



### INDEPENDENT AUDITOR'S REPORT

### Greater Western Area Health Service

To Members of the New South Wales Parliament

I have audited the accompanying financial statements of the Greater Western Area Health Service (the Service), which comprises the statement of financial position as at 30 June 2010, the statement of comprehensive income, statement of changes in equity, statement of cash flows, service group statements, a summary of significant accounting policies and other explanatory notes for both the Service and the consolidated entity. The consolidated entity comprises the Service and the entities it controlled at the year's end or from time to time during the financial year.

### **Auditor's Opinion**

in my opinion, the financial statements:

- present fairly, in all material respects, the financial position of the Service and the consolidated entity as at 30 June 2010, and of the financial performance for the year then ended in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations)
- are in accordance with section 45E of the *Public Finance and Audit Act 1983* (the PF&A Act) and the Public Finance and Audit Regulation 2010

My opinion should be read in conjunction with the rest of this report.

### Chief Executive's Responsibility for the Financial Statements

The Chief Executive is responsible for the preparation and fair presentation of the financial statements in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations) and the PF&A Act. This responsibility includes establishing and maintaining internal controls relevant to the preparation and fair presentation of the financial statements that are free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

### Auditor's Responsibility

My responsibility is to express an opinion on the financial statements based on my audit. I conducted my audit in accordance with Australian Auditing Standards. These Auditing Standards require that I comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal controls relevant to the entity's preparation and fair presentation of the financial statements 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 controls. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Chief Executive, as well as evaluating the overall presentation of the financial statements.

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

My opinion does *not* provide assurance:

- about the future viability of the Service or the consolidated entity
- that they have carried out their activities effectively, efficiently and economically
- about the effectiveness of their internal controls
- on the assumptions used in formulating the budget figures disclosed in the financial statements.

### Independence

In conducting this audit, the Audit Office of New South Wales has complied with the independence requirements of the Australian Auditing Standards and other relevant ethical requirements. The PF&A Act further promotes independence by:

- providing that only Parliament, and not the executive government, can remove an Auditor-General
- mandating the Auditor-General as auditor of public sector agencies but precluding the provision of non-audit services, thus ensuring the Auditor-General and the Audit Office of New South Wales are not compromised in their role by the possibility of losing clients or income.

A T Whitfield

A T Whitfield Deputy Auditor-General

29 September 2010 SYDNEY

### Certification of Parent/Consolidated Financial Statements for Period Ended 30 June 2010

The attached financial statements of the Greater Western Area Health Service for the period ended 30 June 2010:

- i) Have been prepared in accordance with the requirements of applicable Australian Accounting Standards which include Australian equivalents to International Financial Reporting Standards (AEIFRS), the requirements of the *Public Finance and Audit Act 1983* and its regulations, the *Health Services Act 1997* and its regulations, the Accounts and Audit Determination and the Accounting Manual for Area Health Services and Public Hospitals;
- ii) Present fairly the financial position and transactions of the Greater Western Area Health Service; and
- iii) Have no circumstances which would render any particulars in the financial statements to be misleading or inaccurate.

Chief Executive

Greater Western Area Health Service

Acting Director Financial Operations Greater Western Area Health Service

24/08/10

24/08/10

### Greater Western Area Health Service Statement of Comprehensive Income for the year ended 30 June 2010

	PARENT			co	NSOLIDATION	
Actual 2010 \$000	Budget 2010 \$000	Actual 2009 \$000	Notes	Actual 2010 \$000	Budget 2010 \$000	Actual 2009 \$000
		Expenses excluding losses				
		Operating Expenses				
0	0	Employee Related	3	415,527	405,402	409,284
415,527	405,402	409,284 Personnel Services	4	0	0	0
52,432	52,708	53,889 Visiting Medical Officers		52,432	52,708	53,889
304,261	301,202	281,706 Other Operating Expenses	5	304,261	301,202	281,706
26,869	28,073	25,314 Depreciation and Amortisation	2(i), 6	26,869	28,073	25,314
10,411	9,794	10,417 Grants and Subsidies	7	10,411	9,794	10,417
1,151	98	158 Finance Costs	8	1,151	98	158
9,439	9,806	9,065 Payments to Affiliated Health Organisations	9	9,439	9,806	9,065
820,090	807,083	789,833 Total Expenses excluding losses		820,090	807,083	789,833
		Revenue				
84,046	79.827	69,629 Sale of Goods and Services	10	84,046	79,827	69,629
1,029	809	1,166 Investment Revenue	11	1,029	809	1,166
18,063	14,194	16,619 Grants and Contributions	12	10,050	7,555	8,112
5,547	4,512	6,618 Other Revenue	13	5,547	4,512	6,618
			.0			
108,685	99,342	94,032 Total Revenue		100,672	92,703	85,525
33	0	(72) Gain/(Loss) on Disposal	14	33	0	(72)
(479)	(239)	(1,438) Other Gains/(Losses)	15	(479)	(239)	(1,438)
711,851	707,980	697,311 Net Cost of Services	32	719,864	714,619	705,818
		Government Contributions				
702,043	702,043	NSW Department of Health 672,547 Recurrent Allocations	2(d)	702,043	702,043	672,547
702,043	702,043	NSW Department of Health	2(u)	702,043	702,043	672,547
69,276	70,026	34,384 Capital Allocations	2(d)	69,276	70,026	34,384
00,270	70,020	(Asset Sale Proceeds Transferred to the	2(0)	00,270	70,020	04,004
(10)	0	NSW Department of Health)		(10)	0	0
()		Acceptance by the Crown Entity of		(15)		
0	0	0 Employee Benefits	2(a)(ii)	8,013	6,639	8,507
771,309	772,069	706,931 Total Government Contributions		779,322	778,708	715,438
59,458	64,089	9,620 RESULT FOR THE YEAR		59,458	64,089	9,620
		Other Comprehensive Income				
		Net Increase/(Decrease) in				
		Property, Plant & Equipment				
0	0	19,167 Asset Revaluation Reserve		0	0	19,167
		Other Comprehensive Income				
	0	19,167 for the year		0	0	19,167
59,458	64,089	28,787 TOTAL COMPREHENSIVE INCOME FOR THE	YEAR	59,458	64,089	28,787

The accompanying notes form part of these financial statements

### Greater Western Area Health Service Statement of Financial Position as at 30 June 2010

PARENT CONSOLIDATION Actual **Budget** Actual Notes Actual **Budget** Actual 2010 2010 2009 2010 2010 2009 \$000 \$000 \$000 \$000 \$000 \$000 **ASSETS Current Assets** 10,345 Cash and Cash Equivalents 10,949 41 646 10 949 41 646 10 345 18 10,583 19 15,261 11,666 15.261 10.583 11.666 Receivables 2,286 3,444 2,287 3.444 Inventories 20 2,287 2,286 7,635 7,635 7,635 Assets Classified as Held for Sale 22 7,635 7,108 7,108 33,090 Total Current Assets 35,605 62,150 35,605 62,150 33,090 Non-Current Assets 195 0 195 0 0 0 Receivables 19 Property, Plant and Equipment 547,068 541,267 502,189 - Land and Buildings 21 547,068 541,267 502,189 29,294 37,047 27,560 - Plant and Equipment 21 29,294 37,047 27,560 - Infrastructure Systems 10,447 10,565 11,247 10,447 10,565 11,247 540,996 Total Property, Plant and Equipment 540,996 586,809 588,879 586,809 588,879 587,004 588,879 540,996 Total Non-Current Assets 587,004 588,879 540,996 622,609 651,029 574,086 Total Assets 622,609 651,029 574,086 LIABILITIES **Current Liabilities** 56,371 73,508 72,393 Payables 24 56,371 73,508 72,393 5,318 Borrowings 5,017 5,488 5.488 25 5.318 5.017 113,720 Provisions 26 123,967 122 431 122 431 123.967 113 720 891 Other 1,188 0 27 1,188 891 185,007 202,963 192,322 Total Current Liabilities 185,007 202,963 192,322 Non-Current Liabilities 13,627 17,295 16,455 Borrowings 25 13,627 17,295 16,455 5,653 Provisions 5,834 8,000 5,834 8,000 5,653 25,295 22,108 Total Non-Current Liabilities 25,295 22,108 19,461 19,461 204,468 228,258 214,430 Total Liabilities 204,468 228,258 214,430 418,141 422,771 359,656 Net Assets 418,141 422,771 359,656 **EQUITY** 170.715 170,713 170.715 Reserves 170.715 170,713 170,715 247,426 252,058 188,941 Accumulated Funds 247,426 252,058 188,941 418,141 422,771 359,656 Total Equity 418,141 422,771 359,656

The accompanying notes form part of these financial statements

# Greater Western Area Health Service Statement of Changes in Equity for the year ended 30 June 2010

	1	Accumulated Funds	Asset Revaluation Surplus	Total
	Selon	\$000	\$000	\$000
Balance at 1 July 2009		188,941	170,715	359,656
Result For The Year Other Comprehensive Income	,	59,458		59,458
lotal Comprenensive Income For The Tear	•	39,438 1	0	59,458
<b>Transactions With Owners In Their Capacity As Owners</b> Increase/(Decrease) in Net Assets From Equity Transfers	35	(973)	0	(973)
Balance at 30 June 2010	. "	247,426	170,715	418,141
Balance at 1 July 2008		179,321	151,548	330,869
Result For The Year		9,620	0	9,620
Other Comprehensive Income: Net Increase/(Decrease) in Property, Plant & Equipment		0	19,167	19,167
Total Comprehensive Income For The Year	•	9,620	19,167	28,787
Balance at 30 June 2009	. 11	188,941	170,715	359,656

The accompanying notes form part of these financial statements.

### Greater Western Area Health Service Statement of Cash Flows for the year ended 30 June 2010

PARENT CONSOLIDATION Budget Actual Actual Actual Budget Actual 2009 2010 2010 Notes 2010 2010 2009 \$000 \$000 \$000 \$000 \$000 \$000 CASH FLOWS FROM OPERATING ACTIVITIES **Payments** 0 0 0 Employee Related (403,098)(386,013)(410,874)(11,451)(10,774)(11,458)Grants and Subsidies (11,451)(10,774)(11,458)(158) (1,151)(1,151)(98)Finance Costs (98)(158)(785,415) (780,267) Other (403,013) (399,402) (369,393)(806, 111)(818,713) (796,287) (791,883) Total Payments (818,713) (796,287) (791,883) Receipts 86.293 82.630 71.121 Sale of Goods and Services 86,293 82,630 71,121 1,029 1,203 Investment Revenue 1,029 1,203 38,065 48,112 Other 38,065 48,112 37,713 37,713 125,387 130,742 110,037 Total Receipts 125,387 130,742 110,037 Cash Flows From Government 672,547 NSW Department of Health Recurrent Allocations 702.043 702.043 702.043 702.043 672.547 70,026 38,088 NSW Department of Health Capital Allocations 69,276 70,026 38,088 69,276 Asset Sale Proceeds Transferred to the (10)NSW Department of Health (10)771,309 772,069 710,635 Net Cash Flows From Government 771,309 772,069 710,635 NET CASH FLOWS FROM OPERATING 77,983 106,524 28,789 **ACTIVITIES** 77,983 106,524 28,789 CASH FLOWS FROM INVESTING ACTIVITIES Proceeds from Sale of Land and Buildings, Plant and Equipment 1,505 0 0 and Infrastructure Systems 1,505 0 0 Purchases of Land and Buildings, Plant and Equipment (75,860) (76, 125)(76, 125)(75,860)(45,259) and Infrastructure Systems (45, 259)Purchases of Investments 0 0 (1,333) Other 0 0 (1,333)(74<u>,355)</u> (76<u>,125)</u> (46,592) NET CASH FLOWS FROM INVESTING ACTIVITIES (74,355) (76,125) (46,592)**CASH FLOWS FROM FINANCING ACTIVITIES** 1,010 952 25,727 952 25,727 Proceeds from Borrowings and Advances 1,010 (3,976)0 (5,018) Repayment of Borrowings and Advances (3,976)(5,018)20,709 NET CASH FLOWS FROM FINANCING ACTIVITIES (3,024) (3,024)1,010 1,010 20,709 604 31,409 2,906 NET INCREASE / (DECREASE) IN CASH 604 31,409 2,906 10,345 10,344 7,439 Opening Cash and Cash Equivalents 10,345 10,344 7,439 10,949 41,753 10,345 CLOSING CASH AND CASH EQUIVALENTS 18 10,949 41,753 10,345

The accompanying notes form part of these financial statements

## Greater Western Area Health Service Service Group Statements for the Year Ended 30 June 2010

SERVICE'S EXPENSES AND	Service Group	Group	Service Group	Group	Service Group	-	Service Group		Service Group		Service Group	Servic	Service Group	Service	Service Group	Service Group	Group	Service Group		Non Attributable	itable	Total	
INCOME	1.1	*	1.2	*	4.3		2.1 *		2.2 *		2.3 *	e,	3.1 *	4.1	*	5.1	*	6.1					
	2010	2009	2010	2009	2010 2	2009	2010	2009	2010 2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009 20	2010 20	2009
	\$000	\$000	\$000	\$000	\$ 000\$	\$ 000\$	\$ 000\$	\$ 000\$	000\$ 000\$	000\$ 00	000\$ (	\$000	\$000	\$000	\$000	\$000	\$000	000\$	\$000	\$ 000\$	\$ 000\$	\$ 000\$	\$000
Expenses excluding losses																							
Operating Expenses																							
Employee Related	56,610	43,496	5,916	6,358	36,932	30,375	34,738	38,416 12	126,150 129,491	,491 20,319	119 28,652	2 56,715	5 49,995	64,560	64,223	7,684	13,496	5,903	4,782	0	0 415	415,527 409	409,284
Visiting Medical Officers	2,244	793	117	6	5,664	6,758	3,952	6,039	19,390 20,	20,161 8,377	968'6 22	8,408	3 6,287	3,766	2,960	471	354	43	632	0	0 25	52,432 53	53,889
Other Operating Expenses	23,123	14,658	1,982	2,124	25,581	12,674	17,160	6,676 16	162,661 175,	175,695 25,138	38 21,085	5 17,632	12,867	27,874	20,861	2,395	4,471	715	269	0	0 30	304,261 287	281,706
Depreciation and Amortisation	3,223	2,838	194	488	2,464	2,294	2,016	1,834	8,206 8,	8,111 2,182	82 1,968	8 4,008	3 2,701	4,288	4,390	252	640	36	20	0	0 26	26,869 25	25,314
Grants and Subsidies	6,227	2,510	21	24	36	2,348	29	82	112 2,	2,024	25 130	0 3,773	3 2,651	71	691	113	(44)	4	~	0	0 10	10,411	10,417
Finance Costs	150	1	14	2	114	20	91	9	351	32	80	6 148	3 12	174	16	18	က	11	0	0	0	1,151	158
Payments to Affiliated Health Organisations	888	671	0	0	6	0	0	0	0	0	0	0 0	0	8,532	8,394	0	0	0	0	0	0	9,439	9,065
Total Expenses excluding losses	92,475	64,977	8,244	9,005	70,800	54,519 5	9 986' 29	63,053 31	316,870 335,	335,514 56,1	,121 61,737	7 90,684	4 74,513	109,265	101,535	10,933	18,920	6,712	6,060	0	0 820	820,090 789	789,833
Revenue																							
Sale of Goods and Services	2,093	3,738	72	411	17,852	3,169	974	1,866 2	22,157 35,	35,477 2,955	155 2,251	1,883	3 798	34,767	20,957	995	641	298	321	0	0	84,046 69	69,629
Investment Revenue	87	157	10	0	455	62	16	30	133	390	88	181	19	112	327	2	16	21	77	0	0	1,029	1,166
Grants and Contributions	2,830	4,050	70	799	1,406	59	69	0	265	10	101	0 43	3 17	1,440	1,164	2,715	2,020	1,111	23	0	0 10	10,050	8,112
Other Revenue	511	471	16	0	2,589	275	42	174	900	2,518	0 631	1 59	9 13	692	1,690	419	31	319	815	0	0	5,547	6,618
Total Revenue	5,521	8,416	168	1,210	22,302	3,535	1,101	2,070 2	23,455 38,	38,395 3,0	065 2,970	0 2,166	3 847	37,011	24,138	4,134	2,708	1,749	1,236	0	0 100	00,672 8	85,525
Gain / (Loss) on Disposal	4	6	0	(5)	ო	(9)	7	(9)	11	(25)	3 (6)		5 (8)	5	(10)	0	(2)	0	Ξ	0	(10)	33	(72)
Other Gains / (Losses)	(6)	(137)	0	(19)	(112)	(116)	(1)	(129)	(107) (5	(502)	(12) (119)	(11)	(157)	(225)	(206)	(2)	(40)	0	(13)	0	(506)	(479)	(1,438)
Net Cost of Services	86,959	56,705	8,076	7,815	48,607	51,106 5	56,884 6	61,118 29	293,511 297,	297,646 53,065	65 58,892	2 88,524	73,831	72,474	77,613	6,801	16,254	4,963	4,838	0	216 719	719,864 705	705,818
Government Contributions																				779,322	715,438 779	779,322 718	715,438
RESULT FOR THE YEAR																					5	59,458	9,620
								_															
Other Comprehensive Income Increase/(Decrease) in Asset Revaluation Reserve	0	2,149	0	369	0	1,737	0	1,389	0	6,141	0 1,490		0 2,045	0	3,324	0	485	0	38	0	0	0	19,167
Other (SPECIFY)	0	0	0	0	0	0	0	0	0	0	0	0				0	0	0	0	0	0		0
Total Other Comprehensive Income	0	2,149	0	369	0	1,737	0	1,389	9	6,141	0 1,490		0 2,045	0	3,324	0	485	0	88	0	0	0 18	19,167
																							5

