenue from the sale of goods is measured at the fair value of the consideration received or receivable, net of returns and allowances. Revenue is recognised when persuasive evidence exists that the significant risks and rewards of ownership have been transferred to the buyer, recovery of the consideration is probable, the associated costs and possible return of goods can be estimated reliably, there is no continuing management involvement with the goods, and the amount of revenue can be measured reliably.

##### *(ii) Fundraising revenue*

Fundraising revenue is recognised when received. The amount and timing of receipts are dependent upon the various fundraising events conducted during the year.

#### **(l) Finance income**

Finance income comprises interest and dividend income on funds invested. Interest income is recognised as it accrues, using the effective interest method. Dividends are re-invested for additional units.

#### **(m) Lease payments**

Payments made under operating leases are recognised as expenses on a straight-line basis over the term of the lease. Lease incentives received are recognised as an integral part of the total lease expense, over the term of the lease.

The Foundation had no assets under finance lease during the current year or the previous year.



## FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

### NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

#### (n) Insurance

The Foundation's property, plant and equipment and other risks are insured and premiums are being paid on a risk assessment basis. In addition, the Foundation pays premiums to Work Cover Queensland in respect of its obligations for employee compensation.

#### (o) Income tax

The entity is a state body as defined under the Income Tax Assessment Act 1936 and is exempt from Commonwealth taxation with the exception of Fringe Benefits Tax (FBT) and Goods and Services Tax (GST).

#### (p) Issuance of financial statements

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

#### (q) Goods and services tax

Revenues, expenses and assets are recognised net of the amount of goods and services tax ("GST"), except where the amount of GST incurred is not recoverable from the Australian Taxation Office ("ATO"). In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or part of the expense.

Receivables and payables are stated with the amount of GST included. The net amount of GST recoverable from, or payable to, the ATO is included as a current asset or liability in the statement of financial position.

Cash flows are included in the Statement of Cash Flows on a gross basis. The GST components of cash flows arising from investing and financing activities which are recoverable from, or payable to, the ATO are classified as operating cash flows.

#### (r) Comparatives

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

#### (s) New and revised accounting standards

The Foundation did not voluntarily change any of its accounting policies during 2013-14. Australian Accounting Standard changes applicable for the first time for 2013-2014 are explained below.

AASB 13 *Fair Value Measurement* became effective from reporting periods beginning on or after 1 January 2013. AASB 13 sets out a new definition of "fair value", as well as new principles to be applied when determining the fair value of assets and liabilities. The new requirements apply to all of the Foundation's assets and liabilities that are measured and/or disclosed at fair value or another measurement based on fair value. The impacts of AASB 13 relate to the fair value measurement methodologies used, and financial statement disclosures made in respect of, such assets and liabilities. The potential impacts of AASB 13 relate to the fair value measurement methodologies used and financial statement disclosures made in respect of such assets and liabilities.

AASB 119 *Employee Benefits* became effective for reporting periods beginning on or after 1 January 2013. The revised standard includes changes to the definition of short-term and other long term employee benefits to clarify the distinction between the two. Following the revision, employee benefits "expected to be settled wholly" (as opposed to "due to be settled" under the superseded version of AASB 119) within 12 months after the end of the reporting period are short-term benefits and therefore not discounted when calculating annual leave liabilities. All other leave liabilities would be included as long term benefits and discounted.

The impact of discounting the annual leave liability is considered not material and therefore, the Foundation's annual leave liability continues to be valued as a short-term benefit.

AASB 1053 *Application of Tiers of Australian Accounting Standards* became effective for reporting periods beginning on or after 1 July 2013. AASB 1053 establishes a differential reporting framework for those entities that prepare general purpose financial statements, consisting of two tiers of reporting requirements – Australian



## FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

### NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

Accounting Standards (commonly referred to as “Tier 1”), and Australian Accounting Standards – Reduced Disclosure Requirements (commonly referred to as “Tier 2”). Tier 1 requirements comprise the full range of AASB recognition, measurement, presentation and disclosure requirements that are currently applicable to reporting entities in Australia. The only difference between the tier 1 and tier 2 requirements is that tier 2 requires fewer disclosures than tier 1.

AASB 1053 acknowledges the power of a regulator to require application of the tier 1 requirements. In the case of the Foundation, Treasury Department is the regulator. Treasury Department has advised that its policy decision is to require adoption of tier 1 reporting by all Queensland Government departments and statutory bodies, including the Foundation. Therefore, the release of AASB 1053 and associated amending standards has had no impact on the Foundation.

The following standards, amendments to standards and interpretations have been identified as those which will impact the foundation in the period of initial application. Except for those noted, these are available for early adoption at 30 June 2014 but have not been applied in preparing this financial report.

*AASB 9 Financial Instruments and AASB 2010-7 Amendments to Australian Accounting Standards arising from AASB 9 (December 2010) [AASB 1,3,4,5,7,101,102,112,118,120,121,127,128,131,132,136,137,139,1023 & 1038 and Interpretations 2,5,10,12,19,127]* will become effective for reporting periods beginning on or after 1 January 2017. The main impacts of these standards on the Foundation are that they will change the requirements for the classification, measurement and disclosures associated with the foundation’s financial assets. Under the new requirements, financial assets will be more simply classified according to whether they are measured in amortised cost or fair value. Pursuant to AASB 9, financial assets can only be measured at amortised cost if two conditions are met. One of these conditions is that the asset must be held within a business model whose objective is to hold assets in order to collect contractual cash flows. The other condition is that the contractual terms of the asset give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

*AASB 2011-4 Amendments to Australian Accounting Standards to Remove Individual Key Management Personnel Disclosure Requirements (AASB 124)* will become effective from reporting periods on or after 1 July 2013. This standard removes individual key management personnel disclosure requirements under AASB 124 *Related Party Disclosures*. The Foundation however, has decided to provide these additional disclosures

*AASB 2012-6 Amendments to Australian Accounting Standards-mandatory Effective Date of AASB 9 and Transition Disclosures* applies to reporting periods beginning on or after 1 January 2015. The mandatory effective date of AASB 9 *Financial Instruments* was amended to apply from 1 January 2015 instead of 1 January 2013.

*AASB 2010-7 Amendments to Australian Accounting Standards Arising from AASB 9 (December 2010)* will become effective from reporting periods beginning on or after 1 January 2015. In respect of AASB 7 *Financial Instrument Disclosure* and AASB 101 *Presentation of Financial Statements*, additional disclosures are required.

The standard will become mandatory for the Foundation’s 30 June 2016 financial statements.

All other Australian accounting standards and interpretations with future commencement dates are either not applicable to the Foundation's activities, or have no material impact on the Foundation.

FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2014

	2014 \$	2013 \$
<b>4. REVENUE</b>		
<b>(a) Revenue from sale of goods</b>		
<b>Sales revenue</b>		
Sea Breeze Cafe	1,819,169	1,721,367
Vending machines	71,090	68,243
Telephone	1,790	4,045
Television	109,216	111,652
Car park	288,166	281,900
Sundry	36,989	31,332
	<u>2,326,420</u>	<u>2,218,539</u>
<b>Cost of sales</b>		
Sea Breeze Cafe	787,736	746,181
Vending machines	3,458	2,382
Telephone	1,492	3,225
	<u>792,686</u>	<u>751,788</u>
<b>Gross profit</b>		
Sea Breeze Cafe	1,031,433	975,186
Vending machines	67,632	65,861
Telephones	298	820
Television	109,216	111,652
Car park	288,166	281,900
Sundry	36,989	31,332
	<u>1,533,734</u>	<u>1,466,751</u>
<b>(b) Revenue from fundraising</b>		
<b>Fundraising and other contributions</b>		
Fundraising for general purposes	898,532	973,306
Fundraising for specific purposes	334,421	285,764
	<u>1,232,953</u>	<u>1,259,070</u>
Volunteer service	62,864	57,393
	<u>1,295,817</u>	<u>1,316,463</u>
<b>Cost of fundraising</b>		
Fundraising	164,825	155,180
Volunteer service	19,282	23,580
	<u>184,107</u>	<u>178,760</u>
<b>Gross profit</b>		
Fundraising	1,068,128	1,103,890
Volunteer service	43,582	33,813
	<u>1,111,710</u>	<u>1,137,703</u>