Service Group Statements focus on the key measures of service delivery performance. \* The name and purpose of each service group is summarised in Note 17.

The Service Group Statement uses statistical data to 31 December 2009 to allocate the current period's financial information on expenses and revenue to each service group. No changes have occurred during the period between 1 January 2010 and 30 June 2010 which would materially impact this allocation.

### Greater Western Area Health Service Service Group Statements (Continued) for the Year Ended 30 June 2010

SERVICE'S ASSETS AND	Service Group	H	Service Group	H	Service Group	H	Service Group	H	Service Group	Service Group	2012	Service Group	roin	Service Group	H	Service Group	H	Service Group	H	Non Attributable	alde	Total	
LIABILITIES			1.2 *		1.3 *		2.1 *		2.2 *	2.3	*	3.1	<u>.</u> 5 6 7	4.1		5.1		* 1.9					
	2010 20	2009	2010	2009	2010 2009	2010	0 2009	2010	2009	2010	2009	2010	2009	2010	2009	2010	2009 2	2010	2009	2010 20	2009 20	2010 200	2009
	\$ 000\$	\$ 000\$	\$ 000\$	\$ 000\$	\$000 \$000		000\$ 0	\$000	\$000	\$000	\$000	\$000	\$000	\$000	\$000	\$000	\$ 000\$	\$ 000\$	\$ 000\$	\$000	\$000	\$000	\$000
ASSETS																							
Current Assets																							
Cash and Cash Equivalents	1,235	851	110	118	945	714 7	774 82	826 4,230	30 4,394	1 749	808	1,211	926	1,459	1,330	146	248	06	79	0	0 10	10,949 10,	10,345
Receivables	837	1,148	25	165	3,381	1 482	167 28	282 3,556	5,237	7 465	405	328	116	5,610	3,293	627	369	265	169	0	0 15	15,261 11,	11,666
Inventories	174	179	15	56	192	155 1	129	204 1,223	23 2,148	3 189	258	133	157	209	255	18	55	2	7	0	0	2,287	3,444
Non-Current Assets Held for Sale	853	628	51	87	652	527 5	533 61	610 2,172	72 3,243	3 577	297	1,060	720	1,134	981	67	183	6	59	0	0 7	7,108 7,	7,635
Total Current Assets	3,099	2,807	201	396	5,170 1,8	1,878	1,603	922 11,181	15,022	1,980	2,068	2,732	1,969	8,412	5,859	828	855	369	314	0	0 35	35,605 33	33,090
Non-Current Assets																							
Receivables	11	0	0	0	43	0	2	0	45 (	9 0	0	4	0	73	0	8	0	က	0	0	0	195	0
Property, Plant and Equipment																							
- Land and Buildings	65,630 5	56,301	3,946	9,681	50,173 45,	45,509 41,050	36,383	83 167,067	1160,911	44,435	39,042	81,612	53,583	87,308	87,090	5,122	12,697	724	992	0	0 547	547,067 502	502,189
- Plant and Equipment	3,514	3,090	211	531	2,687 2,4	2,498 2,1	2,198 1,997	97 8,947	47 8,831	1 2,379	2,143	4,370	2,941	4,675	4,780	274	269	39	54	0	0 29	29,294 27,	27,560
- Infrastructure Systems	1,253	1,261	75	217	958 1,(	1,019 7	784 81	815 3,192	3,604	4 848	874	1,558	1,200	1,667	1,950	98	284	14	22	0	0 10	10,447	11,247
Total Non-Current Assets	70,408 6	60,652	4,232	10,429 5	53,861 49,0	49,026 44,034	39,195	179,251	173,345	5 47,668	42,059	87,544	57,724	93,723	93,820	5,502	13,678	780	1,069	0	0 587	587,003 540	540,996
TOTAL ASSETS	73,507 6:	63,458	4,433	10,825 5	59,031 50,8	50,904 45,637	337 41,117	17 190,432	32 188,367	7 49,648	44,127	90,276	59,693	102,135	629'66	6,360	14,532	1,149	1,382	0	0 622	622,608 574	574,086
LIABILITIES																							
Current Liabilities																							
Payables	4,284	3,767	367	546	4,739 3,3	3,256 3,1	3,179 4,286	86 30,138	38 45,150	4,657	5,418	3,267	3,307	5,164	5,361	444	1,149	132	153	0	0 56	56,371 72	72,393
Borrowings	999	437	20	61	433	367	355 42	425 1,939	39 2,259	343	416	555	502	899	684	29	127	41	41	0	0	5,017 5,	5,318
Provisions	16,679 1.	12,085	1,743	1,767	10,882 8,4	8,440 10,235	235 10,674	74 37,170	70 35,979	5,987	7,961	16,710	13,891	19,022	17,844	2,264	3,750	1,739	1,329	0	0 122	113,	113,720
Other	134	73	12	10	103	62	84 7	71 45	459 378	3 81	70	131	84	158	115	16	21	10	7	0	0	1,188	891
Total Current Liabilities	21,663	16,363	2,172	2,383	16,157 12,7	12,125 13,853	353 15,455	902'69 99	83,767	7 11,068	13,865	20,663	17,784	25,012	24,004	2,791	5,048	1,922	1,529	0	0 185	185,007 192,	2,322
Non-Current Liabilities																							
Borrowings	1,537	1,354	137	188	1,176 1,7	1,136	964 1,314	14 5,263	63 6,990	933	1,286	1,507	1,552	1,816	2,115	182	394	112	126	0	0 13	13,627	16,455
Provisions	795	601	83	88	518	420 4	488	531 1,772	72 1,789	3 285	396	796	691	906	887	108	186	83	99	0	0	5,834	5,653
Total Non-Current Liabilities	2,332	1,954	220	275	1,694	1,555 1,4	1,452 1,844	44 7,035	35 8,778	3 1,218	1,682	2,303	2,243	2,722	3,002	290	581	195	192	0	0 19	19,461 22	22,108
TOTAL LIABILITIES	23,995	18,318	2,392	2,659 1	17,851 13,6	13,680 15,305	305 17,299	99 76,741	41 92,545	5 12,286	15,547	22,966	20,027	27,734	27,006	3,081	5,628	2,117	1,722	0	0 204	204,468 214,	214,430
NET ASSETS	49,512 4	45,141	2,041	8,167 4	41,180 37,2	37,224 30,332	332 23,817	113,691	91 95,822	2 37,362	28,580	67,310	39,667	74,401	72,674	3,279	8,904	(896)	(338)	0	0 418	418,140 359,	359,656

The name and purpose of each service group is summarised in Note 17.

Assets and liabilities that are specific to service groups are allocated accordingly, e.g. Non-Current Assets Held for Sale. Remaining assets and liabilities are apportioned to service groups in accordance with the methodology advised in Note 2(ab), thereby ensuring that the benefit of each asset and the liabilities incurred in the provision of services are duly recognised in each service group.

### 1. The Health Service Reporting Entity

The Greater Western Area Health Service was established under the provisions of the Health Services Act with effect from 1 January 2005.

The Health Service, as a reporting entity, comprises all the operating activities of the Hospital facilities and the Community Health Centres under its control. It also encompasses the Special Purposes and Trust Funds which, while containing assets which are restricted for specified uses by the grantor or the donor, are nevertheless controlled by the Health Service. The Health Service is a not-for-profit entity (as profit is not its principal objective).

The Greater Western Area Health Service Health Service Special Purpose Service Entity was established as a Division of the Government Service on 17 March 2006 in accordance with the Public Sector Employment and Management Act 2002 and the Health Services Act 1997. These Divisions provide personnel services to enable a Health Service to exercise its functions.

As a consequence the values in the annual financial statements presented herein consist of the Health Service (as the parent entity), the financial statements of the special purpose entity division and the consolidated financial statements of the economic entity. Notes capture both the parent and consolidated values with notes 3, 4, 12, 24, 26 and 31 being especially relevant.

In the process of preparing the consolidated financial statements for the economic entity consisting of the controlling and controlled entities, all inter-entity transactions and balances have been eliminated.

The reporting entity is consolidated as part the financial statements prepared for both the NSW Department of Health and the NSW Total State Sector Accounts.

These consolidated financial statements for the year ended 30 June 2010 have been authorised for issue by the Chief Executive on 24th August 2010.

### 2. Summary of Significant Accounting Policies

The Health Service's financial statements are general purpose financial statements which have been prepared in accordance with applicable Australian Accounting Standards (which include Australian Accounting Interpretations), the requirements of the *Health Services Act 1997* and its regulations including observation of the Accounts and Audit Determination for Area Health Services and Public Hospitals.

Property, plant and equipment, investment property, assets (or disposal groups) held for sale and financial assets at "fair value through profit and loss" and available for sale are measured at fair value. Other financial statement items are prepared in accordance with the historical cost convention.

The consolidated entity has a deficiency of working capital of \$149.402 M (2009 \$159.232 M). Notwithstanding this deficiency the financial statements have been prepared on a going concern basis because the entity has the support of the New South Wales Department of Health.

All amounts are rounded to the nearest one thousand dollars and are expressed in Australian currency.

Judgments, key assumptions and estimations made by management are disclosed in the relevant notes to the financial statements.

Except when an Australian Accounting Standard permits or requires otherwise, comparative information is disclosed in respect of the previous period for all amounts reported in the financial statements.

No new or revised accounting standards or interpretations are adopted earlier than their prescribed date of application. Set out below are changes to be effected, their date of application and the possible impact on the financial statements of the Greater Western Area Health Service.

### Accounting Standard/Interpretation

AASB 9, Financial Instruments and AASB 2009-11, Amendments to Australian Accounting Standards arising from AASB 9, have application from 1 July 2013 and focus on simplifying the classifications of financial assets into those carried at amortised cost and those carried at fair value. They also simplify the requirements for embedded derivatives and remove the tainting rules associated with held-to-maturity assets. They have been assessed as having no material impact on the Health Service.

AASB 1053, Application of tiers of Australian Accounting Standards, has application from 1 July 2013 and establishes a differential reporting framework consisting of two tiers of reporting requirements. Tier 1 entities will continue to apply existing Australian Accounting Standards. Tier 2 entities will apply the same recognition, measurement and presentation requirements but reduced disclosure requirements. Tier 2 entities include the majority of public sector entities. This standard has been assessed as having no material impact on the Health Service.

AASB 2009-5, Further Amendments to Australian Accounting Standards arising from the Annual Improvements Project, has application from 1 July 2010 and comprises accounting changes for presentation, recognition or measurement purposes. This standard has been assessed as having no material impact on the Health Service.

AASB 2009-8, Amendments to Australian Accounting Standards – Group Cash-settled Share-based Payment Transactions, has application from 1 July 2010 and makes amendments which clarify the scope of AASB 2 by requiring an entity that receives goods or services in a share-based payment arrangement to account for those goods or services no matter which entity in the group settles the transaction, and no matter whether the transaction is settled in shares or cash. This standard has been assessed as having no impact on the Health Service.

AASB 2009-9, Amendments to Australian Accounting Standards - Additional Exemptions for First-time Adopters, has application from 1 July 2010 and makes amendments to ensure that entities applying Australian Accounting Standards for the first time will not face undue cost or effort in the transition process in particular situations. This standard has been assessed as having no impact on the Health Service.

AASB 2009-10, Amendments to Australian Accounting Standards - Classification of Rights Issues, has application from 1 July 2010 and provides clarification concerning equity instruments. This standard has been assessed as having no material impact on the Health Service.

AASB 124, Related Party Disclosures and AASB 2009-12, Amendments to Australian Accounting Standards, have application from 1 July 2011 and simplify the definition of a related party. They have been assessed as having no impact on the Health Service.

Interpretation 19, Extinguishing Financial Liabilities with Equity Instruments and AASB 2009-13, Amendments to Australian Accounting Standards arising from Interpretation 19, have application from 1 July 2010 and addresses the accounting by an entity when the terms of a financial liability are renegotiated and result in the entity issuing equity instruments to a creditor to extinguish all or part of the financial liability. They have been assessed as having no impact on the Health Service.

AASB 2009-14, Amendments to Australian Interpretation - Prepayments of a Minimum Funding Requirement, has application from 1 July 2011 and makes limited-application amendments to Interpretation 14 AASB 119 - The Limit on a Defined Benefit Asset, Minimum Funding Requirements and their Interaction. This standard has been assessed as having no impact on the Health Service.

AASB 2010-1, Amendments to Australian Accounting Standards - Limited Exemption from Comparative AASB 7 Disclosures for First-time Adopters, has application from 1 July 2010 and provides additional exemption on IFRS transition in relation to AASB 7 Financial Instruments: Disclosures, to avoid the potential use of hindsight and to ensure that first-time adopters are not disadvantaged as compared with current IFRS-compliant preparers. This standard has been assessed as having no impact on the Health Service.