**FAR NORTH QUEENSLAND HOSPITAL FOUNDATION**

**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2014**

	2014 \$	2013 \$
<b>5. FINANCE INCOME</b>		
Interest	151,832	149,342
Dividends	<u>14,960</u>	<u>19,968</u>
	<u><u>166,792</u></u>	<u><u>169,310</u></u>

**6. EMPLOYMENT EXPENSES**

Wages and salaries	946,137	838,123
Employer superannuation contributions	85,084	75,113
Workers compensation	6,032	5,850
Other	<u>(8,849)</u>	<u>30,634</u>
	<u><u>1,028,404</u></u>	<u><u>949,720</u></u>

At year-end, there were 19 (2013: 18) employees employed on a full-time equivalent basis.

**7. SUPPLIES AND SERVICES**

Consultants	16,478	17,222
Banking and merchant fees	21,469	16,145
Computer repairs and support	9,845	9,474
Cleaning	11,733	16,476
Consumables	837	479
PCard purchases	2,640	2,400
Motor vehicle operating costs	7,778	10,459
Repairs and maintenance	48,021	37,464
Printing and stationery	18,460	18,811
Security	4,228	4,203
Telephone	4,884	4,413
Other	<u>7,263</u>	<u>6,091</u>
	<u><u>153,636</u></u>	<u><u>143,637</u></u>

**8. OTHER EXPENSES**

External audit fees – Queensland Audit Office	5,000	5,500
Investment Management Fees	4,177	3,481
Insurance	<u>19,331</u>	<u>21,683</u>
	<u><u>28,508</u></u>	<u><u>30,664</u></u>

There are no non-audit services included in the external audit fees.

**9. DEPRECIATION**

Depreciation and amortisation were incurred in respect of:

Leasehold improvements	935	934
Plant and equipment	17,690	25,205
Furniture and fittings	2,795	7,701
Motor vehicles	<u>4,818</u>	<u>13,289</u>
	<u><u>26,238</u></u>	<u><u>47,129</u></u>



**FAR NORTH QUEENSLAND HOSPITAL FOUNDATION**

**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2014**

	2014 \$	2013 \$
<b>10. MARKET VALUATION OF INVESTMENTS</b>		
DDH investment access funds at beginning of year	292,958	267,162
Dividend reinvestment	10,155	15,921
Increase/(decrease) in market value	<u>15,209</u>	<u>9,875</u>
Market valuation at end of year	<u><u>318,322</u></u>	<u><u>292,958</u></u>

**11. GRANTS AND SUBSIDIES**

During the year, the Foundation funded equipment purchases and/or services as follows:

Cairns Hospital		
Emergency Medicine	26,630	10,119
Medicine	11,554	13,971
Aged Care	225	-
Intensive Care	2,869	4,255
Foetal Surveillance	3,907	3,602
Paediatrics	3,035	236,879
Women's Health	998	65,736
Sexual Health	2,058	7,266
Palliative Care	394	23,605
Liz Plummer Cancer Care Centre	5,735	12,229
Oncology	53,480	68,476
Mental Health	3,668	4,745
Renal Medicine	-	952
Cardiology	269,782	122,237
Surgery	106,839	13,606
Orthopaedics	34,765	8,288
Diabetes	14,585	21,021
Other	72,226	3,381
Physicians Fund	8,436	-
Medical 4 Clinics	-	6,230
Medical Research	1,524	17,073
Research	37,380	34,141
Sundry	10,213	7,573
Atherton Hospital	5,770	-
Cooktown Hospital - Cooktown Friends of the Foundation	9,280	35,095
Cooktown Hospital	31,367	8,720
Cow Bay Clinic - Cow Bay Friends of the Foundation	1,361	3,371
Croydon Hospital	1,500	11,254
Gordonvale Hospital - Gordonvale Friends of the Foundation	16,736	28,423
Gordonvale Hospital	-	25,071
Innisfail Hospital - Innisfail Friends of the Foundation	63,357	63,959
Innisfail Hospital	2,899	19,235
Mareeba Hospital - Mareeba Friends of the Foundation	3,940	3,267
Mareeba Hospital	75,492	-
Mossman MPHS	10,323	34,337
Tully Hospital	7,548	-
Yarrabah	<u>1,833</u>	<u>-</u>
	<u><u>901,709</u></u>	<u><u>918,117</u></u>

**FAR NORTH QUEENSLAND HOSPITAL FOUNDATION**

**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2014**

	2014 \$	2013 \$
<b>12. CASH AND CASH EQUIVALENTS</b>		
Cash on hand	58,739	36,087
Cash at bank	217,415	245,785
Deposits (at call)	4,513,226	3,968,513
Investments (Note 10)	<u>318,322</u>	<u>292,958</u>
	<u>5,107,702</u>	<u>4,543,343</u>

Deposits and managed investments schemes are held with Queensland Treasury Corporation (QTC) and DDH Graham Limited. QTC deposits are bearing floating interest rates between 3.23% and 4.17%. The investment with DDH Graham Limited is an investment access fund.

**13. TRADE AND OTHER RECEIVABLES**

**Current**

Trade debtors	<u>26,368</u>	<u>12,303</u>
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No interest is earned on amounts due from debtors. No provision for impairment during the financial year has been recognised as the amounts are fully collectible.

**14. INVENTORIES**

**Current**

P-Cards	208	360
Sea Breeze Cafe	16,346	19,126
Vending machines	1,500	1,494
Telephone system cards	<u>330</u>	<u>247</u>
	<u>18,384</u>	<u>21,227</u>

**15. PROPERTY, PLANT AND EQUIPMENT**

Leasehold improvements, at cost	309,390	309,390
Less: accumulated amortisation	<u>(308,091)</u>	<u>(307,155)</u>
	1,299	2,235
Plant and equipment, at cost	355,831	368,595
Less: accumulated depreciation	<u>(307,158)</u>	<u>(308,975)</u>
	48,673	59,620
Furniture and fittings, at cost	55,045	55,910
Less: accumulated depreciation	<u>(36,735)</u>	<u>(34,805)</u>
	18,310	21,105
Motor vehicles, at cost	66,446	66,446
Less: accumulated depreciation	<u>(41,048)</u>	<u>(36,230)</u>
	25,398	30,216
Work in progress	<u>217,687</u>	-
Total property, plant and equipment, at net book value	<u>311,367</u>	<u>113,176</u>

Plant and equipment and leasehold improvements are shown at amortised cost in accordance with Queensland Treasury's Non-Current Asset Accounting Guidelines for the Queensland Public Sector June 2005, revised February 2008.

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2014

15. PROPERTY, PLANT AND EQUIPMENT (CONTINUED)

Reconciliation

	Leasehold improvements \$	Plant and equipment \$	Furniture & fittings \$	Motor vehicles \$	WIP \$	Total \$
<b>2014</b>						
Carrying amount at 1 July	2,235	59,620	21,105	30,215	-	113,176
Acquisitions	-	6,743	-	-	217,687	224,430
Disposals	-	-	-	-	-	-
Depreciation/amortisation	(934)	(17,690)	(2,795)	(4,817)	-	(26,238)
Carrying amount at 30 June	<u>1,299</u>	<u>48,673</u>	<u>18,310</u>	<u>25,398</u>	<u>217,687</u>	<u>311,367</u>
<b>2013</b>						
Carrying amount at 1 July	3,169	67,616	18,837	43,505	-	143,096
Acquisitions	-	17,209	-	-	-	17,209
Disposals	-	-	-	-	-	-
Depreciation/amortisation	(934)	(25,205)	(7,701)	(13,289)	-	(47,129)
Carrying amount at 30 June	<u>2,235</u>	<u>59,620</u>	<u>21,105</u>	<u>30,216</u>	-	<u>113,176</u>

The Foundation has plant and equipment and furniture and fittings with an original cost of \$559,603 and a written down value of zero still being used in the provision of services at 30/06/2014. However, assets costing \$503,714 with a zero value are expected to be decommissioned when Block D is officially opened in August-September 2014 and are not expected to have any re-saleable value. Other assets are being replaced as they become unserviceable or if no longer required and are written off after the required board approval.