AASB 2010-2, Amendments to Australian Accounting Standards arising from Reduced Disclosure Requirements, has application from 1 July 2013 and determines disclosures in Australian Accounting Standards from which Tier 2 entities are exempt. This standard has been assessed as having no material impact on the Health Service.

AASB 2010-3 and AASB 2010-4, Amendments to Australian Accounting Standards arising from the Annual Improvements Project, have application from 1 January 2011 and amend a number of different Australian Accounting Standards. These standards have been assessed as having no material impact on the Health Service.

Other significant accounting policies used in the preparation of these financial statements are as follows:

### a) Employee Benefits and Other Provisions

### i) Salaries & Wages, Annual Leave, Sick Leave and On-Costs

At the consolidated level of reporting, liabilities for salaries and wages (including non-monetary benefits), annual leave and paid sick leave that are due to be settled within 12 months after the end of the period in which the employees render the service are recognised and measured in respect of employees' services up to the reporting date at undiscounted amounts based on the amounts expected to be paid when the liabilities are settled.

All Annual Leave employee benefits are reported as "Current" as there is an unconditional right to payment. Current liabilities are then further classified as "Short Term" or "Long Term" based on past trends and known resignations and retirements. Anticipated payments to be made in the next twelve months are reported as "Short Term". On-costs of 17% are applied to the value of leave payable at 30 June 2010, such on-costs being consistent with actuarial assessment (Comparable on-costs for 30 June 2009 were also 17%).

Unused non-vesting sick leave does not give rise to a liability as it is not considered probable that sick leave taken in the future will be greater than the benefits accrued in the future.

The outstanding amounts of workers' compensation insurance premiums and fringe benefits tax, which are consequential to employment, are recognised as liabilities and expenses where the employee benefits to which they relate have been recognised.

### ii) Long Service Leave and Superannuation

At the consolidated level of reporting, long service leave entitlements are dissected as "Current" if there is an unconditional right to payment and "Non-Current" if the entitlements are conditional. Current entitlements are further dissected between "Short Term" and "Long Term" on the basis of anticipated payments for the next twelve months. This in turn is based on past trends and known resignations and retirements.

Long service leave provisions are measured on a short hand basis at an escalated rate of 18.3% (17.7% at 30 June 2009) for all employees with five or more years of service. The escalation applied is consistent with actuarial assessment and is affected in the main by the fall in the Commonwealth Government 10 year bond yield which is used as the discount rate.

The Health Service's liability for the closed superannuation pool schemes (State Authorities Superannuation Scheme and State Superannuation Scheme) is assumed by the Crown Entity. The Health Service accounts for the liability as having been extinguished resulting in the amount assumed being shown as part of the non-monetary revenue item described as "Acceptance by the Crown Entity of Employee Benefits". Any liability attached to Superannuation Guarantee Charge cover is reported in Note 24, "Payables".

The superannuation expense for the financial year is determined by using the formulae specified by the NSW Department of Health. The expense for certain superannuation schemes (ie Basic Benefit and First State Super) is calculated as a percentage of the employees' salary. For other superannuation schemes (ie State Superannuation Scheme and State Authorities Superannuation Scheme), the expense is calculated as a multiple of the employees' superannuation contributions.

### iii) Other Provisions

Other provisions exist when: the Health Service has a present legal or constructive obligation as a result of a past event; it is probable that an outflow of resources will be required to settle the obligation; and a reliable estimate can be made of the amount of the obligation.

### b) Insurance

The Health Service's insurance activities are conducted through the NSW Treasury Managed Fund Scheme of self insurance for Government Agencies. The expense (premium) is determined by the Fund Manager based on past claim experience.

### c) Finance Costs

Finance costs are recognised as expenses in the period in which they are incurred, in accordance with the Department's mandate to not-for-profit general government sector agencies.

### d) Income Recognition

Income is measured at the fair value of the consideration or contribution received or receivable. Additional comments regarding the accounting policies for the recognition of revenue are discussed below.

Sale of Goods

Revenue from the sale of goods is recognised as revenue when the agency transfers the significant risks and rewards of ownership of the assets.

Rendering of Services

Revenue from the rendering of services is generally recognised as revenue when the service is provided.

Patient Fees

Patient Fees are derived from chargeable inpatients and non-inpatients on the basis of rates specified by the NSW Department of Health from time to time.

### Investment Revenue

Interest revenue is recognised using the effective interest method as set out in AASB139, Financial Instruments: Recognition and Measurement. Rental revenue is recognised in accordance with AASB117 Leases on a straight line basis over the lease term. Dividend revenue is recognised in accordance with AASB118 Revenue when the Health Service's right to receive payment is established.

### Debt Forgiveness

Debts are accounted for as extinguished when and only when settlement occurs through repayment or replacement by another liability.

### Use of Hospital Facilities

Specialist doctors with rights of private practice are subject to an infrastructure charge for the use of hospital facilities at rates determined by the NSW Department of Health. Charges consist of two components:

- a monthly charge raised by the Health Service based on a percentage of receipts generated
- the residue of the Private Practice Trust Fund at the end of each financial year, such sum being credited for Health Service use in the advancement of the Health Service or individuals within it

### Use of Outside Facilities

The Health Service uses a number of facilities owned and maintained by the local authorities in the area to deliver community health services for which no charges are raised by the authorities. The cost method of accounting is used for the initial recording of all such services. Cost is determined as the fair value of the services given and is then recognised as revenue with a matching expense.

### Grants and Contributions

Grants and Contributions are generally recognised as revenues when the Health Service obtains control over the assets comprising the contributions. Control over contributions is normally obtained upon the receipt of cash.

### NSW Department of Health Allocations

Payments are made by the NSW Department of Health on the basis of the allocation for the Health Service as adjusted for approved supplementations mostly for salary agreements, patient flows between Health Services and approved enhancement projects. This allocation is included in the Statement of Comprehensive Income before arriving at the "Result for the Year" on the basis that the allocation is earned in return for the health services provided on behalf of the Department. Allocations are normally recognised upon the receipt of Cash.

General operating expenses/revenues of Lourdes Hospital have only been included in the Statement of Comprehensive Income prepared to the extent of the cash payments made to the Health Organisations concerned. The Health Service is not deemed to own or control the various assets/liabilities of the aforementioned Health Organisations and such amounts have been excluded from the Statement of Financial Position. Any exceptions are specifically listed in the notes that follow

### e) Accounting for the Goods & Services Tax (GST)

Income, expenses and assets are recognised net of the amount of GST, except that:

- \* the amount of GST incurred by the Health Service as a purchaser that is not recoverable from the Australian Taxation Office is recognised as part of the cost of acquisition of an asset or as part of an item of expense and
- \* receivables and payables are stated with the amount of GST included.

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

### f) Inter Area and Interstate Patient Flows

Inter Area Patient Flows

Health Services recognise patient flows for patients they have treated that live outside the Service's regional area. The flows recognised are for acute inpatients (other than Mental Health Services), emergency and rehabilitation and extended care.

Patient flows have been calculated using benchmarks for the cost of services for each of the categories identified and deducting estimated revenue, based on the payment category of the patient. The flow information is based on activity for the last completed calendar year. The NSW Department of Health accepts that category identification for various surgical and medical procedures is impacted by the complexities of the coding process and the interpretation of the coding staff when coding a patient's medical records. The Department reviews the flow information extracted from Health Service records and once it has accepted it, requires each Health Service and the Children's Hospital at Westmead to bring to account the value of patient flows in accordance with the Department's assessment.

The adjustments have no effect on equity values as the movement in Net Cost of Services is matched by a corresponding adjustment to the value of the NSW Department of Health Recurrent Allocation.

Inter State Patient Flows

Health Services recognise the outflow of acute inpatients that are treated by other States and Territories within Australia who normally reside in the Service's residential area. The Health Services also recognise the value of inflows for acute inpatient treatment provided to residents from other States and territories. The expense and revenue values reported within the financial statements have been based on 2008/09 activity data using standard cost weighted separation values to reflect estimated costs in 2009/10 for acute weighted inpatient separations. Where treatment is obtained outside the home health service, the State/Territory providing the service is reimbursed by the benefiting Area.

The reporting adopted for both inter area and interstate patient flows aims to provide a greater accuracy of the cost of service provision to the Area's resident population and disclose the extent to which service is provided to non-residents.

The composition of patient flow expense/revenue is disclosed in Notes 5 and 10.

### g) Acquisition of Assets

The cost method of accounting is used for the initial recording of all acquisitions of assets controlled by the Health Service. Cost is the amount of cash or cash equivalents paid or the fair value of the other consideration given to acquire the asset at the time of its acquisition or construction or, where applicable, the amount attributed to that asset when initially recognised in accordance with the specific requirements of other Australian Accounting Standards.

Assets acquired at no cost, or for nominal consideration, are initially recognised as assets and revenues at their fair value at the date of acquisition (See also assets transferred as a result of an equity transfer Note (w)).

Fair value is the amount for which an asset could be exchanged between knowledgeable, willing parties in an arm's length transaction.

Where payment for an asset is deferred beyond normal credit terms, its cost is the cash price equivalent, ie the deferred payment amount is effectively discounted at an asset-specific rate.

Land and Buildings which are owned by the Health Administration Corporation or the State and administered by the Health Service are deemed to be controlled by the Health Service and are reflected as such in the financial statements.

### h) Capitalisation Thresholds

Individual items of property, plant & equipment are capitalised where their cost is \$10,000 or above.

### i) Depreciation of Property, Plant and Equipment

Depreciation is provided for on a straight-line basis for all depreciable assets so as to write off the depreciable amount of each asset as it is consumed over its useful life to the Health Service. Land is not a depreciable asset. All material separately identifiable components of assets are depreciated over their shorter useful lives.

Details of depreciation rates initially applied for major asset categories are as follows:

Buildings	2.5%
Electro Medical Equipment	
- Costing less than \$200,000	10.0%
- Costing more than or equal to \$200,000	12.5%
Computer Equipment	20.0%
Infrastructure Systems	2.5%
Motor Vehicle Sedans	12.5%
Motor Vehicles, Trucks & Vans	20.0%
Office Equipment	10.0%
Plant and Machinery	10.0%
Linen	25.0%
Furniture, Fittings and Furnishings	5.0%

"Infrastructure Systems" means assets that comprise public facilities and which provide essential services and enhance the productive capacity of the economy including roads, bridges, water infrastructure and distribution works, sewerage treatment plants, seawalls and water reticulation systems.

Depreciation rates are subsequently varied where changes occur in the assessment of the remaining useful life of the assets reported.

### j) Revaluation of Non-Current Assets

Physical non-current assets are valued in accordance with the NSW Department of Health's "Valuation of Physical Non-Current Assets at Fair Value" policy. This policy adopts fair value in accordance with AASB116, *Property, Plant and Equipment*.

Property, plant and equipment is measured on an existing use basis, where there are no feasible alternative uses in the existing natural, legal, financial and socio-political environment. However, in the limited circumstances where there are feasible alternative uses, assets are valued at their highest and best use

The Health Service revalues its Land and Buildings and Infrastructure at minimum every three years by independent valuation. The last revaluation for assets assumed by the Health Service as at 30 June 2009 was completed on 30 June 2009 and was based on an independent assessment.

Non-specialised assets with short useful lives are measured at depreciated historical cost, as a surrogate for fair value.

When revaluing non-current assets by reference to current prices for assets newer than those being revalued (adjusted to reflect the present condition of the assets), the gross amount and the related accumulated depreciation are separately restated.

For other assets, any balances of accumulated depreciation existing at the revaluation date in respect of those assets are credited to the asset accounts to which they relate. The net asset accounts are then increased or decreased by the revaluation increments or decrements.

Revaluation increments are credited directly to the asset revaluation reserve, except that, to the extent that an increment reverses a revaluation decrement in respect of that class of asset previously recognised as an expense in the Result for the Year, the increment is recognised immediately as revenue in the Result for the Year.

Revaluation decrements are recognised immediately as expenses in the Result for the Year, except that, to the extent that a credit balance exists in the asset revaluation reserve in respect of the same class of assets, they are debited directly to the asset revaluation reserve.

As a not-for-profit entity, revaluation increments and decrements are offset against one another within a class of non-current assets, but not otherwise.

Where an asset that has previously been revalued is disposed of, any balance remaining in the asset revaluation reserve in respect of that asset is transferred to accumulated funds.

### k) Impairment of Property, Plant and Equipment

As a not-for-profit entity with no cash generating units, the Health Service is effectively exempt from AASB 136 *Impairment of Assets* and impairment testing. This is because AASB136 modifies the recoverable amount test to the higher of fair value less costs to sell and depreciated replacement cost. This means that, for an asset already measured at fair value, impairment can only arise if selling costs are regarded as material. Selling costs are regarded as immaterial.

### I) Restoration Costs

The estimated cost of dismantling and removing an asset and restoring the site is included in the cost of an asset, to the extent it is recognised as a liability.

### m) Non-Current Assets (or disposal groups) Held for Sale

The Health Service has certain non-current assets (or disposal groups) classified as held for sale, where their carrying amount will be recovered principally through a sale transaction, not through continuing use. Non-current assets (or disposal groups) held for sale are recognised at the lower of carrying amount and fair value less costs to sell. These assets are not depreciated while they are classified as held for sale.

### n) Maintenance

Day-to-day servicing costs or maintenance are charged as expenses as incurred, except where they relate to the replacement of a part or component of an asset, in which case the costs are capitalised and depreciated.

### o) Leased Assets

A distinction is made between finance leases which effectively transfer from the lessor to the lessee substantially all the risks and benefits incidental to ownership of the leased assets, and operating leases under which the lessor effectively retains all such risks and benefits.

Where a non-current asset is acquired by means of a finance lease, the asset is recognised at its fair value at the commencement of the lease term. The corresponding liability is established at the same amount. Lease payments are allocated between the principal component and the interest expense.

Operating lease payments are charged to the Statement of Comprehensive Income in the periods in which they are incurred.

### p) Inventories

Inventories are stated at cost, adjusted when applicable for any loss of service potential. A loss of service potential is identified and measured based on the existence of a current replacement cost that is lower than the carrying amount.

Obsolete items are disposed of in accordance with instructions issued by the NSW Department of Health

### q) Loans and Receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. These financial assets are recognised initially at fair value, usually based on the transaction cost or face value. Subsequent measurement is at amortised cost using the effective interest method, less an allowance for any impairment of receivables. Any changes are recognised in the Result for the Year when impaired, derecognised or through the amortisation process.

Short-term receivables with no stated interest rate are measured at the original invoice amount where the effect of discounting is immaterial.

### r) Investments

Investments are initially recognised at fair value plus, in the case of investments not at fair value through profit or loss, transaction costs. The Greater Western Area Health Service determines the classification of its financial assets after initial recognition and, when allowed and appropriate, reevaluates this at each financial year end.

- \* Fair value through profit or loss The Greater Western Area Health Service subsequently measures investments classified as "held for trading" or designated upon initial recognition "at fair value through profit or loss" at fair value. Financial assets are classified as "held for trading" if they are acquired for the purpose of selling in the near term. Derivatives are also classified as held for trading. Gains or losses on these assets are recognised in the Result for the Year.
- \* Held-to-maturity investments Non-derivative financial assets with fixed or determinable payments and fixed maturity that the Greater Western Area Health Service has the positive intention and ability to hold to maturity are classified as "held-to-maturity". These investments are measured at amortised cost using the effective interest method. Changes are recognised in the Result for the Year when impaired, derecognised or through the amortisation process.

Purchases or sales of investments under contract that require delivery of the asset within the timeframe established by convention or regulation are recognised on the trade date; i.e. the date the Health Service commits to purchase or sell the asset.

The fair value of investments that are traded at fair value in an active market is determined by reference to quoted current bid prices at the close of business on the Statement of Financial Position date.

### s) Impairment of financial assets

All financial assets, except those measured at fair value through profit and loss, are subject to an annual review for impairment. An allowance for impairment is established when there is objective evidence that the entity will not be able to collect all amounts due.

For financial assets carried at amortised cost, the amount of the allowance is the difference between the asset's carrying amount and the present value of estimated future cash flows, discounted at the effective interest rate. The amount of the impairment loss is recognised in the Result for the Year.

When an available for sale financial asset is impaired, the amount of the cumulative loss is removed from equity and recognised in the Result for the Year, based on the difference between the acquisition cost (net of any principal repayment and amortisation) and current fair value, less any impairment loss previously recognised in the Result for the Year.

Any reversals of impairment losses are reversed through the Result for the Year, where there is objective evidence, except reversals of impairment losses on an investment in an equity instrument classified as "available for sale" must be made through the reserve. Reversals of impairment losses of financial assets carried at amortised cost cannot result in a carrying amount that exceeds what the carrying amount would have been had there not been an impairment loss.

### t) De-recognition of financial assets and financial liabilities

A financial asset is derecognised when the contractual rights to the cash flows from the financial assets expire; or if the Health Service transfers the financial asset:

- \* where substantially all the risks and rewards have been transferred; or
- \* where the Health Service has not transferred substantially all the risks and rewards, if the entity has not retained control.

Where the Health Service has neither transferred nor retained substantially all the risks and rewards or transferred control, the asset is recognised to the extent of the Health Service's continuing involvement in the asset

A financial liability is derecognised when the obligation specified in the contract is discharged or cancelled or expires.

### u) Payables

These amounts represent liabilities for goods and services provided to the Health Service and other amounts. Payables are recognised initially at fair value, usually based on the transaction cost or face value. Subsequent measurement is at amortised cost using the effective interest method. Short-term payables with no stated interest rate are measured at the original invoice amount where the effect of discounting is immaterial.

Payables are recognised for amounts to be paid in the future for goods and services received, whether or not billed to the Health Service.

### v) Borrowings

Loans are not held for trading or designated at fair value through profit or loss and are recognised at amortised cost using the effective interest rate method. Gains or losses are recognised in the Result for the Year on derecognition.

The finance lease liability is determined in accordance with AASB 117, Leases.

### w) Equity Transfers

The transfer of net assets between agencies as a result of an administrative restructure, transfers of programs/functions and parts thereof between NSW public sector agencies is designated or required by Accounting Standards to be treated as contributions by owners and is recognised as an adjustment to "Accumulated Funds". This treatment is consistent with AASB1004, Contributions and Australian Interpretation 1038 Contributions by Owners Made to Wholly-Owned Public Sector

Transfers arising from an administrative restructure involving not-for-profit entities and for-profit government departments are recognised at the amount at which the asset was recognised by the transferor immediately prior to the restructure. Subject to below, in most instances this will approximate fair value.

All other equity transfers are recognised at fair value, except for intangibles. Where an intangible has been recognised at (amortised) cost by the transferor because there is no active market, the agency recognises the asset at the transferor's carrying amount. Where the transferor is prohibited from recognising internally generated intangibles, the agency does not recognise that asset.

### x) Equity and Reserves

### (i) Asset Revaluation Reserve

The asset revaluation reserve is used to record increments and decrements on the revaluation of non-current assets. This accords with the Health Service's policy on the revaluation of property, plant and equipment as discussed in Note 2(j).

### (ii) Accumulated Funds

The category "accumulated funds" includes all current and prior period retained funds.

### (iii) Separate Reserves

Separate reserve accounts are recognised in the financial statements only if such accounts are required by specific legislation or Australian Accounting Standards.

### y) Trust Funds

The Health Service receives monies in a trustee capacity for various trusts as set out in Note 29. As the Health Service performs only a custodial role in respect of these monies, and because the monies cannot be used for the achievement of the Health Service's own objectives, they are not brought to account in the financial statements.

### z) Budgeted Amounts

The budgeted amounts are drawn from the budgets agreed with the NSW Health Department at the beginning of the financial reporting period and with any adjustments for the effects of additional supplementation provided.

### aa) Emerging Asset

The Health Service's emerging interest in the Orange and Associated Health Services has been valued in accordance with the Department of Health's policy for *Accounting for Privately Financed Projects*. This policy required the Health Service to initially determine the estimated written down replacement cost by reference to the project's historical cost escalated by a construction index and the system's estimated working life. The estimated written down replacement cost was then allocated on a systematic basis over the concession period of 28 years using the annuity method and the Government Bond rate of 5.97% at commencement of the concession period.

### ab) Service Group Statements Allocation Methodology

Expenses and revenues are assigned to service groups in accordance with statistical data for the twelve months ended 31 December 2009 which is then applied to the current period's financial information. The same methodology is applied to attribute assets and liabilities to each service group.

In respect of assets and liabilities the Department requires that all Health Services take action to identify those components that can be specifically identified and reported by service groups. Remaining values are attributed to service groups in accordance with values advised by the NSW Department of Health, e.g. depreciation/amortisation charges form the basis of apportioning the values for Intangibles and Property, Plant & Equipment.

PARENT			CONSOLIDA	ATION
	2009 \$000		2010 \$000	2009 \$000
	3.	Employee Related		
		Employee related expenses comprise the following:		
0	0	Salaries and Wages	295,156	294,698
0	0	Awards	14,917	16,453
0 0	0	Superannuation - Defined Benefit Plans Superannuation - Defined Contribution Plans	8,013 27,401	8,507 25,609
0	0	Long Service Leave	16,243	10,977
0	0	Annual Leave	32,167	33,092
0	0	Sick Leave and Other Leave	12,956	12,005
0	0	Redundancies	2,413	1,618
0	0	Workers' Compensation Insurance Fringe Benefits Tax	6,201 	6,302 23
0	0		415,527	409,284
		The following additional information is provided:		
0	0	Employee Related Expenses Capitalised - Land and Buildings	1	0
0	0	Employee Related Expenses Capitalised - Plant and Equipment	Ö	378
	4.	Personnel Services		
		Personnel Services comprise the purchase of the following:		
295,156 294	,698	Salaries and Wages	0	0
	,453	Awards	0	0
	3,507	Superannuation - Defined Benefit Plans	0	0
	5,609 ),977	Superannuation - Defined Contribution Plans Long Service Leave	0	0
	3,092	Annual Leave	0	0
	2,005	Sick Leave and Other Leave	0	0
	,618	Redundancies	0	0
6,201 6 60	5,302 23	Workers' Compensation Insurance Fringe Benefits Tax	0	0
415,527 409	,284		0	0
		The following additional information is provided:		
1	0	Personnel Services Expenses Capitalised - Land and Buildings	0	0
0	378	Personnel Services Expenses Capitalised - Plant and Equipment	0	0
	5.	Other Operating Expenses		
	5,222 2,561	Allocations towards Inter Area Patient Outflows, NSW (see (d) below) Blood and Blood Products	85,820 2,532	86,222 2,561
	,763	Domestic Supplies and Services	11,101	9,763
17,243 16	,258	Drug Supplies	17,243	16,258
5,905 5	,466	Food Supplies Fuel, Light and Power	5,905	5,466
7.007			7 007	
	5,334 3.131		7,807 29.833	6,334 23,131
29,833 23	3,131 7,000	General Expenses (see (b) below) Hospital Ambulance Transport Costs	7,807 29,833 17,649	23,131 17,000
29,833 23 17,649 17 5,367 9	3,131 7,000 9,135	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses	29,833 17,649 5,367	23,131 17,000 9,135
29,833 23 17,649 17 5,367 9 1,933 1	3,131 7,000 9,135 ,174	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance	29,833 17,649 5,367 1,933	23,131 17,000 9,135 1,174
29,833 23 17,649 17 5,367 9 1,933 1	3,131 7,000 9,135	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below)	29,833 17,649 5,367	23,131 17,000 9,135
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22 9,636 8	3,131 7,000 9,135 ,174 2,102	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance	29,833 17,649 5,367 1,933 22,809	23,131 17,000 9,135 1,174
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22 9,636 8 5,870 4	3,131 7,000 9,135 ,174 2,102 3,525 4,840	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below) Maintenance (see (c) below) Maintenance Contracts New/Replacement Equipment under \$10,000	29,833 17,649 5,367 1,933 22,809 9,636 5,870	23,131 17,000 9,135 1,174 22,102 8,525 4,840
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22 9,636 8 5,870 4 2,665 1	3,131 7,000 9,135 ,174 2,102 3,525 4,840 ,102	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below) Maintenance (see (c) below) Maintenance Contracts New/Replacement Equipment under \$10,000 Repairs	29,833 17,649 5,367 1,933 22,809 9,636 5,870 2,665	23,131 17,000 9,135 1,174 22,102 8,525 4,840 1,102
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22 9,636 8 5,870 4 2,665 1	3,131 7,000 9,135 ,174 2,102 3,525 4,840	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below) Maintenance (see (c) below) Maintenance Contracts New/Replacement Equipment under \$10,000	29,833 17,649 5,367 1,933 22,809 9,636 5,870	23,131 17,000 9,135 1,174 22,102 8,525 4,840
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22 9,636 8 5,870 4 2,665 1 12 21,024 20 5,842 4	3,131 7,000 9,135 ,174 2,102 3,525 4,840 ,102 0 9,375 4,326	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below) Maintenance (see (c) below) Maintenance Contracts New/Replacement Equipment under \$10,000 Repairs Other Medical and Surgical Supplies Postal and Telephone Costs	29,833 17,649 5,367 1,933 22,809 9,636 5,870 2,665 12 21,024 5,842	23,131 17,000 9,135 1,174 22,102 8,525 4,840 1,102 0 20,375 4,326
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22  9,636 8 5,870 4 2,665 1 12 21,024 20 5,842 4 1,791 1	3,131 7,000 9,135 1,174 2,102 3,525 1,840 1,102 0 0,375 1,326 1,919	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below) Maintenance (see (c) below) Maintenance Contracts New/Replacement Equipment under \$10,000 Repairs Other Medical and Surgical Supplies Postal and Telephone Costs Printing and Stationery	29,833 17,649 5,367 1,933 22,809 9,636 5,870 2,665 12 21,024 5,842 1,791	23,131 17,000 9,135 1,174 22,102 8,525 4,840 1,102 0 20,375 4,326 1,919
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22 9,636 8 5,870 4 2,665 1 12 21,024 20 5,842 4 1,791 1 1,462 1	3,131 7,000 9,135 ,174 2,102 3,525 4,840 ,102 0 9,375 4,326	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below) Maintenance (see (c) below) Maintenance Contracts New/Replacement Equipment under \$10,000 Repairs Other Medical and Surgical Supplies Postal and Telephone Costs	29,833 17,649 5,367 1,933 22,809 9,636 5,870 2,665 12 21,024 5,842 1,791	23,131 17,000 9,135 1,174 22,102 8,525 4,840 1,102 0 20,375 4,326 1,919
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22 9,636 8 5,870 4 2,665 1 12 21,024 20 5,842 4 1,791 1 1,462 1 1,462 1	3,131 7,000 3,135 1,174 2,102 3,525 4,840 1,102 0 0,375 4,326 9,19 1,130	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below) Maintenance (see (c) below) Maintenance Contracts New/Replacement Equipment under \$10,000 Repairs Other Medical and Surgical Supplies Postal and Telephone Costs Printing and Stationery Rates and Charges	29,833 17,649 5,367 1,933 22,809 9,636 5,870 2,665 12 21,024 5,842 1,791	23,131 17,000 9,135 1,174 22,102 8,525 4,840 1,102 0 20,375 4,326 1,919 1,130 2,036
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22  9,636 8 5,870 4 2,665 1 12 21,024 20 5,842 4 1,791 1 1,462 1 2,512 2 22,084 17 5,572 5	3,131 7,000 1,135 1,174 2,102 3,525 8,840 1,102 0 0,375 1,326 1,919 1,130 2,036 2,941 1,726	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below) Maintenance (see (c) below) Maintenance Contracts New/Replacement Equipment under \$10,000 Repairs Other Medical and Surgical Supplies Postal and Telephone Costs Printing and Stationery Rates and Charges Rental Special Service Departments Staff Related Costs	29,833 17,649 5,367 1,933 22,809 9,636 5,870 2,665 12 21,024 5,842 1,791 1,462 2,512 22,084 5,572	23,131 17,000 9,135 1,174 22,102 8,525 4,840 1,102 0 20,375 4,326 1,919 1,130 2,036 17,941 5,726
29,833 23 17,649 17 5,367 9 1,933 1 22,809 22  9,636 8 5,870 4 2,665 1 12 21,024 20 5,842 4 1,791 1 1,462 1 1,462 1 2,512 2 22,084 17 5,572 5 10,103 7	3,131 7,000 1,135 1,174 2,102 3,525 8,840 1,102 0 0,375 1,326 1,919 1,130 2,036 7,941	General Expenses (see (b) below) Hospital Ambulance Transport Costs Information Management Expenses Insurance Interstate Patient Outflows (see (e) below) Maintenance (see (c) below) Maintenance Contracts New/Replacement Equipment under \$10,000 Repairs Other Medical and Surgical Supplies Postal and Telephone Costs Printing and Stationery Rates and Charges Rental Special Service Departments	29,833 17,649 5,367 1,933 22,809 9,636 5,870 2,665 12 21,024 5,842 1,791 1,462 2,512 22,084	23,131 17,000 9,135 1,174 22,102 8,525 4,840 1,102 0

NOI	\$000	4,763	7,346	342 155	717 0	303	83 245	3,973	3,631	2,43 2,677 0	14,467	16,023		33,585 14,195 13,729 7,221 4,691 4,86 2,692 9,623	86,222	2,011 175 1,027 9,183 (38) 9,648 96
CONSOLIDATION	2010 \$000	7,008	10,103	287 229	353 64	620 221	4 4 4 6 7	105 4,346	3,041	3,058 13	18,183 1,246	19,429		34,597 14,002 14,330 5,960 4,497 5,587 9,284	85,820	2,670 (142) 437 8,369 (42) 11,210 307 22,809
		(a) Sundry Operating Expenses comprise: Contract for Patient Services Isolated Patient Travel and Accommodation Assistance Scheme	1	(b) General Expenses include:- Advertising Books, Magazines and Journals	Consultancies - Operating Activities - Capital Works	Courier and Freight Audit of Financial Statements Audit of Financial Statements	Audiol's Retinuteration - Orner Services  Data Recording and Storage  I anal Sanzines	Legar Cornoca Motor Vehicle Operating Lease Expense - Minimum Lease Payments	Other Operating Lease Expense - Minimum Lease Payments Paynidi Services Paynid Services	Gually Assulances Accreditation Security Services Translator Services	(c) Reconciliation Total Maintenance Maintenance Expense - Contracted Labour and Other (Non-Employee Related), included in Note 5 Employee Related/Personnel Services Maintenance Expense included in Notes 3 and 4	Total Maintenance Expenses included in Notes 3, 4 and 5	(d) Details of the allocations applied to Inter Area Patient Out Flows, NSW on an Area basis as accepted by the NSW Department of Health are as follows:-	Sydney South West South East Sydney Illawarra Sydney West Northem Sydney Central Coast Hunter New England North Coast Greater Southern Children's Hospital Westmead	(e) Expenses for Interstate Patient Flows are as follows:-	Australian Capital Territory Northern Territory Queensland South Australia Tasmania Victoria Western Australia
_	\$000	4,763	7,346	342 155	717 0	303	83 83 85	3,973	3,631	2,43 2,677 0	14,467	16,023		33,585 14,195 13,729 7,221 4,691 4,86 2,692 9,623	86,222	2,011 175 1,027 9,648 96 22,102
PARENT	2010	7,008 3,095	10,103	287 229	353 64	620 221	- 9 - 4 - 4 %	105 4,346	3,041 12	3,058 3,058 13	18,183 1,246	19,429		34,597 14,002 14,330 5,960 4,497 663 5,587 2,587	85,820	2,670 (142) 437 8,369 (42) 11,210 307 22,809