16. TRADE AND OTHER PAYABLES

Current

	2014 \$	2013 \$
Trade creditors	300,285	224,518
Customer deposits	40,098	33,059
Payroll liabilities	39,696	5,928
GST	10,066	24,306
Provision for employee benefits	60,457	41,103
Provision Long Service Leave	53,696	31,399
Sundry creditors and accruals	9,392	58,213
	<u>513,690</u>	<u>418,526</u>

17. PROVISIONS

Non-current

Long service leave	<u>6,655</u>	<u>16,997</u>
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Movement in provisions

Balance at 1 July	48,396	37,023
Additional provisions	<u>11,955</u>	<u>11,373</u>
Balance at 30 June	<u>60,351</u>	<u>48,396</u>

18. FINANCIAL INSTRUMENTS

(a) Financial risk management

(i) Overview

The Foundation has exposure to the following risks from its use of financial instruments:



## FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

### NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

- Credit risk
- Liquidity risk
- Market risk

#### 18. FINANCIAL INSTRUMENTS (CONTINUED)

This note presents information about the Foundation's exposure to each of the above risks, its objectives, policies and processes for measuring and managing risk. Further quantitative disclosures are included throughout this financial report.

The members of the Foundation are responsible for monitoring and managing the financial risks of the Foundation. They monitor these risks through regular board meetings where monthly management accounts are presented. Any changes identified are communicated to the Chief Executive Officer who implements the changes. The Foundation does not enter into any derivative financial instruments and does not speculate in any type of financial instruments.

##### *(ii) Credit risk exposure*

Credit risk is the risk of financial loss to the Foundation if a customer or counterparty to a financial instrument fails to meet its contractual obligations, and arises principally from the Foundation's receivables from customers and other financial assets.

The Foundation's exposure to credit risk is influenced mainly by the individual characteristics of each customer. The Foundation's customers primarily consist of government entities and sponsorships. An allowance for impairment is recognised when it is expected that any receivables are not collectible. The allowance consists of allowances for specific accounts. The Foundation does not require any collateral in respect of trade and other receivables.

The Foundation limits its exposure to credit risk by only investing in at call deposits and managed funds with Queensland Treasury Corporation and DDH Graham Limited. Management does not expect any counterparty to fail to meet its obligations.

##### *(iii) Liquidity risk*

Liquidity risk is the risk that the Foundation will not be able to meet its financial obligations as they fall due.

The Foundation manages liquidity risk by monitoring its cash position on a weekly basis.

##### *(iv) Market risk*

Market risk is the risk that the changes in market prices, such as interest rates will affect the Foundation's income or the value of its holding of financial instruments. The objective of market risk management is to manage and control market risk exposures within acceptable parameters, while optimising the return.

The Foundation only holds deposits at call and managed funds and does not trade in derivatives. However, volatility in investments in managed funds may result in some impact on the statement of comprehensive income.

##### *Currency risk*

The Foundation is not exposed to currency risk.

##### *Interest rate risk*

Interest rate risk refers to the risk that changes in interest rates will affect the Foundation's income or the value of its obligations.

The Foundation does not have any borrowings as at the reporting period.

The financial assets subject to floating interest rate risk are cash and deposits at call. The Foundation does not hedge its interest rate risk and is therefore subject to short-term fluctuations in interest rates.

##### *Other market price risks*

The Foundation is not exposed to other market price risks.

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2014

18. FINANCIAL INSTRUMENTS (CONTINUED)

(b) Credit risk

The exposure to credit risk at balance date in relation to each class of recognised financial assets is the gross carrying amount of those assets inclusive of any provisions for impairment.

The following table represents the Foundation's maximum exposure to credit risk based on contractual amounts net of any allowances:

Maximum exposure to credit risk

		2014 \$	2013 \$
<b>Financial assets</b>			
Cash and cash equivalents	12	5,107,702	4,543,343
Trade debtors	13	<u>26,368</u>	<u>12,303</u>
Total		<u>5,134,070</u>	<u>4,555,646</u>

Financial assets past due but not impaired.

	Less than 30 days	30-60 days	Overdue 61-90 days	More than 90 days	Total
<b>2014</b>					
Trade debtors	11,406	3,455	-	11,507	26,368
Total	<u>11,406</u>	<u>3,455</u>	<u>-</u>	<u>11,507</u>	<u>26,368</u>
<b>2013</b>					
Trade debtors	11,250	726	327	-	12,303
Total	<u>11,250</u>	<u>726</u>	<u>327</u>	<u>-</u>	<u>12,303</u>

No collateral is held as security and no credit enhancements relate to financial assets held by the Foundation.

At the reporting date, there were no significant concentrations of credit risk. The maximum exposure to credit risk is represented by the carrying amount of each financial asset in the statement of financial position.

The Foundation also manages credit risk through diversification and its reliance on DDH Graham Limited as a fund administrator of Q Invest, which is a jointly owned entity by the State Public Sector Superannuation Scheme and Queensland Investment Corporation, a Statutory Government Owned Corporation.

(c) Liquidity risk

Liquidity risk refers to the situation where the Foundation may encounter difficulty in meeting obligations associated with financial liabilities that are settled by delivering cash or another financial asset.

The Foundation manages liquidity risks through the use of cash and deposits at call. This aims to reduce the exposure to liquidity risk by ensuring the Foundation has sufficient funds available to meet employee and supplier obligations as they fall due. This is achieved by ensuring that minimum levels of cash are held within the various accounts so as to match the expected duration of the various employee and supplier liabilities.

The following table sets out the liquidity risk of financial liabilities held by the Foundation. It represents the contractual maturity of financial liabilities, calculated based on cash flows relating to the repayment of outstanding amounts at balance date.

FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2014

18. FINANCIAL INSTRUMENTS (CONTINUED)

Financial liabilities

	Note	<1 year \$	Payable in 1-5 years \$	>5 years \$	Total \$
<b>2014</b>					
Trade and other payables	16	<u>459,994</u>	<u>53,696</u>	<u>-</u>	<u>513,690</u>
<b>2013</b>					
Trade and other payables	16	<u>387,120</u>	<u>31,399</u>	<u>-</u>	<u>418,519</u>

(d) Market risk

The Foundation does not trade in foreign currency and is not materially exposed to commodity price changes. The Foundation is exposed to interest rate risk through its managed funds deposited with DDH Graham Limited. The Foundation does not undertake any hedging in relation to interest rate risk.

Interest rate sensitivity analysis

The following interest rate sensitivity analysis depicts the outcome to net surplus and equity if interest rates were to change by +/- 1% from the year-end rates applicable to the Foundation's financial assets and liabilities. With all other variables held constant, the Foundation would have a surplus and equity increase/(decrease) of \$45,132 (2013: \$38,275). This is predominantly attributable to the Foundation's exposure to variable interest rates on its capital guaranteed cash fund.

	Carrying amount \$	-1%		+1%	
		Surplus \$	Equity \$	Surplus \$	Equity \$
<b>2014</b>					
Cash and cash equivalents	5,107,702	(45,132)	(45,132)	45,132	45,132
		<u>(45,132)</u>	<u>(45,132)</u>	<u>45,132</u>	<u>45,132</u>

<b>2013</b>					
Cash and cash equivalents	4,543,343	(38,275)	(38,275)	38,275	38,275
		<u>(38,275)</u>	<u>(38,275)</u>	<u>38,275</u>	<u>38,275</u>

(e) Fair Value

	Level 1	Level 2	Level 3	Total 2014
Financial Assets				
DDH Investment Access Funds	<u>\$318,322</u>			<u>\$318,322</u>
	Level 1	Level 2	Level 3	Total 2013
DDH Investment Access Funds	<u>\$292,958</u>			<u>\$292,958</u>

There have been no transfers between level 1 and 2 for financial assets during the reporting period.



FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2014

	2014	2013
	\$	\$
<b>19. ACCUMULATED SURPLUS</b>		
Accumulated surplus comprises:		
Unrestricted funds	4,183,150	3,648,984
Restricted funds	<u>760,326</u>	<u>605,542</u>
	<u>4,943,476</u>	<u>4,254,526</u>

Included in the retained surplus are certain amounts raised which are unspent at year end and whose expenditure is restricted for specific purposes, i.e. specific hospital wards, departments, etc.

**20. INDUSTRY SEGMENT**

The Foundation operates predominantly in Far North Queensland in providing funding and resources to aid health service provision in the region.

**21. CONTINGENT LIABILITIES**

The Foundation has no known material contingent liabilities.

	2014	2013
	\$	\$
<b>22. RECONCILIATION OF SURPLUS TO NET CASH FROM OPERATING ACTIVITIES</b>		
Operating result before distribution of grants	1,590,658	1,612,489
Less: Distribution of grants	(901,709)	(918,117)
<i>Add non-cash items:</i>		
Depreciation	26,239	47,129
Amounts set aside to provisions	<u>14,199</u>	<u>11,373</u>
Net cash flows provided by operating activities before change in assets and liabilities	729,387	752,874
<i>Change in assets and liabilities during the financial year:</i>		
(Increase)/decrease in receivables	(14,065)	272
(Increase)/decrease in inventories	2,842	(93)
Increase/(decrease) in payables	70,628	(133,722)
(Increase)/decrease in prepayments	<u>-</u>	<u>-</u>
Net cash flows from operating activities	<u>788,792</u>	<u>619,331</u>

**23. RELATED PARTIES**

**Members**

The names of each person holding the position of member of the Foundation during the financial year are: Dr Kenneth Chapman (Chairman), Mr Graham Coonan (Deputy Chairman), Ms Patricia Bailey, Mr Mario Calanna, Ms Julie Hartley-Jones, Mr Charles Marino, Professor William McBride, Mr Robert McGill, Associate Professor Jane Mills, and Mr Stephen Russell. Mr John Slaven is Secretary. Mr Graham Coonan resigned his position on 18 March 2014 and Mr Charles Marino was appointed to the position of Deputy Chairman on 29 April 2014.

Members received no remuneration from the Foundation for their services during the year.

Members may have used the Foundation managed car park or made purchases from the Sea Breeze Cafe during the year. All such transactions were conducted on an arms-length basis and on normal commercial terms.

## **FAR NORTH QUEENSLAND HOSPITAL FOUNDATION**

### **NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014**

Ms Julie Hartley-Jones and Mr John Slaven were employed at the Cairns Hospital with which the Foundation has commercial dealings on a normal arms-length basis from time to time.

Professor William McBride and Associate Professor Jane Mills were employed by James Cook University which is the beneficiary of research grant funding. All grants are awarded on a competitive arms-length basis.

Mr Charles Marino is a partner in Marino Moller Lawyers which provided legal services to the Foundation during the year for which they were paid nil (2013:nil). These services were provided on a normal arms-length basis.

During the year, the Foundation provided a volunteer service to the Cairns Hospital. This involves the recruiting, coordination and management of a team of volunteers, which provides various services to that hospital and is in line with the objects of the Foundation. For this service the hospital contributed \$39,020 (2013: \$39,020) towards the Foundation's costs in this regard. In addition, the Cairns Hospital received significant benefits by way of equipment donated and benefits sponsored by the Foundation during the year (in accordance with the objects of the Foundation) as set out in Note 11.

Apart from the details disclosed in this note, no member of the Foundation has entered into a material contract with the Foundation since the end of the previous financial year and there were no material contracts involving members' interests subsisting at year-end.