PARE	NT		CONSOLIDA	ATION
2010 \$000	2009 \$000	Description on LAssociation	2010 \$000	2009 \$000
	6.	Depreciation and Amortisation		
20,884	19,257	Depreciation - Buildings	20,884	19,257
5,308	5,514	Depreciation - Plant and Equipment	5,308	5,514
677	543	Depreciation - Infrastructure Systems	677	543
26,869	25,314		26,869	25,314
	7.	Grants and Subsidies		
200	196	Central West Women's Health Centre	200	196
2,293	2,730	Housing and Supported Accommodation Initiative (HASI)	2,293	2,730
827	803	Lyndon House	827	803
304	264	National Association For Loss And Grief (NALAG)	304	264
3,475	3,247	Royal Flying Doctor Service (RFDS)	3,475	3,247
200	200	University of NSW Department of Rural Health	200	200
155	149	Weigelli Aboriginal Corporation	155	149
175	171	Yeoval Community Hospital	175	171
2,782	2,657	Other	2,782	2,657
10,411	10,417		10,411	10,417
	8.	Finance Costs		
1,151	151	Interest on Bank Overdrafts and Loans	1,151	151
0	7	Other Interest Charges	0	7
		Other merest onlyings		
1,151	158	Total Finance Costs	1,151	158
	9.	Payments to Affiliated Health Organisations		
9,439	9,065	Recurrent Sourced - Lourdes Hospital	9,439	9,065

CONSOLIDATION

**PARENT** 

2010 \$000	2009 \$000		2010 \$000	2009 \$000
	10.	Sale of Goods and Services		
		(a) Sale of Goods comprise the following:-		
1,204 158	722 183	Sale of Prosthesis Pharmacy Sales	1,204 158	722 183
		(b) Rendering of Services comprise the following:-		
51,216	47,319	Patient Fees [see note 2(d)]	51,216	47,319
573	675	Staff-Meals and Accommodation	573	675
8,813	8,922	Infrastructure Fees - Monthly Facility Charge [see note 2(d)]	8,813	8,922
7,913	7,172	Allocation from Inter Area Patient Inflows, NSW [see note (c) below]	7,913	7,172
23	22	Cafeteria/Kiosk	23	22
2 792	0	Car Parking	2	0
2,783 156	431 134	Clinical Services (excluding Clinical Drug Trials) Commercial Activities	2,783 156	431 134
0	1	Enteral Nutrition Income	0	134
46	48	Fees for Medical Records	46	48
6,691	0	High Cost Drugs*	6,691	0
20	28	Information Retrieval	20	28
389	382	Meals on Wheels	389	382
22	23	PADP Patient Copayments	22	23
2,483	1,901	Patient Inflows from Interstate [see note (d) below]	2,483	1,901
184 69	177 16	Salary Packaging Fee Services Provided to Non NSW Health Organisations	184 69	177 16
1,301	1,473	Other	1,301	1,473
84,046	69,629		84,046	69,629
		* The Commonwealth Highly Specialised Drug program was varied from 1 July 2009. The State now claims on a recovery basis the cost of highly specialised drugs through Medicare (Commonwealth).  In previous years these funds were received within annual Government Allocation from the NSW Department of Health.		
		(c) Details of the Allocations received for Inter Area Patient Flows, NSW on an Area basis as accepted by the NSW Department of Health are as follows:-		
490	464	Sydney South West	490	464
471	452	South East Sydney Illawarra	471	452
2,856	2,381	Sydney West	2,856	2,381
671	656	Northern Sydney Central Coast	671	656
1,547	1,401	Hunter New England	1,547	1,401
275	230	North Coast Greater Southern	275	230
1,603	1,588	Gleater Southern	1,603	1,588
7,913	7,172	<del>-</del>	7,913	7,172
		(d) Revenues from Patient Inflows from Interstate are as follows:-		
92	257	Australian Capital Territory	92	257
58	3	Northern Territory	58	3
943	468	Queensland	943	468
429	318	South Australia	429	318
22	58	Tasmania	22	58
706 233	759 38	Victoria Western Australia	706 233	759 38
		Western Australia	233	
2,483	1,901	-	2,483	1,901
	11.	Investment Revenue		
540	040	Interest	540	040
512 517	619 547	Interest Lease and Rental Income	512 517	619 547
		_		
1,029	1,166	<u>=</u>	1,029	1,166

PARI	ENT	for the real Linded 30 Julie 2010	CONSOLI	DATION
2010 \$000	2009 \$000	12. Grants and Contributions	2010 \$000	2009 \$000
0.040	0.007	Occurred the Occurred to Occur	0.040	0.007
3,316	2,387	Commonwealth Government Grants	3,316	2,387
1,046	733	Industry Contributions/Donations	1,046	733
3,019	2,991	Cancer Institute Grants	3,019	2,991
1,144	1,288	NSW Government Grants	1,144	1,288
8,013	8,507	Personnel Services - Superannuation Defined Benefit Plans	0	0
1,525	713	Other Grants	1,525	713
18,063	16,619		10,050	8,112
		13. Other Revenue		
		Other Revenue comprises the following:-		
0	3	Bad Debts Recovered	0	3
50	67	Commissions	50	67
16	(34)	Conference and Training Fees	16	(34)
0	8	Discounts	0	8
3	48	Sale of Merchandise, Old Wares and Books	3	48
5	23	Sponsorship Income	5	23
3,187	4,173	Treasury Managed Fund Hindsight Adjustment	3,187	4,173
3	8	Unclaimed Deposits	3	8
2,283	2,322	Other	2,283	2,322
		Guici		
5,547	6,618		5,547	6,618
		14. Gain/(Loss) on Disposal		
4,719	8,188	Property, Plant and Equipment	4,719	8,188
(2,225)	7,478	Less Accumulated Depreciation	(2,225)	7,478
(=,===7				
2,494	710	Written Down Value	2,494	710
(2,582)	(638)	Less Proceeds from Disposal	(2,582)	(638)
		Gain/(Loss) on Disposal of		
88	(72)	Property, Plant and Equipment	88	(72)
518	0	Assets Held for Sale	518	0
(463)	0	Less Proceeds from Disposal	(463)	0
		Gain/(Loss) on Disposal of Assets		
(55)		Held for Sale	(55)	0
33	(72)	Total Gain/(Loss) on Disposal	33	(72)
	(72)			(72)
	•	I5. Other Gains/(Losses)		
(479)	(1,438)	Impairment of Receivables	(479)	(1,438)
(479)	(1,438)		(479)	(1,438)

### PARENT AND CONSOLIDATION

### 16. Conditions on Contributions

	Purchase of Assets	Health Promotion, Education and Research	Other	Total
	\$000	\$000	\$000	\$000
Contributions recognised as revenues during the current reporting period for which expenditure in the manner specified had not occurred as at balance date  Contributions recognised in amalgamated balance as at	99	5	2,524	2,628
30 June 2009 which were not expended in the current reporting period	260	3 63	5,419	5,745
Total amount of unexpended contributions as at balance date	362	2 68	7,943	8,373

Comment on restricted assets appears in Note 23

### 17. Service Groups of the Health Service

### Service Group 1.1 - Primary and Community Based Services

### Service Description:

This service group covers the provision of health services to persons attending community health centres or in the home, including health promotion activities, community based women's health, dental, drug and alcohol and HIV/AIDS services. It also covers the provision of grants to non-Government organisations for community health purposes.

### Objective:

This service group contributes to making prevention everybody's business and strengthening primary health and continuing care in the community by working towards a range of intermediate results that include the following:

- improved access to early intervention, assessment, therapy and treatment services for claims in a home or community setting
- reduced rate of avoidable hospital admissions for conditions identified in the State Plan that can be appropriately treated in the community and
- reduced rate of hospitalisation from fall-related injury for people aged 65 years and over.

### Service Group 1.2 - Aboriginal Health Services

### Service Description:

This service group covers the provision of supplementary health services to Aboriginal people, particularly in the areas of health promotion, health education and disease prevention. (Note: This Service Group excludes most services for Aboriginal people provided directly by Area Health Services and other general health services which are used by all members of the community).

### Objective:

This service group contributes to ensuring a fair and sustainable health system by working towards a range of intermediate results that include the following:

- the building of regional partnerships for the provision of health services
- raising the health status of Aboriginal people and
- · promoting a healthy lifestyle.

### Service Group 1.3 - Outpatient Services

### Service Description:

This service group covers the provision of services provided in outpatient clinics including low level emergency care, diagnostic and pharmacy services and radiotherapy treatment.

### Objective:

This service group contributes to creating better experiences for people using health services and ensuring a fair and sustainable health system by working towards a range of intermediate results including improving, maintaining or restoring the health of ambulant patients in a hospital setting through diagnosis, therapy, education and treatment services.

### Service Group 2.1 - Emergency Services

### Service Description:

This service group covers the provision of emergency ambulance services and treatment of patients in designated emergency departments of public hospitals.

### Objective:

This service group contributes to creating better experiences for people using the health system by working towards a range of intermediate results including reduced risk of premature death or disability by providing timely emergency diagnostic treatment and transport services.

### Service Group 2.2 - Overnight Acute Inpatient Services

### Service Description:

This service group covers the provision of health care to patients admitted to public hospitals with the intention that their stay will be overnight, including elective surgery and maternity services.

### Objective:

This service group contributes to creating better experiences for people using the health system by working towards a range of intermediate results that include the following:

• timely treatment of booked surgical patients, resulting in improved clinical outcomes, quality of life and patient satisfaction and

• reduced rate of unplanned and unexpected hospital readmissions.

### Service Group 2.3 - Same Day Acute Inpatient Services

Service Description:

This service group covers the provision of health care to patients who are admitted to public hospitals with the intention that they will be admitted, treated and discharged on the same day.

Objective:

This service group contributes to creating better experiences for people using the health system by working towards a range of intermediate results that include the following:

• timely treatment of booked surgical patients resulting in improved clinical outcomes, quality of life and patient satisfaction and

• reduced rate of unplanned and unexpected hospital readmissions.

### Service Group 3.1 - Mental Health Services

Service Description:

This service group covers the provision of an integrated and comprehensive network of services by Area Health Services and community based organisations for people seriously affected by mental illness and mental health problems. It also includes the development of preventative programs which meet the needs of specific client groups.

Objective:

This service group contributes to strengthening primary health and continuing care in the community by working towards a range of intermediate results that include the following:

• improving the health, wellbeing and social functioning of people with disabling mental disorders and

 reducing the incidence of suicide, mental health problems and mental disorders in the community.

### Service Group 4.1 - Rehabilitation and Extended Care Services

Service Description:

This service group covers the provision of appropriate health care services for persons with long-term physical and psycho-physical disabilities and for the frail-aged. It also includes the coordination of the Department's services for the aged and disabled, with those provided by other agencies and individuals.

Objective:

This service group contributes to strengthening primary health and continuing care in the community and creating better experiences for people using the health system by working towards a range of intermediate results including improving or maintaining the wellbeing and independent functioning of people with disabilities or chronic conditions, the frail and terminally ill.

### Service Group 5.1 - Population Health Services

Service Description:

This service group covers the provision of health services targeted at broad population groups including environmental health protection, food and poisons regulation and monitoring of communicable diseases.

Objective:

This service group contributes to making prevention everybody's business by working towards a range of intermediate results that include the following:

• reduced incidence of preventable disease and disability and

• improved access to opportunities and prerequisites for good health.

### Service Group 6.1 - Teaching and Research

Service Description:

This service group covers the provision of professional training for the needs of the New South Wales health system. It also includes strategic investment in research and development to improve the health and wellbeing of the people of New South Wales.

Objective:

development to improve the health and wellbeing of the people of New South Wales.

This service group contributes to ensuring a fair and sustainable health system by

working towards a range of intermediate results that include the following:

• developing the skills and knowledge of the health workforce to support patient care and population health and

• extending knowledge through scientific enquiry and applied research aimed at improving the health and wellbeing of the people of New South Wales.

NOITA	2009	0004	2,278	8,067	10,345		10,345	10,345
CONSOLIDATION	2010	0000	3,234	7,715	10,949	nciled	10,949	10,949
		. Cash and Cash Equivalents	Cash at Bank and On Hand	Short Term Deposits	"	Cash & cash equivalent assets recognised in the Statement of Financial Position are reconciled at the end of the financial year to the Statement of Cash Flows as follows:	Cash and Cash Equivalents (per Statement of Financial Position)	Closing Cash and Cash Equivalents (per Statement of Cash Flows)
F	2009	3000 18.	2,278	8,067	10,345		10,345	10,345
PARENT	2010	0000	3,234	7,715	10,949		10,949	10,949

Refer to Note 36 for details regarding credit risk, liquidity risk and market risk arising from financial instruments.

PAREN	IT		CONSOLIDA	TION
2010 \$000	2009 \$000		2010 \$000	2009 \$000
	19.	Receivables		
		Current		
5,475	4,171	(a) Sale of Goods and Services	5,475	4,171
3,245	2,639	Goods and Services Tax	3,245	2,639
6,914	5,703	Other Debtors	6,914	5,703
15,634	12,513	Sub Total	15,634	12,513
(1,031)	(862)	Less Allowance for Impairment	(1,031)	(862)
14,603	11,651	Sub Total	14,603	11,651
658	15	Prepayments	658	15
15,261	11,666		15,261	11,666
		(1) 14		
		(b) Movement in the Allowance for Impairment		
000	400	Sale of Goods and Services	000	400
606	132	Balance at 1 July	606	132
(293)	(964)	Amounts written off during the year Increase/(decrease) in Allowance Recognised in	(293)	(964)
394	1,438	Result for the Year	394	1,438
707	606	Balance at 30 June	707	606
		(c) Movement in the Allowance for Impairment		
		Other Debtors		
256	256	Balance at 1 July	256	256
(17)	0	Amounts written off during the year	(17)	0
0.5	0	Increase/(decrease) in Allowance Recognised in	0.5	0
85 324	0 256	Result for the Year Balance at 30 June	85 324	0 256
		balance at 50 June		250
1,031	862		1,031	862
		(d) Sale of Goods & Services Receivables include:		
521	483	Patient Fees - Compensable	521	483
76	57	Patient Fees - Ineligible	76	57
3,720	3,308	Patient Fees - Other	3,720	3,308
4,317	3,848		4,317	3,848
105	0	Non-Current Propayments	10E	0
195 	0	Prepayments	195 	0
195	0		195	0

Details regarding credit risk, liquidity risk and market risk, including financial assets that are either past due or impaired are disclosed in Note 36.

PAREN	Г		CONSOLIDA	TION
2010 \$000	2009 \$000		2010 \$000	2009 \$000
	20.	Inventories		
		Current - Held for Distribution		
1,386	1,435	Drugs	1,386	1,435
800	875	Medical and Surgical Supplies	800	875
101	1,134	Other Including Goods in Transit	101	1,134
2,287	3,444		2,287	3,444

PARE	NT		CONSOLIDA	ATION
2010 \$000	2009 \$000		2010 \$000	2009 \$000
	21.	Property, Plant and Equipment		
		Land and Buildings - Fair Value		
1,045,294	981,284	Gross Carrying Amount Less Accumulated Depreciation	1,045,294	981,284
498,227	479,095	and Impairment	498,227	479,095
547,067	502,189	Net Carrying Amount	547,067	502,189
		Plant and Equipment - Fair Value		
83,840	78,113	Gross Carrying Amount Less Accumulated Depreciation	83,840	78,113
54,546	50,553	and Impairment	54,546	50,553
29,294	27,560	Net Carrying Amount	29,294	27,560
		Infrastructure Systems - Fair Value		
24,758	25,307	Gross Carrying Amount Less Accumulated Depreciation	24,758	25,307
14,311	14,060	and Impairment	14,311	14,060
10,447	11,247	Net Carrying Amount	10,447	11,247
		Total Property, Plant and Equipment		
586,808	540,996	At Net Carrying Amount	586,808	540,996

### PARENT AND CONSOLIDATION

### 21. Property, Plant and Equipment (continued)

### Reconciliations

	Land	Buildings	Work in Progress	Plant and Equipment	Infrastructure Systems	Total
	****	****	Ü		•	****
	\$000	\$000	\$000	\$000	\$000	\$000
2010						
Net Carrying Amount at Start of Year	14,115	425,523	62,551	27,560	11,247	540,996
Additions	0	0	66,546	8,772	19	75,337
Recognition of Assets Held for Sale	(16)	23	0	0	0	7
Disposals	(400)	(391)	0	(1,689)	(14)	(2,494)
Administrative Restructures - Transfers						
In/(Out)	0	0	0	(169)	0	(169)
Depreciation Expense	0	(20,884)	0	(5,308)	(677)	(26,869)
Reclassifications	0	875	(875)	128	(128)	0
Net Carrying Amount at End of Year	13,699	405,146	128,222	29,294	10,447	586,808

	Land	Buildings	Work in Progress	Plant and Equipment	Infrastructure Systems	Total
	****	****	Ü		•	****
	\$000	\$000	\$000	\$000	\$000	\$000
2009						
Net Carrying Amount at Start of Year	14,600	431,439	28,314	26,397	10,176	510,926
Additions	0	0	36,511	6,699	173	43,383
Reclassifications to Intangibles						
Recognition of Assets Held for Sale	(590)	(5,789)	0	0	(77)	(6,456)
Disposals	(207)	(481)	0	(22)	0	(710)
Net Revaluation Increment Less						
Revaluation Decrements Recognised in						
Reserves	312	17,337	0	0	1,518	19,167
Depreciation Expense	0	(19,257)	0	(5,514)	(543)	(25,314)
Reclassifications	0	2,274	(2,274)	0	0	0
Net Carrying Amount at End of Year	14,115	425,523	62,551	27,560	11,247	540,996

<sup>(</sup>i) Land and Buildings include land owned by the Health Administration Corporation and administered by the Health Service [see note 2(g)].

<sup>(</sup>ii) Land and Buildings were valued by Aon Valuation Consultants (Registered Valuers) on 30 June 2009 [see note 2(j)]. Aon Valuation Consultants are not employees of the Health Service.

**PARENT** 

CONSOLIDATION

\$000	7,557	7,635
2010 \$000	7,030	7,108
22. Assets Classified as Held for Sale	<b>Assets Held for Sale</b> Land and Buildings Infrastructure Systems	
2009 \$000 22.	7,557	7,635
2010	7,030	7,108

Assets classified as held for sale include assets indicated by the Department of Health and reflected in the State Budget as being expected to be sold in 2010/11.

## Greater Western Area Health Service Notes to and forming part of the Financial Statements

for the Ye	ar Ended 30 June 2010	CONSOLIE	DATION
2009 \$000 23. Restricted Assets		2010 \$000	\$000
The Health Service's financial assets which are restricted by donor requirements. The assin accordance with the terms or	I statements include the following rexternally imposed conditions, eg. ets are only available for application of the donor restrictions.		
Category	Brief Details of Externally Imposed Conditions including Asset Category affected		
6,622 Specific Purposes		6,468	6,622
1,001 Private Practice Funds		1,905	1,001
7,623		8,373	7,623
		23. Restricted Assets The Health Service's financial st assets which are restricted by endonor requirements. The assets in accordance with the terms of Category Specific Purposes Private Practice Funds	23. Restricted Assets  The Health Service's financial statements include the following assets which are restricted by externally imposed conditions, eg. donor requirements. The assets are only available for application in accordance with the terms of the donor restrictions.  Category  Brief Details of Externally Imposed Conditions including Asset Category affected  Category Externally Imposed Category affected  Category Externally Imposed Category affected  Category Externally Imposed Category affected

PAF	PARENT		CONSOLIDATION	NOIL
	24. F	24. Payables		
2010	2009		2010	2009
\$000	\$000		000\$	\$000
		Current		
0	0	Accrued Salaries, Wages and On-Costs	7,238	11,552
0	0	Taxation and Payroll Deductions	6,137	5,650
13,375	17,202	Accrued Liability - Purchase of Personnel Services	0	0
37,289	50,641	Creditors	37,289	50,641
		Other Creditors		
595		- Capital Works	595	1,649
5,112	2,901	- Intra Health Liability	5,112	2,901
56,371	72,393		56,371	72,393

Details regarding credit risk, liquidity risk and market risk, including a maturity analysis of the above payables are disclosed in Note 36.

## 25. Borrowings

5,318	5,318	16,455	16,455
5,017	5,017	13,627	13,627
<b>Current</b> Other Loans and Deposits		Non-Current Other Loans and Deposits Other	
5,318	5,318	16,455	16,455
5,017	5,017	13,627	13,627

Other loans still to be extinguished represent monies to be repaid to the NSW Teasury, Health Support Services, Sydney West Area Health Service and the Department of Health. Final repayment is scheduled for 30 June 2017.

Details regarding credit risk, liquidity risk and market risk, including a maturity analysis of the above payables are disclosed in Note 36.

PARENT			CONSOLIDATION	NOL
2010 \$000	\$000		2010	\$000
	26.	Provisions		
		Current Employee Benefits and Related On-Costs		
0	0	Annual Leave - Short Term Benefit	28,035	28,059
0	0	Annual Leave - Long Term Benefit	20,647	19,835
0	0	Long Service Leave - Short Term Benefit	8,052	6,468
0	0	Long Service Leave - Long Term Benefit	65,100	58,761
0	0	Sick Leave	597	265
122,431	113,720	Provision for Personnel Services Liability	0	0
122,431	113,720	Total Current Provisions	122,431	113,720
		Non-Current Employee Benefits and Related On-Costs		
0	0	Long Service Leave - Conditional	5,834	5,653
5,834	5,653	Provision for Personnel Services Liability	0	0
5,834	5,653	Total Non-Current Provisions	5,834	5,653
		Angregate Employee Benefits and Related On-Costs		
122.431	113.720	Provisions - Current	122.431	113.720
5,834	5,653	Provisions - Non-Current	5,834	5,653
0	0	Accrued Salaries, Wages and On-Costs (Note 24)	13,375	17,202
13,375	17,202	Accrued Liability - Purchase of Personnel Services (Note 24)	0	0
141,640	136,575		141,640	136,575

# Greater Western Area Health Service Notes to and forming part of the Financial Statements

NOIL	2009		891	891
CONSOLIDATION	2010		1,188	1,188
for the Year Ended 30 June 2010		27. Other Liabilities	<b>Current</b> Income in Advance	
	\$000	27.	891	891
PARENT	2010 \$000		1,188	1,188

In June 2010 the following amounts were received as income in advance:

	\$000
Commonwealth grants 2010/11	530
Dept of Health and Ageing grant 2010/11	148
MHS Positive Connections	268

This funding is expected to be recognised in the 2010/11 year.

PARENT	Ł		CONSOLIDATION	DATION
\$000	2009 28. \$000	<ul> <li>Commitments for Expenditure</li> <li>(a) Capital Commitments         Aggregate capital expenditure for the acquisition of land and buildings, plant and equipment, infrastructure and intangible assets, contracted for at balance date and not provided for:     </li> </ul>	\$000	\$000
36,905 70,074 482,148	8,569 64,110 492,784	Not later than one year Later than one year and not later than five years Later than five years	36,905 70,074 482,148	8,569 64,110 492,784
589,127	565,463	Total Capital Expenditure Commitments (Including GST)	589,127	565,463
		Of the commitments reported at 30 June 2010 it is expected that \$0.828 million will be met from locally generated moneys.		
		(b) Other Expenditure Commitments Aggregate other expenditure contracted for Facility Management Services and other non-clinical services (under the Public private Partnership [PPP] Agreement) contracted for at balance date and not provided for:		
25,008 117,946 1,009,921	21,464 105,019 943,687	Not later than one year Later than one year and not later than five years Later than five years	25,008 117,946 1,009,921	21,464 105,019 943,687
1,152,875	1,070,170	Total Other Expenditure Commitments (Including GST)	1,152,875	1,070,170
		(c) Operating Lease Commitments Commitments in relation to non-cancellable operating leases are payable as follows:		
5,460 5,557 306	6,471 6,165 87	Not later than one year Later than one year and not later than five years Later than five years	5,460 5,557 306	6,471 6,165 87
11,323	12,723	Total Operating Lease Commitments (Including GST)	11,323	12,723

The operating lease commitments above are for motor vehicles, information technology, equipment including personal computers, medical equipment and other equipment.

# 28. Commitments for Expenditure (Continued)

The total of Commitments for expenditure above (in (a), (b) and (c)), i.e. \$1.753 billion as at the 30 June 2010 includes input tax credits of \$159 million that are expected to be recoverable from the Australian Taxation Office.

Total capital and other expenditure commitments (in (a) and (b)) above include the Public Private Partnership (PPP) arrangement as

and the new Bathurst Hospital under a Project Deed. Provision of facilities maintenance commenced in April 2007, followed by other non In November 2007, a private sector company, Pinnacle Healthcare (OAHS) Pty Limited, was engaged to finance, design and construct refurbish existing buildings and provide facilities management and delivery of ancillary non-clinical services for these hospital facilities the new Orange Hospital and new health facilities including Orange Tertiary Mental Health and other expansion works. Pinnacle will clinical support services in December 2008. The new development will be completed in stages and full service commissioning is anticipated in 2011/12.

clinical services. Following the change procedures in the Project Deed and subsequently government approval, the Project Deed was In 2008/09 NSW Health requested a contract variation to expend the Orange Hospital and health facilities to accommodate additional amended through the Deed of Amendment No. 1 in June 2010. The amendments include an increase in the PPP operating service payments.

arrangements. The basis for the accounting treatment is that services will be delivered by GWAHS for the duration of the term until When construction is completed, the Greater Western Area Health Service (GWAHS) will operate and recognise the new Orange Hospital, Orange Tertiary Mental Health and refurbished facilities as an asset of \$162.1 M under the original PPP financing December 2035. In addition, GWAHS will recognise the liability to Pinnacle Healthcare, payable over the period to 2035 for the construction of the new Orange Hospital, Orange Tertiary Mental Health and refurbished facilities. As the value of this payable can not yet be determined, a contingent liability has been recognised in Note 30.

The construction costs of the extended works due to the State variations are progressively paid by GWAHS during construction. GWAHS will recognise the extended works as its assets at the completion of the construction. The expenditure commitments include Goods and Services Tax. Related input tax credits of \$159 million (2009: \$150 million) are expected to be recoverable from the Australian Taxation Office.

# PARENT AND CONSOLIDATION

# 29. Trust Funds

The Health Service holds trust fund moneys of \$1.687 million which are used for the safe keeping of patients' monies, deposits on hired items of equipment and Private Practice Trusts. These monies are excluded from the financial statements as the Health Service cannot use them for the achievement of its objectives. The following is a summary of the transactions in the trust account:

	Patient Trust	ust	Refundable Deposits	able its	Private Practice Trust Funds	actice inds	Total	_
	2010 \$000	\$000	2010 \$000	\$000	2010 \$000	\$000	2010 \$000	\$000
Cash Balance at the beginning of the financial reporting period	322	315	805	522	447	730	1,574	1,567
Receipts	332	353	696	1,008	5,717	966'9	7,018	7,757
Expenditure	(363)	(346)	(1,093)	(725)	(5,449)	(6,679)	(6,905)	(7,750)
Cash Balance at the end of the financial reporting period	291	322	681	805	715	447	1,687	1,574

# PARENT AND CONSOLIDATED

# 30. Contingent Liabilities

# a) Claims on Managed Fund

Since 1 July 1989, the Health Service has been a member of the NSW Treasury Managed Fund. The Fund will pay to or on behalf of the Health Service all sums which it shall become legally liable to pay by way of compensation or legal liability if sued except for employment related, discrimination and harassment claims that do not have statewide implications. The costs relating to such exceptions are to be absorbed by the Health Service. As such, since 1 July 1989, apart from the exceptions noted above no contingent liabilities exist in respect of liability claims against the Health Service. A Solvency Fund (now called Pre-Managed Fund Reserve was established to deal with the insurance matters incurred before 1 July 1989 that were above the limit of insurance held or for matters that were incurred prior to 1 July 1989 that would have become verdicts against the State. That Solvency Fund will likewise respond to all claims against the Health Service.

# b) Workers Compensation Hindsight Adjustment

Treasury Managed Fund normally calculates hindsight premiums each year. However, in regard to workers compensation the final hindsight adjustment for the 2003/04 fund year and an interim adjustment for the 2005/06 fund year were not calculated until 2009/10. As a result, the 2004/05 final and 2006/07 interim hindsight calculations will be paid in 2010/11.

It is not possible for the Health Service to reliably quantify the benefit to be received.

# c) Affiliated Health Organisations

Based on the definition of control in Australian Accounting Standard AASB127, Consolidated and Separate Financial Statements, Affiliated Health Organisations listed in Schedule 3 of the Health Services Act, 1997 are only recognised in the Health Service's consolidated financial statements to the extent of cash payments made.

However, it is accepted that a contingent liability exists which may be realised in the event of cessation of health service activities by any Affiliated Health Organisation. In this event the determination of assets and liabilities would be dependent on any contractual relationship which may exist or be formulated between the administering bodies of the organisation, the Health Service and the NSW

# d) Orange and Associated Health Services PPP

The liability to pay Pinnacle Healthcare for the development of the Orange Hospital and health facilities is based on a financing arrangement involving CPI indexed annuity bond. An interest rate adjustment will be made in accordance with CPI index over the project term. The estimated value of the contingent liability is unable to be fully determined due to the uncertainty of future events.