#### **24. KEY MANAGEMENT PERSONNEL AND REMUNERATION**

Key management personnel include those positions that had authority and responsibility for planning, directing and controlling the activities of the Foundation. The remuneration and other terms of employment for key executive management personnel are specified in employment contracts. The contracts provide for the provision of short term employee benefits, post-employment benefits and other benefits.

The Chief Executive Officer (CEO) was appointed on 2 February 2004 under a common law contract. The CEO is responsible for the efficient, effective and economic administration of the Foundation. Short term employee benefits of \$126,615 (2013: \$119,266) superannuation benefits of \$11,712 (2013: \$10,734) and non –monetary benefits of \$10,000 were paid to the CEO. The long service leave provision was \$20,974 (2013: \$13,549).

#### **25. COMMITMENTS**

During the year ended 30 June 2014, the Board agreed to contribute funding of up to \$700,000 towards the purchase of a new PET/CT scanner for the Cairns and Hinterland Hospital and Health Service.

The Board has also agreed to contribute funding of up to \$1.23 million towards the construction of a children's playground at the Cairns Hospital. At the date of issue of these financial statements, the purchase date and final cost of these commitments was not known.

Additionally, the Board approved and the Foundation has ordered \$134,000 worth of Foetal Ultrasound Reporting – Viewpoint hardware and software for the Medical Imaging department at Cairns Hospital. At the date of issue of these statements the project had not been finalised.

The Foundation Board also agreed to the fit-out of a new café in Block D of the Cairns Hospital at a cost of \$624,540. At the date of issue of these statements the construction had not been finalised and only one progress payment had been made. An outstanding amount of \$468,442 will be paid when the project is completed.



## CERTIFICATE OF THE FAR NORTH QUEENSLAND HOSPITAL FOUNDATION

These general purpose financial statements have been prepared pursuant to section 62(1) of the provisions of the *Financial Accountability Act 2009* ("the Act") and other prescribed requirements. In accordance with section 62(1)(b) of the Act we certify that in our opinion:

- (a) the prescribed requirements in respect of the establishing and keeping the accounts of the Far North Queensland Hospital Foundation have been complied with in all material respects; and
- (b) the financial statements have been drawn up to present a true and fair view, in accordance with prescribed accounting standards, of the transactions of the Foundation for the year ended 30 June 2014 and of the financial position of the Foundation at the end of the year.



Dr Kenneth Chapman  
CHAIRMAN



Tony Franz  
CHIEF EXECUTIVE OFFICER

Cairns  
26 August 2014



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**DECLARATION OF INDEPENDENCE BY GREG MITCHELL TO THE BOARD OF FAR NORTH QUEENSLAND HOSPITAL FOUNDATION**

As lead auditor of Far North Queensland Hospital Foundation for the year ended 30 June 2014, I declare that, to the best of my knowledge and belief, there have been no contraventions of any applicable code of professional conduct in relation to the audit.

Greg Mitchell  
Director

**BDO Audit (NTH QLD) Pty Ltd**  
Cairns, 26 August 2014



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## INDEPENDENT AUDITOR'S REPORT

To the Board of Far North Queensland Hospital Foundation

We have audited the accompanying financial report of Far North Queensland Hospital Foundation, which comprises the statement of financial position as at 30 June 2014, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the Management Certificate.

### Boards' Responsibility for the Financial Report

The Board is responsible for the preparation and fair presentation of the financial report in accordance with prescribed accounting requirements identified in the *Financial Accountability Act 2009* and the *Financial and Performance Management Standard 2009*, including compliance with applicable Australian Accounting Standards, and for such internal control as the Board determine is necessary to enable the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error.

### Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. Those standards require that we 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 judgement, 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 the Board, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.





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### Independence

In conducting our audit, we have complied with the independence requirements of the Australian professional accounting bodies.

### Opinion

In our opinion the financial report presents fairly, in all material respects, the financial position of Far North Queensland Hospital Foundation as at 30 June 2014, and its financial performance for the year then ended in accordance with Australian Accounting Standards.

BDO

**BDO Audit (NTH QLD) Pty Ltd**

**Greg Mitchell**  
Director

Cairns, 26 August 2014