7d	PARENT		CONSOLIDATION	DATION
2010	\$000		2010	\$000
	31	31. Reconciliation of Net Cash Flows from Operating Activities to Net Cost of Services		
77,983	28,789	Net Cash Flows from Operating Activities	77,983	28,789
(26,869)	(25,314)	Depreciation	(26,869)	(25,314)
(479)	(1,438)	Provision for Doubtful Debts	(479)	(1,438)
0	0	Acceptance by the Crown Entity of Employee Superannuation Benefits	(8,013)	(8,507)
(6,059)	9,449	Decrease/(Increase) in Provisions	(6,059)	9,449
1,827	(2,069)	Increase / (Decrease) in Prepayments and Other Assets	1,827	(2,069)
16,022	3,979	(Increase)/ Decrease in Creditors	16,022	3,979
33	(72)	Net Gain/ (Loss) on Sale of Property, Plant and Equipment	33	(72)
(702,043)	(672,547)	NSW Health Department Recurrent Allocations	(702,043)	(672,547)
(69,276)	(38,088)	NSW Health Department Capital Allocations	(69,276)	(38,088)
		Asset Sale Proceeds Transferred to the NSW		
10	0	Department of Health	10	0
(711,851)	(697,311)	Net Cost of Services	(719,864)	(705,818)

# 32. 2009/10 Voluntary Services

It is considered impracticable to quantify the monetary value of voluntary service provided to the Health Service. Services provided include:

. Cha . Pink . Con	. Chaplaincies and Pastoral Care - Patient & Family Support	Pink Ladies/Hospital Auxiliaries - Patient Services, Fund Raising	Patient Support Groups - Practical Support to Patients and Relative	. Community Organisations - Counselling, Health Education, Transport,	Home Help & Patient Activities
	. Chaplaincie	. Pink Ladies,	. Patient Sup	. Community	

### PARENT AND CONSOLIDATED

# 33. Unclaimed Moneys

Unclaimed salaries and wages are paid to the credit of the NSW Treasury in accordance with the provisions of the *Industrial Relations Act*, 1996.

All money and personal effects of patients which are left in the custody of Health Services by any patient who is discharged or dies in the hospital and which are not claimed by the person lawfully entitled thereto within a period of twelve months are recognised as the property of health services.

All such money and the proceeds of the realisation of any personal effects are lodged to the credit of the Samaritan Fund which is used specifically for the benefit of necessitous patients or necessitous outgoing patients.

# 34. Budget Review - Parent and Consolidated

### **Net Cost of Services**

The actual Net Cost of Services was higher than budget by \$5.245 million. This overspend to budget is largely a result of increases in Salaries and Wages and Goods and Services expenditure, partially offset by improvements in relation to Patient Fees revenue performance and receipt of additional Grants income.

### Result for the Year

The result for the year was a surplus of \$59.458M. This reflects the requirement (per Australian Accounting Standards) to reflect capital allocations in the Statement of Comprehensive Income whereas the expenditure of such money is predominantly recognised in the Statement of Financial Position.

The variation of \$4.631M from budget principally relates to the Net Cost of Services variation referenced above.

# **Assets and Liabilities**

The movements that occurred in the Statement of Financial Position were reflective of the Health Service's strategies to reduce the terms of payment from those previously observed. The principal movements were the decrease in cash of \$30.7M, an increase in receivables of \$4.7M, an increase in Property, Plant & Equipment (net of depreciation) of \$6.6M and decreases in Accounts Payable and Borrowings of \$17.1M and \$4.1M respectively.

# **Cash Flows**

Net cash flows from operating activities were lower than budget, primarily due to the application of additional cash subsidy to a reduction in payables.

Net cash flows from borrowings decreased as a result of scheduled repayments to the NSW Department of Health and the Sustainable Energy Development Authority.

Closing cash and cash equivalents was significantly lower than budget, as additional subsidy receipts were applied to the reduction in payables.

# 34. Budget Review - Parent and Consolidated (continued)

Movements in the level of the NSW Department of Health Recurrent Allocation that have occurred since the time of the initial allocation on 16 June 2009 are as follows:

Initial Allocation, 16 June 2009   Special Projects:   Special Projects:   Shortjinal Health		'\$000
Special Projects:         Aboriginal Health         58           AIDS         170           Chronic Disease Management         925           Dental         416           Drug & Alcohol         1,574           Garling         2,446           Housing For Health         142           Keep Them Safe         2,062           Mental Health         3,807           NGO         254           Subacute Care         723           Other:           Interstate Area Patient Flows         7,907           Interstate Patient Flows         7,907           Interstate Patient Flows         5,927           Financial Assistance         29,197           10 Hr Night Shifts         153           Additional Bathurst Staff         2,000           Adult Home Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Leadership Program         163           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Tr	Initial Allocation, 16 June 2009	549 605
Aboriginal Health AIDS AIDS Chronic Disease Management 925 Dental Drug & Alcohol Garling 416 Housing For Health Keep Them Safe Housing For Health Keep Them Safe Mental Health NGO Subacute Care 723  Other: Interstate Area Patient Flows Interstate Area Patient Flows Interstate Patient Flows 15,927 Interstate Patient Flows 15,927 10 Hr Night Shifts 153 Additional Bathurst Staff Additional Bathurst Staff Award Increases Chronic Care 110 Clinical Leadership Program 163 Clinical Nurse / Midwife Specialists 1,439 Compacks Funding Country Careers Program 110 Enhancement of Effort GP Procedural Training Program 161 Institute of Rural Clinical Services & Teaching JMO Training & Support Maternity Enhancement 162 Institute of Rural Clinical Services & Teaching JMO Training & Support Maternity Enhancement 169 Concology Enhancement 161 Research R	·	040,000
AIDS Chronic Disease Management Dental Dental A16 Drug & Alcohol 1,574 Garling 2,446 Housing For Health Keep Them Safe Mental Health NGO Subacute Care  Other: Interstate Area Patient Flows Interstate Patient Flows Interstate Patient Flows Interstate Patient Flows 192 Financial Assistance 29,197 10 Hr Night Shifts 3,304 Adult Home Ventilation Adurt Home Ventilation Award Increases Chronic Care Clinical Leadership Program Clinical Nurse / Midwife Specialists Compacks Funding 125 Country Careers Program 110 Enhancement of Effort GP Procedural Training Program Health Promotion Enhancement Institute of Rural Clinical Services & Teaching JMO Training & Support Maternity Enhancement 196 Nurse Strategy Obstetric Anaesthetic Grants Oncology Enhancement 161 Planned Surgery Public Private Partnership Radiation Oncology Service Renal Services Enhancement 1,178 Revenue Reduction 3,300 Surgical Fellowships in Rural Hospitals Treasury Managed Fund		58
Dental         416           Drug & Alcohol         1,574           Garling         2,446           Housing For Health         142           Keep Them Safe         2,062           Mental Health         3,807           NGO         254           Subacute Care         723           Other:           Interstate Patient Flows         77,907           Interstate Patient Flows         5,927           Financial Assistance         29,197           10 Hr Night Shifts         153           Additional Bathurst Staff         2,000           Adult Home Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Leadership Program         163           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249		170
Dental         416           Drug & Alcohol         1,574           Garling         2,446           Housing For Health         142           Keep Them Safe         2,062           Mental Health         3,807           NGO         254           Subacute Care         723           Other:           Interstate Patient Flows         77,907           Interstate Patient Flows         5,927           Financial Assistance         29,197           10 Hr Night Shifts         153           Additional Bathurst Staff         2,000           Adult Horne Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Leadership Program         163           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249 <td< td=""><td>Chronic Disease Management</td><td>925</td></td<>	Chronic Disease Management	925
Garling         2,446           Housing For Health         142           Keep Them Safe         2,062           Mental Health         3,807           NGO         254           Subacute Care         723           Other:           Interstate Area Patient Flows         77,907           Interstate Patient Flows         5,927           Financial Assistance         29,197           10 Hr Night Shifts         153           Additional Bathurst Staff         2,000           Adult Home Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Leadership Program         163           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249           Maternity Enhancement         196           Nurse Strategy         1,692           Obstetric Anaesthetic Grants         449	•	416
Housing For Health	Drug & Alcohol	1,574
Keep Them Safe         2,062           Mental Health         3,807           NGO         254           Subacute Care         723           Other:           Interstate Area Patient Flows         77,907           Interstate Patient Flows         5,927           Financial Assistance         29,197           10 Hr Night Shifts         153           Addithonal Bathurst Staff         2,000           Adult Home Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Leadership Program         163           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249           Maternity Enhancement         196           Nurse Strategy         1,692           Obstetric Anaesthetic Grants         449           Oncology Enhancement <td< td=""><td>Garling</td><td>2,446</td></td<>	Garling	2,446
Mental Health         3,807           NGO         254           Subacute Care         723           Other:           Interstate Area Patient Flows         77,907           Interstate Patient Flows         5,927           Financial Assistance         29,197           10 Hr Night Shifts         153           Additional Bathurst Staff         2,000           Adult Home Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Leadership Program         163           Clinical Leadership Program         163           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249           Maternity Enhancement         162           Institute of Rural Clinical Services & Teaching         196           Nurse Strategy         0,52           Obstetric Anaesthetic Grants         449           Oncology Enhancmen	Housing For Health	142
NGO         254           Subacute Care         723           Other:  Interstate Area Patient Flows	Keep Them Safe	2,062
Other:         Interstate Area Patient Flows         77,907           Interstate Patient Flows         5,927           Financial Assistance         29,197           10 Hr Night Shifts         153           Additional Bathurst Staff         2,000           Adult Home Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Leadership Program         163           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249           Maternity Enhancement         196           Nurse Strategy         1,69           Obstetric Anaesthetic Grants         449           Oncology Enhancment         161           Planned Surgery         2,000           Public Private Partnership         5,830           Radiation Oncology Service         102           Renal Services Enhancement	Mental Health	3,807
Other:         Interstate Area Patient Flows         77,907           Interstate Patient Flows         5,927           Financial Assistance         29,197           10 Hr Night Shifts         153           Additional Bathurst Staff         2,000           Adult Home Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249           Maternity Enhancement         196           Nurse Strategy         1,692           Obstetric Anaesthetic Grants         449           Oncology Enhancement         161           Planned Surgery         2,000           Public Private Partnership         5,830           Radiation Oncology Service         102           Renal Services Enhancement         1,178           Revenue Reduction	NGO	254
Interstate Area Patient Flows         77,907           Interstate Patient Flows         5,927           Financial Assistance         29,197           10 Hr Night Shifts         153           Additional Bathurst Staff         2,000           Adult Home Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Leadership Program         163           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249           Maternity Enhancement         196           Nurse Strategy         1,692           Obstetric Anaesthetic Grants         449           Oncology Enhancement         161           Planned Surgery         2,000           Public Private Partnership         5,830           Radiation Oncology Service         102           Renal Services Enhancement         1,17	Subacute Care	723
Interstate Patient Flows   5,927	Other:	
Financial Assistance         29,197           10 Hr Night Shifts         153           Additional Bathurst Staff         2,000           Adult Home Ventilation         641           Award Increases         226           Chronic Care         140           Clinical Leadership Program         163           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249           Maternity Enhancement         196           Nurse Strategy         1,692           Obstetric Anaesthetic Grants         449           Oncology Enhancment         161           Planned Surgery         2,000           Public Private Partnership         5,830           Radiation Oncology Service         102           Renal Services Enhancement         1,178           Revenue Reduction         3,300           Surgical Fellowships in Rural Hospitals         250	Interstate Area Patient Flows	77,907
10 Hr Night Shifts       153         Additional Bathurst Staff       2,000         Adult Home Ventilation       641         Award Increases       226         Chronic Care       140         Clinical Leadership Program       163         Clinical Nurse / Midwife Specialists       1,439         Compacks Funding       125         Country Careers Program       110         Enhancement of Effort       410         GP Procedural Training Program       361         Health Promotion Enhancement       162         Institute of Rural Clinical Services & Teaching       195         JMO Training & Support       249         Maternity Enhancement       196         Nurse Strategy       1,692         Obstetric Anaesthetic Grants       449         Oncology Enhancment       161         Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222	Interstate Patient Flows	5,927
Adult Home Ventilation       641         Award Increases       226         Chronic Care       140         Clinical Leadership Program       163         Clinical Nurse / Midwife Specialists       1,439         Compacks Funding       125         Country Careers Program       110         Enhancement of Effort       410         GP Procedural Training Program       361         Health Promotion Enhancement       162         Institute of Rural Clinical Services & Teaching       195         JMO Training & Support       249         Maternity Enhancement       196         Nurse Strategy       1,692         Obstetric Anaesthetic Grants       449         Oncology Enhancement       161         Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093	Financial Assistance	29,197
Adult Home Ventilation       641         Award Increases       226         Chronic Care       140         Clinical Leadership Program       163         Clinical Nurse / Midwife Specialists       1,439         Compacks Funding       125         Country Careers Program       110         Enhancement of Effort       410         GP Procedural Training Program       361         Health Promotion Enhancement       162         Institute of Rural Clinical Services & Teaching       195         JMO Training & Support       249         Maternity Enhancement       196         Nurse Strategy       1,692         Obstetric Anaesthetic Grants       449         Oncology Enhancment       161         Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093	10 Hr Night Shifts	
Award Increases       226         Chronic Care       140         Clinical Leadership Program       163         Clinical Nurse / Midwife Specialists       1,439         Compacks Funding       125         Country Careers Program       110         Enhancement of Effort       410         GP Procedural Training Program       361         Health Promotion Enhancement       162         Institute of Rural Clinical Services & Teaching       195         JMO Training & Support       249         Maternity Enhancement       196         Nurse Strategy       1,692         Obstetric Anaesthetic Grants       449         Oncology Enhancment       161         Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       888         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)		2,000
Chronic Care         140           Clinical Leadership Program         163           Clinical Nurse / Midwife Specialists         1,439           Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249           Maternity Enhancement         196           Nurse Strategy         1,692           Obstetric Anaesthetic Grants         449           Oncology Enhancment         161           Planned Surgery         2,000           Public Private Partnership         5,830           Radiation Oncology Service         102           Renal Services Enhancement         1,178           Revenue Reduction         3,300           Surgical Fellowships in Rural Hospitals         250           Telehealth Equipment         350           Treasury Managed Fund         1,222           VMO Funding Increase         858           Voluntary Redundancy         2,093           Transitional Aged Care Program		_
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Clinical Nurse / Midwife Specialists       1,439         Compacks Funding       125         Country Careers Program       110         Enhancement of Effort       410         GP Procedural Training Program       361         Health Promotion Enhancement       162         Institute of Rural Clinical Services & Teaching       195         JMO Training & Support       249         Maternity Enhancement       196         Nurse Strategy       1,692         Obstetric Anaesthetic Grants       449         Oncology Enhancment       161         Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)         Miscellaneous       1,417		_
Compacks Funding         125           Country Careers Program         110           Enhancement of Effort         410           GP Procedural Training Program         361           Health Promotion Enhancement         162           Institute of Rural Clinical Services & Teaching         195           JMO Training & Support         249           Maternity Enhancement         196           Nurse Strategy         1,692           Obstetric Anaesthetic Grants         449           Oncology Enhancment         161           Planned Surgery         2,000           Public Private Partnership         5,830           Radiation Oncology Service         102           Renal Services Enhancement         1,178           Revenue Reduction         3,300           Surgical Fellowships in Rural Hospitals         250           Telehealth Equipment         350           Treasury Managed Fund         1,222           VMO Funding Increase         858           Voluntary Redundancy         2,093           Transitional Aged Care Program         (642)           Miscellaneous         1,417	·	
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GP Procedural Training Program Health Promotion Enhancement Institute of Rural Clinical Services & Teaching JMO Training & Support Maternity Enhancement 196 Nurse Strategy 1,692 Obstetric Anaesthetic Grants 449 Oncology Enhancment 161 Planned Surgery 2,000 Public Private Partnership 5,830 Radiation Oncology Service 102 Renal Services Enhancement 1,178 Revenue Reduction 3,300 Surgical Fellowships in Rural Hospitals Telehealth Equipment 1,222 VMO Funding Increase Voluntary Redundancy Transitional Aged Care Program Miscellaneous 1,417		_
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Institute of Rural Clinical Services & Teaching  JMO Training & Support  Maternity Enhancement  Nurse Strategy  Obstetric Anaesthetic Grants  Oncology Enhancment  Planned Surgery  Public Private Partnership  Radiation Oncology Service  Renal Services Enhancement  Revenue Reduction  Surgical Fellowships in Rural Hospitals  Telehealth Equipment  Treasury Managed Fund  VMO Funding Increase  Voluntary Redundancy  Transitional Aged Care Program  Miscellaneous  195  196  249  Miscellaneous  1,692  0,000  1,692  1,692  1,178  1,178  1,178  1,178  1,178  1,222  1,093  1,417	g g	
JMO Training & Support       249         Maternity Enhancement       196         Nurse Strategy       1,692         Obstetric Anaesthetic Grants       449         Oncology Enhancment       161         Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)         Miscellaneous       1,417		_
Maternity Enhancement       196         Nurse Strategy       1,692         Obstetric Anaesthetic Grants       449         Oncology Enhancment       161         Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)         Miscellaneous       1,417	G Committee of the comm	
Nurse Strategy       1,692         Obstetric Anaesthetic Grants       449         Oncology Enhancment       161         Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)         Miscellaneous       1,417		_
Obstetric Anaesthetic Grants Oncology Enhancment Planned Surgery 2,000 Public Private Partnership 5,830 Radiation Oncology Service Renal Services Enhancement 1,178 Revenue Reduction 3,300 Surgical Fellowships in Rural Hospitals Telehealth Equipment 350 Treasury Managed Fund 1,222 VMO Funding Increase Voluntary Redundancy Transitional Aged Care Program Miscellaneous 1,417	•	
Oncology Enhancment       161         Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)         Miscellaneous       1,417	•	•
Planned Surgery       2,000         Public Private Partnership       5,830         Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)         Miscellaneous       1,417		
Public Private Partnership5,830Radiation Oncology Service102Renal Services Enhancement1,178Revenue Reduction3,300Surgical Fellowships in Rural Hospitals250Telehealth Equipment350Treasury Managed Fund1,222VMO Funding Increase858Voluntary Redundancy2,093Transitional Aged Care Program(642)Miscellaneous1,417	==	
Radiation Oncology Service       102         Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)         Miscellaneous       1,417		,
Renal Services Enhancement       1,178         Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)         Miscellaneous       1,417	•	
Revenue Reduction       3,300         Surgical Fellowships in Rural Hospitals       250         Telehealth Equipment       350         Treasury Managed Fund       1,222         VMO Funding Increase       858         Voluntary Redundancy       2,093         Transitional Aged Care Program       (642)         Miscellaneous       1,417		
Surgical Fellowships in Rural Hospitals Telehealth Equipment Treasury Managed Fund 1,222 VMO Funding Increase Voluntary Redundancy Transitional Aged Care Program Miscellaneous 250 1,222 Miscellaneous 1,222 Miscellaneous 1,222 1,		
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Transitional Aged Care Program (642) Miscellaneous 1,417	· · · · · · · · · · · · · · · · · · ·	
Miscellaneous 1,417		•
Balance per Statement of Comprehensive Income 702,043		
	Balance per Statement of Comprehensive Income	702,043

# 35. Increase/(Decrease) in Net Assets from Equity Transfers

Net assets of \$0.833 million transferred to Health Support Services with effect from 1 September 2009, from which time Health Support Services assumed responsibility for the provision of procurement services on behalf of the Greater Western Area Health Service.

Net assets of \$0.141 million transferred to Western Pathology Cluster with effect from 1 March 2010, from which time Western Pathology Cluster assumed responsibility for the provision of pathology services to Greater Western Area Health Service previously provided by Orana Pathology Service (a business unit of GWAHS)

Assets and liabilities transferred are as follows:

	\$000
Assets	
Inventory (Health Support Services)	(833)
Inventory, Plant & Equipment (Western Pathology Cluster)	(141)
Increase/(Decrease) in Net Assets From Equity Transfers	(974)

### 36. Financial Instruments

The Health Service's principal financial instruments are outlined below. These financial instruments arise directly from the Health Service's operations or are required to finance its operations. The Health Service does not enter into or trade financial instruments, including derivative financial instruments, for speculative purposes.

The Health Service's main risks arising from financial instruments are outlined below, together with the Health Service's objectives, policies and processes for measuring and managing risk. Further quantitative and qualitative disclosures are included throughout these financial statements.

The Chief Executive has overall responsibility for the establishment and oversight of risk management and reviews and agrees policies for managing each of these risks. Risk management policies are established to identify and analyse the risk faced by the Health Service, to set risk limits and controls and monitor risks. Compliance with policies is reviewed by the Audit Committee/internal auditors on a continuous basis.

# (a) Financial Instrument Categories

### PARENT AND CONSOLIDATION

Financial Assets Class:	Category	Carrying Amount	Carrying Amount
		2010 \$000	2009 \$000
Cash and Cash Equivalents (note 18)	N/A	10,949	10,345
Receivables (note 19) <sup>1</sup>	Loans and receivables	11,358	9,874
Total Financial Access	(at amortised cost)	22 207	20.240
Total Financial Assets		22,307	20,219
Financial Liabilities			
Borrowings (note 25)	Financial liabilities	18,644	21,773
Payables (note 24) <sup>2</sup>	measured at	56,371	72,393
	amortised cost		
Total Financial Liabilities		75,015	94,166

## Notes

- 1 Excludes statutory receivables and prepayments (ie not within scope of AASB 7)
- 2 Excludes statutory payables and unearned revenue (ie not within scope of AASB 7)

# (b) Credit Risk

Credit risk arises when there is the possibility of the Health Service's debtors defaulting on their contractual obligations, resulting in a financial loss to the Health Service. The maximum exposure to credit risk is generally represented by the carrying amount of the financial assets (net of any allowance for impairment).

Credit risk arises from financial assets of the Health Service, including cash, receivables and authority deposits. No collateral is held by the Health Service. The Health Service has not granted any financial guarantees.

# 36. Financial Instruments (continued)

Credit risk associated with the Health Service's financial assets, other than receivables, is managed through the selection of counterparties and establishment of minimum credit rating standards.

### Cash

Cash comprises cash on hand and bank balances deposited in accordance with Public Authorities (Financial Arrangements) Act approvals. Interest is earned on daily bank balances at rates of approximately 7% in 2009/10 compared to 7% in the previous year.

# Receivables - trade debtors

All trade debtors are recognised as amounts receivable at balance date. Collectability of trade debtors is reviewed on an ongoing basis. Procedures as established in the NSW Department of Health Accounting Manual and Fee Procedures Manual are followed to recover outstanding amounts, including letters of demand. Debts which are known to be uncollectable are written off. An allowance for impairment is raised when there is objective evidence that the Health Service will not be able to collect all amounts due. This evidence includes past experience and current and expected changes in economic conditions and debtor credit ratings. No interest is earned on trade debtors.

The Health Service is not materially exposed to concentrations of credit risk to a single trade debtor or group of debtors. Of the total trade debtors balance at year-end, \$8.429M (\$2009: \$6.317M) related to debtors that were not past due and not considered impaired and debtors of \$2.929M (2009: \$2.695M) were past due but not considered impaired. Together these represent 91.7% (2009: 91.3%) of total trade debtors. The Receivables include Patient Fees Compensables which are frequently not settled within 6 months of the date of the service provision due to the length of time it takes to settle legal claims. Most of the Health Service's debtors are Health Insurance Companies or Compensation Insurers settling claims in respect of inpatient treatments. There are no debtors which are currently not past due or impaired whose terms have been renegotiated.

Financial assets that are past due or impaired could be either 'sales of goods and services' or 'other debtors' in the 'receivables' category of the Statement of Financial Position. Patient Fees Ineligibles may represent the majority of financial assets that are past due or impaired.

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2010	Total 1,2	Past due but not impaired <sup>1,2</sup>	Considered impaired <sup>1,2</sup>
<3 months overdue	2,387	2,387	0
3 months - 6 months overdue	653	542	111
> 6 months overdue	920	0	920
2009			
<3 months overdue	2,078	2,078	0
3 months - 6 months overdue	1,031	617	414
> 6 months overdue	448	0	448

### Notes

2 The ageing analysis excludes statutory receivables, as these are not within the scope of AASB 7 and excludes receivables that are not past due and not impaired. Therefore, the "total" will not reconcile to the receivables total recognised in the statement of financial position.

<sup>1</sup> Each column in the table reports "gross receivables".

# 36. Financial Instruments (continued)

# (c) Liquidity Risk

Liquidity risk is the risk that the Health Service will be unable to meet its payment obligations when they fall due. The Health Service continuously manages risk through monitoring future cash flows and maturities planning to ensure adequate holding of high quality liquid assets. The objective is to maintain a balance between continuity of funding and flexibility through effective management of cash, investments and liquid assets and liabilities.

The Health Service has negotiated no loan outside of arrangements with the NSW Department of Health or the Sustainable Energy Development Authority.

During the current and prior years, there were no defaults or breaches on any loans payable. No assets have been pledged as collateral. The Health Service's exposure to liquidity risk is considered significant. However, the risk is minimised as the NSW Department of Health has indicated its ongoing financial support for the Greater Western Area Health Service (refer Note 2).

The liabilities are recognised for amounts due to be paid in the future for goods or services received, whether or not invoiced. Amounts owing to suppliers (which are unsecured) are settled in accordance with the policy set by the NSW Department of Health. If trade terms are not specified, payment is made no later than the end of the month following the month in which an invoice or a statement is received.

In those instances where settlement cannot be effected in accordance with the above, eg due to short term liquidity constraints, terms of payment are negotiated with creditors.

The table below summarises the maturity profile of the Health Service's financial liabilities together with the interest rate exposure.

# 36. Financial Instruments (continued)

Maturity Analysis and interest rate exposure of financial liabilities

	lr Weighted	Interest Rate Exposure	Exposure			Maturity Dates	Dates	
	Average Effective Int. Rate	Nominal Amount	Fixed Interest Rate	Variable Interest Rate	Non - Interest Bearing	۰ ۲ ۲	1-5 Yr <sup>2</sup>	> 5Yr
	%	\$000	\$000	\$000	\$000	\$000	\$000	\$000
2010								
Payables:								
Accrued Salaries		7,238	0	0	7,238	7,238	0	0
Wages, On-Costs and Payroll Deductions		6,137	0	0	6,137	6,137	0	0
Creditors		42,996	0	0	42,996	42,996	0	0
Borrowings:								
Other Loans and Deposits	7	18,644	18,644	0	0	5,017	13,457	170
		75,015	18,644	0	56,371	61,388	13,457	170
2009								
Payables:								
Accrued Salaries		11,552	0	0	11,552	11,552	0	0
Wages, On-Costs and Payroll Deductions		5,650	0	0	5,650	5,650	0	0
Creditors		55,191	0	0	55,191	55,191	0	0
Borrowings:								
Other Loans and Deposits		21,773	45	0	21,728	5,006	16,767	0
		94,166	45	0	94,121	77,399	16,767	0

# Notes:

Health Service can be required to pay. The tables include both interest and principal cash flows and therefore will not reconcile to the Statement Of Financial Position. 1 The amounts disclosed are the contractual undiscounted cash flows of each class of financial liabilities based on the earliest date on which the

<sup>2.</sup> Of the \$13,457,000 disclosed in the 2010 'other loans and deposits' time band 1-5 yrs, the Health Service has no intent to effect payments in advance of maturity dates on or prior to 30 September 2010.

# 36. Financial Instruments (continued)

## d) Market Risk

Market risk is the risk that the fair value of future cash flows of a financial instrument will fluctuate because of changes in market prices. The Health Service's exposures to market risk are primarily through interest rate risk on the Health Service's borrowings. The Health Service has no exposure to foreign currency risk and does not enter into commodity contracts.

The effect on profit and equity due to a reasonably possible change in risk variable is outlined in the information below, for interest rate risk and other price risk. A reasonably possible change in risk variable has been determined after taking into account the economic environment in which the Health Service operates and the time frame for the assessment (i.e. until the end of the next annual reporting period). The sensitivity analysis is based on risk exposures in existence at the Statement of Financial Position date. The analysis is performed on the same basis for 2009. The analysis assumes that all other variables remain constant.

### Interest rate risk

Exposure to interest rate risk arises primarily through the Health Service's interest bearing liabilities.

However, Health Services are not permitted to borrow external to the NSW Department of Health (Sustainable Energy Development Authority loans which are negotiated through Treasury excepted). Both SEDA and NSW Department of Health loans are set at fixed rates and therefore are generally not affected by fluctuations in market rates. The Health Service does not account for any fixed rate financial instruments at fair value through profit or loss or as available-for-sale. Therefore, for these financial instruments, a change of interest rates would not affect profit or loss or equity. A reasonably possible change of +/-1% is used consistent with current trends in interest rates. The basis will be reviewed annually and amended where there is a structural change in the level of interest rate volatility. The Health Service's exposure to interest rate risk is set out below.

	Carrying	-19	%	+	1%
	Amount \$000	Profit \$000	Equity \$000	Profit \$000	Equity \$000
2010 Financial Assets					
Cash and Cash Equivalents	10,949	(109)	(109)	109	109
Financial Liabilities					
Borrowings	(18,644)	0	0	0	0
2009 Financial Assets					
Cash and Cash Equivalents	10,345	(103)	(103)	103	103
Financial Liabilities					
Borrowings	(21,773)	0	0	0	0

END OF AUDITED FINANCIAL STATEMENTS

# 37. Post Balance Date Events

On 20 April 2010 the State of NSW and the Commonwealth agreed on national health reforms to establish Local Health Networks in NSW and to introduce national standards for timely access to emergency care and elective surgery.

Under the Agreement, NSW will remain responsible for system-wide planning, performance and purchasing of public hospital services and supporting the transition process for the Commonwealth to assume full funding and policy responsibility for general practice, primary health care and the national aged care system.

This agreement will result in structural and corporate changes including the establishment of these Local Health Networks in 2010-11. A professional Governing Council will be constituted for each Local Health Network. It is expected that these reforms will significantly change this reporting entity.

END OF AUDITED FINANCIAL STATEMENTS